Indigenous Health

Learning and Teaching in Postgraduate Education at NOSM





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Objectives

People at Walking the Vision Community Partnership Gathering

- Hear about the progress on the recommendations from the Living the Vision Workshop and other PG strategies
- Describe where PostGrad Education is now
- Share thoughts, ideas, concerns, questions, further recommendations for Postgrad











Advancing social justice through innovation in medical education





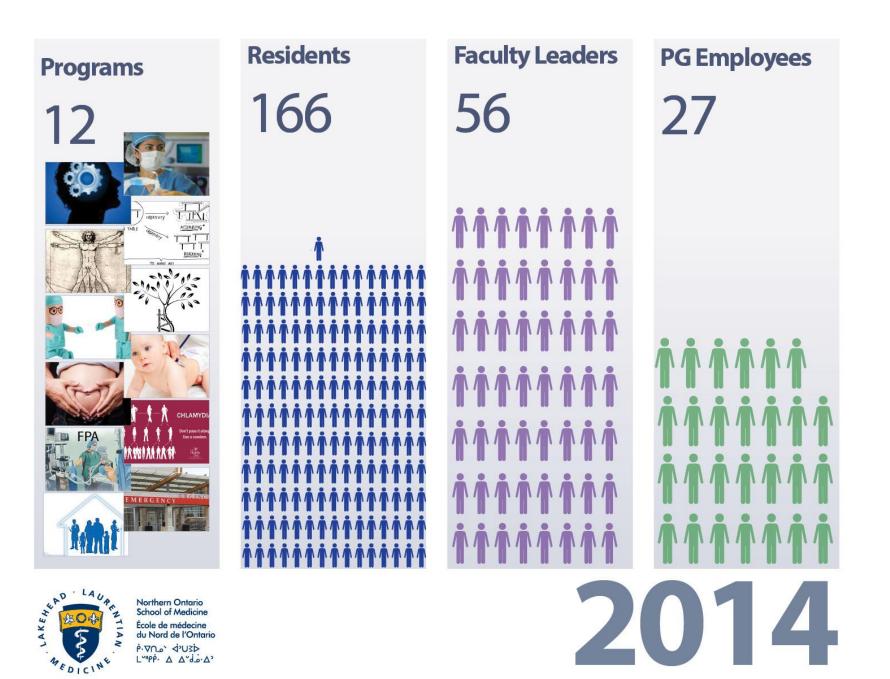
Postgraduate Education Background



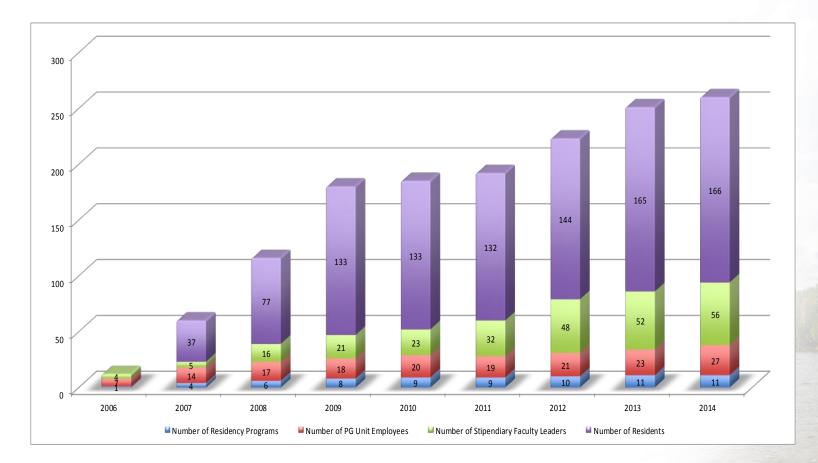


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Growth of PG at NOSM





NOSM Postgraduate Overview

- 2007 Family Medicine (34)
- 2007 PHPM (2)
- 2008 General Surgery (2)
 Pediatrics (3)
- 2009 Orthopedics 2009 (1) 2012 (2) Internal Medicine (6)
- 2012 Psychiatry (2)
- 2013 Anesthesiology (2)





Progress on the PG Recommendations from Living the Vision





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1. Hire Director of Aboriginal Postgraduate Learning

- Goal is to hire an Aboriginal Physician to be the Indigenous Health PG Lead in the Fall of 2014
- Specific faculty member and resident in each program Indigenous Health Curriculum
- First year all residents Core Curriculum will include specific face-to-face workshops – Dr Doris Mitchell





