



# Impact Report

2016-2017



# Chair’s Message

## Dr. David Price

*“When you’re finished changing, you’re finished!”*

Benjamin Franklin wrote these words over 200 years ago, but in my mind they have never been more relevant . While the speed of change in our society is stunning, it is mirrored in the change in how we deliver education, provide care for our patients and ensure staff and faculty wellness.

If an individual over the age of 65 is on one medication, they are likely to be on seven! The Medical Council of Canada suggests that the average clinician would need to read in excess of 20 articles per day just to keep up in his/her field. Patients are keen to receive communications electronically via email, text or secure messaging and it won’t be long before that is an absolute expectation. These are all examples of how Canadian society is changing and evolving. Additionally, recognizing both the trauma suffered by our indigenous neighbours over many generations and the ongoing subtle (and sometimes overt) racism that they experience, means that we must pay particular attention to our education and clinical offerings.

It is our job as educators, clinicians, and staff of this department to respond to societal evolution and to change along with our patients and the society within which they live. The innovations that you are about to read in this brief impact report highlight how we are responding, adapting, informing and leading healthcare in this province and in this country. We are not, however, satisfied just to work locally. This department exemplifies thinking globally and acting locally. What are we going to do next? I can’t wait to find out!

*“The world as we have created it is a process of our thinking. It cannot be changed without changing our thinking”. Albert Einstein.*



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# Our Teaching Programs

## Postgraduate Education Program

The Department of Family Medicine Postgraduate Program is a highly sought after residency program, with over 800 CaRMS applicants per year. We have recently welcomed our full allotment of 99 new residents, located across six urban and six rural sites for a total of 199 residents in the two-year program! We have a group of 25 dedicated staff, located across two divisions, the central office and our partner sites who work tirelessly to ensure our residents receive everything they need to be successful throughout their training.

Our staff and faculty have fully embraced the next phase of incorporating competency based medical education (CBME) within our program, allowing for development and dissemination of enhanced assessment tools and resources for trainees and preceptors. We continue to capitalize on the distributed nature of our residency program, sharing and learning from each other's creativity and innovation.

With Dr. Joyce Zazulak's energy and vision, the Faculty Development Program has been redesigned with a commitment to create a sustained collaborative approach to faculty development offerings and resources across the entire department. We are extremely excited to see what the next year will bring!

A huge thanks to all of our dedicated faculty and staff who help to make our program one of the most sought after in the country. We couldn't do what we do without you!



## Undergraduate Education Program

The Undergraduate Education Program within the Department of Family Medicine is a successful program, with 250 learners going through the program each year. Interest in Family Medicine continues to grow as evidenced by the increase in medical student interest group events and the growing requests, by medical students, for electives in family medicine. Last year's CaRMS stats show that 40.8% of McMaster students opted for Family Medicine while the national average was 36.5%. This is really exciting news for us as it shows that we are making a difference! Through the able leadership of Dr. Jon Micklea, acting Undergraduate Program Director during Dr. Keyna Bracken's sabbatical, our program supported partnerships across regional campuses and clinical education campuses allowing opportunities for sharing and learning; and enhanced curriculum delivery in understanding the role of the family physician in caring for patients through the life cycle (innovation through eModule development and restructured group tutorials).



# Our Teaching Programs

## Undergraduate Education Program

During her sabbatical, Dr. Bracken spent time reviewing alternate clerkship models (namely, longitudinal integrated clerkship), with the goal of finding a solution that best nurtures and educates our future physicians. Longitudinal integrated clerkships are highly beneficial in that they allow for the development of resiliency, nurture a sense of social responsibility and because students spend so much time with one another, foster a strong sense of community. Our goal is to build resilient health professionals and to ensure we are keeping up with the changing times and providing satisfying and fulfilling learning environments.

## Teaching Sites

### Brampton

*The Brampton site is unique in that the mix of urban/rural patients has allowed our site to provide learners with a well-rounded experience, while providing an extremely busy obstetric and ER experience that is comparable to large institutional centres.* The addition of increased learners through the initiation of a Clinical Education Campus will increase opportunity for teaching for our residents.

Our community contains a unique mix of both South Asian and Western European populations. We are working with these communities to understand their specific health care needs and to train our learners in caring for these populations.

We have recently changed locations and are now located at the Peel Memorial Centre for Integrated Health and Wellness. Teaching includes the academic day of education which is done on site and a multitude of outpatient speciality/subspecialty clinics. This relocation has also allowed for opportunities for residents to have information sessions with the community at large.

Brampton is rich with culturally interesting sites. We have been able to use heritage sites like The Alderlea and Peel Art Gallery Museum & Archives as backdrops for our Faculty Development sessions, which have allowed us to enjoy the hidden treasures of our city while learning about new and innovative ways to engage faculty and learners.





# Teaching Sites

## Grand Erie Six Nations

***The Grand Erie Six Nations Site, in many ways, has unique offerings that set it apart:***

Our integrated curriculum, focused on Indigenous Health, touches on all components of the residency program including EBM, MHBS, simulation, lectures, visit to Six Nations, etc. It was developed through a collaboration between resident, Dr. Eric Earl and Drs. Amy Montour and Karen Hill; all of whom are affiliated with Six Nations.

We have a comprehensive simulation program mimicking the patient journey; a focus on teaching residents how to teach; and, a research curriculum focused on research topics built into the QA component of our program.

