

Helping to prepare future physicians

Every family physician's responsibility?

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There have been considerable changes in medical education and medical student demographics during the past decade. Many measures have been designed both to increase the primary care medical labour force and also to improve distribution inequities. The College of Family Physicians of Canada (CFPC) plays an active role in lobbying decision makers to take concrete steps toward facilitating improvements in both of these directions, including increasing the appeal of our discipline. This, of course, puts substantial pressure on training programs.

Given this, there are few practising physicians who will not be involved in medical training. The Hippocratic Oath commits every physician to pass on medical knowledge or skills to future generations, yet we sometimes hear colleagues making such comments as "I don't see myself as a teacher In fact, I chose to practise where teaching is not required."

For some of us, it might be that we lack awareness of the various ways in which family physicians can contribute. In fact, there are many opportunities to have an effect on recruitment and training of future family physicians. Each of us can find a niche where we are comfortable getting involved.

Finding your niche

Helping to promote family medicine to future physicians. It is not necessary to provide traditional teaching to get involved in promoting the discipline. We all know that our work is misunderstood by some members of the general public (some still think that it consists primarily of referring patients to "specialists" after a cursory examination), as well as by our colleagues in the other specialties, and consequently by medical students. Medical students are always amazed when they gain a better understanding of our discipline's unique characteristics and of the scope of the areas we cover and the range of care we provide (including procedures).

Have you ever thought about accepting an invitation from the FMIG (Family Medicine Interest Group, made up of undergraduate medical students interested in promoting our specialty) in your local faculty of medicine to speak to the group about your practice; demonstrate one of the procedures you perform routinely; or perhaps even bring a student into your office to observe you at work for a few hours?

These are simple activities that have a substantial effect on the promotion of family medicine. You could also take advantage of the presence of students or residents in your area by having them visit your office or by enjoying a social activity with them even if you are not directly involved in their training.

As the family physician of a medical student. Acting as a student's personal family doctor is a frequently unrecognized way of helping to promote the family physician's role. Role modeling begins as soon as a student enters medical school, if not some years before, and an intimate knowledge of the role of a family physician from a patient's perspective is an aspect that is often overlooked.

This contribution is one any practising physician can make. As we begin to recognize that this is an important activity, perhaps we will soon see continuing professional development activities that are designed to help us be good physicians for colleagues or medical students.

Participating in organizations that influence our practice environment and education for family physicians. In taking on such responsibilities, family physicians do not need to be in direct contact with physicians in training while contributing actively to ensuring that our discipline maintains its appeal and that training programs will prepare a future generation of competent physicians who will be well adapted to a changing practice environment. Who has a better knowledge of the kind of training our programs should provide for future family physicians than practitioners in the field who are directly involved in their communities? Even at arm's length, you can influence medical students to choose general practice.

Welcoming a medical student into your practice periodically. This can apply to various training levels. Contact with "real practice" is crucial from the outset of medical training, and most medical schools are increasingly emphasizing this aspect of their curriculums, thereby increasing demand for community-based experiences.

This primarily involves enabling students to come into contact with the various facets of our clinical work, similar to an artisan's "apprenticeship," and giving them access to the unspoken diagnostic reasoning and decision-making process with each of our patients.

Cet article se trouve aussi en français à la page 864.

There is no need to be certain, no need to do everything “by the book,” no need to know it all, just to articulate our medical reflections and the art of tailoring our knowledge to each of our patients.

Participating as an instructor at a faculty of medicine. The number of instructors needed has increased exponentially with the increase in admissions to medical school and expansion of residency programs, as well as the growth of small group teaching. As a result, faculties are turning increasingly to practising community-based physicians as instructors.

It is quite simple to act as an instructor in an established, well-developed course for which customized faculty development is available. Those who act as instructors also recognize that the preparation required for teaching becomes an opportunity for continuing education.

Students have told us that having family physicians as teachers is crucial to their career choice decisions. It is an excellent opportunity for our discipline to raise its profile. Perhaps it has already occurred to you that even if you are not interested in supervising students or residents, you would enjoy acting as a teacher at the local university for a few hours a year.

Being part of a family medicine program's medical educators group. The departments of family medicine in each Canadian university now offer stimulating and supportive programs for those who make teaching a regular part of their work. A growing number of educators groups are now dedicated to enhancing the skills of their members and also acting as resources to other teachers.

Getting involved as a family medicine preceptor in your community. The need for family physicians who agree to supervise students or residents is growing monthly. Being a supervisor is a demanding task that requires appropriate organization of your practice, close cooperation among the team of colleagues and the health care institutions involved, and ongoing faculty development. It is a rewarding role, and there is no doubt that residents and students seek out and value training sites where they can work and learn in a context that will most closely resemble their future practices.


Finding support

Have you found your niche yet? Of course, any of these roles have challenges that might make a physician feel ill-equipped to manage some aspects of them. This is a

main focus for the CFPC's Section of Teachers, which strives to promote the role of teacher within the community and to contribute to the development of continuing education tools for this role.

The new section in *Canadian Family Physician*, “Teaching Moment,” was developed with this in mind. It has been designed to provide family physician teachers with practical and evidence-informed strategies for dealing with common issues in education. Organized by the CFPC's Section of Teachers, it covers practical topics that might be of interest to a range of family physicians acting as teachers. It will be published several times a year and, starting with this issue, you can read it in the language of your choice: it will appear in French or English in the journal, depending on the language in which it was written, and in translation simultaneously available on www.cfp.ca through CFPlus. The first in the series, written by Dr Karen Schultz, appeared in June under the heading “Seminar,” and dealt with teaching about continuity of care.¹ This month, Drs Grant Russell and Alan Ng (page 948) write about incorporating direct observation of learners into our busy teaching practices.²

We welcome your suggestions for future topics, as well as your inquiries about submissions. We also invite you to add your voice to that of the CFPC's Section of Teachers in working toward relevant teacher training, working conditions conducive to involvement in teaching, as well as curriculums that will provide thorough preparation for the profession.

No matter which approach we choose, each of us has an opportunity to play a part in influencing the quality of our future colleagues' training. This is a collective responsibility, and each action we take might make the difference for the future of our profession and the quality of front-line health care for our communities. 

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Competing interests
None declared

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