VISION

National and international leadership in health education, research and care to meet the needs of all Canadians.

MISSION

To ensure the health of Canadians by promoting and supporting excellence in health education and research.

CONTENTS

01 Message from the Chair 06 Resource Groups 11 Secretariat of CACMS and CACME
02 Strategic Objectives 07 Office of the President and Chief Executive Officer 12 AFMC Team
03 Message from the President and Chief Executive Officer 08 Government Relations and External Affairs
04 Board of Directors 09 Education and Special Projects
06 Standing Committees 10 Data and Analysis
Message from the Chair

A favourite elderly patient of mine used to come in to my office and ask me: What do you know for sure today doctor? I found this question both interesting and challenging, then and now. As our faculties of medicine endeavor to educate the physicians that will be needed to meet the future healthcare needs of Canadians what do we know for sure??

We know there are many unmet needs today in terms of an overall shortage of healthcare workers, including physicians. We know that the geographic distribution and mix of specialties is not currently optimized to meet the needs of today’s population. People living in rural communities and Aboriginal people face particular difficulty accessing health services. We know that Canada’s elderly, poor and those with physical or mental challenges have particularly important unmet needs. Technological advancements have provided major breakthroughs in some aspects of healthcare. In others, the potential for minor improvements for extension of life come with enormous personnel and financial costs that the system is struggling with. These challenges will increase as we look to the future. As the population ages, we know it will become even more difficult to provide the resources needed to ensure an appropriate level of access to equitable healthcare.

Our faculties of medicine have had difficulty catching up to the demands of today. It is vitally important that we shift our mind set from one of catching up to one of creating the future. We need to develop teachers, staff, curricula and facilities today for medical students that start in 2014, graduate in 2018 and who will begin their lifetime of practice as family doctors in 2020 or as specialists in 2022 or beyond. Even though it will be impossible to accurately predict the mix distribution of physicians needed for the future needs of Canada in an evolving future healthcare system, what we plan and do today matters.

The Future of Medical Education of Canada (FMEC) projects are part of this vital process. Both these projects are funded by Health Canada and will impact Canadians’ health and healthcare. FMEC MD education, released January 2010, provides a collective vision of Canadian faculties of medicine being developed and integrated into planning and curriculum development from coast to coast, and is being embedded in our ongoing accreditation process. FMEC Postgraduate (PG) education is gaining speed rapidly. This partnership project of AFMC, Royal College of Physicians and Surgeons of Canada, College of Family Physicians of Canada and Fédération des médecins résidents du Québec is currently exploring the evidence, best practices and expert opinions from Canada and around the world. This will be synthesized into a report that will span the full range of PG medical education. It is expected to energize innovations in PG medical education including the vital transitions from medical school MD education into PG education and then on to practice and lifelong learning.

Both the size and healthcare impact of health research in Canada has grown significantly over the past ten years. AFMC is working with partner organizations, CIHR and the government, ensuring Canadians researchers continue to develop health research as a vital component of the economy and a contributor to improved health and well-being. As we proceed into the future, Canada’s faculties of medicine, their students, staff and faculty are remarkably positioned to lead the integration of education and research towards improved healthcare for all Canadians.

In order to maintain the effectiveness of AFMC, the Board of Directors has recently undertaken a series of retreats to redefine its function and form which will then be reflected in a governance model and strategic plan. As always, aspiring to excellence and ensuring quality medical education remain core fundamentals of the organization. MD, Postgraduate and CPD education are our core lines of business. These, as well as increased investment in accreditation at all three levels, will remain a vital focus of AFMC.

While we may not be able to predict the future accurately, we need to look forward, to plan and to be involved in shaping not only medical education and health research but also the future of healthcare to adapt to the needs of Canadians a long way down the road.

Dr. James Rourke, Chair, Board of Directors
To be a leading advocate and an expert voice on issues relating to health education, health research and clinical care.

To respond to changing societal needs with innovative educational programs.

To provide leadership in the development of a health human resource plan.

To define and advocate for appropriate funding to achieve the education and research missions of the Faculties of Medicine.

