



Faculty of Medicine Associate and Assistant Deans Annual Reports

2025-2026

Report	Page
Senior Associate Dean, Medical Education	4
Chief Operation Officer	7
Dalhousie Medicine New Brunswick	11
Cape Breton Medical Campus	16
Continuing Professional Development	22
Research	25
Undergraduate Medical Education	28
Postgraduate Medical Education	31
Serving & Engaging Society	34
Basic Science	38
Undergraduate Medicine Admissions	41
Preclerkship (DMNS & DMNB & CBMC)	44
Clerkship (DMNS & DMNB & CBMC)	47
Skilled Clinician and Interprofessional Education	51
Skilled Clinician, CBMC	54
Interprofessional Education & Service Learning (CBMC)	56
Office to Student Affairs (DMNS)	58
Office of Resident Affairs (DMNS)	60

Office of Student and Resident Affairs (CBMC)	67
Office of Student and Resident Affairs (DMNB)	71
Master of Physician Assistant Studies	77
Medical Science	82
Office of Professional Affairs	85
Research (DMNB)	88
Research (Clinical)	91
Graduate and Postdoctoral Studies	93
Distributed Medical Education	95
Faculty Wellness	97
Faculty Development (CBMC)	99

Associate and Assistant Deans – Annual Report 2025/26

Name: Stephen Miller	Program/Unit: Senior Associate Dean, Medical Education
-----------------------------	---

Brief overview of program/unit

- The Senior Associate Dean, Medical Education position is a senior leadership role (0.8 FTE) that works collaboratively with the Dean, Associate and Assistant Deans with Education Portfolios and the many partners and stakeholders of the Faculty of Medicine to help coordinate and improve the educational mission of the Faculty of Medicine.
- The position was substantively revised with the current incumbent to align more closely with how the role is positioned nationally. The Associate Deans of Undergraduate Medical Education, Postgraduate Medical Education Continuing Professional Development and Medical Education report directly to the Senior Associate Dean, Medical Education. In addition, the Assistant Deans of Admissions, Student Affairs, Resident Affairs, Office of Professional Affairs and Master of Physician Assistant Studies also report through to the Senior Associate Dean, Medical Education.
- The Senior Associate Dean, among other duties, will support the accreditation efforts and follow up of the recent full CACMS review for the undergraduate program, the current accreditations of the CPDME Unit, PGME Unit, MPAS program and new Cape Breton Medical Campus, all in the next 18 months. This position supports the strategic development of LIC training in Nova Scotia. This position also works closely with the Associate Dean, Serving and Engaging, as well as the Senior Associate Deans of DMNB and CBMC to level the educational curriculum and outcomes to ensure comparability of education at all Dal FoM sites. The Senior Associate Dean, Medical Education oversees the Educational Excellence stream of the Faculty of Medicine Strategic Plan, is the Chair of Education Council, Chair of the Tri-Provincial Medical Education Committee, and sits on Faculty Council (ex-officio). I will be commencing the third year of my first term as Senior Associate Dean, Medical Education on July 1, 2026.

2025/26 Update – top five significant accomplishments

1. Following up as the lead in accreditation issues/deficiencies post UGME CACMS accreditation and the Progress Report due in spring of 2027 has become a high priority for this portfolio. A governance structure and working groups with dedicated teams on each deficient element have been in full swing since February.
2. Completion of the Evaluation Unit restructuring plan and implementation of a new framework into 2026. A lot of work has occurred to realign this unit, find efficiencies and build a strong cohesive team. Areas requiring support are being reviewed now, as we investigate more efficient and sustainable ways to gather, review and report on data to promote constructive change and support our programs and accreditation across the educational continuum.
3. Implementation of a full process to support the new Unified Preceptor Evaluation Form to provide as much feedback to faculty as possible relating to their involvement in the medical education programs. This has moved to biannual reporting, naming Dr. Cindy Shears as the lead, and providing training to program administrators around the functioning of the new system.
4. Supporting PGME and CPDME through their accreditation cycles in 2026 and helping the Master's in Physician Assistant Studies program through their accreditation in 2026-27. These activities are all fully in motion. Preliminary results reveal great success for CPDME.
5. Revamping the Tri-Provincial Medical Education Committee and streamlining the process to vet new PG programs and have them approved and certified. In addition, a more data driven approach to residency seat allocation with process that involves departments, our institutions, and governments of our 3 provinces.
6. Developing and Advancing Policy that supports learners and faculty across the educational continuum: Cultural Leave Policy; Data Stewardship Policy for Indigenous and Black learners, Core Competencies Required for the Study of Medicine, to name a few.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Excellence in Education

Expanded high-quality, accessible learning through major digital transformation across our educational continuum (hybrid teaching, LMS renewal in CDPME, asynchronous content) and coordinated growth of distributed training (LICs and community sites)—improving reach, consistency, and learner experience with a focus to support significant growth in these areas in future years.

High Impact Research

We have strengthened the academic foundation by advancing graduate program quality, curriculum oversight, and education research capacity, including leadership roles, and expanded medical education research expertise.

Advancing educational research by promoting scholarship across the programs in our educational continuum is core activity we subscribe to.

Valuing Our People

Intentional engagement of faculty and staff has been important in recent years through ways that not only support their work, but also their personal development. Recognition of work through awards and thanks, in addition to working with Serving and Engaging to develop a process to recognize community participation in FoM committee work has been important. Involving faculty and staff in decisions around direction of unit work builds shared work models, enhances team building and promotes pride in work.

Serving & Engaging Society

Deepened regional impact via community partnerships, distributed education expansion, and equity-focused pathways, reinforces the Faculty's social accountability mandate and engagement across the Maritimes. EDIA is embedded in all that we do.

On the horizon – priority initiatives for 2026/27

1. Ongoing work to support the new CBMC Campus, as it continues to ramp up learners over the coming few years. Supporting its provisional accreditation with CACMS in 2027.
2. The Admissions Review Committee will be completing their review of the UGME Admissions program at the end of 2026. The dissemination of the report and application of recommendations to support UGME admissions will be a priority in the Fall of 2026, as we welcome a new Assistant Dean of UGME Admissions at that time.
3. Developing and enacting process and procedure around the revised COI of Medicine with industry and other organizations so that we have a process that is effective and accountable.
4. Continuing the work to support distributed education expansion across NS in 2027, which includes Residency and LIC administrative support, faculty support, and student & resident affairs support for learners. This is a large area of work in the next 18 months.
5. To support the new Dean of Medicine in their role as they start their tenure in Fall of 2026.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr. Shawna O’Hearn	Program/Unit: Operation and Policy
---------------------------------	---

Brief overview of program/unit

The Operations and Policy team supports the Faculty of Medicine through integrated oversight of finance, human resources, IT, communications, building services, policy, and operational coordination. The unit works across the Faculty to strengthen administrative processes, support effective decision-making, and ensure the efficient delivery of services that enable Faculty priorities.

The portfolio brings together Finance, Human Resources, MedIT, Communications, and Building Services under a coordinated structure led by the Chief Operating Officer. Working as a unified leadership team, we focus on strategic alignment, operational excellence, and responsive service delivery. Through this approach, we support a connected, high-performing Faculty that is well positioned to advance its strategic priorities and respond to emerging opportunities.

2025/26 Update – top five significant accomplishments

1. Financial and Operational Transformation

Advanced key financial and operational initiatives in a challenging university financial climate, including a hiring freeze and budget reductions, through the phased implementation of the DalBuy procurement system and the successful transition of budgeting responsibilities to the Dean’s Finance team. These changes strengthened local accountability and supported cost-conscious operations while maintaining service continuity amid increasing reporting demands.

2. Strategic Reviews and Program Development

Completed or progressed several major reviews and initiatives, including the administrative review of education units, the Clinical Academic Funding Plan work to strengthen department practice plans, and the soft launch of the Assessment & Evaluation Unit, positioning the Faculty for improved academic and operational effectiveness.

3. Enhanced Communications, Advancement, and External Profile

Expanded the scope and impact of medical communications by assuming advancement communications, increasing media engagement, and strengthening recognition programs. Significant progress was also made on the Faculty’s web renewal, alongside successful collaboration with Cape Breton University in the inaugural year of the Cape Breton Medical Campus.

4. Organizational Transitions and Workforce Evolution

Navigated significant leadership and staffing transitions across operations, human resources, and facilities, while maintaining continuity of services and positioning teams for future effectiveness through new appointments and evolving roles.

- Linda Penny retired and Shawna O’Hearn assumed the interim Chief Operating Officer for 2026

- Courtney Dillman moved to Dalhousie's People and Culture and a new Director of Human Resources will start in May 2026
- Paul Bourgeois retired and Nichole McMullen transitioned into the Manager, Building Services in November 2025.

5. Infrastructure Renewal, Safety, and Space Optimization

Made substantial progress on infrastructure renewal and safety, including major capital projects (e.g., Tupper Parkade restoration, flood recovery, electrical and envelope upgrades), enhanced safety and compliance programs, and the launch of comprehensive space audits and building reviews to support long-term planning and accessibility.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- Advanced initiatives to strengthen educational delivery and oversight, including completion of the administrative review of education units, with recommendations implemented or underway.
- Supported the successful first year of the Cape Breton Medical Campus in collaboration with Cape Breton University. Continue to work on the technology systems and network infrastructure for the new building, and developed a fully functional temporary contingency space, ensuring smooth operations for this academic year and the successful delivery of distributed lectures to our third campus.
- Expanded supports for curriculum development and management, introducing AI-powered tools, new video recording services for recording curriculum content, and dedicated support to enrich the online student experience in Brightspace.
- MedIT team developed new, improved, and more cost-effective technology systems to support simulation education at both C3LR and DMNB, enabling us to deliver a more robust, user friendly, and reliable learning experience. The first OSCE using the new technology platforms was successfully administered in April.
- Completed major upgrades and enhancements to several applications, including the Postgraduate Medical Education Resident Management System, the CPDME Administrative System, and a range of other operational tools. The DalMedix infrastructure also received significant improvements, with more robust data management and the deployment of a new server featuring enhanced security currently underway.
- Soft-launched the Assessment & Evaluation Unit to strengthen academic quality and learner assessment practices.
- Renovated key teaching infrastructure, including the Tupper Link Tutorial Room, to better support modern, flexible learning environments.

Research

- Supported research environments through significant infrastructure renewal and planning, including ongoing upgrades to the Tupper building (electrical panels, envelope, and bracing) and renovations at GMP Biolabs East.
- Initiated annual research space reviews and broader space optimization planning to ensure effective allocation and future growth.
- Strengthened safety and compliance through updated training (WHMIS, Biosafety, TDG), lab walkthroughs, and enhanced biohazard security.

Serving & Engaging Society

- Expanded the Faculty's external profile and community impact through increased media engagement, proactive storytelling, and strengthened advancement communications highlighting the role of philanthropy in research and medical education.
- Progressed the Faculty's web renewal to improve accessibility and public engagement.

- Advanced work through the Clinical Academic Funding Plan Working Group to improve departmental practice plans, supporting better service to communities.
- Collaborated regionally with partners such as CBU to extend medical education and impact.

Valuing People

- Navigated significant leadership and staffing transitions while maintaining continuity and supporting organizational resilience.
- Advanced equity, inclusion, and community initiatives through the opening of a new multifaith room in partnership with the Office of Community Engagement.
- Enhanced workplace culture and environment through initiatives such as relocating the Dean's portraits and introducing Indigenous art installations in the Tupper Foyer, beginning with a May 2026 installation by Alan Syliboy.
- Continued to streamline recognition processes, increasing faculty and staff nominations and awards.
- Supported teams through operational changes, including finance transformation, procurement implementation (DalBuy), and resource realignment.
- Delivered a monthly wellness series, supported by Dalhousie grant funding, to engage staff in timely and relevant topics that promote wellbeing and workplace dialogue.
- Developed and circulated guidelines on email communication to support healthy boundaries and clarify expectations around after-hours work.

On the horizon – priority initiatives for 2026/27

Leadership Transition and Strategic Alignment

- Support the successful onboarding of the new Dean of Medicine, including targeted orientation on financial structures and processes.
- Work closely with Dr. Razack to understand and advance his communications priorities, ensuring clear articulation of his vision and goals to internal and external audiences.

Financial Operations and Process Modernization

- Stabilize and optimize the DalBuy procurement system, with a focus on improving workflow efficiency and user experience.
- Enhance financial transparency and accessibility by advancing the Medicine Finance SharePoint site as a central resource for policies, procedures, and FAQs, reducing reliance on email-based inquiries.
- Strengthen processes for tracking, reviewing, and approving funding requests through more structured and streamlined systems.

Administrative Transformation and Resource Alignment

- Implement the \$2.6M in secured funding to advance administrative transition priorities, including \$900K to support a distributed administrative model and \$1.7M to strengthen Halifax-based program administration.
- Focus on aligning resources with evolving operational needs and improving service delivery across the Faculty.

Education and Accreditation Support

- Provide targeted support for accreditation processes, including for the Cape Breton Medical Campus and other programs as required.
- Continue to strengthen administrative and operational readiness to meet accreditation standards and support high-quality educational delivery.

Digital Presence and Engagement

- Partner with Dalhousie University to position the Faculty of Medicine as a pilot for the renewed dal.ca web platform.
- Advance digital engagement by aligning web strategy with broader communications goals, improving accessibility, usability, and external visibility of the Faculty.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr. Julie Copeland	Program/Unit: Dalhousie Medicine New Brunswick (DMNB)
---------------------------------	--

Brief overview of program/unit

Dalhousie Medicine New Brunswick (DMNB) is one of the three campuses of Dalhousie’s Faculty of Medicine. The main administrative office is located on the UNB Campus in Saint John. DMNB offers a continuum of education programming for a minimum of 40 students per year over the 4-year undergraduate program. In addition, there are eight New Brunswick based postgraduate residency training programs accepting 36 R1-entry residents for the July 2026 cohort (FM in Fredericton, Miramichi, Moncton and Saint John, IFMEM in Saint John and Sussex, and IM in Saint John and Moncton) and additional core clinical rotations are provided for the postgraduate training programs based in Halifax. Clinical teaching is provided by over 650 faculty distributed throughout the clinical teaching sites and supported by local staff and academic leadership in five regional facilities in the Horizon Health Network. Our research facility has a distributed graduate studies program, led by four PhD scientists and a Research Chair. Continuing professional development is provided to all faculty regardless of geography.

2025/26 Update – top five significant accomplishments

1. UGME Accreditation preparation and continuous quality improvement:

The UGME program underwent accreditation during the 2024-25 academic year and received the final Accreditation report in September 2025. This involved a very detailed review of the program delivery across campuses and the student ISA report. DMNB team members are heavily involved in the accreditation work and follow up requirements. An incredible thank you to all DMNB faculty and staff involved in all things UGME accreditation related.

2. Program Expansion:

The third cohort of the expanded medical class of 40 students joined DMNB in August 2025. The first expanded cohort of 40 students began clerkship this Fall at clerkship sites distributed across the province.

With the expansion to 40 medical students per year, the space in the DMNB building is at maximum capacity. As such, we are undergoing space expansion planning with the Government of New Brunswick and UNB. Schematic design costs have been approved by government and the schematic design phase of planning for future expansion needs is currently underway.

July 2025 saw a further expansion of postgraduate training spots in NB with additional seats added for Family Medicine and Internal Medicine in the CaRMS 2026 cycle.

This brought the total number of residency training spots in NB to 36 for the incoming July 2026 cohort.

- Family Medicine: 22 CMG, 1 IMG, 1 NB-IMG, 1 MOTP
- Integrated Family Medicine Emergency Medicine: 4 CMG
- Internal Medicine: 7 CMG

Discussions are ongoing with the government regarding further expansion in NB from both UGME and PGME perspectives.

3. Leadership Appointments/Updates, DMNB:

Assistant Dean, Office of Professional Affairs DMNB: Dr. Marc Nicholson was appointed Assistant Dean, Professional Affairs DMNB on February 1st, 2026 and we welcome Dr. Nicholson to this role. Dr. Samantha Gray stepped down as the inaugural Assistant Dean, Professional Affairs DMNB when she was appointed the Clinical Academic Department Head for Oncology at the Saint John Regional Hospital in the Fall of 2025. We thank her for all the hard work, dedication, and leadership provided as the inaugural Assistant Dean, Professional Affairs.

Assistant Dean, Student Affairs and Resident Affairs (SARA) DMNB: Dr. Lisa Sutherland will complete her terms as Assistant Dean, Student and Resident Affairs DMNB at the end of June 2026. Dr. Sutherland has been an amazing support for students and residents over her 2 terms in the role and she will certainly be missed by many. She has had a strong impact on learners and colleagues over her time at DMNB. We wish her well in her retirement! The next Assistant Dean, SARA DMNB will be announced soon.

Moncton Student Affairs and Resident Affairs (SARA) site lead – Dr. Mariza Voges was appointed as the Moncton SARA site lead in July 2025, and we welcome her to this role. Dr. Lucy Shen stepped down from the role when she assumed her new role as the Moncton Site Director for Dalhousie Family Medicine residency program.

Clinical Academic Department Heads (CADH), Saint John Regional Hospital:

- Department of Oncology: Dr. Samantha Gray was appointed CADH in the Fall of 2025. Dr. Gray took over from Dr. Farah Naz who completed her time as CADH, and we thank her for her leadership during her term as CADH.
- Department of Emergency Medicine: Dr. Jayanand (Jay) Mekwan was appointed CADH in February 2026. Dr. Mekwan took over from Dr. Cherie-Lee Adams who completed her time as interim CADH in December 2025 and we thank her for her leadership during her time as Interim CADH.
- Department of Cardiac Sciences: Dr. Vernon Paddock was appointed CADH in February 2026. Dr. Paddock took over from Dr. Jean-Francois Legare who stepped down as CADH when he was appointed the Physician Program Lead for Cardiac Care for Horizon, and we thank him for his leadership during his time as the inaugural CADH for Cardiac Sciences.
- Department of Laboratory Medicine: Dr. Doha Itani was appointed CADH in May 2026. Dr. Itani took over from Dr. Ather Naseemuddin who completed his time as CADH, and we thank him for his leadership during his term as CADH.

4. DMNB Research:

DMNB researchers have continued to thrive across various domains including securing significant funding, publishing impactful research, and making noteworthy contributions at conferences. Numerous awards and recognitions were also received by our DMNB researchers this year.

The DMNB Research Celebration was hosted at the Riverside Country Club in October 2025 and was a huge success showcasing faculty, graduate student, medical student and resident research endeavors.

Dal Advancement hosted the inaugural DMNB Breakthrough Breakfast event at the Delta in Saint John in December 2025. This event highlighted the vital role research plays in improving health outcomes and strengthening our communities, while showcasing the outstanding work of DMNB researchers across areas such as cardiovascular health, cancer, population health, social medicine, and emergency and primary care. Thank you to our DMNB speakers Drs. Paul Atkinson, Keith Brunt, Duncan Webster, and PhD candidate Tori Nelson.

The DMNB Research Council has undergone updating and restructuring and alignment with strategic priorities. The research council now consists of 3 principal research groups: Discovery Science Research, Population Health Research, and Clinical and Medical Education Research.

Please refer to Dr. Paul Atkinson's report as Assistant Dean Research DMNB for further details in regard to DMNB Research.

5. DMNB UG success in CaRMS match

97% of DMNB graduates entered in the 2026 CaRMS cycle and successfully matched to residency programs

32/33 DMNB Med 4 students matched

1/1 DMNB Med 5 student matched

Of those matched from Class of 2026 – 53% match to Family Medicine disciplines and 47% match to Royal College disciplines

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

1. Education:

- DMNB continues to be an integral component of the delivery of medical education in the Faculty of Medicine. This upcoming year will see a full complement of classes of 40 students/year in all Med 1-4 years after the expansion of class size to 40 students began in the Fall of 2023. Our postgraduate programs also expanded with additional seats added in both Family Medicine and Internal Medicine programs this year.
- We work closely with our UGME and PGME partners in aligning the delivery of the medical education program at DMNB with the overall Faculty of Medicine strategic plan.
- DMNB faculty and staff have been heavily involved in UGME accreditation, playing key roles on the team. PGME Accreditation preparation is in progress with the PGME Accreditation coming in November 2026.
- Our Faculty Development team has provided sessions on learning environment concerns, teaching, resources for learners, and artificial intelligence in medicine among other topics, and along with the Clerkship leadership oversaw the planning and agenda for this year's LICD retreat in Truro. A number of DMNB leaders were invited speakers at the annual Dr. Angie McGibbon Medical Education Forum with Horizon Health in Woodstock, NB in April 2026.
- Our Student Affairs team participated in several presentations and faculty development sessions over the last year and have participated in numerous committees supporting student and resident needs in the Faculty of Medicine. Please refer to Dr. Lisa Sutherland's report as Assistant Dean SARA DMNB for full details.

2. Research:

- DMNB Research has had a strong year in many regards – Being awarded funding and grants, publishing research, and making contributions at conferences and meetings.
- The DMNB Research Celebration was hosted at the Riverside Country Club in October 2025 and was a huge success showcasing faculty, graduate student, medical student and resident research endeavors.
- Dal Advancement hosted the inaugural DMNB Breakthrough Breakfast event at the Delta in Saint John in December 2025. This event highlighted the vital role research plays in improving health outcomes and strengthening our communities, while showcasing the outstanding work of DMNB researchers across areas such as cardiovascular health, cancer, population health, social medicine, and emergency and primary care. Thank you to our DMNB speakers Drs. Paul Atkinson, Keith

Brunt, Duncan Webster, and PhD candidate Tori Nelson.

- The DMNB Research Council has undergone updating and restructuring and alignment with strategic priorities. The research council now consists of 3 principal research groups: Discovery Science Research, Population Health Research, and Clinical and Medical Education Research.
- Please refer to Dr. Paul Atkinson's report as Assistant Dean Research DMNB for full details.

3. Serving and Engaging Society:

- DMNB aligns with the work of the Serving and Engaging Society office on anti-oppression, anti-racism, and support for diverse learners and faculty. We have a collaborative relationship and appreciate access to their expertise.
- Community-Engaged Service Learning – 25 learners at DMNB participating along with 9 partner organizations in New Brunswick.
- Our Student and Resident Affairs team attend to the stressors of transition to practice and keeps social accountability front of mind in their career advising. They help organize and schedule recruitment events, collaborating with the Regional Health Authority and Government of New Brunswick recruiters. This ensures learners can build personalized connections to maintain throughout their training, all with the aim of recruiting and retaining learners in the Maritimes.
- Community engagement with high school students to help educate them on the path to medicine and/or medical research.
- Doctor for a Day resumed this year in partnership with Under One Sky Friendship Centre. On April 13th, Indigenous high school students who are curious about health, medicine, or becoming a doctor had the opportunity to spend the day at the DMNB campus, learning directly from medical trainees through presentations and interactive activities. A fun and engaging exploration of medicine careers.!

