

Associate and Assistant Dean Annual Reports 2024-2025

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Senior Associate Dean, Medical Education - Stephen Miller

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 has been 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. 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 chairs Education Council, the Tri-Provincial Committee, and sits on Faculty Council (ex-officio). My term as Senior Associate Dean, Medical Education began July 15, 2024.

2024/25 Update – top five significant accomplishments

1. Part of the executive team overseeing UGME accreditation: The Faculty has been working continuously since the 2017 CACMS accreditation review to meet all outstanding standards and elements of accreditation. In 2023 the faculty achieved a satisfactory rating on the few outstanding elements from the 2017 review. We just completed our full CACMS UGME program review in February and March of 2025. Our team is awaiting further communication from CACMS on their final report, though they did highlight incredible faculty, staff, and learner engagement, a highly organized approach to accreditation and document sharing, and excellent leadership by Dr. David Anderson and an amazingly organized approach and oversight of our process by Ms. Anne Weeden.
2. A Working Group has been formed, engaging our Evaluation Specialists in the past few months. There is work being led by Dr. Nancy Carter, UGME Evaluation Specialist Lead. The goal of this group is to create an evaluation unit and a more organized systematic approach to program evaluation, data management, and also quality improvement, particularly with respect to work across the educational continuum. Redistributing work and building redundancy in units is a top priority.
3. Oversight and involvement in the ongoing evolution of Admissions and altering the composition of our medical school to better reflect our diverse community. This has included ongoing discussion and attention to equity, diversity and inclusion and attention to anti-ableism. Undergraduate numbers of increasingly diverse learners have increased and are expected to continue to increase. We will continue to make progress in increasing representation from the Mi'kmaq and African Nova Scotia communities. In addition, the rural pathway and widening accessibility streams have had measurable impact in improving diversity. Subcommittees are well established to conduct a more holistic application review and have shown success.
4. Participation in planning of the Cape Breton Medical Campus (CBMC) in partnership with Cape Breton University to create a new medical campus in Sydney set to begin training 30 students in August of 2025.
5. Continued oversight of the Office of Professional Affairs sees its "Confidence Line" becoming the primary reporting mechanism for learning environment concerns for our medical students and residents. This systematic approach to dealing with the learning environment concerns has seen an increased amount of reporting. All data is collected and collated, and concerns are dealt with and closed out, one way or another. The team continues to provide faculty development and support to departments and units across the FoM in partnership with our institutions and leadership.

On the horizon – priority initiatives for 2025/26

1. Follow up as the lead in accreditation issues/deficiencies post accreditation review will be a top priority for this portfolio.
2. Completion of the Evaluation Unit restructuring plan and implementation of a new framework through 2025 and early 2026.
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.
4. Supporting PGME and CPDME through their accreditation cycles in 2025-26 and helping the Master's in Physician Assistant Studies program through their accreditation in 2026-27.
5. Revamping the Tri-Provincial committee and streamlining the process to vet new PG programs and have them approved and certified.
6. Continued support, interactivity, development and attention to anti-oppressive practices across all the programs in our educational continuum.

Associate Dean, Undergraduate Medical Education – Evelyn Sutton

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

2024/25 Update – top five significant accomplishments

1. Accreditation was the major focus this past year, with completion and submission of the required documents to the Committee on Accreditation of Canadian Medical Schools (CACMS) followed by virtual and in-person interviews of the accreditation team from CACMS. The final report will not be available until the fall of this year, but based on preliminary feedback, we expect to receive accreditation, with monitoring of only a few elements.
2. A new position, Assistant Dean, Distributed Education was developed and Dr. Abir Hussein hired. She participated in the site tours of our distributed educational sites. New potential LIC sites and block rotations are on her radar.
3. Project Charter for programmatic assessment, with Dr. Copeland as sponsor is being rolled out.
4. New Assistant Dean, Clerkship, Dr. Joffre Munro was hired
5. Successful CaRMS match; 134 total students, 5 not eligible for Match (IMU and Saudi students). 125/129 matched.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education: Ongoing continuous quality improvement is embedded in our program evaluation process and in student assessments

Research: Ongoing continuous quality improvement in program delivery and assessment.
Ongoing continuous quality improvement in program delivery and assessment. Under Dr. MacLeod's leadership, our students continue to do quantitative, qualitative and quality improvement research.

Publication: Lindsay, V.D., Meaghan, S., Evelyn, Sutton. et al. 'It Takes a Village to Raise a Resident': Lessons Learned on Interprofessional Socialization and Collaborative Practice from Recent Medical Graduates. Med.Sci.Educ. (2024).
<https://doi.org/10.1007/s40670-024-02247-x>

Serving and Engaging Society: our service-learning offerings and participation continue to grow

Valuing People: weekly meetings with UGME coordinators, manager and director occur. There has been improvement in morale and in retention of staff.

Top 10% lecturers and tutors in preclerkship are recognized annually with letters of commendation sent to recipients and to their Department Heads.

Please see reports from Assistant Deans Skilled Clinician, Preclerkship and Clerkship for more details.

On the horizon – priority initiatives for 2025/26

Cape Breton campus is opening this summer with need to develop 30 new LIC positions for 2027
Programmatic assessment charter, report due 2026

Assistant Dean, Admissions – Dr. Andrea Rideout

The Admissions Office is responsible for managing the application and selection process for admission to the Doctor of Medicine program, an undergraduate professional degree at Dalhousie University. Presently, 165 domestic positions are available for entry into Year 1 at 3 campuses (Halifax, NS (95); Sydney, NS (CBMC) (30); Saint John, NB (DMNB) (40). One first year position at the Halifax campus is allocated for a Doctor of Dental Surgery candidate in the combined Doctor of Medicine-Master of Science (Oral Maxillofacial Surgery) 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 reserved for candidates approved through the Department of National Defence's Military Medical Training Program (MMTP). These supernumerary positions 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 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.

2024/25 Update – top five significant accomplishments

1. At the time of writing this report, the Admissions Committee has had 12 meetings since Sep 2024; the Indigenous Admissions Subcommittee had 10 meetings, the Black Learners' Applicant Subcommittee had 11 meetings; the Rural Applicants Subcommittee had 9 meetings. A cultural safety/sensitivity education session was facilitated by Amanda Wilneff, MSW, Education Advisor at Dalhousie's Office for Equity and Inclusion. The Admissions Office provided administrative support for all meetings.
2. The 2024-2025 cycle was the 3rd cycle for the Indigenous Admissions Pathway (IAP), 2nd for the Black Learners Admissions Pathway (BLAP) and 1st cycle for the Rural Applicant Pathway (RAP). 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 this past cycle is provided here:

Pathway	Total Applications Submitted	Recommended for Interview	Recommended for Offer (total)
IAP	44	34 (13 Maritime, 24 OOP)	11 (8 Maritime, 3 OOP) (6 Mi'kmaq)
BLAP	68	64 (37 Maritime, 27 OOP)	29 (26 Maritime, 3 OOP) (4 African Nova Scotian)
RAP	116	64	30

3. The Place of Residence definition was revised and approved by Admissions Committee and Faculty Council. The revision is intended to increase recruitment of prospective applicants with extended lived experience in and engagement with Maritime communities, and thereby increase likelihood of retention to work in Maritime communities.
4. Information and documents were collected and submitted in the Data Collection Inventory, as required for CACMS Accreditation. Assistant Dean, Admissions and Director, Admissions participated in the Accreditation virtual site visit on Feb 20 2025.
5. 1224 applications (47% Maritime, 53% Out of Province) were submitted for the 2024-2025 application cycle. 431 applicants (84% Maritime, 16% Out of Province) were interviewed, using MMI virtual synchronous format with the KIRA talent platform. Decision letters were distributed on Mar 28 2025. Dalhousie Medicine Class of 2029 list will be finalized in August 2025.

2024/25 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. Admissions works collaboratively with Office of Community Engagement and Global Health (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.

Valuing People: Nominations were submitted for Faculty of Medicine Leadership awards. Admissions hosted its first planning retreat in July 2024 which gave staff an opportunity to meet offsite, incorporate some team building exercises, and also work together to review our process and plans for the upcoming application cycle.

On the horizon – priority initiatives for 2025/26

1. The inaugural cycle of the Rural Applicant Pathway for the Cape Breton Medical Campus received a surplus of applications specific for the Rural Applicant Pathway. Offers for all 30 positions to CBMC have been distributed and it is expected that all 30 positions will be confirmed filled by August 2025. This response is encouraging for future cycles. Admissions Office has received inquiries about clarifications about the conditions of acceptance, return of service agreement, tuition, and housing. Inquiries regarding the return of service agreement are directed to Physician

Resources, Department of Health and Wellness.

2. The Indigenous Applicants Admissions Pathway and Black Learners Admissions Pathway will continue to be developed and refined by the Indigenous Applicants Pathway Subcommittee, Black Learners Admissions Subcommittee and Admissions Committee.
3. Pending final CACMS Accreditation report, Admissions will plan to respond to any issues and concerns identified during Accreditation.
4. Monitor impact of Place of Residence definition on quantity and composition of applicant and matriculant pools.
5. Senate Learning and Teaching Committee (SLTC) have requested an update on the use of CASPer as an admissions requirement and tool. Presentation to SLTC is scheduled for Jun 4 2025.

Assistant Deans, PreClerkship, Undergraduate Medical Education, (DMNS & DMNB) – Drs. Osama Loubani and Wendy Stewart

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 clinical, lab session, 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 both 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.

2023/24 Update – top five significant accomplishments

1. Complete revision of the procomp curriculum for Med 1. This unit will become a 2 year learning experience with 8 themes that build in complexity over the two years. The review of med 1 was completed and the plans for Med 2 are now underway.
2. In preparation for the launch of the CBMC, the assistant dean of preclerkship at the new campus has been engaged in all of the processes involved in overseeing the first two years of the curriculum. Any resource concerns have been identified and links made with the appropriate stakeholders.
3. Based on feedback from students, changes have been made to the CBL curriculum. Cases have been edited to provide students with clinical reasoning strategies. Multiple cases have been edited to be a hybrid case-based and problem-based learning experience. With these cases students have the opportunity to apply their clinical reasoning skills rather than simply recall material they may not fully understand.
4. Regular interactions with students to provide closed loop communication. There are regular assistant dean check-ins that are virtual at the request of the students and are not recorded. This provides opportunities to bring forward concerns, ask questions and provide education. There are also monthly medical education meetings led by students – the assistant deans participate in this. Students also contact the assistant deans directly as needed.
5. In collaboration with the curricular leads for Indigenous and Black Health, integration of objectives and plans for a longitudinal theme for both in the curriculum. This is to ensure the content remains a part of the curriculum even if the cases change.

2024/25 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 will be a two-year curriculum with 8 themes that evolve in complexity over the 2 years. Phase 1 is completed for Med 1, with the objectives edited and the overarching themes identified. Work is now in process for Med 2. Eventually the sequencing of the content will be altered completed 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. 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.
- Plans are in process for an AI curriculum that is integrated in professional competencies and throughout the preclerkship curriculum.

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.

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.
- Significant work is 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.

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 two weeks with the curriculum manager to ensure we are on top of any curriculum concerns.

On the horizon – priority initiatives for 2025/26

1. Further 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. Complete the review and implementation of the Med 2 procomp curriculum. Once feedback is obtained, make further revisions in terms of the content and sequencing.
5. Integrate AI into the professional competencies unit and examine ways to weave it throughout the other units.
6. Continue to develop strategies to engage with students, coordinators and managers to ensure a smooth delivery of the curricular content, particularly with the new campus starting in August in Cape Breton.

Assistant Deans, Clerkship, Undergraduate Medical Education, (DMNS & DMNB) – Drs. Joff Munro and Dan Smyth

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

The Med 3 year encompasses clinical experiences delivered via longitudinal integrated clerkship (LIC) and block. The focus is on an introduction to clinical exposure in various inpatient, outpatient, tertiary and non-tertiary settings. We liaise regularly with unit heads in family medicine, psychiatry, surgery, emergency medicine, obstetrics and gynecology, pediatrics, and internal medicine, and chair monthly clerkship and LIC committees where issues related to clinical programming are discussed. 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.

The Med 4 year is primarily composed of clinical experience elective time and students have specified electives 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.

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.

2023/24 Update – top five significant accomplishments:

1. Preparation for undergraduate accreditation and participation in accreditor site visits. Significant accomplishments prior to accreditation included getting procedure and clinical encounter logs to 100% completion (noted by accreditors) and significantly improving both the timeliness and content of learner feedback/ITER completion.
2. Finalization of EPA framework and approval at Clerkship, CASP, and UMECC committees in preparation for roll out in 2025/2026 academic cycle.
3. Assistance will roll out of MPAS program and integration of clinical learners starting January 2025. Significant focus on learning environment with clerkship directors, capacity in the learning environment.
4. Continued work towards curriculum updating with plan for pilot content as early as fall 2025. Renewed focus post accreditation on generating engaging and interactive content for distributed sites with better alignment to curriculum objectives.
5. Successful scheduling and completion of electives for med 4 students locally and nationally, including review of all elective proposals and objectives, learner/faculty feedback. Advocacy for the process improvements necessary at AFMC to facilitate equitable/easy scheduling of electives for Med 4 and Med 5 students. Trouble shooting of multiple critical events which occurred and created significant stress for both faculty and students.

2024/25 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. EPA Framework roll out/implementation with the required faculty development.

Research: Ongoing continuous quality improvement and monitoring of educational outcomes through assessment as a surrogate of successful curriculum delivery, and feedback from students and faculty.

Serving & Engaging Society: Working with the Program and Faculty Evaluation Committee to review evaluations and

ensure the clerkship education and clinical experiences being provided are meeting the needs of the students to achieve objectives necessary to graduate competent medical doctors who will serve society.

Valuing People: LIC site visits in NS this spring/summer and NB during fall leadership tour. Listen to faculty, LIC directors, and clerkship directors around areas of concern and pressure and respond in a timely manner to help provide paths to solutions. Regular faculty development addressing needs of faculty both in central and distributed sites, including spring/fall clerkship retreats, second annual LIC retreat June 2025.

On the horizon – priority initiatives for 2025/26:

Implementation and monitoring of EPA (entrustable professional activities) Framework in Med 3 clerkship to assess clinical skills and competencies through direct observation during clerkship. This is an AFMC national directive. These will replace previous mini-CEX assessments.

Clinical Capacity: Exploration of distributed medical education sites that may provide clinical clerkship experiences so as to prepare for the increase in Med 3 clerkship students planned for the 2027/28 academic year from the new Cape Breton Medical Campus. Working with Dr. Hussein (Assistant Dean of Distributed Medical Education). Explore clinical capacity with current clerkship directors and develop working groups to address some of the perceived challenges.

Review of the clerkship objectives and further align current educational content and formal lectures to these objectives. Develop 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.

