



Introduction

The NOSM Challenge 2025 was introduced in November 2020. It's a bold strategic plan that challenges everyone to do their part in bringing health equity to Northern Ontario. Since that time, people have stepped up to the challenge. I'm proud to introduce you to a new type of report that brings the spirit of our medical school to life. You will hear from our NOSM community directly—those motivated to make quality health-care accessible to everyone in the region. I am also pleased to provide an overview of our Key Performance Indicators for this inaugural indicator of the status of our Strategic Plan.



The Northern Ontario School of Medicine respectfully acknowledges that the entirety of the School's wider campus of Northern Ontario is on the homelands of First Nations and Métis Peoples. The medical school buildings at Laurentian University and Lakehead University are located on the territory of the Anishinabek Nation, specifically Atikameksheng and Wahnapiatae First Nations and Fort William First Nation.

This report will also refer to the progress made in 2020-2021 on the performance goals for the Dean, President and CEO which are closely tied to the work underway to achieve the outcomes of the strategic plan.

In this report, you will discover how Marathon's model of physician recruitment has been successful. We will give you a feel for Operation Remote Immunity, when you read about NOSM volunteers who participated in this extraordinary vaccination effort—history in the making. Join the critical conversation on anti-racism with Dr. Naana Jumah, NOSM faculty member and graduate of the Harvard MD program, whose personal experience is influencing changes in communication that are shaping the future of student clinical experiences at NOSM.

The medical school is on the cusp of a fantastic metamorphosis. Medical education is entirely different now than it was when many current physicians trained. With modern technology, seismic advances in scientific discovery in cancer, chronic

diseases and most recently in vaccinology in the context of globalisation and a massive pandemic, NOSM is entering a period of revolution and a new phase of evolutionary growth.

Significant drivers of change are the reality of consumer-patient health literacy, the spread of health care on social media, virtual medicine and the rise of academic health science centres as the nexus for health-care delivery has made the role of purely academic-based medical schools obsolete. Investing in health human capital is more important in Northern Ontario than ever. Innovation in the new reality of a post pandemic world—with the consolidation of relationships that share the need to meet the quadruple aim—is essential to our survival.

The goal of the **Quadruple Aim** is to enhance patient experience, improve population health, reduce costs, and improve the work life of health-care providers, including clinicians and staff. The Quadruple Aim is widely accepted as a compass to optimize health system performance.

The NOSM Challenge 2025 focuses on four major strategic directions namely:

1. Transform Health Human Resource Planning
2. Advance Social Accountability
3. Innovate Health Professions Education
4. Strengthen Research Capacity in Northern Ontario

As well, NOSM will be supported by four strategic enablers:

1. Valuing Our People
2. Managing Our Resources
3. Investing in Our Infrastructure
4. Sustaining Our Resilience

Please take the journey and explore the report of The NOSM Challenge at strategicplan.nosm.ca.



Bodenheimer, T & Sinsky, C. (2014). " From Triple to Quadruple Aim: Care of the Patient Requires Care of the Provider." *The Annals of Family Medicine*, 12 (6), 573-576. <https://www.annfammed.org/content/12/6/573.full>

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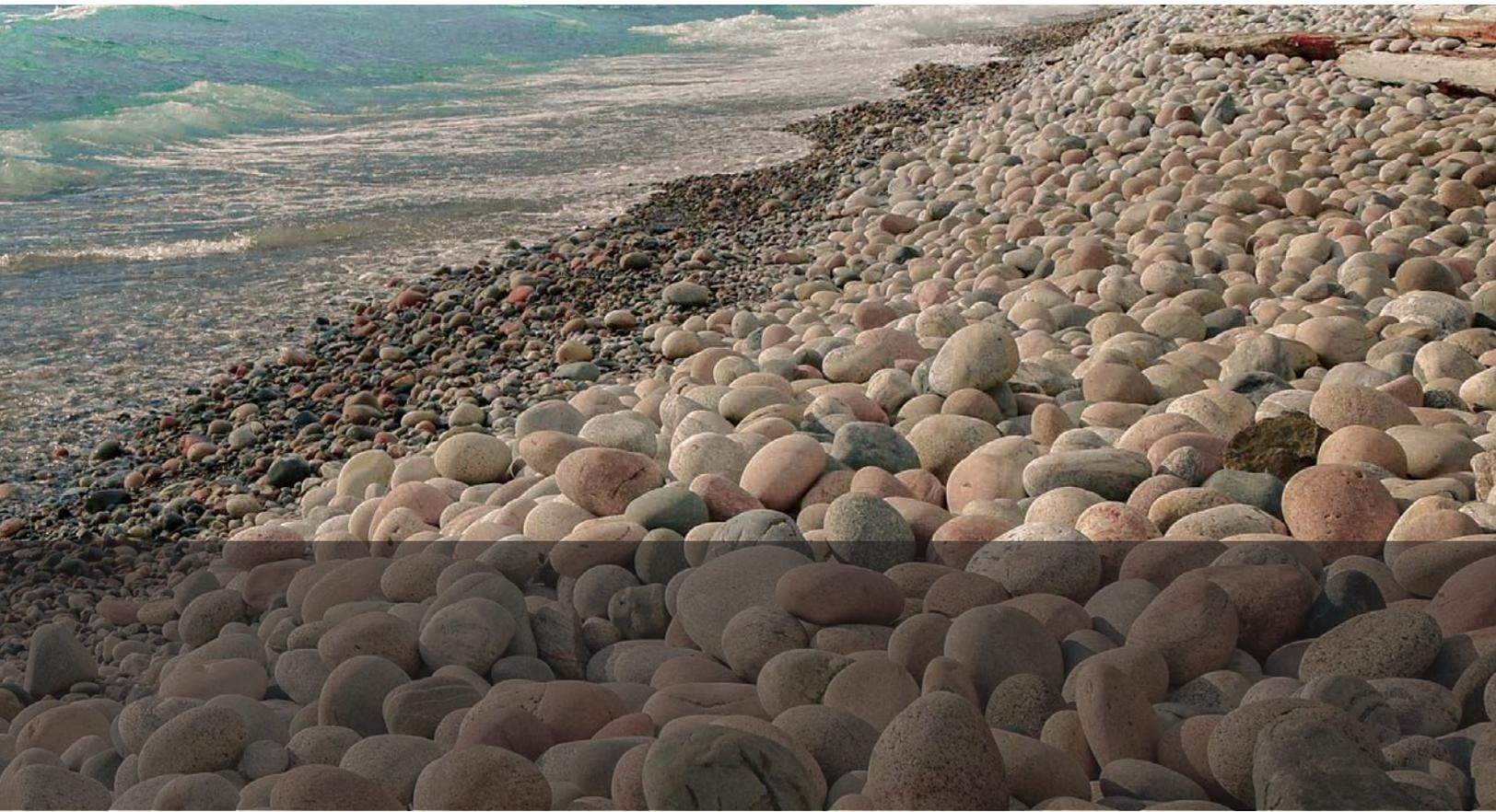
NOSM is a 2021 recipient of
The Communicator Award.