To enable and sustain academic careers for health and biomedical researchers through capacity building, education and funding.

To provide leadership in enhancing our accreditation programs and in developing a world class Canadian Conference on Medical Education.
Message from the President and Chief Executive Officer

I want to begin my reflections on the past year by most warmly thanking the countless volunteers in all our faculties of medicine who give of their time, energy and resources on a continuous basis to help us advance the collective education and research missions of our faculties and AFMC. Without these volunteer commitments our organization would not be able to move forward and make some of the achievements that you will read about in this annual report.

I also want to offer a salute to the AFMC Board of Directors and our board committees. Since I began as President and CEO of AFMC in 2005, we have continuously developed our board process, to ensure more strategic thinking and effective decision-making. Our board members have been critical in helping shape the future direction of the board and in helping align AFMC activities with the board priorities.

The chair of our board, Dr. James Rourke, in his accompanying comments, has eloquently outlined the challenges that medicine and medical education face now and in the future and has alluded to the contributions that AFMC can make to address some of these challenges.

This past year has been one of stabilization while expanding and conducting more outreach. We have had a particular focus on advocacy, and building relationships. For example, we have worked closely with partners in the private sector (Rx&D, MEDEC Canada, BIOTEC Canada) and those in the public sector (ACAHO, Research Canada, Healthcare Charities Coalition) to develop a proposed action plan for health research in the future. We have built stronger relationships with CIHR and meet with them on a regular basis. Our relationships with AUCC have been fostered and we are identifying more items in common that we will act on together. We work on many activities with ACAHO, CFPC, RCPSC and the MCC.

The collective vision, as described in the Future of Medical Education in Canada MD project, really sets a new direction for undergraduate medical education in Canada. I am very excited about the direction and am particularly impressed with the way all of our medical schools have embraced these directions. Addressing the needs of the undergraduate medical student is only the beginning; our Future of Medical Education in Canada PG project looks at the postgraduate environment. The challenges we face in our undergraduate medical education system are often repeated and, at times, magnified in our postgraduate environment. The move towards a more seamless educational continuum for our medical students and future physicians should be applauded.

As we prepare for the future, I want to assure you that AFMC will continue to actively monitor our healthcare environment to ensure that we focus our efforts on addressing the most important questions in medical education and research to the benefit of not only our students, teachers and researchers, but more importantly to address the ongoing and significant healthcare needs of our fellow Canadians.

Dr. Nick Busing, President and CEO
If the implementation challenges can be successfully addressed, The Future of Medical Education in Canada initiative has the potential to impact the next century of undergraduate (and postgraduate) training in Canada the way the Flexner Report did the last one. The CFPC is excited to be playing a collaborative leadership role in the project with AFMC, the Royal College and CMQ.

Dr. Calvin Gutkin
Executive Director and CEO, The College of Family Physicians of Canada
The Canadian Federation of Medical Students would like to applaud the AFMC for its efforts in working synergistically with the CFMS to raise issues of critical importance to the government. Standing together, the AFMC and the CFMS were able to lobby government on the low representation of students from rural and low SES backgrounds in medicine. Continued joint lobbying efforts should enhance successes for both the AFMC and the CFMS in ensuring that we build both our medical education and health care systems to the best that they can be.

Matthew J. Sheppard
President, Canadian Federation of Medical Students
As the voice of academic medicine in Canada, AFMC has a crucial role to play in advancing the public policy conversation about the future of health and healthcare in Canada, with a specific focus on the interplay between the future of medical education in Canada and health research, innovation and the application of knowledge. It is also understood that many of today’s trainees are tomorrow’s leaders. Working with others, AFMC is an important strategic partner.

Glenn G. Brimacombe
President & CEO, Association of Canadian Academic Healthcare Organizations
Highlights

Office of the President and Chief Executive Officer

Dr. Nick Busing is delighted to report on the following activities that took place at AFMC during the past year.

AFMC Team
I am blessed with a superb group of colleagues at AFMC. This past year we lost some long-time contributors to AFMC academic medicine, including Sue Maskill and Lidia Frassine. They will be sorely missed. We are delighted to have recruited Dr. Geneviève Moineau as our new vice president for education and secretary for accreditation. Dr. Moineau will begin full-time work with AFMC on June 1, 2011.