As a new feature of our site, we are building educational lectures and workshops focused on the practical aspects of medical practice: task management, time management, information organization, conflict management, leadership skills, and medical politics. Our site continues to be a leader across Canada in training every resident in the use of point-of-care ultrasound through an intense two-day boot camp and practice during the core emergency rotation.

We offer a high-intensity focus on learning how to teach. Every week, for two to three hours, residents learn and teach other residents specific topics based on their current rotations. The focus is on learning to teach effectively. The residents have found these sessions highly valuable.

## Halton

***The Halton Site has always prided itself on offering diverse, comprehensive family medicine crossing several domains within the specialty including Obstetrics, Acute Adult Inpatient Medicine, Palliative Care, Geriatric Care, and Small Outpatient Surgical Procedures including biopsies and injections.*** The breadth of clinical experience within the faculty at our site has allowed us to collaborate with the broader department and offer expertise in teaching to the residents as a whole during Block 7 Curriculum and in Academic Half-Days.

Our geographical proximity to the other sites has also allowed us to partner with other sites in the Department to offer a robust experience to our learners and learners at other sites. Examples of these partnerships would be coordinated Practice Simulated Office Oral Exams run by our site (with faculty volunteers) for our residents and CBRT, facilitating educational experiences and capacity for other sites when needed, and collaborating with CBRT to host a joint Site Quality Assurance day, with good attendance by both residents and preceptors.

For five years, the focus of the Halton site has been to maintain and role model comprehensive community-based family practice. The success of these efforts is demonstrated by the 75% retention rate of residents within the region. Our residents have settled, and are actively practising, in Burlington, Milton, Oakville and Georgetown.

# Teaching Sites

## Hamilton

*The Hamilton Site is proud to contribute exemplary educational leadership, collaboration and innovation to the Department of Family Medicine, while offering residents a diverse, stimulating and responsive residency training experience grounded in the principles of the CFPC's Triple C Curriculum.*

The Hamilton Site continues to provide exemplary educational leadership and innovation within its three teaching units: the Community Based Residency Teaching unit (CBRT), McMaster Family Practice (MFP) and Stonechurch Family Health Centre (SFHC).

This last year, we saw many new and exciting initiatives take place:

- We promoted education for the care of vulnerable populations through the development of a social medicine curriculum pilot (Drs. Robin Lennox and Lynda Redwood-Campbell), the poverty workshop in MHBS (Dan Edwards and Dr. Lynda Redwood-Campbell), and in our clinical response to Syrian refugee families (led by Dr. Dale Guenter).
- We continued the innovative work of the Hamilton Think Tank in which clinical, education and resident leadership work together to enhance education in the academic units and across our site. Partnering with IT, this group developed reporting capacity on the continuity and diversity of resident clinical exposures in family medicine clinics, which will complement the six-month portfolio review experience.
- To address a curriculum gap, Dr. Heather Waters introduced a Leadership Course in block 7, entitled "Who am I as a Leader?" which was facilitated by Dr. Teal McAteer from the Degroote School of Business.
- We successfully integrated undergraduate nursing students into our interprofessional care teams at the McMaster FHT through pilot research with the Health TAPESTRY study, funded by the Labarge Foundation and under the leadership of Drs. Doug Oliver, Ruta Valaitis and Heather Waters.



The David Braley Health Sciences Centre, Hamilton

# Teaching Sites

## Kitchener Waterloo & Area

*The KW & Area Site is filled with an eager, innovative faculty, staff, and learners who are at the leading edge of many areas of primary care including dementia, the physically disabled, digital health, and refugee health.*

We celebrate our impact on learners, knowledge, and people and communities in the following ways:

### ***Impact on family medicine learners:***

- Continued high local retention of graduates into the surrounding community.
- Continued recruitment of new local faculty among FM graduates.
- Strong role models in family medicine including the 2017 Ontario Family Physician of the Year (Dr. Michael Lee-Poy) and 2017 CFPC Award of Excellence (Dr. Heather Dixon).
- Continued strong role model for inter-professionalism in primary care as the Centre for Family Medicine has been awarded its 8th AFHTO Bright Light Award, the most of any FHT in Ontario.

### ***Impact on knowledge:***

- Continued strong local scholarship including semi-annual family medicine conference days with over 100 attendees (residents, faculty, and local health professionals).





# Teaching Sites

## Kitchener Waterloo & Area Continued

- Conducted the first national summit on primary care for spinal cord injury involving multi-stakeholders including family physicians, specialist physicians, government and LHIN leaders, researchers, patients, community agencies, and funders to provide the national strategy for education and research in Canada.
- Conducted digital health summits which enable collaboration of family medicine with technology companies, start-ups, and other health stakeholders.

### *Impact on people and communities:*

- Continued recruitment and retention of new family medicine graduates into every FHT, clinic, hospital, ER, and institution in the Waterloo-Wellington region
- Development of 105 Primary Care Collaborative Memory Clinics across Ontario to provide service, training, education, and research in dementia
- Development of a training program for Primary Care Mobility Clinics for severely physically disabled persons with new clinic sites in progress or proposed in Ontario including Northern Ontario and British Columbia.