Marathon Transformation

How one north shore community went the distance with a successful physician recruitment model

Marathon is located 304 km east of Thunder Bay where primary health care is led by the physician group and Marathon Family Health Team (MFHT) who serve a catchment of about 5,000 people. Care is delivered through a community clinic, in long-term care, in hospital and to 950 people in the nearby communities of Biigtigong and Pic Mobert First Nations and surrounding area. In 2010, the town was on the verge of a doctor shortage crisis and was relying on temporary locum doctors to meet the need. The community mobilized in response, with a plan to make Marathon more attractive to doctors.



Partner with NOSM

Being a teaching site for the Northern Ontario School of Medicine is a main factor in our ability to recruit. “If a doctor comes here as a student or resident, they are familiar with the community, know the team, have a feel for the culture, and are open to potentially returning to begin full-time practise,” says Brett Redden, Marathon Family Health Team’s Physician Recruiter.

“It is all about providing the opportunity for locums, residents and students to truly experience working and living in Marathon. Working alongside an amazing team of experienced and supportive physicians, allied health-care professionals, and administration support staff. There’s ample time to enjoy the lifestyle, including paddling and fishing along the shores of Lake Superior, to world-class cross country skiing. Marathon is an outdoor playground,” Brett says.

Another factor in successful recruitment in a small Northern town is offering what he calls ‘turnkey entry’ into practice for new physicians. “They literally start on the first day with all administrative details taken care of, so they can begin treating patients. This administrative piece provides a stress-free start up and includes professional finance guidance. It is truly a great recruitment advantage,” says Brett.

The Community Connector Model

How does Marathon manage to retain a full complement even now, well into the pandemic? It was a matter of necessity coordinated by leaders in the community. **Dr. Catherine Cosgrave’s case study**, Recruiter and Community Connector Model, highlights critical community collaboration.



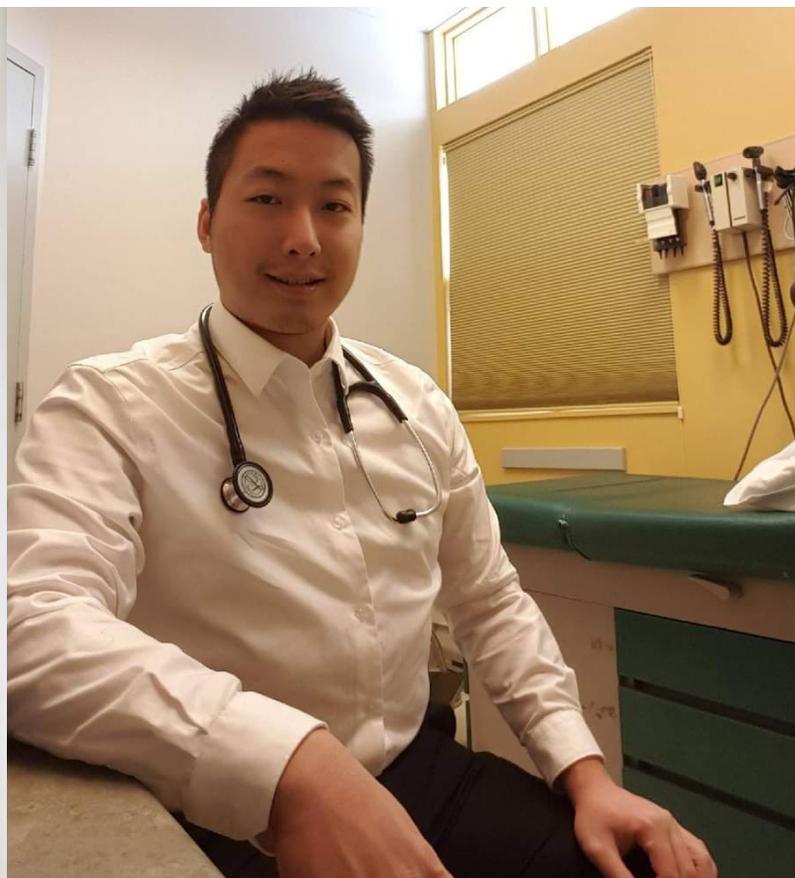
Before the recruitment effort, the few physicians left in Marathon were faced with a major increase in their workloads. These doctors decided to engage external support to help with recruiting locums short-term and finding replacement family physicians in the medium-term. “Initially, to assist funding the recruiter position, the town’s largest employer, Barrick Gold; the Town of Marathon; local hospital; and, First Nations communities were approached and agreed, in the interests of economic development, to co-fund the position with the Marathon Family Practice,” Dr. Cosgrave writes.

According to the case study, the establishment of an active recruitment committee ensured everyone was at the table to help. “At the same time, the Marathon Physician Recruitment and Retention Committee was established with representatives from the physician group,” says Brett.

Highlight the incentives and perks

Ensuring new recruits are comfortable really matters. Brett says in the 1980s the town donated two houses in a desirable area of the town. “When a new doctor comes, they have a rent-free place to live for two years. They’re supported from the get-go. For a newly graduated doctor, it means they can start to pay their debt right away while they work. Also, there’s a Ministry of Health incentive program which provides a fantastic start.”

To further support new physicians, a Health Force Ontario program called **The Northern and Rural Recruitment and Retention (NRRR) Initiative** offers taxable financial incentives to each eligible physician who establishes a full-time practice in an eligible community of the province. The grants in Ontario range between \$80,000 and \$117,600, paid over a four-year period. The addition of complimentary recreational passes, donated from



the Town of Marathon, is an added bonus to new physicians and their families so they can experience community-based recreational facilities.

