

Department of Family Medicine

# Strategic Plan Progress Report

Year 1 | 2024-2025



**DALHOUSIE**  
UNIVERSITY





# Message from the Department Head



I am proud to share the first annual progress report on our 2024–2029 Strategic Plan. This inaugural report captures the momentum we have built in translating our vision—healthy communities through excellence in distributed academic Family Medicine—into tangible results.

While this is not an all-encompassing reflection of every initiative undertaken across the department, it highlights key steps from the past year that advance our strategic goals shaped through extensive input from learners, faculty, staff and partners.

The momentum is thanks to the continued engagement of our entire department, and the successful results are ours to own, acknowledge and celebrate together.

Over the past year, we have expanded our educational capacity including introducing innovative techniques such as layered-learning, deepened our commitment to reconciliation through the Indigenous Health Conference, advanced our push for equity and support of our staff with the development of a Medical Education Administrative Reform proposal. Our research team continues to thrive, securing more than \$11 million in grants and drawing a diverse crowd at the sold-out Faculty of Medicine Breakthrough Breakfast.

Equally important, we strengthened our internal systems to support people and partnerships across our distributed department, laying the groundwork for future-ready infrastructure, standardized processes balanced with individual input, and AI-enabled tools.

Looking ahead, we will embed Indigenous Health content annually in the Family Medicine Resident Education Symposium, broaden faculty development to equip preceptors for inclusive teaching, and continue expanding research, scholarly activities and innovative initiatives across all our sites.

This report is both a record of progress and an invitation: to see how your work—in the clinic or office—contributes to healthier communities across the Maritimes.

With appreciation and resolve,

**Dr. Kath Stringer**  
Department Head

# DFM by the Numbers

## RESIDENTS

**197 Residents**

Up 28.76% since  
2021-2022

## FACULTY

Over **1100** faculty appointed  
physicians to family medicine

Across the three provinces

## RESEARCH

**\$11,465,389**

in Grants

**49**

Peer Reviewed Journals

**20**

Invited Presentations



# Our Vision

Healthy communities through excellence in distributed Academic Family Medicine.

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# Our Mission

To drive excellence in Family Medicine through socially accountable and connected communities supporting education, research and other scholarly activities.

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# Our Strategic Pillars





# Social Accountability

## GOAL

*Social accountability is embedded throughout the department's activities*

## Integrating Social Accountability in Everything We Do

Objective 1: Lead, model and advocate for social accountability in all that we do

In line with the action to **explore opportunities to integrate social accountability into existing structures (High Level Action 1.1)**, year one saw important steps toward institutionalizing this commitment. The department integrated the Social Accountability (SA) Lead into key governance bodies—including recruitment, finance, and selection committees—to ensure that equity and inclusion perspectives inform critical decisions.

These structural changes create a foundation for embedding social accountability across departmental operations and culture, thereby strengthening our ability to reflect and respond to the needs of the diverse communities we serve.



## LOOKING AHEAD:

- **Committee Development:** While establishing a dedicated Social Accountability Committee remains a longer-term goal due to funding constraints, preliminary planning has begun. Exploring creative models (e.g., phased implementation, integration with existing governance groups, or shared resources with the Faculty of Family Medicine) may help advance this initiative despite current limitations.
- **Institutional Representation:** The SA Lead will continue to elevate departmental priorities through active participation in Faculty of Medicine and EDIA committees, ensuring that the voices and needs of diverse communities remain central to decision-making.
- **Strengthening Partnerships:** Building stronger connections with Maritime community organizations and healthcare partners will be a focus in the coming year, to align departmental activities with community-identified needs.
- **Visibility and Advocacy:** Plans are underway to highlight and profile the social accountability work of family physicians across the Maritimes (e.g., through newsletters, social media, and faculty events). This will showcase local leadership in advocacy and inspire broader participation.
- **Capacity Building:** The department will explore opportunities to engage learners and residents in projects that advance social accountability, helping build future leadership capacity in this area.