Strategic Planning
In the fall of 2010, we began a three-phase process in order to plan more effectively for the future for AFMC. We reviewed our existing strategic goals in the fall; we then developed a process to update the goals, update the mission and vision, and to add values that reflected our organization. We intend to take a draft of our revised mission, vision, strategic goals and values to our board meeting in May 2011. Once these have been approved, we will undertake a review of the operations of AFMC to assure ongoing alignment with our goals.

Financial Resources
AFMC is significantly supported by membership fees paid by our 17 faculties of medicine. Our faculties have generously agreed to an increase in membership fees effective April 1st, 2012. This will allow us to modestly expand our staff, modestly increase salaries for our existing staff and expand some of our priority activities.

Projects
We have continued the strong reputation that AFMC has garnered over the years for being effective in terms of identifying projects relevant to our faculties of medicine, securing the funding for these projects, and managing the projects. This past year, we have focused on the Future of Medical Education in Canada MD and PG projects, Accreditation of Interprofessional Health Education Programs, public health and next year we will have additional projects supported by Canada Health Infoway and the Norlien Foundation.

Clinical Teachers
We are following up on a commissioned study of clinical teachers in Canada entitled Study of Clinical Teachers in Canadian Faculties of Medicine: A 2009 Discussion Paper. After distribution of the paper to many stakeholders, we determined that a multi-stakeholder initiative to build consensus on the recommendations in the report and to develop a national strategy for implementation is desirable. Plans are underway to have a national symposium later in 2011.

Academic Health Science Networks
AFMC co-chaired a national taskforce on the future of Canada's academic health science centres. The taskforce produced a report entitled Three missions, One Future: Optimizing the Performance of Canada's Health Science Centres. AFMC is working with individual faculties and regions to help develop implementation strategies for the important recommendations in this report.

Advocacy
AFMC has been extremely active in terms of advocacy on behalf of the faculties of medicine. Important and increased linkages have been made with government (both the political process and the bureaucracy) and with stakeholders such as the Canadian Institutes of Health Research, Royal College of Physicians and Surgeons of Canada, College of Family Physicians of Canada, Medical College of Canada, Canadian Medical Association and Research Canada.

Data
AFMC continues to enhance the platform that supports our data management and reporting activities. We've taken significant steps toward a fully integrated, linked and standardized medical education database for Canada. Our data holdings are unique and offer a comprehensive picture of medical students, postgraduate residents, faculty, researchers and the broad characteristics of our medical faculties. In addition, the National IMG Database has established a data-sharing partnership that tracks IMGs throughout our assessment, educational, certifying and regulatory system. Increasingly, our analyses and publications are tailored to optimize the contributions AFMC makes to health human resource, medical education and health research discussions in Canada.
Government Relations and External Affairs

Parliamentary Outreach
Over the course of this year, AFMC has significantly increased its parliamentary outreach activities and presence "on the Hill". AFMC regularly submits briefs to parliamentary standing committees, holds parliamentary policy briefings, and meets regularly with Members of Parliament, Senators, and decision-makers in several ministries in order to discuss ongoing areas of interest for AFMC and our members. These meetings are having a tangible effect in terms of influencing public policy deliberations and in situating AFMC as an important data and knowledge resource for Canadian decision-makers.

Deans on the Hill
On October 5th, 2010, AFMC held its second annual Deans on the Hill lobby day on Parliament Hill. AFMC staff and deans of medicine met with 50 Members of Parliament and Senators from all four major political parties to discuss policy issues in the areas of health human resource planning, increasing the diversity of medical students and Canada's physician workforce, strengthening health and biomedical research in Canada, and rebuilding Haiti's faculties of medicine. Deans on the Hill triggered significant follow-up in terms of meetings and other activities, and has created sustained lines of communication between AFMC and several policy makers.

