

THE COLLEGE OF
FAMILY PHYSICIANS
OF CANADA



LE COLLÈGE DES
MÉDECINS DE FAMILLE
DU CANADA

CFPC Board of Directors Decisions/Directions and Impacts

SEPTEMBER 25–26, 2016

STRATEGIC THEME 1: PRODUCING FAMILY DOCTORS WHO MEET SOCIETAL NEEDS THROUGH A COMMITMENT TO CONTINUING COMPREHENSIVE CARE

Directions and actions to improve rural and remote health care

The Advancing Rural Family Medicine: The Canadian Collaborative Taskforce is aimed at enhancing and supporting medical education—undergraduate, postgraduate, and continuing medical education—and increasing interest among learners to choose the practice of rural family medicine. The recommendations are a guide to influence collective action in education, practice, policy, and research. Once the 20 supporting actions are confirmed, they will be used to launch “Canada’s Rural Road Map for Action” in winter 2017.

RURAL FAMILY MEDICINE RECOMMENDATIONS:

THAT the Board approve the recommendations document titled: “Advancing Rural Family Medicine: The Canadian Collaborative Taskforce Directions for Action”.

STRATEGIC THEME 4: PROVIDING THE ORGANIZATIONAL CAPACITY TO MEET OUR STRATEGIC GOALS AND OBJECTIVES

The CFPC’s privacy policy

The CFPC is committed to protecting the privacy and security of the personal information of our members and non-member Mainpro+® participants. As part of that commitment, the CFPC has updated and implemented a privacy policy. To ensure members are aware of their rights the policy will be made available on the CFPC website.

PRIVACY POLICY

THAT the revised Privacy Policy as it relates to members be approved and posted on the CFPC website.

The introduction of resource groups

The Governance Advisory Committee (GAC) is responsible for ensuring the effectiveness of CFPC's committees, including its working groups. The GAC is in the process of adding clarity to how committees are defined, established, and monitored. Going forward, the resource group establishment criteria will guide the development of backgrounders and the terms of reference for resource groups will be reviewed by the CFPC's CEO.

APPROVAL OF TERMS OF REFERENCE FOR RESOURCE GROUPS

THAT approvals of Terms of Reference for further Resource Groups that do not report to the Board, be delegated to the CEO to approve.

Committee and section chair roles

All members approved by the Board as committee or section chairs have confirmed they wish to accept the position. Their term as chair will commence on November 10th, 2016, at the Annual Meeting of Members.

New appointments:

Dr Andrew MacPherson	Chair, Committee on Examinations – Emergency Medicine (2016–19)
Dr Lisa Graves	Chair, Committee on Examinations – Family Medicine (2016–19)
Dr Stephen Hawrylyshyn	Co-Chair, Family Medicine Forum Advisory Committee (2016–19)
Dr Leslie Griffin	Co-Chair, Family Medicine Forum Advisory Committee (2016–19)
Dr Anne DuVall	Chair, Governance Advisory Committee (2016–19)
Dr Patricia Mirwaldt	Chair, Mental Health Program Committee (2016–19)
Dr Clayton Dyck	Chair, Global Health Program Committee (2016–19)
Dr Martin Fortin	Chair-Elect, Section of Researchers (2016–17)
Dr James Goertzen	Chair-Elect, Section of Teachers (2016–17)

Chair renewals:

Dr David Gass	Chair, Advisory Committee on Family Practice (2016–19)
Dr Sharon Cirone	Chair, Addiction Medicine Program Committee (2016–19)
Dr Christie Freeman	Chair, Family Practice Dermatology Program Committee (2016–19)

Chair Extensions:

Dr Bill Sullivan	Chair, Ethics Committee (2016–17)
Dr Joyce Zazulak	Chair, History and Humanities in Family Medicine Committee (2016–17)
Dr Kathy Lawrence	Chair, Nominating Committee (2016–2017)
Dr Allyn Walsh	Chair, Faculty Development Education Committee (2016–17)
Dr Jeff Sisler	Chair, Family Practice Cancer Care Program (2016–17)

CHAIR – COMMITTEE ON EXAMINATION – EMERGENCY MEDICINE

THAT Dr Andrew MacPherson of Victoria, British Columbia be approved as Chair of the Committee on Examination – Emergency Medicine for a three year term beginning at the time of the 2016 Annual Meeting and ending at the time of the 2019 Annual Meeting, renewable once.

