MAX RADY COLLEGE OF MEDICINE

DEPARTMENT OF FAMILY MEDICINE STRATEGIC PLAN

2021 - 2024

DEPARTMENT HEAD MESSAGE

TREATY TERRITORIES ACKNOWLEDGEMENT

The University of Manitoba campuses are located on original lands of Anishinaabeg, Cree, Oji-Cree, Dakota and Dene peoples, and on the homeland of the Métis Nation.

We respect the Treaties that were made on these territories, we acknowledge the harms and mistakes of the past, and we dedicate ourselves to move forward in partnership with Indigenous communities in a spirit of reconciliation and collaboration.

OVERVIEW OF THE DEPARTMENT

Accredited by the College of Family Physicians of Canada, the Department of Family Medicine provides a comprehensive training program that strives to teach whole-person medicine using a collaborative and interprofessional model. The goal of our residency program is to train learners to be able to provide comprehensive, high quality, continuous care in urban, rural, or remote settings. During clerkship, learners are distributed in over 20 communities throughout Manitoba.

We continue to grow and evolve our network of residency training sites, ensuring that our department has a presence in each of our regional health authorities and now includes partnerships in Nunavut and the Northwest Territories. Our sites model comprehensive patient care and provide quality learning experiences to Master of Physician Assistant students, undergraduate medical students, family medicine residents, as well as to a variety of other health professions.

In July 2019, our first residents began their training in our new Interlake-Eastern training program based in Selkirk and in July 2020, Thompson welcomed its first two residents. In the urban environment, the period was marked by the closing of the Family Medical Centre in St. Boniface after nearly four decades as a family medicine teaching unit and serving thousands of patients. Associated with the closure was the redeployment of staff and resources which allows Access Fort Garry and Access Winnipeg West to join Kildonan Medical Centre and Access River East in a renewed urban teaching network.

In September 2019, we welcomed the Master of Physician Assistants Studies (MPAS) to our department which is Canada's only graduate level physician assistants program. The generalist orientation of MPAS complements our work and will present unique opportunities for us to develop collaborative education models and advance team-based care in our clinical settings.

The Department of Family Medicine also offers a selection of Enhanced Skills programs designed to help develop expertise in family practice anesthesia, cancer care, care of the elderly, emergency medicine, obstetrics and women's health, palliative care, and sports and exercise medicine. The enhanced skills program is open to current second year residents and practicing family physicians.

Our research endeavours continue to expand in the number of projects and collaborations, most notably in the area of QI. The Department of Family Medicine is leading the way by piloting new CFPC curriculum on QI allowing our residents to develop the knowledge and skills that they will need in an evolving clinical context.

The health system and practice environments have undergone, and continues to undergo, significant change. We have had an active role in visioning what our future health system should look like by participating on provincial clinical and preventative services planning activities. Our family medicine practices have quickly responded to the COVID19 pandemic, including pivoting to virtual care.

As we embark on our 50th anniversary in 2023, there is much excellence and innovation to celebrate and build upon. Our residency program has been positively influencing the health of individuals, families and communities across Manitoba. Through clinical work, teaching and innovative research, family medicine is making a difference.

PLANNING CONTEXT

The directions within our new strategic plan were conceived through an inclusive, open, and broad consultation and planning process that took place between November 2020 to May 2021. As a result of the pandemic, all stakeholder consultations and planning activities were completed virtually.

Participation and engagement levels were excellent with over 200 individuals openly and honestly providing feedback through structured dialogues including stakeholder interviews and focus groups as well as staff/ faculty and learner surveys. With over 50 hours of interviews and planning activities taking place and 1600 plus comments logged, stakeholders, both internal and external to the department, demonstrated their commitment to the process and to the outcomes, and their contributions have helped us shape our strategies moving forward.

The department's Strategic Planning Committee was provided the compiled stakeholder engagement and environmental scan results. Over a series of six workshops between February and May 2021, the committee actively set out to develop a 3 year strategic plan for the department.