## Niagara

***McMaster Niagara Family Medicine program is proud of its ongoing partnership with the McMaster Niagara Regional Campus MD program. Opportunities for collaboration continue to grow for resident teaching opportunities on campus, in Family Medicine clinics, and in the hospital on specialty rotations. Administrative collaboration also continues to facilitate shared resources and innovation.***

- Valued partnerships also exist and continue to evolve with the Niagara Health System and with West Lincoln Memorial Hospital.
- From the start of the Niagara program, its rotation delivery has been developed in an innovative integrated block educational format, established for core clinical rotations. This format is cornerstone of Niagara's curriculum delivery in residents' first year.
- Residents continue to experience an Emergency Medicine Simulation during their Academic Block, and have continued their annual volunteer event at Community Care.
- Our Mental Health Behavioural Sciences tutors continue to collaborate with Dr. Cindy Donaldson to offer an annual Enrichment experience in Narrative Medicine for PGY1 residents.



The McMaster Niagara Family Health Centre group.

# Teaching Sites

## Rural Stream

*The Family Medicine Rural Stream Site training fosters a generalist approach, preparing family physicians who are responsive to the needs of their community.*

We attract residents with a specific interest in comprehensive care and rural practice plans; and, generally have high retention rates of residents in the communities in which they train which, in turn, helps with human resources in underserved communities.

The Inuvik two-block rural experience, established as a result of both the interest of rural preceptors and of Drs. Kinzie and Price, facilitates an intensive two-block experience in remote medicine for any resident who is selected.

Under the initiative of Dr. Paul Cano, we have tri-annual Rural Faculty retreats: two associated with general rural program retreats (Fall and Spring) and one specifically for preceptors from rural teaching sites.



Dr. Elaine Blau supervising rural residents.

# McMaster Family Health Team

## 2016/17 Highlights

This last year saw many exciting new changes at the McMaster Family Health Team. Here are just a few of the ways we are working to support the Hamilton community.

### Nurse-led Triage Service

In 2016/17 we introduced a phone service for patients to speak with a registered practical nurse who will help them by providing timely telephone service for those who do not require an appointment and to help people avoid unnecessary visits to the emergency room

### Patient Advisory Group

This year we introduced our Patient Advisory Group to help reinforce our patients' voices in guiding how our clinics operate. As its first focus, the group is looking at how to acknowledge the role of patients in training residents.

### Meeting Linguistic and Cultural Needs

Our clinics have partnered with Hamilton Public Health and Wesley Urban Ministries to help support Syrian refugees entering the Hamilton community. This work has included

- Access to translators
- New Patient orientation sessions in Arabic
- Offering health literature in Arabic
- Continuing to respect the gender and cultural preferences of our patients

We are committed to working with our indigenous partners, patients and families to ensure Traditional Healers and methods are included in care. Together we are making changes to our practice with cultural sensitivity to this population in mind.

Visit us online  
[mcmasterfht.ca](http://mcmasterfht.ca)

95%

McMaster FHT patients  
are happy with the  
service they receive and  
their access to care

31374

active patients  
plus an additional 5100  
non-rostered patients

### Service to the Broader Community

Our clinics offer services that extend beyond our rostered and non-rostered patients. These include;

- Mental Health Programs
- Maternity Care through the Maternity Centre of Hamilton
- No cost physiotherapy and occupational therapy services through Mac H<sup>2</sup>OPE in partnership with the YMCA and the Department of Rehabilitation at McMaster University
- Palliative Care services
- Prenatal addiction and methadone care
- Services to McMaster Students
- Services to New Immigrants





# McMaster Family Health Team

The McMaster Family Health Team (FHT) includes the Maternity Centre of Hamilton (MCH), McMaster Family Practice (MFP) and Stonechurch Family Health Centre (SFHC). The Maternity Centre of Hamilton and McMaster Family Practice are located in downtown Hamilton, a location chosen to enable greater access to primary and prenatal care in an underserved area. This represents a remarkable collaboration between the City of Hamilton, McMaster University and the McMaster Family Health Organization Association that came to fruition in 2015. Stonechurch Family Health Centre, is located in the east mountain in Hamilton and together with MFP and the MCH, these clinics are committed to working with, and providing culturally safe primary care to, all populations including refugee, newcomer, Indigenous and LGBTQ populations.

The FHT endeavours to make an impact in the lives of our patients, our learners and in our surrounding communities. This last year has been a busy time for all areas of our FHT, with lots of exciting things taking place.

In all we do, we make an effort to listen to what our patients are telling us and to respond with innovative solutions to meet their needs. As such, we have a patient advisory group that involves patients more directly in the operations of the clinic. We are committed to working with, and being culturally sensitive to, all populations including refugees and newcomers, our indigenous and LGBTQ populations. Our dedicated teams provides a medical home to the life spectrum of patients with specialized care options including mental health, activity, nutrition and chronic pain groups, the Healthy Aging education series, physiotherapy and occupational therapy clinics, palliative care, addictions services, memory clinics, pediatrics and geriatrics, to name a few. In 2016-17 we partnered with many other healthcare and community agencies to make available some programs to all community members, as well as for our registered patients.



MFP and MCH relocated to downtown Hamilton in mid-2015 and this move has provided opportunity for our clinicians to care for more people in the city's core and to see more people facing additional barriers to health. Some of the programs and exciting innovations offered at this site include:

- **The Program for Substance Abuse in Pregnancy (PROSP)** Operated out of the MCH and created by Dr. Liz Shaw, with assistance from Dr. Jill Wiwcharuk and NP Claudia Steffler, this program cares for pregnant women with substance abuse concerns. Expectant mothers with substance use issues attend the Centre to receive prenatal care as well as methadone in one sitting as we know that combining medical and addiction treatment into a single appointment increases the likelihood of patients attending. In the three years since its inception, this program has cared for approximately 60 women. For further information on this program, please see [goo.gl/BDivjQ](http://goo.gl/BDivjQ).