Assistant Dean, Clerkship, Skilled Clinician and Interprofessional Education – Dr. Anuradha Mishra

The skilled clinician and IPE unit underwent some HR changes, with Dr. Todd Lambert coming on as DMNB Skilled Clinician Director and Erica Meehan as the DMNS Skilled Clinician Coordinator (covering a parental leave). There is a new CBMC Skilled Clinician Director that has been hired and started in Spring 2025. There has been good communication across sites to ensure comparability of the curriculum delivered. The Procedural skills, OSCE, IPE and US working groups have also been active to continue to make curricular changes in the Skilled Clinician Unit.

2023/24 Update – top five significant accomplishments

1. The new 360 Feedback tool for Skilled Clinician Unit
2. Successful split of the Saturday OSCE to a two day model, while maintaining exam integrity and comparability of experiences
3. Supporting the build and development of a new First Year IPE Experience that is interactive and engaging for students.
4. An update and refresh to the Human Sexuality component in First year- bringing in the voice of the patient
5. Successful pilot of the HOPES Clinical IPE experience – joint vaccine clinic with Nursing and Medical students, and IPE mini course credit was received

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Serving and Engaging Society: There was a new mini course successfully offered and evaluated, around caring for patients with vision loss that had enrolment of 50 students. This was done through collaboration with CNIB and Vision Loss Rehab Canada. There also continues to be work being done to expand the diversity of the volunteer patient program and skilled clinician program. There is work being done to look at increasing exposure to the transgender/non binary community and those with intellectual and developmental disabilities.

Valuing People: There was a new initiative developed and implemented in Skilled Clinician this year, with a 360 feedback tool for the Unit heads. This was designed to increase the quality of the feedback to this unit heads and allow for increased self-reflection and career growth. The volunteer patient program also celebrated 15 years of programming and had a series of visitors come and speak to the volunteers personally, to thank them for their efforts.

Research: Currently, there are two scholarly projects underway including the development of a new longitudinal, procedural skills rubric. This would fit in with the new programmatic assessment model coming to UGME and also provide a tool for students to better monitor their acquisition of procedural skills. There is another project underway which is a needs assessment for airway management curriculum changes. This project has almost neared the data collection phase, and analysis will soon begin.

Education: Work is being done to look at new interprofessional education initiatives. This year an interprofessional IPE OR experience was piloted successful and also a new, IPE experience to bring together MD and PA students together in an interactive, “escape-room.” There are also currently plans to review the skilled clinician assessment plan, and try and streamline the process within the programmatic assessment model.

On the horizon – priority initiatives for 2025/26

Continuing to build on early clinical exposure to a diverse patient population. Working closely with the C3LR to help foster partnerships with community organizations interested to work with the FOM. As part of this work, ensure that there is close connection with Serving and Engaging Society Unit, to ensure compensation fair as per the guidelines.

Skilled clinician assessment and how it fits into the programmatic assessment initiative.

Continuing to foster and build close relationships with the Faculty of Health and Dentistry, to continue to have robust IPE offerings

Help support CBMC as needed as they get their clinical skills/IPE up and running this year.

Postgraduate Medical Education - Drs. Babar Haroon and David Bowes

The Postgraduate Medical Education (PGME) office oversees the operation of all of Dalhousie's 54 accredited College of Family Physicians (CFPC) and Royal College of Physicians and Surgeons of Canada (RCPSC) training programs, as well as several unaccredited fellowship training programs. These programs include 24 accredited direct-entry programs, 28 accredited sub-specialty residency programs, 3 accredited family medicine enhanced skills programs, our newly accredited Areas of Focused Competence (AFC) program in Sleep Medicine, as well as, interventional cardiology, and many unaccredited Dalhousie fellowships. In 2024-2025, 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 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 be 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, is approaching her one-year mark as PGME Director, having started in May 2024, and her steady and thoughtful leadership has been exceptional. She has methodically guided the office through a period of institutional internal review, laying a strong foundation for the upcoming external review in November 2026. After serving in administrative leadership roles in various programs in the Faculty of Medicine for 18 years, her deep experience and expertise have allowed her to transition seamlessly into this critical role, providing outstanding operational support and staff oversight for the PGME enterprise.

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 second 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), the policy committee (Dr. Gerard Corsten) also provided invaluable support to PGME and its learners, faculty and operations

2024/25 Update – top five significant accomplishments

1. Expansion of residency positions in Family Medicine
2. Aligning postgraduate admissions pathways for Indigenous and Black learners with undergraduate admissions pathways
3. Accreditation activities: Completion of internal accreditation reviews for 8 programs by 15 faculty reviewers and 8 resident reviewers. One program was supported with an external surveyor for an internally mandated review. An internal review of PGME was conducted and work is underway to resolve the identified areas for improvement. The Continuous Quality Improvement in Postgraduate Education Committee (CQIPEC) has conducted quality reviews of programs as a follow up to internal reviews, and 34 programs underwent interim reviews this year. Preparations are underway for our College of Family Physicians of Canada/Royal College accreditation site visit in November 2026. An education series has been developed and is in delivery to assist programs with preparation.
4. Based on feedback from Program Directors (PDs) and Program Administrators (PAs), new professional development sessions targeted to program leadership were added to four Postgraduate Medical Education Committee (PMEC) meetings. And PGME staff facilitated three lunch and learn sessions for PDs and PAs focused on PGME-centered topics.

5. For the first time, a collaborative and transparent approach to determining R-1 quotas was undertaken. Information from departments and health authorities was collected, collated, and presented to tri-provincial colleagues in order to obtain funding for 2026 residency seats.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education:

- Continue work on internal reviews of training programs.
- Supported internally mandated external reviews for one training program (Cardiac Surgery) and an internal institution review as part of continuous quality improvement process.
- Professional development series has been offered to program directors and administrators as part of our regular P MEC meetings.
- The PGME Leadership Elective was delivered for 4 weeks in November and December of 2024.
- This program offers an intensive leadership experience tailored to resident physicians. 12 residents participated this year.
- Hosted national PGME Directors and Deans for a pre-conference education day at ICAM in April 2025.
- Added faculty leads to P MEC membership, including the Associate Dean of Serving and Engaging Society, the Senior Associate Dean of the Cape Breton Medical Campus, and the Assistant Dean of Distributed Education.

Research:

- Introduction of an award for Best work in quality improvement, medical education, leadership, or administration
- Annual Research Day being held on June 12, where research awards are awarded, as well as PGME scholarships. The research award categories include:
 - o Best overall award- Co-Sponsors: Dalhousie Medical Alumni Association and Dalhousie Medical Research Foundation
 - o Best work in quality improvement, medical education, leadership, or administration- Sponsor: Dalhousie Medical Alumni Association.
 - o Best work in basic science research- Sponsor: Dalhousie Medical Research Foundation
 - o Best work in clinical research- Sponsor: Dalhousie Medical Research Foundation
 - o Best work by a PGY1-2 resident- Sponsor: Dalhousie Medical Alumni Association

Serving and Engaging Society:

- In early development of a central Indigenous Health elective for residents.
- Developed and rolled out a Program Director Mentorship Program. Volunteers were identified and will be paired with participants on an ad hoc basis.
- A subcommittee completed its work in reviewing residency selection policies and processes and provided recommendations which have now been incorporated in the central selection guidelines.
- 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 2025 R-1 match, the PGME office adjusted the workflow and identification process to better align with UGME admission processes.
- Humanitarian Trainee Pathway Development
 - o Psychiatry Humanitarian Ghana Track
 - o Radiology, RAD-AID, Guyanese Track

Valuing People:

- A working group has been developed on Fatigue Risk Management for residents. A survey has been conducted for programs reviewing what is currently being done in this area. The

intention is that this survey will be used to inform education on mitigating the effects of fatigue on residents and to help with systems change efforts.

- Professional development fund available for PGME office staff.
- In-person PGME office staff break/lunch socials. PGME hosted FoM “Unwind and Cheese” event in November 2024.
- Held second annual strategic/goal setting retreat for PGME office staff in October 2024.
- Held second annual MarDOCS/PGME retreat in February 2025 to discuss common issues.

On the horizon – priority initiatives for 2025/26

- Continue preparation for regularly scheduled accreditation visit by the Royal College and College of Family Physicians in November 2026.
- Introduce anti-racist initiatives and policies to align with the new CanERA institution standards.
- Develop Indigenous resident support structures in postgraduate education.
- Enhanced engagement and outreach with distributed sites with virtual site visits.
- Restructure PGME administrative structures:
 - o Introduce a new role of postgraduate Assistant Director to augment senior level office support.
 - o Introduce a new role of Programs and Policies Manager for additional administrative support.
- Develop a financial literacy resource for postgraduate learners.
- 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 hold dedicated professional development sessions for PG office staff.
- Help all training programs adapt to Royal College’s CBD 2.0 and its associated changes.
- Create a planetary health elective.
- Create an indigenous health elective.

Medical Research Development Office – Dr. Eileen Denovan-Wright

The Medical Research Development Office is led by Eileen Denovan-Wright, Associate Dean of Research, supported by three Assistant Deans: Kirill Rosen (Graduate and Postdoctoral Studies), John Sapp (Clinical Research), and Paul Atkinson (DMNB Research).

The ADR serves on the Senate Subcommittee for Centres and Institutes, Dean's Research Advisory Committee, the Collaborative Health Solutions Committee, Biosafety Committee, Strategic Planning Operations and Oversight Committees, Animal Care in the Faculty of Medicine, leads the research strategy, manages all CFI IOF, CFI JELF, CFI Innovation Funds, RNS matching fund applications and supports all CRC and CERC applications. The ADR works closely with Advancement to support donor recruitments, disbursement of funds and reporting to donors. The ADR co-chairs the Global Engagement Committee and sits on the Research Advisory and the Faculty of Medicine CORES Scientific Advisory Committees.

Kelly Abbott, Acting Senior Operations Manager leads the unit's operations, including finances, human resources, programming, and implementation of the strategic planning. Kelly also oversees all research accounts in MRDO (~145), Human Resources, departmental operations, appoint and renew endowed chairs (~30), and competitive funding programs. Sandy Bennett serves as Administrative Assistant to the unit. Wendy Weckworth, Coordinator of Research Training and Support, leads all studentship and travel award programs, Clinical Investigator Program, Medical Research Graduate Program and the Professional Research and Education Program (PREP). Adriane Maier, Manager of Research Infrastructure and Support, oversees FoM CORES and directly supervises 12 FoM CORES managers and technicians. Lenore Bajona, Coordinator of Research Data and Impact, has been moved to the decanal data team to support data analysis across the faculty. Jocelyne Rankin, Grants Facilitator, reports to MRDO and ORS and supports application development and quality control of applications focussed on increasing Tri-Council funding. The team has redistributed the work of the Coordinators of Faculty Research Programs (two positions), which cannot be filled due to the hiring freeze.

MRDO administers mentoring programs, internal peer reviews of grant proposals, and ensures oversight of research programs. MRDO collaborates closely with various Faculty of Medicine units and departments, including finance, human resources, information technology, and the Advancement team. MRDO prioritizes research support for faculty at Dalhousie University and works collaboratively with the IWK Health Center and Nova Scotia Health to support research in the health authority spaces. The Faculty of Medicine Research Advisory Committee (RAC) and its subcommittees, CORES Scientific Advisory Committee and the Scholarship committee, provide strategic and operational guidance to MRDO. Ad hoc committees, comprising RAC members, offer recommendations for research chair renewals and input on strategic research planning. MRDO works extensively with the research offices at ORS, IWK and NSH to serve researchers at the pre and post award stages.

2023/24 Update – top five significant accomplishments

1. Ensured all federal, provincial and donor funding and university approvals for GMP BioLabs East was secured.
2. Overseen the project for construction, renovation, operation, and Health Canada compliance for GMP BioLabs East.
3. Led a \$10M FoM CORES funding application to the CFI Innovation Fund
4. Expanded Donor funding programs for summer studentships, graduate studentships, postdoctoral fellowships, conference grants, River Philip Transformation and Sustaining excellence program.
5. Organizer and ongoing member of the AFMC ICAM meeting held April 3-6, 2025.
6. Was awarded GSK funding to support a fellow situated in CCfV for Vaccine Equity research.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Equity, Diversity, Inclusion, and Accessibility

Support researchers and research teams in integrating EDIA priorities and perspectives across all research activities.

Maritime Role

Partner with faculties/health authorities for research in health system science.

Area 3: Strengthen Research Translation and Impact

Increased capacity: Supporting knowledge translation plan development and communication of research results and successes.

1. Support activities that use research findings and best evidence to develop and enhance treatments and practices in medicine.
2. Build and strengthen partnerships with basic and clinical departments in Faculty of Medicine, across faculties in Dalhousie, with the Office of Vice President Research and Innovation, with health authorities, and with communities to promote meaningful knowledge exchange.
3. Facilitate the development of thoughtful and inclusive knowledge translation plans for priority research teams and initiatives.
4. Coordinate with ORS to identify high quality knowledge translation, EDIA and other resources that the research community can access.

Education:

Working to support summer research students, graduate students, postdoctoral fellows and Clinical Investigator and Medical Research Graduate Program. Key connections including Wendy Westworth in MRDO and Kirill Rosen.

Valuing People:

Maximizing processes and service to research teams by streamlining and upskilling MRDO staff and working to support departmental administrators and staff as valued contributors to all aspects of research. Key connections include Kelly Abbott who is serving on the working groups for Valuing people led by Linda Penny.

On the horizon – priority initiatives for 2025/26

- Leading Collaborative Health Solutions Innovation project including recruiting a lead for the program, overseeing the Pulse Sandbox and developing an ACOA application to renovate space for a division of FoM CORES for microincubators in the south tower of the LSRI.
- Working with leaders in Rare Disease including Chris McMaster and Luke Chen, the Genomics in Medicine group at IWK, NSH and Dal, Amgen, Alexion, Haligene, and Agada to develop a Dalhousie-led center of Excellence in Rare Disease.
- Stabilize and optimize the operations of MRDO to serve the research community and expand research supports in basic and clinical departments.
- Improve financial oversight and operations of Animal Care in the Faculty of Medicine.
- Continue to mobilize the research strategic plan and report on progress through RAC-approved metrics.
- In collaboration with Cathrine Yuill, build several more cases for support for research priority areas including I3V, Genomics in Medicine, Healthy Aging and Cardiovascular Research. Will need to understand the current goals of the Brain Repair Center to appreciate what the needs and novel direction is before developing any cases for support.

