

February to June 2020

# CFPC Board of Directors Decisions/Directions and Impacts

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### MAJOR COVID-19 ACTIONS RELATED TO THE CFPC'S FOUR GOALS

- Weekly updates for members from Dr. Francine Lemire, Executive Director and CEO, in The Week That Was
- Weekly (at minimum) clinical live-stream <u>webinars</u> (Mainpro+<sup>®</sup> certified; March 26th to June 18th)
- COVID-19 Information and Resources web page
- Letter to the Minister of Health on behalf of the CFPC, Medical Council of Canada (MCC) and Royal College of Physicians and Surgeons of Canada (Royal College) outlining the difficult decision to postpone spring 2020 exams, and the assurance from the medical licensing bodies in Canada that resident physicians can practise using temporary (provisional) licenses until exams are rescheduled (March 27th)
- Signatory as part of the Canadian Medical Forum, on letter to federal, provincial, and territorial governments to develop guidelines regarding PPE use and mobilize Canadian PPE production (March 30th)
- Letter to Canada's Chief Public Health Officer sharing that patients should be encouraged to keep important medical appointments with their family physicians while respecting physical distancing or using virtual access (April 6th)
- Letter to the Minister of Health to encourage patients to keep appointments with family physicians, emphasizing importance of sufficient PPE for community-based practices, ensuring virtual care support, and availability of mental health supports for health care providers (April 21st)
- <u>Brief</u> to the House of Commons Standing Committee on Health focusing on needs of family physicians and their patients during COVID-19 pandemic (April 30th)
- News release calling for moving away from fee-for-service remuneration citing the volatile financial situation it created for many practices (May 5th)
- Signatory as part of the Canadian Medical Forum, calling on federal, provincial, and territorial governments providing pandemic pay to include resident doctors on the list of professionals eligible for pandemic pay at the front lines of COVID-19 and in any future initiatives aimed at supporting essential front-line workers (May 13th)
- Co-signatory with Canadian Medical Association (CMA) and Royal College letter to Minister of Seniors and Minister of Foreign Affairs supporting the call for Canada to lead and support the development of a UN Convention on the Rights of Older Persons (June 18th)
- Canadian Family Physician podcast series and blog posts on COVID-19
- Opportunity for members to connect for COVID-19 related discussions in MiGroups
- CFPC, CMA, and Royal College supporting Questions and Answers on COVID-19 at https://covidquestions.ca/
- <u>Postponement</u> of spring 2020 written exams to keep candidates, examiners, and staff safe. Certification decisions in 2020, on an exceptional basis, will be made based on a passing score on the SAMPS, for both the Certification Examination in Family Medicine, and the Examination of Added Competence in Emergency Medicine (EM). Eligibility for the fall 2020 examinations is for: (i) first-time examination takers for both exams; and (ii) repeat exam takers

for the SAMPs portion of the Certification Examination in Family Medicine. The CFPC received assurance that medical regulatory authorities across Canada would issue provisional/restricted licences/registrations to candidates who will not have obtained their Certification in the College of Family Physicians of Canada (CCFP) when they start to practise.

- Regular meetings with university postgraduate deans, chairs and program directors of departments of family medicine, as well as with the Section of Residents
- A one-year extension to the 2020 annual Mainpro+ credit reporting requirement
- Extensions for Honours and Awards nominations, and Board Director applications
- Co-development of a <u>Virtual Care Playbook</u> (with the CMA and Royal College)
- Arrangement with the CPA-Psychology for free access for CFPC members to a psychologist for front-line health service providers, within their province/territory
- Foundation for Advancing Family Medicine's (FAFM) <u>COVID-19 Pandemic Response And Impact Grant Program (Co-RIG)</u> (\$5M)
- Exploration of payment flexibility for membership fees, to support members experiencing financial hardship
- Membership survey gathering member experiences during the pandemic (released May 28th)
- Ongoing (at least weekly) communications from the CEO to staff (PANguard bulletins)
- Resources and supports for staff (health related, virtual meetings, IT, mental health, ergonomics, keeping connected, group benefits updates, pension plan updates)
- All staff set up to work virtually