Our new Strategic Plan, with a refreshed Vision, Mission and Values, will build upon the department's successes in training the next generation of health professionals and developing focused areas of research, quality and scholarly activity to deepen and extend our leadership role in shaping Manitoba's primary healthcare system and advancing our footprint and the discipline of Family Medicine.

As a provincial department stretched across the diverse and vast landscape of Manitoba, the importance of working together with a renewed and shared purpose of building authentic relationships with our communities and our partners and harnessing innovation, collaboration, and our collective impact was felt paramount to our path forward.

Affirming our commitment to building respectful relationships and creating pathways to Indigenous health, healing and achievement, we are committed to advancing and addressing the recommendations of the Rady Faculty's Truth and Reconciliation Action Plan and working collaboratively with Omgomiizin and our Indigenous communities and partners. A number of priorities were identified throughout our consultations and the priorities have been woven into the five strategic pillars identified below.

As we embark on our 50th anniversary in 2023, we wanted pay homage to our history while committing to being innovative as we move towards our vision. We have identified five pillars and accompanying strategies that will guide us as we move forward with strategic purpose.

- 1. Advancing Family Medicine
- 2. Inspiring our Learners
- 3. Empowering our Workforce
- 4. Harnessing a Culture of Curiosity
- 5. Building Relationships

VISION

Together with our communities, inspiring learners and transforming care

MISSION

Advancing excellence in patient care through education, scholarship, social responsibility and relationships

VALUES

Our values are more than just words They are statements that were spoken about repeatedly throughout our stakeholder consultations and planning activities. People spoke passionately that our values are key behaviors we need to work and learn by each day to ensure we are working towards the same goals. Every single decision we make needs to be aligned with our values in order to stay true to our vision and mission and shape our culture as we advance family medicine in Manitoba.

Patient Centered - We value each person as a unique individual with a right to be respected, accepted and included. We value the importance of continuity, trust and relationship building as the cornerstones of Family Medicine. Seeing services through the eyes of our communities and patients, we are committed to respond and adapt to the changing needs of our communities in a respective and inclusive way.

Learner Centered - By placing learners at the centre of what we do, we will strive to be a place where students feel accepted, connected and valued.

Health Equity & Advocacy - We are committed to listening to our communities, being transparent in our actions, and advocating for health equity, access and quality patient care.

Collaboration & Teamwork - We take pride and are passionate in what we do. We care about each other. We are clear on our roles and understand how each of us individually and collectively contribute to our vision and mission. Valuing our diversity and seeing collaboration and teamwork as what make us a great place to work and learn.

Culture of Curiosity - We will be proactive and responsive. We are willing to take risks, be innovative in building an ever more vibrant culture of curiosity. Building on our strengths to find new and better ways. Working together as we create new pathways of better care in Manitoba.

Cultural Safety & Humility - We are authentic in our commitment towards equity, inclusion, gender equality, anti-racism and reconciliation. Our success requires honest and continuous dialogue, grounded in respect and a recognition striving to address power imbalances inherent in the health care system and humbly acknowledging oneself as a learner when it comes to understanding another's experience.

STRATEGIC PILLARS

- 1. ADVANCING FAMILY MEDICINE
- 2. INSPIRING OUR EARNERS
- 3. EMPOWERING OUR WORKFORCE
- 4. HARNESSING A CULTURE OF CURIOSITY
- 5. BUILDING RELATIONSHIPS

STRATEGIC PILLARS



ADVANCING FAMILY MEDICINE

STRENGTHS:

Our department has reach throughout the province with learners and staff distributed in over 20 communities throughout Manitoba. We have a strong footprint in the College of Family Physicians of Canada with many faculty members doing excellent work nationally and internationally.

