

**Dean's Report, Annual Faculty Meeting
June 2, 2026**

This has been another impactful and transformative year for the Faculty of Medicine, marked by growth across our distributed campuses, continued academic achievement, and important progress toward our strategic priorities.

This past year also required us to navigate continued financial pressures at Dalhousie University, including budget reductions and operational constraints. These realities have made planning and hiring more complex and, at times, challenging. Despite this, our faculty and staff have worked exceptionally hard to maintain the strength of our academic programs and to minimize impacts on our learners. These pressures are expected to continue in the near term, and I am grateful for the collaboration, resilience, and commitment demonstrated across the Faculty as we move forward together.

There were a number of major initiatives related to medical education and I am grateful for the support of Dr. Stephen Miller, Senior Associate Dean for Medical Education for overseeing these. A major milestone this year was the successful accreditation of our Undergraduate Medical Education (UGME) program. Final confirmation was received in September 2025, reflecting the significant effort undertaken across all campuses to demonstrate the quality and comparability of our program.

At the same time, we successfully launched the Cape Breton Medical Campus (CBMC), welcoming our first cohort of 30 students in August 2025. This marks a defining moment for Dalhousie Medicine and represents a significant step forward in our commitment to distributed education and addressing physician shortages across the region.

I am pleased to share highlights from across the Faculty, representing the dedication and accomplishments of our faculty, students, and staff. For more detailed updates, I encourage you to review the reports from our Associate and Assistant Deans, I refer you to the reports from our Assistant and Associate Deans on our Faculty Council [webpage](#).

Undergraduate Medical Education (UGME)

Under the leadership of Dr. Ian Epstein, Undergraduate Medical Education (UGME) has completed a year marked by continued growth, successful accreditation, and significant advancement across all areas of the undergraduate medical curriculum. The UGME Office, working closely with Assistant and Associate Deans across preclerkship, clerkship, and longitudinal programs, continues to oversee the development, delivery, and assessment of the MD curriculum across all campuses.

A major milestone this year was the successful accreditation of the UGME program by the Committee on Accreditation of Canadian Medical Schools (CACMS), with confirmation received in September 2025. This achievement reflects the collective efforts of faculty, staff, and learners across the Faculty of Medicine. At the same time, the program welcomed the inaugural class of students to the Cape Breton Medical Campus (CBMC) and formally launched a Distributed Medical Education unit to support ongoing expansion.

In preclerkship education, under the leadership of Drs. Wendy Stewart, Osama Loubani, and Arlene Kelly-Wiggins, the program delivered a comprehensive and coordinated curriculum across all three campuses. A significant accomplishment was the full implementation of a revised professional competencies curriculum, now structured as a two-year longitudinal program organized around eight evolving themes. This redesign strengthens the integration of communication, professionalism, leadership, and emerging topics such as artificial intelligence.

The successful launch of the preclerkship curriculum at CBMC was a major achievement, with a strong emphasis on ensuring parity in learning experiences across distributed sites. This was supported through hybrid delivery models, targeted faculty development, and enhanced coordination with administrative teams. Ongoing curriculum renewal, including the annual review of over 100 case-based learning modules and increased integration of clinical reasoning, continues to strengthen the learning experience for students.

The Skilled Clinician and Interprofessional Education portfolio, led by Dr. Anuradha Mishra, made important advances in clinical skills teaching, assessment, and interprofessional programming. Innovations included the implementation of a two-day OSCE format, adoption of new assessment technologies, and the introduction of formative tools to support procedural skills development. The team expanded flexible interprofessional learning opportunities, including new experiential activities such as operating room shadowing, collaborative simulation events, and interprofessional clinics.

Building on this work, interprofessional education and service-learning initiatives—particularly at CBMC—have expanded under the leadership of Dr. Abidemi Fasanmi. Efforts have focused on scaling IPE programming, strengthening coordination, and deepening partnerships with community organizations and allied health institutions. New tracking and evaluation tools have been introduced to support consistent delivery and continuous improvement of student experiences, while community-engaged learning opportunities continue to reinforce the Faculty's commitment to social accountability.