4. Valuing our People:

- DMNB values all our team members and works to ensure all our team members feel valued.
 - Micro appreciation events: Host lunches, coffee breaks, celebrations, team building activities
 - Celebrated Administrative Appreciation week
 - DMNB wellness committee coordinates events and activities to help with engaging and valuing our team members and their wellness
 - Monthly team meetings with all DMNB staff including distributed team members. Equal voices - all members can bring items forward for discussion
 - Support professional development and conference/course attendance opportunities
 - We provide a hybrid work model with 1-2 days/week of work from home available

On the horizon – priority initiatives for 2026/27

Accreditation:

- UGME Accreditation follow up work on identified areas for improvement from the 2025 CACMS Accreditation report. Preparation for the upcoming 2027 mini-accreditation report for areas of improvement identified in the 2025 review.
- PGME Accreditation preparation planning for the PGME Accreditation visit in November 2026

Future growth opportunities and planning:

- Continue work on recruitment and retention of faculty participating in the UG and PG programs in NB
- Add an additional PhD researcher to the DMNB Research team this coming academic year
- As the provincial government investigates the possibility of increasing medical education delivery in NB, it is recognized that further expansion requires coordination of many elements including

infrastructure (both from the DMNB campus and Horizon Health perspectives, learner accommodations etc.), a higher degree of faculty engagement (potentially requiring a coordinated and alternate approach to faculty practice models and remuneration), and increased administrative support needs. There are many elements required to be able to increase further undergraduate and postgraduate learners in the coming years. Engagement with the Department of Health and Department of Post-secondary Education Training and Labour, Horizon Health, and NBMS (New Brunswick Medical Society) will be required to help develop innovative strategies to ensure that teaching is a core activity for most physicians across the province.

- Continue to examine future growth and collaboration opportunities for DMNB Research
- Continue to enhance partnerships and collaboration with our stakeholders in NB

Associate and Assistant Deans – Annual Report 2025/26

Name: CAPE BRETON MEDICAL CAMPUS	Program/Unit: UNDERGRADUATE MEDICAL EDUCATION
---	--

Brief overview of program/unit

CBMC Welcomed it's first cohort of students into the MD program at the CBU campus in August 2025. 30 students joined the Class of 2029 to begin their undergraduate medical studies at Dalhousie's newest distributed campus. The Marconi Campus (former NSCC building) was refitted to include space for lectures, tutorials, clinical skills sessions, and an anatomy lab. Space was also created for UGME, Student affairs and plenty of lounge and study space for students. This "temporary" space more than fit the students' needs while the construction was ongoing for the new medical campus building.

Sydney has been an LIC (Longitudinal Integrated Clerkship) site for the past 7 years and with the medical school expansion will see it's placements double for 2027.

In addition to our new Undergraduate Medical Campus there are 2 Sydney based postgraduate residency training programs (FM and iFMEM) and an additional FM training program in Inverness. Sydney is also a specialty postgraduate block training site for Surgery, Psychiatry, Pediatrics and Internal Medicine.

Dr Jennifer Hall completed her tenure as Associate Dean at CBMC at the end of 2025 and much of the success of this inaugural year is owed to her. Due to her commitment and vast knowledge in distributed medical education the students have received an equitable educational experience mirroring their sister campus at DMNB.

Dr Joan Salah is the Family Medicine Residency Program Site Director and Dr Jean McLachlan is the Inverness Site Director. Undergraduate and Postgraduate Teams are working together on processes for ongoing partnership.

Our new medical campus building has a Grand Opening ceremony slated for May 14, 2026. Students and Staff are excited to begin the 2026 academic year in the new building.

1. Opening of the campus for 30 medical students to commence their undergraduate medical education. By all accounts the first year of study at CBMC has been successful. Students have received a quality educational experience, and the faculty have been very enthusiastic about their shared experiences with the students.
2. CBMC stood up a temporary anatomy lab in the Marconi Campus building. This was a huge undertaking by our Anatomy Team. The lab received full air quality testing, and the students commenced use in January 2026.
3. Hiring of key decanal positions to instill a strong inaugural senior leadership team to carry out the various duties within UGME:

Assistant Dean Pre-clerkship – Dr Arlene-Kelly Wiggins

Assistant Dean Clerkship – Dr Sarah Mader

Assistant Dean Resident and Student Affairs – Dr Annalee Coakley

Assistant Dean of Office of Professional Affairs – Dr Steve MacDougall

Director Service Learning and Interprofessional Affairs – Dr Abidemi Fasanmi

Director of Skilled Clinician – Dr Susan MacLeod

Director of Faculty Development – Dr Alison Archibald

Special Advisor Indigenous Learners – Dr Carl Marshal

4. Foundational work on LIC expansion. In 2027 30 CBMC students will be distributed to sites across rural Nova Scotia for their clerkship experience. Working with Dr Abir Hussein (Assistant Dean of Distributed Medical Education) and Dr Sarah Mader (Assistant Dean of Clerkship) we have hired 10 LIC Directors to lead this programming at their sites. Key partners in this undertaking are Nova Scotia Health and Department of Health and Wellness as we expand across the province. David Pier Consultants has assisted in key stakeholder meetings and environmental scanning to prepare sites for additional learners.
5. The campus hosted a Family Medicine Career Fair to showcase to students the varied career opportunities within the specialty of Family Medicine. Physicians representing – Emergency Medicine, Hospitalist, Palliative Care, Care of the Elderly, GP Oncology, Women’s Health, MAID, Surgical Assist, Adolescent Medicine, Community Family Medicine, Occupational Health, Sport’s Medicine, Transgender Medicine and Addictions Medicine attended to share with students their Family Medicine journey and the breadth of practice opportunities.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

- **Education:**

- Dalhousie and Cape Breton University have come together in a unique endeavour to train Medical Students who have preselected Family Medicine as their career option. The inaugural class of 30 students in 2025 will translate into 30 new Family Physicians for the Province of Nova Scotia in 2031.
- There has been an enormous investment by the Province of Nova Scotia to support the CBMC campus development and the efforts by the UGME team is short of remarkable. CBU pivoted to ensure the Marconi Campus building was retrofitted to accommodate all the academic delivery for MED 1 and the students have truly received a remarkable experience.
- The Faculty Development team has been active providing sessions for teachers and partnering with the Postgraduate team in delivery of sessions focused on early-stage learners and layered learning.

- **Research:**

- CBMC is embarking on a search for an Assistant Dean of Research. CBU is poised to be a collaborator in research with active research areas in Sustainable Health and Wellness.
- The Centre of Excellence for Healthy Aging at CBU is collaborating with Nova Scotia Health in the Accelerating Clinical Trials Program which aims to make clinical trials more accessible for rural regions and underrepresented populations. Local Faculty are getting involved in research and students have chosen RIM supervisors within this collaboration.
- CBMC has plans to hire 4 Clinician Scientists who will be Family Physicians in the Faculty of Family Medicine who will have protected research time and grow research capacity amongst our faculty.

- **Serving and Engaging Society:**

- Faculty Development sessions in the Spring of 2026 are focusing on Preparing Learners for Equity-Oriented Care in Diverse Communities. Preparing learners for the diversity of patient populations they will encounter in their training will serve our communities well. Our sessions will focus on the role of educators in addressing social accountability and promoting equity for Indigenous, newcomer and gender diverse populations.
- Our students partnered with students at DMNS in engagement with high school students to help educate them on the path to medicine with a medical student representative to share their experience.
- Our students also participated in Admissions Open House sessions at CBU to speak to the pathway of acceptance into CBMC.
- Through our interprofessional practice and learning CBMC is formulating service-learning opportunities through new and sustained partnerships and building coalitions with Allied Health Professionals' institutions and community organizations in Cape Breton (i.e.: Ally Center)

- **Valuing our People:**
 - CBMC is striving to build a team where all members are valued. Our leadership team meets monthly to hear from Assistant Deans and Directors on their portfolio to ensure we can lean on each other for advice and support.
 - There is a monthly meeting where all UGME staff exchange ideas and work on activities to build strength within themselves.
 - The Associate Dean has regular connects with Dalhousie's Dean of Medicine (Dr David Anderson) as well as CBU President (David Dingwall). CBU's Vice-President of Finance and Operation (Gordon MacInnis) has been instrumental in ensuring the budgetary requirements for CBMC are understood and supported through Department of Health and Wellness and Department of Advanced Education. We have a good working relationship due to Gordon's relationship building in this space.
 - CBMC supports professional development amongst its faculty with regular CPD opportunities both locally and nationally.

On the horizon – priority initiatives for 2026/27

Accreditation:

- Dalhousie Medical School is currently undergoing data collections for a limited accreditation visit in the Fall of 2027. During this visit CBMC will also undergo an accreditation visit. There will be a concentrated effort in this space to ensure the new campus meets these standards. Our teams will be working diligently on this date collection over the coming months and year.

LIC expansion:

- A collective effort in Distributed Medical Education across the province of Nova Scotia will be required to ensure our LIC sites are ready to accept learners in August 2027. Much work has already taken place and through our working groups detailed planning is underway. This will require ongoing support from Nova Scotia Health as we partner to build capacity and support faculty in community.

Director of Rural Family Medicine

- Search will begin to hire a rural family physician to ensure there is a strong family medicine presence within the undergraduate space.
- Creating a rural family medicine summer Internship to give CBMC students an opportunity to experience the breadth of practice in rural Nova Scotia.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr. Lori Connors	Program/Unit: Continuing Professional Development and Medical Education (CPDME)
-------------------------------	--

Brief overview of program/unit

Continuing Profession Development and Medical Education (CPDME) is the unit responsible for providing ongoing innovative, dynamic, and responsive distributed education to the Basic Science Faculty and distributed Clinical Faculty at Dalhousie Faculty of Medicine. Lori Connors started her term as Associate Dean in 2025. The AD works in a co-leadership model with Managing Director Ms. Mary Ann Robinson. The unit continues to be in an excellent position as new programs and initiatives are driven forward via this leadership team. The Associate Dean position is a 0.6 FTE.

While the primary focus of our medical education initiatives is aimed at our faculty within Medicine, the unit provides inclusive interprofessional educational opportunities for our health professional colleagues across the continuum of clinical care. The goal of all these educational offerings is to provide high quality clinical education and faculty development to improve health outcomes and clinical care for our Maritime population.

The flagship programs at the core of our business include our Accreditation team, Conference team, Faculty Development team, Medical Education Research team, and Academic Detailing team that provides essential education services to our faculty, staff, learners, and other health professionals.

In addition, CPDME has several other wide-ranging areas of responsibility:

1. Clinical Webinar Program
2. Community Hospital CME programming
3. Humanities programming
4. Public education, which includes our Mini Medical School

2025/26 Update – top five significant accomplishments

1. Accreditation - Our unit underwent an accreditation site visit from the Committee on Accreditation of Continuing Medical Education (CACME) on April 13 and 14, 2026. Our official report has not yet been approved by CACME but overall, the visit went very well. This was the culmination of several years' work by all of the faculty and staff in CPDME.
2. Faculty Development for the Cape Breton Medical Campus - We have a new Faculty Development Director and Manager for the CBMC that have been busy helping faculty upskill for the new CBMC campus. Drs. Alison Archibald and Katie MacLeod are great additions to our CPDME team. We hosted a Faculty Development Retreat at the Dean's Retreat in Cape Breton in November 2025.
3. X-CD- We have successfully implemented a new platform for conference registrations. This platform will also be used to house virtual conference offerings as well as webinars. A conference app is next to be implemented within the suite of offerings from X-CD.
4. Academic Detailing Service - Our Antibiotic Update reached over 700 primary care providers and allied health professionals working in primary care. Our Academic Detailing team is also part of a national grant through the Canadian Drug Alliance and will be working on a topic with three other Academic Detailing Services across the country.

5. Medical Education Research Chair - We are midway through the search process to secure our Endowed Chair in Medical Education Research. This position will include a 0.4 FTE dedicated to medical education research.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education - CPDME hosts several large conferences each year, providing education to hundreds of physicians and other health care professionals. These include our Fall and Spring Refreshers and the Thomas and Alice Morgans Fear Memorial Conference. This year's Spring Refresher has a focus on Therapeutics topics. The theme for the Thomas and Alice Morgans Fear Memorial Conference is: Bright Spots, Hot Spots: A Focus on Health-Promoting Work and Learning Environments and is co-hosted with the Department of Medicine. Our Community Hospital Program and Clinical Webinar Program have provided over 40 sessions throughout the year to hundreds of clinicians. Our Faculty Development team has hosted the Professional Development Seminar Series as well as Faculty Development retreats, a variety of asynchronous and synchronous courses. Our Humanities team has partnered with Kings College to collaborate on a certificate in Medical Humanities and the Department of English on several guest speakers and writing workshops. Our Academic Detailing Service (ADS) has completed topic review of Antibiotics and is now providing education on COPD.

Our CPDME full unit accreditation through CACME occurred in April 2026. In 2025/26 each of our units continued work on our accreditation standards data collection instrument. A full team pre-accreditation retreat took place in March 2026.

We implemented our new virtual delivery platform for registrations, virtual conference delivery and a conference application.

Research - Our Medical Education Research Unit continues to be very productive under the leadership of Drs. Anna MacLeod and Sarah Burm. At ICAM 2026 we had several members of our team present workshops, posters and oral abstracts. In addition, our ADS Team, in collaboration with the Drug Evaluation Alliance of Nova Scotia (DEANS), continues to work on a research project relating to detailing work around alcohol misuse disorder and the impact of education on changes to prescribing patterns over time.

Serving and Engaging Society - CPDME works regularly with Serving and Engaging leadership to develop and enrich programs and services. We continue to offer an Anti-Oppression course that is now required for all new faculty hires.

Valuing our People - We offer professional development for our team members and host semi-annual retreats. Our team continues to be involved in bi-monthly CPDME Operations Committee meetings, social outings and conference attendance.

On the horizon – priority initiatives for 2026/27

1. Accreditation - Once our CACME report is received in November of 2026, our team will review and work towards any identified areas of improvement as we enter a new eight-year CQI cycle.
2. Faculty Development - Continue to support Faculty as our medical school footprint grows, with new LIC communities and new faculty hires. Endeavour to partner with Basic Sciences to enhance offerings for our basic science faculty.
3. Research - Have a successful search process for a new Medical Education Research Chair. We continue to support our Medical Education Research team and explore more opportunities in CPD scholarship.
4. Virtual platform - Continue to expand the offerings available on our virtual platform, including implementation of a conference application.

Associate and Assistant Deans – Annual Report 2025/26

Name: Eileen Denovan-Wright	Program/Unit: Associate Dean Research Medical Research Development Office
------------------------------------	--

Brief overview of program/unit

Dalhousie’s Medical Research Development Office (MRDO) is the Faculty of Medicine’s central hub for research leadership, operations, infrastructure, and investigator support. It is led by Dr. Eileen Denovan-Wright as Associate Dean, Research, and supported by three Assistant Deans responsible for graduate/postdoctoral studies (Dr. Kirill Rosen), clinical research (Dr. John Sapp), and Dalhousie Medicine New Brunswick (DMNB) research (Dr. Paul Rosen). Kelly Abbott (Director) leads the unit’s operations, which include unit finances, human resources, funding programs, and strategic plan (co-lead).

MRDO’s mandate includes leading research strategy and governance by participation on key university faculty committees, supporting major research funding competitions and institutional research programs (including CFI-related funds, provincial matching funds, and CRC/CERC supports), and working with Advancement on donor recruitment, fund disbursement, and reporting.

Operationally, MRDO manages a broad portfolio covering finance/HR/program delivery, administration of endowed chairs (~30), and coordination of multiple research training and support programs (e.g., studentships, travel awards, Clinical Investigator Program, Medical Research Graduate Program, and PREP). It also supports Faculty research infrastructure through oversight of the Faculty of Medicine CORES platform, including management/supervision of CORES personnel.

MRDO aims to be a “connector across systems” by working closely with central units such as finance, human resources, informational technology, safety, and others, with other faculties, with research partners such as IWK Health Centre and Nova Scotia Health, and with Dal’s Office of the Vice President Research and Innovation and Office of Research Services across pre-award and post-award stages.

2025/26 Update – top five significant accomplishments

1. Expanded donor-funded programs (summer studentships, graduate and postdoctoral fellowships, conference grants, River Philip Transformation, Sustaining Excellence).
2. Served as an ongoing member of the AFMC and helped organize research components and student outreach programs for ICAM meeting (April 3–6, 2025).
3. Supported recruitment and application for CERC in Vaccines and Biologics Translational Science
4. Completed a full review of MRDO processes and strategic plans to 1) align with values of respect, inclusion, collaboration, accountability, and excellence and 2) make process between MRDO and central administration more efficient.

5. Secured all federal, provincial, donor, and university funding and approvals for GMP BioLabs East. Supported the ongoing construction, renovation, operational planning, and Health Canada compliance for GMP BioLabs East.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

MRDO advances the Faculty of Medicine's Strategic Plan (2023–2028) by enabling high-impact research through partnership, capacity building, translation, and sustainable infrastructure. Under the leadership of the Associate Dean Research, MRDO serves as the Faculty's central coordinating unit for research development, working across departments, centres and institutes, health authorities, community partners, and other Dalhousie faculties to align research priorities with institutional, provincial, and community needs.

In support of the Strategic Plan's first focus area, partnering to establish focus and momentum, MRDO facilitates collaboration across the distributed research enterprise by connecting researchers to appropriate supports, and strengthening relationships with Nova Scotia Health, IWK Health Centre, Dalhousie Medicine New Brunswick, and external partners. Through these partnerships, MRDO helps position interdisciplinary teams to address priority research areas and emerging opportunities that align with Faculty and health system priorities.

MRDO contributes to identifying and mobilizing research potential by providing coordinated support across the research lifecycle, including mentoring, internal peer review of grant applications, oversight of internal programs and awards, and guidance on research training and career development. Strategic and operational oversight is informed by the Faculty of Medicine Research Advisory Committee and its subcommittees, the Scholarship Committee and Faculty of Medicine Centralized Operations Research Supports and Equipment (FoM CORES) Advisory Committee, which advise on program delivery, awards reviews, research chair renewals, and longer-term research planning and infrastructure acquisition and maintenance. This governance structure supports equitable access to opportunities and helps ensure that research excellence is fostered across disciplines and career stages.

In alignment with the Strategic Plan's focus on strengthening research translation and impact, MRDO works with Faculty partners, Advancement, and external stakeholders to support research that delivers health, societal, and economic benefits. The Office plays a key role in embedding equity, diversity, inclusion and accessibility as cross-cutting priorities, and in advancing community-engaged research approaches that align with the Faculty's Serving and Engaging Society commitments.

MRDO also supports the strengthening of research infrastructure and financial sustainability by coordinating research infrastructure planning, supporting centres and institutes, and improving internal processes related to funding development, operations, and reporting. With a fully staffed complement and revised workflows implemented under the leadership of the Associate Dean Research and Director, MRDO continues to enhance coordination, consistency, and efficiency across its expanding portfolio in support of the Faculty's high-impact research goals. FoM CORES is an essential component support research and partnership and fostering collaboration.

On the horizon – priority initiatives for 2026/27

1. Support the development of Canada Impact, Chair, and Emerging Leaders applications for the Faculty of Medicine, including Part 1, full Part 2, and the accompanying CFI application; lead design and fundraising for the CIRC/CERC collaborative space.
2. Lead the CFI Innovation Fund Stream 3 application for Faculty of Medicine Centralized Operations Research and Equipment Supports.
3. In partnership with Advancement, build annual support for equipment, start-up funds, CFI matching funds, seminar and conference grants, visiting speaker grants, and endowed chairs.
4. Lead the development of a team-based Innovation Hub and ensure its long-term sustainability in partnership with Dal Innovates, OVPRI and the Faculties of Dentistry and Health.
5. Increase the volume and competitiveness of grant applications across Tri-Agency programs and other funding organizations.
6. Lead initiatives to strengthen bioinformatics, artificial intelligence and regulatory training within the Faculty of Medicine.
7. Lead the review and renewal process for Faculty of Medicine centres and institutes.
8. Complete the construction and establishment of GMP BioLabs East and participate on the Governance and Oversight Committee.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr. Ian Epstein	Program/Unit: Undergraduate Medical Education (UGME)
------------------------------	---

Brief overview of program/unit

The Undergraduate Medical Education Office is responsible for the development, distribution and evaluation of curriculum for all 4 years (and Med 5) of the Medical School and for the assessment of students at each stage of their training. Its work is supported by the Undergraduate Medical Education Curriculum Committee (UMECC) and its subcommittees and the Assistant Deans, Pre-clerkship and Clerkship.

2025/26 Update – top five significant accomplishments

1. Cape Breton Medical Campus inaugural Med 1 students welcomed and Distributed Medical Education Unit launch.
2. Successful Accreditation granted by the Committee on Accreditation of Canadian Medical Schools (CACMS). Final communication letter was received in September 2025.
3. UGME restructuring and soft launch of new Assessment and Evaluations Unit in January 2026.
4. Promotion, Assessment and Appeal Regulations review.
5. The UGME program continues to have success in the national CaRMS match. Total of 141 / 146 students matched successfully, consistent with the national average:

109/113 Med 4s matched at DMNS

32/33 Meds 4s matched at DMNB

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- Pre Clerkship Curriculum Manager funded to continue case diversification work.
- Implementation of new technologies (Sim Converse online secure privacy office approved AI platform to simulate case practice for communication skills).
- [New Pre Clerkship Student Led Revisions to Curriculum Guideline](#) approved.
- 1st year of Pro Comp I & II launched after major curriculum revision.

Research:

- Continuing to provide support to critical Faculty of Medicine research mission.
- Welcomed Dr. Sarah Burm as the new Research in Medicine Unit Head.
- Under Dr. Burm's leadership, our students continue to do quantitative, qualitative and quality improvement research.