The role of Family Medicine is key to any provincial medical system and is viewed as an expanding resource within the province. We are strong at modelling comprehensive generalist care, comprehensive team-based care and working with our partners to advance initiatives such as primary health care, advanced access and the patient medical home. We help drive efficiencies in the hospital and outpatient systems and are able to shift focus when required to adapt to changing needs, as was evident during COVID-19. The integration of the Master of Physician Assistants Studies (MPAS) program into the department has been an asset and positive addition to the program.

CHALLENGES:

The health system and practice environments have undergone, and continue to undergo, significant change. We have played an active role in visioning what our future health system should look like and are participating on provincial clinical and preventative services planning activities. Our family medicine practices have quickly responded to the COVID19 pandemic, including pivoting to virtual care, which will be a new reality as we move forward.

Scope of practice, credential creep and practice encroachment of other health professions is seen as a threat with a concern that there may be less interest among new graduates wanting to commit to a family practise. There are concerns that the comprehensive nature and generalist focus of family medicine is being lost gradually with more graduates wanting to subspecialize.

OPPORTUNITIES

We are celebrating our 50 year anniversary in 2023. This is time to pause and reflect but also an opportunity to celebrate and recognize the many achievements and successes of our faculty, staff and learners. There is an opportunity to grow professorships, to support scholarships and to launch a fundraising strategy to support projects not covered by baseline grants.

As move forward in our strategic plan, there are many opportunities to advance our work. We need to be proactive and address trends and impacts to care to meet the changing needs of our communities. Partnerships with the health system and our partners will key to support the evolution of family medicine and primary health care in the province. On the radar is the potential of a 3 year family medicine residency program and this will be a priority for us to explore and start planning. We also need to address recruitment and retention concerns and make a concentrated effort to attract and retain a more diverse workforce and student body reflective of our changing demographics promoting family medicine as an appealing career choice.

"Celebrating and advancing Family Medicine in Manitoba to meet the needs of our communities now and in the future"

ADVANCING FAMILY MEDICINE

Strategic Priority # 1 - Advancing Family Medicine to meet the changing needs of our communities

GOALS	OBJECTIVES	SUCCESS MEASURES	
Adapt and evolve Family Medicine to meet the changing needs of our communities	 Support the work of and collaborate with the Manitoba College of Family Physicians to advance Family Medicine in Manitoba. Work with our health system partners to support and advance the Patient Medical Home model. Explore the potential implications and plan for a 3-year Family Medicine residency program. Support the evolution of the MLP-IMG program. Support the evolution of the Master of Physician Assistant program. 	 Joint initiatives with partners are identified and promoted. Core residency sites have action plans to advance the PMH model at the local level. Report on feasibility and potential models for a 3-residency program in place and acted upon. MPA Strategic Resource Plan completed and being acted upon. 	
Attract and retain the workforce needed to meet the changing needs of our communities	 Develop targeted strategies to attract and retain a more diverse student body and workforce that is reflective of our provincial landscape. Promote Family Medicine as an appealing career choice for medical students. Review and strengthen criteria and admissions processes to facilitate entrance of Indigenous learners to the Family Medicine programs. Introduce the concept of "Community-Adaptiveness" in selection processes for Enhanced Skills Programs. Participate and advocate for Family Medicine & MPAS needs and requirements in provincial workforce planning and clinical services plan. 	 Diversity targets established and being tracked Vibrant updated Family Medicine Interest Group in place. Revised admissions strategies, interview processes and criteria in place. Selection processes for Enhanced Skills Program have been adapted. IMG and Northern Return of Service documents updated DFM participation on provincial workforce planning table 	

ADVANCING FAMILY MEDICINE

Strategic Priority # 2 - Celebrate and promote our members and our legacy

GOALS	OBJECTIVES	SUCCESS MEASURES
Celebrate and promote ourselves, our work, and achievements	 Promote Family Medicine in Manitoba, celebrating and recognizing our members, our work, and our achievements. Establish internal awards to celebrate achievements within the department. Increase nominations of Department of Family Medicine members for university-based, provincial and national award 	 PR Campaign developed # of media contacts Set of new awards is established. # of awards received by learners, faculty, and staff
 Celebrate our legacy and plan for our 50-year Anniversary Plan and implement a 50-year anniversary celebration. Establish and grow professorships/ chairs to support scholarship within the Department of Family Medicine Launch a fundraising strategy to support projects not covered by our baseline grants. 		 Schedule of 50-year anniversary events Number of professorships/chairs Fundraising campaign developed and implemented