In Clerkship, under the leadership of Drs. Dan Smyth, Joffre Munro, and Sarah Mader, significant progress was made in advancing competency-based medical education and supporting distributed clinical training. The rollout of the Entrustable Professional Activities (EPA) framework represents a major milestone, with enhanced tracking and oversight systems ensuring students meet required clinical experiences and learning objectives.

Clerkship has also played a central role in preparing for the expansion of Longitudinal Integrated Clerkship (LIC) sites to accommodate the growth of CBMC. This work has been supported by strong collaboration across distributed sites, faculty development initiatives, and ongoing investment in curriculum renewal, including enhanced online and simulation-based learning. Continued efforts are underway to address accreditation requirements and strengthen comparability of learning experiences across all training environments.

Across the UGME portfolio, there has also been important progress in program governance, assessment, and student support. The restructuring of the Assessment and Evaluations Unit, ongoing review of promotion and appeals processes, and continued success in the CaRMS match all reflect a strong and responsive academic program.

Together, these accomplishments reflect the dedication and collaboration of the UGME leadership team, faculty, staff, and learners. Through continued innovation, a commitment to equity and social accountability, and a focus on distributed education, UGME remains well positioned to prepare

Dalhousie medical students to meet the needs of patients and communities across the Maritimes and beyond.

Admissions

The Undergraduate Medical Admissions Office, led by Dr. Andrea Rideout, oversees the complex and highly competitive process of selecting future learners for Dalhousie's MD program across its three campuses. The team continues to manage a rigorous and comprehensive admissions cycle, supporting both the Admissions Committee and its subcommittees in the review and selection of candidates, while ensuring a fair, transparent, and high-quality process.

For the 2025–26 admissions cycle, the Faculty offered 169 domestic seats across Halifax, Saint John, and the Cape Breton Medical Campus, along with a number of supernumerary and advanced standing positions. Interest in the program remains strong, with a substantial pool of qualified applicants. A total of 705 applications were received, with 430 candidates advancing to the interview stage through a virtual Multiple Mini Interview process.

A continued area of focus for the Admissions Office has been the implementation and refinement of priority admissions pathways. The Indigenous Applicants Pathway, Black Learners Admissions Pathway, and Rural Applicant Pathway are now well established and supported by dedicated subcommittees that provide holistic review and recommendations to the Admissions Committee. These pathways continue to play a critical role in advancing equity, diversity, and social accountability within the Faculty of Medicine, while strengthening connections to the communities we serve.

This admission cycle also marked the first full application of a revised Place of Residence criterion, designed to better reflect applicants' lived experience and engagement within Maritime communities. Early results suggest this change is supporting the Faculty's goals of improving regional representation and long-term retention of graduates within the region.

The Admissions Office continues to prioritize continuous quality improvement across all aspects of the admissions process. This includes ongoing evaluation of application procedures, data analysis to inform decision-making, and collaboration with partners across the Faculty, including the Office of Community Engagement, to support outreach and information-sharing with prospective applicants.

This important work is supported by a dedicated team, as well as the significant contributions of faculty, staff, students, and community members who serve on admissions committees and participate in the interview process. Their commitment ensures that Dalhousie continues to select highly qualified candidates who reflect the values of the Faculty and the needs of the communities it serves.

Postgraduate Medical Education (PGME)

Under the leadership of Dr. Babar Haroon, Associate Dean, and Dr. David Bowes, Assistant Dean, the Postgraduate Medical Education (PGME) program continues to support a large and complex training environment, with more than 700 residents across 56 accredited residency programs.

A major focus this year has been preparation for the upcoming joint accreditation review by the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada. Extensive internal review processes have been undertaken, including program reviews, progress reports, and targeted accreditation workshops.

PGME has also advanced key priorities in program growth and alignment with institutional goals. This includes the expansion of Family Medicine residency positions and continued refinement of admissions pathways to better support Indigenous, Black, and Maritime learners. A more transparent and collaborative process for determining residency (R-1) quotas has further strengthened alignment with health system needs and provincial partners.

Resident education and leadership development remain central to the program. Initiatives such as the PGME Leadership Elective and enhanced professional development offerings support residents in building skills in leadership, scholarship, and clinical practice. Ongoing engagement with residents through mechanisms such as the Voice of the Resident survey continues to inform program planning and ensure responsiveness to learner needs.