Serving and Engaging Society:

- Now in its 10th year, continuing to provide support and encouragement for UGME Learners to participate in Community-Engaged Service-Learning offerings.
- A total number of 81 students participated in Service-Learning offerings (56 at DMNS and 25 at DMNB). 42 partner organizations are participating (32 in NS and 9 in NB).
- UGME Associate Dean and Serving and Engaging Society Associate Dean set quarterly meetings to enhance collaboration between these units.
- Enhanced collaboration with Black, Indigenous, and Francophone preceptors to assist with focus community placements for May 2026 Rural Week.

Valuing People:

- Weekly meetings with UGME coordinators, manager and director occur. Ongoing improvement in morale and in retention of staff.
- Recognition of team members including Whitney Proulx (DMSS Hippocratic Pinecone and Faculty of Medicine Emerging Leader award, and Dr. Sutton (Academic Leadership Award).
- Creation of *The Vibe Tribe*, collaboration between Master of Physician and UGME Units focused on social events, fun, and team member recognition. The Vibe Tribe released their first newsletter in December 2025.
- Open-door approach that encourages frontline faculty to raise concerns related to students, the program, or curriculum. During this academic year the Associate Dean held several meetings to support ongoing dialogue and program responsiveness.

On the horizon – priority initiatives for 2026/27

- Development of new four-year continuous quality improvement cycle for curriculum review and refresh, under the auspices of the new Assessments and Evaluations Unit.
- Expansion of Longitudinal Integrated Clerkship sites.
- Ongoing expansion of CBMC campus as second cohort of students join in August 2026.
- Preparation for upcoming 2027 mini-accreditation report and visit pertaining to CBMC expansion and areas identified in the 2026 review.
- UGME review of SharePoint spaces to create repository sites that are easier to navigate for new staff and committee members.
- Development of Curriculum Coordinators manuals - one stop shop for all training and processes – Manual will be titled the “Coordinator Companion”.

Associate and Assistant Deans – Annual Report 2025/26

<p>Name: Babar Haroon (Assoc. Dean) David Bowes (Asst. Dean)</p>	<p>Program/Unit: Postgraduate Medical Education</p>
---	--

Brief overview of program/unit

The Postgraduate Medical Education (PGME) Office oversees the operation of 56 active accredited residency training programs at Dalhousie University, including programs accredited by the College of Family Physicians of Canada (CFPC) and the Royal College of Physicians and Surgeons of Canada (RCPSC), as well as several unaccredited fellowship programs. These include accredited direct-entry programs, accredited subspecialty residency programs, Family Medicine Enhanced Skills programs, and Areas of Focused Competence (AFC) programs, in addition to a range of unaccredited Dalhousie fellowship opportunities. In 2025-2026, there were more than 700 trainees registered with the PGME office. The associate dean, Dr. Babar Haroon, provides institution-level strategic and operational oversight to these programs and is supported by our assistant dean, Dr. David Bowes, whose role includes oversight of the Continuing Quality Improvement in PGME Committee (CQIPEC) and the PGME Medical Education Teaching and Research Office (METRO). In these roles, the assistant dean manages the PGME accreditation process, including internal reviews and preparing and supporting programs for external reviews and is responsible for the centrally delivered PGME curriculum and its evaluation. The senior associate dean for DMNB, Dr. Julie Copeland, continues to provide operational oversight for PGME programs in New Brunswick. Dr. Margaret Garnier-Liot, PhD, continues to lead the PGME Office’s administrative team and operational support as the Director. PGME has successfully developed, and is currently actively recruiting, a Senior Manager role which will assist in streamlining internal workflows and provide focused coordination of PGME’s learner administration unit. This is the first new 1.0 FTE managerial role to be introduced to PGME’s administrative team in over a decade.

The leadership team is supported by the PGME Committee, comprised of all program directors and administrators of postgraduate training programs, resident representatives, and representatives from Health Authority partners. Communication Skills lead, Dr. Alison Dixon, successfully completed her third year in this role introducing new interventions and further revamping the IMG orientation structure. Competency Based Medical Education (CBME) lead, Dr. Dafydd Davies, who provides specialized support for our CBME programs, continued his work as the Royal College rolls out CBD 2.0. PGME Subcommittee Chairs including the Educational Advisory Board (Dr. Robyn Doucet) and the policy committee (Dr. Mark Bosma) also provided invaluable support to PGME and its learners, faculty and operations and need a very special recognition.

2025/26 Update – top five significant accomplishments

- Expansion of residency positions in Family Medicine.
- Further alignment of postgraduate admissions pathways for Indigenous, Black, and Maritime learners with undergraduate admissions pathways.
- Accreditation activities: Continued support to programs in preparation for the upcoming joint CFPC/RCPSC External Review, with a strong focus on internal review processes, continuous quality improvement, and program education. The following activities have taken place internally this year: 8 internal mandated Action Plan Outcome Reports (APORs) for: Family Medicine Enhanced Skills, General Surgery, Pediatric Emergency Medicine, Pediatric Surgery, Hematological Pathology, Internal Medicine, Pediatric Clinical Immunology & Allergy, and Dermatology; 6 Internal Program Progress Reports for: Hematology, Gynecologic Reproductive Endocrinology and Infertility, Nephrology, Neurology, Pediatric Hematology Oncology, and Urology; 6 internal program reviews: Neuroradiology, Medical Microbiology, Palliative Medicine, Pediatric Radiology, AFC Sleep Medicine, and Pediatric Neurology; PGME hosted 4 Accreditation Professional Development Workshops between September and December 2025 to assist programs in preparing for External Review; five workshops were delivered during the 2024–2025 academic year; All programs were required to submit CanAMS instruments by December 31, 2025. PGME reviewed submissions between January and March 2026 and work collaboratively with programs to finalize materials for External Review.
- The bi-ennial Voice of the Resident (VoTR) survey was distributed and responses collated in winter 2026. This survey collects important data from the resident population and informs strategic programming for PGME and the Faculty of Medicine.
- A collaborative and transparent approach to determining R-1 quotas was undertaken for the first time in 2024-25. In 2025-26, this process was further enhanced with not only information from departments and health authorities being collected, collated, and presented to tri-provincial colleagues, but streamlined forms and templates also being introduced to further promote transparency in order to obtain funding for 2027 residency seats.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

- Education:
 - o Continue to provide individualized 1:1 accreditation support meetings for Program Directors and Program Administrators to support program readiness and CanAMS submissions, as well as a further Professional Development Workshop on preparing for the onsite review.
 - o Continuation of professional development series for program directors and administrators as part of our regular PMEC meetings.
 - o New monthly PGME Drop-in/Development Sessions were held for Program Administrators to discuss administrative items and provide professional development in administrative areas.
 - o The PGME Leadership Elective was delivered for 4 weeks in November and December of 2025. This program offers an intensive leadership experience tailored to resident physicians. 12 residents participated this year.
 - o A successful annual PGME Education Day for program directors and administrators, coordinated by the PGME team, was held in February 2026.

- Research:
 - A poster titled “Building Connection Through Multisource Feedback: Implementing a 360-degree Feedback Framework for Program Directors” with authors Dr. Cindy Shearer, Dr. Margaret Garnier-Liot, and Dr. Babar Haroon was presented at the International Conference on Residency Education (ICRE) in October 2025.
 - Annual Research Day being held on June 11, where research awards are awarded, as well as PGME scholarships. The research award categories include:
 - Best overall award- Co-Sponsors: Dalhousie Medical Alumni Association and Dalhousie Medical Research Foundation
 - Best work in quality improvement, medical education, leadership, or administration- Sponsor: Dalhousie Medical Alumni Association.
 - Best work in basic science research- Sponsor: Dalhousie Medical Research Foundation
 - Best work in clinical research- Sponsor: Dalhousie Medical Research Foundation
 - Best work by a PGY1-2 resident- Sponsor: Dalhousie Medical Alumni Association
- Serving and Engaging Society:
 - Pathways for Black and Indigenous learners to enter residency continue to be refined, in collaboration with the Academic Director of Indigenous Health and the Academic Director of Black Health. For the 2026 R-1 match, the PGME office adjusted the workflow and identification process to better align with UGME admission processes.
 - A priority pathway for applicants with an established Maritime connection was introduced for Family Medicine programs, which aligns with UGME prioritization.
- Valuing People:
 - Fatigue Risk Management resources for residents and programs have been developed and introduced to aid in systems change efforts.
 - Professional development fund available for PGME office staff.
 - In-person PGME office staff break/lunch socials, including a team holiday lunch in December 2025 and an Administrative Professionals Day lunch in April 2026.
 - Held third annual retreat for PGME office staff in January 2026 focusing on psychological safety and workplace resilience.
 - Held third annual MaRDocs/PGME retreat in November 2025 to discuss common issues.

On the horizon – priority initiatives for 2026/27

- Continue preparation for regularly scheduled accreditation visit by the Royal College and College of Family Physicians in November 2026.
- Continue to introduce EDIA initiatives and policies to align with the new CanERA institution standards.
- Develop Indigenous and Black resident support structures in postgraduate education.
- Enhanced engagement and outreach with distributed sites with virtual site visits.
- Continue to restructure PGME administrative structures by adding a 1.0 FTE role in an administrative support role.
- Development of a medical education research database available for learners and program directors to showcase their research in medical education, allowing increased collaboration and productivity.
- Continue to celebrate medical education enhancements and novel programming with conference presentations.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr Gaynor Watson-Creed	Program/Unit: Serving and Engaging Society
-------------------------------------	---

Brief overview of program/unit

Serving and Engaging Society (SES) is a core stream of the Faculty of Medicine’s Strategic Plan, advancing social accountability and health system impact beyond traditional education and research.

Working closely with the Office of Community Engagement (OCE), SES partners with communities and government to re-examine institutional relationships, centre equity and trust, and position the faculty as a credible health system partner and change agent.

In January 2026, Jennifer LeBlanc and Said Msabaha assumed interim co-director roles for OCE, following Dr. Shawna O’Hearn’s transition to Interim Chief Operating Officer.

2025/26 Update – top five significant accomplishments

Social Accountability

- The Social Accountability work at Dalhousie received a satisfactory result in the recent UGME Accreditation, highlighting the significant work and accomplishments of this portfolio over the preceding years.
- The Valuing Community Task Force developed a comprehensive set of Guidelines for Community Compensation, Support, and Recognition in collaboration with Dalhousie Medicine. These guidelines represent a significant step toward more equitable and respectful partnerships with community members. The Guidelines were approved by Faculty Council in 2025 and can be found here: https://cdn.dal.ca/content/dam/dalhousie/pdf/faculty/medicine/departments/core-units/ServingandEngagingSociety/OCE_2025_November_Valuing_Comm_Guidelines_approved.pdf

Anti-Oppression

- Anti-oppression Subcommittee implementing the [Anti-Oppression Policy](#) which was approved in August 2025
- White Fragility Clinics continue to provide space for faculty and staff to engage in a reflexive anti-oppressive practice
- Our team has continues to prioritize anti-oppression and EDIA across multiple levels of the Faculty. This includes educational leadership through presentations and Grand Rounds, reaching over half of the departments to foster dialogue and action on systemic inequities. Additionally, we have contributed to the training and development of medical students and residents, integrating anti-oppression principles into their learning environments. Led by the Associate Dean and Academic Directors, this work reflects our commitment to structural change, cultural humility, and building a more just academic and clinical environment.

Indigenous Health Education and Learner Supports (Since 2024)

- Continued advancement of Indigenous medical education through strengthened academic leadership, expanded admissions, and provincial community engagement.
- National leadership reflected through hosting a national Indigenous medical education gathering.
- Enhanced academic leadership with Dr. Shanté Blackmore (Millbrook First Nation) as Academic Director, Indigenous Health, and Dr. Carl Marshall as Academic Director, Cape Breton Medical Campus.
- Ongoing growth in Indigenous learner enrolment through the Indigenous Admissions Pathway, supported by expanded outreach across the province.
- Indigenous learner supports grounded in culturally safe, holistic approaches, including:
 - Elder led sharing circles and teachings
 - Land based learning and cultural programming
 - Access to financial supports
 - Dedicated Indigenous student space
 - Regular academic advising and structured learner check-ins

Promoting Leadership in Health for African Nova Scotians (PLANS)

- CaRMS Outcomes: All Black learners in the Class of 2026 successfully matched through CaRMS in the first or second iteration, demonstrating strong academic preparation, learner support, and residency readiness.
- Black Learners Admissions Pathway (BLAP): 22 offers extended for the UGME Class of 2030 (September 2026 entry), representing the 3rd BLAP cohort and continued progress in equitable admissions.
- Graduate Outcomes (2024-2025-2026): Institutional data indicate that over 100 Black learners graduated across health, medicine, and dentistry programs by Spring 2026.
- Sophia B. Jones Mentorship Program: Expanded to 24 active mentors supporting Black medical learners across Dalhousie Medicine Nova Scotia (DMNS) and Dalhousie Medicine New Brunswick (DMNB), with mentorship supports planned to extend to the Cape Breton Medical Campus as Black learners are recruited, ensuring consistency of support across distributed learning sites.
- PLANS Co-op Program (Winter 2025): Recorded the highest application volume to date (41 applicants), with 26 learners accepted into the program from grades 11 and 12.
- Summer Programs and Co-op Impact (2025): Evaluations demonstrate improved understanding of health career pathways, increased academic confidence, and enhanced preparation for post-secondary education.
- PLANS Prep Institute (2025): Evaluation results indicate a 100% increase in learner confidence in research skills, time management, and presentation abilities.
- Summer program (2026): Engagement increased substantially year over year. Applications to the African Nova Scotian (ANS) Health camp rose from 52 to 89 learners, representing a 71% increase, while applications to the PLANS Prep Institute (PPI) increased from 36 to 46 learners, a 28% increase, indicating growing interest among African Nova Scotian and Black learners.
- Targeted outreach initiatives generated strong participation. This winter's Health Professions Exploration (HPE) Day, held at the North Preston Community Centre, engaged 68 African Nova Scotian and Black learners from 11 Dartmouth-area schools in Grades 6–9. Over 93% of participants indicated an interest in a career in health care, reflecting strong early awareness and engagement across participating school communities.
- Study group sessions for Med 1&2 BLAP & KW students (joint study sessions)

Planetary & Global Health

- Dr. Tarunendu Ghose Visiting Scholar Lecture (fall) (December 2, 2025): Hosted by the Office of Community Engagement, Dr. Rodrigo López Barreda (MD, MPH, PhD) delivered a lecture titled “Perspectives in Global Health: The View from the Trenches and Academia.” The session drew on his experience in humanitarian medicine, global health ethics, and academic practice to explore transnational health challenges and equity focused responses.

- Community Engagement Day and Ghose Visiting Scholar Lecture (spring) (March 26, 2026): Hosted by the Office of Community Engagement and held concurrently at Tupper Link and Theatre A, the day convened students, faculty, staff, and community partners to showcase community engaged initiatives, highlight collaborative academic/community research, and recognize excellence in engagement and impact through awards. Over 100 posters were presented at the day. The program concluded with over 70 participants attending the spring Dr. Tarunendu Ghose Visiting Scholar in Global Health lecture, presented by Dr. Teresa M. Chan, Founding Dean of the Toronto Metropolitan University School of Medicine. The lecture focused on global health, health equity, social justice, and the role of medical education and leadership in addressing systemic barriers to care.
- IPE Course (2025) - Planetary Health & Interprofessional Education: The Faculty of Medicine continues to prioritize planetary health across education, research, and practice through the ongoing Healthy Planet, Healthy People IPE course and a sustained series of interprofessional courses, institutes, lectures, and public events. These offerings engage learners across disciplines in climate, sustainability, and health systems thinking, and include mini-courses on healthcare in a changing climate, national summer institutes, conferences, visiting scholars, and public education initiatives delivered between 2024 and 2025.
- Global Engagement Committee: The committee continues to support the Faculty's international and global engagement priorities across education, research, and partnerships, and is now chaired by Dr. Eileen Denovan-Wright following the completion of Dr. Babar Haroon's term as co-chair.

Francophone Health

- Francophone Learner Support and Engagement: Through provincially supported, community engaged partnerships with l'Université Sainte-Anne, Réseau Santé Nouvelle-Écosse, the Conseil Scolaire Acadien provincial, and other Francophone organizations, the Faculty of Medicine advanced recruitment, learner engagement, and supports for Francophone and Acadian students across the education continuum.
- Key activities included virtual outreach reaching French speaking youth across Nova Scotia, French language programming and peer engagement opportunities, Dalhousie Med learners rural week placements in Acadian communities, and strengthened institutional data efforts. This contributed to improved access, culturally appropriate training, and the development of a more representative Francophone health workforce aligned with Nova Scotia's Action for Health priorities.

Community Engaged Service Learning (CESL)

- Interest remains strong in (2025/2026): In its 10th year, CESL continues to see high demand with strong enrollment (81 students across DMNS/DMNB), robust partner engagement (42 organizations, including 9 new partners), diverse project offerings (46 experiences), positive student feedback, sustained participation in core activities, ongoing project funding support, and planned expansion to CBMC.67 Med 2 students (56 in DMNS & 11 in DMNB) developed projects with 34 community organizations in Nova Scotia and New Brunswick. Midpoint gathering had a focus on reflexive practice, ethical images and use of AI.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

The Office of Community Engagement continues to build on its mandate to advance the Faculty's strategic priority of Serving and Engaging Society. Our work remains focused on fostering meaningful, reciprocal partnerships with communities and ensuring community voices inform and shape Faculty priorities, programs, and policies.

Our portfolio continues to align its activities with the institution's four core strategic streams: Education, Research, Serving & Engaging Society, and Valuing People.

- **Education:** We continue to actively support the education mission by participating in the Education Council, contributing to curriculum development initiatives, and advancing EDIA across the educational continuum.

- **Research:** While our direct research involvement remains limited, we continue to facilitate interdisciplinary connections and supported the early stages of research-focused projects that align with social innovation and health equity themes.
- **Serving & Engaging Society:** Many of our initiatives continue to remain community-focused, strengthening partnerships with external stakeholders and promoting engagement that is socially accountable and responsive to community needs. Collaborating with CPDME to host the annual
- **Valuing People:** Team members contribute to institutional committees that foster a positive, inclusive workplace culture through ongoing EDIA governance and staff engagement. The highlight for 2026 is the launch of the new multifaith prayer space in the Tupper Building in March 2026 for learners, staff, and faculty.

On the horizon – priority initiatives for 2026/2027

A priority initiative for 2025/2026 is to bring Social Innovation concepts and approaches to Faculty of Medicine trainees, staff and faculty. A multi-faculty collaboration in Social Innovation is being co-developed between Serving and Engaging Society and the Faculty of Open Learning and Development and hopes to include resident leadership opportunities and/or certificate programs in Social Innovation in future.

Associate and Assistant Deans – Annual Report 2025/26

Name: Sarah Wells	Program/Unit: Associate Dean Academic, Basic Sciences
--------------------------	--

Brief overview of program/unit

The Associate Dean Academic (ADA), Basic Sciences provides strategic oversight and leadership for undergraduate and graduate academic programs (excluding UGME and MPA) within the Faculty of Medicine. The role supports academic program planning, curriculum development and evaluation, teaching quality, and continuous improvement across Basic Science education, while ensuring alignment with Faculty priorities, University policies, and applicable collective agreements.

The ADA Basic Sciences supports academic leadership across Basic Science units, and represents the Faculty of Medicine on University-level academic initiatives, including the Dalhousie Associate Deans Academic Committee (ADAC) and Strategic Enrolment Management (SEM). The role also serves as Academic Integrity Officer for program listed above in the Faculty of Medicine and provides oversight of academic appeals and grade reassessment processes.

During 2025/26, the role focused on strengthening faculty-level academic governance, advancing workload transparency and equity, supporting new program development, and operationalizing planning frameworks to ensure educational quality and sustainability in the context of continued enrolment growth.

Dr. Sarah Wells stepped into this position in Feb 2024 for a 5-year term.

2025/26 Update – top five significant accomplishments

1) Oversight of the Schedule H Review Process:

Led Faculty-level coordination of the Schedule H review process, including collection and synthesis of program-level data to support initial rubric-based evaluation. Following receipt of the review findings, drafted a brief Faculty action plan outlining next steps and areas for follow-up, supporting a coordinated and evidence-informed response.

2) Development of Faculty of Medicine Workload Frameworks:

Drafted and advanced Faculty-level workload documents to support transparent, equitable, and defensible assignment of teaching, supervision, and academic administrative responsibilities, informed by consultation with stakeholders and cross-Faculty comparison.

3) Operationalization of the Academic Delivery Plan (ADP) Process:

Continued implementation of the Academic Delivery Plan framework within the Faculty of Medicine, including development of a structured process for identifying instructional pressures arising from enrolment growth and formally requesting additional teaching resources.

4) Support for New Academic Program Development:

Provided faculty-level academic leadership and coordination for emerging program development initiatives, including a proposed graduate program in Human Genetics and Genomics and a diploma in Genomics

Technology, with attention to curriculum design, approval pathways, resource implications, and alignment with Faculty, University, and provincial expectations.

5) Strengthening Faculty-Level Academic Governance:

Continued refinement of governance structures and processes supporting academic program oversight, curriculum review, and alignment with Senate, Faculty Council, and institutional quality-assurance requirements.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

Work this year focused on strengthening faculty-level academic planning, oversight, and continuous quality improvement of Basic Science academic programs. This included advancing development and refinement of program-level learning outcomes, curriculum maps, and curriculum modifications to support coherence, transparency, and alignment with institutional expectations. Ongoing engagement with instructors, faculty members, and department leadership supported iterative improvement of curricula and responsiveness to enrolment pressures, program-level review, and evolving educational priorities, alongside continued preparation for upcoming academic program reviews.

Research

Supported graduate programs through advising on curriculum mapping and recognition of research-related learning outcomes, ensuring alignment between academic program structures, research training expectations, and institutional quality-assurance requirements.

Serving and Engaging Society

Contributed to Faculty- and University-level engagement through service on the Faculty of Medicine EDIA Leads group and the EDIA Committee of Faculty Council. In addition, led and coordinated learning-environment work at the Faculty of Medicine Annual Retreat, including the design and facilitation of sessions focused on Basic Science and graduate education. This work supported shared understanding of roles, responsibilities, and accountability frameworks related to the graduate student learning environment and informed both Faculty-level discussions and the development of graduate supervisor training modules.