STRENGTHS:

We have a presence across the province, are highly relevant to RHAs, have solid training sites where residents can learn. We have dedicated and experienced faculty who are here because they want to teach and develop strong clinicians. There is a commitment to train learners to be compassionate, competent and well-rounded physicians after their training program. There is broad exposure and practice environments available for learners to be able to handle different clinical scenarios, care for a wide variety of patient presentations and opportunities to practice in strong interprofessional teams.

The majority of learners who responded to the survey felt they are afforded a variety of settings to help them better understand the diversity in care and that we are training learners to have a diverse skill set that promotes employability and practise readiness. Learners also commented that the department is working hard to make education work during these trying times creating good learning environments, providing feedback and support, and taking the time to teach despite other demands from COVID-19 and restrictions.

CHALLENGES:

With a distributed model, there are distinct differences in urban, rural and northern teaching sites, including standards, practise and funding models and teaching expectations. Capacity and workload issues were noted as a concern including administrative support, amount of paperwork, and committee work.

The pandemic has had impact on both learners and teachers with a lot of discussion on the challenges of having to teach and learn virtually. There have been fewer opportunities to practice hands-on procedures and physical exam skills and connections with other learners and preceptors has been challenging.

OPPORTUNITIES

There are many opportunities to review and implement new curricula and evolve clinical placements to ensure they are relevant and responsive to meet the needs of our learners and responsive to needs of our communities now and into the future. There has been a lot of change in our clinical teaching sites in the past several years and there is a need to ensure practise environments are supported and consistent standards are maintained.

There is an opportunity to build capacity in our faculty through succession planning, recruitment strategies and professional development and to also promote and support teaching excellence and educational innovation. We must continue to support competency-based assessment approaches to support learners in their learning journey and to be practise ready and address learner wellness and support needs.

"Empowering future-ready talent to realize their full potential in diverse learning and practice settings"

Strategic Priority # 3 – Transform our curriculum and training environments to meet the changing needs of our communities

GOALS	OBJECTIVES	SUCCESS MEASURES	
Review and update educational programs to ensure they are relevant and responsive to needs of learners and to the health of Manitobans.	 Review and implement new curricula to ensure they are relevant and responsive to the needs of learners and health of Manitobans. Build capacity to further education, curriculum development and learner experience in Indigenous Health, Culture Safety, advocacy and implicit bias training. 	 New curriculum mapping identifies content reflecting needs of MB. New Curricula being developed based on review recommendations Learner Evaluation results # of Indigenous teachers, elders and knowledge keepers available. 	
Ensure that graduates of our programs are prepared to work in interprofessional team through interprofessional education	 Evolve curricula to include opportunities to learn and work in interprofessional teams. Evolve clinical placements to support interprofessional learning and practise. 	 IPE lens integrated into curriculum review and evaluation frameworks # of courses with an IPE component. # of clinical teaching sites with interprofessional teams. Learner & Faculty Evaluation results 	
Ensure practise environments in our distributed model are supported and consistent standards of training are maintained	 Evolving the distributed teaching model in urban, rural and northern settings. Develop standards to ensure consistent training, clear roles and expectations, support and mentorship are in place for preceptors and learners. 	 Onboarding and training program for new preceptors developed. Performance feedback and appraisals mechanisms in place. Organizational policies and procedures support faculty in meeting teaching expectations. Teaching performance feedback Post graduate survey (one year) 	

Strategic Priority # 4 – Promote and support teaching excellence that is progressive, evidence-based and culturally safe