Supporting resident wellbeing and success is a shared priority across the PGME portfolio. The Office of Resident Affairs at Dalhousie Medicine Nova Scotia, led by Dr. Carolyn Thomson, provides confidential academic, personal, and career support to residents across Nova Scotia and Prince Edward Island. Services include coaching, wellness resources, career planning, and advocacy, as well as support for residents navigating academic challenges or workplace concerns.

In New Brunswick, Student and Resident Affairs, under the leadership of Dr. Lisa Sutherland, continues to provide comprehensive support to residents through a distributed model. The team delivers individualized advising, wellness supports, and career guidance, while working closely with PGME, program leadership, and health system partners. Over the past year, this has included extensive engagement with residents across sites and proactive support for accommodations, transitions, and career planning.

Across the PGME portfolio, there has also been continued progress in advancing equity, diversity, and inclusion, strengthening distributed training environments, and enhancing collaboration with partners. Initiatives such as improved fatigue risk management resources, expanded resident wellness programming, and increased engagement with distributed sites demonstrate a strong commitment to supporting residents in complex and evolving training environments.

Continuing Professional Development/Division of Medical Education (CPDME)

Under the leadership of Dr. Lori Connors, Associate Dean Continuing Professional Development and Medical Education (CPDME) continues to deliver high-quality, innovative educational programming that supports faculty development and clinical education across the Faculty of Medicine. The unit plays a central role in providing responsive, distributed educational opportunities for both basic science and clinical faculty, as well as interprofessional audiences across the Maritimes.

A key focus this year has been CPDME's full accreditation review by the Committee on Accreditation of Continuing Medical Education (CACME), with a successful site visit completed in April 2026. This

milestone represents the culmination of several years of coordinated effort across all teams within the unit and reflects a strong commitment to quality and continuous improvement.

CPDME continues to deliver a broad range of flagship programs, including Faculty Development, Academic Detailing, Medical Education Research, Accreditation, and Conferences. These programs support faculty, clinicians, and learners through a wide variety of formats, including conferences, webinars, community hospital programming, and public education initiatives such as Mini Medical School.

Faculty development has remained a significant area of growth, particularly in support of the Cape Breton Medical Campus. New leadership roles have strengthened the unit's capacity to deliver targeted programming and support faculty as they prepare for teaching in distributed environments. The Faculty Development team continues to offer a wide range of in-person and virtual programming, including seminar series, retreats, and both synchronous and asynchronous learning opportunities.

Innovation in program delivery has also been a priority. The implementation of a new virtual platform has enhanced the delivery of conferences, webinars, and registration processes, improving access and flexibility for participants. CPDME's conference and clinical education programs continue to reach large audiences, with multiple annual events and more than 40 community-based sessions delivered this year alone.

Research and scholarship continue to be advanced through the Medical Education Research Unit, which has contributed to national and international dissemination of work, including presentations at major conferences. In parallel, the Academic Detailing Service has expanded its impact through education initiatives that reach hundreds of healthcare providers and participation in national collaborative research projects focused on improving prescribing practices.

CPDME also continues to contribute to the Faculty's broader social accountability mandate through partnerships with Serving and Engaging Society and the delivery of required programming such as anti-oppression education for new faculty. Through these efforts, the unit supports inclusive, equitable, and community-responsive healthcare education.

Dalhousie Medicine New Brunswick (DMNB)

Under the leadership of Dr. Julie Copeland, Dalhousie Medicine New Brunswick (DMNB) continues to play a vital role in the delivery of distributed medical education across the Faculty of Medicine. Based at the University of New Brunswick in Saint John, DMNB provides a full continuum of undergraduate and postgraduate medical education, supported by a large network of distributed faculty, clinical partners, and academic leaders across the province.

This year marked continued growth in both undergraduate and postgraduate programming. The third cohort of the expanded undergraduate class of 40 students was welcomed in August 2025, and the first expanded cohort transitioned into clerkship across distributed sites throughout New Brunswick. Concurrently, postgraduate training capacity has increased, with the addition of further residency positions in Family Medicine and Internal Medicine, bringing the total number of incoming residency positions in New Brunswick to 36 for the 2026 cohort.

