NATIONAL MARCHPAST SUMMARY

of the

FAMILY MEDICINE INTEREST GROUPS (FMIGs)

PREPARED FOR THE:

National Section of Medical Students (SOMS)/FMIG Forum
Date: Sunday February 27th, 2011
Place: CFPC National Office – Mississauga, Ontario

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Goals for the year

- Stream line activities put on by UBC FMIG, focus on fewer activities with more attendance
- Create a functional, up to date UBC FMIG website
- Succession planning for next year’s executive

Some challenges that continue to exist for us include:
- Attendance at events
- Involvement of ALL executive members (ie. communications reps contribution vs academic reps)
- Addressing common stereotypes around family medicine (ie. compensation, R3 specialities etc)

Activities & Events

- The components of the UBC FMIG’s executive that focuses on planning events are the academic, skills, and special events portfolios. Events that have taken place this year include: Academic Events: Speaker series focusing on potential “R3” or “specialities” within family medicine, for example topics have focused on Palliative Care, International Health, Maternity Care, Emergency Medicine Special events - Dinner with Docs, Dinner with Residents (upcoming in the spring), Financial education night, UBC Family medicine conference (held in September) Skills - basic and advanced suturing and casting work shops, rheumatology information night (upcoming in the spring)

Major Successes

- Streamlining our executive team and “thinking ahead” in regards to succession planning (for example both of our Skills Co Chairs are in 4th year so we decided to train 2 interested second year students at the beginning of the year who will now be in great shape to take over the role next year)
- Deciding upon our ‘membership criteria’ - the UBC FMIG came up with an inclusion criteria for those eligible for a supplementary letter for their CaRMS application
- Incorporating residents into our activities (we are hoping that this will evolve into a yearly “Dinner with Residents” event)
- The UBC Family Medicine conference
- Refreshing our UBC FMIG website

Challenges

- Increasing traffic to our UBC FMIG website *solution: posting upcoming FMIG events, sending out class wide emails, posting lists of participants for different skill based sessions
- Increasing turn out at events *solution: partnering with other health care disciplines (ie pharmacy) in order to help increase attendance
- Increasing the visibility of the “College” *solution: planning to have a rep from the BC college speak before our CaRMS session

Unique Initiatives

- Partnering with residents
- Inviting other health care disciplines to workshops
**Goals for the year**
- Our goals were to increase the exposure to and enthusiasm for family medicine. By working with other student groups we have been successful in increasing the exposure of family medicine amongst students. By having such a hard working FMIG executive committee, the events we have organized so far have been well-received by students and I have gotten a lot of positive and enthusiastic feedback about the events and family medicine as a career choice.

**Activities & Events**
- Talks: What is Family Medicine?
- Emergency 2+1 Program Talk Anesthesia 2+1 Program Talk
- Residency Program Q & A
- Balance: Being a Clinician and Administrator Practice Management and PCNs
- Evening Events: Dinner with physicians and residents Resident Speed Dating
- Clinical Skills Sessions: Suturing and Casting

**Major Successes**
- The student representative for the Alberta College of Family Physicians was successful in obtaining $1000 in funding from the ACFP to attend their Annual Scientific Assembly in Banff. Students still have to pay the $85 student registration fee but this funding is being used to cover accommodation costs for 3 nights for the 7 students interested in attending. Although the ACFP has provided a reduced registration fee in the past, this is the first year they have provided funding to subsidize costs. All talks/events so far have been well attended and well received.

**Challenges**
- There is a lot of interest amongst students in the "2+1" programs. We have managed to collaborate with other clubs for a couple of these talks. However, there have been a couple of clubs that have invited family physicians to speak to their club about a 2+1 program in their area of interest without notifying us. It is great that they are showing the diversity of family medicine but increased communication to us would have meant that we could have informed our club members about the talk! Part of the problem is that the U of A Medical Students' Association has almost 50 student groups. Also, due to our MSA's constitution, we are not able to start hosting events until October. This means that the majority of our events are for scheduled this semester.

**Unique Initiatives**
- With thanks to the U of C FMIG for the idea, we will be hosting a "speed dating" type event as a way for students to speak with many different family medicine residents with different qualifications and interests in a small group atmosphere.
- We will be holding a talk about Practice Management and PCNs to give students a taste of the "business" side of medicine.
## UNIVERSITY of CALGARY

### Goals for the year
- Develop a new event to further increase interest in Family Medicine
- Successfully carry out events that have been done in previous years; use feedback from last year's events to improve upon them this year
- Increase attendance at events and maintain enthusiasm throughout the course of the year

### Activities & Events

<table>
<thead>
<tr>
<th>Month</th>
<th>Events</th>
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<tbody>
<tr>
<td>August</td>
<td>- info booth at clubs day</td>
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<td>- election of new executive</td>
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<td>- Family Medicine Showcase</td>
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<td>September</td>
<td>- welcome dinner with new executives to define roles</td>
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<td>October</td>
<td>- Family Medicine Forum</td>
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<td>November</td>
<td>- Walk for the Docs</td>
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<td>- “Speed Date Night” (R3 and other topics in family medicine)</td>
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<tr>
<td>December</td>
<td>- Rural Specialists Night</td>
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<td>February</td>
<td>- Urban Skills Day</td>
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### Upcoming Events
- Community Clinic Crawl
- Community Outreach Visits (to rural communities)
- Rural Skills Day
- Family Medicine Residents Night