External Affairs
Over the last year, AFMC has continued to increase its presence within the health and biomedical community. AFMC has increased its interaction with organizations such as the Canadian Institutes of Health Research, the Association of Canadian Academic Healthcare Organizations, Research Canada and the Association of Universities and Colleges of Canada, and is represented at more tables such as the Health Action Lobby and the R7. These relationships provide us with the opportunity to influence national agendas and increase our access to experts and leaders throughout the community.

Corporate Communications
AFMC continues to enhance its line-up of corporate communications tools. Our quarterly newsletter, Gravitas, has been expanded to include regularized commentary from leaders in medical education, and addresses important themes affecting our membership. We also continue to produce DataPoint!, a one-page periodic publication that presents the data behind today's health care issues. Traffic to our corporate website continues to grow as a result of more frequent updates with content relevant to our constituencies and focussed efforts to increase its usefulness to our community.

e-learning
This year saw AFMC become increasingly involved in the area of e-learning. The Canadian Healthcare Education Commons / La Collaboration pour l’éducation en santé au Canada (CHEC-CESC) has grown and evolved and now hosts over 600 curricular resources including 60 virtual patients, 50 communities, and sees approximately 6000 users log into CHEC-CESC per week.

In early 2011, AFMC and Canada Health Infoway announced a three-year project aimed at strengthening learning on effective clinical use of information and communications technologies. The AFMC-Infoway Clinicians in Training project will engage clinical educators, informatics experts, deans, students, and residents in a review and dialogue on e-health curriculum and support the creation of new e-learning resources related to electronic health record service systems. AFMC has also been partnering with the Norlien Foundation, a Calgary-based private foundation, in order to create pedagogical resources for undergraduate medical educators to teach about addictions and early brain and biological development.

Conflict of Interest
In August of 2010, as part of its mandate to support faculties in the process of reviewing their conflict of interest policies, AFMC held its first annual national dialogue on conflict of interest. The meeting saw representatives from Canada's faculties of medicine assemble to examine their policies, discuss areas for revision, and share challenges relating to implementation.

Haiti Project
Following the tragic earthquake of January 2010, AFMC assembled a coalition of partners to create a proposal for Canada to provide much needed assistance to Haiti's four faculties of medicine. A meeting was held in May of 2010 in Montreal with deans of medicine from Haiti, Haitian government officials, and many stakeholders from Canada and abroad to begin the process of working together. The Montreal meeting was followed by a delegation of Canadians to Haiti, which culminated in a project proposal based squarely on the self-identified needs of Haiti. AFMC is actively pursuing funding for this proposal and it is our hope that we will be in a position to make this important contribution to Haiti’s recovery.
Education and Special Projects

Implementation Activities for the FMEC MD Recommendations

Following the release of the Future of Medical Education in Canada (FMEC) report on MD education, faculties of medicine and the medical education community mobilized to address the report’s 10 recommendations. A comprehensive review and analysis of undergraduate programs and curricula was conducted in many faculties in light of FMEC MD recommendations; the AFMC Working Group on Accreditation prepared a cross-analysis of the Committee on Accreditation of Canadian Medical Schools (CACMS)/Liaison Committee on Medical Education standards with FMEC MD recommendations and presented it to CACMS; and the Medical Council of Canada prepared a cross-analysis of their initiatives with FMEC MD recommendations. In addition, on-line communities were created for each of the FMEC MD recommendations on the Canadian Healthcare Education Commons / La Collaboration pour l'éducation en santé au Canada website.

FMEC PG Project

The second phase of the Future of Medical Education in Canada (FMEC) project on postgraduate medical education is well under way. The steering committee and advisory committee of PG deans have met several times and held their first public panel meeting. Several inputs into the project have already been completed, such as international consultations, a public panel, national public opinion research, a national survey of program directors, an environmental scan, as well as submissions and input from national key stakeholders such as the College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada.

Accreditation of Interprofessional Health Education Programs

The second phase of the Accreditation of Interprofessional Health Education Programs project focussed on implementation of interprofessional health education accreditation standards in eight pre-licensure accrediting bodies representing six health disciplines. The project included the creation of a bilingual IPE language and standards’ evaluation guide and a webinar which engaged over 200 key regulators, educators, professional associations, health and education policy makers and clinical managers at 14 sites across Canada.