# McMaster Family Health Team

- **Legal Health Clinic (McMaster Family Practice)**

Dr. Gina Agarwal and Dan Edwards, System Navigator, have partnered with the Hamilton Community Legal Clinic, Legal Aid, local lawyers and others to create the Legal Health Check Up Program (LHP). This program looks for ways to help people with legal problems that may be an underlying factor in them not achieving optimal health. In most cases, patients are not aware of their entitlement to legal help or how this could assist them in achieving key stability factors such as housing and income, which ultimately impact positive health outcomes.

- Approximately 30% of patients seen at the MCH do not have a primary care provider when presenting for prenatal care. Of the patients who lack a primary care provider, the MCH has been able to link 81% with a provider prior to delivery.

Further highlights our FHT is proud of include:

- The FHT is the first family medicine clinic in the province to sign on and use a new Primary Care Data Sharing module through eHealth Ontario. This will allow hospitals, and eventually home care providers, to access information directly from the patients' family medicine chart. This is an exciting innovation that will finally provide a way for information to be shared between different care providers across the city. We are very proud of our team who worked hard to make this a reality.
- Clinic renovations occurred to enhance the patient, provider and learner experience. Improvements have been made to each clinic's team room, a place where all providers within the clinic have a "home", facilitating patient care collaboration, learning from each other and furthering our education mission for students and residents. We also have increased the number of exam rooms in each clinic to allow for better and easy access to timely health care.
- Once again, this past year, a team of people led by Lynn Dykeman, Social Worker from SFHC, sent a shipment of medical supplies (walkers, wheelchairs etc.) to our Kurdish neighbours, living in the intersection of Iran, Iraq, Syria and Turkey where they face varying levels of discrimination. This group makes up almost 20% of the population of Iraq. These supplies are life-changing for those in need.



Learners with a teaching tool

# Our Divisions

## Emergency Medicine

*We owe our continued success to the hard work and dedication of our faculty and staff. Below is a summary of some of the events and accomplishments that took place over the past academic year:*

- Curriculum and evaluation changes are progressing to reflect CPD.
- Our new CCFP EM Program Director Dr. Erich Hanel is settling nicely into his position.
- The CCFP EM Class of 2017 received a 100% pass rate from the Examination of Special Competence in Emergency Medicine written in September.
- Dr. Liane Shipp-Dey has joined the EM faculty and has secured a clinical staff position at HHS.
- Dr. Alim Nagji has joined our EM faculty and is clinical staff at SJH.
- Two trial Return of Service residency positions in collaboration with the Grand River Emergency Medicine group and their Foundation was launched in July 2017. The plan is to run this for two years. Thanks to Drs. Erich Hanel, Greg Rutledge and Catharine Tong for spearheading this.

*Saying Goodbye:*

- Catharine Tong is resigning as REL in KW. Catharine has been a strong voice for her campus and Emergency Medicine in KW. Her efforts and energy will be missed. Thanks Catharine and good luck on future endeavors!

## Palliative Care

*Through education, research and leadership, the Division of Palliative Care builds capacity for palliative care at the population level.*

### EDUCATION

We are among the top medical schools in Canada for undergraduate education in palliative care, including curriculum time dedicated to palliative care and availability of clerkship palliative care electives. We believe in:

- **Partnerships.** Almost all CPD initiatives occur in partnership with others: the Department of Family Medicine, McMaster Continuing Health Sciences Education, the HNHB LHIN Regional Palliative Care Program, our regional hospice and hospital partners, the Hamilton Public Library, and other community partners) and;



# Our Divisions

## Palliative Care continued

- **Diversity** -- Offerings include 3 Days in Palliative Care, Innovations Day in Palliative Care, The Elizabeth J Latimer Lecture in Palliative Care, Expert Forum, Palliative Care Grand Rounds, Monthly Physician and bi-annual IP Journal Clubs, IP Lunch and Learn Sessions and various other projects. "Death Something to Talk about" reading project was also launched with three community partners).
- The new Palliative care Practice Based Small Group (PBSG) Learning Module **Medical Assistance in Dying: Responding to Patients** is published (The Foundation for Medical Practice Education (FMPE) Volume 25(4), February 2017) was co-authored by **Dr. Joshua Shadd**.

### RESEARCH

A common thread in the Division's academic interests is to lead in creating and sustaining capacity for palliative care by ensuring the ability for all health care providers to deliver primary palliative care supported by specialist level care.

Many faculty and learners are involved in palliative care research. Interests include undergrad MD palliative care education, building capacity for primary palliative care across health care settings, innovations in ICU end of life care, Medical Assistance in Dying, public health approaches to palliative care, end-of-life communication and decision-making, medical marijuana, substance abuse in palliative patients, reaching vulnerable populations, palliative care in long term care and treatment of cancer symptoms.

### LEADERSHIP

Division of Palliative Care Faculty are leaders in many initiatives and organizations at the regional, provincial, national and international levels in addition to our local clinical organizations.