MRDO Clinical Research – Dr. John Sapp

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

2023/24 Update – top five significant accomplishments

1. The Research mentorship colloquium was completed in 2024 with biweekly sessions for early career faculty. Faculty members provided didactic lectures, and interaction with participants. This is part of an ongoing effort to build research community, and link researchers both to mentors and to one another.
2. Appointment of Alzheimer's Chair and the Quigley Chair in Rheumatology
3. MRDO support for adjudication of Prizes/Grants (Chesley grants, FOM Meeting grants, Hatcher Prize, Faculty sustaining excellence grants, Clinician Investigator Program submissions)
4. MRDO support for program reviews: Emergency Medicine, Headship search CH&E
5. MRDO Support for Accreditation review
6. New NSH research leadership engagement with research directors
7. Evaluation of CIP program
8. Informal meetings with multiple faculty members to advise/facilitate research efforts and navigation of the research environment

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

- Ongoing 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 individual researchers looking for advice/support
- Ongoing engagement of early career researchers to improve mentorship and research community
- Joined CIP program committee

On the horizon – priority initiatives for 2025/26

- Reinitiation of research colloquium 2025/2026
- Resurvey of departments and department heads
- Initiation of peer-review network among research directors

Research, Dalhousie Medicine New Brunswick (DMNB) – Dr. Paul Atkinson

The DMNB Research Office which I lead supports and advances the research mission of Dalhousie University's Faculty of Medicine in New Brunswick. Through strategic partnerships with local and provincial stakeholders—including UNB, Horizon Health Network, ResearchNB, and the Institute for Population Health—the office coordinates internal funding, oversees infrastructure development, and promotes faculty engagement across diverse research pillars. The unit also fosters undergraduate and postgraduate research through initiatives like the Research in Medicine (RIM) program and internal grants competitions, and works to integrate research operations with education and healthcare delivery.

2023/24 Update – top five significant accomplishments

2. Successful Implementation of CFI-IF Lab Renovations
 - Major infrastructure upgrades were completed in the DMNB Lab through the Canada Foundation for Innovation's
 - Innovation Fund, significantly improving research capabilities in discovery science and clinical translation.
3. Revamp of DMNB Research Council
 - The Research Council underwent a major restructuring. The previous six-group model was consolidated into three core groups (Discovery Science, Population Health, Clinical/Education/QI), with clearer leadership roles and alignment with strategic priorities. Group Chairs transitioned into Directors to reflect their roles in shaping field-specific strategy.
4. Fall Research Celebration
 - We hosted a highly successful Fall Research Celebration showcasing faculty, student, and resident research across pillars. The event strengthened internal cohesion and public engagement and attracted participation from ResearchNB and Horizon Health.
5. Enhanced Engagement with Strategic Partners
 - Continued service as Director on the Board of ResearchNB, contributing to provincial strategy and funding alignment.
 - Participated on the Advisory Committee of the UNB Institute for Population Health.
 - Strengthened research alignment with Horizon Health Network.
6. Support for Faculty Success in Funding and Publications
 - Faculty achieved notable success across all research domains, with multiple CIHR, NSHRF, and foundation grants awarded.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- Continued mentorship and support for RIM students, including guidance on project design and publication.
- Collaborated with DMNB medical education leadership to enhance the integration of research skills in early UGME.
- Ongoing support for resident research and elective placements.

Research

- Oversaw the DMNB Internal Research Grants Competition, providing seed funding for early-career researchers.
- Developed operational efficiencies in collaboration with the new Research Operations Manager.
- See above

Serving & Engaging Society

- Continued service as Director on the Board of ResearchNB, contributing to provincial research strategy.

- Participated on the Advisory Committee of the UNB Institute for Population Health.
- Strengthened partnerships with Horizon Health Network on population health and translational research.

Valuing People

- Promoted faculty mentorship through workshops and one-on-one coaching.
- Facilitated recognition of research achievements through events and awards.
- Advocated for clear roles in research operations to improve staff well-being and focus.

On the horizon – priority initiatives for 2025/26

Horizon Research Institute (exploratory phase): Scoping a collaborative research institute aligned with Horizon's University Health Network initiative.

Increased Operational Support: Continued refinement of research operations staffing, including clear roles for administrative assistants and the new Research Manager.

Strengthening Philanthropic Partnerships: Working with Dal Advancement, UNB, and Horizon Health to align fundraising and infrastructure priorities for research.

Expansion of Internal Grants: Planning to grow internal competitions and develop bridge and catalyst funding streams.

Graduate Student and Postdoc Support: Strengthening alignment with UNB graduate programs.

Assistant Dean Graduate and Postdoctoral Studies – Dr. Kirill Rosen

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 Students Society Administrative Council (ex officio)
- FoM Graduate Student Research Day Planning Committee (chair)
- PREP Advisory Committee (member)
- AFMC Vice-Deans Graduate Students and Post-Doctoral Scholars Committee (member)

2024/25 Update – top five significant accomplishments

1. Organized FoM Graduate Research Day in June, 2024.
2. Organized the competition for FoM Graduate Studentships in 2025.
3. Organized the competition for Undergraduate Student Research Awards 2025.
4. Represented FoM at the FGS and AFMC meetings focused on graduate students and PDFs, met with FoM Department graduate coordinators and administrators on a regular basis to discuss graduate student-related affairs.
5. Contributed to the activity of the Health Research Advisory Group for International Congress on Academic Medicine in 2024-2025

2024/25 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 and PDF applications.
2. Organize competitions for graduate students and PDFs, e.g., FoM Graduate Studentships, Undergraduate Student Research Awards, 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 on a regular basis to discuss graduate student-related affairs. I am currently working with graduate coordinators on increasing the minimal pay for graduate students in the Faculty starting September, 2025.
6. Interact with FoM Graduate Students Society Administrative Council to discuss the needs of the graduate student community.

On the horizon – priority initiatives for 2025/26

1. Organize FoM Graduate Research Day in June, 2025.

2. Complete the review process for FoM Graduate Studentships competition.
3. Contribute to PREP.
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.

Dalhousie Medicine New Brunswick – Dr. Julie Copeland

Dalhousie Medicine New Brunswick (DMNB) is one of the two campuses of Dalhousie 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 (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. The biomedical research facility has a distributed graduate studies program, led by four basic and health science scientists and two research Chairs. Continuing professional development is provided to all faculty regardless of geography.

2024/25 Update – top five significant accomplishments

1. UGME Accreditation preparation and continuous quality improvement:

The UGME program underwent accreditation during the 2024-25 academic year. This involved a very detailed review of the program delivery across campuses and the student ISA report. DMNB team members were heavily involved in the accreditation preparation, virtual visits in February, and an onsite visit in Saint John in March. We await the final accreditation report from CACMS for the next steps. An incredible thank you to all DMNB faculty and staff who were involved in all things UGME accreditation related over the past couple of years.

2. Program Expansion:

The second cohort of the expanded medical class to 40 students joined us at DMNB in August of 2024. So, this year, there are 40 Med1 and 40 Med2 students on campus. With the expansion in class sizes, space is tight in the DMNB building.

With the expansion to 40 medical students per year, the space in the DMNB building is at maximum capacity. As such, we participated in a space study with UNB to identify any potential opportunities for alternating the current space as well as future expansion needs of the current building if we were to further increase the size of the medical student cohort in the future. Working with the government to identify the next steps in this regard.

July 2024 saw the first cohort of residents begin in our new Family Medicine site in Miramichi, and our new Integrated Family Medicine Emergency Medicine (IFMEM) site in Sussex.

This brought the total number of residency training spots in NB to 33 this year.

- Family Medicine: 20 CMG, 1 IMG, 1 NB-IMG, 1 MOTP
- Integrated Family Medicine Emergency Medicine: 4 CMG
- Internal Medicine: 6 CMG

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

3. Leadership Appointments/Updates, DMNB:

Director of Faculty Development, DMNB: Dr. Wendy Stewart was appointed the Director of Faculty Development for DMNB in August 2024, and we welcome Dr. Stewart to this role. Dr. Lisa Searle completed her time as the inaugural Director of Faculty Development, DMNB and we thank her for all the hard work, dedication, and leadership provided as the inaugural Director.

Director of Skilled Clinician Program, DMNB: Dr. Todd Lambert was appointed the Director of Skilled Clinician in June 2024, and we welcome Dr. Lambert to the leadership team. Dr. Ross Morton retired as the Director of Skilled Clinician in June, and we thank him for all the hard work, dedication, and leadership in the role.

Upper River Valley LIC Director: We welcomed Dr. Arupava Chowdhury as the LIC Director for Upper River Valley. Dr. Rudy Stocck completed his terms as the former URV LIC Director in the summer, and we thank him for all the hard work, dedication, and leadership in the role.

Director of Facilities, DMNB – Ken Lerette retired as the Director of Facilities for DMNB on March 31, 2025. Ken has been an integral part of the DMNB team since before we even opened our doors. His dedication and commitment have been invaluable to our growth over the past 15 years. We all have relied on his expertise, encouragement, and sense of humour. He will certainly be missed here at DMNB, but we wish him all the best in his retirement!

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.

Of note, Dr. Thomas Pulinilkunnil, together with the team, Dalhousie Cardiac Research Excellence Wave (DalCREW), have been awarded a Canadian Foundation for Innovation grant. The funding has facilitated a renovation of existing infrastructure at Dalhousie Medicine New Brunswick (DMNB), as well as the research site at Dalhousie in Halifax to study heart failure – particularly heart failure in women, which is less studied, despite the rising occurrence. These renovations have now been completed and will significantly improve research capabilities in the DMNB biomedical laboratory.

Additionally, in March, 2025, Dr. Pulinilkunnil was awarded a 5 year Canadian Institutes of Health Research Project grant, in the amount of \$918,000, to determine how the Transcription Factor EB (TFEB) affects heart metabolism and function, which will further the exciting cardiovascular research being completed at DMNB.

One of our DMNB graduate students, Kyle Wells, successfully defended his MSc thesis in April and will graduate with his MSc degree this spring.

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

5. Serving and engaging society: Inspiring Future Leaders in Healthcare and Research: A Hands-On High School Visit to DMNB:

High school students from Miramichi, NB, recently visited DMNB for an engaging and immersive experience. The day began with an informative Admissions lecture, featuring insights from Ask a Med Student representatives, a video showcasing research opportunities in New Brunswick, and perspectives from current research students. Students then toured DMNB's facilities, including the student lounge, video-conferencing classrooms, tutorial rooms, clinical teaching space and research labs. The hands-on simulation demonstration was a highlight of the visit, which captivated the students and sparked lively discussions on the drive home. The experience left a lasting impact—one student, inspired by the visit to the research lab, announced their new ambition to become a research scientist. The visit was an overwhelming success, providing students with valuable exposure to the world of medical education and research in their home province.

We look forward to hosting more events with high school students to help expose and educate them on the path to medicine and medical research in their home province.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education:

DMNB continues to be an integral component of the delivery of medical education in the Faculty of Medicine. We experienced an expansion to 40 medical seats last year and had our 2nd cohort of 40 students starting this past August. The expanded Class of 2027 will start clerkship in the Fall and our clerkship sites are preparing for the increased cohort size. Our postgraduate programs also expanded with additional seats in Family Medicine and Integrated Family Medicine

Emergency Medicine and a new postgraduate training site in Miramichi in July 2024.

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 the UGME accreditation process over the past year, playing key roles on the team.

Our Faculty Development team has provided faculty development on learning environment concerns, teaching, resources for learners, and along with the Clerkship leadership hosted the inaugural LICD Retreat last spring and will oversee the agenda for this year's LICD retreat in Halifax in June.

Our Student Affairs team has participated in several presentations and faculty development sessions over the last year. Here are a few that we think are noteworthy: Taking Care of Learners, Taking Care of Yourself and Each Other. Presented by DMNB Student & Resident Affairs staff Dr. Renea Leskie, Director; Rebecca Comeau, Advisor; and Lisa Russell, Coordinator, at the New Brunswick Medical Education Forum; Tips & Tricks from Resident Affairs: Getting Started with your Miramichi Family Medicine Program. Presented by DMNB Student & Resident Affairs staff Dr. Lisa Sutherland, Assistant Dean, and Dr. Renea Leskie, Director, at Family Medicine Teaching Rounds, Miramichi, NB; and Accommodations: Are We Ready? Presented by Dr. Lisa Sutherland, Assistant Dean, Student & Resident Affairs, DMNB and Dr. Carolyn Thompson, Assistant Dean, Resident Affairs DMNS and the annual Dean's Retreat, Halifax, November 2024.

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 November 2024 and was a huge success showcasing faculty, student, and resident research endeavors.

The DMNB Research Council has undergone updating and restructuring and aligning with strategic priorities.

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

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.

Our Student and Resident Affairs team attends 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.

We resumed community engagement with high school students to help educate them on the path to medicine with a medical student representative to share their experience.

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
- Celebrated Administrative Appreciation week
- Restructuring the social committee to a wellness committee 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
- Restructured some of the administrative spaces at DMNB to better utilize space and have some gathering space for all team members to access for lunch and breaks
- We provide a hybrid work model with 1-2 days/week of work from home available

On the horizon – priority initiatives for 2025/26

Accreditation:

- UGME Accreditation follow up work will be guided by the results of the Accreditation report expected later this year.
- PGME Accreditation preparation planning for the PGME Accreditation visit in November 2026

Future Growth Opportunities:

- 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.
- Examine future growth opportunities and succession planning for DMNB Research

Continuing Professional Development and Medical Education – Dr. Lori Connors

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 the first year of her term as Associate Dean on April 1st 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 provide 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

2023/24 Update – top five significant accomplishments

Education - Our Faculty Development team has been busier than ever this past year. Leadership offerings (Academic Leadership course, Leadership PRN Podcast, ELAM, etc), anti-oppressive education, our Professional Development Seminar Series, venturing into Artificial Intelligence education, as well as “staples” that help faculty become effective teachers, continue to be well subscribed. The Dalhousie Medicine Certificate in Clinical Teaching (CCT) is completing its first iteration with the next cohort enrolling for fall of 2024. We continue work to bring the Royal College Diploma in Clinical Education area of focused competency to Dalhousie, as it goes through the administrative process required of new programs at Dal.

Research - Our Medical Education Research team continues to be nationally and internationally recognized with their ground-breaking education, looking at such topics as Physician Grief and Dealing with Death in the undergraduate curriculum. They continue to obtain grant funding and have high output of scholarly activity. Our Med Ed Roundtables is providing essential education for emerging educational researchers in the FoM.

Serving and Engaging Society – The 12th Annual Thomas and Alice Morgans Fear Memorial Conference, co-hosted with the Department of Obstetrics and Gynecology, was a full day event focused on gender, equity and shared care. This provided knowledge and education to our faculty, staff, and learners to inform equitable care to all. It was also open to other health professions and the public.

Valuing our People - We continued to involve our CPDME staff in all that we do, enriching their tenure and the work of faculty and learners. EDI education, involvement in bi-monthly CPDME Operations Committee meetings, social outings, conference attendance, and for some with large portfolios, having annual performance reviews, has been helpful. There continues to be work to do in this area to ensure these important members of our team feel valued in the Faculty of Medicine.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education- Humanities hosted the Creating Spaces Conference in early May of 2024. The TJ Murray Lecture and the Gold Headed Cane Award, among other events, are being combined to create a weekend of special interest. We are evaluating whether this model works to highlight the Humanities to a broader audience.

Our Academic Detailing Service (ADS) Program held their annual conference at Liscombe Lodge in October 2024. By engaging an interprofessional scientific planning committee, this year's event provided enhanced offerings across the IPE landscape. Data will be collected to analyze the impact of this evolving conference.

