

Dr. Francine Lemire
Executive Director and CEO College of Family Physicians of Canada
2630 Skymark Avenue
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November 13, 2016

Re: CFPC EM Committee/CCFP(EM) Residency PD Response to CAEP CWG.

Dear Francine,

Thank you for giving the CFP EM Committee and the National CCFP(EM) Residency Program Director group the opportunity to provide feedback regarding the Canadian Association of Emergency Physician's Collaborative Working Group Report, which was released in June 2016.

The CFP Community of Practice in Emergency Medicine and the CCFP(EM) PD group:

- 1) Accept the report as a major effort on the part of the CFPC, RCPSC and CAEP to address the issues associated with the unique Canadian approach to training and certifying emergency physicians.
- 2) Thank the College for the time and resources committed to the process and specifically thanks Connie Leblanc, Pam Eisner and Tim Allen for representing the College during the CWG-EM work.
- 3) Are concerned about the low response rate (9%) by non EM-certified physicians who are delivering a significant amount of emergency care nationally, particularly in rural settings.
- 4) Accept the concerns regarding the current shortfall of emergency physicians and family physicians practicing emergency medicine. We also accept the prediction of a worsening shortfall over the next ten years.
- 5) Support an increase in the number of PGY3 EM training positions nationally to help address this human resource need.
- 6) Will assist in defining and assessing the competencies required of both CCFP(EM) and CCFP grads who intend to practice emergency medicine. This may involve curriculum changes to the current model of training emergency and family physicians through CFPC programs. We agree with the final goal of ensuring excellent emergency care to "patient zero" in both rural and urban community settings, regardless of provider training route.

7) Accept the recommendations of the CWG-EM report regarding greater collaboration and coordination on issues related to emergency medicine between the CFPC and RCPSC. This will be particularly relevant during the current shift towards competency-based postgraduate training by both colleges.

8) Accept the data from the CWG-EM report that the majority of CCFP(EM) physicians are practicing emergency medicine as the majority of their practice.

9) Encourage the CFPC to support initiatives which allow non EM certified family physicians to include emergency medicine care as part of their practice.

10) Accept that a single stream of training emergency physicians was not recommended by the CWG-EM report but rather the improvements, evaluation and co-ordination of the current training programs was the preferred course of action.

We sincerely appreciate being given the opportunity to provide feedback to the CWG report.

Sincerely,

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