### MEDIA & ADVOCACY

Dr. Stephen Singh was a key leader in advocating for continued access to opioid analgesics for palliative care patients



From L-R: Drs. Alan Taniguchi, Adrienne Selbie, Jonathan Livergant and Erin Gallagher

# Research Enterprise

While continuing to develop high-quality and innovative research programs, the impact of the Research Enterprise has been evident in our collaborations and capacity building initiatives. We were awarded over \$16.4 million of research funding, with \$5.18 million of that coming to our faculty members as principal investigator. In addition, in 2016-2017, we authored 84 publications.

Research is growing in Hamilton and at our department's teaching sites. Leadership and faculty members within the Research Enterprise continue to work with interested faculty at our teaching sites to help them build their own capacity to lead and engage in research.

This year, two new faculty members joined our research team in Hamilton: Dr. Fiona Kouyoumdjian and Dr. Meredith Vanstone.

Dr. Kouyoumdjian is a clinician and researcher whose work focuses on the health of incarcerated individuals and populations living within the correctional system as well as when these individuals re-enter the community. Dr. Vanstone brings to the department her expertise in qualitative research methods with a focus on the education and practice of health professionals, as well as health policy decision-making.

In March 2017, the Department of Family Medicine launched a Visiting Scholar program. Four international researchers came to the department to share their expertise and perspectives with us. During their time at McMaster, visiting Scholars gave lectures, facilitated workshops and interacted one-on-one with our faculty. We had the opportunity to share our research with these experts from across the globe while developing new collaborations and drawing on the knowledge and outside-perspectives brought by our guests.

Our Community Paramedicine work led by Dr. Gina Agarwal has continued to expand on the successful Community Paramedicine at Clinic (CP@Clinic) program with over \$460,000 in new CIHR funding received this year for a trial of the Community Paramedicine at Home (CP@Home) program. The team also held their Community Paramedicine Forum in February 2017, which brought together paramedics services and other stakeholders from across Ontario for a day of learning and discussion. At the Forum, we announced a new partnership with the software company Interdev to make the McMaster Community Paramedicine Suite available through their suite of EMS software.

The Team Approach to Polypharmacy Evaluation and Reduction (TAPER) program, led by Dr. Dee Mangin, has continued to gain funding momentum. In July, the program received a nearly \$1 million CIHR grant followed by funding for a second study from the Labarge Optimal Aging Initiative.

## 2016/17 Visiting Scholars

Dr. Stewart Mercer — University of Glasgow

Alexandra Brandt Ryborg Joensson — University of Copenhagen

Dr. Joanne Reeve — University of Liverpool

Dr. Frank Moriarty — Royal College of Surgeons in Ireland

# Research Enterprise continued

In April, the Department received \$3 million in funding to implement and study Health TAPESTRY in six sites across Ontario. Developed at the Department as a collaborative project, Health TAPESTRY is a community-based program, led by primary care teams, that creates connections between trained health care volunteers, interprofessional health care teams, novel technology and community supports through improved system navigation. The goal of Health TAPESTRY is to enhance the timeliness and quality of care for older adults in Ontario, based on the needs and goals of those individuals.

To help support and inform the volunteer component of Health TAPESTRY, we have formed a partnership with the Canadian Red Cross. This is part of a larger strategic alliance between our organizations that promises to bring many great successes to research in areas like emergency response, primary care in crisis situations, and meaningful volunteering in the coming years.

In June, Dr. Fortunato Cristobal and fellow members of his team from the Ateneo de Zamboanga School of Medicine came to McMaster for a meeting about the Community Health Assessment Program in the Philippines (CHAP-P). At this meeting, the group planned and coordinated the next steps of this multi-year randomized control trial.

The Infant and Child Health Lab (INCH) continues to do important work focused on the physical and mental health of children. The long-term Coordination and Activity Tracking in Children (CATCH) study has now recruited nearly 600 participants since starting in March 2014. The lab continues to be a place of learning and inquiry for a number of very talented graduate students and post-docs.



Some of our wonderful research team!



# Journal Articles

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## Book Chapters

Norman GR, Grierson LEM, Sherbino J, Hamstra S, Schmidt H, Mamede S. Expertise in Medicine and Surgery. In KA Ericsson, R Hoffman, A Kozbelt and M Williams (Eds.), *The Cambridge Handbook of Expertise and Expert Performance*. Cambridge, UK: Cambridge University Press. 2017.



**Walsh A**, Boelen C, Woollard B. "Social accountability and medical education" in *Family Medicine: The Classic Papers*. Eds. Kidd M, Heath I, Howe A. (pp. 337-346). CRC Press, 2016.

## Grants

Abelson J, Bond K, Clifford T, Schwartz L, Tarride JE, **Vanstone M**. Public and Patient Engagement in Health Technology Management. Canadian Institutes for Health Research, Training and Modernization Start-Up Grant in Health Services and Policy Research. \$95,000.00. March 2017–February 2018

**Agarwal G** (PI), **Angeles R**, Kurniawan H, Cristobal F, **Redwood-Campbell L**, **Dolovich L**, Agrawal S, Sathian B. Selection of appropriate diabetes risk assessment tool in low and middle income countries (LMICs) for the CHAP-Global Project. International Initiatives Micro Fund. \$5,000.00. July 2016–May 2017

**Agarwal G**, (NPI); **Price D** (Co-PI), Costa A (Co-PI), Wellsford M (Co-PI); **Mangin D**, **Howard M**, Griffith L, Richardson J, **Pirrie M**, McLeod B, Tavares W. Improving Healthcare Utilization by Frequent 911 Callers: The Community Paramedicine at Home. (CP@home) Trial. Canadian Institutes of Health Research. \$462,824.00. April 2017–March 2020

**Agarwal G**, McLeod B, Tavares W, **Angeles R**, Costa A, **Pirrie M**. Dissemination and Scale-up of a Community Paramedicine Initiative: Chronic Disease and Health Risk Assessment in a Low-Income Older Adult Population. Canadian Institutes for Health Research, Planning and Dissemination Grants – Institute/Initiative Community Support. \$19,000.00.