Become the ideal doctor destination

“Brett’s role has been a terrific contribution to a sustainable life for us as a group of physicians,” says Dr. Sarah Newbery, who is also NOSM’s Assistant Dean, Physician Workforce Strategy. “Two of us have been here for 25 years, one for 22, one for 20, and one for 10 years. Brett helps us recruit new physicians, and notably, his role has been key to retention. He enables all of us to focus on what we as physicians can do best, which is working to meet the health care needs of the community, teaching, research and health system work.”



“Establishing contacts and involving the entire community, so they feel a part of the process is of utmost importance.”

Brett Redden



NOSM alumnus helps to end Atikokan's doctor shortage

Rural generalist practices thriving with community's support



A few years ago, Atikokan was a town in crisis having only one full-time and one half time family physician for a population of approximately 2,800. The community relied heavily on a rotation of locums to meet its health-care needs. Today, the town has a stable physician workforce that is able to provide patient-centered care, continuity of care and, importantly, a supportive network for physicians. Dr. Shawn

Minor is a graduate of the Northern Ontario School of Medicine (NOSM) MD Class of 2016 and completed his residency at University of British Columbia in 2018. Originally from Thunder Bay, Dr. Minor and his wife, with their young children, decided to return to Atikokan to be closer to their extended family.



Dr. Minor says it's an ideal place to practise, in part, because of the unique and innovative ways he is personally able to deliver care. "The thing I love most is being able to do home visits with my vulnerable older patients. I've done home visits by bicycle, by motorcycle, I've also walked to home visits during my lunch," he says. "I've done portable ultrasound injections during home visits because the technology is so compact and the geography of the town is easy to navigate, allowing me to go in person. I can go to the hospital in the morning then bike to the clinic after, and I really enjoy this lifestyle and continuity of care. It's amazing."

Since NOSM's inception in 2002, the School's goal has been to graduate physicians and health-care professionals to meet the health needs across the region. With a total of 714 NOSM MD graduates to date, there is still a need for more than 300 family physicians and specialists in rural and remote

Northern communities. Of this group, 126 family physicians are needed, with 86 of these needed in rural communities.

NOSM recently received a **\$210,000 donation from Derek Day** from his late mother's estate—the Estate of Ruth Day—to assist in transforming physician workforce planning in Northern Ontario. This generous donation will support the creation of a new **Rural Generalist Pathway** at NOSM.

Please consider joining **The NOSM Challenge** and donors like **Derek Day** who are making a difference in transforming health care in Northern Ontario. To make a difference, make your gift at nosm.ca/give.

The town of Atikokan, located 200 km west of Thunder Bay, is well known to outdoor enthusiasts as one of the main access points into beautiful Quetico Provincial Park, the "Canoeing Capital of Canada." The name Atikokan, is Ojibwa-Chippewa translated as 'caribou bones' or 'caribou crossing.'



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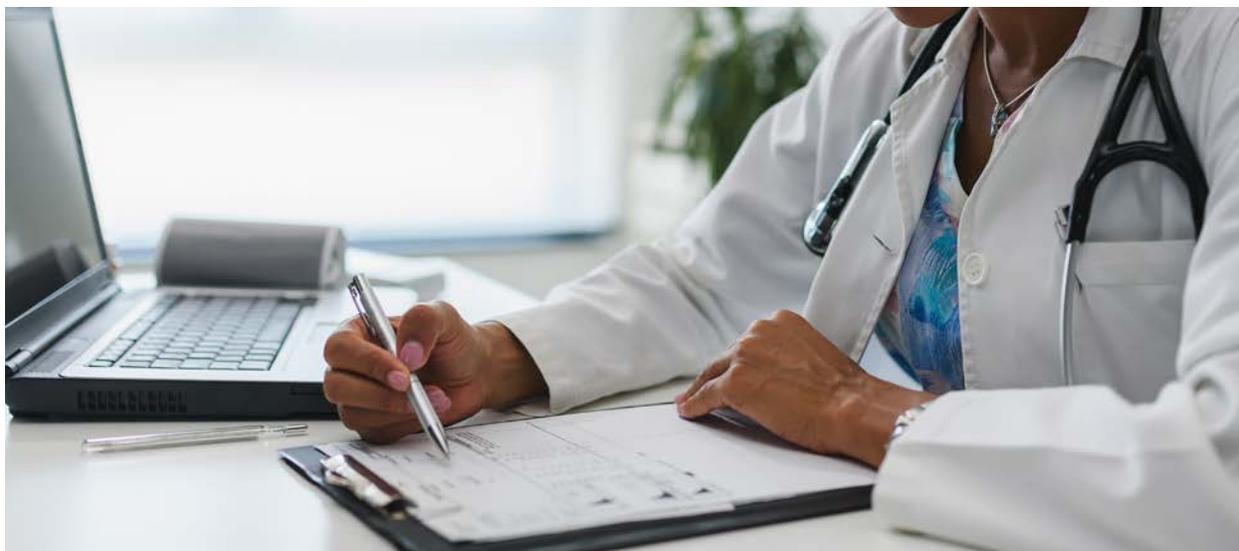
Building a culture of respect and

“I get it all the time. Patients assume I’m there to take away their breakfast tray rather than in my role as their doctor,” says Dr. Naana Jumah, obstetrician-gynaecologist, Regional Cervical/Colposcopy Lead at the Thunder Bay Regional Health Sciences Centre, NOSM Assistant Professor, and clinician researcher. She graduated with an MD from Harvard Medical School in 2008 and completed a five-year residency program in obstetrics and gynaecology at the University of Toronto.

Anti-racism must start with a culture change. Dr. Jumah’s research, which led to the development of a new curriculum in postgraduate education across Canada called **Hearing Our Voices: An Indigenous Women’s Reproductive Health Curriculum**, indicates the importance of self-reflection and taking the time to become aware of one’s personal biases.

Rather than call people out, Dr. Jumah says it is more effective to call people in to encourage self-reflection and have them willingly participate in change. It starts with individuals. To be anti-racist is to address racism when it happens, whether it be in education or on the job.

ACISM
and inclusion at NOSM



At the leadership and policy level, Dr. Jumah says it must be prioritized as an expectation. She recently participated in a conversation about equity, diversity and inclusion with NOSM's Board of Directors. "We talked about diversity not being something that is surprising—it is what we expect. In 2021, we expect to see people with diverse perspectives involved in decision making, who are represented on boards and committees not just for the sake of representation. It isn't just about their diversity. Rather, those individuals have recognized skills and expertise and should not just be represented on diversity committees," says Dr. Jumah.