Valuing People

Advanced work focused on clarity of expectations and sustainable academic practice through faculty-level approaches to curriculum oversight, program review, and academic planning. These efforts supported more consistent recognition of academic contributions across teaching, supervision, and academic administration, and contributed to improved alignment between academic work, governance processes, and annual review.

On the horizon – priority initiatives for 2026/27

Academic Program Review, Oversight, and Continuous Quality Improvement (including Schedule H):

Continue faculty-level leadership of academic program review and continuous quality-improvement activities through a **coordinated, faculty-level approach to program oversight**. This will include tracking review timelines, coordinating external reviews, ensuring timely submission of required reports for **Senate and Schedule H**, and monitoring follow-up responses as part of a more formalized and sustainable academic governance framework. In parallel, this work will support ongoing refinement of program-level learning outcomes, curriculum maps, and curriculum modifications, and implementation of the Schedule H plan of action within broader academic planning and program review processes.

Ongoing Support and Oversight of New Program Development:

Provide continued faculty-level academic leadership and coordination for emerging program proposals (e.g., graduate programs and diploma-level offerings), supporting curriculum development, approval pathways, and alignment with Faculty planning and resource capacity to ensure sustainable and high-quality program implementation.

Alignment of Workload Documentation and Annual Reporting:

Advance alignment between Faculty of Medicine workload documentation and annual reporting processes to ensure they request consistent and appropriate information related to teaching, supervision, and academic administrative responsibilities. While the workload policy will be approved for 2026–27, continued work on the Workload Planning Guide will support refinement over time and promote coherence between workload discussions, annual reviews, and faculty planning.

Approval and Implementation of the Holistic Evaluation of Teaching Policy:

Advance the Faculty of Medicine Holistic Evaluation of Teaching Policy to approval, building on feedback collected from multiple stakeholder groups and proceeding with structured consultation with Department Heads.

Operationalization of Dalhousie Academic Policies:

Continue implementation of University-wide academic policies within the Faculty of Medicine, including the Syllabus Policy, Examination Policy and Grade Distribution Policy, with attention to clarity of expectations, consistent application across units, and sustainable faculty-level oversight.

Associate and Assistant Deans – Annual Report 2025/26

Name: Andrea Rideout, MD, FCFP Assistant Dean	Program/Unit: Undergraduate Medicine Admissions
--	--

Brief overview of program/unit

The Admissions Office is responsible for overseeing and managing the application and selection process for admission to the Doctor of Medicine program, an undergraduate professional degree at Dalhousie University. For the 2025-2026 application cycle, there are 169 domestic positions available for entry into Year 1 at 3 campuses (Halifax, NS (87 NS students, 6 PE Students, 6 Other Canadian students); Sydney, NS (CBMC) (30 NS students); Saint John, NB (DMNB) (40 NB students). One first year position at the Halifax campus is allocated for a Doctor of Dental Surgery candidate in the combined Master of Science (Oral Maxillofacial Surgery)/Doctor of Medicine graduate program.

Additionally, up to 10 supernumerary seats may be allocated to applicants from Saudi Arabia or Kuwait, as per external agreements; up to 5 supernumerary seats are allocated for candidates approved through the Department of National Defence's Military Medical Training Program (MMTP). These supernumerary positions are for entry into Year 1 at the Halifax campus. 2 advanced standing positions for entry in year 3 at the Halifax campus are allocated to eligible International Medical Graduates in the IMG Clerkship program.

The Admissions Office ensures that the Admissions Committee and its subcommittees are properly oriented to their roles and responsibilities. It organizes and facilitates committee meetings, assigns application files for review, recruits interviewers and volunteers, and oversees the annual Multiple Mini Interview (MMI) process.

Key responsibilities of the Admissions Office include:

- Collecting and processing all application materials
- Verifying eligibility criteria including residency criteria, transcripts, GPA, MCAT, and CASPer results
- Reviewing and verifying information to confirm applicants' place of residence and activities included in their online application
- Compiling and analyzing admissions data to support the selection process
- Issuing admissions decisions in accordance with procedures approved by the Admissions Committee
- Hosting information sessions for prospective applicants and responding to admissions inquiries
- Continuous quality improvement to optimize the application process and support Admissions Committee to optimize admissions processes and procedures

The Undergraduate Medical Admissions Office team includes the Assistant Dean for Undergraduate Admissions, Admissions Director, Admissions Coordinator, Admissions Pathways Coordinator. The Assistant Dean, Admissions and Director, Admissions are members of the AFMC Admissions Network.

2025/26 Update – top five significant accomplishments

1. At the time of writing this report, the number of meetings held by the Admissions Committee and Subcommittees were:

General Admissions Committee	16
Indigenous Admissions Pathway Subcommittee	10
Black Learners Admissions Pathway Subcommittee	14
Rural Applicant Pathway Subcommittee	12

An information session about Intercultural Competency and Implicit Bias was facilitated by Shazia Nawaz Awan, Education Developer (Culturally Responsive Pedagogy & Global Engagement) at Dalhousie's Centre for Learning and Teaching. The Admissions Office provided administrative support for all meetings.

- The 2025-2026 cycle was the 4th cycle for the Indigenous Admissions Pathway (IAP), 3rd cycle for the Black Learners Admissions Pathway (BLAP), and 2nd cycle for the Rural Applicant Pathway (RAP-CBMC). Each of these priority pathways has its own subcommittee which reviews applications in these pathways initially and then makes recommendations to the Admissions Committee. A summary of the Subcommittees' work for the 2025-2026 cycle is provided here:

Priority Pathway	Total Applications Submitted	Interview Completed	Recommended for Admissions Offer (total)
IAP	33	28	13 10 Maritime, 3 OOP 9 Mi'kmaq or Wolastoqiyik
BLAP	117	50	21 18 Maritime, 3 OOP 5 African Nova Scotian
RAP	115	92	30

- 2025-2026 cycle was the first cycle in which the new [Place of Residence Criteria](#) was applied. The revision is intended to increase recruitment of prospective applicants with extended lived experience in and engagement with Maritime communities, and increase likelihood of retention to work in Maritime communities. A surplus of eligible candidates continues to be identified. The table below provides information about the number of eligible applications, based on place of residence criteria for the last cycle (previous definition) and current cycle (current definition)

Province	First Year Positions	Eligible Applications 2024	Eligible Applications 2025
NS	87 Halifax 30 CBMC	352	315
NB	40	125	129
PE	6	31	29
Other Canadian	6	602	92

- 705 applications (84% Maritime, 16% Out of Province) were submitted for the 2025-2026 application cycle. The decrease in applications is attributed to the decrease in Other Canadian applications, likely due to the reallocation of General Pool Out of Province positions to the General Nova Scotia pool. 430 applicants (92% Maritime, 8% Out of Province) were interviewed, using MMI virtual synchronous format with the KIRA talent platform. Decision letters were distributed on Apr 2 2026. For supernumerary positions in the 2025-2026 cycle, 5 Military Medical Training Program positions and 2 International Medical Graduate Clerkship positions were offered. Dalhousie Medicine Class of 2030 list will be finalized in August 2025.
- CACMS Accreditation Site visit for the Faculty of Medicine Undergraduate Medical program was completed in February-March 2025.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education: Admissions Office provides information about Undergraduate Medicine admissions to individuals and to groups, in virtual, hybrid and in-person formats. Admissions works collaboratively with Office of Community Engagement (KW, PLANS) and Ask-A-Med-Student representatives to provide information sessions for prospective applicants.

Research: Continuous quality improvement occurs through annual review of application processes, procedures and admissions data. Access to data analysis and evaluation services are critical for supporting quality improvement and research opportunities.

Serving and Engaging Society: Admissions Committee and all subcommittees (IAP, BLAP, RAP) are intentionally required to have community member representation as per terms of reference.

Valuing People: Admissions Director Carolyn Doyle was a 2025 recipient of Faculty of Medicine Award of Excellence in Professional and Managerial Leadership.

On the horizon – priority initiatives for 2026/27

1. Priority Pathways: The Indigenous Applicants Admissions Pathway, Black Learners Admissions Pathway and Rural Applicant Pathway (CBMC) will continue to be developed and refined by the Indigenous Applicants Pathway Subcommittee, Black Learners Admissions Subcommittee, Rural Applicant Subcommittee and Admissions Committee.
2. A response to CACMS Accreditation Final Report regarding Standard 10.3 will be prepared as part of the mini-Data Collection Inventory and provided for CACMS during the interim site visit scheduled for Fall 2027.
3. Continue to monitor impact of Place of Residence definition on quantity and composition of applicant and matriculant pools.
4. External agreement with Kuwait Cultural Bureau is due for renewal. Limited numbers of applicants have matriculated, ongoing review.
5. Transitioning and onboarding of new Assistant Dean, Admissions for 2026-2027 application cycle.

Associate and Assistant Deans – Annual Report 2025/26

**Name: Drs. Wendy Stewart, Osama Loubani
and Arlene Kelly-Wiggins**

Program/Unit: Assistant Deans Preclerkship- Med 1 and 2

Brief overview of program/unit

The preclerkship curriculum provides foundational skills and knowledge to prepare students for the clerkship years in the Dalhousie UGME program. The first two years are delivered primarily using a small group case-based model, supplemented by lectures, skilled clinician sessions, lab sessions, electives and scholarly activity as part of the RIM unit. Each unit in the first two years has a unit and multiple component heads.

The assistant dean preclerkship roles involve oversight of the first two years of the undergraduate medical curriculum at all three campuses. This involves liaison with unit and component heads, generating solutions to issues that arise and working with the curriculum manager to ensure the curriculum content is available and posted in a timely manner. In collaboration with the unit and component heads, the syllabi are annually reviewed to ensure the objectives and content are aligned. Each assistant dean is also involved as a member of various committees that assist with this oversight, including CASP, PFEC, clerkship committee, and UMECC.

2025/26 Update – top five significant accomplishments

1. The procomp curriculum was revised and delivered for the first time. The unit is now divided into themes that build in complexity over the two years. New content has been developed and the component heads each have expertise in their specific roles.
2. Successfully launched the preclerkship curriculum for the first cohort of students at CBMC, providing comprehensive onboarding and support to new faculty. With the opening of CBMC to its first cohort, a major focus was ensuring a comparable, high-quality preclerkship experience across all three campuses. This parity was successfully achieved by establishing hybrid models for virtual lecture delivery, collaborating deeply with our administrative team to streamline logistics, and investing in local faculty development through targeted tutor training and building skilled clinician capacity. Further edits have been made to the curriculum to integrate more clinical reasoning in the tutorial cases. This has been met with enthusiasm from the learners.
3. A license for Simconverse was approved and is being piloted in the professional competencies unit. The results from this pilot will provide the basis for ongoing potential uses in the curriculum.
4. The assistant deans continue to have regular check-ins with the student leadership at each campus and also check-ins with both classes virtually. There is also an open door for students to reach out if there are any concerns. Other meetings also provide opportunities for students to bring forward any concerns such as the monthly medical education meetings.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- Innovation and Diversity in Curriculum Design: complete revision of the professional competencies curriculum. This is now a two-year curriculum with 8 themes that evolve in complexity over the 2 years. Phase 1 is completed for Med 1, and the content has been delivered. The sequencing of the content will be reviewed and designed to fit with the planned spiral curriculum.
- Proactive Curriculum Management: There is a process for regular review and updates of cases, managed by the curriculum manager. All tutorial cases in med 1 and med 2 (over 100) are reviewed annually. This ensures our educational content remains current and scientifically accurate, enhancing the learning experience for all students.
- Ongoing review and revision of cases to identify opportunities to enhance student clinical reasoning skills in preparation for clerkship. Integration of hybrid case based/problem-based cases that provide students with application opportunities.
- Development of longitudinal themes for Indigenous and Black health.

Development and delivery of an AI curriculum that is integrated in professional competencies and will be expanded throughout the preclerkship curriculum. This initiative equips students with the skills to understand AI response generation, navigate safe usage protocols, critically evaluate AI as a medical tool, and practically apply it within their learning and future workflows.

Research

- Curriculum Research and Development: The ongoing update and diversification of our case studies involve continuous research into the latest medical practices and educational strategies. This not only enhances our educational offerings but also contributes to the academic field by developing and testing innovative educational methodologies.
- Research projects involving the use of AI are in process and will involve student engagement to determine their needs. This includes a pilot on the use of SImconverse and also another project will involve a pilot with a platform designed to teach students clinical reasoning skills.

Serving & Engaging Society

- Feedback and Responsive Engagement: We have set up a system for providing students with regular feedback on actions taken in response to concerns raised through language and imagery forms. This initiative highlights our engagement with student concerns and our commitment to fostering an inclusive educational environment. Students also bring forward other concerns directly and they are dealt with on an individual basis with feedback to the students to close the loop. Issues brought forward to the OPA may also involve involvement of the assistant deans preclerkship.
- There is ongoing work being done to ensure the curricular content is reflective of the diversity of the populations the students will ultimately serve. This includes integrating EDIA concepts into the curriculum and also working to create a learning and work environment that reflects the diversity of our learners, faculty and staff.
- A roadmap has been created for students to bring forward ideas that can be integrated into the curriculum. These are related to themes that have relevance for society such as planetary health.

Valuing People

- Leadership and Orientation Programs: The creation of a standardized orientation for new unit heads is designed to ensure that they are well-prepared and understand the expectations of their roles. This program not only supports our leaders but also underlines our commitment to valuing and developing every member of our faculty.
- Proactive Leadership Meetings: We continue to have regular meetings with unit and component heads and coordinators, initiated six weeks before each unit starts, are part of our strategic efforts to pre-emptively identify and address issues. This approach highlights our commitment to supporting our faculty and staff by

maintaining clear lines of communication and problem resolution. We also meet every one to two with the curriculum manager to ensure we are on top of any curriculum concerns.

- Review opportunities: Following each unit, there is a review to provide feedback and consider what other supports are needed for each component, or any changes that need to be made.

On the horizon – priority initiatives for 2026/27

1. Increased integration of application type clinical reasoning cases into the units in Med 1 and Med 2.
2. Further work around themes for Indigenous and Black health throughout the curriculum.
3. Continue the work to recruit and retain unit and component heads. Providing an orientation and support to ensure they understand expectations is important.
4. Review of the pilot with Simconverse to consider how this might be used in other ways as part of the undergraduate curriculum, particularly preclerkship.
5. Continue to find innovative ways to integrate AI throughout the other units.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dan Smyth, Joffre Munro, Sarah Mader	Program/Unit: Clerkship
---	--------------------------------

Brief overview of program/unit

Dalhousie UGME Clerkship includes the Med 3, 4, and 5 year programs.

During Med 3, clinical experiences are delivered via a longitudinal integrated clerkship (LIC) for some students and through block rotations in various specialties for others. The focus is on an introduction to clinical exposure in various inpatient, outpatient, tertiary and non-tertiary settings. There is a half day of protected time weekly for formal structured learning which is overseen by clerkship directors. Additionally, there are informal and formal learning sessions that would be provided by individual preceptors and departments interspersed during the clinical experiences time. The disciplines focused on in Med 3 include family medicine, psychiatry, surgery, emergency medicine, obstetrics and gynecology, pediatrics, and internal medicine. In addition to the clinical learning experiences, there are two transitional units during Med 3 known as PIER 1 and 2 of which each has its own curriculum relevant to students at that stage of training.

There are 6 LIC sites in the maritime (2 in Nova Scotia and 4 in New Brunswick). In 2025, 30 students started their medical education at Cape Breton Medical Campus, all of who will complete LIC style clerkships starting in 2027. As such the LIC footprint of Dalhousie will double in the next year.

There are 2 block rotation home sites (Saint John and Halifax) and students may also be assigned to distributed sites for their discipline block rotations outside of their home site.

Students are assessed throughout Med 3 by their clinical preceptors and clerkship directors/LIC directors by way of ITERs for each rotation they are on (students in block-style clerkship) or on a set interval schedule (students in LIC style clerkship). Students are also provided feedback by way of workplace based assessments in the form of EPAs (entrustable professional activities) of which they have a set number to complete over the course of their Med 3 year. There are quarterly formative multiple choice question progress exams students write over the Med 3 year in preparation for the comprehensive clerkship exam at the end of Med 3. There are phase 3 & 4 OSCEs assess procedural and clinical skills at the midpoint and end of Med 3.

The Med 4 year is primarily composed of clinical experience elective time and students have specified elective requirements for the year. There are two transitional units during Med 4 known as PIER 3 and 4. Students focus their elective experiences to explore other disciplines of medicine not covered in Med 3, further address self-identified knowledge gaps, and confirm their interest in discipline(s) of choice to apply for in CaRMS. Med 4 focuses on preparing students for their residency training. Assessment and feedback is provided by way of ITERs completed by elective preceptors.

The Med 5 year is an optional opportunity for students who have graduated from Dalhousie medical school the preceding academic year but have not obtained a residency position after the second iteration CaRMS match. Students have to apply for this opportunity. The focus is on clinical experience electives with the intention to increase the opportunity for a successful CaRMS match in their Med 5 year.

2025/26 Update – top five significant accomplishments

(1) Roll out of EPA framework. Dalhousie clinical clerks now complete 25 workplace based assessments (commonly referred to as “EPAs”) during their Med 3 year as of the 2025/26 academic cycle. The framework for this is aligned with that developed by the AFMC. Students are provided with written narrative feedback in one45 by their resident/staff preceptor on each EPA assessment completed. Students are required to obtain 25 “entrustable” entries logged prior to the end of the 48-week Med 3 clerkship experience, and several discipline specific EPA’s being required for each rotation (example History and Physical Exam). Clerkship directors monitor completion of EPA’s prior to the end of each rotation, and UGME tracks global progress for the class along with other metrics.

There has been continuous quality improvement strategies by way of seeking feedback from various stakeholders and making adjustments over the year to the processes to facilitate successful implementation of the EPA framework. The EPA framework is being revisited at the Spring Clerkship Director Retreat in May 2026 to continue this work.

(2) Oversight and data monitoring: Following accreditation in 2025 UGME now tracks class completion of all required activities including clinical encounters, procedures, and EPA’s. Reports are sent to the Assistant Deans of Clerkship monthly such that students falling behind can be identified early and assistance provided. Although we were unsatisfactory on this element during recent accreditation, we are confident we have the necessary oversight in place to address this, and two academic cycles with 100% completion of all required activities.

This oversight allowed us to identify early in the year that students at LIC sites were having some difficulty with EPA completion and based on feedback provided from the sites allow PGY1 residents to serve as assessors for EPA’s for Med 3 students.

(3) Campus expansion work: Working closely with the Assistant Dean of Distributed Medical Education, the Assistant Deans of Clerkship have collaborated to assist in the required doubling of LIC capacity over the next 12 months to accommodate 30 students from CBMC who will all be scheduled to start an LIC style clerkship in September 2027. A faculty development session at CBMC was done in January to review Dalhousie medical school curriculum and included a presentation on LIC and clerkship.

On May 1-3, 2026 the third annual (and second in person) LIC retreat will be held in Truro. Significant effort has gone in to planning an interactive weekend which will facilitate knowledge sharing and help onboard and integrate new LIC site leadership into Dalhousie’s LIC community.

Drs Smyth and Mader will attend CLIC 2026 in Calgary to further share our experiences with Campus expansion at Dalhousie and gain insights as to best practice from other distributed medical campuses.

(4) Continued work towards curriculum updating: We continue to work diligently to update our online clerkship curriculum and enhance content provided online for students engaging asynchronously, especially those at distributed sites. We dedicated our Fall Clerkship Director Retreat to curriculum work including presentations by our assessment team and MedIT team focusing on ensuring curriculum objectives are up to date and accurate and how MedIT can assist in the development of interactive and engaging online content. We continue to work to support clerkship directors, PIER unit heads, and faculty in creating new interactive content.

Another focus of our Fall Clerkship Director Retreat was to explore how and where in the curriculum are their opportunities to expand the content delivered around care of marginalized populations and global themes. Since the fall retreat, work has been done to recruit a physician who specializes in gender-affirming care so that they may develop a new module to deliver this content within the PIER 1&2 curriculum for the upcoming academic year.

Simulation curriculum is being targeted for development to prepare for the expansion of the CBMC LIC sites.

(5) Accreditation follow up: We continue to diligently work on multiple issues brought to our attention during last years accreditation, with particular focus on elements 8.7 (comparability), 8.8 (time spent on clinical activities), 9.7 (timely formative feedback and feedback at midpoint), and 8.6 (required encounters and procedures). Plans are in place to ensure that the deficiencies identified by accreditors are addressed prior to our 2027 follow up visit.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education:

Curriculum planning with goal of creating interactive and engaging content for student at distributed sites, ideally AI assisted and supported by both MedIT and curriculum experts.

Faculty development at CBMC campus “Leading Through Feedback: Strategies to Strengthen Learning Environments and Curriculum Engagement in Medical Education” workshop on providing workplace based assessment and feedback as well as review of Dalhousie’s UGME EPA Framework. November 13, 2025 (Sydney, NS)

LIC Retreat May 1-3, 2026 (Truro, NS)

Clerkship Retreats December 11, 2025 and May 14, 2026 (Halifax, NS)

Research:

CLIC 2026 – abstract presented to present workshop (Smyth/Mader).

Continuing to look at various outcome/BI metrics we can consider exploring to evaluate program success and possible improvements.

Serving & Engaging Society:

We continue to work to incorporate key content in our clerkship curriculum including generalist, LGBTQIA+ health, global and planetary health, and Indigenous health. In discussion with PIER unit heads, we have reviewed current PIER sessions and explored how the sessions may be modified and enhanced to deliver this content.

Community outreach work being done in the context of the LIC expansion at the various new and growing LIC sites.

Valuing People:

Annual site visit to all distributed sites including New Brunswick, Cape Breton, and Nova Scotia. Met with education coordinators, clinical placement contacts, students, faculty, site leadership, foundation and community leaders to understand the strengths and areas for growth of the various clinical experiences and sites and how the UGME can further support.

In collaboration with other Assistant and Associate Deans in the UGME, we have shown gratitude to our UGME administrative team through staff appreciation lunch and holiday gifts.

Advocated for funding to support LIC directors and education coordinators to be able to attend the third LIC Retreat to be held in person in Truro May 1-3, 2026. This in person retreat is highly valued by the individuals working in LIC allowing for information sharing and faculty development so as to provide support in strengthening individual LIC sites.

