

Celebrating all the family medicine teachers

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Dear Colleagues,

This month marks the 40th anniversary of the CFPC's Section of Teachers (SOT). The section was established in 1978, during a decade when there were interesting trends in medicine. More women were involved in the medical profession; we also saw the beginning of evolution to group practice from the traditional solo FP. By the end of 1974, there were departments of family medicine and family medicine residency programs in each of Canada's (then) 16 medical schools. The CFPC's Certification Examination in Family Medicine was well in place, in both official languages, and the importance of continuing medical education in family practice was gaining traction. By the late '70s, FPs were keen to improve their teaching skills. Informed by the success of the Society of Teachers of Family Medicine in the United States, and driven by our understanding of the importance of teaching as a dimension of family medicine as a discipline, the SOT was created.1 The hope, from the very beginning, was to move the SOT to be a community for all who participate in teaching, big or small.

I did not consider myself part of the teaching community in those early days. Yet, I was involved in preceptoring family medicine residents for their obstetric rotations, something that I took seriously. It is always rewarding to meet some of these residents today, who are now in practice, and to hear about the important effect that that rotation had on their professional lives. Over time, I became involved in professional activities with a continuing professional development component. As Chief of Family Practice in my community and region, I coordinated and often presented family medicine rounds; and after taking an advanced cardiac life support course, I also eventually became a course teacher. Upon reflection, these teaching and preceptor activities might not have seemed like much, but they describe part of what I did as a family physician in my community. And when I think about those days, I am reminded of the following.

Learners keep us sharp. They challenge accepted practices, raise questions, and force us to remain current. It is a very dynamic relationship teachers have with their students.

Role modeling deserves ongoing attention. Role modeling was an important element of my role as a preceptor for intrapartum care. As we all recognize how important role modeling is in teaching, I venture to suggest that this is an area that deserves ongoing, sustained attention. During many of his presentations to family medicine interest groups, our President, Dr Guillaume Charbonneau, reminds medical students that it is difficult to fully appreciate the joys of being a family doctor during rotations of a few months. The reward of being in family practice is often not experienced until one has been in practice for a few years. We need to pay attention to role modeling as family doctors; this includes being able to convey, through example, who we are and what we do.

Relationship building is important. Teaching gave me the privilege of interacting, in a meaningful way, with colleagues (learners, of course, and also professionals from nursing and pharmacy, and education experts from Memorial University of Newfoundland) whom I might not have gotten to know otherwise.

Contributions to community care and family medicine are made. Finally, in collaboration with others, teaching offered me the opportunity to play a role in improving the standards of care in my community, and to contribute to the growth of the discipline of family medicine.

The current Chair of the SOT, Dr James Goertzen, reminds me regularly that, especially with the distributed medical education movement, if we look at all the facets of teaching, more than 75% of our members are teachers. This is no small feat in 40 years! On behalf of the CFPC, I want to thank all teachers for their contribution to family medicine education. Without you, we would not be where we are today.

Acknowledgment

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1. Solomon S, Taylor P. Patients first. The story of family medicine in Canada. Toronto, ON: Key Porter: 2004.

Cet article se trouve aussi en français à la page 703.