GOALS	OBJECTIVES	SUCCESS MEASURES	
Build capacity for teaching, scholarship, and educational leadership	 Continue to recruit and engage community-based Family Physicians in teaching. Develop a succession plan for key faculty and staff roles. Advocate for fair, consistent and transparent compensation and funding models to support educational activities. Promote and support faculty and professional development. 	 Teaching Performance Feedback and End-of-Rotation Feedback. # of community-based Family Physicians teaching increases. Succession Plan developed and implemented. Updated remuneration framework Faculty development needs assessment completed and activities in place. Leadership development strategies developed and being implemented. Program to support faculty seeking advanced skills in medical education, research and academic leadership in place 	
Promote and support educational innovation and integration of best practices	 Share and utilize best practices and innovations across Family Medicine teaching sites. Implement program evaluation processes to provide feedback to programs that result in improvement. Foster educational research and scholarship that supports sharing of new practices. 	 QI network in place Performance feedback and program evaluation reports include recognition/ review of educational innovation. Formal teacher recognition/ awards Educational grants utilized to support educational research and innovations. A medical education research interest group is in place. 	

Strategic Priority # 5 – Empower and support learners in their learning journey and to be practise ready

GOALS	SUCCESS MEASURES	
Empower and support learners in their learning journey	 Continue to support competency-based assessment approaches to support learners in their learning journey. Assess and address learner wellness and support needs. 	 Learning gaps as a result of the pandemic identified and addressed. Consistent approach for competency-based assessment used across sites. Entrada functionality and use improved Learner supports in place. Learner concerns are addressed in a timely manner. Learner Evaluation Results.
Empower and support residents to be practise ready	 Provide opportunities for career planning throughout the learning journey. Provide exposure to variety of practice models. Support learners in their transition to practise. 	 Learners receive exposure to a variety of practise models and funding models. Learner Evaluation Results Graduate surveys document that our graduates are prepared for residency and professional practice. Graduate surveys document satisfaction with placements/ employment.

EMPOWERING OUR WORKFORCE

STRENGTHS:

We have a respectful professional collaborative work environment with a strong passionate and committed team. Leadership is strong and conveys competence, openness and compassion. The core department team is more stable and there are better structures and processes in place than there was in years prior.

There is a good mixture of experienced and young fresh faces with many different interests and experiences available. We have many Indigenous physicians, leaders and staff who are working in family medicine who are fantastic role models and ambassadors for the program. There is a genuine interest to be involved and engaged and many, including learners, expressed their appreciation for being asked to provide feedback and input in the strategic planning process.

CHALLENGES:

Our diversity and reach across the province are strengths, but it was also identified as a challenge for many in terms of communications and engagement challenges. It was noted that it is difficult to find people to assume leadership roles and there was a general feeling that leaders are spread too thin sometimes resulting in communications challenges and timely response to concerns.

Many felt that the use of virtual meetings as a result of the pandemic was a real benefit to get people across the province more engaged, but it was also noted that there was feeling of depersonalization, a loss of connectivity and people feeling tired and burnt out. Although there have been many improvements made to streamlining processes and adopting technology, there was agreement that there is still more work to be done.

OPPORTUNITIES:

Despite the many hurdles we have had the past year with the pandemic, we have a tremendous team who has worked above and beyond what was expected in order to pivot in how we teach, learn and work. Staff and faculty were excited to be part of the strategic planning process openly sharing their thoughts and ideas on building and capitalizing on our strengths and identifying the priorities important to tackle in the next three years.

We need to continue to align and enhance our structures, communications and processes with an eye to integrating employee and patient engagement and change managements strategies when implementing new initiatives. We need to foster a more diverse and inclusive workforce. We need to enhance the faculty and employee experience building an inclusive, diverse and empowered team and supporting a healthy work life balance and wellness initiatives.