Our CPDME full unit accreditation through CACME will occur in 2026. In 2024/25 each of our units worked on one or more of the accreditation standards to help prepare for our external accreditation. A full team retreat reviewed the standards at the end of March 2025. The CPDME team has a timeline in place for ongoing work ahead of our accreditation visit.

Work began on our new virtual delivery platform although has not been implemented yet. This will streamline items such as: accreditation of programs; physicians obtaining CME certificates and records of their attendance; providing high quality hybrid programming.

Research- Our Medical Education Research Unit continues to be very productive under the leadership of Anna MacLeod and Sarah Burm. At ICAM 2025 we had several members of our team present workshops (Death and Dying, Grief, Evaluation, for example) and several others present posters and oral abstracts. In addition, our ADS Team, in collaboration with the Drug Evaluation Alliance of Nova Scotia (DEANS), worked on a research project relating to detailing work around alcohol misuse disorder and impact of education on changes to prescribing patterns over time.

Serving and Engaging Society- The 13th Annual Fear Memorial Conference will take place May 15-16, 2025, subtitled Stillness in Chaos-Health Leadership for Complex Times. This year's conference was co-planned by CPDME and Serving and Engaging Society with co-chairs Drs. Gaynor Waston-Creed and Stephen Miller. CPDME works regularly with Serving and Engaging leadership to develop and enrich programs and services.

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, conference attendance, and for some with large portfolios, having annual performance reviews has been helpful. As we manage a reduced budget and reduced travel budget there will continue to be work to do in this area to ensure these important members of our team feel valued in the Faculty of Medicine.

On the horizon – priority initiatives for 2025/26

1. Accreditation- Our units and teams continue to prepare for CACME accreditation with documents due to CACME in the fall and site visit in 2026.
2. Faculty Development- A new faculty development director for the CBMC has been hired. We look forward to working with CB faculty, ensuring our support as the new campus opens.
3. Research- We are working on an Endowed Professorship in Medical Education and hope to get the job posting out in late summer/early fall. Our goal is a start date of July 1, 2026. We are also working on CQI projects within CPD and Faculty Development. Our Medical Education Research Unit will also continue to be very productive in their social sciences research.
4. Virtual platform- We are finalizing details for our new virtual platform, which will allow us to deliver high caliber CPD, CME and fac dev offerings. We hope to have this implemented by early 2026.

Associate Dean, Academic, Basic Science – Dr. Sarah Wells

The Associate Dean Academic (ADA), Basic Sciences position was created and the position started in Feb 2024, filling a gap in the oversight and support of basic science education in the Faculty of Medicine. This 0.6 FTE position provides strategic leadership and support for undergraduate (not including medical), graduate, postdoctoral fellow and professional development academic programs offered by the FoM, including academic program planning / strategic planning, and curriculum development, implementation, evaluation, and continuous improvement. The role also oversees the BSc Med Sci program and provide support to the Assistant Dean and ensures alignment with the FoM's academic program plans and objectives and Dalhousie's governing policies and collective agreements. The ADA Basic Sciences also contributes to the development and promotion of teaching excellence within the FoM, and represents the Faculty at University-led initiatives, including the Dalhousie Associate Dean Academic Committee. The role also serves as the Academic Integrity Officer for all undergraduate (not including medical) and graduate courses in the Faculty of Medicine and participates in the accreditation process and ensures that relevant educational quality indicators are being measured and monitored.

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

2024/25 Update – top five significant accomplishments

ADA joined Dalhousie Strategic Enrollment Management (SEM) team representing Medicine. Brought forward proposals for increased Medical Sciences enrollment—now approved for Fall 2025 and one of the largest program expansions on the campus. Began collection of teaching workload data (for the first time in FoM) – as requested by VP Academic.

Drafting a FoM Holistic Evaluation of Teaching Policy in consultation with the Centre for Learning and Teaching and other ADAs (Science, Health). Advised Promotion and Tenure Committee to ensure holistic evaluation of teaching is embedded in their revised criteria.

Expanded TOR of the Basic Sciences Curriculum committee to include oversight of Basic Sciences graduate courses (on request of FGS Faculty Council and FGS Academic Program Committees) and expanded membership to include undergraduate and graduate student representatives, and representatives from the Dalhousie Libraries and Center for Learning and Teaching. This will give FoM a mechanism for Faculty-level approval for new or modifications to Graduate Courses.

Establishment of the Faculty of Medicine Teaching Community of Practice. Meets semi-regularly to share best practices and provide feedback on teaching materials and policy. Membership includes PhD faculty (including instructors) and Clinical Faculty at all ranks.

Expansion of role to oversee Academic Appeals and Final Grade Reassessment Requests in all non-UGME/PA courses, in partnership with Dalhousie's Registrar's Office and Legal Council Office. There was previously no formal process for this in the FoM. Triggered expansion of the FoM Appeals Committee to include oversight of Basic Science education (as well as the P program). ADA will serve as an Ex Officio non-voting member of the committee.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- overseeing/advising review of all academic programs by Oct 2026 as per Provincial Bilateral Agreement.
- continued representation on campus-wide ADAC and SEM committees, lead brainstorming and development of new academic programs
- representative on Education Council, lead on Education Strategic Plan Focus Area 1: Building on Educational Excellence
- development of FoM course instructor handbook

Research

- -aiding Basic Science programs with graduate program curriculum mapping to capture research learning outcomes

Serving and Engaging Society

- -representative on FoM EDIA Leads

Valuing People

- -drafting of and collection of feedback on FoM holistic evaluation of teaching policy

On the horizon – priority initiatives for 2025/26**Ongoing Policy Alignments:**

- Ensure Holistic Evaluation of Teaching Policy is in place. Receive feedback on current draft (from Department Heads, Education Council, Basic Sciences Curriculum Committee, CPDME) and obtain approval from FoM Faculty Council.
- Ensure Dalhousie Syllabus Policy is in place by FoM. Starting Fall 2025, course syllabi are confirmed to adhere to the syllabus template and a review and repository of course syllabi will occur every term.
- Ensure Dalhousie Grade Distribution Policy in place by FoM. First grade distribution report to be produced by 2024-25 academic year grades.
- Provide feedback and communicate to departments the upcoming Accessibility in Course Design Policy.

Oversee Program Reviews (ALL Dalhousie programs to be reviewed by Oct 2026) and New Program Proposals (e.g. Genetics Technology)

Publish FoM Course Instructor Handbook in place for Sept 2025.

Develop faculty professional development opportunities (teaching, EDIA)- in partnership with CPDME, CLT, Faculty of Open Learning, Associate Dean Academic, Faculty of Science

Medical Sciences Program – Dr. Sarah Wells

The Medical Sciences Program is a BSc degree program offered through the Faculty of Science in partnership with the Faculty of Medicine, and with contributions from the Faculty of Arts and Social Sciences. This 500-student program serves as training for students interested in Medicine, Dentistry, Pharmacy, Nursing, other health professions and graduate studies. The Assistant Dean of Medical Sciences (Sarah Wells) is a 0.4 FTE position that serves as academic and administrative leadership for the Bachelor of Science in Medical Sciences Program, entered its 10th year in September 2024. This role involves the development and maintenance of working relationships with students, faculty, staff, and administrative leaders to facilitate the continued success of the Program. The Assistant Dean chairs the Medical Sciences Program Committee, serves on Education Council for the Faculty of Medicine, the Faculty of Medicine Basic Sciences Curriculum Committee and Faculty of Science Faculty Council, and serves as the course coordinator for the 4th year Capstone course. Since 2020, the Assistant Dean has been leading the development of Inclusive Pathways to the Medical Professions (IPMP) initiative: a cohort program for ANS and Indigenous students in the Medical Sciences Program, that launched in Fall 2022. Work in this area includes oversight of admissions, student supports, and funding. Reporting to the Assistant Dean are the Indigenous Cohort Advisor (Kim Lickers) and the African Nova Scotian Cohort Advisor (Vanessa Jackson). Program Manager Alison Crepinsek oversees day-to-day operation of the program.

2024/25 Update – top five significant accomplishments

1. Hiring of Medical Sciences Program Manager: Alison Crepinsek started in this role in December 2024, taking over the previous position of Medical Sciences Program Coordinator Julie Jordan following her retirement.
2. MPHEC approval of the BSc Medical Sciences (General) 90 Credit Hour Degree: designed as an exit credential for students leaving the Medical Sciences Program after 3 years.
3. Expansion of Medical Sciences Seats: in partnership with Faculties of Science and FASS, and work with the VP Academic's office and Dalhousie's Strategic Enrollment Management (SEM) Team, the program will add 35 seats to its incoming cohort in Fall 2025 (with an additional 4 to IPMP) and an additional 25 seats in Fall 2026.
4. Approval of new Medical Sciences Admissions Criteria: increased science course requirements to now include 2 Grade 12 (or highest available) Science courses—one of which must be Chemistry, with a minimum of 75% in each. Requested by Dalhousie Admissions, we expect this to will prepare students for program, better align students with program expectations, will improve student success, retention, and degree completion. Data will be collected on the latter three outcomes.
5. IPMP Outreach and Recognition: Continuing outreach to Indigenous and African Nova Scotian Communities. Participation in Co-op program and Summer Camps with PLANS and Keknu'tmasiek Welo'ltimk including Mentorship Program. Medical Sciences/KW/Dal Science booth set up at select 2025 Maritime Mawiomi. IPMP team awarded the 2024 Faculty of Medicine Ryan Clow Team Leadership Award.

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

Education

- Trial of longitudinal curriculum for both the 120 credit-hour BSc Medical Sciences degree and 90 credit-hour BSc Medical Sciences degree focusing on professionalism, equity, diversity, inclusivity, and accessibility.
- Completion of Self Study and Curriculum Map for Program Review completion by October 2026.
- Review of Medical Sciences Capstone course with expansion of case studies bank.

Research

- Delivery of Medical Sciences Honours (SCIE4901/4902), Directed Projects (SCIE4101/4102) and Experiential Learning in Medical Sciences (SCIE3100) to over 70 students working across 4 Faculties. Embedding of research skills and information literacy training in the Honours and Medical Sciences Capstone courses.

Serving and Engaging Society

- Ongoing work in Medical Sciences Inclusive Pathways to Medical Professions: increased enrollment; expansion/revision of student supports; dissemination of information at academic conferences. Continued work with Community Partnerships office including Mawiomi outreach and PLANS summer camps.

Valuing People

- Public acknowledgement of support staff at Medical Sciences and IPMP events. Certificates and honoraria co-curricular record recognition for volunteer IPMP tutors. Nomination of Medical Sciences staff for Dalhousie Awards (Rosemary Gill).

On the horizon – priority initiatives for 2025/26

1. Medical Sciences Self Study and Program Review.
2. First IPMP graduates in Spring 2026. Development of IPMP media pitch package for Fall 2025.
3. Fall 2025 launch of first trial modules of the Medical Sciences longitudinal curriculum that will cover professionalism, EDIA and other important medical science-related skills not covered in our core curriculum

Serving and Engaging Society – Dr. Gaynor Watson-Creed

Serving and Engaging Society (SES) is a key stream of the Faculty of Medicine's Strategic Plan, committed to improving health across the Maritimes in ways that extend beyond traditional medical education and research. SES critically re-examines the medical school's relationships with historically marginalized communities and collaborates with government and community partners to foster transformative health system change.

In close partnership with the Office of Community Engagement, SES works internally and externally to shift mindsets, systems, and practices. The program centers trust, equity, and responsiveness as it positions the Faculty of Medicine as a credible health system partner and change agent.

In January 2025, we changed the name of our office to the Office of Community Engagement to better reflect the scope and purpose of our work. This shift underscores our commitment to the strategic priority of Serving and Engaging Society, as it strengthens our focus on building meaningful, reciprocal relationships with communities. The new name also reinforces our expertise in valuing community voices, ensuring that diverse perspectives inform and shape the Faculty's priorities, programs, and policies.

Our Team

- Dr. Gaynor Watson-Creed, Associate Dean, Serving and Engaging Society
- Dr. Shawna O'Hearn, Director, Office of Community Engagement
- Jennifer LeBlanc, Coordinator, Outreach and Francophone Health
- Christine Wall, Manager, Community Engagement
- Elise Sammons, Manager, Global and Planetary Health
- Lisa Nardecchia, Manager, Community Engaged Service Learning
- Jessica Kerr, Administrative Assistant

Black Health

- Dr. Leah Jones, Academic Director, Black Health (on leave April 14, 2025 to May 26, 2026)
- Dr Antonia Sapping, interim Academic Director, Black Health
- Timi Idris, Manager, Promoting Leadership in Health for African Nova Scotians (PLANS)
- Mariam Sulyman, Coordinator, PLANS

Indigenous Health

- Dr. Brent Young, Academic Director, Indigenous Health
- Dr. Shante Blackmore, Academic Director, Indigenous Health
- Faith Julien, Manager, Keknu'tmasiek Ta'n Tel Welo'Itimk (KW)

2023/24 Update – top five significant accomplishments

1. Social Accountability

- [Social Accountability Statement](#) approved in August 2024 and continues to be socialized through the Faculty of Medicine
- 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.
- [Community Engaged Service Learning](#) – 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.

2. 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 continued 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.

3. Indigenous Health (Keknu'tmasiek Ta'n Tel Welo'ltimk - We are Learning how to be Well)

- In 2024, Dalhousie Medical School hosted the Annual General Meeting and Mentorship Gathering of the Indigenous Physicians Association of Canada for the first time, highlighting our growing national role in Indigenous medical education.
- Dr. Shanté Blackmore, from Millbrook First Nation, also joined us in the role of Academic Director, Indigenous Health, helping our program sustain momentum in curriculum development and mentorship.
- In 2024, the Faculty of Medicine welcomed an additional 11 Indigenous students through the Indigenous Admissions Pathway, bringing us to a total of 28 undergraduate MD students regularly involved with our program.
- Community Outreach: Continued expansion of the Doctor for a Day program to multiple sites including Cape Breton
- Program and supports for students include:
 - o Monthly sharing circles led by an elder
 - o Medicine Walks, Elder teachings, and cultural workshops designated for Indigenous learners
 - o Access to scholarships and grants that help to offset the expense of medical school
 - o Students have a new Indigenous Student Lounge
 - o Semi-annual comprehensive assessment of learner needs with the academic directors

4. Promoting Leadership in Health for African Nova Scotians (PLANS)

- 10th Anniversary celebrated with a Gala on October 4, 2024
- 18 students admitted via the Black Learners Admissions Pathway, 1st cohort (UGME class of 2028)
- In April 2025, PLANS received the prestigious AFMC Charles Boelen International Social Accountability Award recognizing their incredible contributions over the last 10 years to health, education and the Black communities in our region
- Co-op Program: The ninth cohort took place from October 2nd to December 18th, 2024 with the tenth cohort starting in March 2025. most students rated their experience as excellent, highlighting their enjoyment of the hands-on activities and the opportunity to connect with peers each week.
- New Program Coordinator started in February 2025 and is leading the management of the Co-op program
- Health Profession Exploration Day held at the Black Cultural Centre for high school students across the province
- Program and supports are well received by students including:
 - o Study group sessions for Med 1 students
 - o Access to scholarships and grants that help to offset the expense of medical school
 - o Semi-annual comprehensive assessment of learner needs with the academic directors
 - o Provide individualized academic advising and mentorship to students in various health-related programs (e.g., Nursing, Public Health, Medicine) to ensure their success and well-being.
 - o Assist students in navigating institutional resources, policies, and procedures to overcome academic or personal challenges.

