

His next proposal is to resist regulating physician mobility. Consequently, the prospects of recruiting family physicians to rural areas grow dimmer all the time. I hope governments will soon realize that increasing student numbers is futile when fewer and fewer medical students (28% in 2001)⁵ are choosing family medicine as their first choice for a residency program.

In recent years an increasing number of graduates of family medicine programs have decided not to practise as traditional family physicians. Of those who do, an inadequate number are willing to live and practise outside large urban centres with medical schools. Instead of resolving the rural family physician shortage, the problem escalates. The answer to this scenario is not clear, but if lifestyle goals prompt medical students to reject family medicine and prompt new family medicine graduates to reject practising as traditional family physicians, especially in

rural areas, what options do governments have?

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References

1. Borkenhagen RH. Walk-in clinics and time management. Fresh insights as family practices adapt [editorial]. *Can Fam Physician* 2002;48:437-9 (Eng), 446-9 (Fr).
2. Barnsley J, Williams AP, Kaczorowski J, Vayda E, Vingilis E, Campbell A, Atkin K. Who provides walk-in services? Survey of primary care practices in Ontario. *Can Fam Physician* 2002;48:519-26.
3. Brown JB, Sangster Bouck LM, Østbye T, Barnsley JM, Mathews M, Ogilvie G. Walk-in clinics in Ontario. An atmosphere of tension. *Can Fam Physician* 2002;48:531-6.
4. Chan BTB. The declining comprehensiveness of primary care. *Can Med Assoc J* 2002;166(4):429-34.
5. Banner S. *CaRMS residency match report 2001*. Ottawa, Ont: Canadian Resident Matching Service; 2001.

Residents as teachers: time for formal training

In the February 2002 issue of *Canadian Family Physician*, Dr Gutkin¹

addresses some of the misconceptions students have about family physicians. He refers to the new opportunities that “might” exist in family medicine for students interested in teaching as part of their careers.

In fact residents already have this opportunity to teach during their post-graduate training in family medicine. Residents play an influential role in educating medical students.^{2,5} They not only model the professionalism and skills demanded by their specialties, they also are enthusiastic and understand the developmental stage of medical students or junior team members.² Family medicine residents (FMRs) have a unique opportunity to teach their juniors while modeling the four principles of family medicine.⁵

At most, if not all, medical schools, FMRs teach medical students and junior residents both on and off service. At the University of Toronto in Ontario, on-service teaching and

mentoring opportunities for FMRs have been recognized as minimal; hence efforts are under way at the teaching units to increase FMR-student contact. Dr Gutkin also states that “the number of medical graduates selecting family medicine for their careers has been decreasing”; therefore mentoring will become increasingly important in overcoming declining interest. To further explore the role of FMRs, a resident project has just been completed through the Department of Family and Community Medicine at the University of Toronto, characterizing residents’ teaching experiences and perceived needs and interests around teaching.⁶

This study was initiated when Royal College of Physicians and Surgeons of Canada (RCPSC) residents were given an opportunity to take teaching skills workshops at the University of Toronto.⁷ This opportunity was stimulated by an RCPSC requirement that residents be allowed to learn how to teach.⁸ A number of studies and pilot projects have looked at the benefit and use of workshops that employ the principles of adult learning in teaching residents to teach, but only a few have included FMRs. A submission was prepared for the Canadian Cancer Society/Educating Future Physicians for Ontario Project on teaching communication skills, detailing a successful experience teaching residents, including FMRs, to teach.⁹ Overall, the results have been encouraging both in evaluations of the workshops and feedback provided by medical students assessing their “own” residents.^{2,5,9}

Currently the College of Family Physicians of Canada does not have a statement on FMRs as teachers. We recommend that the College consider revising the standards of accreditation and include a requirement that programs offer opportunities for FMRs to develop their teaching skills. As more and more FMRs choose to do additional years of training as clinical fellows, their roles as senior residents and teachers will likely increase. Upon graduation, residents choosing to become faculty will continue to teach in ambulatory clinics and teaching practices in underserved and rural areas. We should be providing the essential teaching skills in the form of training workshops to FMRs in all postgraduate programs in Canada, to meet current and future career needs.

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References

1. Gutkin C. Perceptions and realities. What students need to know about family practice [Vital Signs]. *Can Fam Physician* 2002;48:423-4 (Eng), 422-3 (Fr).
2. Steward DE, Feltovich PJ. Why residents should teach. In: Edwards JC, Marier RL, editors. *Clinical teaching for medical residents*. New York, NY: Springer Publishing Co; 1988. p. 3-14.
3. Bing-You RG, Tooker J. Teaching skills improvement programs in US internal medicine residencies. *Med Educ* 1993;27:259-65.
4. Schwenk TL, Whitman N. *Residents as teachers: a guide to educational practice*. Salt Lake City, Utah: University of Utah School of Medicine; 1993.
5. Weston W. *How to teach communication skills to clinical clerks: a workshop for faculty and residents*. London, Ont: University of Western Ontario; 1999.
6. Kumar B. *An innovative approach to family medicine resident teaching skills: training for present and future careers*. Toronto, Ont: University of Toronto; 2002.
7. Rachlis A, Murnaghan J, Rothman A, Byrne N, Wilson D. *Evaluation of a “Teaching Residents to Teach” program*. Oral presentation at Ontario Medical Education Network (OMEN) Research Symposium. University of Toronto; 2000.
8. Royal College of Physicians and Surgeons of Canada. *General standards of accreditation* [monograph on-line]. Ottawa, Ont: Royal College of Physicians and Surgeons of Canada; 1987 [revised 1997]. Available from: http://rcpsc.medical.org/english/residency/accreditation/genstandards_e.html#generalb. Accessed 2002 May 2.
9. Kumar B, Weston W. *A resident and faculty teaching skills workshop using standardized medical students: a focus on communication skills training in the clerkship* [draft]. 1999.

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