Accreditation and continuous quality improvement have remained central priorities. DMNB faculty and staff played key roles in the Faculty's recent UGME accreditation process and continue to be actively engaged in follow-up activities. Preparation is also well underway for the upcoming PGME accreditation review in November 2026, with strong collaboration across programs and administrative teams.

DMNB has also undergone important leadership transitions and appointments across academic and clinical portfolios, reflecting continued strengthening of governance and program delivery. These changes, alongside sustained engagement from faculty and staff, ensure ongoing stability and innovation across the campus.

Research at DMNB continues to demonstrate strength and momentum, under the leadership of Dr. Paul Atkinson, across discovery, clinical, and population health domains. Faculty and trainees have secured competitive funding, contributed to high-impact publications, and presented at conferences, while community-facing events such as the DMNB Research Celebration and Breakthrough Breakfast have highlighted the impact of research on health outcomes and system improvement. The restructuring of the DMNB Research Council into three focused thematic areas further aligns research activity with strategic priorities.

Student and Resident Affairs at DMNB, led by Dr. Lisa Sutherland, continued to provide high-touch academic, wellness, and career advising. I would like to take this opportunity to thank Dr. Sutherland for her dedication and service to the position, and to DMNB, as she prepares to conclude her time Assistant Dean.

Together, these accomplishments reflect DMNB's continued growth as a key pillar of distributed medical education. Through strong partnerships, commitment to excellence, and focus on community impact, DMNB remains central to advancing medical education and improving health outcomes in New Brunswick and across the Maritimes.

Cape Breton Medical Campus (CBMC)

Under the leadership of Senior Associate Dean Dr. Stephanie Langley, the Cape Breton Medical Campus (CBMC) has completed a highly successful inaugural year as Dalhousie's newest distributed medical education site. In August 2025, CBMC welcomed its first cohort of 30 medical students, marking a significant milestone in expanding access to medical education in Nova Scotia.

This first year has focused on establishing a strong academic and operational foundation. Teaching was delivered in a fully adapted interim facility at the Marconi Campus of Cape Breton University, including lecture, tutorial, clinical skills, and anatomy lab spaces, ensuring a high-quality learning experience aligned with other Dalhousie campuses.

A major milestone in the campus's development was the official opening of the Medical Sciences Building on May 14, 2026, marking the transition from interim facilities to a purpose-built space that will support continued growth in education, research, and learner experience.

The campus has also built a robust leadership and program structure, with key appointments across preclerkship, clerkship, Student and Resident Affairs, Professional Affairs, interprofessional education,

and faculty development. These roles have been essential in delivering a coordinated and comparable educational experience within a distributed model.

Learner support has been a defining strength of CBMC's inaugural year. Under the leadership of Dr. Annalee Coakley, Student and Resident Affairs established a highly accessible, student-centred model focused on wellness, academic success, career planning, and financial literacy. Through proactive engagement and an embedded presence within learner spaces, the team has fostered a strong culture of trust and psychological safety, ensuring individualized support for all students.

Faculty development, under the leadership of Dr. Alison Archibald has also been a key priority, supporting new and distributed faculty as they prepare to teach in a growing academic environment. Targeted programming has strengthened teaching capacity, with an emphasis on early learner education, equity-oriented care, and social accountability.

CBMC has placed a strong emphasis on community engagement, building meaningful partnerships with local organizations, schools, and health system partners. Students and faculty have contributed to outreach activities, service-learning opportunities, and admissions engagement, helping to strengthen connections with communities and support long-term physician recruitment and retention in rural and underserved regions.

Research development is an emerging focus, with early collaborations underway between Cape Breton University and Nova Scotia Health in areas such as healthy aging and rural clinical trials. Plans to recruit clinician-scientists and expand research capacity will further integrate scholarship into the learner experience.

These accomplishments reflect a strong and strategic launch for CBMC. With a clear commitment to community-engaged education, distributed training, and health system impact, the campus is well positioned to play a transformative role in addressing healthcare needs across Nova Scotia.