5. Planetary & Global Health

- The 2025 [Dr. Tarunendu Ghose Visiting Scholar Lecture in Global Health](#) was hosted in April with Dr. Sonja Wicklum. Her lecture, "Planetary Health Education, from Burden to Privilege: Addressing the Greatest Health Threat of Our Time," was a compelling call to action for integrating planetary health into every level of medical education and practice. Dr. Sonja Wicklum is a family physician, educator, and advocate based at the Cumming School of Medicine at the University of Calgary, where she serves as the Director of Planetary Health
- Global Engagement Committee – co-chaired by Drs Babar Haroon and Eileen Denovan-Wright

- **Completion and Approval of International Electives Policy (UGME & PGME):** The Committee reviewed and finalized the International Electives Policy for both Undergraduate Medical Education (UGME) and Postgraduate Medical Education (PGME). The policy was successfully completed and approved by Faculty Council, ensuring a structured framework for international elective opportunities for medical students and residents. This policy will enhance global learning opportunities while maintaining institutional standards for educational quality and safety. Improved clarity and guidelines for students and faculty engaging in international electives.
- **Development of Global Engagement Principles:** The Committee spearheaded the development of [Global Engagement Principles](#) to guide the institution's approach to international partnerships and collaborations. The principles were adopted and are now being used to ensure that global partnerships are aligned with the institution's values and strategic goals. A unified framework to support and manage international collaborations, ensuring ethical and sustainable engagements in global health, research, and education.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

In January 2025, we changed the name of our office to the Office of Community Engagement to better reflect the scope and purpose of our work. This shift underscores our commitment to the strategic priority of Serving and Engaging Society, as it strengthens our focus on building meaningful, reciprocal relationships with communities. The new name also reinforces our expertise in valuing community voices, ensuring that diverse perspectives inform and shape the Faculty's 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 have actively supported 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 have facilitated 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 are 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: Members of our team are involved in institutional committees that promote a positive, inclusive workplace culture. This includes ongoing contributions to EDIA-related governance and staff engagement processes.

On the horizon – priority initiatives for 2025/26

2024-25 was a year of growth and we laid the groundwork for more integrated and strategic initiatives moving forward. A clear need has emerged to deepen our commitment to collaborative work that addresses complex social and health-related challenges, emphasizing innovation that is both inclusive and sustainable.

Looking ahead, the portfolio will embark on multi-faculty work to establish a focus on social innovation and health. This effort aims to bring together diverse academic perspectives to co-create solutions that address systemic inequities and improve population well-being. The first planning meeting for this initiative will take place in June 2025.

In addition, we will implement enhanced evaluation metrics to more rigorously assess the impact of our work—particularly in the areas of social accountability—by engaging with internationally recognized tools such as the Indicators of Social Accountability Tool (ISAT).

We established a Community Engagement Task Force tasked with developing a framework and toolkit for community engagement in 2025-26. This group will guide our efforts to deepen relationships, enhance impact, and ensure accountability with our external partnerships.

Where and when appropriate, we will support the development of CBMC, contributing expertise, collaborative opportunities, and alignment with portfolio priorities.

Student Affairs, DMNS - Dr. Sue Zinck

<https://medicine.dal.ca/departments/core-units/student-affairs.html>

Student Affairs works with medical students to provide confidential personal support and any necessary referrals; career planning; academic assistance and guidance, as well as financial advice. Student Affairs collaborates with the other Assistant and Associate Deans and the teams of units at the FoM on student progress; accreditation preparation; implementing equity, diversity, and inclusion policies; well-being initiatives and other aspects of administration related to student affairs within the FoM.

The academic year 2025-26 will see the departure of Sue Zinck as Assistant Dean for new adventures and the exciting opening of the newest Dalhousie Medicine Campus in Cape Breton (CBMC). Welcome to our newest colleagues in Student Affairs at CBMC: Analee Coakley, Alyssa MacDonald and Eli Quirk.

Student Affairs team members DMNS

Alvaro Tomas, Learner Liaison Officer
Gail Hodder, Learner Engagement Coordinator
Tyler Hall, Director
Rigel Biscione Cruz, Student Advisor
Dr. Sue Zinck, Assistant Dean

Physician Career Advisors

Dr. Hughie Fraser, Gastroenterology, Bridgewater, N.S.
Dr. Jennifer MacDonald, Family Medicine, Sydney, N.S.
Dr. Katie Lines, Psychiatry, Halifax, N.S.

LIC Student Affairs Representatives

Dr. Hughie Fraser, Gastroenterology, Bridgewater, N.S.
Dr. Jennifer MacDonald, Family Medicine, Sydney, N.S.

AFMC National Student Affairs Committee

The Assistant Deans, Student Affairs DMNB and DMNS sit on the committee of Student Affairs deans at the Association of Faculties of Medicine of Canada (AFMC). This committee advises the AFMC Board of national student affairs matters, such as the CaRMS match, and participates in collaborative initiatives between faculties of medicine, in matters such as student wellness, professionalism, and healthy learner environments.

Individual advising meetings 1 April 2024 to 31 March 2025

Class graduation year	Total advising time (hours)	Average time/meeting (minutes)	Range (minutes)	Number of unique students meetings
2023	1.25	37.50	30-45	2
2024	15.83	35.19	10-90	13
2025	102.92	30.12	5-60	71
2026	42.92	28.61	5-60	86
2027	47.50	28.22	5-60	54
2028	88.8	28.05	5-45	102
All years	299.22	29.20	5-90	328 (a 10% increase over 2023-24)

The above table is for academic, elective, or personal advising meetings; these are booked by students with the advisor of their choice: Rigel Biscione-Cruz, Tyler Hall and Sue Zinck, and do not include career advisor sessions. Career advisors are each available for up to 2 hours of advising time per week.

Practice Interviews for CaRMS

Thank you to Gail Hodder for the hours in organising these mock interviews for our class of 2025. Most of the volunteers were Dalhousie Medicine alumni. We had almost 100 step up though only 62 were needed this year.

Total students booked/invited 87

Total interviews booked 136

Total number of possible interview slots 140

Total number of physician, resident, and staff volunteers 62

2024/25 Update – top five significant accomplishments

- UGME Accreditation (DMNB/DMNS SA)
- Maintaining and attaining high student ratings for undergraduate education sessions on well-being across all years (Rigel/Sue/Tyler and DMNB SA).
- Accessibility and Accommodation Working Groups (DMNB and DMNS SA, UGME, SAC)
- Student Accommodations Guide development (DMNB and DMNS SA, UGME, SAC)
- Med 5 policy document (DMNS and DMNB SA)

Education Session Evaluation Ratings

Consistently about 3.8 and most 4.0 and above out of 5.

Accessibility Plans and Accommodations from the Dalhousie Student Accessibility Centre

Accommodation plan:

28 DMNS students had an accommodation plan for the 2022-2023 academic year.

45 DMNS students had an accommodation plan for the 2023-2024 academic year.

58 DMNS students had an accommodation plan for the 2024-2025 academic year

The increase in the number of students who have an accommodation plan on DMNS campus is a 22.4% increase from the previous academic year.

The above data was compiled and shared by Rebecca Koeller, the Director of the Dalhousie SAC and the advisor who works with Faculty of Medicine students.

Accommodations Working Groups

These groups include relevant UGME Deans and staff at both campuses, and the Director of the SAC. Groups 1-3 have met to discuss the process and application of policy and ways to streamline communication and preserve confidentiality while ensuring the accommodations may be tailored and implemented appropriately. Group 3 is co-led by Tyler Hall and Renea Leskie, and Group 2 is led by Sue Zinck.

Accommodations Working Group	Topic
1	Communication/collaboration
2	Technical standards AFMC/Dal
3	Exceptional placement in Clerkship
4	Resources
5	Faculty Development

Participation at events and sessions outside of PIER/O-week

Student Affairs extracurricular information events have had a high number of students in attendance. These include career advising group sessions, information on electives and LIC, and wellbeing topics such as family planning during medical school, and ADHD in medicine, and the Thriving Together Project.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- UGME accreditation preparation and meetings
- Academic Advising and Progress Committee participation
- Career Advising
- Lectures on student services, wellbeing and preparation for clerkship, CaRMS and residency in O-Week; ProComp 1; PIER 1, 2, 3, 4
- SA-UGME standing meetings.
- Practice interviews for CaRMS
- CV review for CaRMS applications
- Personal letter review for CaRMS applications
- CPDME to Clerkship Directors regarding accessibility and accommodations

Research

- Student Affairs satisfaction surveys
- DMNS Student Affairs tracking: total advising hours; by category and class year
- Review education session evaluations ratings and feedback and revise each session.

Serving & Engaging Society

- Wellness advising, counselling and referrals
- Accessibility and Accommodations Working Groups
- EDIA Advisory Meeting (Faculty Wellness, GHO, SA and RA)
- OPA Advisory Committee member (Sue Zinck)
- Doctors NS Professional Support Program Advisory Committee member (Sue Zinck)
- Student Affairs Wellness Liaisons (SAWLs) leadership development (Rigel Biscione Cruz, Tyler Hall, Sue Zinck)
- Co-present on elective planning with the GHO and OPA in PIER 4 (DMNB/DMNS SA)
- Mentorship to the Queer Medical Student Society (Tyler Hall)
- Thriving Together project (Rigel Biscione Cruz and Dr. Sonya Smith)
- Monthly meeting with K-W (Rigel Biscione Cruz and Tyler Hall)
- Representation on CASP (Rigel Biscione Cruz)

Valuing People

- CPD sessions and networking at ICAM for all advising staff, who then shared the pearls of talks among advisors
- Student Affairs Advisory group on upper campus (Sue Zinck)
- Regular weekly feedback and check-ins about needs for each person and project at team meetings
- 'Dance It Out' by Tyler Hall: lunchtime dance classes for faculty and staff of the FoM
- 'Puzzle Challenge' and 'Art Crafts' for students in the SA office
- Unwind and Cheese": a joint initiative with other units that rotate hosting to allow unit staff to get to know one another over light refreshments.
- Milestone celebrations/team building activities (i.e. anniversaries, birthdays, curling, hikes) that we host/plan as a unit

On the horizon – priority initiatives for 2025/26

- Welcome and onboard a new Assistant Dean, Student Affairs at DMNS
- Collaborate and orient the new Student Affairs team at CBMC
- Response to CACMS Accreditation Report
- Ongoing review of feedback and revision of teaching sessions for O-week; Pro Comp 1; PIER 1, 2, 3 and 4.
- Ongoing Accessibility and Accommodation Working Groups

Thank you for reading this report. I welcome any questions or comments.

Office of Resident Affairs DMNS - Dr. Carolyn Thomson

The primary role of the Office of Resident Affairs (RA) DMNS is to provide confidential help, support and advocacy to residents in family medicine and specialty training programs in Nova Scotia and Prince Edward Island. The RA assistant dean and staff work collaboratively with the Office of Student & Resident Affairs at DMNB. The DMNS office is co-located with the Office of Student Affairs and although they share several team members, they operate independently. RA is separate from Postgraduate Medical Education although there is collaboration in a broader sense to ensure resident success and to promote resident well-being. In addition, our scope of work includes the following areas.

Academic Support

Resident Affairs provides support to residents who are struggling academically or those who are undergoing remediation on informal or formal learning plans (IELPs/FELPs). This includes one-on-one advising, coaching and, at the resident's request, collaboration with program directors to ensure the resident has the best chance of success. RA also facilitates the accommodation process for residents experiencing barriers to educational opportunities due to a medical condition, neurodiversity or other protected human rights characteristic(s). The assistant dean RA DMNS sits on the PGME Educational Advisory Board, providing feedback on FELPs to ensure they are designed with each individual's wellness and support needs in mind.

Personal Support

Residency training can be challenging both professionally and personally and Resident Affairs is there to support and advise residents struggling with issues impacting their personal wellbeing including stress, burnout, work life balance, navigating major life changes and coping with adverse patient outcomes. Residents can also access coaching with the Learner Development Officer on professionalism, time management, organizational skills and goal setting. RA can connect residents with resources such as primary health care and counselling. In addition, the ORA can provide assistance and advocacy to residents experiencing learner mistreatment.

Collaborations

Resident Affairs collaborates with a wide array of partners to ensure comprehensive support for residents. This includes working closely with PGME programs and program/site directors to address specific needs and concerns within each program. RA is also an active member of the national AFMC Committee on Resident Affairs, facilitating information exchange and best practices across the country. RA and Maritime Resident Doctors (Mardocs) are key collaborators in advocating for resident well-being and addressing professional and learning environment issues. We provide support to residents experiencing learner mistreatment in conjunction with the Office of Professional Affairs (OPA) and there is RA representation on the OPA Advisory Committee. We collaborate with IHIM/KW and Black Health/PLANS to ensure that Indigenous and Black residents have access to diverse perspectives and resources. The ORA works together with Doctors Nova Scotia and Nova Scotia Health to address wellness, workplace and professional issues impacting residents.

Education and wellness resources

Residents have access to a comprehensive range of education and wellness resources provided by Resident Affairs. These include presentations and workshops held as part of resident academic days, covering various wellness-related topics. RA also participates in PGME courses including Emerging Leaders in Medicine for Residents, Professionalism in Residency and the Resident Leadership elective. The RA website offers a wealth of information about external resources and includes a wellness resource library. Additionally, residents can follow the #Dalmedwell Instagram account for regular updates, tips, and inspiration on all things wellness. RA regularly participates in PGME and International Medical Graduate orientations every June as well as the annual Chief Residents Education Day.

