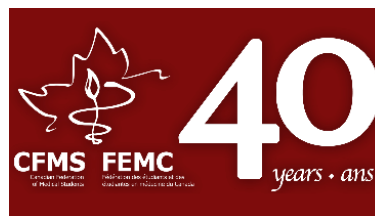


EXECUTIVE REPORT

*Franco Rizzuti, President
2017 Spring General Meeting
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I. DESCRIPTION OF POSITION

From the CFMS bylaws:

- a) Hold the Office of Chair of the Executive Committee; and*
- b) Appoint the Chairs of all committees except as otherwise provided; and*
- c) Appoint an Executive Vice President from among the Executive Committee; and*
- d) Succeed to the Office of Past-President upon the election of their successor; and*
- e) Be responsible for the general supervision and direction of the business of the Federation.*

In practice, the role of the President is multifaceted, and can better be described as President, CEO & Board chair. Wearing the CEO hat, the president has 14 direct reports, and sets organizational goals and oversees their implementation. Specific activities are delegated to members of the Executive Committee and the President is responsible for providing support, guidance, and institutional memory. In the Board chair role, the President plays a role in coordinating a not-for-profit board, ensuring organizational compliance with national standards, as well as plays an integral role in risk management. The President contributes to agenda-setting for each General and Executive meeting and chairs the proceedings of Executive Meetings. The President is also the designated spokesperson for the Federation and interacts with representatives of media, government, public, and national medical organizations. Representative roles set aside for the President include the Canadian Medical Association Board of Directors, the Physician Resource Planning Advisory Committee, the Canadian Medical Forum, the Post-Graduate Medical Education Governance Council, and multiple others by invitation. The presidency is a near 24/7 role, with no day being identical to the last. It is a privilege and honor to serve the membership.

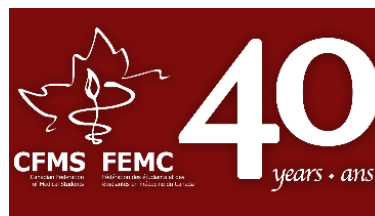
My report below outlines a glimpse of the Organization's and my personal activities on behalf thereof.

II. ACTIVITIES

Date	Text	Location
Sept 22-25th, 2016	AGM 2016	Edmonton, AB
September 22, 2016	Exec meeting	Edmonton, AB
September 22, 2016	PRT Presentation	Edmonton, AB
September 22, 2016	Reps Presentation	Edmonton, AB
September 27, 2016	AFMC Residency Matching Committee (ARMC)	Teleconference
September 28, 2016	Canada 2020 New Health Accord	Ottawa, ON
September 29, 2016	SA Deans Co-chair meeting	Teleconference
Sept 30-October 12, 2016	CFMS Executive 1-on-1 onboarding	Teleconference & in-person
October 6, 2016	FMEC PG GC	Ottawa, ON
October 11, 2016	Canadian Medical Forum (CMF)	Teleconference
October 15, 2016	CFMS Executive TC	Teleconference

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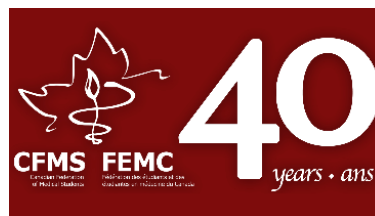
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October 16, 2016	CMA Negotiations meeting	Ottawa, ON
October 17-22, 2016	CMA Board Meeting	Mont Tremblant, QC
October 21, 2016	CMA-CFMS Education Meeting	Mont Tremblant, QC
October 21, 2016	CMF	Teleconference
October 21, 2016	joint Learners Organization Meeting	Teleconference
October 23, 2016	Lobby Day planning	Teleconference
October 23, 2016	PRT	Teleconference
October 25, 2016	Wellness survey logistics	Teleconference
October 26, 2016	CCME Presentation prep meeting	Teleconference
November 2, 2016	CMA Thought Leader forum on Medical Professionalism	Ottawa, ON
November 2, 2016	CaRMS meeting	Teleconference
November 4, 2016	Choosing Wisely Canada	Teleconference
November 4-6th, 2016	Fall Executive Meeting (FEM)	Ottawa, ON
November 4, 2016	CFMS-MD meeting	Ottawa, ON
November 8, 2016	joint Learners Organization Meeting	Teleconference
November 9-12th, 2016	CFPC Family Medical Forum & Board presentation	Vancouver, BC
November 10, 2016	Meeting with AFMC CEO	Vancouver, BC
November 10, 2016	Meeting with CaRMS CEO	Vancouver, BC
November 10, 2016	RDoC meeting	Vancouver, BC
November 16, 2016	AFMC PDAWG	Teleconference
November 17, 2016	CaRMS Annual Meeting	Ottawa, ON
November 17, 2016	MDFM-CFMS meeting	Ottawa, ON
November 18, 2016	Meeting - CaRMS and 4 Learner Organizations	Ottawa, ON
November 22, 2016	PRPAC	Ottawa, ON
November 26, 2016	RDoC meeting	Ottawa, ON
November 28, 2016	Canadian Medical Forum (CMF)	Ottawa, ON
November 29, 2016	Inter-Professionalism Education Alliance Meeting	Teleconference
November 30, 2016	CMA subcommittee	Teleconference
Dec 1-3, 2016	CMA Board meeting	Ottawa, ON
December 5, 2016	CMA-CFMS/RDoC Medical Education meeting	Teleconference
December 13, 2016	CEOs Roundtable	Teleconference
December 13, 2016	Physician Resource Planning discussion	Teleconference