"NOSM will advocate for intrapersonal, interpersonal, institutional, and systemic mechanisms that organize the distribution of power and resources differently across lines of race, gender, class, sexual orientation, gender expression, and other dimensions of individual and group identity."

**Dr. Sarita Verma, NOSM Dean,
President and CEO**

**Please join us and learn
more about NOSM's Respect
The Difference movement.**



Read more articles like this:

- **Hope is bulletproof.
We at NOSM have hope.**
- **Hearing Our Voices: How
a web-based curriculum is
leading to better health care**



Intentionally addressing **EQUITY, DIVERSITY AND INCLUSION**

The appointment of Dr. Joseph LeBlanc, Associate Dean of Equity and Inclusion at the Northern Ontario School of Medicine (NOSM) is a turning point for NOSM.

Dr. LeBlanc is leading the Office of Equity and Inclusion where it is an accountable, actionable repository for both regional and national calls to action against racism and for leading in the space for and advocacy in diversity and inclusion. A space where key recommendations are honoured, respected and actioned, including NOSM's anti-racism strategy.

"We need an equity and inclusion strategy that is unique to the North, but we must also be accountable and champion the greater national recommendations," says Dr. LeBlanc. "We must honour recommendations resulting from experiences of racism in health care: the **Truth and Reconciliation Commission recommendations**; the recommendations and

calls for justice of the **Missing and Murdered Indigenous Women and Girls Inquiry**; the **Black Medical Students Association of Canada** recommendations (BMSAC); Canadian Francophone health recommendations; national LGBTQ2S+ recommendations; Ontario's accessibility requirements; the **United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP)**; **Joyce's Principle**; **Jordan's Principle**; and more."

Equity and inclusion is directly linked to NOSM's strategic priority to advance social accountability. Dr. LeBlanc says the real challenge lies in having ourselves make a difference. We are a leading medical school in Canada and we graduate the highest number of Indigenous MDs. We can still

COMMUNITY

do so much more, though. NOSM is specifically funded to train doctors. If we collaborate with community partners in this spirit, with health issues and health equity top of mind, we will naturally advocate collaboratively for all of us. Our recently signed **relationship accord with the Nishnawbe Aski Nation** is one example of this. NOSM will build a culture of advocacy, grounded in academic information and data. “To step up into an advocacy role and we need information,” says Dr. LeBlanc. “We need the research capacity and human resources to be able to assert ourselves as health advocates and leaders in the North.”

A concerted whole-school effort will make a lasting impact. “Everybody should be thinking about equity and inclusion in their individual work, however there’s still some hesitancy about what it means. The best-evidence approach is a culture shift combined with a holistic approach including research, policy, people, faculty, staff and learners who are willing to participate and contribute to a better way forward,” says Dr. LeBlanc.

NOSM and Associated Medical Services (AMS) announced the historic appointment of Dr. Darrel Manitowabi as the NOSM-AMS Hannah Chair in the History of Indigenous Health and Indigenous Traditional Medicine. Dr. Manitowabi is working to promote the discussion of the inherent, constitutional, Treaty and international rights of all Indigenous Peoples and communities and the protection of traditional knowledge and medicines from appropriation.

Reducing language barriers and improving access to French-language health services in the North are key priorities that advance NOSM’s social accountability mandate. Opportunities to learn in French are being built into the curriculum, including clinical skills, medical terminology, enhanced language classes, and including l’offre active (Active Offer) programming. Active Offer planning tools and resources encourage NOSM staff, faculty and learners to make Active Offer second nature.

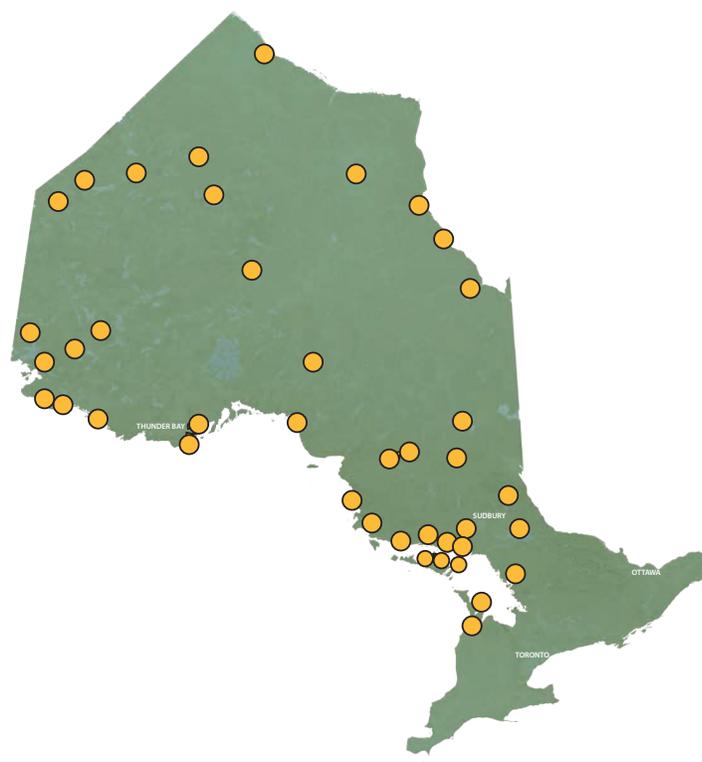
NOSM’s new **Centre for Social Accountability (CFSA)** is a one of a kind centre and the only one in Canada and possibly in the world. The establishment of the Centre will result in improved health of Northern Ontarians while extending beyond NOSM’s commitment to being socially accountable in our education and research programs and advocating for health equity. The CFSA’s integrated approach in the areas of policy leadership and advocacy; research and innovation; education; and community impact will produce a deeper and broader understanding on a range of issues affecting population health outcomes inside and outside the medical system. In this way the Centre’s social accountability research defines and strengthens the School, making NOSM and its partners more effective in the achievement of this critical mission.