# Education

## GOAL

*Innovative and integrated high quality family medicine education responsive to the evolving context of Maritime communities*

## New Solutions to Key Barriers

Objective 1: Create and evaluate innovative and comprehensive curricula that respond to learner and Maritime community needs

To support **Objective 1.3—continuously identify and respond to emerging priorities through curriculum renewal**—the department brought together postgraduate and undergraduate leaders from across the Maritimes to assess our capacity to deliver layered learning across sites. Through this process, key barriers were identified, including limited space, outdated funding models, and preceptor comfort level with supervising multiple learners.

In response, DFM is implementing solutions such as co-precepting models, increased involvement of allied health professionals in teaching, and enhanced faculty development focused on the scheduling and logistics of layered learning. These efforts ensure our curriculum remains adaptive, practical, and aligned with the realities of delivering family medicine education in distributed and evolving contexts— better preparing learners for the complexity of care in Maritime communities.

# Targeted Programming

## Objective 3: Lead, innovate and support faculty development

To advance **Objective 3.1 Develop, implement, and evaluate high quality faculty development opportunities based on faculty, preceptor, and Maritime community needs**—Faculty Development delivered targeted programming to equip preceptors for inclusive teaching across the department.

A central initiative was the Indigenous Health Conference—Ekina'masulti'k aqq Nepilsulti'k—held at Digby Pines. The event brought distributed faculty together and deepened participants' understanding of Etuaptmu'k (Two-Eyed Seeing), colonial impacts on health and nutrition, and the responsibilities of medical educators in responding to the Truth and Reconciliation Calls to Action.

Additional faculty development held throughout the year focused on bias awareness, cultural humility, and strategies for addressing microaggressions.

### LOOKING AHEAD:

- **Layered Learning:** An updated layered learning session—focused on scheduling and practical implementation—will roll out in the coming months and into 2026 to further increase preceptor readiness and unlock capacity across sites.
- **Broadening Access:** Faculty Development will broaden access to foundational teaching tools and explore flexible delivery formats to better support new and time-constrained preceptors.
- **Revised Curriculum:** At the PG curriculum level, the revised Residents as Professional Peer Educators' curriculum will provide clear guidance on adult learning theory, feedback, technical skill instruction, and fostering healthy learning environments—including psychological safety, supervision, and fatigue risk management.
- **Indigenous Health Education:** Indigenous Health will be embedded annually in the Resident Education Symposium, and a new procedure skills curriculum—with a manual, checklists, and simulation tools—is in development, advancing responsive, culturally safe, and future-ready training.





# Research & Other Scholarly Activities

## GOAL

*Primary care education, practice, and policy are advanced through family medicine research and other scholarly activities*

## Primary Care Research Day

Objective 1: Lead original research and other scholarly activities that advance knowledge to support and strengthen primary care, the discipline of family medicine and family medicine education

As part of our high-level action to **Build and strengthen partnerships and collaborations for Research and Other Scholarly Activities (R&OSA) throughout the Maritimes (High Level Action 1.4)**, Primary Care Research Day was held on Oct 9, 2024.

This interactive annual event fosters discussion and collaboration surrounding primary care research. The event was an immersive day of knowledge exchange, bringing together 89 participants from across the Maritimes, including patient and caregiver partners, learners, faculty, clinicians, researchers, and policy-makers. Sessions included round table discussions, panel discussions, and poster and oral presentations.

A pre-conference session called Brewing Ideas was held and designed to provide an opportunity for knowledge sharing, capacity building and networking.

### PANEL DISCUSSIONS INCLUDED:

- 1) The relationship between communities and primary care (including strategies and best practices for fostering strong connections)
- 2) The role and influence of technology in primary care
- 3) Building teams and collaboration, along with exploring new and expanding roles in primary care

Concurrent oral presentation sessions featured innovative research and insights from researchers, health care providers, learners, and policy makers.

## Breakthrough Breakfast

**Objective 1:** Lead original research and other scholarly activities that advance knowledge to support and strengthen primary care, the discipline of family medicine and family medicine education

At the sold-out Faculty of Medicine's Breakthrough Breakfast on January 25, 2025, Family Medicine research took centre stage, showcasing how our department is tackling the biggest issues in family medicine and primary care—access, AI integration, and system redesign; **building understanding of R&OSA and their value (High Level Action 1.1).**

Faculty explored topics like redesigning care for equity, challenging assumptions around doctor supply, using EMR data and AI to reduce burnout and improve prescribing, and balancing equity and innovation in obesity treatment. These conversations didn't just stay theoretical—they spotlighted real-world solutions and sparked critical questions about leadership, team-based care, and the infrastructure needed for interprofessional collaboration.