CHAIR – COMMITTEE ON EXAMINATION – FAMILY MEDICINE

THAT Dr Lisa Graves of Ancaster, Ontario be approved as Chair of the Committee on Examination - Family Medicine for a three year term beginning at the time of the 2016 Annual Meeting and ending at the time of the 2019 Annual Meeting, renewable once.

Co-CHAIR – FAMILY MEDICINE FORUM COMMITTEE

THAT Dr Stephen Hawrylyshyn of Toronto, Ontario be approved as Co-Chair of the Family Medicine Forum Committee for a three year term beginning at the time of the 2016 Annual Meeting and ending at the time of the 2019 Annual Meeting, renewable once.

Co-CHAIR – FAMILY MEDICINE FORUM COMMITTEE

THAT Dr Leslie Griffin of Bedford, Nova Scotia be approved as Co-Chair of the Family Medicine Forum Committee for a three year term beginning at the time of the 2016 Annual Meeting and ending at the time of the 2019 Annual Meeting, renewable once.

CHAIR – GOVERNANCE ADVISORY COMMITTEE

THAT Dr Anne DuVall of Barrie, Ontario be approved as Chair of the Governance Advisory Committee for a three year term beginning at the time of the 2016 Annual Meeting and ending at the time of the 2019 Annual Meeting, renewable once.

CHAIR – MENTAL HEALTH PROGRAM COMMITTEE

THAT Dr Patricia Mirwaldt of Vancouver, British Columbia be approved as Chair of the Mental Health Program Committee for a three year term beginning at the time of the 2016 Annual Meeting and ending at the time of the 2019 Annual Meeting, renewable once.

CHAIR – GLOBAL HEALTH PROGRAM COMMITTEE

THAT Dr Clayton Dyck of Winnipeg, Manitoba be approved as Chair of the Global Health Program Committee for a three year term beginning at the time of the 2016 Annual Meeting and ending at the time of the 2019 Annual Meeting, renewable once.

CHAIR-ELECT – SECTION OF RESEARCHERS

THAT Dr Martin Fortin of Chicoutimi, Quebec be approved as Chair-Elect of the Section of Researchers for one year beginning at the time of the 2016 Annual Meeting;

FURTHER THAT he become the Chair of the Section of Researchers at the time of the 2017 Annual Meeting for a three year term ending at the 2020 Annual Meeting;

FURTHER THAT he become the Past Chair for a two year term ending at the time of the 2022 Annual Meeting.

CHAIR-ELECT – SECTION OF TEACHERS

THAT Dr James Goertzen of Thunder Bay, Ontario be approved as Chair-Elect of the Section of Teachers effective immediately until the time of the 2017 Annual Meeting;

FURTHER THAT he become the Chair of the Section of Teachers at the time of the 2017 Annual Meeting for a three year term ending at the 2020 Annual Meeting;

FURTHER THAT he become the Past Chair for a 1.5 year term ending May 2022.

Chair Renewals

CHAIR RENEWAL – ADVISORY COMMITTEE ON FAMILY PRACTICE

THAT the term of Dr David Gass of Halifax, Nova Scotia be renewed for a second term as Chair of the Advisory Committee on Family Practice, ending at the time of the 2019 Annual Meeting.

CHAIR RENEWAL – ADDICTION MEDICINE PROGRAM COMMITTEE

THAT the term of Dr Sharon Cirone of Etobicoke, Ontario be renewed for a second term as Chair of the Addiction Medicine Program Committee, ending at the time of the 2019 Annual Meeting.