- 2. Identify and establish partnerships with medical practices serving Aboriginal communities, which can provide the proper preceptor function at the community level (ata-distance or on-site)
 - Beginning relationships/communication with Aboriginal Health Access Centres to foster participation by residents in clinical care in the Centres
 - Residents to date have some experiences in AHACs





Family Medicine Third Year Aboriginal Health (PGY3)

- 3. Utilize Aboriginal health providers and Elders to develop an appropriate and culturally sensitive Aboriginal Family Medicine PGY3 elective curriculum
- 5. Complete development and offer a one-year PGY3 course specific to Aboriginal Family Medicine with regular rotations into rural and remote communities
 - One resident to date has undertaken a PGY3 year with a focus on Aboriginal, Francophone and Rural Health created a faculty development project on social determinants of health
 - Communication and willingness to collaborate with University of Toronto PGY3 Aboriginal Health





- 4. Invite identified communities and organizations to indicate interest in hosting medical Residents
 - Much work to be done here finding specific core and elective experiences with necessary supporting curriculum
 - Pediatric residents have a mandatory rotation in Sioux Lookout
 - All Family Medicine residents have 4 months of mandatory rural rotations – many are in communities with a significant Aboriginal population





4. Invite identified communities and organizations to indicate interest in hosting medical Residents

Public Health and Preventive Medicine Program

- Curriculum development with the National Collaborating Centre for Aboriginal Health
- Formal rotation with First Nations and Inuit Health Branch
- Formal rotation with Sioux Lookout First National Health Authority
- Provincial Health Services Authority in BC Indigenous Cultural Competency Training Programs
- Developing an elective in Nunavut





4. Invite identified communities and organizations to indicate interest in hosting medical Residents

Orthopedic Surgery

- Provide care to First Nations communities in the NW as well as other Aboriginal people
- Have expressed strong interest in improving care delivery to all these people





- 6. NOSM/ARG to establish dialogue with member organizations and communities to inform them of NOSM's desire to collaboratively develop and deliver postgraduate medical residency programming in Aboriginal Family Medicine
 - Again much work to be done
 - Await direction and recommendations from this Gathering
 - Should also be considered for all disciplines not just Family Medicine
 - Postgrad is committed to strengthening communication and collaboration between Aboriginal Reference Group and Postgrad to facilitate relationships with communities





Where are we now?

- First ever full PG Accreditation May 11 15 2014
 - 32 team members
 - 11 teams
 - 7 communities
 - 4 days
- Improving and further developing Indigenous Health Curriculum high priority





Accreditation Recommendations

- PHPM program
 - "The Indigenous Health CanMEDS curriculum taken in the first clinical year is an outstanding innovation of NOSM and is organized to cover all the CanMEDS Roles"
- Family Medicine Program
 - "A more balanced academic program with better integration of learning around the CanMEDS-FM and Aboriginal Health into clinical teaching"





Dr. Joyce Helmer

- All Resident Retreat October 2012
- On-line Indigenous Health CanMEDS Modules
 mandatory for all PGY1s 2013 2014





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For Inclusion Appendix H

Agenda –

7:30 – 8:30	Breakfast
8:30 - 8:35	Opening Remarks – Dr. Roger Strassser, Dean
8:35 - 8:45	Welcome – Dr. Catherine Cervin, Associate Dean
8:45 – 10:30	Opening Ceremony – Tina Armstrong, Director of Aboriginal Affairs
	Introduction and Teaching of Gaa-taa-gwee
	Teaching of the Smudge
10:30 – 10:40	Nutrition Break
10:40 – 11:00	Teaching Circle One: Dr. Len Kelly, Rural Physician, Sioux Lookout
11:00 – 11:30	Focus Questions (Panel)
11:30 – 12:00	Lunch
12:00 – 1:00	Teaching Circle Two: Dr. Darlene Kitty, President, Indigenous Physicians of Canada
1:00 – 1:30	Sharing Circles
1:30 – 1:45	Report Back
1:45 – 2:30	Introduction to the Sweat Lodge Ceremony – Tina Armstrong, Director of Aboriginal Affairs
2:30 – 3:00	Closing the Circle – Dr. Joyce Helmer
	Giveaway – Tina Armstrong, Director of Aboriginal Affairs





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Post Grad Resident Retreat October 12-13, 2012

CanMEDS Roles

Indigenous Physicians Association of Canada

- Communicator
- Collaborator
- Health Advocate
- Manager
- Professional
- Scholar
- Medical Expert





Ideas, comments, thoughts, concerns, questions?

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