### Major Successes
- Increased attendance at annual events
- Unique alterations to the organization of our annual events such as the 'speed dating night' approach

### Challenges
- the urban shadowing program has not been continued as medical students now complete mandatory family medicine clinical hours as part of the curriculum
- we continue to deal with cutbacks to funding

### Unique Initiatives
- Community Clinic Crawl: like last year, students will be given the opportunity to visit three different family practices in Calgary, to gain a sense of the diversity and wide range of opportunities available to family doctors
- Community Outreach Visit: a group of students will visit Olds, a rural community in Alberta to learn about medical practice and daily life in a rural setting
**Goals for the year**

- We were concerned about our financial state, and so we worked hard at applying for funding - seeing these efforts bear fruit was extremely satisfying. We were hoping to exert a strong presence at the main remote site, but scheduling conflicts and communication difficulties were large obstacles. This was disappointing, especially given that the remote sites should be a point of focus for our club, not simply an adjunct. Would love to hear what other groups have done to nurture remote site participation.

**Activities & Events**

- Speakers Sessions: we had 6 so far, planning on two more; These are the cornerstone of our activities, with huge attendance/enthusiasm. We had speakers from a few remote residency sites, one on addictions, one on rural/remote medicine, one on transitioning to practice from residency, a planned one from the forces, and a panel discussion with female docs Mentorship program: we downsized the program to ensure better quality of student experience, and this was much more successful than last year.
- Skills nights: One per semester. Both extremely successful - the first (suturing, casting, IV insertion) was hosted by our FMR academic unit, the second (sexual health) a collaboration with the Reproductive Action Group (student interest group).
- We are planning a year end wine and cheese to thank our MD volunteers and facilitate an interactive social activity for the group with physicians.

**Major Successes**

- New alliances: we have made some fantastic new alliances with provincial agencies charged with dealing with provincial physician recruitment and retention. This has been a massive windfall financially, but there are many side benefits as well, including publicity and a direct line of communication to the government.

**Challenges**

- Arranging for remote site participation, and trying to involve students in their clerkship years - scheduling is difficult/impossible to accommodate the classes as a whole, and yet these are the students closest to residency decision making. Finding a solution is an ongoing process for us right now.

**Unique Initiatives**

- Our year-end wine and cheese will be new to the FMC, and is a unique opportunity to both thank physicians (ensuring some amount of lasting support) and give students a chance to socialize and ask questions to the docs.
### UNIVERSITY of MANITOBA

#### Goals for the year

| - | Our goals were to expose as many pre-clerks to the field of Family Medicine as we could at the University of Manitoba, in hopes to whet their interests in the practice. As many of our events had waiting lists, we feel we have met this goal quite well. Our goal was also to connect 3rd and 4th years with useful information sessions as well, which were well-received in the form of Family Medicine CaRMS sessions held throughout the year. |

#### Activities & Events

| - | Suture Clinics (3) - 5-8 Clerks/Residents provided a 2-hour session focusing on teaching/practicing different knot-tying and sutures, using pigs’ feet. 60 participants/clinic. |
| - | Family Physician Speaker Series (5) - Five family physicians with various styles/types/foci of practice came individually during a given lunch hour and discussed their experiences. Attendance ~50 students/session. |
| - | Rural/Urban Family Physician/Student Meet'n'Greet Dinner - A semi-formal sit-down dinner was arranged at a local Winter Club with 60 students and 10 Family Physicians from different types of practice. Doctors would switch tables and mingle with students throughout the evening. |
| - | Mentorship Program - Interested second-year medical students were paired with participating Family Medicine Residents, who are encouraged to arrange get-together between themselves, in order for students to ask questions and better understand the Family Medicine Residency program and CaRMS preparation. |
| - | CaRMS Application Tips Session - A physician from the Family Medicine panel came and gave a one-hour lunchtime presentation on how the process of CaRMS worked and how to best prepare oneself for a successful application process. |
| - | CaRMS Interview Tips Session - A physician from the Family Medicine panel, along with a Family Medicine resident from the panel, came and gave a two-hour after-school presentation on how the process of Family Medicine CaRMS Interviews worked and how to best prepare oneself for a successful interview. |

#### Major Successes

| - | Suture Clinics are immensely popular with waiting lists for every event held thus far. CaRMS prep sessions are also very well attended, particularly by 3rd and 4th year medical students. |

#### Challenges

| - | Biggest challenges have been to compete with other lunchtime activities (and usually the event with the best food wins out). Offering food at events has proven to boost attendance levels substantially, though this is difficult to do for all our events due to finite funding. |

#### Unique Initiatives

| - | The Manitoba FMIG has re-introduced the mentorship program this year, which has been well-received by second years that are contemplating going into Family Medicine. We are the only interest group to provide such an opportunity, at the moment. |
NORTHERN ONTARIO SCHOOL of MEDICINE (NOSM)

**Goals for the year**
Our goal was to repeat and improve on successes from last year, and make sure that students who have an interest in family medicine get a chance to have their passion stimulated through FMIG events. For the reasons already mentioned, this goal hasn't been achieved so far, but we our hoping the last few months of the year make up for it. The roadblocks have been mentioned in the "challenges" section.

**Activities & Events**
The NOSM interest groups have had a difficult first part of the year, further described in the "challenges" section. Consequently, there is little to report up to this point. Upcoming are several lunchtime talks by family physicians, and our annual rotational dinner. The latter event consists of a five-course meal where about a half dozen students sit with 2 or 3 physicians per table, and rotate every course so that all thirty students have opportunities for discussion with all 10-12 physicians. This has been very well-received in the past.