"Creating connections with people - building an inclusive, diverse and empowered team"

EMPOWERING OUR WORKFORCE

Strategic Priority # 6 – Foster an engaging workplace culture aligned with our Vision, Mission and Values

GOALS	OBJECTIVES	SUCCESS MEASURES		
Continue to align and enhance our structures, communications and processes	 Improve communications, collaboration and engagement between distributed sites and the Faculty. Formalize mechanism for streamlining administrative processes. 	 DFM Website updated. New Strategic Plan rolled out to all stakeholders and integrated into departmental operations. Committee structures reviewed. Documented procedures in place. 		
Enhance the faculty and employee experience	 Formalize departmental orientation and onboarding processes for new staff and faculty. Promote a healthy work/ life integration and support staff wellness initiatives. Provide growth and development opportunities for administrative staff. Foster a more diverse and inclusive workplace culture. 	 Onboarding and orientation process updated. Employee feedback addressed. Formalized support process in place for staff and faculty. Clear expectations about what work will look like in the post pandemic world. Employee learning journeys developed for staff. All faculty and staff receive cultural safety and implicit bias training. Formal recognition program in place. 		

HARNESSING A CULTURE OF CURIOSITY

STRENGTHS:

Our research endeavours continue to expand in the number of projects and collaborations, most notably in the area of Quality Improvement (QI). The Department of Family Medicine is leading the way by piloting new CFPC curriculum on QI allowing our residents to develop the knowledge and skills that they will need in an evolving clinical context.

We have a new steering committee for QI and Research, and they have developed a vision and strategic plan for the Office of Quality Improvement and Research. On the research side, we have made progress and seen diversity in terms of research and scholarly activity over the past 5 years. We have also been working with the Faculty of Engineering in a number of process improvement projects.

CHALLENGES:

Building effective networks and resources to advance the research and QI agenda across our distributed model has been a challenge. To be successful, QI and research cannot be seen as an add-on to clinical practise. Funding is a perceived gap to be able to further QI and research with different funding models in place. It was felt that QI needs to be seen as an integral part of everyone's practice with protected time and champions at each site with consistent devoted time and resourcing in place.

It was also felt that there was more work to be done and opportunities to ensure the type and relevancy of research we are doing is focused on advancing family medicine, primary health care and our clinical work. Supporting education research, scholarship of education, publishing, and promoting ourselves better was also identified as area of enhancement.

OPPORTUNITIES:

There are many opportunities that were identified to enhance QI and research capacity within the department. The Office of QI and Research has developed a vision and plan to move this agenda forward and the proposed Innovation Support Hub model needs to be implemented. We have an opportunity to further enhance our collaborations with the Faulty of Engineering to build capacity in QI and lean six sigma.

We need to develop and promote a research agenda on areas of relevancy to family medicine and patient care. Building a family practise research network and establishing research partnerships that are cooperative interprofessional and reflective of community needs will be important to advance this work.

"Building on our strengths to find new and innovative ways to advance family medicine"

HARNESSING A CULTURE OF CURIOSITY

Strategic Priority # 7 – Build Capacity in QI and Research through Innovation and Scholarly Activity

GOALS	OBJECTIVES	SUCCESS MEASURES
Enhance quality improvement capacity and spread to support health system improvement	 Enhance Quality Improvement capacity and spread to all Clinical sites Enhance collaborations with Faculty of Engineering to support development of QI capacity 	 Innovation Support Hub is in place. An established network of champions is in place across all core training sites. Data management services and repository are in place to identify QI opportunities. Infrastructure and tools are in place to enables effective use of stakeholder resources. Development & delivery of Advanced Access curriculum. # of learners and staff engaged in course work with the engineering faculty # and types of projects aligned with partnership with Faculty of Engineering.
Foster leading edge and relevant research and scholarly work	Develop and promote a research agenda focused on areas of relevancy to advance Family Medicine and patient care.	 Plan to address research and capacity challenges developed and recommendations being addressed. Family Practise Research Network established. Annual List of research topics identified and being pursued. Research productivity measures.