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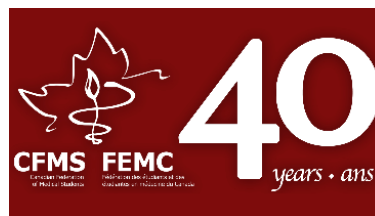
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December 15, 2016	CaRMS CEO meeting	Teleconference
December 16, 2016	ARMC meeting	Teleconference
December 16, 2016	Joule call	Teleconference
December 19, 2016	TUMEA	Toronto, ON
December 21, 2016	CMA Board call	Teleconference
December 22, 2016	PRPAC meeting	Teleconference
Jan 6-8, 2017	CFMS Winter Executive Meeting (WEM)	Toronto, ON
January 11, 2017	Alberta Physician supply meeting	Teleconference
January 18, 2017	joint Learners Organization Meeting	Teleconference
January 20, 2017	AFMC -learners meeting	Ottawa, ON
January 23, 2017	PGME GC	Teleconference
January 25, 2017	CMF Evolving Role of Physician Interview	Teleconference
January 25, 2017	CFMS-MD meeting	Teleconference
January 26, 2017	CaRMS CEO meeting	Teleconference
January 27, 2017	pre-AFMC board meetings	Teleconference
February 6, 2017	Health Canada call re: Lobby Day ask	Teleconference
February 7, 2017	Nick & Terri (Tap interview)	Teleconference
February 9, 2017	Canadian Medical Foundation (CMF) meeting	Kanata, ON
February 9, 2017	MDFM-CFMS meeting	Ottawa, ON
February 9, 2017	RDoC-CFMS meeting	Teleconference
February 10, 2017	TUMEA meeting	Toronto, ON
Feb 11-13, 2017	Lobby Day	Ottawa, ON
February 14, 2017	CaRMS learner meeting	Ottawa, ON
February 14, 2017	AFMC CFMS lunch n learner pre-meeting	Teleconference
February 14, 2017	CFMS-RDoC meeting	Teleconference
February 15, 2017	Student Financial Support meeting	Teleconference
February 17, 2017	PRPAC	Teleconference
February 18, 2017	mistreatment panel at CCME	Teleconference
February 20-28, 2017	Executive 1-on-1 meeting	Teleconference
February 25, 2017	CFMS Exec	Teleconference
February 25, 2017	CFMS Policy development meeting	Teleconference
February 27, 2017	CMF CEO's meeting	Ottawa, ON
February 27, 2017	AFMC CEO meeting	Ottawa, ON
February 27, 2017	CMA focus group	Teleconference
February 28, 2017	PRT	Teleconference
March 2, 2017	ARMC	Teleconference
March 2-5, 2017	CMA Board meeting	Kanata, ON
March 3, 2017	CMA 150th video	Kanata, ON