BSc Medical Sciences Program

Under the leadership of Dr. Sarah Wells, the BSc Medical Sciences Program continues to play a central role in preparing undergraduate students for careers in health professions, research, and graduate studies. Delivered in partnership with the Faculties of Science and Arts and Social Sciences, the program serves more than 500 students and remains a key entry point into the Faculty of Medicine's broader education and research ecosystem.

This year marked a transition from a period of expansion to one focused on integration, review, and long-term sustainability. Growth in enrolment has been carefully managed, with planning underway to support an increase in annual intake while maintaining instructional quality, advising capacity, and student supports.

A major priority has been preparation for the upcoming program review in 2026. Significant progress has been made in advancing a comprehensive self-study and curriculum mapping process, strengthening alignment between learning outcomes, assessment approaches, and student progression across the degree.

Curriculum innovation has continued through the development and early implementation of longitudinal learning elements. These include a focus on professionalism, equity, diversity, inclusion and accessibility, as well as academic skills, scientific communication, and career exploration. Complementing this work, enhancements to capstone and experiential learning opportunities continue to support student readiness for diverse academic and professional pathways.

The Inclusive Pathways to the Medical Professions (IPMP) initiative reached an important milestone this year with its first graduating cohort. The program continues to demonstrate strong impact in supporting equity-deserving students, with national recognition for its contributions to advancing inclusion in undergraduate medical education pathways.

Research and experiential learning remain integral to the program, with students participating in honours projects, directed studies, and cross-faculty research opportunities. These experiences strengthen critical thinking, research literacy, and preparation for graduate studies and professional programs.

These efforts position the BSc Medical Sciences Program for continued growth and impact. With a strong academic foundation and a commitment to equity, innovation, and student success, the program remains a vital contributor to the Faculty of Medicine's education mission.

Office of Professional Affairs

The Office of Professional Affairs (OPA), led by Dr. Nabha Shetty, Dr. Marc Nicholson, and Dr. Steven MacDougall, continues to play a central role in fostering a safe, respectful, and inclusive learning environment across Dalhousie Medicine. Since its launch in 2022, the office has focused on supporting learners experiencing mistreatment through a restorative, learner-centred approach, while promoting professionalism across all campuses.

The OPA has seen strong engagement from the Faculty community, with more than 150 cases received to date and a high proportion successfully resolved. This level of utilization reflects increased awareness and trust in the office, as well as a growing culture of shared responsibility among learners, faculty, and staff in addressing concerns and supporting a positive learning environment.

A key area of progress has been the development of proactive, systems-level approaches to monitoring and improving learning environments. The introduction of the Bright Spots / Hot Spots initiative provides a mechanism to capture and respond to emerging trends related to inclusion, respect, and psychological safety across clinical and academic settings.

OPA has also contributed to broader cultural and institutional change through initiatives that promote inclusion and representation. This includes efforts to transform physical spaces to better reflect the diversity of the community, alongside continued collaboration with partners such as Continuing Professional Development and Medical Education and participation in initiatives such as the FEAR Conference.

At its core, OPA remains committed to valuing people by fostering a culture of respect, inclusion, and accountability. Through early engagement, responsive support, and relationship-building, the office continues to create a trusted environment where learners feel safe raising concerns and seeking guidance.

Research

Under the leadership of Dr. Eileen Denovan-Wright, Associate Dean, Research, the Faculty of Medicine continues to advance a coordinated and high-impact research enterprise across basic science, clinical, population health, and medical education domains. The Medical Research Development Office (MRDO) remains the Faculty's central hub for research strategy, infrastructure, and investigator support, working closely with faculty, partners, and institutional leadership to strengthen research capacity and outcomes across the full research lifecycle.

A key focus this year has been strengthening research infrastructure, governance, and the supports that enable competitiveness. MRDO expanded donor-funded programs that directly sustain research momentum and trainee development, including summer studentships, graduate and postdoctoral fellowships, and conference grants, alongside targeted initiatives such as the River Philip Transformation and Sustaining Excellence programs. MRDO also supported major national-scale activity, including recruitment and the application process for a Canada Excellence Research Chair (CERC) in Vaccines and Biologics Translational Science, and completed a comprehensive review of MRDO processes to improve alignment with Faculty values and streamline coordination with central administration.