Supporting health equity and the health system in Indigenous partnerships

Working together to improve health equity and health outcomes for all people within Nishnawbe Aski Nation (NAN) territory is the aim of a Relationship Accord that was signed by NOSM and NAN on March 23, 2021 during the Chiefs Assembly on Health Transformation and Governance. The accord will guide NAN and NOSM as they move forward in supporting health transformation, with the goal of developing mutually supported initiatives that will build capacity and strengthen the health system within NAN territory.

Nishnawbe Aski Nation territory encompasses James Bay Treaty No. 9 and the Ontario portion of Treaty No. 5, a landmass covering two-thirds of the Province of Ontario. NAN represents 49 First Nations with a total population (on- and off-reserve) of 45,000.

The unfortunate deaths of Brian Sinclair and Joyce Echaquan led to changes to NOSM's MD curriculum. Medical students are learning about systemic racism in Canadian health care, including an overview of the In Plain Sight report, which describes the calls to action for improved cultural safety in health care and efforts to increase Indigenous leadership in health services, regulation, and education.





**Delivering
SOCIAL
ACCOUNTABILITY
Where it's Needed Most**

NOSM Supports Operation Remote Immunity





Operation Remote Immunity was an incredibly complex, unprecedented health-care mission. Considering, also the longstanding structural social inequities such as colonisation, systemic racism, intergenerational effects of residential schools, and the repression of self-determination are significant social determinants of health. Chronic exposure to racism is associated with negative mental health and poorer physical health outcomes. These determinants contribute to more prevalent health issues like high blood pressure, diabetes and cardiovascular disease disproportionately affect First Nations, Inuit and Métis peoples in Canada.

The significance and importance of Operation Remote Immunity cannot be understated. Operation Remote Immunity is the remarkable work of Ornge—Ontario's provider of air ambulance and critical care transport services—and its many partners. Administrative and health-care professionals from the Weeneebayko Area Health Authority (WAHA), the Sioux Lookout First Nations Health Authority (SLFNHA), the First Nations Inuit Health Branch (FNHIB), the Northern Ontario School of Medicine (NOSM), Queen's University, the University of Toronto, and others volunteered their time and dedication.

Vaccination teams traveled to 31 remote Nishnawbe Aski Nation communities and Moosonee to administer the COVID-19 vaccine to eligible residents. The planning, logistics, and execution it takes to deliver thousands of COVID-19 vaccines by air was a remarkable effort to help people stay safe. It was especially critical because so many of these communities do not have equitable access to health care, clean drinking water and food security.



“I volunteered because after 40 years of providing care to Indigenous patients in Northwestern Ontario, I saw this as an opportunity to give something back to this very vulnerable and disadvantaged population. My involvement as a NOSM faculty member was actually going to make a direct difference in these communities. The biggest lesson I took away from the experience is that individual First Nations communities are very far from homogenous and differ from each other sometimes quite dramatically. Secondly, I learned that kindness and generosity are essential features for clinicians to have if they are to be competent practitioners; the medical student who was willing to carry a sleeping infant and the paramedic who went out of his way to buy a child a yoyo after she told him she had asked for one for Christmas but didn’t get it.”

Dr. Bill McCready, NOSM Special Advisor, Senior Associate Dean, and Professor, Thunder Bay

An extraordinary kind of volunteer

NOSM is an award-winning socially accountable medical school and the first medical school in Canada established with an explicit social accountability mandate. Through the School’s new strategic plan, there’s been a renewed commitment to social accountability. NOSM is committed to addressing the health needs of all Northern

Ontarians and improving access to quality care through research and education—education that often takes place in the very communities being vaccinated through Operation Remote Immunity.

“I got my feet wet in the Far North fighting forest fires with the Ministry of Natural Resources. During that time, I had the good fortune of being taken under the wing of the local First Nations peoples I worked alongside. It was a huge honour and privilege to be able to offer and provide this little piece of health-care service to remote First Nations— the ‘first’ people who have historically been prioritized ‘last.’ One of the highlights of my deployment was a home visit, where I got to draw up the vaccine which had been flown thousands of kilometres and gently administer it to an Elder in the comfort of her living room. In the time I monitored her, she told me her life story and details of family referring to the pictures on her walls. Needless-to -say, she was feeling fine, and I felt honoured.

Beth Crawford, Second-year NOSM medical student, Sudbury



An extraordinary kind of training

Prior to their first deployment, volunteers were fully vaccinated and completed mandatory training on Moderna COVID-19 vaccine storage and administration. Through Ornge’s learning portal, volunteers completed mandatory training on fixed-wing aircraft safety, operational chain of command, how to dress appropriately for survival, and the use GPS technology in case of emergency.

With most volunteers, learning how to use GPS or call an SOS may have been unsettling. For these volunteers, it made the adventure even that more exhilarating.

Another eight hours was spent on mandatory cultural training through the Ontario Indigenous Cultural Safety (ICS) Program. This cultural safety training highlighted the legacies of colonisation that continue to affect health-care accessibility and outcomes for Indigenous peoples and communities.

Each Saturday, vaccination teams would deploy to the staging area. Depending on where the volunteers were located, they may have flown to the community where they would be based for the week.

Sunday morning was dedicated training for the specific deployment and communities. The first order of the day was a COVID test and a reminder to observe social distancing, masking and hand-washing or sanitizing throughout the week.

“I was very excited to read about Operation Remote Immunity last January, and I applied immediately. This project is history in the making and I am very proud to have been a part of it. An additional bonus was meeting other NOSM faculty and learners, as well as Ornge staff and nursing. Our team quickly became a cohesive unit and I am confident we will keep in touch. I thank NOSM for being a part of this important project. The memories will last a lifetime.”

Dr. Stacy Desilets, Family Physician and NOSM Associate Professor, Temiskaming Shores

The longest discussion in this full-day of preparation was focussed on vaccination confidence and hesitancy. The volunteers going into the communities were keenly aware that First Nations peoples had reason to be skeptical or untrusting of the health-care system knowing they’ve often experienced or witnessed systemic neglect and systemic racism.

COMMUNITY

"I did both my undergraduate medical education and postgraduate training in family medicine at NOSM so when the opportunity to become involved in Operation Remote Immunity came up, it seemed like the perfect initiative to use a variety of the skills and training I have received during my medical education in Northern Ontario. It was a privilege to collaborate with allied health-care professionals and community members to provide care to remote Indigenous communities. The entire experience, including the extensive preparation for the deployment as well as the in-community experience in Kitchenuhmaykoosib Inninuwug, was a fulfilling, eye-opening, and an educational experience that I will remember and cherish forever."