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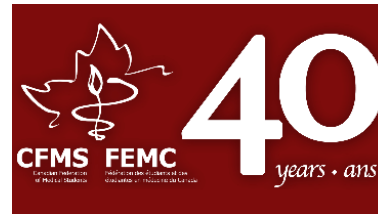
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March 4, 2017	RDoC meeting	Ottawa, ON
March 8, 2017	Strategic Planning meeting	Teleconference
March 9, 2017	CaRMS CEO meeting	Teleconference
March 12, 2017	CFMS Longitudinal Advocacy discussion	Teleconference
March 14, 2017	AFMC CEO meeting	Teleconference
March 16, 2017	40th planning call	Teleconference
March 17, 2017	Tap consultants call	Teleconference
March 17, 2017	Strategic Planning meeting	Teleconference
March 23, 2017	CFMS-MD meeting	Teleconference
March 24-April 4, 2017	CFMS EXEC CALLS RE STRATEGY	Teleconference
March 27, 2017	CFMS-MD meeting	Teleconference
March 31, 2017	CFMS-MD meeting	Teleconference
April 4, 2017	CFMS-MD meeting	Teleconference
April 4, 2017	Finance meeting	Teleconference
April 5, 2017	SRPC Spring Council	Calgary, AB
April 6, 2017	SRPC R&R	Calgary, AB
April 1-8, 2017	CFMS Comms meetings	Teleconference
April 6, 2017	CFMS-MD meeting	Teleconference
April 6-18 th , 2017	Presidency candidates meetings	Teleconference
April 13, 2017	Wellness survey TC	Teleconference
April 18, 2017	Lunch n' learner call	Teleconference
April 19, 2017	CFMS Exec TC	Teleconference
April 27-29, 2017	CFMS SGM	Winnipeg, MB
April 29-May 2, 2017	CCME 2017	Winnipeg, MB
April 28, 2017	AFMC SA Deans presentation	Winnipeg, MB
April 29, 2017	AFMC UGME Deans presentation	Winnipeg, MB
April 29, 2017	AFMC board meeting	Winnipeg, MB
April 29, 2017	AFMC CEO reception	Winnipeg, MB
April 30, 2017	CaRMS forum	Winnipeg, MB
April 30, 2017	PGME Deans presentation	Winnipeg, MB
April 30, 2017	Lunch n'learner presentation	Winnipeg, MB
April 30, 2017	MCC-CFMS meeting	Winnipeg, MB
April 30, 2017	CaRMS stakeholder session	Winnipeg, MB
April 30, 2017	joint Learners Organization Meeting	Winnipeg, MB
April 30, 2017	RDoC awards	Winnipeg, MB
May 1, 2017	mistreatment panel at CCME	Winnipeg, MB

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III. CFMS 2014-17 Strategic Plan Milestones: self-assessment

The activity is complete or in the final stages of action/implementation.	
The activity is in preliminary stages of action/implementation and/or there are perceived barriers to the completion of the activity.	
The activity is incomplete and/or at serious risk of not being completed; there are minimal/no steps that have been taken to alter the outcome of this activity.	

Strategic Direction #1: Increase member engagement	
Connect with incoming medical students early, both through school reps and through welcome material included in orientation packages.	
Provide targeted services and discounts, including databases, resources and funding opportunities, communicated at intentional time points to specific groups, including potential individual members.	
Update the website with new student opportunity information within 72 hours of receiving it, for example call for positions, funding opportunities, and other CFMS activities.	
Create @cfms.org emails for the reps at each member school and have these forwarded to the appropriate reps. (Ex: ubcreps@cfms.org forward to UBC Sr. and Jr. reps.)	
Maintain website bilingualism through regular review and translation.	
Increase individual member registration convenience through an online payment option.	

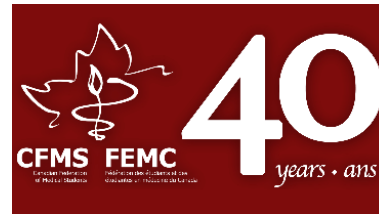
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Strategic Direction #2: Support student members	
Review relevance and appropriateness of CFMS online databases (i.e. Accommodations, Electives, Interview) and restructure to improve relevance, professionalism, and utilization of these services.	
Acquire new and relevant student benefits (ie. LMCC preparation resources), exploring opportunities to strategically partner with other medical organizations.	
Develop and administer a wellness survey. Survey results may be used to begin to develop a national support and advocacy strategy for medical student health and well-being.	
Develop an online member forum that allows for student collaboration and interaction while also serving as a database for local student initiatives and resources.	
Provide equitable access for student members to participate in global health experiences which are meaningful, accessible and ethical.	
Address medical student concerns following the identification of local issues at monthly meetings of Medical Society Presidents.	

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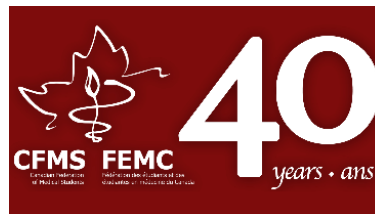


Strategic Direction #3: Promote excellence in medical education	
Formalize the role of the education committee within the education portfolio.	
Engage member school education representatives into the VP Education national portfolio to both share best practices discuss local & national concerns.	
Contribute to the smooth adoption of the national electives portal for Canadian clinical clerkship students.	
Contribute to reforms of the final year of medical education that promote transparency in resident selection, relevant use of post-match class time and protected time off before commencing residency.	
Engage student leaders to ensure that new local developments do not compromise the primacy of the clerkship education of CMGs.	
Contribute to the development of best practice standards for post-return debrief for global health experiences, as well as the development of core competencies for global health education.	