**Major Successes**
As described in the "challenges" section, the group experienced many obstacles during the first half of the year, and as such our biggest success is the perseverance and patience of a large group of interested students despite all the frustrations. We anticipate the family physician lunchtime talks and the rotational dinner to be upcoming successes.

**Challenges**
During the first half of the year, a four-month strike by the medical school support staff has meant that students had to devote extra time navigating "bumps" in the curriculum, and consequently extra-curricular activities were not possible in most students' schedules. Additionally, our distributed learning model creates constant obstacles. Half the year there is only about thirty students on each campus, and about sixty the other half of the year, so we don't have the power in numbers (the other students are distributed across dozens of remote Northern communities, in different time zones, on different schedules, etc.).

**Unique Initiatives**
The rotational dinner described in the "activities" section has been our biggest success in the past. Also, because our class is so small, we have the advantage of taking suggestions from students in advance and tailoring speakers to suit their interests (i.e., lunchtime family physician talks).
**UNIVERSITY of OTTAWA**

### Goals for the year

For the most part our goal was to run a series of well attended events and so far we've been pretty successful in our goal - goals still to be achieved include running a successful clinical skills workshop, and creating ways to have continuity with the FMIG exec of next year (via documents to pass on, bringing new exec members forward and 3rd and 4th year reps that will stay on to advise the new exec). Another goal was to have more involvement from our faculty advisor - though we did have a conversation with him and he expressed his interest in broadening his role, we didn't really follow up with this - we've more or less operated alone, though we hope to have his help recruiting local physicians to our March meet and greet.

### Activities & Events

- **Sept 25th:** Organized Bus to McGill Family Medicine Symposium
- **Sept 27th:** Adolescent Pregnancy Part 1 (organized by WHIG)
- **Oct 4th:** Diverse Practice in Family Medicine with Dr. Kirlew - International and rural FM
- **Nov 8th:** Rural Electives Opportunities with 2nd year students, ROMP and ERMEP reps
- **Nov 8th:** Medical Students For Choice Talk (organized by MSFC)
- **Nov 15th:** Residency Series Part 1: Resident’s ‘Their Stories' with 4 FM Residents
- **Nov 17th:** How to Remove a Fishhook (organized by NRMIG)
- **Nov 18th:** Adolescent Pregnancy Part 2 (organized by WHIG)
- **Nov 18th:** Narrative Medicine at the Riverside Hospital
- **Nov 26th:** La Grande Séduction Movie Night (organized by NRMIG)
- **Nov 30th:** Residency Series Part 2: The Ottawa Program and CaRMS with Dr. Carol Geller
- **Jan 11th:** Dr. Justine Davies discusses her first year of practice in FM
- **Jan 18th-20th:** Aboriginal Health Awareness Week – various events organized by AHIG (aboriginal maternal health, from birth to the spirit world, inuit throat singing, Life’s Neccessities Movie)
- **Jan 26th:** Residency Series Part 3: Third year options in FM with Dr. Kendal Noel and docs from sports med, women's health, dermatology and emergency PGY3 training
- **Feb 8th:** Sensitive Issues Series Part 1: Mental Health and the Family Physician with Dr. Tobin
- **April 16th:** Clinical Skills Workshop Unscheduled (but in the works):
  - Sensitive Issues Series Part 2: House Calls and Palliation by the FM physician- Dr. Leonard Bloom
  - Sensitive Issues Series Part 3: How to recognize signs of abuse with Dr. Samsil
- **FM Meet and Greet in collaboration with Department of Family Medicine** - a chance to thank our speakers of the year and to get students speaking with physicians about their type of practice

### Major Successes

- In previous years FMIG was run by 1-3 coordinators with a limited number of events being held over the course of the year, with a minimum goal of 10 hours and a clinical skills workshop - this year the FMIG executive of 11 members allowed work to be divided; able to provide 35 hours of FM associated events and activities over the 2010/2011 year - nearly every event was well attended with lots of interest from first year class, many from the second year class, and even some third and fourth year students for our residency series and rural electives talks
- **Exec Positions:** 1st, 2nd and 3rd year rep, treasurer, secretary, 2 clinical skills co-directors, food coordinator, attendance officer, event organizers (with flexibility of roles)

### Challenges

- early in the year it was not established who would ultimately coordinate the group, and some tasks were not taken care of because it was assumed someone else would complete the task
- later in the year, having two people relatively in charge resulted in some tasks being done more than once, or extra worry taking place
- Secondly, we struggled with how to make our events relevant and available to third and fourth year students (must be evening session) while still having good attendance and relevance to the first and second year class (who will more readily attend a lunch time session)

### Unique Initiatives

- this year we tried having linked 'series' of presentations for the first time; 3 talks about FM residency and 3 talks about sensitive issues planned for February (nicer food than usual, careful advertising) - while the feedback from those who attended the events was excellent, turnout wasn't great - perhaps because we held the events in the evening to allow upper
years to attend (lunch time events are better attended) - we will run the three part sensitive issues series over lunch hour in February, hopefully improving attendance
- secondly - this year we hosted events and invited relevant interest groups to attend, and as a result, interest groups invited us to their relevant events - examples include the women's health interest group, northern and rural medicine interest group and the aboriginal health interest group. Such collaboration meant more events, greater attendance, with less organizing.
**UNIVERSITY of WESTERN ONTARIO**

**Goals for the year**

Goals for FMIG 2010-2011 were to maintain a strong presence in school by holding a number of interesting and well-attended talks and workshops. So far we have accomplished this goal by collaborating with other student groups, our student council, and faculty. We would love to hear about other more interesting activities happening through FMIGs at other medical schools.