MRDO also advanced major strategic infrastructure that positions the Faculty for longer-term impact. Notably, the office secured the required federal, provincial, donor, and university funding and approvals for GMP BioLabs East and supported ongoing construction, renovation, operational planning, and Health Canada compliance work. These investments strengthen the Faculty's ability to translate discovery into real-world applications through more robust infrastructure and regulatory readiness.

Significant progress has also been made in expanding research capacity and partnerships across campuses. In New Brunswick, under the leadership of Dr. Paul Atkinson, research activity continues to grow through strengthened governance and deeper partnerships with Horizon Health Network, the University of New Brunswick, and provincial collaborators. Work this year further aligned DMNB research around three principal groups: Discovery Science Research, Population Health Research, and Clinical and Medical Education Research, while also supporting investigator development, grant activity, and internal awards programs that support early-stage and investigator-led work.

Support for trainees and the research workforce remains a central priority. Under the leadership of Dr. Kirill Rosen, Assistant Dean, Graduate and Postdoctoral Studies, the Faculty advanced scholarship and funding competitions supporting MSc, PhD, and undergraduate research trainees, while strengthening oversight of review processes through the Faculty's scholarship governance. Advocacy also contributed to increases in recommended minimum stipends for PhD students beginning September 2025 and for MSc students beginning September 2026. This is an important step in supporting recruitment, retention, and trainee sustainability.

Clinical research has also been an area of focused renewal. Under the leadership of Dr. John Sapp, efforts to strengthen collaboration and communication between clinical researchers and health system partners included rejuvenating clinical research directors meetings with engagement from Nova Scotia Health and IWK research, supporting adjudication and peer review across multiple internal and external granting opportunities, and providing direct mentorship and guidance to clinical investigators navigating an increasingly complex research environment. This work is also strengthening coordination around broader initiatives and emerging system changes that affect clinical research productivity.

It has now been three years since the extreme weather event in February 2023 that caused multiple pipes to burst in the Sir Charles Tupper Medical Building, resulting in widespread flooding and significant damage to research and administrative spaces across the facility. The impact was profound, disrupting laboratories, displacing teams, and affecting years of work across multiple departments.

I am pleased to share that the Tupper Building officially reopened in July 2025, marking an important milestone in what has been a complex and large-scale recovery effort. Faculty, staff, and trainees have now returned to fully restored and modernized research environments, reflecting both the scale of the rebuild and the opportunity to renew and strengthen our infrastructure.

Throughout this period, our research community demonstrated exceptional resilience, maintaining momentum through relocation, collaboration, and innovation. I extend my sincere appreciation to everyone involved for their perseverance, flexibility, and commitment during a very challenging time.

The experience has reinforced the strength of our research community and our shared commitment to supporting a vibrant, collaborative culture that advances discovery, informs education, and improves health outcomes for the communities we serve.

Master of Physician Assistant Studies Program

Under the leadership of Dr. Michael Clory, the Master of Physician Assistant Studies (MPAS) program continues to build momentum as a key component of the Faculty of Medicine's educational work. This two-year professional program prepares highly skilled physician assistants to support healthcare delivery across the Maritimes through a curriculum that integrates foundational sciences, clinical training, and research.

This year marked an important milestone with the graduation of the program's inaugural cohort, reflecting the successful implementation of a new model of physician assistant education at Dalhousie. The program continues to provide comprehensive training through case-based learning, simulation, and distributed clinical placements across a full range of disciplines, closely aligned with undergraduate medical education models.

Curriculum development and refinement have remained central priorities. Enhancements this year included the introduction of new curricular components, such as an applied pharmacology module, and the implementation of structured transition-to-clerkship and transition-to-practice programming. Ongoing curriculum mapping and the development of assessment tools, including an expanding question bank, have strengthened program coherence and evaluation processes.

Clinical education continues to be a major strength of the program. All students were successfully placed in clinical rotations across disciplines, supported by a growing network of physician and physician assistant educators. Increased involvement of community-based clinicians has enhanced teaching capacity and strengthened alignment between academic training and real-world practice.