Strategic Direction #4: Mobilize the medical student voice	
Seek input and endorsements from relevant external organizations (medical organizations, non-government organizations, community groups, etc.) in the development of the annual Lobby Day Ask, Global Health Advocacy theme, and other advocacy activities.	
Work with our international neighbors through the Pan-American Medical Student Association (PAMSA) and International Federation of Medical Student Associations (IFMSA), to amplify the student voice in the United Nations and elsewhere on the global stage.	
Enlist the Committee on Health Policy (COHP), Global Health Program, and other relevant groups (Media Engagement Committee, Social Media Committee, etc.) within the CFMS to create annual flagship reports directed towards our stakeholders.	
Support CFMS-led research activities through the creation of a CFMS research program.	
Complete the COHP-directed review of existing CFMS policy documents by engaging relevant internal CFMS groups.	
Local representatives (GAAC members and / or Global Health Advocates) will meet with policy-makers (MPs, MLAs, etc.) at least once at the local level outside of Lobby Day.	

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Enabling Direction: Enhance CFMS organizational effectiveness	
Create an up-to-date organizational chart including but not limited to the present governance structure, national officers, representatives and committees.	
Ensure formal terms of reference exist for each committee and representative within the CFMS.	
Initiate a formal institutional governance & accountability review and plan for periodic assessment.	
Determine what are the resource needs of the organization. Explore how these might be achieved using a combination of permanent staff, contracted employees, and student representatives.	
Establish a formal hiring committee to oversee human resource expansion. Ensure accurate job description(s) are available for CFMS staff.	
Develop a formalized process for executive transitions. Addendum (Oct 2014): Governance Manual Creation	
Explore possibilities of expanding into additional revenue-generating streams, in order to support organizational resource needs.	
Initiate formal member review of CFMS General Meeting structure and function.	

IV. PRIORITIES AND PROJECT AREAS

The Transition to Residency and Canada’s Health Human Resources

The CFMS continues to advocate for a fair and transparent matching process with special emphasis upon:

- the increasing number of unmatched Canadian Medical Graduates (CMG’s)
- enhanced career planning & resources
- learner support and resources in the transition to residency
- enhanced learner privacy (below)

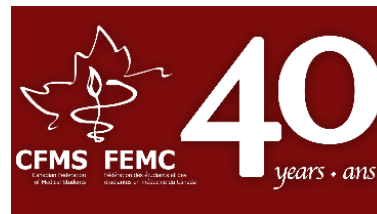
As president, I represent the CFMS as a voting member of the AFMC Residency Matching Committee, and the Physician Resource Planning Advisory Committee, as well as an observer of the PGME governance council.

AFMC Residency Matching Committee

I continue to participate via teleconference with the AFMC Residency Matching Committee, a group that seeks to address challenges faced by Canadian medical students in the match. The CFMS, FMEQ,

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RDoC, and FMRQ continue to provide our input as it relates to the following critical topics:

- AFMC-CaRMS contract
- Unmatched CMGs
- Unofficial electives (which CFMS & AFMC have drafted a joint letter)
- Interview breaches
- Enhanced understanding of career decision-making pressures and drivers of growing unmatched rates

PRPAC

Nationally key healthcare, medical education, and medical profession players have come together to understand national health human resourcing (HHR) pressures. PRPAC retained the services of the Conference Board of Canada to develop a physician supply AND public need HHR tool. The first stage of this project, the physician supply tool is near completion, and the second arm is under development with an anticipated release date of Spring 2018. This tool once complete will be the first of its kind. The CFMS continues to advocate at this table that the tool be shared with trainees to assist in career planning.

The PRPAC has also championed the topic of the unmatched CMG, and undertook a national consultation process in the Fall of 2016. This project will return to PRPAC this summer. We are hopeful that this project will elucidate pressures leading to the unmatched CMG, and provide suggestions for short and long term solutions.

Please see common message Appendix 1

CaRMS

The CFMS alongside RDoC, FMEQ & FMRQ met regularly (~q4months) with CaRMS senior management team to discuss learner issues. This range from CaRMS website experience, to interview and match breaches, to technology upgrades, to enhanced data visualization tools. These meetings have been incredibly fruitful. The CFMS is excited for the public launch of some of these projects over the next year.