**Angeles R** (PI), **Dolovich L** (co-PI), Cristobal F, Kaczorowski J, **Agarwal G**, Arciaga R, **Guenter D**, Barrera J, Ladeza M, Alpha A, Agbulos R. Feasibility and accuracy of screening for Diabetes and Hypertension in municipalities the Zamboanga Peninsula. Canadian Chronic Disease Awareness and Management Program (C-ChAMP). \$14,972.31. November 2016–February 2017

Bell A (PI), Grant C, **Vanstone M**. Barriers to Medical Student Reporting of Mistreatment and Abuse. Canadian Association of Medical Educators Wooster Family Grant in Medical Education. \$9,809.00. April 2017–June 2018

Campbell RJ, Bell CM, Bronskill SE, El-Defrawy SR, Gill SS, McIsaac MA, **Paterson JM**. Comparative safety of aflibercept and ranibizumab in the treatment of retinal diseases. Canadian Institutes of Health Research. \$110,000. July 2016–June 2019

Cook DJ (PI), **Vanstone M** (Co-PI). Compassionate end of life care in the ICU: Evaluating the scalability, transferability, affordability, sustainability and values of the 3 Wishes Project. Greenwall Foundation. \$206,898 USD. July 2017–June 2019

Darling EK (PI), **Vanstone M** (Co-PI), Hutton EK, Murray-Davis B, Ahmed R, Nussey L. Exploring equitable access to midwifery care for people of low socioeconomic status: facilitators and barriers. Association of Ontario Midwives Established Career Award. \$40,000.00. March 2017–March 2018

**Dolovich L**, **Oliver D**, **Valaitis R**, Waters H, Lamarche L. Contributing to, and learning from, the lives of older adults: Practical learning experiences in the care of older adults as trained community volunteers for health care. Labarge Foundation. \$100,000.00. January 2016–December 2018

Dormuth C (NPI), Mintzes B, Sketris I (Co-PIs), Bero L, Davis C, De Bruin ML, Kesselheim A, Lexchin J, **Mangin D**, Moore TJ, Puil L, Roughead E, Wiktorowicz M, Abraham J, Bahri P et al. What works best to protect public health? An international comparison of post-market regulatory risk communication on prescription drugs. Canadian Institutes of Health Research. \$1,158,976.00. May 2017–April 2021

Eder L, Widdifield J, Tu K, Gladman D, Bernatsky S, Alhusayen R, Rosen C, Campbell I, **Paterson JM**. Raising Awareness of the Under-Recognized Burden of Psoriatic diseases. Canadian Initiative for Outcomes in Rheumatology Care (CIORA). \$119,024.00. June 2017–May 2019

Farrell B (PI), Conklin J (PI), **Dolovich L**, McCarthy L, Raman-Wilms L. Community Pharmacists as Catalysts for Deprescribing: Facilitating Process Workflow and Identifying Elements of a Feasible Business Model. Canadian Foundation for Pharmacy Innovation Fund. \$50,017.00.

Gomes T, Juurlink DN, Mamdani M, **Paterson JM**, Sproule BA, Tadrous M. Ontario's Opioid Drug Observatory: Leveraging the Narcotics Monitoring System to inform and evaluate provincial drug policy. Canadian Institutes of Health Research. \$726,752. April 2017–March 2021

Ho J (Co-PI), **Mangin D** (Co-PI), Costa A, Guyatt G, Holbrook A, Mirza R, Richardson J, Lee J, Thabane L. Optimal prescribing to enhance mobility among seniors: A GeriMedRisk-TAPERMD collaboration. Labarge Optimal Aging Initiative. \$81,500.00. October 2016–October 2018

Ho J, Maitland J, Thabane L, Pavlin M, Lee J, Holbrook A, **Mangin D**. GeriMedRisk, a Scalable Geriatric Pharmacology Consultation Service to Decrease Adverse Drug Events Among Seniors. Canadian Centre for Aging & Brain Health Innovation, Spark Program. \$50,000.00. February 2017–January 2018

Jamieson H (PI), Gee S, Cheung G, Nishtala P, Schluter P, **Mangin D**, Gullery C. Using the InterRAI to improve identification and management of frailty. Health Research Council of New Zealand. \$1,167,728.00 NZD. June 2017–May 2020

Kaasalainen S (Co-PI), Hunter P (Co-PI), Baxter S, Coker E, dal Bello-Haas V, **Dolovich L**, Hadjistavropoulos T, McAiney C, Ploeg J, Thabane L, Sussman T, Thompson G, Wickson-Griffiths A. Improving Quality of Living and Dying for People Living with Advanced Dementia and their Caregivers. Canadian Institutes for Health Research, Social Inclusion for Individual with Dementia and Carers. \$498,350.00.