### GOAL 1: SET STANDARDS TO DEVELOP AND SUSTAIN SKILLED FAMILY PHYSICIANS

#### Residency Training Accreditation Standards

The Board approved the *General Standards of Accreditation for Institutions with Residency Programs* and the *Standards of Accreditation for Residency Programs in Family Medicine* (Red Book), after extensive discussion and deliberation about the academic details of the changes by the Family Medicine Accreditation Standards Improvement Committee (ASIC-FM), a national consultation, approval by the CFPC Residency Accreditation Committee, and subsequent approval by the CFPC's Family Medicine Specialty Committee.

#### STANDARDS OF RESIDENCY TRAINING ACCREDITATION

**THAT** the Board fully support and approve the proposed changes to the Canadian Excellence in Residency Accreditation (CanERA) institution standards;

**FURTHER THAT** the Board fully support and approve the proposed changes to the CanERA general program standards in the *Standards of Accreditation for Residency Programs in Family Medicine* (Red Book);

**AND FURTHER THAT** the Board fully support and approve the proposed changes to the family medicine specific standards in the *Standards of Accreditation for Residency Programs in Family Medicine* (Red Book).

## Greater Collaboration with the Royal College of Physicians and Surgeons of Canada

The Board approved updated terms of reference for the Intercollegiate Advisory Group. This is a forum of leadership representatives from the CFPC and Royal College responsible for exploring areas of mutual interest and concern. It includes the advancement of conjoint approaches to residency training standards, competencies and processes, accreditation of residency training programs, certification and designation of candidates, and maintenance of competence of practising physicians. There will be a focus on domains of care with overlapping competencies and scope.

#### INTERCOLLEGIATE ADVISORY GROUP

**THAT** the Board approve the Intercollegiate Advisory Group Terms of Reference.

#### Postgraduate Medical Education Collaborative Governance Council

We have been a member of the Postgraduate Medical Education Collaborative Governance Council for the past three years. It was established following the recommendation of the Future of Medical Education in Canada Postgraduate (FMEC PG) project "to address a breadth of issues, notably those that cannot be resolved at other tables, including sensitive controversial and often difficult issues."

Several Canadian organizations involved in postgraduate medical education are engaged, as well as representation from the Canadian Health Workforce (composed of deputy ministers of health of all provincial and territorial jurisdictions). The Council's original mandate is over. Before considering continuing, explorations for enhancing the governance and related responsibility and accountability of this group are needed. Other key stakeholders have withdrawn from the Council so viability of the Council is in question.

## POSTGRADUATE MEDICAL EDUCATION COLLABORATIVE GOVERNANCE COUNCIL

**THAT** the CFPC not proceed with another memorandum of understanding to support further work of the Postgraduate Medical Education Collaborative Governance Council at this time (May 2020).

#### Certificates of Added Competence (CACs)

Certificates of Added Competence (CACs) provide a means of recognizing family physicians who have achieved a defined level of competence and commitment to maintenance, in a domain of care within family medicine. Family physicians who hold CACs extend comprehensive care and community-adaptiveness that family physicians collectively provide our patient populations.

The CFPC has awarded CACs in Emergency Medicine (previously called Certificates of Special Competence) for many years. After introducing CACs in four new domains of care—Care of the Elderly, Family Practice Anesthesia, Palliative Care, and Sport and Exercise Medicine—the Board wished to understand their impact. The McMaster group was commissioned to focus on the impact of these four CACs, to inform further work on the overall CAC program.