CHAIR RENEWAL– FAMILY PRACTICE DERMATOLOGY PROGRAM COMMITTEE

THAT the term of Dr Christie Freeman of Peterborough, Ontario be renewed for a second term as Chair of the Family Practice Dermatology Program Committee, ending at the time of the 2019 Annual Meeting.

Chair Extensions

CHAIR EXTENSION – ETHICS COMMITTEE

THAT the term of Dr Bill Sullivan of Thornhill, Ontario be extended as Chair of the Ethics Committee, ending at the time of the 2017 Annual Meeting of Members.

CHAIR EXTENSION – HISTORY & HUMANITIES COMMITTEE

THAT the term of Dr Joyce Zazulak of Dundas, Ontario be extended as Chair of the History & Humanities Committee, ending at the time of the 2017 Annual Meeting of Members.

CHAIR EXTENSION – NOMINATING COMMITTEE

THAT the term of Dr Kathy Lawrence of Regina, Saskatchewan be extended as Chair of the Nominating Committee, ending at the time of the 2017 Annual Meeting of Members.

CHAIR EXTENSION – FACULTY DEVELOPMENT EDUCATION COMMITTEE

THAT Dr Allyn Walsh of Hamilton, Ontario be the first Chair of the Faculty Development Education Committee, as it transitions from a working group to a committee, extending to the time of the 2017 Annual Meeting.

CHAIR EXTENSION - FAMILY PRACTICE CANCER CARE PROGRAM COMMITTEE

THAT Dr Jeff Sisler of Winnipeg, Manitoba be extended as Chair of the Family Practice Cancer Care Program Committee until April 1, 2017, to accommodate commitments of his successor.

The CFPC's unaudited statement of revenue

The unaudited financial statement for the 12 month period ending on May 31, 2016, has been accepted.

UNAUDITED STATEMENT OF REVENUES AND EXPENSES AND INVESTMENT REPORT

THAT the unaudited financial statements for the 12 months ending 31 May 2016 be accepted as presented.

**STRATEGIC THEME 6:
SEIZING ALL OPPORTUNITIES TO BUILD CAPACITY
IN FAMILY MEDICINE RESEARCH**

Supporting primary health care through research and innovation

The CFPC is committed to advancing primary care research in Canada. As such, the CFPC will be working in collaboration with the William Hogg Consulting Corporation to explore the potential of establishing a Canadian Primary Health Care Research Institute. A formal business case will be shared with the CFPC's Board in October 2017.

CANADIAN PRIMARY HEALTH CARE RESEARCH INSTITUTE

THAT William Hogg Consulting Corporation be hired to assist CFPC to develop the necessary partnership and to plan a Canadian Primary Health Care Research Institute.

STRATEGIC THEME 7: INFLUENCING THE HEALTH POLICY ENVIRONMENT TO PROMOTE HIGH QUALITY CARE IN FAMILY PRACTICE

Supporting family physicians with medical aid in dying resources

With Bill C-14 becoming law on June 16, 2016, medical assistance in dying is a new reality facing family physicians in Canada. The CFPC understands the importance of this change and is working to support its family physician members through education, advocacy and training. The CFPC will be implementing a new resource group to support this effort. The resource group will serve in advisory capacity, to inform and support CFPC activity on the medical assistance in dying file using a family medicine lens. The group will consult with other existing and related CFPC groups and committees, as well as CFPC's provincial chapters.

MEDICAL ASSISTANCE IN DYING RESOURCE GROUP

THAT the Terms of Reference for the Medical Assistance in Dying Resource Group be approved as presented.

Supporting medical abortion in Canada

The CFPC has issued a formal statement to recognize abortion as a medical procedure that is safely and routinely provided in Canada, and further acknowledges the rights of Canadian women to have access to safe abortion services.

