

# **FMEC Project Regional Consultation with Undergraduate Deans**

**Eastern Medical Schools (Memorial University of NF and Dalhousie University)**

**November 21, 2008 in Halifax**

Submitted by David Gass and Sue Maskill of the FMEC Steering Committee

- The group identified a number of issues that they felt might not be captured in the emerging themes in the project. They were:
  - The development of the professional but it was explained that this is captured throughout many of the areas highlighted.
  - The need to develop, support and value scholarship in medical education and the evidence-based approach.
  - On-going development of physicians, for they are educated with a broader vision than for example a tradesperson.
  - The role of the physician in the health care system is more than seeing and caring for patients; it needs to include what they do and don't take on and their role in transformation of the health care system
  - Appropriate funding of the medical education enterprise must be in place.
  - The physician's well-being needs to be recognized and supported.
  - The tension of a physician needing to be both a provider and a leader
  - Diversity is a factor in many areas – admissions, supports needed for some students, patient care.
  
- Other issues raised:
  - The report must be clear as to how communities' needs are assessed.
  - There is a need to better educate, and collaborate with, the community as well as government to effect the outcomes desired.
  - The role of governments needs to be articulated for their support and funding greatly affects the outcomes.
  - The final report should outline what supports and strategies are needed to effect the changes proposed. Also funding will be needed if major changes are proposed.
  - Schools will have to reflect on what the change process will look like in their faculty.
  - It was suggested to revise the wording for two of the emerging priorities to read "the role of the physician and interprofessional, team-based care" and "changing culture of medicine and the hidden curriculum".
  - In order to tie the principles for change outlined with the 10 emerging priorities, community and the learner should be at the centre of the process.
  - The curriculum should also address the negative things that students experience/learn.
  - It is important to not lose the focus on primary care and the holistic approach in spite of demands for more specialized care.
  
- Priority areas going forward:

- There was consensus that all the areas emerging are important to move forward on for they interconnect and must be addressed to drive the culture change needed.
- It was recommended that the final report include a contextual piece that mentions that family physicians need to be paid more for family medicine to be more attractive to students so enough are trained to meet the needs of Canadians.