**Activities & Events**

Completed activities:

- O-Week Casting Workshop for first year students.
- Bake Sale Fundraiser for Walk For Docs of Tomorrow.
- IUD and Joint Injection workshops for Ontario Medical School Weekend (OMSW).
- PGY3 talk with the head of PGY 3 residency programs at UWO.
- Joint talk with Oncology Interest Group: Why oncology and palliative care.
- FMIG Clinical Skills Day with over 15 doctors and approximately 120 students and over 13 workshops and keynote speaker Dr. Danielle Martin founder of Canadian Doctors for Medicare.

Upcoming Activities:

- Rural Family Medicine with ER *with WEMIG.
- Business of Family Medicine Talk CARMS Family Medicine- a panel of 4th years that matched in family medicine Family Medicine Gala or BBQ with keynote speaker

**Major Successes**

- 1) Through our workshops, talk, and very involved and knowledgeable FMIG execs we have maintained a constant presence in our medical school.
- 2) We have stayed on budget for the year so far thanks to our Co-chairs that have worked closely with Hippocratic council to gain funding for club activities.
- 3) We have pulled off a very smooth and enjoyable CSD with great feedback commenting on the quality of our keynote speaker.
- 4) Co-chairs have a good relationship, work closely, and are in constant communication in order to managed all the duties required of chairs such as, sitting on The Department of Family Medicine Marketing committee and Undergraduate Family Medicine education committee.
- 5) We pulled off a great OMSW event with funding provided by working together with the OBS/GYN group to find pharmaceutical company funding for pelvic models and supplies.

**Challenges**

- 1) The year started over $1000 over budget due to the high cost of casting supplies required to run the orientation week casting session. We spoke to our Hippo Council and class president who thought the session was very valuable and reimbursed our costs. In the future, we will be sure to send a comprehensive transition report to our future exec team to prepare for these costs.
- 2) Many of the doctors that we have used in the past were not available to facilitate our workshops or do our talks. To overcome this we started making a list of past and current facilitators to pass onto the next FMIG team so they have a comprehensive list of facilitators to go to. Our faculty supervisor, Dr. George Kim and his administrative assistant were invaluable for identifying doctors that may be suited for the positions.

**Unique Initiatives**

We plan of holding a banquet style dinner or BBQ at the end of the year so that students may meet and greet family doctors and staff and ask them questions that they are not comfortable discussing in front of a group of students. This will hopefully facilitate students talking with other students, family physicians, and create opportunities to work together.
QUEEN’S UNIVERSITY

Goals for the year - Our FMIG’s goals were to:
- a) Create more opportunities for contact between students and doctors at Queen’s and in the community
- b) Continue our great speaker series
- c) Ensure students know about research opportunities at the Department of Family Medicine
- d) Provide more balanced information to students about rural and city practices (last year, we were very heavy on rural medicine) Through even better communication with the Department, we’ve been able to achieve our first three goals. The last one (ie providing more information about practicing in the city) has been a bit more difficult. It’s hard for us to bring doctors out from Toronto or Ottawa to talk to the group. It would be great if the group could help us brainstorm ways to promote family medicine in the city.

Activities & Events - Speaker Series - Bi-weekly speaker series highlighting the multi-faceted nature of family medicine
- Technical Skills Workshops - Suturing/punch biopsy workshop in the fall, and ABG/IV insertion workshop in the spring, taught by Queen’s Family Medicine residents
- Meet-and-Greet with Department of Family Medicine faculty and residents
- Wine-tasting and “Speed Date” with local family docs and residents
- Rural Bus Tour to a hospital and family health team in a small community (hopefully Picton, Ontario)
- Annual General Meeting of all students attending Queen’s Family Medicine Interest Group
- Junior Co-Chair sits on Undergraduate Education Committee at the Queen’s Department of Family Medicine
- Presentation of research being conducted in Family Medicine at Queen’s to second-year students for their summer research projects

Major Successes - One of our major successes has been to increase communication between Queen’s students and the Department of Family Medicine (DFM). There is a great deal more contact between faculty and students than ever before, and the doctors and residents are more available to mentor undergraduate students. Appointing an FMIG representative to the Undergraduate Education Committee of the DFM has been a great way to communicate with faculty. Also, having the head of research at the DFM come talk to FMIG about summer projects has lead to an increase in interest in family medicine research.
- Our other major successes so far have been our speaker series and technical skills workshops, which are consistently well-attended by students.
- We also started the tradition of an AGM, which was a great way to get feedback and suggestions from students.
- We also have developed a great way of promoting our events, through our website, email list, and Google calendar. The calendar has been especially helpful, as students are able to subscribe and have our events show up in their personal calendar.