Dr. Alexandra Eaton, Second-year NOSM family medicine resident, Sudbury

An extraordinary clinic

There's no doubt about it, the heart of these vaccination clinics were the community members themselves. In each community, there are multiple stories about how community members came together to set up clinics in school gymnasiums, health-care centres or other facilities that were easy to access.

"It has been an honour to assist in one remote community's fight to protect themselves from the devastating effects of COVID-19. I suffered the loss of its first community member from COVID-19 during our second clinic in the community. The impact and reverberations were felt throughout the community and by all of the exceptional team sent by NOSM and Ornge, as well as the exemplary Canadian Rangers team who are also community members."

Dr. Jonny Grek, Family Physician and NOSM Assistant Professor, Kenora

"I am thankful for the opportunity to visit North Spirit Lake and Kingfisher Lake as part of Operation Remote Immunity, bringing the Moderna vaccine and with it, hope and safety to these isolated Indigenous communities. I worked alongside a team of amazing people, shared dozens of conversations with the Elders and younger community members and returned home after the 12-hour days filled with gratitude, knowing I helped to make a difference during this pandemic."

Jacalyn Cop-Rasmussen, Manager, Academic Health Sciences Network, Thunder Bay

Dr. David Marsh, NOSM's Associate Dean of Research, Innovation, and International Relations, was part of the team that administered the first dose of the COVID-19 vaccine in Kitchenuhmaykoosib Inninuwug First Nation. You can hear about his experience in this **interview with CBC Radio**.

303 responses
to the expression of interest.

22 NOSM teams
deployed.

60 volunteers
selected from NOSM.

Teams with NOSM volunteers deployed to 17 communities: Bearskin, Deer Lake, Eabametoong, Fort Severn, Kasabonika, Kashechewan, Kitchenuhmaykoosib Inninuwug (Big Trout Lake), Martin Falls, Mishkeegogamang, Muskrat Dam, Neskantaga, North Spirit, Sachigo, Slate Falls, Wapekeka, Webequie, and Wunnumin.



GETTING IN

the journey of admissions

Getting into the Northern Ontario School of Medicine is a challenge being made more accessible by the creation of new pathways to medical school for underrepresented candidates from rural, remote, Indigenous and Francophone communities, and those underrepresented by race, diversity and socioeconomic status.



“What is rarely spoken about, is that it’s not uncommon to apply several times to get in,” says Dr. George McKay, NOSM Alumnus and emergency physician at Thunder Bay Regional Health Sciences Centre. “If you want to get into medical school, and you don’t get in on the first try, don’t get discouraged. It is very competitive,” says Dr. McKay. “Keep working hard, because hard work comes with the territory,” says Dr. McKay.

Dr. McKay began his health-care career as a nurse. He says his role model was his close friend’s father, a prominent physician in Thunder Bay, who also got his start in nursing at a time when there were very few male nurses. For Dr. McKay, nursing fueled his interest in medicine and became his pathway to medical school.

He completed the MD program and residency in Family Medicine and Emergency Medicine at NOSM. Dr. McKay says he enjoys being a mentor to candidates who have the qualities of well-

roundedness, hard-working and adventurous. “Some people need convincing, and they need mentors. I think the school is doing an excellent job recruiting medical students from rural and remote communities in the North. The majority of the medical students in my class and in years above and below me were from smaller communities in Northern Ontario. If you want to apply, I encourage you to learn about the pathways to medicine,” says Dr. McKay.

Miriam Cain, Director of Admissions and Learner Recruitment at NOSM, says new pathways are innovating quickly with the use of interactive tools aimed at connecting candidates to the School and targeted programs leading to the MD program. “The biomedical biology program, for example, will have a special stream or certificate specifically for rural and/or Indigenous pathway students. We’re having conversations about joint programs, mentorship, and special programs to prepare candidates.”

Dr. McKay says the School’s greatest strength and the reason he applied was because NOSM offered the opportunity to complete all of his studies at home in Thunder Bay. “That is why I am still practising in the community. I’m very fortunate to have completed my medical education at home. It’s difficult to say if I would be here today if I wasn’t able to access all of my training through NOSM.”

Read more on this topic:

- **Indigenous Health Practitioner Pathway**
- **Admissions at NOSM**
- **Hear Dr. George McKay address CampMed students last summer**
- **The competition to get into medical school**



Surgical resident says NOSM is a leader in clinical education innovation

Dr. Logan McGinn, NOSM alumna (MD 2015), says a key strength of the Northern Ontario School of Medicine is hands-on clinical opportunities.

"I can say—without a doubt—that NOSM is one of the strongest medical schools in the country. As medical students, we start off learning from multidisciplinary teams in clinics and we go on placements early. We quickly start seeing standardized patients and learning about the health-care environment," says Dr. McGinn, currently a fourth-year resident in Plastic and Reconstructive Surgery and MBA graduate of Ivey Business School at Western University.

"Nobody enters their third year at NOSM having never seen a patient. By that time, we've interacted with multidisciplinary teams of people in health care. A lot of other medical students don't gain that valuable level of interaction early, they don't have these higher comfort levels and tangible medical skills."

Dr. Logan McGinn

"If you want to have opportunities in surgery, NOSM is an exceptional place to train. The School offers deliberate practice opportunities and that's how it sets itself apart from other medical schools," says Dr. McGinn. "You gain more knowledge, skills, and chances to make decisions in rural settings. I also see this in MDs from rural medical schools like Prince George campus at the University of British Columbia and from the University of Saskatchewan. The smaller medical programs have more of a world focus and wider

scope of practice. The students gain more competency."

For Dr. McGinn, she says her NOSM education helped set her apart early as a surgical resident. She felt confident in her abilities based largely on the clinical skills the School's faculty in rural placements had provided. "In Northern Ontario, some of the smaller communities don't have resident doctors, and physicians and the community appreciate that you are there to offer care and to learn. Faculty appreciate you, are dedicated to teaching you and there is no hierarchy of residents who come before you," she says.

For prospective medical students, Dr. McGinn says NOSM should be among their top choices of schools to apply and accept an offer from. She attributes her ability to specialize in medicine to the fundamental experiences and opportunities she gained early on.