On the horizon – priority initiatives for 2026/27

Ongoing work with Assistant Dean of Distributed Medical Education for campus expansion and onboarding of new LIC sites. Much will be completed at the LIC retreat May 1-3, 2026 as we work towards creating resources for new sites starting in 2026. Development of a Dartmouth/HRM LIC site. Increase efforts to clarify expectations early on in Med1 and Med2 so that students are prepared for the possibility of relocating to distributed sites during clerkship and provide further transparency of the clerkship placement matching processes. Work in collaboration with Student Affairs and the Student Accessibility Centre to further improve the mechanisms and processes in which students may pursue accommodations related to clerkship and specifically clerkship placement sites.

We will continue to work on the development of updated curriculum through the use of Artificial Intelligence that aligns with the objectives so as to deliver the educational content in various forms to meet the needs of various learner styles. We will continue to work to build in content on key longitudinal themes including generalist, LGBTQIA+ health, global and planetary health, and Indigenous health. We will continue to collaborate with the Assessment team and the Clerkship Directors on reviewing curriculum objectives and mapping to specific content.

There will be a need to explore a new process for arranging home electives for Med 4 students. Ongoing information gathering from all stakeholders is needed over the coming months to identify the best way forward. Plan to work with MedIT as needed in the Fall to implement the processes decided upon.

We will be focused over the next 12 months on addressing concerns identified by accreditors on elements 8.6, 8.7, 8.8, and 9.7 such that we are prepared for the upcoming visit in the fall of 2027.

Associate and Assistant Deans – Annual Report 2025/26

Name: Anuradha Mishra

Program/Unit: Skilled Clinician and Interprofessional Education

Brief overview of program/unit

- This program oversees the longitudinal clinical skills curriculum across the 4 years, including the OSCE exams as well as interprofessional education. There have been multiple changes to the human resources side of the team.
- There is a Skilled Clinician Director at DMNB (Todd Lambert) and at an inaugural Skilled Clinician Director at CBMC (Susan MacLeod).
- The skilled clinician 2 Unit Head DMNS is Stephen Workman. He is completing a 3 year term in June. This position is actively being posted.
- Skilled Clinician 1 Unit Head DMNS is Stacey Williams. She just started in the position for the 2025-2026 academic year, and is completing the first of her 3 year term.
- The DMNB Director of IPE is completing his term- Marc Nicholson. We have a new CBMC Director of IPE Abidemi Fasnami.
- We also welcome a new Director of Communication Skills- Rachele Blackman

2025/26 Update – top five significant accomplishments

1. Successful implementation of two day OSCE formats. There has been positive feedback from faculty, staff and students about this.
2. Successful implementation of a new OSCE technology called Valuatric. The old system SIM IQ has been phased out, and there is a considerable cost savings as well with the new program.
3. We have seen a new a new formative, assessment tool to help support learning and growth in the procedural skills curriculum.
4. There has been new programming developed in interprofessional education through a refreshing of the IPE Mini course programs. Now there are educational formats being offered to allow more flexibility for students and the design team. There have been several new programs that were successfully implemented.
5. Successful implementation of three new IPE events – an OR IPE shadowing experience and also an MD- PA escape room experience at DMNS and at CBMC an IPE flu shot vaccine clinic.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education:

- Continuing to build partnerships to successfully implement a sustainable IPE curriculum at CBMC
- Working on alternate assessment plans for learners who required additional support for clinical skills teaching
- Building new cases and successful implementation for the OSCE and streamlining OSCE examiner orientation and training.

Research:

- Procedural skills rubric scholarly work was presented locally at the MERIS Forum and has been accepted for poster at AMEE 2026
- Needs assessment is underway for a large scale- Airway and oxygen management curriculum- at the data collection and analysis stage
- Caring for Patients with Vision Loss- Mini Course – scholarly work done around the design and implementation of the course, and the impact it had on an interprofessional group of students. This has been accepted for podium presentation at Canadian Ophthalmology Society 2026 and ICAM 2026.

Serving & Engaging Society:

- Expanding partnership to the VLRC Sydney Cape Breton office to run the Med 2 VLRC workshop

Valuing People:

- Providing tokens of appreciation for community members that support the programming
- Being respectful of time and keeping meetings, concise and high yield
- Creating multiple touch points for the teams across sites to communicate and connect

On the horizon – priority initiatives for 2026/27

1. Work with Faculty of Health to determine a new vision for partnership for interprofessional education
2. High priority is to create sustainable curriculum and partnerships for Interprofessional education at CBMC. Presently there are challenges go get core programming arranged for Stroke Event in Med 2.
3. Hiring a new SC2 Unit head DMNS and IPE director for DMNB
4. Hiring a DMNS US component head – review the teaching/programming at DMNS
5. Review the OSCE blueprint and mapping through the OSCE CASP subcommittee

Dr. S. E. MacLeod, MD, CCFP
Director of Skilled Clinician, Cape Breton Medical Campus
Health Park, Suite 308
45 Weatherbee Rd.
Sydney, NS
B1M 0A1
902-577-9566
ses@dal.ca

Associate and Assistant Deans Annual Report 2025/2026

Brief Overview of Program/Unit

- Skilled Clinician CBMC.
- Our inaugural year, so we have only a Med 1 class.
- The medical school building has not opened yet, so we have held Skilled Clinician at several sites, including The Nancy Dingwall Health and Counselling Centre, CBU, as well as at the former Marconi NSCC Campus, and most recently, moved in January to The Rising Tide Health Home, a new NSH primary care clinic which is adjacent to the new medical school building.

2025/26 Update Top Five Significant Accomplishments

- Delivering the Skilled Clinician program effectively despite navigating three separate sites, because of hardworking, flexible individuals on our Skilled Clinician team as we pivoted through the year to do our best to deliver the sessions.
- Successfully engaging the community to establish a robust group of both simulated and volunteer patients, through advertising and promoting our Skilled Clinician program online and in radio interviews.
- Incredible engagement of allied health, especially nurses and nurse practitioners to deliver our procedural skills session, with great assistance from NSH to facilitate our session on scrubbing, allowing us full use of an operating room at a nearby hospital that is no longer in use, even having the operating room itself fully prepared for an OR day.
- Recruitment and training of physicians as tutors for Skilled Clinician sessions, including ultrasound, our physician group tutored for the full year, and two of our tutors committed two days a week because they enjoyed it so much, and all our tutors are returning for a full year next year.
- Administration of our first OSCE, including recruiting examiners, training them, holding the OSCE in a clinic that did not have technology installed yet, so we used walkie talkies, microphones in the ceilings and laptop cameras strategically placed in the rooms. None of our examiners had examined before and some had not been to an OSCE before. Also, because we had to use two adjacent buildings, one where students got their orientation, and the second was where the exam took place, we did a full dry run OSCE ten days before, timing everything with our full team present, also practicing emergency evacuation procedures. The day of the OSCE was seamless, for which we were grateful.

2025/26 Update, Work Being Done in the Four Core Streams of the Strategic Plan: Education, Research, Serving and Engaging Society and Valuing People

- **Education:** Our tutors have had specific education focusing on Skilled Clinician and have completed general faculty development sessions through Dal CME. We have also trained our Skilled Clinician team, as we started with just two members a year ago, and now have 4. We provided education for our simulated patients and volunteer patients, and our tutors for ultrasound and the tutors for procedural skills.
- **Research:** We are interested in research but have not initiated any in our inaugural year.
- **Serving and Engaging Society:** there was a great opportunity this fall, where we partnered with the Nancy Dingwall Centre and held a vaccine clinic and IPE event. We arranged the procedural scheduling so our students completed the injection module in time for the CBU Open House in October, offering an extra session one evening so as many students as possible would be able to attend, the students were supervised by nurses and had opportunity to vaccinate many patients that day and complete an IPE event, we are planning to do this again this fall. Also, later in the fall, we held another vaccine clinic at Island Family Healthcare where many students came on a Saturday, and over 250 patients were vaccinated, and the patients were thrilled to meet the Med 1 students.
- **Valuing People:** We make sure to mention in the weekly huddle how thankful we are to our tutors and to our simulated and volunteer patients and encourage the students to also extend this gratitude. We value our Skilled Clinician team and meet at least twice a week formally, and several other times per week as needed, so that we keep in close touch and support the team as we navigate our first year in the program.

On the Horizon, Priority Initiatives for 2026/27

- Continue with our weekly huddle, during which we review the material for that day and mention what is coming up in the next week's session, and we also send a Monday email to our students reminding them of the information for the week, and we send a tutor package each Monday as well, and we plan to continue this approach.
- We are working diligently to establish our Med 2 Unit Heads and recruit tutors.
- Very excited to move into the medical school and our Skilled Clinician space.
- Extra time was offered on Mondays and Tuesdays throughout the year for practice at Island Family Health care, with access to me as a tutor/Director, if they had questions and we will continue to offer that in addition to students having access to practice at the new medical school building.
- Also plan to continue to encourage tutors to contact myself if any concerns about students, we acted quickly any time concerns were expressed and I met individually with students to help them with their skills, one student was weekly to do each system over, and it made a significant difference.
- Also continue to be flexible and arrange make-up sessions for students with me if they are ill or if there is a snow day.

Associate and Assistant Deans – Annual Report 2025/26

Name: Abidemi Fasanmi	Program/Unit: IPE & SL
------------------------------	-------------------------------

Brief overview of program/unit

The IPE & SL portfolio supports the design and delivery of interprofessional and community-engaged learning experiences at CBMC. The unit works collaboratively with faculty, staff, students, and community partners to embed experiential learning that strengthened teamwork, professional identity, and social accountability.

During 2025/26, the focus has been on scaling IPE activities, strengthening service-learning infrastructure, and improving coordination across programs to ensure more consistent and meaningful student experiences.

2025/26 Update – top five significant accomplishments

1. Led the coordination and oversight of IPE activities through enhanced planning processes, resulting in processes being established to improve coordination, and ensure consistent delivery. Successfully coordinated the first Cohort of 30 CBMC medical students IPE activities resulting in a structured and consistent student engagement.
2. Strengthened visibility of IPE and service learning within CBMC and Cape Breton through ongoing collaborations and engagement, internally and externally.
3. Deployed IPE tracking tool for IPE/SL activities to support reporting and future planning.
4. Expanding IPE & service-learning opportunities through new and sustained partnerships and building coalitions with Allied Health Professionals’ institutions and community organizations in Cape Breton.
5. Deployed survey tools to collate feedback on CBU faculty and staff interest in collaborations on IPE & SL as well as student’s CBMC FIPEE Part 2- experience.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

Focus on implementing IPE and service-learning course, programs and activities. Support alignment of learning activities with program outcomes to meet accreditation expectations.

Research

Explore and identify opportunities for scholarship related to IPE and service-learning, including potential Scholarship of Teaching and Learning (SoTL) projects and collaborative research with faculty.

Serving & Engaging Society

Maintaining and expanding relationships with community partners to support meaningful, mutually beneficial service-learning placements.

Valuing People

Working closely with faculty, staff and community IPE stakeholders to support implementation of IPE/SL initiatives, and promote collaborative approaches.

On the horizon – priority initiatives for 2026/27

- Lead the development and implementation of a formalized, longitudinal IPE framework at CBMC, including clear structure, sequencing, and competency integration across IPE/SL activities.
- Expand and diversify service-learning placements through strategic growth of community partnerships, with particular attention to underserved, rural, and equity-deserving populations
- Develop clear evaluation and reporting processes
- Increase faculty engagement and support in IPE/SL delivery
- Strengthen alignment with CBMC strategic priorities ensuring coherence with institutional goals related to experiential learning, social accountability, and community engagement
- Collaborate with the Director, Indigenous health to integrate indigenous and minority population health perspectives within CBMC IPE & SL curriculum development, partnership building, and support for culturally responsive and inclusive learning environments.

Associate and Assistant Deans – Annual Report 2025/26

Name: Anna MacLeod	Program/Unit: Student Affairs DMNS
---------------------------	---

Brief overview of program/unit

The DMNS Office of Student Affairs provides comprehensive, confidential support to medical learners across the continuum of undergraduate training. Operating independently from Undergraduate Medical Education, the unit prioritizes student trust, privacy, and advocacy while addressing a wide range of academic, personal, and professional needs.

The unit’s core areas of service include academic support, career planning, learner wellbeing, and financial guidance, with a focus on helping students maintain balance and succeed in a demanding training environment.

Through individualized advising, resource navigation, and early intervention, Student Affairs supports learners in managing challenges related to health, performance, and life circumstances, contributing to both student success and overall program wellbeing.

We work closely with UGME and colleagues supporting students in the KW and PLANS programs and at DMNB, CBMC.

2025/26 Update – top five significant accomplishments

1. Enhanced support for unmatched learners: Successfully supported an increased number of unmatched learners through the CaRMS process, providing individualized advising and longitudinal support. Notably, 50% of unmatched learners secured positions in the second iteration, reflecting the effectiveness of targeted guidance and advocacy.
2. Leadership transition and strengthened team capacity: Successfully onboarded a new Assistant Dean, Student Affairs, contributing to strong leadership continuity, team cohesion, and renewed strategic direction within the unit.
3. Expanded advocacy for learners facing systemic barriers: Increased engagement in advocacy for learners navigating accommodations, assessment challenges, and health-related concerns, supported by strengthened collaboration with key institutional partners and departments.
4. Sustained service delivery despite fiscal constraints: Maintained high levels of learner support and service delivery in the context of significant budget reductions, demonstrating operational efficiency and team commitment. This year we engaged in 502 distinct student advising and/or career focused encounters, excluding Med 3 & 4 CaRMS CV and Personal Letter review.
5. Growth in communication and learner engagement: Expanded social media presence and engagement through targeted campaigns, enhancing visibility of Student Affairs services and improving access to resources for learners.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Serving & Engaging Society (SES): Student Affairs has continued to play a central role in advocacy and learner support, with a strong emphasis on equity and inclusion. This includes close collaboration with key partners (including KW and PLANS) and sustained engagement with learners with disabilities. The unit provides an important supportive space for learners with diverse lived experiences, with ongoing advocacy focused on reducing systemic and programmatic barriers and strengthening access to appropriate accommodations and supports.

Valuing People: The unit continues to prioritize a supportive and collegial work environment, fostering strong relationships among staff and maintaining a culture of mutual respect, recognition, and celebration. Ongoing attention has been given to staff wellbeing and professional development, with an emphasis on sustaining a healthy, collaborative, and responsive team culture. In this spirit, our Assistant Dean released a new book on May 19th “A Chorus of Unheard Voices: The Invisible Work of Medical Education” celebrating the wide network of work and expertise involved with the design and delivery of medical education.

Education: Work has continued on the review and enhancement of curriculum offerings related to financial advising and career planning for undergraduate medical learners. These efforts aim to strengthen learner preparedness for transition points in training and to ensure that supports remain relevant, accessible, and responsive to evolving learner needs.

Research: The appointment of a new Assistant Dean with a strong background as a social scientist and an established program of critical medical research has further strengthened the unit’s ability to draw on scholarly perspectives in decision-making. This creates additional opportunities to integrate research-informed and critical approaches into Student Affairs work, supporting more reflective, evidence-informed practice across programs and initiatives. Currently this work is funded by the Social Science and Humanities Research Council of Canada (2024-2028, \$252,807) “Sacred Discourses: Exploring Medical Educators’ Perspectives on Competence, Science, and Professionalism”

On the horizon – priority initiatives for 2026/27

Student Affairs will continue to advance several key priorities aligned with learner support, policy development, and national collaboration.

A central focus will be ongoing advocacy for enhanced accessibility supports and more equitable approaches to assessment and accommodations, with attention to improving consistency, transparency, and responsiveness across programs. Our goal is that this work will be underpinned by strong educational evidence, and that we will continue to grow our research capacity and contributions.

The unit will also continue active engagement with institutional partners on policy review and renewal processes, including contributions to the M5 Taskforce and broader discussions related to assessment reform. This work aims to support coherent, learner-centred assessment practices across the curriculum.

In addition, Student Affairs will continue collaboration with the Association of Faculties of Medicine of Canada (AFMC) through the national immunization working group, contributing to efforts to standardize immunization verification processes across medical schools in Canada.

Associate and Assistant Deans – Annual Report 2025/26

Name: Carolyn Thomson	Program/Unit: Office of Resident Affairs DMNS
------------------------------	--

Brief overview of program/unit

The Office of Resident Affairs (ORA), Dalhousie Medicine Nova Scotia (DMNS) was established in 2017 to provide confidential support, guidance, and advocacy to residents in family medicine and specialty training programs across Nova Scotia and Prince Edward Island. The Assistant Dean of Resident Affairs (ADRA) and staff work in close collaboration with the Offices of Student & Resident Affairs at Dalhousie Medicine New Brunswick (DMNB) the Cape Breton Medical Campus (CBMC). While the ORA DMNS is co-located with the Office of Student Affairs and shares several team members, each office functions independently with distinct mandates.

The ORA also maintains a collaborative relationship with Postgraduate Medical Education (PGME). While operating independently from PGME, the offices work together to promote resident success, foster healthy learning environments, and advance resident wellbeing.

In addition to individual learner support, RA's scope of work includes the following key areas:

Academic Support

Resident Affairs supports residents experiencing academic difficulty, as well as those participating in remediation through Informal or Formal Educational Learning Plans (IELPs/FELPs). Services include confidential advising, coaching, and, when requested by the resident, collaboration with program or site directors to optimize opportunities for success. The ADRA serves on the PGME Educational Advisory Board and provides input on FELPs to help ensure that learner wellness and individualized support needs are considered throughout the process.

Personal Support

Residency can be demanding both personally and professionally. The ORA provides confidential support to residents navigating challenges such as stress, burnout, work-life integration, major life transitions, interpersonal conflict, and coping with adverse patient outcomes.

Residents may also access coaching through the Learner Development Officer in areas such as professionalism, time management, organizational strategies, and goal setting. When needed, the ORA helps connect residents with additional resources including primary care, counselling, and wellness supports.

The office also provides assistance, guidance, and advocacy to residents who experience learner mistreatment.

Collaboration and Partnerships

The ORA works closely with a broad range of internal and external partners to ensure coordinated and responsive resident support. This includes ongoing collaboration with PGME leadership, residency programs, program directors, and site directors to address program-specific needs.

The office is represented nationally through active participation in the AFMC Committee on Resident Affairs, supporting knowledge exchange and national best practices.

Additional key partnerships include Maritime Resident Doctors, the Office of Professional Affairs, Indigenous Health in Medicine / Kwilmu'kw Maw-klusuaqn (IHIM/KW), Black Health/PLANS, Doctors Nova Scotia, and Nova Scotia Health. Through these relationships, the ORA helps address issues related to wellbeing, professionalism, equity, workplace culture, and learner experience.

Education and Wellness Resources

Residents have access to a broad range of educational and wellness resources coordinated through the ORA. These include workshops and presentations delivered during academic half-days and other resident learning events on topics related to wellness, leadership and professional development.

The ORA also contributes to PGME programming such as Emerging Leaders in Medicine for Residents, Professionalism in Residency, and the Resident Leadership Elective.

The Resident Affairs website continues to serve as a central hub for information, external supports, and wellness resources. Residents may also access ongoing wellness messaging and resources through the #DalMedWell social media platform. The ORA additionally participates in annual PGME and Chief Resident orientation activities. In addition, there are a wealth of resources on financial planning including personal finance and budgeting, debt management home ownership, and insurance planning.

Career Planning

Resident Affairs provides individualized support to residents preparing for career transitions, including fellowship applications and permanent practice opportunities. Services may include review of letters of intent, curriculum vitae development, interview preparation, and career coaching. The office also supports residents exploring specialty transfer or changes in training location, offering guidance and advocacy throughout these processes.

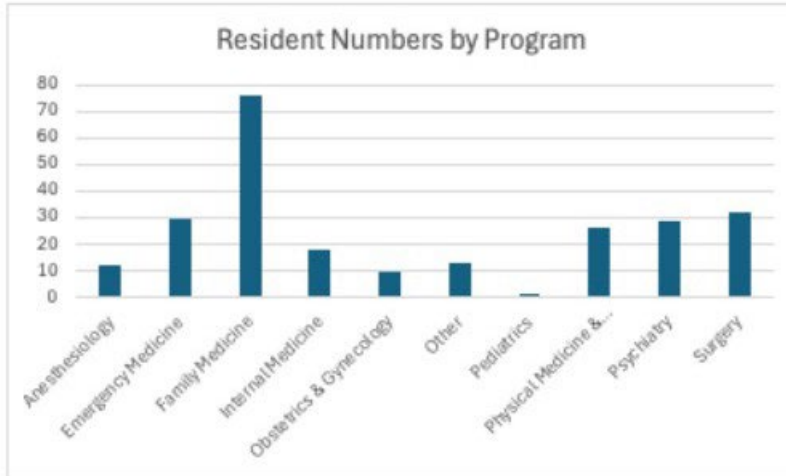
Academic and Workplace Accommodations

As the resident learner population becomes increasingly diverse, requests for workplace and academic accommodations have continued to grow. The ORA has updated and streamlined accommodation processes to improve transparency, accessibility, and timeliness. Residents can access forms, process and policy information, and frequently asked questions through the ORA website. The ADRA works with residents and program/site directors to develop and operationalize accommodations. The Accommodation Advisory Committee provides support and input for complex accommodations.

2025/26 Update – top five significant accomplishments

1. Resident Support

There were 248 individual encounters by 90 residents from Nova Scotia and PEI with the Resident Affairs team this past year. This was a 25% increase from the previous year. Below is the breakdown by program and reason for contacting the office.



Category	Number of Instances
FELP/IELP	66
Anxiety/stress/burnout	43
Academic Difficulty	35
Accommodation	29
Career Planning	26
Program/career change	21
Professionalism issues	11
Family	3
Learner mistreatment	4
Medical - Physical illness	3
Grief/Loss	2
Medical - Mental illness	2
Grand Total	245

2. Accommodations

There has been a significant increase in academic and workplace accommodations in the past five years owing to the increasing diversity of learners choosing medicine as a career. In 2020- 2021, four residents had accommodations. In the past year, that number has increased significantly. Twenty-four residents in Nova Scotia and Prince Edward Island made accommodation requests and seventeen had accommodations put in place. The most common reasons for accommodations requests were neurodiversity, disability related to physical or mental health, and exceptional family circumstances.

3. Research

Members of the Resident Affairs team continue to contribute to scholarly work aimed at improving the learner experience.