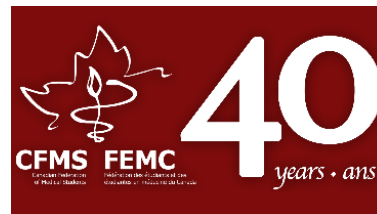
Additionally the CFMS alongside RDoC, FMEQ & FMRQ are working with CaRMS to revise and update the learner CaRMS contract.

Learner privacy

The CFMS continues to strongly advocate for an arm's length match, free of any interference, run by CaRMS. The CFMS is in the final stages of development of learner privacy principles which will be at the backbone of our privacy advocacy efforts.

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CACMS Accreditation

Immediately prior to AGM, the AFMC launched the Taskforce on Undergraduate Medical Education Accreditation (TUMEA) to again take a deep dive into the operations, process, and standards of accreditation. This taskforce contained representatives from AFMC proper, Deans of all ranks, CACMS, the CMA and trainees. 2 working groups of TUMEA were struck, one exploring process, the other on content & standards. As CFMS president and a former accreditation lead I served as the medical student representative to the Content working group. Over the course of 3 months this group reviewed the entirety of the current CACMS process and standard. A draft report is being reviewed by the AFMC & CMA boards. This was a very positive experience and trainee concerns were both strongly considered as well as integrated into the final draft report.

Wellness

Please see Han Yan, VP Student Affairs for a complete update

CFMS-FMEQ National Medical Student Wellness Survey

The CFMS and FMEQ were awarded a Canadian Physician Health Institute (CPHI) Special Projects Grant in order to develop and institute a national medical student wellness survey across Canada. Survey deployment occurred throughout Winter 2015-2016. Preliminary results have been presented nationally at CCME, as well as at international physician wellness conferences. The team is currently drafting the first manuscript with intention to publish in summer 2017. Subsequent manuscripts will be written over the course of the year, with medical students involved in the process. Data will also be released to schools over the course of the year. Please note no firm date has been determined for data release.

Han Yan will be providing an update to President, Reps & the General Assembly at SGM. Over the course of the summer, the CFMS executive in consultation with the membership will be developing a longitudinal wellness strategy, which will include a revised Wellness paper, data dissemination, survey 2.0, as well as communication and advocacy plans. We will be looking for medical society & medical student input in this process. Stay tuned

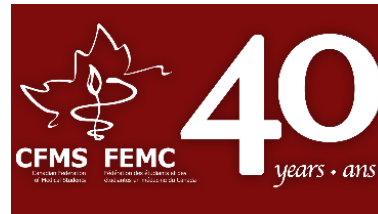
Stakeholder Collaboration & Partnership

Resident Doctors of Canada (RDoC)

Throughout the past 6 months, the CFMS has been able to work closely alongside our national resident colleagues at Resident Doctors of Canada. I have been able to attend regular RDoC Board of Directors Meetings in Ottawa. We have collaborated on several important topics, including the

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Executive Endorsement of the RDoC Entry Disciplines Paper, the TUMEA process, health human resourcing, learner privacy, CaRMS trainee contract, and many more.

Canadian Medical Association (CMA)

The CMA continues to work to engage its medical student, resident, and new-to-practice physician members. The CFMS have continued to collaborate with the CMA on ways to engage its membership through direct feedback at the Fall Executive Meeting, student support of the “My CMA Voice” Facebook page and Linked-In discussion group.

The CMA is a terrific partner and national stakeholder of the CFMS.

The CFMS continues to collaborate with the CMA on topics includes physician health & wellness, intra-professionalism, opioids, indigenous health, seniors care, to list a few.

The CMA has a strong presence at SGM 2017. Please take the opportunity to introduce yourself to CMA and its subsidiary staff.

Please see Appendix 2- CMA March Affiliates Update

Choosing Wisely Canada (CWC)

Throughout the last 6 months the CFMS has worked closely with CWC. Our CWC-CFMS Representative regularly attends CWC meetings and is potentiating collaboration opportunities between CFMS & CWC. CWC hosted a very successful second annual conference in Calgary February 27th with Emily Hodgson attended.

CFMS Internal Operations

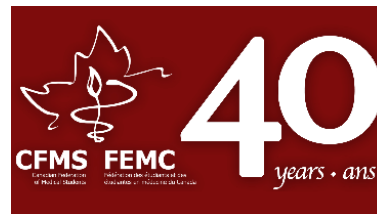
CFMS Governance and Strategic Plan

A critical component of the presidency is oversight and management of the operation. The CFMS is recognized as the national voice for medical students, and is regularly invited to the highest tables to provide learner insight on health policy, health economic, medical education and others. CFMS is received with the same esteem as much larger organizations. This respect nationally, speaks to dedication and evolution of members over the last 40 years.