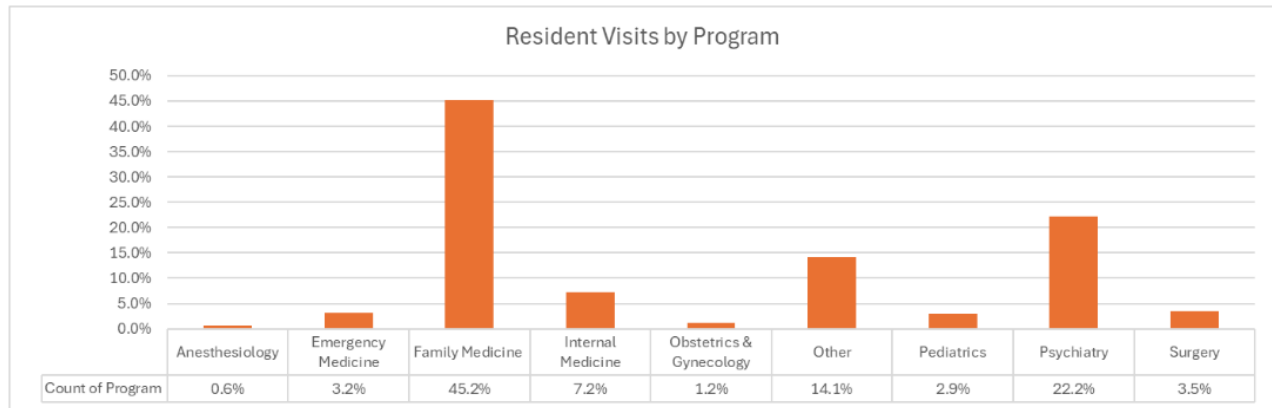
Career Planning

Resident Affairs assists with applications for fellowships and permanent job positions. We offer hands-on assistance, including reviewing letters of intent, updating curriculum vitae and interview preparation. RA offers advocacy and guidance for residents seeking to change their specialty or program location.

2024/25 Update – top five significant accomplishments

1. Direct resident support

There were 187 resident encounters between April 1, 2024 and March 31, 2025 by 84 residents. The breakdown by program is below.



2. Accommodations

With the increasing diversity of individuals choosing medical training, there has been an surge in requests for workplace and academic accommodations. In the 2020/2021 academic year, four residents had accommodations while in the past academic year, accommodations were put in place for twenty-five residents. This includes data from New Brunswick. Resident Affairs has been working diligently to ensure that the accommodation process is streamlined and transparent. Residents can easily access documents on the RA website as well as information about the process and frequently asked questions. The most common reasons for accommodation were neurodiversity, medical illness/disability and family status. The PGME Accommodation Policy was updated in June 2024 and the Accommodation Advisory Committee was operationalized to assist with complex requests.

3. Financial education

Financial education has repeatedly been identified as a need by residents and yet only fifty percent of training programs have it as part of their academic curriculum. In the 2023 Membership Survey by Maritime Resident Doctors, financial education was the top wellness initiative requested by residents. As a result, Resident Affairs has partnered with Mardocs to present virtual financial wellness sessions for residents. The first session, presented by a chartered investment manager from the community, took place in January 2024 and included topics such as budget and cash flow planning, debt management and aligning finances with personal values. The session was well-attended and the recording was made available to all residents through the Mardocs website. The next session entitled “Incorporating your Medical Practice” will take place in May 2025.

4. Research

Resident Affairs is collaborating on a study with the University of Groningen entitled “Transition to Residency: What do Residents find helpful”. The purpose of the study is to research medical education preferences among residents managing transitions from medical school to residency and during training. The goal is to understand the unique preferences of residents. The data collection phase of the study was recently launched. The Fatigue Risk Management Project, in collaboration with residents from the Division of Neurosurgery, has been underway since 2023. It is currently in the evaluations stage and will be wrapping up in the next six to nine months. It is anticipated that learnings from this project will assist in the development of fatigue risk management strategies and guidelines in other residency training programs at Dalhousie.

5. Website and social media refresh

The Resident Affairs website has been given a brand-new look with updated contacts and resources to increase traffic and usability for residents. There has been a surge of activity from residents on Instagram. @Dalmedwell is connected to individual program Instagram accounts which has led to increased resident engagement and representation.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Resident Affairs continues to make important strides across the four core streams of the strategic plan. In education, wellness sessions continue to be offered as part of resident academic days at the request of programs. These sessions cover critical topics such as stress management, preventing burnout, work-life balance, fatigue risk management, managing transitions, and coping with adverse events. Additionally, the assistant deans at DMNS and DMNB have been providing faculty development sessions focused on learner accommodations, further supporting an inclusive and supportive educational environment. In research, RA is actively engaged in several scholarly projects focused on fatigue risk management, transitions during residency training, and supporting neurodiverse learners, with further details outlined elsewhere in this document. In serving and engaging society, there is a noted and welcome increase in diversity among residents, including greater representation from marginalized communities, persons with disabilities, and neurocomplex individuals. Resident Affairs is committed to providing targeted support and resources to help optimize the academic success of all residents, often collaborating with programs such as KW and PLANS. Finally, in valuing our people, RA fosters a working environment where individuals are integral members of a larger team and are supported to work to their full scope and abilities. The team places a strong emphasis on maintaining a psychologically safe workplace, where input and ideas from all members are valued and actively sought.

On the horizon – priority initiatives for 2025/26

New collaborations (CBMC)

Resident Affairs is excited to welcome the new Student and Resident Affairs team from Cape Breton Medical Campus. Lead by assistant dean Dr. Annalee Coakley, they will provide support to family medicine residents at the Sydney and Inverness sites. They will be collaborating with the RA teams in Halifax and Saint John as well as our other stakeholders on a regular basis. Over the next few months, we will provide them with assistance and support as they operationalize the CBMC office.

Research

Members of the Resident Affairs team are working with a global team of medical education partners to write an AMEE Guidebook exploring strategies for supporting neurodivergent learners, addressing their unique needs through equitable and inclusive practices, and offering practical strategies for teaching faculty. AMEE Guides, from the International Association for Healthcare Education, cover a range of topical issues and are designed to provide information, practical advice and support.

An abstract for the Fatigue Risk Management project will be submitted for presentation at the International Conference on Residency Education 2026.

Accommodations

The Offices of Student and Resident Affairs at all three Maritime sites will be working with the Senior Associate Dean to look for opportunities to increase capacity and service levels for all learners around accommodation. In addition to making the accommodation process more learner-centered, this will ensure that there is a smooth transition for students with accommodations who continue their training in residency programs at Dalhousie.

Financial Education

Quarterly financial education sessions will continue into the 2025/2026 academic year with ongoing support from Maritime Resident Doctors. Selection of topics and speakers will be based on resident feedback and evaluations.

Continuous Quality Improvement

Resident Affairs has developed an evaluation plan to look at why we do the work we do and to ensure that RA initiatives are meaningful and impactful for residents, staff and team members. This will help to foster innovation and creativity. One specific goal is to examine the value of resident wellness sessions through resident feedback and focus groups to ensure they are meeting individual needs and fostering learner and/or personal growth.

Student and Resident Affairs DMNB – Dr. Lisa Sutherland

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

Key domains of work with students and residents:

- **Wellness and personal support/provision and coordination of resources:** Personalized supports are tailored for learners adjusting to transitions of training. Services offered include triaging of wellness and health concerns, coordination of resources, coaching on time management, organization, professionalism, communication.
- **Academic support and education:** Learners in academic difficulty are provided confidential service including guidance and advocacy support in the following areas: study skills, remediation, academic accommodations, deferral and supplemental exams, leaves of absence.
- **Career planning and residency matching guidance and support:** Career advising and support for the stages of residency matching begins early in the student years and is added to year over year to include parallel planning, advising on related policy/protocols, application support for the R1 match, and MSM match, as well as support through the residency transfer process.
- **Financial fitness advising:** Curricular content and resource support is developed by the team based on current and local concerns identified by the team as well as via learner feedback. Content is provided to medical students, as well as residents with new sessions in 2025 co-hosted with MarDocs.

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, and New Brunswick Medical Society Wellness. Collaboration with learner-driven organizations including Maritime Resident Doctors and Dalhousie Medical Student Societies is important to keep 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](#)

2024/25 Update – Top Five Significant Accomplishments

1. Student and Resident support:

From May 2, 2024- April 21, 2025, #258 student encounters and #209 resident encounters were logged by the DMNB Student and Resident Affairs team. These figures do not include annual routine med 1 and 2 individual check ins that are heavily subscribed to. Not all site lead encounters with learners are captured in these figures due to a change in record keeping from Fall 2024 onward. Of the individual residents worked with, 38% were residents based outside of New Brunswick. Of the individual students worked with, 1.4% were based at DMNS.

2. UGME Accreditation preparation UGME and Continuous Quality Improvement:

The UGME unit underwent accreditation during the 2024-2025 academic year. For Student Affairs, this involved detailed review of the 2024 ISA, emphasis on career and financial advising domains during the June 2024 Student Affairs retreat, followed by student focus groups on financial considerations. Enhanced offerings in the career and financial domains were offered, and the feedback was further reviewed by the team this year endorsing positive changes. Iterative DCI and MSS documentation preparation was performed by the SA team leads. Team leads participated in interview and site visit preparation with back up support from across the teams. UGME

Accreditation has been an excellent exercise for team building, alignment and role clarity, increasing awareness of operations and documentation of same which will assist with onboarding as required. The process inspired further detailed review of PIER sessions, related feedback, alignment of objectives across the med 1-5 journey.

3. Student and Resident Academic Accommodations:

- a. **Student Affairs:** Working groups had a productive year on student academic accommodations.
 - i. Working group 1 Communication and Operations had several meetings with UGME, SAC, SA to craft a student focused accommodation manual.
 - ii. Working group 2 Technical standards continues its work with UGME, Admissions, SA on adapting the 2024 AFMC position paper on technical standards to Dalhousie.
 - iii. Working group 3 Exceptional placement clerkship with UGME, SAC, SA resulted in all exceptional clerkship placements being reviewed by the SAC for alignment as academic accommodations.
 - iv. Working group 4 Resources continues its work on resource/access/capacity/role assignment across UGME, SAC, SA. Considerable work is pending on resources including as related to built environments, financial support for assistive devices, engagement with RHAs, legal, clerkship and clinical teaching leads.
 - v. Though not designated as a formal working group 5, faculty development on student accommodations was identified as a need in 2023-2024. Presentations by Student and Resident Affairs DMNB, and Resident Affairs DMNS have included sessions via online CPDME, in person at the Dean's Retreat and at ICAM to the PGME Deans and Directors, and workshop/panel participation at the annual Medical Education Retreat for Horizon. Student Affairs DMNS and SAC are presenting on accommodations at the Dalhousie Clerkship retreat in May 2025.
- b. **Resident Affairs:** The Accommodations Advisory Committee was activated this year and provided excellent support for planning complex resident accommodations. Resident Affairs sought collaboration with McMaster, U of Calgary for best practices around standardizing intake documentation, roles and staffing related to management of resident accommodation. We have also standardized our accommodation letter template for documentation and communication. within Dalhousie

4. Residency Match (CaRMS) support:

Considerable support is provided for students across med 1-5 for the R1 residency match. For DMNB graduates and med 5s participating in this year's CaRMS cycle, 40.6% matched to Family Medicine programs, 56% matched to Royal College specialties and 3% remain unmatched after the second iteration. All med 5s were successfully matched. The med 5 Working group finalized their work on policy and received approval at Faculty Council this academic year for application of the policy for the Class of 2026. Information on the policy including criteria to qualify for med 5 has been shared with the class of 2026 during PIER 2 and is available on the UGME website for students, faculty and staff awareness. This information is also embedded in the med 1-2 career advising sessions and is reviewed with individual students during career planning meetings. Support with personal letters, CVs, and interview preparation was provided for NB based Internal Medicine residents with success in their subspecialty matches.

5. Valuing our people:

An emphasis was made to promote team building as the DMNB Student and Resident Affairs team was at full complement for the 2024/25 academic year. Attention was given to ensuring the right person was tasked with the right elements to best harness team members' skill sets while promoting professional development and team building across campuses. Within DMNB, operational reporting dynamics shifted to achieve high value connections and efficient collaborations. Across the campuses further collaborations were initiated to provide Directors and Advisors effective connectivity for planning and innovation as well as standing meetings with coordinators around communication and learner engagement. Succession planning was successful in Miramichi and is underway for the site lead role in Fredericton where a vacancy is imminent due to the pending relocation of our site lead for personal reasons.

2024/25 Update – Work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education:

Student and Resident Affairs provides key education to learners through orientation sessions, individual and group sessions. We provide faculty development education sessions to sites and to various faculty and leadership groups on request as outlined in other sections of the report.

Research:

- Student Affairs tracks metrics for our services, explores access and satisfaction via learner surveys, and reviews our feedback data regularly to undertake quality improvement initiatives.
- Resident Affairs participates in the Fatigue Risk Management Program community of experts to stay informed about related research initiatives including the FRM project underway with DMNS Resident Affairs with Neurosurgery at Dalhousie.

Serving and Engaging:

Student and Resident Affairs collaborates regularly with UGME, PGME, RHAs, SAC, learners, as well as the team at Serving and Engaging & Community Partnerships including with 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). Our Advisor participates in review and evaluation of the Global Health Awards. We collaborate with the Global Health Office on International Elective advising. Engagement with sites is supported with the DMNB leadership tour annually, with NB site lead meetings every 6 weeks and as needed. Learner concerns are received via regular meetings with Student Affairs Wellness Liaisons (SAWLs), MarDocs, and DMSS leaders.

Valuing our people:

- Students: We enjoy our monthly SAWLs meetings to connect with students to share concerns, what is going well, provide guidance across the undergraduate journey. We promote engagement with coffee time, contests and games in our foyer, exam snacks for students, site orientations and related follow ups.
- Residents: We assist MarDocs with resident onboarding/ welcome at resident change over times at SJRH, provide site orientations and follow ups to site groups via our team and via site leads.
- Both the Student and Resident Affairs websites have been enhanced to highlight team members and roles.
- Team building excursions to enjoy some laughs and down time together have been wonderful, both in Saint John and during team meals at our retreats. The extensive collaboration within DMNB and across faculty units has been gratifying and fulfilling this past academic year.

On the Horizon – Priority Initiatives for 2025/26

1. **Accreditations:** UGME Accreditation follow up for Student Affairs, PGME accreditation planning for Resident Affairs
2. **Accommodations:** Further exploration of metrics, communication processes, access to supports/resources required across the student to resident trajectory, exploration of coordination of accommodation related transition to career resources, advocacy and professional development, promotion of Universal Design, Working group 2 technical standards to follow through to completion for undergraduate training. Further work will include exploration of the continuum into PGME around updated essential skills and abilities required for residency training including potentially more detail from programs for assisting students in career planning.
3. **Education:** Domains of interest for future curriculum with learner centered material include financial domain, tolerating uncertainty as related to career advising and residency match preparation for students in the context of the new med 5 policy, Accommodations in medical learners and the paradigm shift underway.
4. **Transition to undergraduate medicine, and to residency:** Learners are increasingly diverse and require intentional support during the undergraduate years and within residency training. Further exploration of

academic support and how Student and Resident Affairs can promote and support learner success in collaboration with Indigenous and Black Pathway teams, UGME, learner leadership is required.

5. **Valuing our people:** Thanks to Dr. Sue Zinck, Dr Evelyn Sutton, Dr. Linda Ugrin, all key collaborators with DMNB Student and Resident Affairs. Participation in succession planning for Student Affairs DMNS, onboarding with Student and Resident Affairs CBMC and a new site lead in Fredericton. Succession planning for Assistant Dean Student and Resident Affairs DMNB for July 2026. Attention will be focused on provision of professional development and team building for the DMNB team members.