Using interviews and qualitative analysis and supplemented with quantitative surveying of members, the McMaster group proposed eight <u>recommendations</u>:

- 1. Articulate the intended values of the CAC program, reflect on the values that may be espoused implicitly and explicitly by the current program.
- 2. Emphasize the priority of person-centred, community adaptive family medicine as the base of the fundamental profile of CAC holders.
- 3. Identify potential areas for new CACs that consider the frequency of transitions of care, the emergence of new areas of need, the overall time physicians must dedicate to providing care, and maintaining competence.
- 4. Work toward standardizing credentials for added competence in family physicians.

- 5. Ensure the perceived validity of the CAC by working toward minimum training standards as part of any application for certification.
- 6. Encourage CAC holders to work within collaborative models of care that align with community need.
- 7. Develop and implement incentives that promote generalist practice.
- 8. Conduct further research and evaluation for topics such as how the distribution and mix of CAC physicians aligns with community needs, the factors that promote new graduates with CACs to seek out practices that serve populations with aligned needs, and the economic impact of the program.

## CERTIFICATES OF ADDED COMPETENCE COMMISSIONED RESEARCH

**THAT** the Board accept the report entitled *Understanding the Impact of the CFPC Certificates of Added Competence* (revised March 25, 2020).

The Board discussed the McMaster group's recommendations and established the following next steps:

#### **CERTIFICATES OF ADDED COMPETENCE (CACS)**

Based on the report *Understanding the Impact of the CFPC Certificates of Added Competence* (revised March 25, 2020), and CFPC staff and committee work,

**THAT** the Board support staff proceeding with the development of the following recommendations and report back to the Board by the end of 2020:

- 1. Develop a position statement defining the purpose and intention of the CAC stream of certification that will guide future establishment of CACs (in the context of comprehensiveness, continuity of care, and community-adaptiveness).
- 2. Establish criteria that justify the creation of new CACs.
- 3. Evaluate and make recommendations to support the added value and mitigation risks associated with CACs within family medicine.
- 4. Make recommendations for future steps regarding CACs including a robust summative assessment such as examinations for all CACs.

## GOAL 2: MEET THE EVOLVING HEALTH CARE NEEDS OF OUR COMMUNITIES

#### Indigenous Health

Furthering our commitment to address Indigenous health and social issues, the Board approved a request from the Indigenous Physicians Association of Canada to sponsor the Pacific Region Indigenous Doctors Congress (PRIDoC), an Indigenous-led initiative aimed at improving medical education and empowering Indigenous physicians, educators, and researchers.

Subsequent to the CFPC's support, PRIDoC was postponed to August 2021 because of the COVID-19 pandemic.

#### PACIFIC REGION INDIGENOUS DOCTORS CONGRESS

**THAT** the CFPC commit \$20,000 to support the Pacific Region Indigenous Doctors Congress 2020 to become a Cedar-level sponsor of the conference;

**FURTHER THAT** this will be drawn from the Strategic Initiatives Reserve Fund.

As part of our work to enhance engagement with Indigenous partners, it was suggested that our Indigenous Health Working Group be recognized as a standing committee. Our focus on Indigenous health and health care is not a time-limited task; it is critical, ongoing, and growing.

#### INDIGENOUS HEALTH WORKING GROUP CHANGE TO COMMITTEE

**THAT** the Indigenous Health Working Group transition to the Indigenous Health Committee.

## Providing Members with Online CPD by Family Physicians, for Family Physicians

Important progress is being made in our work to establish the CFPC as a leading provider of online CPD by family physicians, for family physicians. In the mid-2010s the Board directed the organization to create capacity within the CFPC to provide high quality, pharma-free CPD to members. The objectives were to create member value, to replace the perceived reduction in available CPD programs with the ending of pharmaceutical industry sponsorship, to engage Chapters, and to create new revenue streams. We are finalizing new memoranda of understanding (MOUs) that build on our two-year relationship with the Patients Evidence Education Research (PEER) Team. PEER now includes members in six Canadian universities. With these new MOUs, we will be expanding our engagement with Chapters, and including both the Alberta College of Family Physicians (ACFP) and the Ontario College of Family Physicians (OCFP).

