



## Aligning education and community need

Jennifer L. Hall MSc MD CCFP FCFP

As the New Year begins, many individuals make resolutions. Others reflect on the best direction forward and contemplate priorities for the months to come. I prefer the latter approach, as it allows for some nimbleness and flexibility and permits the considered input of others to shape priorities and direction. It is this approach that I hoped to use as I chaired the inaugural meeting of the Family Medicine Specialty Committee this month at the CFPC.

### Important work

For the past while, the CFPC has been reflecting on the substantial body of work that has evolved in the area of education during the past several years. This important work includes the Triple C curriculum developed by the Triple C Competency-based Curriculum Task Force,<sup>1</sup> the 99 priority topics in family medicine developed by the Working Group on the Certification Process,<sup>2</sup> and the *Red Book* standards for family medicine training revised by a subcommittee of the Accreditation Committee.<sup>3</sup> Each document produced by these groups represents an important body of work developed in an evidence-influenced manner. The difficulty has been that all of these groups have worked independently and each has reported to a different subcommittee of the CFPC Board of Directors. The groups I have just described reported to the Section of Teachers, the Board of Examiners, and the Accreditation Committee, respectively. In addition, what all these groups lacked was the lens of some of our key stakeholders. Who do we define as the key stakeholders? This group includes community family physicians who live the day-to-day implications of the developed strategies; postgraduate deans and academic department heads of the 17 medical schools who must resource and implement the outcomes of the work these committees do in order to ensure both the undergraduate and the postgraduate curriculums include the various important aspects of family medicine experiences; and family medicine residents who will be the future of our discipline. It is important to remember that the public is a key stakeholder as well. Do our education parameters align with what is expected of us from all Canadians?

### Stronger together

The CFPC Executive Committee, in discussions with the executive staff and with the approval of the Board of Directors, strongly believed that there needed to be a committee developed to advise the CFPC board on all matters related to academic family medicine, to define the educational components of the specialty, and to set policies and standards to enhance the quality and

effectiveness of medical education in the discipline of family medicine, while ensuring a link between education and practice. As a result of these discussions, the Family Medicine Specialty Committee was formed. Its responsibilities include the following:

- to review the state of family medicine education in Canada in order to ensure its relevance, quality, and responsiveness to the needs of Canadians;
- to oversee the development and approval of policies and standards in the areas of curriculum, pedagogy, competencies, assessment, accreditation, Certification, and research;
- to ensure alignment and consistency of policy and standards development for the academic family medicine educational pillars (accreditation, Certification and assessment, curriculum and pedagogy, and research) and the 4 main standing committees (the Accreditation Committee, the Board of Examiners, the Section of Teachers Council, and the Section of Researchers);
- to identify educational issues requiring advocacy from the CFPC;
- to advance the specialty of family medicine in line with the mission, goals, and strategic plan of the CFPC; and
- to assist in the development of messages to validate the discipline of family medicine.

In addition to representation from the key stakeholders described previously, the committee will also include representatives from government, the licensing bodies, the allied health care professions, and the Royal College of Physicians and Surgeons of Canada. This representation will allow us to consider the perspectives of sister organizations and groups. Other CFPC representatives will include those from the Board of Examiners, the Advisory Committee on Family Practice, the Section of Researchers, and the Section of Communities of Practice in Family Medicine.

This year promises to be an exciting one for the CFPC Family Medicine Specialty Committee as it sets its course to strengthen family medicine education. Maybe we can call this a resolution after all. It is meaningful work with the right outcome as a guide. I am looking forward to working with these talented and motivated committee members to further define our discipline and respond to the communities we serve. ✨

### References

1. Tannenbaum D, Kerr J, Konkin J, Organek A, Parsons E, Saucier D, et al. *Triple C competency-based curriculum. Report of the Working Group on Postgraduate Curriculum Review—part 1*. Mississauga, ON: College of Family Physicians of Canada; 2011.
2. Working Group on the Certification Process. *Defining competence for the purposes of Certification by the College of Family Physicians of Canada. The evaluation objectives in family medicine*. Mississauga, ON: College of Family Physicians of Canada; 2010.
3. College of Family Physicians of Canada. *Specific standards for family medicine residency programs accredited by the College of Family Physicians of Canada. The red book*. Mississauga, ON: College of Family Physicians of Canada; 2013.

Cet article se trouve aussi en français à la page 94.