CFMS programming and initiatives has more than doubled over the last decade, as we look forward to the next 40 years it will be critical for the CFMS to restructure, find efficiencies, and grow as an organization. Under the leadership of Past-president Dr. Anthea Lafreniere the CFMS sought external consultants to review the HR, operational and governance structures of the CFMS. Dr. Lafreniere will be seeking input and feedback throughout SGM. The executive will then consolidate this information over the summer and present a 2017-2020 operational strategic plan at AGM. I want to highlight that the focus of this strategic plan will not be to change priority areas, or mandate, rather to grow organizational capacity.

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V. FOLLOW UP, VISION, GOALS AND RECOMMENDATIONS FOR THIS POSITION

In the next 6 months, there will be many avenues in which to continue to grow the organization. Internally the CFMS is:

- Launching our Strategic Initiatives Fund
- Completing the website transition and enhancements
- Hiring project and part-time staff
- Developing a 2017-2020 Strategic plan
- Enhancing our advocacy strategy, from 1 event, to longitudinal advocacy

Externally, we will continue to be key players on topics such as health-human resourcing, the match, supporting unmatched CMGs, learner wellness, entry-disciplines, global health certificate, indigenous health, intra- & inter-professionalism and opioids.

This AGM marks the celebration of the CFMS 40th anniversary. We will kick off the birthday celebrations at SGM-stay tuned.

Looking to the future of medicine, medical education, and medical policy and politics, there are several emerging issues that we as an organization will need to address. How do we best support research in our organization and develop it into a core component of what we do? How do we develop a longitudinal advocacy strategy and effectively implement? How do we continued to engage and connect with individual medical students across Canada? What does the future of Canadian healthcare look like and how do we as Canada's next generation of physicians gain a meaningful role in that conversation? How does the CFMS strengthen its partnerships? These questions, and the way that we address them, will define our organization for our next 40 years.

Looking forward to meeting you all at SGM. Please do not hesitate to reach out and contact me with questions, ideas, or just to say hi!

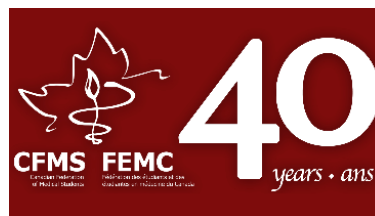
With humble thanks for the opportunity to serve!

A handwritten signature in black ink, appearing to read 'Franco Rizzuti'.

Franco Rizzuti
President, 2016-2017
president@cfms.org / farizzuti@gmail.com

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APPENDIX !- PRPAC Common Messaging/Message communs

Physician Resource Planning Advisory Committee (PRPAC) November 2016 Meeting

The Physician Resource Planning Advisory Committee to the Federal/Provincial/Territorial Committee on Health Workforce met on November 22, 2016 in Ottawa. PRPAC members were provided with an overview of the completed supply-based component of the pan-Canadian physician resource planning tool being developed by the Conference Board of Canada. Members also had an opportunity to provide preliminary input on the development of the needs-based component of the tool.

In an effort to better support medical graduates on a path to a meaningful career that contributes to the health needs of Canadians, the PRPAC wishes to identify options that could lead to reducing the number of unmatched graduates of Canadian medical schools after the second iteration and support those who remain unmatched. As an initial step, the committee discussed plans to develop a process map identifying the current state of career counselling, matching and selection processes. This will include a review of literature and career counselling programs, key informant interviews, and understanding the current resident matching service.

The committee also received updates on work undertaken with respect to current entry disciplines to residency (from the Resident Doctors of Canada and the Royal College of Physicians and Surgeons of Canada) and rural family medicine (through the Advancing Rural Family Medicine Canadian Collaborative Taskforce). Members considered the importance of these topics to physician resource planning and expressed interest in keeping apprised of further work.

Réunion de novembre 2016 du Comité consultatif sur la planification des effectifs médicaux

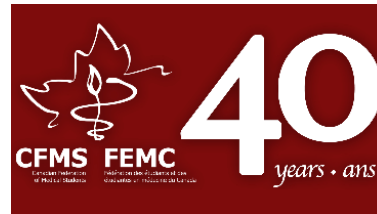
Le Comité consultatif sur la planification des effectifs médicaux qui relève du Comité fédéral-provincial-territorial sur l'effectif en santé s'est réuni le 22 novembre 2016 à Ottawa. Un aperçu de l'outil de planification basé sur l'offre (une partie de l'outil pancanadien sur la planification des effectifs médicaux) du Conference Board du Canada a été présenté aux membres du Comité consultatif. Les membres ont aussi eu l'occasion de formuler des commentaires préliminaires concernant l'élaboration de l'outil axé sur les besoins.