Challenges - Our major challenge this year has been scheduling events around doctors schedules and hospital schedules. Our rural bus tour, which was well-attended last year, has already had two false starts because we can’t coordinate student and hospital schedules. The only way we’re able to get around this is to just keep trying. In the same vein, we’ve had wonderful support from the doctors at the DFM, but they, too, are busy people. To ensure we get them out to our events, we let them know well in advance, and have also started using Google Invites in our emails to give them an easy way to RSVP.
- Our other major challenge at Queen’s is that we often skew very rural - we provide a lot of information about becoming rural family doctors, and don’t often highlight practicing in a city setting. We’re cognizant of this bias, and we’ve included more topics in our speaker series that might interest students looking to practice in a city centre.

Unique Initiatives - The Rural Bus Tour that we are running for our second year this year, has been a wonderful event. We take an afternoon trip to a small, rural community, and get a tour of the local hospital and family medicine clinic by community physicians. The students are able to ask questions about practicing in a rural setting, and see first hand the facilities available. The communities and hospitals also see it as a way to recruit students, and are happy to provide a tour.
### UNIVERSITY of TORONTO

#### Goals for the year
- Some of our broad goals were to increase student exposure to family medicine and promote the strengths of family medicine in order to counter some of the negative portrayals of the specialty
  - Wanted to have 5 speakers, 2 clinical skills conferences, 2 socials, mentorship program, "R3" night bringing in speakers who have done +1 vs. 5 years (eg. +1 emerg vs. 5 year emerg), 2 newsletters, and maintain a social networking site
  - Were not able to put on the R3 event, the newsletters, or the social networking site; first semester went well but after the December break, found it hard to get the ball rolling again. In second semester we have found it hard to get students motivated, people value any free time they do have, so getting them to events has been tough.
- Newsletter/social networking sites have been dropped due to time constraints

#### Activities & Events
- Clinical skills conference (October)
- Speaker series (ROMP participants - Sept, Family Doctor w/inner city practice
- Nov
- Rural practice
- Jan
- Resident panel
- March
- Mentorship program (ongoing, matched 50 students)
- Class interest survey in order to cater our events accordingly
- IgFM Social (10 family doctors/residents, attendance of approx. 50 students throughout evening)
- Upcoming clinical skills conference
- April
- Career night

#### Major Successes
- Recent social was an incredible success, feedback was extremely positive
- Clinical skills conferences with formal feedback have been invaluable, many students who had not considered family medicine in the past indicated that they are now considering it

#### Challenges
- Having enough time to follow through on our goals at the beginning of the year
- Competing with other interest groups and clubs for the few days/hours we don't have class scheduled to run events
- Tackling the hidden curriculum in which family medicine can be portrayed in a negative light
- Specialist lecturers portraying family doctors inappropriately

#### Unique Initiatives
- Not sure what is unique, as we aren't sure what other schools have put together
- Clinical skills conference is unique to other interest groups at U of T
**Goals for the year**

- Our biggest goal was to ensure FMIG's contribution to our classmates' exposure to issues in family medicine. We have tried to achieve this through hosting frequent relevant and useful events. We also strive to provide ample opportunity for our classmates to interact with the family medicine community. With the help of McMaster's Department of Family Medicine, we have been able to achieve this through two major annual events, the Family Medicine Open House in November and Wine and Cheese in the spring, which both bring many practicing family residents and physicians and interested students together for interactive discussion.

**Activities & Events**

- Family Medicine Clinical Skills 101: September 2010 *Introduction for first year medical students to clinical skills such as history-taking, vitals, and SOAP notes.
- Family Medicine Open House: November 2010 *Panel of 8 family physicians gave overviews of their respective specialties including palliative care, sports medicine, inner city health, and anesthesiology. A large number of family physicians were available for networking and Q&A following the talks.
- Charting 101: January 2011 *A family medicine resident presented the basics of effective documentation in inpatient, outpatient, and consultative settings.
- Pre-Natal Care Clinical Skills Night: March 2011 *A joint venture with the obstetrics and gynecology interest group, this event will introduce students to the fundamentals of prenatal care through a series of clinical skills stations ranging from "approach to the prenatal visit" to interpretation of a fetal HR strip. This night will also explore the possibilities for providing obstetrical care as part of family medicine practice.
- Family Medicine Wine and Cheese Social: April 2011 *A wine and cheese cocktail reception to give students the opportunity to mingle with family residents and physicians.
- Work-Life Balance: The Life of a Family Physician: September 2011 *An informal question and answer session on the challenges and benefits to life as a family physician
- Supporting Meaningful Behaviour Change: An introduction to behaviour change strategies for family physicians: October 2011 *This session will be designed to give students an introduction to the theory of behaviour change, and introduce practical strategies for physicians using the example of smoking cessation

**Major Successes**

- McMaster FMIG's events have been very well attended this year, with each event reaching near full capacity. We initiated a new event this year, Charting 101, that was very well received by our first-year classmates who are beginning electives without an orientation to effective documentation. We are also hoping to hold additional new events later in the year on work-life balance and strategies for encouraging healthy behaviour change. We are happy to report that there has been excellent collaboration between senior and junior leadership of our FMIG, as we are working on creating established frameworks and guidelines for each incoming year.

**Challenges**

- Our biggest challenge has been finding the time to organize all the events that we would like to see happen. We have had to prioritize those events that we feel we can manage, with priority going to those that are likeliest to have the most benefit to our classmates and those that are able to successfully bring the family medicine community and the McMaster Medicine student body together.