It is proposed that, with the CFPC as the lead organization, these two Chapters will support clinical evidence experts in PEER to produce a variety of CPD products and practice support tools. We have also agreed to transfer the *Tools for Practice* program and the GoMainpro online learning portal from the ACFP to the CFPC. These will serve as the nucleus of a new online CPD presence for the CFPC that will support the practice of family physicians and enhance the value of CFPC membership. We look forward to engaging more Chapters and ensuring we all benefit as this grows. PEER will also continue to deepen its pan-Canadian character and welcome involvement from faculty in interested Canadian universities. The Board supported the direction, and work is under way.

#### **KNOWLEDGE EXPERTS AND TOOLS INITIATIVE**

**THAT** the Board support staff to proceed with the Knowledge Experts and Tools (KET) initiative and the required MOUs, with progress reports provided to the Board twice a year.

#### Family Medicine Forum (FMF) 2020

Work is under way to support members through our annual FMF during the pandemic. Mark calendars—November 4 – 7, 2020!

#### **FMF 2020**

**THAT** the Board recognizes that all delivery options for FMF 2020 during the current pandemic are being considered, including a virtual FMF, in order to safely and successfully deliver top quality, evidence-based education, facilitate peer-to-peer connections, and celebrate successes in family medicine;

**FURTHER THAT** the final decision on delivery format will be confirmed as soon as possible and be shared with members.

# GOAL 3: PROMOTE THE VALUE OF PATIENT CARE PROVIDED BY FAMILY PHYSICIANS

Promoting the value of family physicians has been largely in relation to COVID-19 over the last few months (see Major COVID-19 actions related to the CFPC's four goals).

#### Pharmaceutical Industry

In January 2020 the Board committed to enhancing the independence of Family Medicine Forum (FMF) and the *Canadian Family Physician (CFP)* journal to be pharma-free by the end of 2024. Since 2016 we have been generating annual reports of our relationships with pharmaceutical industry related to FMF, *CFP*, and CPD. The 2018/19 fiscal year edition shows a continued decline in revenue from the health care and pharmaceutical industry.

## MANAGEMENT OF RELATIONSHIPS WITH HEALTH CARE/PHARMACEUTICAL INDUSTRY

**THAT** the Board receive and approve the 2018/19 Report entitled *Management of Relationships with the Health Care/Pharmaceutical Industry*.

### GOAL 4: STRENGTHEN OUR MEMBER-BASED ORGANIZATION

#### Strategic Direction

The Board and Staff Executive Team reflected on our direction, three years into our five-year strategic plan and in a dynamic environment with the COVID-19 pandemic.

#### **CFPC STRATEGIC PLAN 2017-2022**

**THAT** the Board approve the following revisions to the CFPC Strategic Plan 2017-2022, up to February 2020:

- Addition of an outcome and actions that arose as a priority need among members for knowledge and skills to meet the evolving needs of their practices and communities;
- Removal of two actions that will need to be pursued after 2022 as they depend on the establishment of the Professional Learning Plan, which will occur in 2021;
- Some terminology refinements.

The Board is engaging in a process of further refinement of our strategic plan in light of the emerging environmental and societal issues.

The CFPC's work in practice support is now reflected in greater detail in our current Strategic Plan. After the launch of Professional Learning Plans, the resulting aggregate data will be used to guide establishing priorities for CPD programming and other practice supports.

#### **Board Meeting Assessment**

One element of our governance evaluation strategy is for Board Directors to complete an assessment at the end of each Board meeting.

#### **BOARD DIRECTOR ASSESSMENT AFTER EACH MEETING**

**THAT** the Board approve updates to the assessment tool currently completed by Board Directors after each in-person Board meeting, including extending its use to video conference meetings as well.

#### **Finances**

 The Board accepted the Financial Report for the six months ended November 30, 2019, and the nine months ended February 29, 2020

- The Board approved:
  - o the 2019-20 flex budget adjustments
  - o updates to the FMF Surplus Policy, the Reserve Policy, and reserve allocations

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