Afin de mieux appuyer les diplômés en médecine vers une carrière fructueuse qui contribue à répondre aux besoins des Canadiens en matière de santé, le Comité consultatif souhaite cerner les options qui pourraient réduire le nombre de diplômés des facultés de médecine canadiennes non jumelés après la deuxième itération et appuyer ces derniers. À cet égard, le Comité consultatif a tout d'abord discuté de plans afin d'élaborer un diagramme du processus qui décrirait l'état actuel des services d'orientation professionnelle et des processus de jumelage et de sélection, et ce, au moyen d'une revue de la littérature, d'un examen des programmes d'orientation professionnelle, d'entrevues avec des informateurs clés et d'une compréhension accrue du service actuel de jumelage des résidents.

Le Comité consultatif a aussi été informé de l'avancée des travaux entrepris concernant les disciplines actuelles d'entrée en résidence (par les Médecins résidents du Canada et le Collège royal des médecins et chirurgiens du Canada) et la médecine familiale en milieu rural (par le Groupe de travail collaboratif canadien pour faire avancer la médecine familiale rurale). Les membres ont évalué l'importance de ces sujets pour la planification des effectifs médicaux et ont exprimé un intérêt à être informés des travaux ultérieurs à leur égard.

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APPENDIX 2- CMA Update – March 2017

The *Update* is a snapshot of information from the CMA: Here is the news you need about CMA products, services and events that can affect your association and our collective members.

1. Advocacy for Bill S-5 and meeting with Senator Peter Harder

As you may know, the CMA has long been a proponent of the cessation of smoking, which is why the CMA supports Bill S-5, *An Act to amend the Tobacco Act and the Non-smokers' Health Act and to make consequential amendments to other Acts*. This act discusses regulating the sale of electronic cigarettes and the sale of tobacco products. On Feb. 1, CMA staff met with Senator Peter Harder, the leader of the government in the Senate, to discuss elements of the bill. The CMA discussed key policy points and informed the Senator that the CMA was the first organization in the world to have policy on plain packaging for tobacco products. The CMA also shared its concerns with advertising vaping products to youth, which needs to be addressed and tightened in the bill, as well as our desire to see the same promotional restrictions placed on vaping products as are in place for tobacco.

2. Dr. Avery meets with Health Minister Jane Philpott

On Feb. 13, Dr. Avery met with Health Minister Jane Philpott to discuss the Health Accord and the CMA's pre-budget recommendations. They also discussed the upcoming marijuana legislation, opioids, Indigenous health and the CMA's 150th anniversary. Minister Philpott initiated the meeting by thanking the CMA for its help on medical assistance in dying (MAiD) legislation, stating that the CMA played a central role in helping achieve a balanced approach. She also added that Health Canada is undertaking a review of the outstanding issues surrounding MAiD, which could take 2-3 years.

3. Influencing political parties to talk about health care and seniors care

As part of our advocacy efforts around the Conservative leadership campaign, CMA staff travelled to Halifax to attend the Progressive Conservative Party of Nova Scotia's Annual General Meeting. The provincial party hosted a federal leadership candidates' debate, where all 14 candidates participated and one of the five questions was about health care. CMA staff were able to talk to most leadership candidates regarding the importance of seniors care and health care priorities, and we are hoping to influence the candidates to prioritize seniors care going forward.

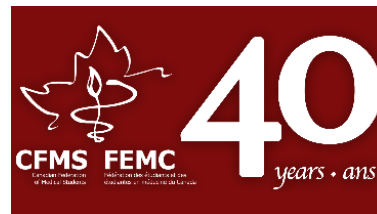
The NDP convention and leadership vote is occurring later in the year, and advocacy surrounding that leadership campaign will also begin when more candidates announce their bids for leadership. CMA staff are continually monitoring news cycles and debates in order to keep up-to-date on the latest news of the campaign.

4. Demand a Plan booth at the Manning Centre Conference

In addition to our advocacy efforts surrounding the Conservative leadership campaign, CMA staff attended the Manning Centre Conference from Feb. 23 to 25. The Manning Centre was created in 2005 by Preston Manning, founder of the Reform Party of Canada and Leader of the Opposition from 1997-2000. The annual conference is a right-wing gathering of Members of Parliament, provincial politicians and the general public, and is usually well-attended each year. CMA staff attended the conference and also had a booth set up to inform attendees of our efforts to establish a nationwide seniors plan. Overall, it was a very successful event!