Research and scholarly activity are embedded throughout the program, with students completing capstone projects through the Research in Medicine course. The inaugural cohort demonstrated strong

engagement in research, with multiple presentations accepted at the national Canadian Association of Physician Assistants conference.

With strong interfaculty collaboration, national engagement, and a growing distributed network, the MPAS program is already shaping a new generation of clinician educators prepared to support healthcare delivery across the Maritimes.

Basic Science Education

Under the leadership of Dr. Sarah Wells, Associate Dean Academic, Basic Sciences, the Faculty of Medicine continues to strengthen the foundation of undergraduate, graduate, and postdoctoral education in the basic sciences. This portfolio provides strategic oversight for academic program planning, curriculum development, teaching quality, and academic governance across non-UGME programs, ensuring alignment with Faculty priorities and university standards.

This year has focused on advancing a more coordinated and sustainable approach to academic oversight. Significant progress has been made in strengthening program governance structures, refining curriculum planning processes, and supporting continuous quality improvement across multiple programs. These efforts have enhanced alignment between learning outcomes, assessment practices, and program-level expectations.

A key priority has been the development of Faculty-wide frameworks to support transparency and equity in academic workload. New approaches to documenting and evaluating teaching, supervision, and administrative responsibilities are helping to ensure more consistent and evidence-informed planning across units.

The implementation of the Academic Delivery Plan (ADP) process has also supported more effective planning in response to enrolment growth. By identifying instructional pressures and coordinating requests for teaching resources, this approach is strengthening the Faculty's ability to maintain high-quality education while managing increased demand.

The Faculty has continued to support the development of new academic programs, including emerging areas such as Human Genetics and Genomics. These initiatives reflect a forward-looking approach to program design, ensuring that new offerings are aligned with institutional priorities, resource capacity, and evolving workforce needs.

Support for graduate and postdoctoral education remains an important component of this portfolio. Ongoing work has strengthened connections between curriculum design and research training, ensuring that graduate programs align with broader expectations for scholarly development and research excellence.

Collectively, this work is strengthening the academic infrastructure that underpins basic science education at Dalhousie, positioning the Faculty to support continued growth, innovation, and excellence across its programs.

Faculty Wellness

Under the leadership of Dr. Katrina Hurley, the Faculty Wellness portfolio continues to advance a coordinated and thoughtful approach to supporting the wellbeing of faculty across the Faculty of Medicine. Grounded in the principle that physicians and scientists must be supported as whole people, the program focuses on creating conditions where faculty can thrive professionally and personally.

A key area of development this year has been the establishment of a Faculty Wellness Leadership Community of Practice, bringing together leaders across the Faculty to share knowledge, strengthen connections, and advance wellness initiatives. This network, supported by targeted retreats and ongoing engagement, is helping to build a more coordinated and sustainable approach to wellness leadership.

Faculty Wellness has also contributed to growing national and international dialogue on wellbeing in academic medicine, with presentations delivered at major conferences including AMEE, ICAM, and ICEM. These activities reflect both the strength of local initiatives and the Faculty's leadership in this evolving area.

Partnerships beyond the Faculty continue to be an important focus. Ongoing collaboration with organizations such as provincial health and regulatory bodies supports a more integrated approach to physician and faculty wellbeing, ensuring alignment with broader system priorities and reducing duplication of effort.

Faculty Wellness also contributes to institutional priorities through engagement with national initiatives such as the Okanagan Charter and CAMI-TIPS, helping to embed principles of health promotion, psychological safety, and system-level change into Faculty policies and practices.

This work is steadily shaping a more intentional and integrated approach to wellness across the Faculty, with growing momentum toward embedding health, connection, and sustainability into the culture of academic medicine.

Serving and Engaging Society

Under the leadership of Dr. Gaynor Watson-Creed, the Serving and Engaging Society portfolio continues to advance the Faculty of Medicine's commitment to social accountability, community partnership, and health system impact. Working closely with the Office of Community Engagement, this portfolio positions the Faculty as a responsive and trusted partner in addressing the health priorities of the communities it serves.