BUILDING RELATIONSHIPS

STRENGTHS:

We are committed to looking at our role and how we can improve and be leaders in social accountability, health equity and advocacy. Over 90% of the learners who responded to the learner survey felt the department provided a quality education founded on social accountability. The diversity of our program, our distributed model and our reach across Manitoba is a strength. We have been working internally and externally with our partners (e.g. Shared Health, health systems) to advance new models of primary health care, advanced access and teambased models.

Many new learners entering the field of healthcare are coming in willing to learn to be better family practitioners, especially in relation to providing culturally competent care. The establishment and foundational work of Ongomiizwin, the faculty's work on TRC action plan and our connections to Indigenous communities and partners was seen as positive step forward towards truth and reconciliation and an area requiring focused work and attention as we move forward.

CHALLENGES:

The health system and practice environments have undergone, and continue to undergo, significant change. The pandemic has changed how we work, learn and interact with each other. Mental health, addictions, feelings of social isolation, impacts to people's livelihoods and health has been exasperated by the pandemic presents demanding challenges for family medicine. Virtual medicine is a new reality and post pandemic issues, and challenges will need to be explored and addressed thoughtfully with our partners and communities.

We need to enhance our engagement and strengthen our relationships with Indigenous communities and creatively seek out opportunities to better meet the needs of underserved communities and gaps in care and services.

OPPORTUNITIES:

Building authentic relationships is the cornerstone of Family Medicine and the work we do. We need to live by our core values and be committed to listening to our communities, being transparent in our actions, and advocating for health equity, access and quality patient care. Our success requires honest and continuous dialogue, grounded in respect and a recognition striving to address power imbalances inherent in the health care system.

We need to continue to grow and enhance our relationships and engagement with our communities and partners and develop strategies to improve patient and community engagement efforts. We need to continue our work to advance our social accountability mandate working with our health system partners to address gaps and implement and evaluate new models of care including those that advance primary care, health system integration and integrated team-based models.

"Being socially responsible and accountable to our communities through authentic engagement, listening and advocacy"

BUILDING RELATIONSHIPS

Strategic Priority # 8 – Continue to grow and strengthen our relationships with our communities and partners

GOALS	OBJECTIVES	SUCCESS MEASURES
Enhance engagement, build and strengthen relationships with our communities and partners	 Enhance engagement and strengthen our relationships with Indigenous communities and partners in rural, northern and urban settings. Enhance partnerships and opportunities to better meet the needs of our underserved communities and address gaps in services. 	 Relevant Rady TRC Action plan recommendations are being addressed. Number of joint projects/ initiatives with Ongomiizwin Health Services. Number of projects/initiatives with community organizations focused on underserved or marginalized populations. Number of clinical initiatives addressing care gaps.
Contribute our expertise and efforts in addressing health equity and social accountability	 Showcase and build upon best practises that promote and advance principles of social accountability and health equity. Build and spread new and existing partnerships to advance social accountability and health equity work. 	 Best Practises are being shared. New programming developed Health Equity lens developed and being used in program/ curriculum development. Learners are involved in practise improvement initiatives Communities of Practise are established and aligned with provincial clinical services plan and quality efforts. # of new partnerships

STRATEGIC PRIORITIES

ADVANCING	INSPIRING	EMPOWERING	HARNESSING A CULTURE OF CURIOSITY	BUILDING
FAMILY MEDICINE	OUR LEARNERS	OUR WORKFORCE		RELATIONSHIPS
Strategic Priorities 1. Advance Family Medicine to meet the changing needs of our communities. 2. Celebrate and promote our members and our legacy.	and training environments to meet the changing needs	6. Foster an engaging workplace culture aligned with our Vision, Mission and Values7. Enhance the employee experience	Strategic Priorities 8. Build capacity in Quality Improvement and Research through Innovation and Scholarly Activity	Strategic Priorities 9. Continue to grow and strengthen our relationships with our communities and partners 10. Advance our social accountability mandate