Canadian Conference on Medical Education

Approximately 1,100 people attended the 2010 Canadian Conference on Medical Education (CCME) held in St. John’s, Newfoundland. The CCME organizing committee worked to expand its educational program to include 40 workshops, 108 oral presentations and 103 posters that demonstrate a strong balance of undergraduate and postgraduate submissions. There was also an increase in research paper, poster, and international submissions. As secretariat for the CCME, AFMC has continued to significantly grow its sponsorship and exhibit program, creating important revenue for the continual improvement of this conference.

Public Health Medical Education Initiative

The AFMC Public Health Educators’ Network (PHEN) continued development and testing of the comprehensive on-line interactive textbook AFMC Primer on Population Health. The primer poster was presented at the 2010 Canadian Conference on Medical Education and the Canadian Public Health Association conference and project successes were presented at the Association of American Medical Colleges conference on integrating public health into medical education. The PHEN also increased the number of student-run public health interest groups to 16 faculties and established an online forum on the National Specialist Society of Community Medicine website.

Aboriginal Health

AFMC continued to work with the Indigenous Physicians Association of Canada (IPAC) to support their efforts to enhance the recruitment and retention of First Nations, Inuit and Métis (FN/I/M) students into medicine and the implementation of FN/I/M core competencies into curriculum. At the 2010 Canadian Conference on Medical Education, a workshop was delivered at the AFMC Resource Group on Admissions and Student Affairs meeting and the IPAC-AFMC Indigenous Health Education Working Group met to discuss curriculum implementation. Guidelines have also been drafted to support culturally appropriate data collection from Aboriginal admissions programs within medical faculties in partnership with the National Indigenous Health Science Circle.
Data and Analysis

Data Initiatives
The Office of Research and Information Services (ORIS) and the Canadian Post-M.D. Education Registry (CAPER) exercise great rigor in record-matching and data quality work as they continue to develop a fully integrated, standardized medical education database for Canada. Over 7,000 records are submitted through the IMG, faculty, graduate student and research revenues data files. The applicant file alone involved processing over 29,000 MD program application records. In addition, CAPER-ORIS handled more than 24,600 records submitted through their undergraduate and postgraduate medical enrolment files.

CAPER-ORIS updated the following ten key data initiatives in 2010:

- MD program admission requirements
- MD program applicants and applications
- Undergraduate medical enrolment and graduation
- Postgraduate medical enrolment and ongoing practice location
- Graduate student enrolment
- Full-time and part-time faculty
- Tuition and academic fees
- Clerkship structure, content and clinical teaching facilities
- Biomedical and healthcare research revenues
- International Medical Graduates (IMGs) in Canada

Annual Data Reports
The Office of Research and Information Services and the Canadian Post-M.D. Education Registry (CAPER) data produces a series of comprehensive and frequently accessed annual reports, including Admission Requirements of Canadian Faculties of Medicine, Canadian Medical Education Statistics, Annual Census of Post-M.D. Trainees, and the National IMG Database report. The data sections of the AFMC website feature prominently in web-hit statistics. For example, the admission requirements and Canadian medical education statistics reports were each accessed more than 4,000 times in 2010. The CAPER website was accessed about 9,500 times in 2010 – just over 26 hits a day on average.

National Research Careers Survey
2010 marked the launch of the first national survey of biomedical and healthcare researchers, a collaborative study led by the AFMC in partnership with the Canadian Institute for Health Research and the Association of Canadian Academic Healthcare Organizations. The survey gathered in-depth data on the demographics, work activities, career supports and scholarly outputs of clinician and non-clinician scientists in Canada. In 2010, all faculties of medicine received customized reports profiling research career supports and activities at the local and national levels.

Special Reports and Presentations
The Office of Research and Information Services (ORIS) and the Canadian Post-M.D. Education Registry (CAPER) data featured prominently at the 2010 International Conference on Residency Education. Two paper presentations were well-attended and highly rated by conference participants. One illustrated how the National IMG Database is measuring the flow of international medical graduates through the Canadian medical system and the other highlighted postgraduate medical education trends in the context of healthcare priorities.