"I just adored my time at NOSM. The School is a huge part of the success that I have today because it made me an extremely competitive candidate for my surgical specialty. I was able to stand out immediately simply because I had more practical experience," Dr. McGinn says.



**Community placements are
a highlight of our DCEL program**

GETTING OUTSIDE THE FOUR WALLS

A sign of the School's resilience and innovation before and during the pandemic

The Northern Ontario School of Medicine is one of the only medical schools in Canada that delivered in-person community placements for medical students during the pandemic. Small, nimble and somewhat isolated, NOSM was quickly able to pivot to placements for second- and third-year medical students through the support of NOSM community partners and faculty members.

"It took a coordinated effort to make these placements happen," says Jeff Bachiu, NOSM's Administrative Director of Curriculum and Planning. "COVID-19 meant so many unexpected changes to the MD curriculum, and it's just not possible to do this in large urban centres during the pandemic. Because we are fairly isolated in the North, NOSM faculty saw the value of the

learning opportunities and decided to move forward, making it optional for students to participate. Strict self-isolation with no contact with anyone for two-weeks prior to traveling to the placement community was required."

Experiential placements are critical in preparing medical students for their Comprehensive



Integrated Community Experiences, known as ICE placements at NOSM, were created to offer in-person learning for students to gain clinical experiences with faculty and allied health professions in small communities. These communities may be rural, remote, largely Francophone, or First Nations.

Community Clerkships, where they spend the entire eight months of their third year in one of 15 Northern communities in clinics or hospitals. “The majority of students expressed wanting to go, and if they missed out on their community-based placement, they felt they wouldn’t have enough experience going into year three,” says Jeff.

For the safety and wellbeing of First Nations communities, the first-year Indigenous community placement in both 2020 and 2021 were moved to a virtual format. Prior to the pandemic, medical students would have spent four weeks living in First Nations communities to learn about culture and history and gain first-hand an understanding of health issues facing Indigenous peoples.

“NOSM will replace any missed ICE placements with experiences this summer, ensuring students will be prepared for their upcoming intensive clinical placements,” says Jeff.

“It was definitely a challenge, but together with our students we found a way to make it happen. We focused on keeping everyone safe while we ensure educational needs are being met. When the pandemic hit in March 2020, fourth-year students were able to complete their placements later in April and still graduate—which was an accomplishment in itself. Third-year students were able to transition into year-four with delayed clinical placements starting in July and are expected to graduate on time in June 2021.” “NOSM hasn’t skipped a beat, really,” Jeff says.

He emphasizes the determination of NOSM staff, faculty, community partners, and the resiliency of the students for the success of the 2020-2021 ICE placements during the pandemic. “Despite delays, and shifting to virtual academic sessions, and minor changes, we’ve managed! And that’s no small feat,” says Jeff.





NOSM alumna leads INNOVATIVE VIRTUAL EMERGENCY DEPARTMENT

The virtual emergency department (ED) at Health Sciences North (HSN) in Sudbury was the first of its kind in Northern Ontario. It is an innovation in health care that is improving access and breaking down barriers—specifically for those who fear the emergency room, those without access to technology, and for people in rural and remote surrounding areas who would be forced to travel long distances for emergency care.

“The pandemic really pushed innovation in medical care. It was a huge awakening for our health-care system, especially for the emergency department,” says Dr. Renée-Anne Montpellier, NOSM alumna (MD 2012) and Assistant Professor, emergency physician at HSN, and third-year fellow in emergency medicine.

The virtual ED also led to important community partnerships with First Nations communities in the Sudbury district. “We’ve formed a partnership with the Shkagamik-Kwe Health Centre to reach the needs of our Indigenous community with a streamlined communication at the centre, where a patient can call directly with a nurse,” says Dr.

Montpellier. “We’re also going to be partnering with the Greater City of Sudbury on a virtual hub initiative that offers central locations in apartment buildings that will serve as virtual ED access points for those who don’t have access to technology.”

The virtual ED has also been able to better serve the elderly, thanks to the help of their adult children who are supporting their parents with devices and set up. This avoids having people go in person, or alone due to COVID restrictions, and potentially exposing them to germs or viruses in the ED.



For those who do need care, emergency physicians in the virtual ED are able to order tests, and in some cases treat people as outpatients on the same day. “It avoids crowding in our emergency department, but people still get that great care, so it’s been going really well,” she says.

She credits NOSM for the skills she learned in advocacy and leadership, which helped her lead the virtual emergency department initiative. “If it weren’t for the faculty, the professors at NOSM who guided me to where I am today, and mentored me, I wouldn’t be getting involved in these projects and pushing forward to innovate in medicine,” says Dr. Montpellier. “As medical

“The world is constantly changing and our demographic of patients is constantly changing. The number of people accessing the virtual ED since the start has been climbing, and I’d say doubling week-to-week. People are using it for different reasons, so we’re capturing different populations. There are some who don’t want to visit in person out of fear, and others who we can help and avoid an unnecessary visit.”

Dr. Renée-Anne Montpellier



students, we are wide-eyed and don’t really know where we are headed. Those mentors help us see the difference we can make and show us that we can push through and achieve success. It’s important.”

The Virtual Emergency Department at Health Sciences North opened on December 15, 2020. It is open from 10:00 a.m. to 6:00 p.m, Monday to Friday offering same-day appointments. People can start requesting appointments at 7:30 a.m. and will receive a call within 30 minutes to schedule their appointment. For more information or to reach the Virtual Emergency Department **visit the HSN website.**





Innovation in times of crisis

Faculty created curriculum that challenges students to advocate for impactful change

As the world faced the unprecedented health crisis of COVID-19, faculty at the Northern Ontario School of Medicine made pivotal changes to its fourth-year MD curriculum. At a time when students were not able to work on the frontlines, NOSM faculty worked quickly to introduce a new curriculum that focused on building advocacy leadership skills that would lead to impactful change.

“The new curriculum provided students with the opportunity to pursue topics that matter to them while having real, positive impacts on patient care and population health in Northern and rural contexts,” says Dr. Erin Cameron, NOSM Assistant Professor. “Much about medicine is learning how to advocate for individual patients or advocating for change at the institutional and community levels.”

The new curriculum was broken into parts: academic sessions related to the pandemic; Research and Advocacy Pandemic (RAP) Rounds, a forum for discussing emerging evidence, clinical practices, and public health strategies around

COVID-19; and, the Northern and Rural Health Advocacy Projects, where students identified an issue and undertook an advocacy project to address the issue.