**Unique Initiatives**

- Charting 101: January 2011 *A family medicine resident presented the basics of effective documentation in inpatient, outpatient, and consultative settings.
- Pre-Natal Care Clinical Skills Night: March 2011 *A joint venture with the obstetrics and gynecology interest group, this event will introduce students to the fundamentals of prenatal care through a series of clinical skills stations ranging from "approach to the prenatal visit" to interpretation of a fetal HR strip. This night will also explore the possibilities for providing obstetrical care as part of family medicine practice.
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- Supporting Meaningful Behaviour Change: An introduction to behaviour change strategies for family physicians: October 2011 *This session will be designed to give students an introduction to the theory of behaviour change, and introduce practical strategies for physicians using the example of smoking cessation
## Goals for the year
- Membership! We know we should focus on med 1’s and premeds as they are accepted but it's difficult to establish that kind of communication when we're in our clerkship years with the incoming students. This leads to inconsistent activities because there are not enough people to plan/lead them.

## Activities & Events
- Family Medicine Symposium for Students Involvement in initiative for Quebec family medicine journal for students Upcoming “speed dating” and skills workshop and rural family medicine visit

## Major Successes
- Collaboration with other FMIGs in Quebec to put on Symposium and help with provincial online publication for students

## Challenges
- Lack of members and programming (clubs day for recruitment of members on Feb 2 will hopefully bring in new members)

## Unique Initiatives
- Rural family medicine visit
**UNIVERSITÉ de MONTRÉAL**

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<th>Goals for the year</th>
<th>- Add at least one new activity to the traditional events organized by the FMIG (done!)</th>
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### Activities & Events

**Mtl Campus:**
- McGill Symposium - Conference with Dr. Rivard: chief of critical care (hôpital Pierre-Boucher)
- Conference with Dr.Léger: family physician (women's care: obstetric and gynecology)
- The speed dating type of dinner (Souper-Mentorat): 75 med students
- The skills Day will be taking place on February 24.
- another Souper-Mentorat on March 28
- 3 more conferences at the satellite campus

**Trois-Rivières:**
- Conference with Dr. Leclerc, family doctor part of the Canadian Olympic Medical Team at the Vancouver Olympic Games.
- The first ever Medcrawl organized in Trois-Rivières
- The skills Day will be taking place on March 7.
- The speed dating type of dinner (Souper-Mentorat) will be held during the month of May.
- We will also try to have 2 more conferences.

### Major Successes

**Mtl Campus:**
- Our two first conference were very popular (150 students each) - we had to do a waiting list for the Souper-Mentorat and all the comments were very positive

**Trois-Rivières:**
- We have been able to recruit students from each class to be part of the organizing committee.
- We have hosted one conference during which Dr. Leclerc, family doctor part of the Canadian Olympic Medical team, came to talk to us.
- We organized a brand new activity called The MedCrawl during which we visited 4 different clinics. Each of them has a different organization system (GMF, UMF, polyclinic, coop)
- The Skills Day which will be taking place on March 7, will have 2 workshops held at the anatomy laboratory, a first in the FMIG history.

### Challenges

**Mtl campus:**
- We have difficulty finding available physicians for our Skills day and Souper-Mentorat.
- We also have difficulty finding medical supply for our Skills day
- We have difficulty finding dates that fit with the pre-meds, 1st year and 2nd year schedules.

**Trois-Rivières:**
- We have difficulty finding available physicians to participate at our conferences. We asked the CMFQ (family med college QC) to help us out
- We have difficulty finding dates that fit with the pre-meds, 1st year and 2nd year schedules.
- Doodle doc for the committee members of each class

### Unique Initiatives

**Mtl Campus:**
- For the first time this year, we're doing two speed dating event (Souper-Mentorat) at the satellite campus: - We organized a brand new activity called The MedCrawl during which we visited 4 different clinics. Each of them has a different organization system (GMF, UMF, polyclinic, coop) - We will have an anatomy lab component added to our skills day.
## Goals for the year
- Essayer d’améliorer nos différentes activités avec les commentaires de l’an passé. Concernant le repas des conférences-midi, pizza n’a pas été appréciée par tous les étudiants car perçu moins nutritif. Retour à l’ancienne méthode biscuit-jus??? À discuter pour l’an prochain Trouver d’autres régions pour la petite séduction. Projet qui est toujours très apprécié par les étudiants Mise en place d’un comité pour le journal d’étudiant

## Activities & Events
- Concours «La Petite séduction»
- Les régions invitent les étudiants pour une fin de semaine afin que ces derniers puissent à découvrir la réalité de la pratique de la médecine familiale en région
  - visiter le centre de santé régional
  - participer à des activités à saveur régionale
  - 4 gagnants par région
  - Midi-conférences
  - sur l’heure du midi
  - écouter et échanger avec des médecins œuvrant dans différents domaines de la médecine familiale
  - Cette année : Médecine d’urgence
  - (Automne 2010), médecine sportive et médecine d’aventure
  - (hiver 2011) • Soirées d’habiletés cliniques - exposés à plusieurs gestes techniques qu’effectue un médecin de famille - théorie et pratique o Les ateliers que nous offrons sont
  - Point de suture
  - Prise en charge des voies aériennes
  - Technique d’accouchement
  - Vaccination
  - Souper-causerie
  - 8 février 2011
  - souper au cours duquel les étudiants ont la chance de discuter et échanger avec des médecins de famille et des résidents en médecine familiale o des tables de 5 étudiants reçoivent, à chacun des 3 services du repas
  - Conférence à table
  - 150 étudiants ont la chance d’assister à une série de conférences sur des sujets d’actualité et des mythes o Programme en 2011
  - Processus d’admission en résidence
  - Par résident et un jeune patron
  - Louis Godin, président de la FMOQ
  - Projet de revue dans le Globe and Med o Informer les étudiants des activités du GIMF
  - Publier les expériences de la Petite Séduction