## Broadening the Scope of Scholarship

Objective 2: Foster a culture within the department to support research and other scholarly activities

To **promote existing and potential connections between research and other scholarly activities and other DFM work (High-Level Action 2.2)**, the Director of Research & Scholarship met Site Directors in New Brunswick, Nova Scotia and PEI, revealing quality improvement (QI) as a shared priority.

To turn interest into action, the team produced a plain-language Scholarship Brochure mapping the four pillars of scholarship: Discovery, Integration, Application and Teaching—with examples under each pillar.

### LOOKING AHEAD:

- **Increasing Visibility:** Research and scholarship will continue to increase its visibility within the department as part of our objective to promote existing and potential connections between research and other scholarly activities and other DFM work.
- **Encouraging and Facilitating Participation:** The Director of Research and Scholarship now sits on the Residency Program Committee (RPC), and regular communication with faculty will continue through newsletter updates and participation in site visits and meetings with site directors.
- **Promoting Opportunities:** Promoting the PGY3 research opportunity to PGY1s
- **New Awards:** Developing new Research & Scholarship Awards for faculty.
- **Lowering Barriers to R&OSA:** With the addition of a Scholarship Capacity Development Associate in the department, the hope is that research and other scholarly activities will be increasingly attractive to and doable by faculty and residents.

## Leveraging AI to Reduce Burnout

We are expanding the **AI Scribe Pilot** into 2026. The voice-activated documentation assistant is now embedded directly in Med Access and available—at no cost—to Halifax based DFM Clinicians who opt in.

AI scribes, which could **cut charting time by up to 50%**, could reduce burnout and allow physicians to focus more on patient care.





## Our People and Partners

### GOAL

*A distributed Maritime department of people and partners working together to achieve shared goals*

## Strengthening Internal Systems and Structures

**Objective 1:** Foster a positive and inclusive working environment that promotes active participation, leadership, and wellbeing throughout the department

To advance **High-Level Action 1.1—establish and model diverse, positive, and supportive work and learning environments**—the department prioritized strengthening internal systems and building future-ready infrastructure. In 2024–25, we undertook extensive documentation and standardization to support consistency and knowledge sharing across our distributed team. This included SOPs for key administrative processes (e.g., CaRMS, UG curriculum, preceptor payments), site administrator calendars and job descriptions, and award procedures built in SharePoint.

The DFM Clinic Business Office also continued updating SOPs for NSH staff, while a new AFP faculty orientation program supported early engagement. In partnership with the Faculty of Medicine and NSH, we advanced the Medical Education Administrative Proposal, recommending role standardization and a single-employer model to improve clarity and reduce duplication. Together, these initiatives build transparency, support wellbeing, and lay the groundwork for AI-supported systems.

# Advancing Equity Through System-Level Partnerships

Objective 2: Strengthen and expand partnerships supportive of distributed academic family medicine

To fulfill **High-Level Action 2.1—develop strong collaborative relationships with our partners**—the department led system-wide equity initiatives grounded in the Medical Education Administrative Proposal. The proposal addresses wage compression and administrative disparities across NS sites by recommending role standardization and Dalhousie as the preferred employer—promoting fairness, consistency, and retention. It also will improve governance, financial accountability, and alignment with provincial partners.

## LOOKING AHEAD

- **Internal Infrastructure:** Enhancing internal infrastructure by finalizing and sharing key documentation and orientation materials for administrative staff and faculty, with a focus on clarity, consistency, and accessibility.
- **Equitable Role Standardization:** Pending approval of the Medical Education Administrative Proposal, implementation planning will begin to support equitable role standardization and shared expectations across NS sites.
- **Collaboration and Engagement:** To reinforce collaboration, DFM will prioritize structured in-person meetings and cross-site engagement to build stronger relationships across our distributed network.
- **Long Term Commitment:** While approval timelines and policy constraints remain a challenge, our efforts reflect a long-term commitment to a more equitable, aligned, and future-ready department.