In addition to our annual publications, CAPER-ORIS produced two additional noteworthy reports. First, the fall 2010 edition of DataPoint! was instrumental in “Bringing Canada’s Medical Education Map into Focus”. This DataPoint! offers key metrics of distributed medical education and presents the first ever map of Canada’s geographically diverse clinical teaching facilities. Second, AFMC’s data-themed issue of Gravitas presented a broad cross-section of guest writers that offered their thought-provoking and informative reflections on how data and information are evolving and increasingly serve as the foundation for sound planning and decision-making.

Accreditation
In 2010, the Office of Research and Information Services and the Canadian Post-M.D. Education Registry started to provide data support to faculties of medicine as they begin to develop their Liaison Committee on Medical Education/Committee on Accreditation of Canadian Medical Schools accreditation databases.
Secretariat of CACMS and CACME

Accreditation Staff
The combined position of president and CEO of AFMC and that of secretary to the Committee on Accreditation of Canadian Medical Schools (CACMS) and the Committee on Accreditation of Continuing Medical Education (CACME) was split during this year. AFMC is delighted to have recruited Dr. Geneviève Moineau to take over the role of Vice-President, Education and Secretary to CACMS/CACME. This will allow President and CEO, Dr. Nick Busing, to continue with activities focused entirely on AFMC. Dr. Linda Peterson will be continuing as assistant secretary to CACMS.

CACMS and CACME Activity
2010-2011 was a very active year for accreditation activities, led by the Committee on Accreditation of Canadian Medical Schools (CACMS) and the Committee on Accreditation of Continuing Medical Education (CACME), which included three limited surveys and two fact-finding secretariat visits for CACMS, and two full surveys and two limited surveys for CACME.

Interim Review Process
Spearheaded by a working group on accreditation struck by the Council of Deans of AFMC, an interim review process for undergraduate medical education was developed. This process anticipates mid-cycle reviews of undergraduate programs. Each medical school has hired an individual to take responsibility for accreditation. The process will be one of continuous quality improvement and faculties of medicine are encouraged to maintain an active process to address changes in the accreditation environment from one year to the next.

Relationship with LCME
The Committee on Accreditation of Canadian Medical Schools (CACMS) continues to have a very close and collaborative relationship with the Liaison Committee on Medical Education (LCME). At the same time, CACMS has moved to “Canadian-ize” some of its activities. For example, the graduate student questionnaire and financial questionnaire, both of value to the medical schools and the CACMS, now have Canadian versions. CACMS collaborates very closely with LCME and after reports from the Canadian medical schools are considered by both CACMS and LCME, a joint letter with the committee findings is produced.

Faculties of Medicine by the Numbers: From our 2010 reports…

- 17 faculties of medicine, 10 satellite campuses, over 870 clinical teaching facilities
- 29,220 MD program applications from 10,945 distinct applicants*
- 2,829 new undergraduate medical students
- 10,853 total undergraduate medical students
- 2,448 Medical Degrees awarded; 58% women, 42% men.
- 2,951 first year postgraduate medical trainees
- 13,912 total postgraduate medical trainees; 71% Canadian medical graduates, 29% IMG
- 1,896 exiting and practice-ready postgraduate trainees; 39% family medicine, 42% medical, 16% surgical, and 3% other specialties
- 13,753 graduate and post-Doctoral students; 44% Masters, 37% PhD and 19% post-Doctoral
- 1,566 MSc and 720 PhD degrees awarded
- 34,670 faculty members; 33% full-time, 67% part-time
- $2.553 billion biomedical and healthcare research revenue; 34% federal government, 18% provincial government, 18% internal and local university/hospital, 12% not-for-profit agencies, 11% international, 7% industry and other sources.

* Does not include Queen’s University
“AFMC is to be commended for its inclusive leadership in bringing medical and other key stakeholders together to complete the undergraduate component of the landmark study on the Future of Medical Education in Canada. Together with the postgraduate component now underway this promises to be the Flexner report of the 21st Century.”

Dr. Jeff Turnbull
President, Canadian Medical Association