Master Physician Assistant Studies – Dr. Michael Clory

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 PACC national examination and be licenced to practice as dependent practitioners collaboratively with physicians across most disciplines of medical practice.

2023/24 Update – top five significant accomplishments

1. The first cohort of students was selected through a competitive admissions process and successfully completed the first semester of the program. This was accomplished despite extremely tight timeline with program approval by MPHEC September 25, 2023, and the first scheduled class January 2, 2024. MPAS faculty and staff created program curriculum and delivered content to the first cohort with 3 months lead time to the first class. All courses and assessment systems were in place to allow the first cohort to successfully complete the Year 1 first semester end of April 2024 and transition to semester 2 which continued until end of August 2024.
2. Faculty recruitment has been very successful. Two experienced Physician Assistants with experience in PA education have assumed the Unit Head roles for the ProComp and Skilled Clinician units. Dr. Deborah Summers has many years experience as a full-time faculty member, including Associate Program Director, with a USA PA program. Erin Sephton was awarded Canadian Association Physician Assistant of the Year for 2024. The other important Unit Head roles are filled by experienced physician educators. Dr. Jock Murray has assumed role of Unit Head Clerkship. He has many years of academic involvement with Faculty of Medicine including 10 years as DFM Enhanced Skills Program Director. Dr. Rebecca Haworth, an early career emergency physician has assumed role of RIM Unit Head. Dr. John Fitz-Clarke also an emergency physician with a PHD in Physiology and Biophysics, an expertise in Hyperbaric and Diving Medicine and many years experience as a Medical Foundations Tutor and lecturer for UGME is heading the Medical Foundations Unit. New faculty Tutors have been recruited to Medical Foundations and Skilled Clinician tutorials including 3 practicing PAs. The Program Manager Olivia Bachman was recruited and played an instrumental role in supporting the program with minimal assistance. Additional support personnel were onboarded through the spring and summer of 2024.
3. A new IPE/Simulation event with UGME year 2 class was well received by students in both programs. This is a natural collaboration given the close clinical working relation of these two disciplines. The event will be expanded in future to include year 1 UGME and year 2 PA students.
4. Program assessment system required development of a bank of questions for the Medical Foundations unit. This was supported by the UGME Assessment Specialist, a contract PA Educational 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
5. Successful community partnership with Dartmouth General Foundation resulted in a highly successful ‘Stethoscope Ceremony’ to welcome the incoming class of MPAS students. The Foundation is very engaged and

excited about the addition PAs to the delivery of health care to Nova Scotians.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

EDUCATION:

MPAS faculty and staff have worked NSH Director of Innovation to facilitate recruitment of clinical preceptors who are associated with practicing PAs to increase capacity for distributed clinical training in such regional areas as Kentville, New Glasgow and Bridgewater. The majority of MPAS students will have rural exposure in their clerkship year. The Valley Regional Hospital is a training site for the surgery block. Hants Community Hospital is a featured location for Hospitalist and Emergency medicine training. Regular monthly meetings have been held providing opportunity to advocate for appropriate teaching space for learners in community hospitals and offices to support new PA and all medical learners.

Input from community-based faculty has been encouraged. Drs. Rob Warren, John Fitz-Clarke and Colin Sutton have been recruited as new contributing faculty to support the MPAS program. Dr. Warren is supporting development of Medical Foundations and Clerkship assessment question bank. Dr. Sutton will lead development of an Applied Pharmacology module anticipating the requirement of the competence for future practicing PAs.

Community practicing PAs are being incorporated into teaching. Brittany Belair is a regular Tutor in Medical Foundations and Skilled Clinician Units. Others, specifically in primary care, will begin to take lead in clinical teaching of MPAS students. Recruitment of new physician faculty to support medical teaching has been successful. Examples include Hospitalist staff at Colchester Regional and Hants Community Hospitals. Several Family Physicians precepting MPAS students are new medical faculty.

MPAS Assistant Dean collaborated with the Nova Scotia College of Physician and Surgeons (CPSNS) to support legislation for CPSNS to regulate PAs in clinical practice. This was effective April 2024. Input was provided in support of CPSNS policy for oversight of PA regulations. The Assistant Dean joined an NSH consultant team to review PA educational programs in the United Kingdom to determine if UK training would be adequate for credentialing and licensing of PAs for practice in Nova Scotia.

A new curriculum and assessment system was developed, with a focus on competency-based assessment, and is in place for clerkship and functioning reasonably well. There is a learning curve with faculty and our program staff are working with faculty to provide support as needed.

Building on the successful IPHE event of 2024, a new IPHE-Simulation event, an adapted escape room activity developed in DMNB, with PA1s and MED2s was held. It was well received by students in both programs. This is a natural collaboration given the close clinical working relation of these two disciplines. The event is anticipated to expand next year to include MED1 and PA2 students.

Activities to support/enhance student support mechanisms to better wellbeing include.

- Successful lobby efforts to banks have resulted in RBC Professional Line of Credit for PA students.
- Integrating PA students into scholarships and bursaries within our program (clerkship stipends and RIM funding), clinical sites (South Shore Hospital) and Faculty of Graduate Studies
- Successful negotiation with CPSNS to allow provisional licences for new grads in NS. Similar work is underway with NB so they can start working immediately after finishing training

RESEARCH:

The Research in Medicine course will help develop research skills for Physician Assistants. Some areas of interest are CQI and Physician Assistant Educational training. A collaboration has been established with AFMC in which the Physician Assistant Academic programs, represented by the Canadian Federation of Physician Assistant Educators will allow promotion of academic standards and research activities from the Physician Assistant program in Canada.

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. Our inaugural class has 3 Black Nova Scotians students. There is continuing development and promotion of our Education Equity admissions pathways

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 are being updated to remove oppressive and other bias/assumptions.

This past March, in conjunction with PLANS (Promoting Leadership in health for African Nova Scotians) Co-op, Dr. Deborah Summers, along with current MPAS students led a presentation to black high school students, to promote interest in a medical sciences career.

VALUING PEOPLE:

Faculty were supported in professional development by providing conference fee support to those attending the 2025 ICAM conference. Four of six senior faculty attended.

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 as well as one staff member who support both the Medicine and MPAS Admissions process.

The Program Manager attended the Physician Assistant Education Association (PAEA) Education Forum in and the Canadian Association of Physician Assistants (CAPA) Annual Conference in the fall of 2024. This has allowed further education and development knowledge and skills to support our PA education program.

We celebrated a National Award to one of our faculty at the 2024 CAPA Conference. Ms. Erin Sephton was awarded Physician Assistant of the Year for her contributions to the profession.

On the horizon – priority initiatives for 2025/26

1. Completion of Applied Pharmacology module with incorporation to the curriculum.
2. Completion of MPAS program Curriculum map.
3. Successful completion of Equal Accreditation Canada process.

Office of Professional Affairs - Dr. Samantha Gray (DMNB) and Dr. Ian Epstein (DMNS)

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. Ian Epstein (DMNS), Samantha Gray (DMNB), and TBA for the Cape Breton Medical School, 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 plays a vital role in monitoring data and communicating the outcomes of all complaints processed through the office.

2023/24 Update – top five significant accomplishments

1. Resolution of over 100 cases

By the close of its second year, OPA successfully addressed and resolved over 100 individual cases. The number of active cases fluctuates daily, with the office now averaging approximately two new cases per week. Each case typically begins with a confidential intake meeting between the learner and either Dr. Epstein or Dr. Gray, which is followed by laying the foundation for a tailored resolution process. Most cases involve multiple follow-up meetings, reflecting the complexity and sensitivity of the issues raised.

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. Development of Network for Colleges of Medicine Learner Mistreatment

In May 2024, the OPA began connecting with similar offices at other universities. This effort led to the formation of the Network for Colleges of Medicine Learner Mistreatment; a pioneering committee that includes representatives from every Canadian medical school. The network convenes approximately every three months to share best practices, explore common challenges, and develop innovative strategies to better support learners across institutions.

A major milestone for this initiative occurred during the ICAM conference, where OPA hosted the network's first in-person meeting. The successful event was met with enthusiastic participation and further fostered strong inter-institutional relationships.

3. Observing changes made because of OPA

OPA collaborates with a diverse group of stakeholders, including learners, faculty, administrative staff, and senior leadership, as part of its comprehensive case resolution process. While the outcomes of many cases are deeply impactful, they are not always visible or shareable due to confidentiality constraints. Nonetheless, we have observed meaningful and measurable improvements directly stemming from learner-initiated concerns.

Several positive changes that can be publicly shared include:

- Creation of additional physical space, such as lockers and more work computers;
- Targeted professional development initiatives designed in response to specific learner feedback, promoting growth in teaching, communication, and leadership;
- Collaborative support for departments to cultivate healthier, more respectful, and learner-centered cultures;
- Critical review and development of institutional processes and policies to ensure they align more closely with learner needs and well-being.

4. Successful accreditation

OPA was pleased to receive positive feedback from the recent accreditation review. The accreditation team recognized and commended the significant strides made by OPA in enhancing the overall learning environment.

In particular, they highlighted the creation of a safe, supportive, and inclusive space where learners feel empowered to voice their concerns without fear of retaliation. This acknowledgment affirms the impact of OPA's ongoing efforts to foster a culture of accountability, transparency, and respect.

5. Communication plans / understanding of OPA spreading

Awareness of OPA continues to grow steadily campuses and with the affiliated hospitals. We have noticed an increase in learners reporting that they were encouraged to connect with our office by friends, colleagues, faculty members, program directors, and other trusted contacts. This organic, word-of-mouth outreach underscores the growing trust in OPA's role as a supportive and responsive resource.

We have delivered over 35 presentations to diverse audiences across the academic and clinical environments. These sessions aim to clarify our role, outline our processes, and invite ongoing dialogue. In addition, we have distributed informational materials, including brochures, branded magnets, and pens, to ensure that learners and faculty are both aware of and able to easily access our services.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

OPA's engagement with Persons of Meaningful Authority (PMAs), such as program directors, supervisors, and department heads, has revealed a pressing need for targeted support. As we bring forward learner concerns, many PMAs are expressing difficulty navigating their roles in the resolution process, particularly when managing sensitive conversations with respondents. To address this, OPA has developed a detailed guide for PMAs, and we are actively seeking to collaborate with the Continuing Professional Development and Medical Education (CDPME) office to co-develop tailored educational sessions. These sessions will focus on equipping PMAs with the skills and frameworks they need to respond to concerns with empathy, professionalism, and procedural clarity. By doing so, we aim to create a more consistent and effective response network that reinforces a culture of accountability and support across all levels of leadership.

Research

OPA continues to enhance its research capacity through tracking and analysis of both qualitative and quantitative data. This data directly informs our operational decisions and helps us identify patterns, trends, and systemic gaps that may contribute to learner mistreatment. By analyzing the contexts and environments where concerns most frequently arise, we can offer targeted recommendations and educational interventions for learners, faculty, and staff. Our data-driven approach allows us not only to address individual issues but also to inform broader institutional strategies that support safer, more respectful, and equitable learning environments.

Serving and Engaging Society

OPA is committed to extending its impact beyond the academic setting by building stronger connections with broader societal initiatives. We are working with the Global Health Office to track the number of learners referred to our office by the directors of Black and Indigenous Health. In addition, we are partnering with affiliated hospitals and campus units to explore and respond to data on microaggressions, contributing to system-wide efforts to foster inclusion and equity. Our ongoing collaboration with the university art gallery to provide a more inclusive physical space remains a meaningful component of this work. Following the removal of the portraits of past deans, we continue to engage in critical conversations about representation, visibility, and the narratives we uphold within institutional spaces.

Valuing people

The OPA office was created to further develop this stream of the Strategic Plan, and it is embedded within all of our interactions. We continue to work towards a learning environment that is free of harassment and mistreatment. The OPA mandate focuses on valuing people, especially during difficult moments. We validate the feelings and concerns learners bring forward to our office. We are sensitive to the feelings that department heads, program directors, etc., could initially experience when they receive contact from OPA, and respectfully navigate through the process with them.

On the horizon – priority initiatives for 2025/26

1. Expanding Faculty Development in Collaboration with CPDME

A clear gap has emerged in the supports available for Persons of Meaningful Authority (PMAs) and faculty in leadership roles who are asked to respond to complex learner concerns. Many find themselves unprepared for the responsibilities that follow once an issue is raised through OPA. To address this, we are initiating a partnership with the CPDME office to co-develop a targeted educational program. This initiative will offer practical guidance on navigating OPA-related processes and resolving issues in a thoughtful, restorative, and learner-centered manner. Beyond procedural training, it will include broader leadership development themes—such as conducting difficult conversations, maintaining psychological safety, and fostering inclusive, supportive learning environments.

2. Strengthening Regional Support Through Leadership Recruitment in Cape Breton

As the Cape Breton campus moves forward with the recruitment of a 0.2 FTE Assistant Dean, OPA is preparing to provide onboarding support and integration guidance. The addition of this regional leadership role offers an opportunity to extend OPA's principles and processes more consistently across distributed sites. We look forward to building a strong partnership with the new dean, ensuring they are equipped to address learner concerns locally, while maintaining alignment with institution-wide standards of accountability and professionalism.

3. Evolving into a Centralized Hub for Learner Mistreatment Data

Conversations are underway to formalize OPA's role as the central repository for all learner mistreatment data, regardless of whether cases are resolved directly through our office or independently by other units. This shift would allow for a more comprehensive and consistent understanding of the learning environment, supporting trend analysis and informing systemic improvements. Centralizing this data would also enhance transparency and coordination, making it possible to track recurring themes, monitor institutional progress, and shape policy more effectively.

Wellness – Dr. Katrina Hurley

Faculty Wellness is supported by an Assistant Dean (0.4 FTE), Program Manager (0.4 FTE) and Administrative Assistant (0.3 FTE). The program supports cultural change by promoting physical, psychological and cultural safety, trust, and a culture of wellness. We provide leadership in the development of wellness initiatives across departments in the Faculty of Medicine.

2024/25 Update – top five significant accomplishments

- Re-convened the Wellness Implementation Group to support department level wellness leadership
- Established research program with teams and partnerships with two RIM students
- Building relationships with key external partners (e.g. CPSNS, NBMS, DocsNS, CMPA)
- Creating links with partners within Faculty of Medicine (e.g. presentations to departments in pathology, radiation oncology and orthopedics)
- Intentionally crafting an approach to wellness that honors the current challenges in healthcare and academia while aligning with strategic priorities

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Excellence in Education: Focus Area 4 – Health and Wellness, 1.8

We are part of the national collaborative on the Okanagan Charter and the newest CAMi advancing physical, psychological and cultural safety within the faculties of medicine.

We are conducting a document analysis of the policies in the Faculty of Medicine aligning with the first strategic direction of the Okanagan Charter Principles to develop and implement health promoting policies.

Valuing People: Focus Area 3 – Foster Wellbeing

Fostering relationships with internal and external partners helps us to understand the available wellness support programs and shape future offerings.

We are supporting wellness offerings in departments through developing leadership in the Wellness Implementation Group.