A. Fatigue Risk Management in Surgical Residency

The Fatigue Risk Management Project, conducted in partnership with the Division of Neurosurgery since 2023,

was completed in July 2025. The study evaluated fatigue among residents in a surgical subspecialty program and implemented targeted interventions to mitigate fatigue-related risk in the clinical workplace. Findings were presented at Medical Education Research and Innovation Showcase in November 2025 and to the AFMC Committee on Resident Affairs in April 2026. An abstract has been submitted to the Canadian Journal of Medical Education.

B. Supporting Neurodivergent Learners in Clinical Practice (AMEE Guide)

Final revisions are underway for an invited AMEE Guide, *Supporting Neurodivergent Learners in Clinical Practice: Neurodiversity-Affirming Approaches for Inclusive Health Professions Education*, to be published in *Medical Teacher*. This guide targets clinical educators, faculty, placement providers, and institutional leaders, and offers practical, evidence-informed strategies to support neurodivergent learners in clinical and practice-based settings. It emphasizes inclusive approaches to supervision, assessment, and communication aimed at reducing barriers, fostering belonging, and promoting learner success.

C. Transitions into Residency

This study examines the transition experiences of residents and fellows entering training at Dalhousie University, with attention to differences across trainee groups (Dalhousie CMGs, other Canadian CMGs, CIMGS, IMGs, and visa trainees). Data collection is complete, and thematic analysis using NVivo is ongoing. Preliminary findings highlight challenges related to navigating the “hidden curriculum,” reliance on peer networks for informal knowledge, adjustment to new clinical and living environments (particularly for non-Dalhousie graduates), variability in program-level onboarding and support, and differing levels of preparedness at the start of clinical duties.

D. Exploring the “Undiscussables” in Medical Education Culture

This project explores workplace culture across the Faculty of Medicine through interviews with fifty-five staff members. Participants reflected on experiences of recognition and appreciation, as well as moments of feeling undervalued or overlooked, and identified persistent “undiscussables”—issues that are widely recognized but infrequently addressed. Analysis is complete, and dissemination is ongoing. Findings have been presented at International Conference on Academic Medicine.

4. Resident Childcare Survey

Resident Affairs DMNS, in collaboration with Dalhousie Medicine New Brunswick (DMNB) and Cape Breton Medical Campus (CBMC), completed a survey entitled *Childcare Challenges in Residency* to better understand how parenting responsibilities intersect with residency training. Ninety-one residents responded. Key themes included limited access to childcare spaces, long waitlists for these spaces, schedules that do not align with daycare hours, and significant stress related to call schedules, unpredictability, and away rotations. Many residents described heavy reliance on partners and extended family to make training feasible, often at personal or financial cost. Childcare challenges were also reported to influence future practice location decisions, particularly regarding proximity to family supports and rural practice. Resident Affairs is working PGME and Maritime Resident Doctors with a goal of informing planning and broader policy discussions at various leadership tables.

5. Wellness Education

All members of the Resident Affairs team were actively engaged in delivering wellness education throughout the year, contributing to approximately twenty presentations and workshops. These included program-specific resident academic days, as well as structured teaching within the Resident Leadership Elective and the

Resident Medical Education Elective. In addition, the team contributed to departmental faculty development sessions, extending the reach of this work to clinical educators. Topics were wide-ranging and responsive to learner and faculty needs, including fatigue risk management, the accommodated learner, coping with medical error, managing career transitions, empathetic leadership, wellness and workload management, psychological safety, conflict management, and imposter syndrome. Collectively, these efforts reflect a sustained commitment to integrating wellness into both learner and faculty development.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

The Office of Resident Affairs continues to advance the Faculty of Medicine’s strategic priorities across the pillars of education, research, valuing people, and serving and engaging society. Educational contributions include invited sessions at resident academic days, departmental rounds, and faculty development, addressing key topics such as resident wellness, career transitions, fatigue risk management, coping with medical error, feedback, and workplace accommodations. The ORA is active in research (outlined above), contributing to scholarship in areas including resident wellness, transitions, and inclusive learning environments. Internally, a strong emphasis is placed on valuing people by fostering a supportive and collaborative team culture, encouraging professional development, and strengthening relationships across the broader Student and Resident Affairs teams.

Through its work, the Office contributes to the FoM’s broader societal mandate by advancing resident wellness as a critical component of patient safety and healthcare system effectiveness. Initiatives such as fatigue risk management, support for learners in difficulty, and research on transitions into residency help ensure that residents are prepared to provide safe, high-quality care. Efforts in equity and inclusion, alongside dissemination of research and engagement at the national level, further extend the impact of this work beyond the institution to support a more responsive and sustainable healthcare workforce.

On the horizon – priority initiatives for 2026/27

1. Presentations

Moving Beyond Duty Hours: Practical Fatigue Risk Management in Medical Training

This in-conference workshop will be co-presented by Dr. Carolyn Thomson, Dr. Amy Robinson (University of Ottawa) and Dr. Jenna Smith-Forrester (PGY6, Neurosurgery, Dalhousie) at the International Conference on Residency Education in Ottawa in October 2026.

Individual to Institution: A Socio-Ecological Approach to Mapping Staff Experience to Improve Support and Drive Change in Health Professions Education. This in-conference workshop will be presented by Dr. Roberta Preston, Learner Development Officer, Resident Affairs DMNS, at AMEE 2026 in Vienna.

2. Learner Accessibility Officer

Funding to support a Learner Accessibility Advisor is being finalized with a view to recruitment in the coming months. This position will assist medical students and residents with disabilities or other accommodation needs across the Maritimes. They will assess learner needs, identify barriers related to educational programming and clinical environments, develop accommodation plans, provide case management, and ensure equitable access to education. The Learner Accessibility Advisor will work closely with the Resident Affairs teams at DMNS, DMNB and CBMC to ensure residents facing educational barriers have equal opportunity for success.

3. International Medical Graduates (IMG) Learner and Faculty Resource Lead

Recruitment will soon be underway for an IMG Learner and Faculty Resource Lead. This new role has been developed to provide dedicated support, advocacy, and guidance for IMG and visa residents across Dalhousie Medicine Nova Scotia, Dalhousie Medicine New Brunswick, and the Cape Breton Medical Campus. This position will be housed within Resident Affairs at DMNS and will serve as a confidential resource for learners navigating residency training in Canada and will support faculty involved in the teaching, supervision, assessment, and remediation of IMG learners. The role is grounded in principles of equity, anti-racism, anti-oppression, and culturally responsive practice. Responsibilities include supporting learner wellness and transitions into residency, advising faculty on inclusive supervision and assessment practices, contributing to faculty development and orientation initiatives, and identifying systemic barriers affecting IMG and visa trainees. The position will also collaborate closely with Resident Affairs and PGME leadership to strengthen institutional policies, improve learner supports, and promote fair and inclusive learning environments across all campuses.

4. PGME Accreditation

Resident Affairs at DMNS, DMNB and CBMC has been actively engaged in preparation for the 2026 postgraduate medical education accreditation review in November through collaboration with PGME leadership. The office has contributed to accreditation readiness related to resident wellness, accessibility and accommodations, learning environment, fatigue risk management, equity and inclusion, and resident support.

5. Psychoeducational Assessments

Resident Affairs recently established a streamlined psychoeducational screening and assessment process to support residents experiencing persistent academic difficulties or possible neurodivergence during training. The initiative recognizes that residents with conditions such as ADHD, learning disabilities, or autism may face challenges within the demanding residency environment despite strong clinical abilities. Previously, assessments were only available privately and were often associated with significant costs and long wait times,

delaying access to accommodations and supports. The new process was designed to improve timely access to assessment, reduce barriers, and facilitate earlier learner-centred support and accommodation planning. The process provides a confidential pathway for residents to access psychoeducational assessment services through self-referral or as part of a Formal Enhanced Learning Plan (FELP). Resident Affairs supports trainees throughout the process and assists with accommodation planning in accordance with PGME policy. The initiative reflects an ongoing commitment to accessibility, equity, learner wellness, and inclusive postgraduate medical education environments.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr. Annalee Coakley	Department: Student and Resident Affairs Cape Breton Medical Campus
----------------------------------	---

Brief Overview of Department

Student and Resident Affairs (SA/RA) Cape Breton Medical Campus (CBMC) provides assistance and advocacy for Dalhousie medical students and residents based in Cape Breton at local hospitals and the new Cape Breton Medical Campus. Working in close collaboration with Student and Resident Affairs offices at Dalhousie Medicine Nova Scotia (DMNS Halifax) and Dalhousie Medicine New Brunswick (DMNB Saint John), the CBMC team supports learners across our four distinct pillars: wellness and personal support, academic support, career planning, and financial fitness advising. As an inaugural campus, the CBMC SA/RA team is intentionally co-located within the student classrooms and tutorial rooms to maximize accessibility and connection with learners. Collaboration is central to our work and includes communication and work with UGME, the Dalhousie Student Accessibility Centre, the Office of Professional Affairs, the broader SA/RA network across campuses, and learner-led organizations including the Dalhousie Medical Student Society. We connect regularly with Halifax and Saint John-based colleagues to ensure CBMC learners experience continuity of support across the distributed medical education model.

2025/26 Update – Top Five Significant Accomplishments

- Inaugural Rising Tide Ceremony:** The creation and hosting of the inaugural Rising Tide Ceremony at CBMC stands as a defining accomplishment for the year. This event marked an important milestone for our students, the campus community, and the broader Cape Breton medical education community.
- Student and Resident Support:** All 30 students in our inaugural cohort have been seen for individual assessments, with many following up to connect throughout each unit. As a result, our team is familiar with each of our students and their individual goals and needs.

CBMC SA/RA is positioned to provide tailored and responsive support across each of the four pillars with Career Planning and Study Skills Sessions planned and executed by our advisor, and de-stress activities and engagement events developed by our coordinator on Learner Well Being. Our team has specifically created resources for Financial Fitness in collaboration with a Work Study position that hired a part-time undergraduate interested in medicine to develop a quick access and friendly resource.

SA/RA has collaborated with SAC to address learner accommodation planning. We have supported students and residents with accommodations, mental health and physical health challenges, study strategies, and short-term and long-term disability applications. Learner concerns are addressed via regular meetings with Student Affairs Wellness Liaisons (SAWLs), MarDocs, and DMSS leaders.
- Building a culture of trust and psychological safety:** The team has invested deliberately in building rapport with students. Being co-located in the student space and maintaining an open-door policy, and offering coffee, tea, and snacks have helped create an environment where students feel safe disclosing personal and

professional fears and worries. This culture of trust is one of the most important foundations of our learner support model.

- 4. Orientation and welcome:** SA/RA played an active role in supporting student orientation at the start of the academic year. Activities included team-building games, social events, and intentional welcoming initiatives that helped students settle into the new campus and form early connections with each other and with the team. Where our students were in a unique position as the inaugural cohort, SA/RA took O-week by the reins, ensuring our students had the same opportunities as their peers to connect and have fun.
- 5. Supporting student-led activities and cross-campus engagement:** The team supported students in hosting a range of activities and events at CBMC, and facilitated student engagement with Halifax Campus activities to help integrate CBMC students into the wider Dalhousie Medicine learner community.

2025/26 Update – The Four Core Streams of the Strategic Plan: Education, Research, Serving & Engaging Society, and Valuing People

- 1. Education:** The CBMC SA/RA team contributes to learner education through orientation sessions, individual and small-group support, and ongoing one-on-one engagement with all 30 students in the inaugural cohort. Educational touchpoints emphasize wellness, professional identity formation, and transition support as students navigate their early medical education journey at a new campus.
- 2. Research:** The team is developing baseline data and processes to inform continuous quality improvement, including capturing learner feedback, tracking uptake of services, and identifying trends emerging from the inaugural cohort. This information will become an important resource for refining our model of support in the coming years and contributing to the broader Dalhousie SA/RA evidence base.
- 3. Serving and Engaging Society:** Collaboration is central to our work with UGME, the broader Dalhousie SA/RA network across DMNS and DMNB, and with community and learner partners. Student and Resident Affairs collaborate regularly with UGME, PGME, RHAs, SAC, learners, as well as the Serving and Engaging Society.

We have connected with Global Health and Community Partnerships, Promoting Leadership in health for African Nova Scotians (PLANS), Keknu'tmasiek Ta'n Tel Welo'ltimk / (KW). As CBMC's inaugural cohort did not have any African Nova Scotian students, SA/RA collaborated with the CBU Advising Centre and the Student Development Officer for African Canadian and African Canadian Students to bring PLANS to campus to connect with potential future CBMC students. We are planning to have this as an ongoing part of our advocacy for incoming students.

Community partners have included supporting the students in their work with the Ally Centre and bringing or providing contacts and support for panelists for many Dalhousie and community organizations including but not limited to the Dalhousie Asian Medical Student Association, Gender Affirming Care panelists and SRPC (Society for Rural Physicians Canada).

Establishing relationships with local health system partners in Cape Breton has been a priority foundational activity for our inaugural year. For example, Dr. Coakley has met with the physician team in Inverness to answer questions about the program and has represented CBMC at the Inverness County Health Care Awards Gala in 2025 and 2026. In addition, Dr. Coakley and students have represented CBMC at various high schools in rural Cape Breton, encouraging rural youth to consider medicine as a career.

- 4. Valuing Our People:** Cross-campus team building and collaboration with DMNS and DMNB SA/RA colleagues continues to strengthen our team and broaden the support network available to CBMC learners. Across the three Dalhousie campuses, Directors and Advisors meet regularly to innovate curriculum, communication, and learner engagement. The Student Affairs team at CBMC, comprised of Dr. Annalee Coakley, Alyssa MacDonald and Eli Downton, is built on a foundation of trust and collaboration. Dr. Coakley has tendered her resignation in recognition that the Assistant Dean, Student and Resident Affairs CBMC, needs to be co-located with students in Sydney to build rapport, foster trusting relationships, and be readily available to learners.

On the Horizon – Priority Initiatives for 2026/27

Transition to new space: The team is preparing to move into a new dedicated space, which will allow for expanded capacity, enhanced privacy for individual learner conversations, and continued co-location with the student community.

Welcoming the next class: With the second cohort of CBMC medical students arriving in 2026/27, the team is preparing orientation, onboarding, and welcome activities designed to extend the supportive and connected learner experience established with the inaugural cohort. Particular attention will be paid to the additional complexity of having two cohorts at different stages on campus simultaneously.

Sustaining and deepening learner support: Building on the rapport and trust developed with the inaugural cohort, the team will continue to provide individualized, responsive support across wellness, academic, career planning, and financial fitness domains, including supporting students through the transition into clerkship and early career advising. A new position to support accommodations for learners at CBMC is under development and will be critical in meeting the needs of learners at CBMC.

Strengthening cross-campus collaboration: Ongoing collaboration with SA/RA teams at DMNS and DMNB will support learner mobility, shared curricular resources, and consistency of support across the distributed medical education model. We anticipate continued connection with Halifax Campus activities to ensure CBMC students experience full integration into the Dalhousie Medicine learner community.

Succession and team development: Succession planning is underway for the role of Assistant Dean, Student and Resident Affairs CBMC, as Dr. Annalee Coakley will complete her term on June 30, 2026. The DMNS and DMNB SA/RA teams will support onboarding of the incoming Assistant Dean to ensure continuity of support for CBMC learners, and ongoing professional development and team building will remain a focus for the local CBMC SA/RA team.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr. Lisa Sutherland	Program/Unit: Student and Resident Affairs DMNB
----------------------------------	--

Brief overview of program/unit

Student and Resident Affairs (SA/RA) DMNB assists, supports and advocates for Dalhousie medical students and postgraduate residents based in New Brunswick (NB), as well as those outside of New Brunswick as needed. The DMNB team works closely with the Student Affairs and Resident Affairs offices at DMNS and CBMC. Within NB, we work in a collaborative, distributed model, with physician site leads designated to provide local support at the four main Dalhousie teaching sites outside of Saint John: Moncton, Fredericton, Miramichi, Upper River Valley.

Key domains of work with students and residents:

- **Wellness and personal support/provision and coordination of resources**
- **Academic support and education**
- **Career planning and residency matching guidance and support**
- **Financial fitness advising**

Collaboration is critical in our work, given the complexity of the medical training trajectory. We are fortunate to have close connectivity with UGME, PGME, Program and Site Directors, Program Administrators, Dalhousie Student Accessibility Center, Office of Professional Affairs, Serving and Engaging Society Global Health and Community Partnerships, Promoting Leadership for African Nova Scotians (PLANS), Keknu'tmasiek Ta'n Tel Welo'Itimk / (KW), Faculty Wellness, Horizon Health Authority/Medical Education leads, New Brunswick Medical Society Wellness and representatives from the Province of New Brunswick. Collaboration with learner-driven organizations including Maritime Resident Doctors and Dalhousie Medical Student Societies keeps the teams on point with shared goals and initiatives. We routinely connect with NBMS Wellness and UNBSJ Wellness and Counselling to keep abreast of learner uptake and wellness related needs.

[Student Affairs Office - Dalhousie University](#)

[Resident Affairs - Dalhousie University](#)

2025/26 Update – top five significant accomplishments

1. Student and Resident support:

From April 22, 2025- April 4, 2026

- #318 student encounters with 92 individual students, 97% based at DMNB, 3% based at DMNS. This does not include the annual med 1,2,3 check ins, or the med 3,4 CV reviews.
- #219 resident encounters for 43 individual residents, 35% based outside of NB.
- All site lead/learner encounters are not included due to variable use of Dal Medix by site leads.

2. Residency Match Support:

- Considerable support is provided for students across med1-5 for the R1 mresidency match.
- DMNB learners participating in the R1 match had the following results:
 - 97% match rate in the R1 CaRMS match this year.
 - Of those matched, 52% were to Family Medicine, and 48% to Royal College programs
 - Of those matched to Family Medicine, 71% matched to Dalhousie programs
 - Of those matched to Dalhousie Family Medicine programs, 67% matched to NB sites
- Med 5 student support and subsequent discussions have led to curriculum content and structure being identified as an area for increased attention to be further explored by a combined UGME/SA task force. Learner input will be had through committee review processes and on an ad hoc basis.
- Support for personal letters, CVs and interview preparation was provided to NB based Internal Medicine residents for the Medicine Subspecialty match, and to NB based Family Medicine residents for the Enhanced Skills match with success in their respective matches.

3. Student and Resident Accommodations:

Student Affairs:

- With an increase in learner cohort size, collaboration continues with SAC, UGME, PLANS, KW, and RHAs to address the complexity of learner accommodation planning.
- The draft Core Competencies document for undergraduate learners will be reviewed at Policy Subcommittee May 2026.
- SAC/UGME/SA collaboration and quality improvement discussions continue for the accommodation process related to exceptional placement for clerkship.

Resident Affairs:

- Addressing accommodation planning proactively for current and incoming residents with programs, RHAs.
- AAC has been extremely helpful for complex case discussion and management

Shared Student and Resident Affairs:

- Advocacy with senior leadership for increased expert undergraduate and postgraduate learner support for accommodation planning.
- Faculty/professional development includes virtual presentations on academic accommodations in Feb 2026 with Dr. Carolyn Thomson and Dr. Anna MacLeod for the Department of Family Medicine; presentations by Dr. Lisa Sutherland on academic accommodations to the Skilled Clinician team in April 2026, and the LIC Retreat in May 2026. A shared presentation on Learning Environment with Dr. Lisa

Sutherland and Dr. Marc Nicholson (OPA) is planned for the Dr. Angie McGibbon Medical Education Forum, April 2026.

4. Valuing our people:

- Dr. Renea Leskie, Director SA/RA DMNB, meets regularly with the DMNB Operations manager and Director of Operations, and the Operations team to ensure alignment in work at DMNB.
- Across the three Dalhousie campuses, Directors and Advisors meet regularly to innovate curriculum, communication, and learner engagement.
- It was bittersweet to see Lisa Russell move on from Coordinator for our team, to an excellent opportunity in program administration for Horizon in Saint John. Succession planning was successful in Moncton with the onboarding of Dr. Mariza Voges as SA/RA site lead once Dr. Lucy Shen, former site lead, assumed her newer role as Site Director for Dalhousie Family Medicine in July 2025. Dr. Sean Wilson joined the team as SA/RA site lead for Fredericton in August 2025, however with his recent resignation for personal and professional reasons, we are currently searching for a new Fredericton site lead.
- Succession planning is well underway for the role of Assistant Dean, Student and Resident Affairs DMNB as Dr. Sutherland will complete her second term in the role on June 30, 2026.

5. Accreditation:

- UGME- Student Affairs is participating in the preparation of follow-up documents for Element 9.10 on Student Health and Patient Safety after receipt of the formal CACMS report.
- The positive momentum on policy review continues with SA/RA contributions to the policy subcommittee.
- Led by Rebecca Comeau, Advisor, SA/RA DMNB, Student Affairs has an organized approach to review objectives and evaluation questions and subsequent data for continuous quality improvement and monitoring of learner feedback on the SA curriculum and service for subsequent accreditation cycles.
- PGME – Resident Affairs has submitted documentation to contribute to relevant standards for the upcoming PGME accreditation November 2026 and will participate in the site visit as requested by PGME.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

1. Education:

- The DMNB Student and Resident Affairs team provides key education to learners through orientation sessions, individual and group learner sessions, transitional preparation sessions in PIER 1,2,3,4. Dr. Sutherland and Dr. Carolyn Thomson provided a workshop for the Resident Leadership Elective in Dec 2025.
- Dr. Sutherland provides faculty development education sessions as requested on key areas such as accommodation planning and the learning environment as outlined above.

2. Research:

- With Rebecca Comeau as the point person for our DMNB SA/RA team, Student Affairs tracks metrics for our services, explores access and satisfaction via periodic learner surveys, and develops and reviews our curricular feedback data regularly to undertake quality improvement initiatives in our sessions and service delivery.

- Resident Affairs participates in the Fatigue Risk Management (FRM) Program community of experts to stay informed about related research initiatives. Knowledge transfer on this information occurs through individual work with learners as well as through academic sessions such as the FRM session put on by Dr. Carolyn Thomson and Dr. Lisa Sutherland for family medicine residents and Site Directors at the Sept 2025 Family Medicine Resident Education Symposium, and in a new PIER 2, 2025 session with Dr. Roberta Preston and Dr. Lisa Sutherland.