Kaczorowski J, **Dolovich L**, Daly T, Lussier M-T, **Agarwal G**, Chiu M. Knowledge translation initiative to support the implementation of CHAP across Canada. Canadian Vascular Network, Knowledge Translation “Dragons’ Den.” \$190,000.00. June 2017–May 2019

Kobewka D, You J, Heyland DK, Dodek P, Brehaut J, Bansback N, Forster A, Nijjar A, **Howard M**, Munene P. A multifaceted tool to improve decision making about cardio-pulmonary resuscitation for hospitalized patients who are seriously ill: a proof of concept study. Academic Health Sciences AFP Innovation Fund: The Ottawa Hospital Academic Medical Organization. \$99,264.00. February 2017–January 2018

Leatherdale ST (PI), **Cairney J** (Co-I), Elton-Marshall T, Faulkner G, Henderson J, Mann R, Sabiston C, Patte K. Development of a mental health module for the COMPASS system: improving youth mental health trajectories. Canadian Institutes of Health Research, Bridge Grant. \$100,000.00. July 2016–June 2017

Lee J, Holbrook A, **Dolovich L**, Papioannou A, Levine M, Ho J, Paterson C, Perri D, Mbuagbaw L. IMPROVE-HCU (Improving Medication PRescribing for Ontario's Vulnerable Elderly High Cost healthcare Users: A Pilot Randomized Controlled Trial). Hamilton Academic Health Sciences Organizations (HAHSO). \$183,785.15. January 2017–January 2019

Lewis G, Kendrick A, Kessler D, Moore M, Freemantle N, King M, Hunter R, Wiles N, Gilbody S, Nazareth I, **Mangin D**. Antidepressants to prevent relapse in depression. National Institute for Health Research (UK). £1,807,618.00 GBP. July 2016–May 2020

**Mangin D**, **Agarwal G**, Cassels A, Colwill K, **Dolovich L**, Farrell B, Frizzle K, Garrison S, Gillett J, Goetzsche P, Griffith L, Holbrook A, Jurcic-Vrataric J, McCormack J, O'Reilly D, Raina P, Richardson J, **Risdon C**, Savelli M, Sherifali D, **Siu H**, Thabane L, Trimble J. Team Approach to Polypharmacy Evaluation and Reduction (TAPER). Canadian Institutes for Health Research, 2016 1st Live Pilot. \$974,737.00. July 2016–June 2020

McCarthy L, **Dolovich L**, Waite N. Integrating quality into pharmacy culture to improve medication management, use and outcomes for older adults. Canadian Institutes of Health Research, Planning and Dissemination Grant. \$19,988.00. November 2016–October 2017

Platt R, **Paterson JM**, Suissa S, Henry D. Proposal for the development of a Common Data Model across selected CNODES sites. Canadian Institutes of Health Research. \$250,000. April 2017–March 2018

**Price D** (Lead), **Mangin D** (Evaluation Lead), **Oliver D** (Implementation Lead). Implementation and evaluation of Health TAPESTRY in six primary care sites in Ontario. Ministry of Health and Long-Term Care (\$1.5 million) and Private Donor (\$1.5 million). \$3,000,000.00. April 2017.

Schwalm J, Ivers NM, Grimshaw J, Taljaard M, Natarajan MK, **Dolovich L**, Tu J, Thavorn K. Length of Initial Prescription at Hospital Discharge and Long-term Medication Adherence for Elderly Patients Post-Myocardial Infarction: An Interventional Study–Myocardial Infarction Prescription Adherence Duration (MIPAD) Study. Hamilton Academic Health Sciences Organizations (HAHSO). \$149,046.49. January 2017–January 2017

**Siu H**. Developing a Single Patient Open-label Trial Tapering Algorithm for Antipsychotics in Long-Term Care – A Feasibility Study. College of Family Physicians of Canada, Janus Research Grant. \$14,270.00. July 2016–December 2018

Straus S (PI), Moore J (Co-PI); Knowledge Users: Bedkowski H, Martin LB, **Dolovich L**, Hoens A, Quirkd J, Stang A, Duncan D; Co-Applicants/Co-investigators: Chambers A, Giangregorio L, Giguere A, Graham I, Hamid J, Leduc JH, Kelly C, Li L, Presseau J, Rochon P, Sharma M, Sibley K, Squires J; Collaborators: Anderson B, Paul B. Transforming the practices of KT: Embedding Gender. Canadian Institutes for Health Research, Team Grant: Impact of Gender on Knowledge Translation Interventions. \$450,000.00. May 2017–March 2020

Straus S (PI); Co-Investigators: **Dolovich L**, Glasziou P, Graham I, Hamid J, Hemmelgarn B, Isaranuwatichai W, Legare F, Majumdar S, Presseau J, Proctor E, Sale J, Shepperd S, Squires J, Stelfox T. Tonelli M, Tricco AC, van der Weijden T, Veroniki AA; Co-knowledge User: Beben N, Brownson R, Chambers D, Edwards A, Fairclough L, Hoens A, Holmes B, Liu B, Michell K, Moore J, Srinivasan V, Thompson K, Valentine P; Collaborator: Strifler L. Sustaining evidence-based chronic disease management. Canadian Institutes for Health Research, Foundation Grant. \$3,075,577.00. July 2017–June 2024

**Vanstone M** (NPI), Connelly CE, (Co-PI), Bell A, Dore K, Mountjoy M, **Walsh A**, Wong A, Whyte R. Unproductive, unprofessional, and abusive behaviours in the clinical workplace: The influence of working environment on the development of future health leaders. Michael G. DeGroote Health Leadership Academy (\$20,000) with (\$10,000) match from Michael G. DeGroote School of Medicine Undergraduate MD program. \$30,000.00.