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5. Advocating for a National Seniors Strategy

Marc Serré, the Member of Parliament (MP) for the Ontario riding of Nickel Belt, tabled a motion in the House of Commons calling on the federal government to “ensure quality of life and equality for all seniors [through] the development of a National Seniors Strategy.” Specifically, the motion calls for a greater understanding of the issues affecting seniors in Canada and seeks to expand the mandate of the National Seniors Council in developing a framework for a national strategy. You can read the [full text of the motion here](#). The first hour of debate for the motion occurred on Feb. 24. We’re proud of Marc Serré for standing up for Canada’s seniors and urge you to call on your MP to do the same. It’s not too late to [send a letter](#) reminding them that we’re still here and we expect action.

6. Opportunity for young physicians to attend CMA Annual Meeting in Quebec City

As part of its Ambassador Program, the CMA will once again be sponsoring 10 students, 10 residents, and 10 young physicians to attend its Annual Meeting and General Council, to be held this August in Quebec City. As Quebec is the host province in 2017, 50% of program participants will be selected from Quebec residents and 50% will be from the rest of Canada.

Program participants will be given a behind-the-scenes look at the CMA’s policy-setting process, have unique opportunities to engage with physician leaders from across the country, and be encouraged to share their experience with their peers and the CMA. Participants will also have their travel to Quebec City, accommodations for the duration of the meeting and registration fees covered by the CMA.

On March 9, all student, resident and early-career members of the CMA received an email invitation to apply for the program; interested members can also visit cma.ca/ambassador to apply. Should you have any questions or would like any additional information, please don’t hesitate to contact yourvoice@cma.ca.

7. The CMA’s 150th anniversary: New at cma.ca/150

Did you know? We’ve added a new “fast facts” section to our [150th anniversary webpage](#), which features interesting bits and pieces from the CMA’s history. These facts will be updated every month, so please come back often; be sure to follow us on [Facebook](#), [Twitter](#) and [Instagram](#) as well for the latest news.

8. Apply for a Joule innovation grant to advance in your venture — your way

What could you do with \$50,000 in flexible grant funding? Imagine the freedom to invest in your venture where you need it most—to build a prototype, to commercialize, to scale your initiative—the possibilities are endless. [Apply for a Joule Innovation grant](#). Deadline: May 1, 2017 11:59 ET.

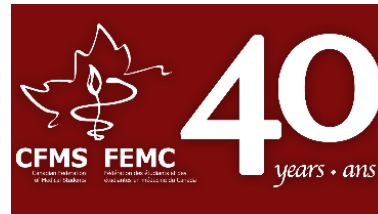
9. NEW ADVANCED COURSE: Medical Assistance in Dying

More and more Canadians are expected to ask a physician about medical assistance in dying (MAiD). In 2016, the CMA launched a [self-led foundational online MAiD course](#) which helps members understand the basics and have a conversation with their patients.

To help prepare members who are considering offering MAiD to their patients, Joule™ and the CMA have recently launched an [advanced facilitated MAiD course](#). The course is a follow-up to the foundational course and provides comprehensive in-depth education on topics related to medical assistance in dying, as well as advanced practical training for

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physicians. **Space is limited** for the advanced course and there are only 2 offerings in 2017: **May 1** or **September 18**. (Completion of the foundational self-led online course is required)

The advanced course is also offered in an in-house format. Contact us at [800-663-7336 x8445](tel:800-663-7336) or at education@cma.ca for more information. Joule is committed to ensuring that CMA members have what they need to best prepare for MAiD. [Learn more](#)

10. 2017 Tax Guide for physicians and physicians in training now available

The [2017 Tax Tips Guide](#), an indispensable tax preparation reference for physicians and physicians in training, has now been posted on MD Financial Management's [general tax page](#). The Tax Tips guide offers a comprehensive overview of tax considerations and tips specifically for physicians and physicians in training.

Prepared annually by Dr. Brian Cummings, a well-known physician consultant on financial and tax issues, the guide offers detailed general tax advice, and covers issues specific to physicians and physicians in training such as the CaRMS (Canadian Residency Matching Service) applicant registration fees, provincial tax credits and tuition cash-back programs, and various tax credits.

While the guide was originally owned and managed by the CMA, MD has now taken over management of this resource. MD's strong financial and tax expertise is an ideal complement to Dr. Cumming's tax experience.