3. Serving and Engaging:

- Student and Resident Affairs collaborate regularly with UGME, PGME, RHAs, SAC, learners, as well as the Serving and Engaging Society Global Health and Community Partnerships, Promoting Leadership for African Nova Scotians (PLANS), Keknu'tmasiek Ta'n Tel Welo'Itimk / (KW).
- Dr. Sutherland was pleased to meet with Dr. Julie Copeland, Said Msahaba, Dr. Toni Sapping. Dr. Marc Nicholson, during a site visit to DMNB ahead of a learner event, to discuss Black Learner support at DMNB.
- The DMNB SA/RA Advisor participates in the review and evaluation of the Global Health Awards. We collaborate with the Global Health Office on International Elective advising. The annual DMNB leadership tour allows for an in-depth review of site experiences with local learners, SA/RA site leads, UGME, PGME and Horizon Medical Education team members.
- The Saint John SA/RA team meets with the NB site leads every 6 weeks and as needed. Learner concerns are addressed via regular meetings with Student Affairs Wellness Liaisons (SAWLs), MarDocs, and DMSS leaders.

4. Valuing our people:

- Students: We enjoy our monthly SAWLs meetings to connect with students to listen and provide guidance across the undergraduate journey. We promote engagement with coffee time, contests and games in our foyer, wellness break snacks for students, site orientation sessions and related follow-ups.
- Residents: We assist MarDocs with resident onboarding/ welcome at resident changeover times at SJRH, provide site orientations and follow-ups to site groups via our team and via site leads.
- The Student and Resident Affairs websites highlight team members and roles to encourage outreach.
- Local and cross-campus team building activities are welcomed to enjoy laughs both in Saint John and at our annual retreats. The extensive collaboration within DMNB and across faculty units continues to be gratifying and fulfilling.

On the horizon – priority initiatives for 2026/27

1. Accommodations:

- Advancing the current work on accommodations will include further exploration of metrics, communication processes, advocacy for increased access to supports/resources required across the student to resident trajectory, the transition to career, professional development for team members, promotion of Universal Design, and finalizing the Undergraduate Core Competencies guideline to replace the outdated Technical Standards document.
- Further work will include exploration of supporting learners through the continuum from undergraduate medical education to postgraduate training as is related to planned updates to the PGME essential skills and abilities document. Undergraduate students often seek more information on accessibility questions in residency training and would welcome more detail from programs to better assist students in career planning.
- Ongoing collaboration is required with SA/RA across campuses and with RHAs to address accessibility at the clinical sites and housing across current distributed medical education and planned expansion sites at Dalhousie.

2. Accreditation and Policy review:

- Student Affairs is assisting with UGME Accreditation follow-up reporting on 9.10 Student Health and Patient Safety.
- Key areas of policy/procedure for further review include Progress regulations, Clerkship Exceptional Placement, Med 5 curriculum.
- PGME accreditation contribution to documentation and site visits as requested by PGME from Resident Affairs

3. Education and Transition Support:

- Domains of interest for future curriculum with learner-centred material includes financial domain, tolerating uncertainty as related to career advising and residency match preparation for students in the context of the med 5 policy and revisions to med 5 structure and content that may be generated by the task force, accommodation for medical learners. As learner cohorts become more diverse, further exploration of cultural and academic support is required, including on how DMNB Student and Resident Affairs can promote and support learner success in collaboration with Indigenous and Black Pathway teams and local resources.

4. Advocacy:

- Review the 2025 CMA Physician Health Survey released in Feb 2026, and the 2026 Voice of the Resident Survey pending release, for areas of focused learner support and advocacy.
- Childcare access for medical learners will be a focus area especially with RA/PGME.
- The SA/RA team will continue with the promotion of early and proactive connection, including access to wellness resources, mentorship, professional identity formation education, and comprehensive career advising, in key learner support areas such as for Indigenous and Black learner support at DMNB, and IMG support within NB based residency training, over the coming academic year.

5. Valuing our people:

- The team would like to extend a huge thank you to Dr. David Anderson for the immense support of DMNB Student and Resident Affairs and the expert guidance we have benefitted from during his

repeated terms as Dean for the Faculty of Medicine. We wish Dr. Anderson all the best in his planned retirement June 30, 2026.

- The team looks forward to welcoming the incoming Dean of the Faculty of Medicine, Dr. Saleem Razack on Sept 1, 2026.
- Thanks to Dr. Lucy Shen, and Dr. Sean Wilson for significant contributions as site leads for our team.
- We were very pleased to welcome Dr. Anna MacLeod, Assistant Dean, Student Affairs DMNS, to the larger team.
- Thanks to Dr. Annalee Coakley, Assistant Dean, Student and Resident Affairs CBMC, for a wonderful year of collaboration ahead of her planned resignation on June 30, 2026. The DMNB team will continue to assist the CBMC SA/RA team with support, including with onboarding a new Student and Resident Affairs Assistant Dean CBMC.
- We are excited to welcome an original DMNB staff member, Kelly Flowers, to the DMNB SA/RA team as Coordinator on May 1, 2026.
- Succession planning is underway for Assistant Dean, Student and Resident Affairs DMNB, for July 2026 at which time it is expected that the local and larger SA/RA teams will be excellent resources for onboarding of the new Assistant Dean for the unit.
- Attention will be focused on the ongoing provision of professional development and team building for the DMNB SA/RA team members.

Associate and Assistant Deans – Annual Report 2025/26

Name: Michael Clory	Program/Unit: Master Physician Assistant Studies
----------------------------	---

Brief overview of program/unit

The Master Physician Assistant Studies (MPAS) program is a 2-year full time post graduate degree. The program provides training to 24 students in the medical education model with a goal to train high caliber Physician Assistant graduates to support Maritime health care delivery.

The first year provides background knowledge in foundational medical sciences, skilled clinician skills, anatomy and professional competencies. The curriculum is delivered primarily via case-based learning augmented by didactic teaching, laboratory, simulation, and small group learning. This year includes 3 semesters of 16-week duration.

The second year provides 48 weeks of intensive clinical training. Students rotate through a series of health care related rotations including family medicine, emergency medicine, medicine, surgery, obstetrics and gynecology, pediatrics and psychiatry similar to UGME clerks supervised by Dalhousie faculty members.

A Research in Medicine course spans both years of the program with a requirement of a completed capstone project.

Graduates will be eligible to challenge the PACE national examination and be licenced to practice as dependent practitioners collaboratively with physicians across most disciplines of medical practice.

2025/26 Update – top five significant accomplishments

1. The first cohort of students completed the program in December with 21 inaugural graduates.
2. An Applied Pharmacology module was developed and has been incorporated into the first-year curriculum for the 2027 class.

3. Canadian Association of Physician Assistants (CAPA) 2025 national conference accepted 5 research posters for presentation from our students.
4. Development of a bank of questions for the Clerkship year 2 Progress and Final comprehensive exam to support the program assessment system.
5. Curriculum mapping for the program has been completed.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

EDUCATION:

All MPAS students were able to be placed for clinical rotations across all disciplines. A revision of the Pediatric rotation has incorporated Pediatric surgery clinic exposure in addition to outpatient clinic experience.

An Introduction to clerkship 2-week bootcamp was implemented in 2025. This was well received by students, and following feedback, some modifications were incorporated into the 2026 curriculum.

An end of clerkship 2-week Consolidation curriculum was delivered in December to prepare students for transition to practice and the National PACE exam.

A multiple-choice question bank was developed to support Clerkship assessment process. This was supported by the FOM Assessment Specialist, and MPAS faculty. The bank of questions was created and incorporated into examinations for the first cohort of students. Analysis of performance of the questions and

internal validity to PA education assessment is ongoing. It the hope to expand this bank to enable future students to have formative MCQ assessments as they transition through the clerkship year.

Input from community-based faculty has been encouraged. The pool of PAs tutors has expanded to provide most of the tutoring in Medical Foundations and Skilled Clinician Units. Dr. Sutton has created an Applied Pharmacology module which was delivered the to the class of 2028(during first year) in conjunction with the Medical Foundations unit. He has been retained as faculty to deliver this curriculum ongoing.

Community practicing PAs are being incorporated into teaching. Brittany Belair is a regular Tutor in Medical Foundations and has assumed a leadership role as Associate Unit Head Medical Foundations. Laurel MacGinnis is a regular Tutor for Medical Foundations. Others, specifically in primary care and emergency medicine are taking the lead in clinical teaching of MPAS students.

For this academic year Skilled Clinician, Anatomy and Medical Foundations units scheduling was revised to better coordinate curriculum to match systems being studied. This has been well received by the students.

The MPAS Education Committee has developed a set of key performance indicators which will be incorporated into the MPAS CQI process for programmatic evaluation.

Recruitment of new physician faculty to support medical teaching has been successful. Examples include Hospitalist staff at Colchester Regional, Aberdeen and Hants Community Hospitals. Several Family Physicians precepting MPAS students are new medical faculty.

A curriculum map has been completed linking objectives and curriculum content from all educational experiences to national EPA competencies.

The IPHE-Simulation event, an adapted escape room IPHE event with PA1s and MED2s was held again this April. This was led by DMNB faculty Craig Smith. It was well received by students in both programs. This is a natural collaboration given the close clinical working relation of these two disciplines. We hope to train local faculty to lead this event in the future and potentially to expand next year to include MED1 and PA2 students. The MPAS students have seamlessly integrated into the DEM IPE simulation sessions which integrate learning from nursing, respiratory therapy, medicine and physician assistant students.

RESEARCH:

The Research in Medicine course will help develop research skills for Physician Assistants. The inaugural class completed 5 RIM projects. The Dalhousie MPAS program had 5 posters accepted to the 2025 CAPA conference.

SERVING AND ENGAGING SOCIETY:

The MPAS Admission process was designed to be inclusive but focused on Nova Scotia applicants. All Interviewers were required to complete bias training. There are dedicated admission paths for Indigenous and African Nova Scotians are imbedded into the selection process. The 2029 class has 1 black student, and the 2030 class has our first indigenous student. The next cohort of students will include 3 New Brunswick and 1 Prince Edward Island students resultant from governments in those provinces recognizing the value of the MPAS program.

A policy for Indigenous Students Admission Pathway was approved by Faculty Council last fall. There is continuing development and promotion of our Education Equity admissions pathway. MPAS is collaborating with BLAS to develop similar policy for African Nova Scotians.

Efforts are ongoing to promote the program. Each year MPAS faculty and students in conjunction with PLANS (Promoting Leadership in health for African Nova Scotians) Co-op, provide presentation to black high school students, to promote interest in a medical sciences career.

MPAS program participated in the Graduate Professional Program fair, and the Engaging Community Day (hosted by Plans and KW) to promote the program.

Students are delivered curriculum content on EDIA reflexive and-oppressive practice during medical foundations tutorials and Procomp during the first year. Further content was delivered by Dr. Watson-Creed during pre clerkship bootcamp in second year. This was so positively received that this content will be delivered during orientation for the next incoming class. Tutorial cases continue to be updated to remove oppressive and other bias/assumptions. The Procomp course has integrated Back and Indigenous Health content. The Black Health Primer, from the Canadian Health Collaborative is a 16-session expansion to the Black Health lecture series.

VALUING PEOPLE:

Faculty were supported in professional development by providing conference fee support to those attending the 2025 CAPA conference which was attended by 4 faculty and the 2026 ICAM conference, with 3 faculty attending.

The MPAS Program Director attended the Canadian Association of Physician Assistants (CAPA) Annual Conference in the fall of 2025 and 2026 ICAM conference. This has allowed further education and development knowledge and skills to support our PA education program.

Cross collaboration has been encouraged with other Faculty of Medicine units, specifically UGME. This has resulted in a very positive working relationship. Administrative office space is shared.

There has been some turnover in faculty leadership with Dr. Deborah Summers retirement and Dr. Rebecca Haworth relocating to British Columbia. Their leadership will be missed as they were key contributors to developing the program.

We welcome PA Anita Watson to assume the Procomp Unit Head lead and Dr. Colin Boyd as the Rim Unit Head.

We celebrate the following faculty achievements.

- Dr. Vic Premsager was recognized as PA Tutor of the year as nominated by MPAS students.
- Dr. Michael Clory, Assistant Dean MPAS, was promoted to Associate Professor.

On the horizon – priority initiatives for 2025/26

1. Successful completion of Equal Accreditation Canada process. Self assessment document required May 15. Surveyor site assessment will occur in November.
2. Continued development of assessment question bank for Years 1 and 2.
3. Continued revision of OSCE case assessments to be more PA specific.

Associate and Assistant Deans – Annual Report 2025/26

Name: Sarah Wells	Program/Unit: BSc Medical Sciences Program
--------------------------	---

Brief overview of program/unit

The Medical Sciences Program is a BSc degree program offered through the Faculty of Science in partnership with the Faculty of Medicine, with contributions from the Faculty of Arts and Social Sciences. The program serves over 500 undergraduate students and prepares learners for Medicine, Dentistry, Pharmacy, Nursing, other health professions, and graduate studies.

The Assistant Dean of Medical Sciences provides academic and administrative leadership for the Program, supporting curriculum coherence, admissions and enrolment planning, student experience, and cross-faculty coordination. The Assistant Dean chairs the Medical Sciences Program Committee and serves on several Faculty- and University-level committees, including the Faculty of Medicine Basic Sciences Curriculum Committee and Faculty of Science Faculty Council.

This year marked a transition for the Program from a period of active expansion to one focused on integration, review, and long-term sustainability. Oversight of the Inclusive Pathways to the Medical Professions (IPMP) initiative continued, with the program reaching a key milestone through its first graduating cohort. Day-to-day program operations are overseen by the Medical Sciences Program Manager, in close collaboration with the Assistant Dean.

Sarah Wells will be concluding her second term as Assistant Dean, Medical Sciences at the end of the current academic year. A transition to new academic leadership is underway, with the incoming Medical Sciences Academic Director assuming the role on July 1, supporting continuity as the Program enters its next phase.

2025/26 Update – top five significant accomplishments

- 1) **Implementation Planning for Program Expansion:** Led academic and operational planning associated with the expansion of Medical Sciences intake (from 175 to 200 students), including coordination with the Faculties of Science and Arts and Social Sciences, the Registrar’s Office, while maintaining focus on instructional quality, advising capacity, and student supports.

- 2) **Medical Sciences Self-Study and Program Review:** Advanced the Medical Sciences Program Self-Study and curriculum mapping in preparation for the 2026 program review, strengthening documentation of learning outcomes, assessment alignment, and student progression across degree pathways.

- 3) **Development and Pilot Implementation of Longitudinal Curriculum Elements:** Led the design and early implementation of longitudinal curriculum components focused on professionalism, equity, diversity, inclusion, and accessibility, academic skills and scientific communication, and exposure to post-graduate career paths, complementing the disciplinary core of the program.

- 4) **Milestones and Institutional Recognition for IPMP:** Supported the first graduating cohort of Inclusive Pathways to the Medical Professions (IPMP) students, marking a key outcome for the initiative, and received institution-level recognition through the **2024–25 President’s Award for the Advancement of Equity, Diversity, Inclusion, and Accessibility (Group – Faculty/Staff)** in recognition of the program’s sustained impact and leadership in advancing equity-deserving students’ success.
- 5) **Strengthening Program Infrastructure and Governance:** Continued integration of the Medical Sciences Program Manager role and refinement of governance structures, including the formal establishment of a Medical Sciences Oversight Committee (Deans of Medicine and Science and the Associate Deans Academic) to support coordinated senior-level oversight, clarify accountability, and guide strategic decision-making as the Program grows in scale and complexity.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

Work this year focused on consolidating and aligning the Medical Sciences curriculum in the context of continued enrolment growth and preparation for program review. Key activities included advancement of the Self-Study and curriculum mapping, continued refinement of the fourth-year Capstone course, and early implementation of pilot longitudinal curriculum elements centred on professionalism and equity, diversity, inclusion, and accessibility, as well as structured career-exploration activities (e.g., a Medical Sciences career night) designed to broaden students’ awareness of diverse academic and professional pathways in health and science.

Research

The Program continued to support undergraduate research through Honours, Directed Projects, and experiential learning opportunities involving students and supervisors across multiple Faculties. Emphasis was placed on integrating research skills, critical thinking, and information literacy into upper-year coursework to support students’ preparation for graduate studies, professional programs, and research-informed careers.

Serving and Engaging Society

Community-engaged work continued through the Inclusive Pathways to the Medical Professions (IPMP) initiative, which entered a new phase with the first graduating cohort. Program-level design and outcomes related to IPMP were disseminated through a **peer-reviewed presentation at the Society for Teaching and Learning in Higher Education (STLHE)** conference, contributing to broader sector conversations on equity-focused cohort models in undergraduate education. In addition, work supported by a **Dalhousie Community Engagement Days Grant** enabled the development of a **pilot high-school mentorship initiative** connected to IPMP, building on relationships established through Nova Scotia Engagement Days and extending outreach to prospective students and communities earlier in the educational pathway.

Valuing People

Attention this year focused on supporting the staff, cohort advisors, and faculty contributors who sustain the Medical Sciences Program as it operates at increased scale. This included recognition of contributions to student success, continued collaboration and mentorship within the program team, and attention to role clarity and governance structures that support long-term sustainability. University-level recognition of IPMP further affirmed the collective contributions of staff, advisors, faculty, and community partners engaged in this work.

On the horizon – priority initiatives for 2026/27

1. **Program Review Follow-up and Faculty Council Submission:** Receipt of the external reviewers' recommendations for the Medical Sciences Program Review (anticipated prior to July 1), preparation of the Program's written response to those recommendations, and submission of the reviewers' report and institutional response to **Faculty of Science Faculty Council** for consideration.
2. **Evaluation and Refinement of Longitudinal Curriculum Components:** Assessment and iteration of pilot longitudinal curriculum elements based on student and faculty feedback, with attention to sustained integration across the Program. Proceed with long-term plan to formalize into Medical Sciences Curriculum.
3. **Sustained Planning for Enrolment Growth:** Continued academic and operational planning to support expanded intake through years 2-4, with attention to instructional capacity, advising, student experience, and cross-faculty coordination.
4. **IPMP Sustainability and Knowledge Sharing:** Continued support for IPMP students and alumni following the first graduating cohort, with emphasis on sustainability, evaluation, and dissemination of insights to inform equity-focused initiatives within and beyond Dalhousie.
5. **Leadership Transition and Continuity:** Support for a smooth transition to new academic leadership in the Medical Sciences Program, ensuring continuity of governance, oversight, and strategic planning during the coming year.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr. Marc Nicholson (DMNB) Dr. Nabha Shetty (DMNS) Dr. Steven MacDougall (CBMC)	Program/Unit: Office of Professional Affairs
---	---

Brief overview of program/unit

The Office of Professional Affairs launched in December 2022. The OPA is guided by a mandate to support learners facing mistreatment, and to ensure a safe learning environment for all learners in the medical school. Led by the assistant deans of professional affairs, Drs. Nabha Shetty (DMNS), Marc Nicholson (DMNB), and Steven MacDougall (CBMS), the OPA is focused on a restorative approach to addressing reports of learner mistreatment, and the promotion of professionalism within the learning environment. The OPA is managed by Deanna Foster, who monitors the data, and plays a role in communicating the outcomes of all complaints processed through the office.

2025/26 Update – top five significant accomplishments

1. Received over 150 cases since development with over 125 closed

Within its first three years, OPA has received over 150 cases, with more than 125 successfully closed. This level of engagement signals meaningful awareness and utilization of the office by learners, while the high closure rate highlights OPA's effectiveness in addressing concerns, supporting resolution, and contributing to a safer and more responsive learning environment.

OPA is committed to timely engagement, consistently responding to all inquiries within two business days. However, the overall time required to resolve a case is influenced by the availability of key stakeholders, including faculty members, learners, and senior leadership. This collaborative and thorough approach ensures that every concern is addressed with the care and attention it deserves.

2. Increase in referrals / awareness

An increase in referrals, including from faculty, Student/Resident Affairs, and fellow learners, highlights both growing awareness and trust in OPA. This broad engagement suggests a cultural shift toward shared responsibility in identifying and addressing concerns, and reinforces OPA's role as a trusted, accessible support within the learning environment.

3. Tupper Art project

OPA initiated the transformation of the foyer space to better reflect our values of inclusion and representation. A key step in this process was the relocation of portraits of former deans, which no longer aligned with the diverse community we serve. In their place, we have initiated the installation of Indigenous and African Nova Scotian artwork. This new display will feature handcrafted drums by Mi'kmaq artist Alan Syliboy, alongside a large-scale painting that brings presence and cultural significance to the space. These changes contribute to a more welcoming and inclusive environment, with the hope that all learners will feel better connected within Dalhousie Medicine.

4. Brightspots / hotspots

The OPA has worked with the Wellness office to develop and launch the *Bright Spots / Hot Spots* initiative, a novel, high-level feedback tool designed to capture “temperature check” data on clinical learning environments. This program introduces a proactive, systems-level approach to identifying trends related to inclusion, respect, and safety, supporting earlier awareness of both positive environments and areas of concern.

5. Collaboration with Continuing Education / Fear Conference

Participation in the *FEAR Conference* demonstrates OPA’s continued integration into collaborative professional development efforts. This partnership creates opportunities to engage with faculty, leadership, and learners in a shared space, reinforcing OPA’s role in advancing collective responsibility for a respectful and inclusive learning environment.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- Continue expanding educational outreach (e.g., presentations, workshops, conference participation such as the *FEAR Conference*) to strengthen understanding of professionalism and the learning environment across all campuses.
- Integrate OPA into formal and informal curricula (e.g. PIERS, PGME orientation, etc.), supporting learner development and awareness of professionalism, psychological safety, and safe learning environments.
- Ensure distributed campus have equitable access to supports and learning environment resources
- NSH to integrate and access anti-oppression workshops / Horizon health

Research

- Explore opportunities to contribute to scholarship on learning environments, professionalism, and learner experiences (e.g., trends in referrals, thematic issues, system-level insights).
- Collaborate with faculty and institutional partners to translate anonymized insights into quality improvement and research initiatives (e.g. case-based workshops).
- Support knowledge dissemination by identifying patterns and emerging issues that can inform evidence-based improvements in medical education.

Serving and Engaging

- Strengthen partnerships with internal and external stakeholders (e.g., faculty, student/resident affairs, health system partners) to support a responsive and accountable learning environment – learners can bring support people to the meetings
- Continue to build trust through accessible, confidential support, as reflected in increased referrals from peers, faculty, and leadership.
- Contribute to broader conversations on professionalism and learning environments through collaborative initiatives (e.g., conference participation, cross-office partnerships).