STATEMENT REGARDING ABORTION

THAT the College issue the following statement regarding abortion:

The College of Family Physicians of Canada (CFPC) recognizes that abortion is a medical procedure safely and routinely provided by family physicians across Canada, both in clinics and in hospitals. We recognize the importance of providing education and training options for family medicine residents around pregnancy options counselling and support family physicians who choose to include abortion provision in their scope of practice. The College acknowledges the right of Canadian women to access safe abortion services from qualified providers. The CFPC opposes any action by family physicians that would result in the abandonment of a patient or failure to refer to another appropriate care provider for such care.

Canadian Nurses Association request

The Canadian Nurses Association (CNA) has requested the CFPC's support on the removal of federal legislative blocks that currently pose obstacles for nurse practitioners. The CFPC supports professionals working to their scope of practice, but does not lobby on behalf of another profession. The CFPC continues to share a common interest with the CNA—to strengthen and improve access to primary care for patients.

CANADIAN NURSES ASSOCIATION REQUEST

THAT regarding the Canadian Nurses Association (CNA) request for the CFPC to support the removal of federal legislative barriers to Nurse Practitioner (NP) practice, namely authorizing NPs to:

- a) Complete forms related to
 - (i) Canadian Pension Plan Disability Benefit
 - (ii) Income Tax Act/Regulations
 - (iii) Employment Insurance Act/Regulations

- b) Distribute drug samples,

the CFPC shares its common interest in improving access to primary care for Canadians and its appreciation for the impact this could have for people who have their primary care provider as an NP; the CFPC shares its support for best practices for patient care and collaboration with the CNA to strengthen primary care;

FURTHER THAT the CFPC supports professionals working to their scope of practice. Given the variations in local context and evolving models of interdisciplinary team-based care the CFPC does not lobby for another profession's scope of practice.

Leadership in prison health and social justice

The CFPC supports equality of primary care and access to care for all Canadians including incarcerated populations. The CFPC and its Prison Health Program Committee call for the transfer of responsibility for the health of incarcerated populations to the provincial Ministries of Health, away from Ministries of Justice. The Prison Health Program Committee, in collaboration with the Health Policy and Government Relations department, will coordinate an approach to federal and provincial ministries.

STATEMENT REGARDING PRISON HEALTH

THAT the College adopts the Position Statement on Health Care Delivery prepared by the Prison Health Program Committee calling for the transfer of responsibility for the health of incarcerated populations to Ministries of Health, away from Ministries of Justice.

Advocating improved access to primary care for Indigenous populations

The CFPC supports the recent Canadian Human Rights Tribunals' ruling concerning the Federal government's implementation of the full Jordan's Principle. The report is a child-first approach that addresses the needs of First Nations children living on reserve with a disability or a short-term condition. The CFPC advocates for the delivery of high-quality care for Canada's Indigenous population.

JORDAN'S PRINCIPLE

THAT the College lends support to the Canadian Human Rights Tribunal ruling concerning the immediate implementation of Jordan's Principle and advocate for the Principle's adoption in all Canadian healthcare jurisdictions.

Supporting the Patient's Medical Home

The Patient's Medical Home (PMH) steering committee provides strategic direction, establishes policies, and evaluates the effectiveness of activities related to the PMH. The committee's work is championed by a diverse group of engaged members. It is recommended to expand the PMH steering committee to include one representative each from British Columbia and Quebec. Representatives from these two provinces are suggested based on the current PMH implementation experiences from these provinces, and the impact they lend to the "lessons learned" aspect.

PATIENT'S MEDICAL HOME STEERING COMMITTEE

THAT the Board support expansion of the Patient's Medical Home Steering Committee to include two additional physician members: one from British Columbia and one from Quebec.

Please feel free to contact us at jenniferhall@cfpc.ca, flemire@cfpc.ca, or Sarah Scott, Director of Governance and Strategic Planning at sscott@cfpc.ca, if you have any questions.

Jennifer Hall, MD, CCFP, FCFP
President and Chair of the June 2016 Board meeting

Francine Lemire, MD CM, CCFP, FCFP, CAE
Executive Director and Chief Executive Officer

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