



## Section of Researchers

Celebrating 25 years

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Dear Colleagues,

I realized the importance of family medicine (FM) research during the CFPC annual conference in St John's, NL, in the early 1990s. Dr Michael Klein, 1 of 20 pioneers of FM research ([https://issuu.com/cfpc-fmf/docs/top\\_20\\_pioneers](https://issuu.com/cfpc-fmf/docs/top_20_pioneers)), shared his team's results that challenged routine episiotomy during normal delivery.<sup>1</sup> Obstetric care was a big part of my practice, and the findings had an immediate effect on the care I provided to new mothers.

The College founding members knew the importance of research to capture the unique content of FM.<sup>2</sup> In the early days, several GPs published case studies and observational studies using data from their practices. A national committee on research was created in 1955 to support and encourage FPs' involvement, and to create and sustain an agenda for FM research. Important milestones included the creation of educational workshops; the National Recording Service to identify the prevalence and trends in the spread of viral illnesses; and grants and awards.

A critical mass of FPs interested and involved in research led to the creation of the Section of Researchers (SOR) in 1995. Important subsequent milestones included the National Family Physician Survey; followed by the National Physician Survey, a collaboration among the CFPC, the Royal College, the Canadian Medical Association (CMA); and the Canadian Institute for Health Information. Foundational to this work was the consensus that we needed to understand the scope of work and practice patterns of physicians to inform health and human resource planning. The evolution toward improved interdisciplinary care for patients with comorbidities and chronic illness underscores the importance of these early studies. More recently, the CFPC helped to establish the Canadian Primary Care Surveillance Sentinel Network, which created practice-based research networks (PBRNs). Many PBRNs are affiliated with university departments of FM and gather data on a range of chronic illnesses that are managed day to day in the community.

The SOR's 2018-2023 Blueprint includes 4 strategic themes and directions: membership, capacity building, advocacy, and partnerships.<sup>3</sup> One can contribute to FM and primary care research in several ways, including answering questions arising from clinical practice, critically appraising the literature, developing clinical guidelines, performing case studies, and contributing data through

PBRNs.<sup>4</sup> Although it is critical to improving health and quality of life, primary care research remains underfunded and underresourced.<sup>3</sup> The CFPC, through the SOR leadership and in collaboration with others (Society of Rural Physicians of Canada, Canadian Home Care Association, Canadian Nurses Association), has been actively advocating for dedicated funding to enhance capacity in primary care research. We have welcomed our inclusion in the Canadian Institutes of Health Research and Institute of Health Services and Policy Research (IHSPR) strategic consultation, and are grateful for IHSPR's advice as the newly established Covid-19 Pandemic Response and Impact Grant Program—funded by the Foundation for Advancing Family Medicine and the CMA Foundation—adjudicated more than 100 applications to support innovation in community-based care related to COVID-19.

Practice improvement, data use, and quality improvement (QI) are also part of the SOR Blueprint. Although QI and research are distinct, they both improve patient care and are best conducted by interprofessional teams. The inclusion of persons with lived experience of care in research and practice improvement initiatives is an important and long-overdue development. Through work with university departments of FM and CFPC's Chapters, we hope to disseminate QI tools, better prepare FM residents, and support FPs in practice improvement. Our Practice Improvement Essentials Workshop Parts 1 and 2 provide an introduction to basic QI techniques and applications. These workshops offer 16 Mainpro+<sup>®</sup> assessment credits.<sup>5</sup>

Although we place a lot of emphasis on COVID-19 management in hospitals, in reality it is overwhelmingly managed in the community. Investment in primary care research is essential to meet the Quadruple Aim: better population health, improved patient experience, lower costs, and improved work life of providers. Thank you to members who contribute, through practice improvement and clinical and policy research, to building our evidence base, strengthening FM and primary care research, and ultimately, improving care. 🌱

#### Acknowledgment

I thank **Steve Slade** for his review of this article.

#### References

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Cet article se trouve aussi en français à la page 699.