Valuing People

- Foster a safe, respectful, and supportive environment by providing learners with a trusted space to raise concerns and seek guidance.
- Promote psychological safety and wellbeing through early engagement, responsiveness, and relationship-building across campuses.
- Support a culture of respect, inclusion, and accountability by working collaboratively with partners to address concerns and improve the learning environment.

- Ensure respondents feel safe and supported when an OPA concern comes forward regarding them

On the horizon – priority initiatives for 2026/27

- Enhance OPA's digital presence by updating the website to more accurately reflect the office's role, processes, and available supports for both learners and faculty, improving accessibility and clarity.
- Expand faculty engagement and education on OPA's approach, including restorative justice principles and the office's non-punitive, supportive mandate.
- Submit an abstract or workshop proposal to upcoming conferences such as ICRE and/or ICAM, highlighting trends and insights identified through OPA's work.
- Revise the OPA learner mistreatment policy to strengthen a trauma-informed and inclusive approach, including supporting learners in bringing individuals with lived experience or support persons to meetings.
- Advance upstream, preventative work through partnerships (e.g., PLANS) to co-design interventions that address systemic issues in the learning environment before concerns escalate.
- Collaborate with health libraries to refresh and better align available supports with learner and faculty needs.
- Further develop the Bright Spots / Hot Spots initiative to better capture and highlight positive learning environment experiences, in addition to identifying areas of concern.
- Expand OPA's research and scholarship efforts, including exploring opportunities to publish on emerging trends, thematic analyses of cases, and upstream interventions to contribute to the broader medical education literature.
- Assess and advocate for increased administrative support, in response to significant growth in case volume (30+ new cases this year), to ensure timely responsiveness while sustaining capacity for proactive and system-level work.

Associate and Assistant Deans – Annual Report 2025/26

Name: Dr. Paul Atkinson	Program/Unit: Research, Dalhousie Medicine New Brunswick
--------------------------------	---

Brief overview of program/unit

The Office of Research at Dalhousie Medicine New Brunswick supports the development, coordination, and growth of health research across the New Brunswick campus of Dalhousie University's Faculty of Medicine. The program works closely with Dalhousie Faculty of Medicine leadership, Horizon Health Network, the University of New Brunswick, and provincial partners to strengthen research capacity in the province.

Activities focus on enabling investigator-led research, supporting early and mid-career researchers, strengthening partnerships across institutions, and building an integrated research environment aligned with Dalhousie's strategic plan.

The research structure at DMNB currently spans three principal research groups:

- Discovery Science Research
- Population Health Research
- Clinical and Medical Education Research

The Assistant Dean, Research works with the Research Council, principal investigators, and institutional partners to advance research capacity, mentorship, grant development, and strategic initiatives across the campus.

2025/26 Update – top five significant accomplishments

1. Strengthening the research governance structure at DMNB

Continued refinement of the DMNB research structure to align with Faculty of Medicine priorities, including clearer organization around three core research groups and improved coordination through the Research Council.

2. Expansion of research partnerships across New Brunswick

Advanced collaborations between Dalhousie Medicine New Brunswick, Horizon Health Network, the University of New Brunswick Institute for Population Health, and other provincial partners to strengthen the research ecosystem and support interdisciplinary work.

3. Support for investigator development and grant activity

Provided mentorship and advisory support for faculty developing research programs and grant submissions and

national funding opportunities. Continued support for both laboratory and population health research initiatives.

4. Leadership of internal research awards programs

Oversaw and coordinated DMNB research funding competitions, including the Dal Med NB Health Research Awards and the Chesley Family Research Awards, supporting pilot projects and early-stage research development in the province.

5. Contribution to the development of provincial research and innovation structures

Worked with Horizon Health Network leadership on the development of a new research and innovation institute structure. This work aims to strengthen the interface between academic research and health system innovation while maintaining strong alignment with Dalhousie's research mission.

2025/26 Update – work being done in the four core streams of the strategic plan

Education

Supported research training and mentorship of students, residents, and early career investigators across DMNB. Continued collaboration with faculty and program leaders to strengthen research opportunities for learners and integrate research exposure within training programs.

Research

Worked with research group leads and investigators to strengthen research productivity and collaboration across discovery science, population health, and clinical research. Continued to support development of competitive grant proposals and foster collaboration across institutions.

Serving and engaging society

Engaged with provincial partners including Horizon Health Network, the University of New Brunswick, and ResearchNB to strengthen the role of health research in improving population health and healthcare delivery in New Brunswick. Continued work to connect academic research with real-world system challenges.

Valuing people

Supported faculty and trainee development through mentorship, research advising, and opportunities to participate in collaborative research initiatives. Efforts have focused on building a supportive research environment and recognizing the contributions of investigators across disciplines.

On the horizon – priority initiatives for 2026/27

1. Strengthening the clinical and medical education research portfolio

Support the development of additional principal investigators and research programs within clinical and medical education research at DMNB, an area with strong potential for growth.

2. Expanding research capacity in New Brunswick

Continue to build partnerships with Horizon Health Network and other provincial partners to expand research opportunities and strengthen the provincial research ecosystem.

3. Advancing digital health and artificial intelligence research

Support emerging research initiatives in digital health, artificial intelligence, and data-enabled healthcare improvement, while ensuring alignment with the Faculty of Medicine's academic priorities.

4. Enhancing support structures for investigators

Work with institutional partners to improve research infrastructure including grant development support, statistical support, and research coordination resources for investigators.

5. Strengthening research visibility and impact

Continue efforts to showcase the research strengths of Dalhousie Medicine New Brunswick and increase the visibility of research outputs locally, nationally, and internationally.

Associate and Assistant Deans – Annual Report 2025/26

Name: John Sapp	Program/Unit: MRDO Clinical Research
------------------------	---

Brief overview of program/unit

Provision of support for clinical researchers within the Faculty, linking them to the MRDO
Support for MRDO in adjudication of clinical research applications; mentorship/facilitation of clinical research

2025/26 Update – top five significant accomplishments

- Rejuvenation of clinical research directors meetings, incorporating NSH/IWK research to facilitate communication
- Adjudication of Internal and external granting opportunities (Chesley, River Philips, Sobey's), post-doctoral fellow grant reviews
- Engagement with CANReview and advocacy with NSH
- Membership on CIP committee, evaluation of CIP intake and guidance with managing the program
- Departmental Surveys
- Meetings with individual clinical researchers for advice, guidance and support navigating the research environment

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

- Renewal of meetings with clinical research directors to improve liaison between NSH/IWK research and faculty, and communication of research opportunities
- One-on-one meetings/contact with multiple individual researchers for advice/support
- Ongoing engagement of early career researchers to improve mentorship and research community
- Joined CIP program committee
- Participation in CAN-ACT clinical trials network grant application with goal of increasing Dalhousie participation and access

On the horizon – priority initiatives for 2026/27

- Resurvey departments and department heads, personal support for research directors
- Grant Peer Review among research directors
- Advocacy for CAN-Review with NSH/IWK
- Facilitation of engagement and advocacy for researchers within the One-Patient-One-Record environment and roll-out, and maintenance of research productivity as new challenges emerge

Associate and Assistant Deans – Annual Report 2025/26

Name: Kirill Rosen	Program/Unit: Assistant Dean Graduate and Postdoctoral Studies
--------------------	--

Brief overview of program/unit

My portfolio includes:

representing the interests and perspectives of the graduate students and postdoctoral fellows (PDFs) based in the Faculty of Medicine, ensuring promotion of career development opportunities, as well as financial and other support opportunities for graduate and postdoctoral trainees within the Faculty of Medicine, aiding in running the Professional and Research Education Program (PREP) through the Faculties of Medicine, Health Professions, and Dentistry and associated health centers, contributing to reports highlighting the role of graduate students and PDFs to the Dean of Medicine to ensure that the policies and actions of Dalhousie University toward graduate students and PDFs are consistent with the strategic plan of the Faculty of Medicine, acting as the Faculty of Medicine representative for

- FoM Graduate Student Research Day Planning Committee (chair)
- PREP Advisory Committee (member)
- FGS Faculty Council
- AFMC Vice-Deans Graduate Students and Post-Doctoral Scholars Committee (member)

2025/26 Update – top five significant accomplishments

1. Organized FoM Graduate Research Day in June, 2025.
2. Organized the competition for the Tri-Agency Canada Graduate Research Scholarships - MSc Awards, Killam and The Dalhousie Research Excellence awards for PhD students, Dalhousie 1-Year Master's Scholarship for MSC students and FoM Graduate Studentships for PhD and MSc students in 2026.
3. Organized the competition for Undergraduate Student Research Awards in 2026.
4. Represented FoM at the FGS and AFMC meetings focused on graduate students and PDFs, met periodically with FoM Department graduate coordinators and administrators to discuss graduate student-related affairs. As a result of my advocacy, minimal recommended stipends for PhD students were increased in the Faculty starting September 2025, and for MSC students, starting September 2026.
5. Represented FoM as a member of Edwin Kroeger Global Emerging Scientist Award AFMC Committee.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

1. Chair the FoM Scholarship Committee, ensure that the Committee has sufficient number of members with expertise to conduct reviews of graduate applications.
2. Organize competitions for graduate students and PDFs, e.g., the Tri-Agency Canada Graduate Research Scholarships - MSc Awards, Killam and The Dalhousie Research Excellence awards for PhD students, Dalhousie 1-Year Master's Scholarship for MSC students and FoM Graduate Studentships for PhD and MSc students Excellence in Research Awards.
3. Organize FoM Graduate Research Day.
4. Represent FoM at the FGS and AFMC Vice-Deans Graduate Students and Post-Doctoral Scholars Committee meetings.
5. Meet with FoM Department graduate coordinators and administrators to discuss graduate student-related affairs.

On the horizon – priority initiatives for 2026/27

1. Organize FoM Graduate Research Day in June, 2026.
2. Complete the review process for FoM Graduate Studentships competition.
3. Starting 2026 I had to organize Tri-Agency Canada Graduate Research Scholarships - MSc Awards, Killam and The Dalhousie Research Excellence awards for PhD students as well as Dalhousie 1-Year Master's Scholarship for MSC students, in addition to FoM Graduate Studentships for PhD and MSc students. This resulted in a strong increase in the number of applications. Hence, I plan to significantly increase the number of the members of the Scholarship Committee to ensure high quality peer review of these applications.
4. Continue organizing graduate and postdoctoral funding competitions and overseeing respective review processes.
5. Continue working with basic science department heads, graduate coordinators, FGS and AFMC to further promote the interests and perspectives of graduate students and postdoctoral fellows. I plan to advocate for further increase of the minimal recommended stipends for MSc and PhD students in 2026-2027.

Associate and Assistant Deans – Annual Report 2025/26

Name: Abir Hussein	Program/Unit: Distributed Medical Education
---------------------------	--

Brief overview of program/unit

The Distributed Medical Education (DME) portfolio provides strategic leadership and coordination of undergraduate and postgraduate medical education across Dalhousie’s distributed training sites in Nova Scotia. The portfolio supports the development, expansion, and sustainability of longitudinal integrated clerkship (LIC), Undergraduate and Postgraduate training experiences in rural and regional communities.

Working collaboratively with UGME, PGME, DHW, and NSH, the DME unit focuses on enhancing learner capacity, ensuring high-quality educational experiences across sites, and strengthening community engagement in medical education. The role also supports faculty development, site engagement, and alignment with the Faculty of Medicine’s social accountability mandate, particularly in advancing rural workforce recruitment and retention.

2025/26 Update – top five significant accomplishments

1. Expansion of LIC Leadership and Site Development

Recruited and onboarded site directors across 9 new LIC sites, enabling expansion from 2 to 11 LIC sites across Nova Scotia. This work directly supports the planned placement of 30 additional learners from the Cape Breton Medical Campus (CBMC) in 2027, in addition to the existing 11 Dalhousie Medicine Nova Scotia campus (DMNS) LIC seats, significantly increasing provincial training capacity.

2. Zonal Planning and Stakeholder Engagement

Led and facilitated zonal-level planning meetings through Davis Pier consulting firm with local UG and PG leadership, CMBC, the Department of Family Medicine, and Nova Scotia Health zonal and regional representatives. These sessions identified local challenges and enablers for LIC implementation in 2027 and the planned increase of 33 Family Medicine residency seats by 2029.

3. Capacity Planning for Undergraduate and Postgraduate Training

In close collaboration with the Department of Family Medicine, Family Medicine Residency Program, UGME, and PGME, conducted initial planning to identify capacity across existing Family Medicine training sites and new developing LIC sites. Regular meetings with PG Family Medicine program directors supported alignment of site-specific expansion plans and informed decisions on where additional residency positions can be added.

4. Enhanced Engagement with Distributed Sites and Stakeholders

Conducted site visits and strengthened relationships with community physicians, site leads, local community partners and health system leads to better understand local challenges, support faculty, and co-develop sustainable teaching models.

5. Site Readiness and Infrastructure Assessment

Engaged with UG and PG leadership at each site to assess readiness for increased learner numbers. This included evaluation of clinical teaching capacity, infrastructure, preceptor availability, housing, and childcare, ensuring sites are positioned to safely and sustainably accommodate expansion.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- Expansion of LIC training capacity from 2 to 11 sites, supporting a significant increase in undergraduate learners across Nova Scotia.
- Alignment of undergraduate and postgraduate planning to support growth of 33 Family Medicine residency positions by 2029.
- Ongoing collaboration with UGME and PGME to ensure consistency and quality of distributed training experiences across sites.

Research

- Serving as the Dalhousie lead researcher in the AFMC Distributed Medical Education (DME) network project examining the community impact of DME across Canada, including engagement with rural communities to better understand awareness, expectations, and meaningful partnerships with medical schools
- Exploring the use of scholarly approaches to support program and site evaluation, with a focus on using data to inform quality improvement and guide ongoing development of distributed medical education.

Serving & Engaging Society

- Participation in Nova Scotia Engagement Day (2025), including the Yarmouth community roundtable with local organizations, Dalhousie faculty, and community stakeholders. These discussions identified priority social issues and opportunities for learner engagement through community-based volunteering and service.
- Support community-based initiatives, including Family Medicine residents engaging with local high school students to promote medical careers and provide hands-on exposure to clinical skills.
- Ongoing collaboration with community partners to strengthen alignment between medical education and local health and social needs.

Valuing People

- Supporting distributed faculty through engagement, recognition, and faculty development opportunities.
- Promoting a collaborative and inclusive approach to distributed education that values community preceptors and site teams.
- Listening to and addressing concerns from site leaders and faculty to improve the teaching and learning environment.

On the horizon – priority initiatives for 2026/27

- Develop and implement a sustainable medical education administrative structure for distributed sites, where dedicated administrative staff support learners, faculty, and site leadership, tailored to local context.
- Increase capacity for Royal College residency training through expansion of rotations at regional hospitals and exploration of new community-based training streams.
- Standardize onboarding processes for LIC Directors, preceptors, and administrative staff to support consistency across sites.
- Develop a standardized DME scheduling tool to streamline UGME and PGME placements, optimize clinical capacity, support data tracking, and enable ongoing quality improvement.
- Continue coordinated planning with UGME, PGME, and the Department of Family Medicine to ensure successful implementation of LIC expansion in 2027 and residency growth through 2029-2030

Associate and Assistant Deans – Annual Report 2025/26

Name: Katrina Hurley	Program/Unit: Faculty Wellness
-----------------------------	---------------------------------------

Brief overview of program/unit

Physicians and Scientists are human beings first — with limits, needs, and lives beyond their work. When we care for the people who care for others, everyone benefits. Supporting faculty wellness means honoring that humanity and creating a system where faculty members can truly thrive.

The program is supported by 0.4FTE Assistant Dean, 0.4FTE Program Manager and 0.5FTE administrative support.

How we support Faculty Wellness:

1. Community of Practice for Wellness Leaders
2. Research and Collaboration
3. Thought Partner for exploring wellness issues and building connections

2025/26 Update – top five significant accomplishments

1. Completed two RIM projects. Students both presented at ICAM 2026. Drafting manuscripts now. Results need to be disseminated to relevant partners within the Faculty of Medicine.
2. 1st retreat for leaders in Faculty Wellness
3. Established Wellness Leadership Community of Practice
4. Presented wellness content at international conferences – AMEE 2025, ICAM 2026 and ICEM 2025
5. Co-leading collaboration on the Hot Spots/Bright Spots project to assess health promoting learning and working environments.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Stream 1 – Excellence in Education, Focus Area 4

Katrina Hurley represents Dalhousie on the Okanagan Charter Collaborative and the Culture of Academic Medicine Initiative: Towards Improved Provider Safety (CAMI-TIPS). The principles of the Okanagan Charter inform the Bright Spots-Hot Spots Check In to assess learning environments. Dr. Hurley has co-led efforts to develop and pilot this Check In and the Office of Professional Affairs will manage the data and feedback to Departments.

Stream 3 – Serving and Engaging Society, Focus Area 4

Faculty Wellness is engaging and maintaining relationship with partners outside the academic community such as CPSNS, CMPA, Doctors Nova Scotia, and New Brunswick Medical Society. Cultivating these relationships ensures that we do not duplicate efforts and learn from each other.

Stream 4 – Valuing People, Focus Area 1

Inspired by the Okanagan Charter 1.1. Embed health in all campus policies - Faculty Wellness lead two research projects that examined policies in the Faculty of Medicine. These were presented at ICAM 2026 and manuscripts are being drafted for publication. The research findings can be used to address deficiencies in the storage and accessibility of policies, as well as aligning policy content with the stated goal of fostering health promoting learning and working environments for Dalhousie FoM learners and faculty.

On the horizon – priority initiatives for 2026/27

1. Grow the Wellness Leadership Community of Practice.
2. Establish a Faculty Wellness presence on social media.
3. Complete RIM Student research project on Joy in Academic Medicine.
4. Explore the potential for expansion in educational offerings.

Associate and Assistant Deans – Annual Report 2025/26

Name: Alison Archibald	Program/Unit: Faculty Development
------------------------	-----------------------------------

Brief overview of program/unit

Director of Faculty Development – delivery of faculty development programs across all CBMC sites and provide support to directors at other campuses (DMNB, DMNS).

- Design and implement curriculum for faculty development
- Ensure alignment of faculty development programs with accreditation standards
- Collaborate with faculty leadership across CBMC, DMNB, DMNS.
- Monitor effectiveness of programs through quality improvement practices.
- Support career development for faculty involved in teaching and scholarly activities

2025/26 Update – top five significant accomplishments

1. Established strong working relationships with Directors of Faculty Development at Dalhousie Medicine New Brunswick (DMNB) and Dalhousie Medicine Nova Scotia (DMNS). Participated in Faculty Development Retreat in June 2025 to identify priorities for the 2025–2026 academic year and to coordinate educational activities and event promotion.
2. Secured accreditation for the **Professional Development (PD) Seminar Series** at the Cape Breton Medical Campus (CBMC) for the 2025–2026 academic year. This series allows for delivery of short accredited programming throughout the year without the need for repeated approval from accreditation bodies.
3. Developed and delivered or promoted quality faculty development sessions:
 - a recurring accredited program, **“Building Confidence with Teaching Technologies,”** offered at the start of each new unit to support the onboarding of tutors.
 - educational sessions focused on the foundations of tutoring, including **“Preparing New Tutors for Success: Making the Most of Small Group Learning”** (May 2025) and **“Elevate Your Game: Making the Most of Small Group Learning,”** a four-week virtual program.
 - the Faculty Development session at the 2025 Dalhousie Faculty of Medicine Dean’s Retreat, held at the CBMC campus. The session, **“Beyond ‘Good Job’: Giving Feedback That Makes a Difference,”** focused on improving the quality and impact of feedback provided to learners.
 - the Faculty Development session entitled **“Guiding Learners from Med 1 to Residency: Expectations and Support,”** addressing faculty roles in supporting learners across the educational continuum.
4. Participated in the Committee on Accreditation of Continuing Medical Education (CACME) accreditation review conducted in April 2026 at the Dalhousie Faculty of Medicine.
5. Implemented quality improvement practices in faculty development, including:

- Collaboration with a Dalhousie evaluation specialist to design and distribute a faculty needs assessment
 - Reflective discussions with faculty regarding experiences teaching Professional Competencies to inform targeted development initiatives
 - Meetings with Student and Resident Affairs to identify learner-identified faculty development concerns
 - Collection and review of participant evaluations following all programming
6. Served as Course Coordinator for the **Dalhousie Medicine Certificate in Clinical Teaching (CCT)**, an accredited nine-month online course providing comprehensive training in clinical teaching.

2025/26 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

Advanced the development and delivery of high-quality, accredited faculty development programming that supports excellence in teaching and aligns with institutional priorities.

Research

Collaborated with Dalhousie Evaluation Specialists to design and implement faculty needs assessments and to systematically evaluate the quality and impact of faculty development programming.

Serving and Engaging Society

Ensured faculty development initiatives explicitly integrate the social determinants of health and emphasize the creation of safe, inclusive, and respectful learning environments.

Valuing People

Engaged institutional leadership, Student and Resident Affairs, and faculty members to identify emerging educational needs and to strengthen support for tutoring and clinical teaching

On the horizon – priority initiatives for 2026/27

Faculty Development Retreat (June 2026, Truro)

Plan and host a joint Faculty Development Retreat involving the Cape Breton Medical Campus (CBMC), Dalhousie Medicine New Brunswick (DMNB), and Dalhousie Medicine Nova Scotia (DMNS) to establish shared priorities and strategic alignment for the 2026–2027 academic year.

Professional Competencies Tutor Development

Develop and deliver a Professional Competencies tutor training session for both current and incoming tutors in August or September 2026 to support consistent expectations and high-quality teaching.

Annual Faculty Development Curriculum

Design and implement a longitudinal annual faculty development curriculum consisting of a coherent series of in-person and virtual workshops for faculty involved in Undergraduate Medical Education (UGME). Core themes will include faculty orientation, small-group learning, effective feedback, clinical teaching “on the fly,” supporting learners in difficulty, teaching in the skilled clinician role, and equity, diversity, and inclusion in teaching.

Clinical Reasoning Course Development

Design a Dalhousie Medicine Clinical Reasoning Course, a three-month accredited program focusing on theoretical models of clinical reasoning and evidence-based approaches to teaching clinical reasoning skills to learners.