

Internal Medicine training in Canada

Did you know? The RCPSC's Specialty Committee in Internal Medicine (SCIM) has proposed changes to the structure of IM training. Under the proposal, the core training pathway for internists would be reconfigured into a three-year Foundations of Internal Medicine (FIM) program and a new two-year subspecialty called General Internal Medicine (GIM). [Click here](#) to view the CAIR Bulletin on the FIM/GIM proposal.

CAIR is committed to ensuring that proposed enhancements to the education and training environment have a positive impact on the practice environment of residents, the quality of medical education and quality of health care in Canada.

We need resident feedback. Please submit your individual perspectives on the proposal, which will inform CAIR's response to the upcoming revised proposal from the SCIM, to cair@cair.ca. Watch for future updates on this important issue at <http://www.cair.ca/en/news/releases/>.

New RCPSC Categories of Discipline Recognition

Currently, the RCPSC has two categories of medical specialty recognition: primary specialties and subspecialties. A draft proposal has been developed regarding the creation of three additional new categories of recognition – Diplomas, Foundations and SIGMAs (Special Interest Groups of Medical Activity). The RCPSC has proposed that the new categories would support the growth and advancement of specialty education and support the need to ensure that

our health human resource requirements are met. Additional information on the proposal can be found [here](#).

As part of the RCPSC's invitation to CAIR to participate in an extensive consultation process, consisting of web conferences and an electronic survey, **we are requesting your feedback on the new categories proposal**. Please access the CAIR survey link [here](#) to complete a brief survey. If you wish to submit comments by e-mail or have any questions, please contact us at cair@cair.ca.

All responses will be presented in the form of aggregate and/or anonymous data and will be used to inform our response to the RCPSC's proposal.

Looking for details about the **new Pediatrics match process**? Click [here](#) for more information.

CIHR Primary Healthcare Summit

Dr. Natasha De Sousa, PGY3 in FM/ Emergency Medicine at Dalhousie, recently attended this conference on CAIR's behalf. Here are excerpts from her report:

- The conference highlighted some of the problems with Primary Healthcare provision in Canada, as well as some of the innovations directed at improving Primary Healthcare.
- It was argued by several contributors throughout the conference that Canada still fails to provide a patient-centered, comprehensive, coordinated primary healthcare system despite evidence in other countries of its cost-

effectiveness, improved patient outcomes and improved patient and provider satisfaction. Indeed, there are pockets of innovation; however, by no means is this the norm across the country.

- Primary healthcare is an evolving and changing concept, and this should be emphasized early and repeatedly throughout residency training.
- Family medicine is different than other medical specialties, in that it is inherently patient-centered and patient-oriented.
- Primary care is a medical home for our patients and when delivered in a person-focused, comprehensive and coordinated way, advantages include: more timely care; appropriately delivered preventative care; earlier recognition of health problems; fewer unnecessary diagnostic tests and prescriptions; lower costs to the system; reduced ER and hospital use for problems related to chronic disease; and, importantly, reduced health disparities associated with socioeconomic status.
- Much of the skill of primary care providers is in deciding when not to employ guidelines or apply so-called evidence-based medicine.
- Primary care requires collaboration between a variety of healthcare providers, patients and their families.
- There is good evidence that health outcomes improve with provision of team-based care; however, there is poor knowledge transfer and outcome data regarding teams across the country. We can expect collaborative care to become the principal means by which primary care is delivered in our career lifetimes."

Resident Awareness Day Across Canada

February 9, 2010 was the 9th annual National Resident Awareness Day, acknowledging and celebrating residents and the multi-faceted role they play in Canada's health care system. Click [here](#) to read the Resident Awareness Day greeting from CAIR's president, Dr. Noor Amin.

CAIR's Resident Awareness Day poster was mounted on hospital and training site walls across the country and was featured as an advertisement in the *Hill Times'* January 18th Policy Briefing on Health, where it was seen by politicians and bureaucrats at all levels across Canada.

RAD activities across the country:

Alberta

PARA sponsored its first annual charity drive, the PARAdime: Give Your Backpack Back Event. For more information please see the [PARA website](#). PARA also sent a letter to the editor to Alberta's news papers to reflect on who resident physicians are and what they do and delivered the memo from the CAIR president to Alberta's resident physicians.

British Columbia

Dr. May Tee, President of PAR-BC, and Dr. Joanna Oda visited the new UBC facility in Kelowna on February 8th and 9th to celebrate Resident Awareness Day. Click [here](#) to read the news clips. More Resident Awareness Day celebrations will be held during the week of March 22-27, 2010. Visit [PAR-BC's website](#) for more information.

Manitoba

Residents received PARIM (Professional Association of Residents and Interns of Manitoba) pens and a free lunch was provided in the PARIM Lounge. In the evening PARIM hosted an event at Le Garage for residents and collected donations for relief efforts in Haiti.

Right: Detail of an ice sculpture at Ottawa's Winterlude festival. CAIR Board Members had the opportunity to visit the exhibit during their February meeting.

The Maritimes

PARI-MP sent a letter to the Program Directors at Dalhousie, letting them know about RAD and to encourage them to host something for their own residents. RAD posters were distributed to each of the training sites and all Programs. PARI-MP also hosted a number of events including resident appreciation lunches at each of the training sites, and family social events. Congratulations to Dr. Ashley Cox, PGY4 Urology, who received the PARI-MP Resident Well Being Award!

Newfoundland & Labrador

PAIRN emailed program directors and health care boards to advise them of RAD and to encourage them to show their appreciation in some manner. The PGME Office invited all trainees to drop by for cake and refreshments. Some disciplines arranged special functions for their residents, including cake, breakfast, etc.

Ontario

PAIRO events were organized locally and revolved around educating the public as to what residents do. Many sites handed out cake and coffee along with brochures, pens, pedometers, stickers, etc. Many wore buttons that said, "What's a Resident? Ask Me!" The "outreach" event received media coverage in both the [Windsor Star](#) and the [London Free Press](#). (click on each for more)

Saskatchewan

Members of PAIRS appeared on CBC's *Morning Edition*. Listen to a podcast of the broadcast [here](#). Click on "Feb 9, 2010—Spend a day with Residents". MPs Brad Trost and Kelly Block experienced life as Residents for a Day at the Royal University Hospital. A detailed account can be found [here](#).



Awards & Grants

The CFPC and the RCPSC are encouraging resident applications for 2010. Click [here](#) for more information on the CFPC awards. Click on each RCPSC award or grant for more information:

- **KJR Wightman Award for Scholarship in Ethics**
- **Resident Leadership Award**
- **Medical Education Research Grant**
- **Royal College/Associated Medical Services CanMEDS Research and Development Grant**

Call for volunteers

In September 2008, the Canadian Patient Safety Institute launched its *Safety Competencies* with six domains that describe the knowledge, skills and attitudes required of health care professionals in the delivery of safe care. The framework is based on the CanMEDS framework from The Royal College of Physicians and Surgeons of Canada. The Safety Competencies can be found in both official languages at www.safetycomp.ca.

The CPSI is looking for a resident to join their Implementation Advisory Committee to bring the "learner" voice to the committee's deliberations as it prepares for the second edition of the Safety Competencies. If you are interested, please contact the CAIR Office at cair@cair.ca.

National Physician Survey Coming Spring 2010

The next National Physician Survey will begin later this year. The survey is conducted every three years by the CFPC, the CMA and the RCPSC. It reaches out to all physicians, residents, and medical students for their input on Canadian health human resource issues and is a valuable information resource for us all. When you receive the survey, please take a few minutes to respond. **This is the first time all residents in Canada will be surveyed and your input is important.**