This year has been marked by continued progress in embedding social accountability across the Faculty. SES work was recognized through a positive outcome in the recent UGME accreditation process, reflecting sustained efforts to align education, research, and service with community needs. The approval of new Guidelines for Community Compensation, Support, and Recognition represents a significant step toward more equitable and respectful engagement with community partners.

Advancing anti-oppression and equity, diversity, inclusion, and accessibility (EDIA) remains a central priority. Implementation of the Faculty's Anti-Oppression Policy has continued through educational programming, faculty development sessions, and institutional engagement, reaching a broad cross-section of departments. These initiatives are fostering a more inclusive, reflective, and accountable learning and working environment.

Significant progress has also been made in Indigenous and Black health education and learner support. Indigenous initiatives have focused on strengthening academic leadership, expanding admissions pathways, and enhancing culturally grounded supports such as land-based learning, Elders' teachings, and dedicated student spaces. In parallel, the Promoting Leadership in Health for African Nova Scotians (PLANS) program has continued to grow in reach and impact, supporting learners across the continuum through mentorship, outreach, and pathway programming.

Community-engaged service learning (CESL) continues to be a cornerstone of the portfolio, with strong student participation and increasing partnership with community organizations across Nova Scotia and New Brunswick. These experiences provide learners with meaningful opportunities to engage with communities while developing a deeper understanding of social determinants of health and health equity.

Work in planetary and global health has further expanded, including high-profile events such as the Dr. Tarunendu Ghose Visiting Scholar Lecture and Community Engagement Day. These initiatives bring together learners, faculty, and community partners to explore global health challenges, advance equity-focused approaches, and highlight community-based research and innovation.

Additional efforts to support Francophone and Acadian learners and communities have strengthened culturally responsive education and outreach, contributing to a more representative health workforce and improved access to care.

Across all areas, SES continues to build meaningful partnerships, ensuring that community voices inform Faculty priorities and activities. This work is reinforcing the Faculty's role not only as an academic institution, but as an active contributor to healthier communities.

Dean's Office

The Dean's Office plays a central role in supporting the Faculty of Medicine's academic, research, and clinical missions, providing the operational and strategic foundation required to advance our priorities. Working closely with our Interim Chief Operating Officer, Dr. Shawna O'Hearn, this portfolio brings together Finance, Human Resources, MedIT, Communications, and Building Services to support a coordinated and responsive approach to service delivery across the Faculty.

This past year has required careful navigation of a challenging financial and operational environment across the university. I am grateful to the teams across the Dean's Office for their leadership in managing budget pressures, a hiring freeze, and increasing reporting requirements, while maintaining high levels of service and advancing key priorities. The implementation of new financial and procurement systems, including DalBuy, and the transition of budgeting responsibilities to the Dean's Finance team have strengthened accountability and supported more transparent, efficient operations.

We have also made important progress on several strategic initiatives that will support the Faculty in the years ahead. This includes continued work on the Clinical Academic Funding Plan, administrative reviews of education units, and the launch of the Assessment and Evaluation Unit. These efforts are helping to strengthen academic quality, improve program delivery, and ensure we are well positioned to meet evolving expectations.

Finally, I want to acknowledge the tremendous efforts of our faculty and staff in navigating a year marked by significant change. Despite leadership transitions and evolving operational structures, our teams have remained focused, collaborative, and committed to supporting one another and the broader mission of the Faculty.

As I write this, I am mindful that this will be my final Dean's Report, as I conclude my second term as Dean at the end of June. It has been a profound privilege to serve this Faculty and to work alongside such dedicated colleagues, learners, and partners. I am deeply grateful for the collaboration, resilience, and shared commitment that define the Faculty of Medicine. I am confident that the Faculty is well positioned for continued success, and I look forward to seeing all that will be achieved in the years ahead. An exceptional new Dean is coming in September, Dr. Saleem Razack, whom will be a great leader for faculty, staff and students to work with. Dr. Eileen Denovan Wright will be interim dean over the summer and Dr. Stephen Miller will be overseeing medical education activities.

Kindest regards,

Dr. David Anderson
Dean, Faculty of Medicine