On the horizon – priority initiatives for 2025/26

- Lead retreat and provide ongoing support for Wellness Implementation Group
- Complete and disseminate document analysis of Faculty of Medicine Policies (Okanagan Charter priority)
- Complete and disseminate document analysis of parenthood related policies that impact faculty
- Engage with PhD scientists to further explore their wellness needs and design a tailored path forward
- Participate in national initiatives to advance the Okanagan Charter and Culture of Academic Medicine Initiative to promote physical, psychological and cultural safety within faculties of medicine
- Engage with the newly established AFMC Faculty Affairs Network
- Integrate wellness into existing structures for accountability (e.g. Department Surveys, Annual Activity Reporting templates, Performance Review Templates)

Distributed Medical Education – Dr. Abir Hussein

The Distributed Medical Education (DME) office oversees the planning, delivery, and development of undergraduate and postgraduate medical education in regional and rural communities across Nova Scotia. Focusing on expanding clinical learning opportunities outside the main urban centres to support equitable access to care, workforce distribution, and high-quality community-based training

2023/24 Update – top five significant accomplishments

- Established the DME office in November 2024 to lead and coordinate distributed education efforts across rural and regional sites.
- Participated in Faculty of Medicine site visits to several communities including Sydney, Inverness, and Amherst to assess teaching capacity and explore new opportunities for learner placements.
- Initiated a collaborative needs assessment for clinical teaching infrastructure, housing, and faculty development in target LIC expansion areas.
- Built early relationships with local health authorities and community stakeholders to align DME efforts with regional healthcare needs.
- Worked closely with UGME and PGME leadership to define short- and long-term goals for expanding distributed education and supporting accreditation readiness at new sites.
- Created and developed the Distributed Medical Education webpage to increase visibility and provide centralized information about DME initiatives: <https://medicine.dal.ca/distributed-medical-education.html>.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education:

- Identify new and potential LIC teaching sites and preceptors in regional and rural communities. Current confirmed sites include Southwest Nova (SWN), Annapolis Valley (AV), Pictou County, Cumberland County, Colchester County, Antigonish, South Shore, and Sydney.
- Assess infrastructure, clinical space, and housing needs to support the establishment of new LIC sites.
- Collaborate with UGME and PGME leadership to align distributed education activities with broader academic and accreditation frameworks.

Serving & Engaging Society:

- Align distributed medical education goals with local and provincial health system needs through ongoing dialogue with health authorities and regional leaders.
- Engage in learner recruitment and retention discussions with NSH recruitment team to identified service gaps in rural communities.
- Support sustainable, community-based education models that benefit both learners and underserved populations.

Valuing People

- Liaise and build connections with local community partners, municipalities, hospital foundations, and community navigators to identify learner needs and support engagement and retention.
- Promote a safe, welcoming, and inclusive learning environment in all distributed sites.
- Support faculty development and engagement at distributed teaching sites, in collaboration with CPDME and local leaders. This includes working with CPD and LIC leaders to create a faculty development curriculum for LIC preceptors as part of their onboarding process.

On the horizon – priority initiatives for 2025/26

- Map and document all CBMC distributed LIC sites, preceptors, and available clinical teaching capacity.
- Identify local academic leadership and administrative support structures at each site to ensure readiness for longterm placements.
- Build a comprehensive database of all clinics and teaching spaces across rural and regional communities to inform strategic planning and resource allocation.
- Assist identified communities in transitioning to host LIC students by addressing space, housing, onboarding, and faculty development needs in preparation for the August 2027 launch.
- Continue strengthening relationships with communities and health system partners to support sustainable distributed education expansion.

Cape Breton Medical Campus – Dr. Jennifer Hall

The Faculty of Medicine is in the process of establishing a new medical education campus—the Cape Breton Medical Campus (CBMC)—in Sydney, Nova Scotia. This campus will join the Faculty’s existing distributed learning sites in Halifax, NS and Saint John, NB. The distributed model was first adopted with the creation of the Saint John campus, in response to a broader shift in medical education across Canada toward regional training. This approach aims to expose students to local healthcare systems and community-based clinical practice, with the understanding that training in a particular region increases the likelihood that learners will remain and practice in that area.

The establishment of CBMC builds on this model, with a targeted emphasis on training future family physicians to help address the critical shortage of primary care providers, particularly in rural and underserved communities. CBMC is set to welcome its inaugural class of 30 medical students in August 2025. Admissions will prioritize applicants through the newly launched CBMC Rural Admissions Pathway (RAP). Applicants from the existing Indigenous Admissions Pathway (IAP) and Black Learners Admissions Pathway (BLAP) will also be given strong consideration, particularly those who express a preference for attending CBMC and are willing to commit to a five-year return-of-service (ROS) agreement in Nova Scotia.

Extensive planning and collaborative work have taken place over the past several years to ensure the successful implementation of this new campus. The key milestones and achievements to date are outlined in the following report.

2023/24 Update – top five significant accomplishments

The campus secured an initial investment to develop a new medical science building located on the campus of Cape Breton University and secured operational funding for the first 2 years.

Extensive outreach and engagement efforts were undertaken with the physician community across the greater Sydney area to build awareness and support for the CBMC. These efforts included a series of information sessions, one-on-one meetings, and community forums designed to share updates on campus development and outline opportunities for clinical teaching, academic leadership, and participation in curriculum delivery. The Faculty emphasized the value of community-based medical education and the vital role local physicians will play in shaping the next generation of healthcare providers. These sessions not only generated strong interest among physicians but also helped foster a sense of ownership and enthusiasm within the local medical community, laying a strong foundation for long-term collaboration and sustainability of the CBMC.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

The CBMC reached a significant regulatory milestone by securing Stage 1 approval from the Maritime Provinces Higher Education Commission (MPHEC), with formal approval granted on September 9, 2024. This approval marks a key step in the academic program development process, affirming the campus’s compliance with regional higher education standards and its readiness to deliver the MED 1 curriculum. The successful submission and approval reflect extensive planning, collaboration, and alignment with Dalhousie University’s academic framework. This achievement positions CBMC to move forward confidently with implementation, ensuring a strong foundation for future program expansions and sustained academic excellence.

The CBMC actively participated in Dalhousie University’s recent accreditation review, demonstrating its readiness to support high-quality medical education. As part of the institutional accreditation process, the CBMC team provided accreditors with all required documentation, data, and operational details relevant to the new campus.

The Medical Science Building, a cornerstone of the new campus, is on track for completion by October 31st, 2025. In preparation for this timeline, CBMC identified and secured adequate contingency space to support the successful delivery of the MED 1 curriculum during the initial semester. These interim facilities have been thoughtfully selected

and equipped to ensure a high-quality learning environment that aligns with the standards and experiences provided at DMNS and DMNB campuses. This proactive planning ensures that students at CBMC will receive a consistent and seamless educational experience from day one, despite the phased facility rollout.

The CBMC successfully recruited a qualified and diverse cohort of faculty to deliver the MED 1 curriculum at the new campus. Recognizing the importance of local engagement, the leadership team conducted multiple outreach sessions throughout the year across the region. These sessions targeted local physicians and academic professionals, highlighting the unique opportunities to contribute to medical education, mentor future healthcare providers, and participate in academic scholarship. As a result, the campus secured a robust roster of teaching faculty with expertise across core disciplines, ensuring students receive a high-quality, well-rounded first-year medical education. This strategic recruitment effort also fostered stronger ties between the medical school and the local healthcare community.

As part of its commitment to building a strong and sustainable model for community-based medical education, CBMC actively engaged with physicians involved in teaching at distributed training sites across the region. Through a series of consultations, the campus sought to better understand the challenges these educators face, including logistical barriers, workload pressures, and infrastructure challenges related to teaching medical learners in clinical settings. These conversations provided valuable insights that helped lay the groundwork for the newly appointed Dalhousie Assistant Dean of Distributed Education to carry forward.

The CBMC successfully collaborated with Nova Scotia Health to support a major renovation initiative at Cape Breton Regional Hospital, resulting in significant upgrades to learning environments for both undergraduate and postgraduate medical education. This collaboration ensured that dedicated, modernized learner spaces—including classrooms, clinical skills labs, and on-call facilities—were integrated into the hospital's redevelopment plans. These improvements not only enhance the training experience for medical learners but also strengthen the academic presence within the hospital, fostering an environment where education and clinical practice are seamlessly integrated. This strategic infrastructure investment supports the long-term sustainability of medical education in the region.

The CBMC successfully recruited a diverse and highly qualified team of professional staff and physician leaders to support the launch and ongoing operations of the new campus. This includes individuals with extensive experience in medical education, healthcare administration, and clinical practice, many of whom bring valuable regional knowledge and a strong commitment to community-based care.

Research

As part of its commitment to integrating research with clinical practice, CBMC has developed a comprehensive plan to hire five physician researchers who will split their time between clinical duties and research activities. This strategic recruitment is aimed at enhancing the campus's research capacity while ensuring that students benefit from exposure to both cutting-edge medical research and real-world clinical practice. These physician researchers will not only contribute to advancing medical knowledge in their respective specialties but also play a pivotal role in shaping the research culture at CBMC. In addition to their clinical and research responsibilities, these individuals will also serve as RIM directors, a key leadership role that involves overseeing the development and delivery of research-integrated medical education.

CBMC collaborated with CBU's Centre of Excellence for Healthy Aging in providing an area of potential research collaboration with The Centre for Mature Women's Health at Mount Sinai. This collaboration has the potential to strengthen the capacity for research at CBMC, providing medical students and residents with valuable opportunities to engage in projects that have both local and global relevance. This will be continued into next year.

Serving & engaging society, and valuing people

CBMC is actively engaging rural communities across Cape Breton and mainland Nova Scotia to help support the introduction of new or enhanced medical education in their communities. Community groups have been briefed on the potential impact of having learners or more learners in their communities.

CBMC has reached out to physicians caring for Indigenous people on Cape Breton to collaborate around education to help support the health of Indigenous communities.

CBMC collaborated with CBU in its Healthcare Awards of Distinction. This award is one way for CBU to participate more fully in developing healthcare solutions for the Province of Nova Scotia and to recognize and thank the many members of our great community who give so freely of themselves to better the lives of others. The purpose of the award is to recognize the commitment and contributions of individuals in the medical community and honour their dedication and achievements in the field of healthcare. The awards were held on June 19, 2024.

On the horizon – priority initiatives for 2025/26

A key priority for CBMC's continued success is the recruitment of a Senior Associate Dean to provide strategic leadership and oversee the ongoing development and growth of the campus. Dr. Jennifer Hall will step down at the end of 2025.

CBMC continues to prioritize sustained engagement with the local physician community to foster strong relationships, secure long-term faculty commitments, and ensure community buy-in. This ongoing outreach is essential not only to meet immediate teaching needs for the MED 1 curriculum but also to build a stable and scalable foundation for future years of the program. By investing in these relationships, CBMC aims to cultivate a sustainable academic culture rooted in community participation and regional excellence in medical education.

A critical aspect of CBMC's sustainability and long-term success is ensuring consistent and adequate operational funding from the provincial government. This funding is essential to support the campus's day-to-day operations, including faculty salaries, student support services, infrastructure maintenance, and the continued development of educational resources.

As part of its commitment to maintaining high educational standards and ensuring the continuous improvement of its programs, CBMC is actively preparing for its upcoming two-year site-specific accreditation visit.

Provide detailed progress reports to the Maritime Provinces Higher Education Commission (MPHEC) over the next three years. These reports will serve as a critical tool for evaluating the campus's alignment with the goals outlined in its initial proposal and will highlight key milestones, achievements, and any adjustments made during the implementation phase.

Operations and Policy – Linda Penny

Operations and Policy provides administrative supports and resources to enable the Faculty of Medicine academic, teaching, and research missions. Our group includes the Chief Operating Officer, Executive Director, Operations; Directors of Finance, Human Resources, MedIT, Communications and staff members that support these functions. The Chief Operating Officer oversees coordination to ensure strategic and administrative integration. Together, this leadership team facilitates a vibrant and action-directed Faculty of Medicine capable of achieving its strategic vision and mandate.

2024/25 Update – top five significant accomplishments

- Supported and, in several cases, led the negotiation and development of a new Clinical/Academic Funding Plan for the Faculty of Medicine, securing essential financial support for clinical education, research, and faculty operations.
- Provided strong operational and administrative support for the Cape Breton Medical Campus (CBMC), including budget development for educational units, technology planning, and communications.
- Finalized internal processes for managing the University hiring freeze within the Faculty of Medicine, ensuring alignment with institutional policies and maintaining critical workforce continuity.
- Streamlined the Faculty's budgeting and reporting systems: created automated reports, consolidated financial files, and standardized budget templates, resulting in improved transparency and efficiency.
- Oversaw the expansion of digital infrastructure across MedIT and faculty services, including improved LMS platforms, the creation of asynchronous teaching content, and the installation of Microsoft Teams Room systems to support hybrid learning across campuses.

2024/25 Update – work being done in the four core streams of the strategic plan: education, research, serving & engaging society, and valuing people

Education

- Supported the launch of MPAS and planning for CBMC through administrative leadership and technical infrastructure readiness.
- MedIT played a significant role in enhancing curriculum delivery by producing digital content, redesigning the LMS, and enabling interactive, accessible hybrid learning for all students.
- A new system was developed to support Annual Activity Reporting in basic sciences, enabling efficient data collection and reporting.

Research

- Provided financial planning and strategic reporting to support research operations, including continued alignment with MRDO.
- Partnered with other departments to explore research information management system options for better tracking and evaluation.

Serving and Engaging Society

- MedIT staff now participate in the Faculty's Social Accountability and Anti-Oppression Committees, supporting the Faculty's commitment to EDIA and inclusive education.
- HR supported CBMC by ensuring recruitment and onboarding practices were consistent with Faculty values and local needs.

Valuing People

- Final drafts for Faculty Onboarding and Mentorship Programs were completed and circulated.
- The HR team launched a revised Tenure and Promotion SharePoint site and made significant progress on the review of tenure and promotion criteria for clinical and basic science streams.
- The Finance and HR teams co-led administrative reviews in education and basic science units to identify efficiencies and resource-sharing opportunities.
- The Communications team expanded their oversight of the Faculty of Medicine awards committee, resulting in a significant increase in successful nominations for national and provincial awards competitions.
- Professional development sessions were delivered to enhance staff and faculty engagement, including leadership retreats and presentations on managing workplace challenges.

On the horizon – priority initiatives for 2025/26

- Complete and implement administrative reviews for the Basic Science and Education portfolios.
- Launch the Onboarding and Mentorship Programs for faculty.
- Continue to develop a comprehensive strategy for workforce planning within the constraints of the university hiring freeze.
- Prepare for the successful operational launch of the Cape Breton Medical Campus.
- Expand and modernize reporting and analytics through improved system integration and continued Tableau development.
- Implement a new procurement module and develop a strategic plan for improved funding request management.
- Support curriculum renewal and evaluation strategy implementation, including updated tools for data collection and visualization.