## Major Successes
- Midi-conférences
- Salle pleine
- Commentaires positifs par rapport au conférencier et sujet abordé
- Demandes des étudiants pour médecine sportive Concours «La Petite séduction»
- De nombreuses régions sont intéressées par le projet: Une nouvelle région a confirmé sa participation : Baie-Comeau 2 régions seront offerts aux étudiants cette session
- Soirées d’habiletés cliniques - Ceux qui ont participé ont beaucoup aimé leur expérience o Expérience unique pour découvrir le Centre Apprentis
- Installation pour simuler l’environnement hospitalier (e.g. mannequins, machines pour faire des stimulations)

## Challenges
- Soirées d’habiletés cliniques - Moins populaires (40 places vs. 43 inscription) - Difficulté à varier les gestes techniques, répétitifs.- Proposition de solution: Faire deux gestes techniques par soirée au lieu de 4 o Manque de publicité ? Manque de budget
- Midi-conférence = Difficulté à trouver des repas pas chers, mais nutritifs - Proposition de solution: Possibilité de juste servir biscuit et jus au lieu de repas - Risque que l’activité soit
moins attirante compte tenu des expériences de l’an passé et des autres activités des autres comités qui ne servent pas de lunch à l’heure du midi (conférence sur violence fait aux femmes)
- Recrutement MD dans des domaines de pratique différents dans la région de QC - Exemple : Médecin d’aventure

| Unique Initiatives | - La petite seduction |
**UNIVERSITÉ de SHERBROOKE**

| Goals for the year | Offer more activities and have a high percentage of participation  
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<th></th>
<th>Accomplish the organization of the symposium</th>
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| Activities & Events | 2011-01-17 – Conference : diversity, studies, schedule, family vs practice...  
|                    | 2010-02-07 – Conference : international medicine  
|                    | 2011-03 – Clinical skills : blood gaz, vaccination, suture - 2011-05 – Clinical skills : CPR, AED  
|                    | Planning of the third symposium étudiant sur la médecine familiale Parrainage médecin de famille-étudiant  
|                    | Planning the next clinical skills sessions |

| Major Successes | We have reorganized the group's functioning  
|                | We have doubled the number of members  
|                | We have doubled the number of activities. |

| Challenges | Not knowing the availability of the physicians more than two to three weeks in advance makes it hard to organize the activities. (we are working on it)  
|            | It is hard to organize in group an event that will welcome approximately 400 students |

| Unique Initiatives | Conference on intensive care that includes the vision of a patient (a woman who had breast cancer, then a generalized cancer and has been miraculously healed) and the one of a family physician  
|                    | Collaborate with the other GIMF to create an electrical journal with the collaboration of the FMOQ |
**DALHOUSIE UNIVERSITY**

**Goals for the year**
- Increase student membership and interest – We are happy with the number of FMIG members and all events have been well attended. (60+ members)
- Increase awareness of the diversity of Family Medicine, and promote Family Medicine as a career choice – We are aiming to do so through our events but would like to hear ideas of different types of events/new ideas. Students are becoming less enthusiastic about speakers but also are too busy for time-consuming events.
- Dispel some of the myths and misconceptions of Family Medicine

**Activities & Events**

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<tr>
<th>To Date:</th>
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<tbody>
<tr>
<td>“Everything About Family Medicine” – Informal panel discussion with several Clerks, Residents and Family Physicians</td>
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<tr>
<td>Table at Dal Med Society’s Night</td>
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<tr>
<td>Visit with CFPC President Dr. Rob Boulay – included a talk, Q&amp;A session and food</td>
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<tr>
<td>Skills night – pap smear, ENT exam, suturing</td>
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<tr>
<td>Several members attended the FMF and the NS College of Family Physicians AGM</td>
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<tr>
<td>Monthly executive meetings</td>
</tr>
</tbody>
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Future plans:
- Presentation by MD management on managing the business side of family practice
- Overnight trip to a rural health authority for a hospital tour, skills sessions, dinner/social with Family Physicians

**Planned events**
- Dining with Docs
- CaRMS wine and cheese
- another skills session

**Major Successes**
- Great participation especially from Med Is (3 Med 1 reps on our committee this year!)
- Good variety of events so far
- Several students not part of FMIG exec attended the FMF
- Generating interest in family medicine amongst our colleagues through our enthusiasm and great events :)

**Challenges**
- Creation of DMNB campus in Saint John, NB and finding a way to foster interest in the class for family medicine. Trying to encourage them to hold similar events as ours and to videoconference several events.
- Finding common time available for events with med 1s and 2s
- “Competing” with other societies/interest groups for event times, locations and participants
- Overcoming misconceptions surrounding Family Medicine

**Unique Initiatives**
- Last year: Involvement in the current curriculum renewal. Members of our exec have been pushing for an increase in early Family Medicine exposure during 1st and 2nd year, and an Longitudinal Integrated Clerkship
- This year we are going to try and follow up on how successful our initiatives were and if they were well received amongst students!
MEMORIAL UNIVERSITY

**Goals for the year**
- The main goals of our FMIG for this year are:
  - To initiate the Mentorship Program, Care Continuum Program and CaRMS Night for the first time.
  - To continue the success and expansion of Fridays with Family and other ongoing FMIG initiatives.
  - To expand Procedure’s Day to include more stations and allow more students to participate.