Wade TJ(PI), **Cairney J** (PI), O'Leary DD (PI). Adverse Childhood Experiences (ACEs), Blood Pressure, and Cardiovascular Structure and Function from Childhood to Early Adulthood. Canadian Institutes of Health Research, Bridge Grant. \$100,000.00. July 2016–June 2017

Willoughby T (PI), Boyle M, **Cairney** , Crone E, Falk B, Goldman D, Henderson J, Klentrou P, McCormick C, Morrish J, Mushquash C, O'Leary D, Schmidt L, Segalowitz S, Shulman E, Wade T. Brock Healthy Youth Project. Canadian Institutes for Health Research, Live Pilot Project Scheme. \$1,433,440.00. July 2016–June 2018

Co-PIs: You J, **Howard M**, Barwich D, Gutman G, Jayaraman D, Kaasalianen S, Klein D, Kobewka D, Simon J, Sussman T, Urquhart R; Co-Investigators: Abelson J, Allatt P, Bernacki R, Bernard C, Block S, Bourgeois-Guerin V, Day A, DeVries B, Dodek P, Downar J, Durivage P, Fowler R, Gawande A, Hunter P, Kryworuchko, J, Lamas, D, Ma I, McCleary L, Myers J, Nihar A, Sharma N, Simon J, Sinuff, T, Slaven M, Sudore R, Sussman T, Tan Amy Taneja R, Thompson, G; Co-knowledge User: Clarke B, Hoffman, I, Winhall, M. Improving advance care planning for frail elderly Canadians. Canadian Frailty Network, Transformative Grant. \$2,676,698.00 (\$365,390.70 to **Howard M**). April 2017–March 2020

## Awards 2016/17

National	
Dr. Keyna Bracken	Sedok Besrouer Award in Global Health
Dr. Mike Lee Poy	CFPC - Family Physician of the Year
Ontario College of Family Physicians	
Dr. Heather Dixon	2017 Award of Excellence
Dr. Brian Klar	Regional Family Physician of the Year - Region 4
Local	
Dr. Amit Arya	Excellence in Teaching Award 2017, Mac-CARE program, Brampton Civic Hospital Site
Dr. Martin Chasen	2017 Elizabeth J. Latimer Prize in Palliative Care
Dr. Brain Kerley	Niagara Region Distinguished Physician Service Award
Dr. Andre Moolman	Grand River Hospital Award of Excellence
Dr. Liz Shaw	PGME Faculty Mentor Award

# Awards 2016/17

Internal	
Dr. Abayomi Ajayi	Preceptor of the Year - Brantford
Dr. Todd Greenspoon	UG Family Medicine Awards - James Morris (Clerkship Preceptor) Award - Hamilton
Dr. Kaitlin Link	Tutor of the Year - Brantford
Dr. Jorin Lukings	UG Family Medicine Awards - PreClerkship Preceptor Award - Niagara
Ms. Kim MacMillan	Ted Evans Scholarship Award
Dr. Ainsley Moore	Education of the Year—Hamilton
Dr. Tim Cuddy	Award for Excellence in Teaching—Burlington
Dr. Nick Minos	Award for Excellence in Teaching—GE6N
Dr. Doug Oliver	UG Family Medicine Awards—Clerkship Tutor Award—Hamilton
Dr. Nadia Plach	Halton McMaster Site Facilitator Member of the Year Award
Ms. Melanie Pulling	Allied Health/Support Staff of the Year—Hamilton
Dr. Alan Taniguchi	2017 Jacqui Wakefield Award for Mentorship—Palliative Care
Dr. Alan Taniguchi	2017 Eduardo Bruera Award in Palliative Medicine—Palliative Care
Dr. Alan Taniguchi	2017/2018 “most inspiring and passionate role model in medicine from McMaster” - Palliative Care
Dr. Mat Wohlegemut	Gerry Cohen Teaching Award



# Awards 2016/17

Resident Leadership Awards	
Dr. Ula Burhan	FM Leadership Award - SFHC
Dr. Rimpy Cheema	Kanwal Shankardass Care of the Elderly Award
Dr. Sarah Donaldson	FM Leadership Award - Rural
Dr. Samantha Earl	FM Leadership Award - GE6N
Dr. Nagham El-Houssein	FM Leadership Award - Niagara Overall FM Leadership Award Research Day Best Overall Poster
Dr. Kelly Frydrych	FM Leadership Award - Brampton
Dr. Ruben Humelen	FM Leadership Award - MFP
Dr. Christopher Johansen	FM Leadership Award - KW
Dr. Robin Lennox	Ben Finkelstein Award
Dr. David Martin	FM Leadership Award - KW
Dr. Nathan Roth	Research Day Best Overall Project
Dr. Elena Schroder	FM Leadership Award - CBRT
Dr. Melissa Snyder	Research Day Best Overall Project
Dr. Aaron Wynn	FM Leadership Award - SFHC
Dr. Allison Yantzi	Research Day Best Overall Project FM Leadership Award—KW