**Activities & Events**
- Current activities:
  - Fridays with Family (Oct 2010-June 2011) FWF is a weekly hour long lunchtime session in which different family physicians give an informal talk about their own practices and roles in the community.
  - Family Medicine Wilderness Weekend (September 2010) The Wilderness Weekend was meant to serve as an introduction to the FMIG by bringing pre-clerkship students into the wilderness for a weekend of camping and wilderness First AID. Unfortunately, Hurricane Igor had other plans and the event was canceled the day before we were scheduled to leave.
  - Family Medicine Information Night (Nov 17, 2010) Information Night is a well attended annual event that introduced students to the many facets of family medicine by introducing various career paths within the discipline including emergency medicine, obstetrics and research. Introductions to Memorial's Family Medicine Residency Program and other programs by residents themselves are also a big part of the night.
  - Charity (Dec 2010) MUN's FMIG has also been active in charity involvement through conducting Christmas drives for Choices For Youth, a local charity supporting disadvantaged youth.
  - Procedure's Day (April 30th, 2011) Procedure's Day is an annual event where pre-clerkship students are introduced to minor office procedures in small groups under the guidance of family medicine residents and faculty. Some examples include blood drawing, suturing, injections, punch biopsies etc.

- **New initiatives:**
  - Family Medicine Mentorship Program Our FMIG is striving to put together a mentorship program similar to those at other Canadian medical schools. It will link a few interested 1st year students with FM faculty member and resident and serve to open the lines of communication for questions, advice and possibly shadowing.
  - Family Medicine Care Continuum Program AKA the "Babies, Babies, Babies" Program, this will serve as an opportunity for 2nd year students to sit in on 3 consecutive Well Baby visits with the same child. Thus, the program differs from conventional shadowing in that its purpose is to enthuse students about family medicine through exposing them to one of the discipline’s most attractive assets, continuity of care, as opposed to just clinical exposure.
  - CaRMS Night We are also planning a CaRMS Night, which will be open to all 4 years, in which family medicine faculty and residents will speak to all students about the CaRMS application process, with emphasis on Family Medicine at Memorial.

**Major Successes**
- 1) Fridays with Family has been a pillar in pre-clerkship student's schedules for years. The only difference this year is that interest has increased from an average of 45 students/week to almost 70 students/week. We try to include students in the selection of topics as best we can and feedback has been very positive. Furthermore, the majority of speakers are physicians from the community, very often rural physicians in town for one reason or another, as well as faculty members.
- 2) Family Medicine Information Night was another success this year with over half of pre-clerkship students attending. A light meal was provided and talks were given on Memorial and Dalhousie’s Family Medicine Residency Program as well as Memorial's Northern Family Medicine Education Program and a talk on financial issues concerning medical student's and young family physicians.
- 3) This year the FMIG raised over $200 as well as various clothing and toiletry items for Choices for Youth, a local charity that supports underprivileged youth in St. John’s.
- 4) The FMIG has created a new website and logo and will be launching it in the near future. We are excited about this new opportunity for students to stay connected with the FMIG and hope it will be an effective resource for undergraduate medical students interested in Family
**Challenges**

- Our major challenges have been inevitable roadblocks that come with new initiatives such as the Mentorship Program, Care Continuum Program and CaRMS Night. For example, one such issue is a matter of scheduling the Family Medicine Care Continuum Program around pre-clerkship schedules and faculty schedules. Coordinating the schedules of the faculty member, student and (most importantly) the baby has proven difficult. However, we are working on the issue and may possibly be able to use lunchtime and evening (i.e last appointment of the day) sessions.
- The second major challenge has been incorporating the new position Treasurer into the FMIG. In the past, finances were handled equally by the members of the FMIG Executive and its administrative liaisons with the faculty of family medicine. This year is the first year that an official treasurer, whose sole responsibility is to manage the FMIG’s finances, was named. Our new treasurer has managed to organize the FMIG’s finances and create a single, simple system to keep track of all financial activities allowing more accountability and transparency.

**Unique Initiatives**

- Fridays With Family (also see in "FMIG Activities" section above) FWF is really the heart of our FMIG events. By supplying interesting topics as diverse as "International Electives in Family Medicine" to "Neurological Jeopardy" to "House Call Stories", a healthy mix of physicians from rural and urban practices and yes, a light lunch, an average of 55% of pre-clerkship students attend every week. This keeps family medicine on everyone’s mind and opens the doors for informal discussion on issues that are important to medical students preparing to choose a career path.
- Family Medicine Care Continuum Program (also see in "FMIG Activities" section above) Despite scheduling issues, we are eager to get this initiative off the ground. One of the greatest attractions to family medicine is the opportunity to form relationships with patients as they grow. Thus, by allowing students to take part in sequential Well Baby visits, a period in which a person grows and changes dramatically in a short period of time, we hope to give a glimpse of one of the joys of family medicine and hopefully cement family medicine as a potential career choice in young medical students.
- Other unique initiatives include the Family Medicine Wilderness Weekend, the Family Medicine CaRMS NIGHT and a biannual contribution to the Annual Memorial-Acadia-Dalhousie Conference in the form of an Office Procedure’s session much like Procedure’s Day.