“The idea was to learn from and through the pandemic in real-time, with a focus on our Northern Ontario setting. As a socially accountable medical school, this new addition to the curriculum provides students with more opportunity to be health advocates. It was a team effort and is something we will continue for years to come.”

Dr. Erin Cameron



Advocacy Projects

Naloxone North

As the opioid death rate continues to rise in Northern Ontario, fourth-year medical students at NOSM created an innovative app that improves access to Naloxone, a drug used to counter the effects of opioid overdose.

Jordan Law, MacKenzie Ludgate and Owen Montpellier developed the **Naloxone North** app, a free and confidential service that ships a Naloxone kit right to your door. The Naloxone North app includes educational information about the drug as well as a detailed instructional video and approved information about the safe administration of Naloxone.

“This app offers privacy and access to people who want to have a Naloxone kit on-hand, but who are uncomfortable facing the stigma or fear associated with asking for one in person at a pharmacy or clinic,” adds Owen Montpellier, another fourth-year medical student who worked on the app.

“The Naloxone North app also provides improved access for those living in remote, isolated or rural communities in Northern Ontario,” says Jordan Law, another fourth-year medical student and pharmacist who worked on the app. “As long as you have an Ontario Health card, you can order the kit through the app and request that it be shipped to your preferred location.”

The students followed the guidelines of the **Ontario Ministry of Health’s Naloxone Program** to meet the applicable policy requirements for safe Naloxone administration, education and distribution. The app has also been translated into French and Cree, says Dr. Marion Maar, Associate Professor of Medical Anthropology and faculty advisor on the project.

“The app provides a simultaneous opportunity to conduct research that will determine whether it is an effective way to support opioid recovery in Northern Ontario. I’m proud of the innovative ideas that NOSM students have implemented to address some of the longstanding issues in our region. During a difficult time of change, they embraced a new curriculum and are indeed making an impact.”

Dr. Marion Maar

EDUCATION

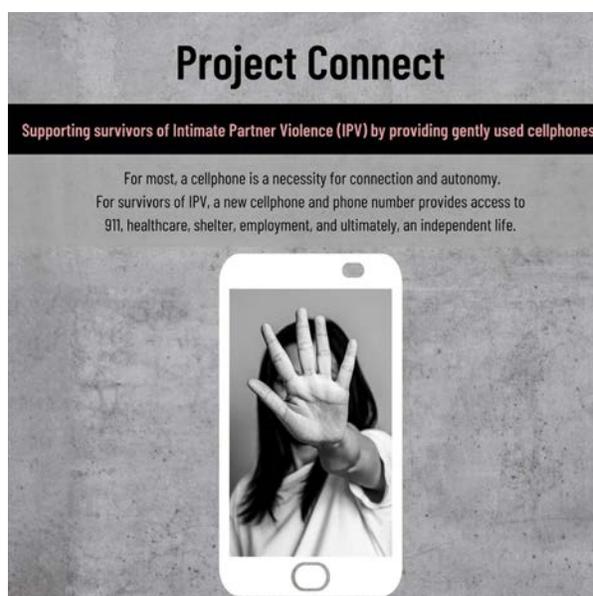
A NOSM research team has received funding from the **Canadian Institutes of Health Research (CIHR)** to study recovery in the opioid crisis in Northern Ontario. They will leverage their work to support ongoing development of the Naloxone North app and study its uptake in rural, Francophone and Indigenous communities. The research is being conducted in collaboration with First Nations and led by Drs. Marion Maar, Darrel Manitowabi, Lorrilee McGregor, and Diana Urajnik, in partnership with the medical students. The medical students would like to thank Dr. Nicholas Fortino, emergency physician at Health Sciences North, for his guidance with the app.



Project Connect

Another recent project with a positive impact is **Project Connect**. A group of students collected gently used cell phones to be repurposed and given to survivors of intimate partner violence.

Rebecca Bourdon, a fourth-year NOSM medical student, spearheaded the local Project Connect effort. She says the new curriculum made a lasting impact on her. “As future health-care providers, it is important to remain vigilant in observing, and active in addressing, any gaps in healthcare as they occur, especially those that affect unfairly disadvantaged and vulnerable groups who may be unable to adequately advocate for themselves.”



“The advocacy curriculum allowed us to uncover disparities in public health, particularly those either created or compounded by the pandemic. It gave us the opportunity to leverage our position to support and lobby for ways to address these inequities. This invaluable experience has ingrained in me the importance of being a health-care advocate, a role I will continuously strive to assume as a future physician.”

Rebecca Bourdon



The goal of the advocacy projects is to complement the existing curriculum of the NOSM MD program, which is a mandatory academic requirement for the Northern and Rural Health course and Social and Population Health course. Other fourth-year medical student projects include new apps, educational infographics for patient education, advocacy letters to Ministers and Members of Parliament and action plans to support mental health.

The pandemic provides a rich teaching and learning environment that is ever evolving," says Dr. Cameron. "Students received academic credit for undertaking the advocacy activities and making a difference in Northern Ontario."

Read more articles on some of NOSM's many advocacy projects:

- **Northern medical school reacts to pandemic with community advocacy projects**
- **NOSM students launch app to help people obtain naloxone and train them to administer it**
- **Naloxone North : nouvelle application pour aider dans la crise des opioïdes**
- **Innovation in times of crisis: How NOSM faculty created curriculum that challenges students to advocate for impactful change**
- **Innovative app created by NOSM medical students aims to reduce opioid-related deaths**
- **NOSM med students start sustainable menstrual-care products campaign for Fort Severn**



Master of Medical Studies program addresses Northern health issues

NOSM's new Master of Medical Studies (MMS) program is breaking new ground by tackling health-care problems in the North. The program provides foundational research skills for physicians who want to develop a robust academic approach to address pressing health-care questions.

"Our goal is for learners to focus on health-care problems to improve the health of all people in Northern, rural, and remote communities. What physicians gain are the skills to acquire grant funding, obtain ethics approval, develop a research question and appropriate methodology, complete the research study, and finally write and present the results at conferences and in publication," says Dr. Alain Simard, NOSM Assistant Dean, Graduate Studies and Associate Professor.

The program is tailored to physicians who are working in the North and able to complete the program remotely with a flexible schedule.

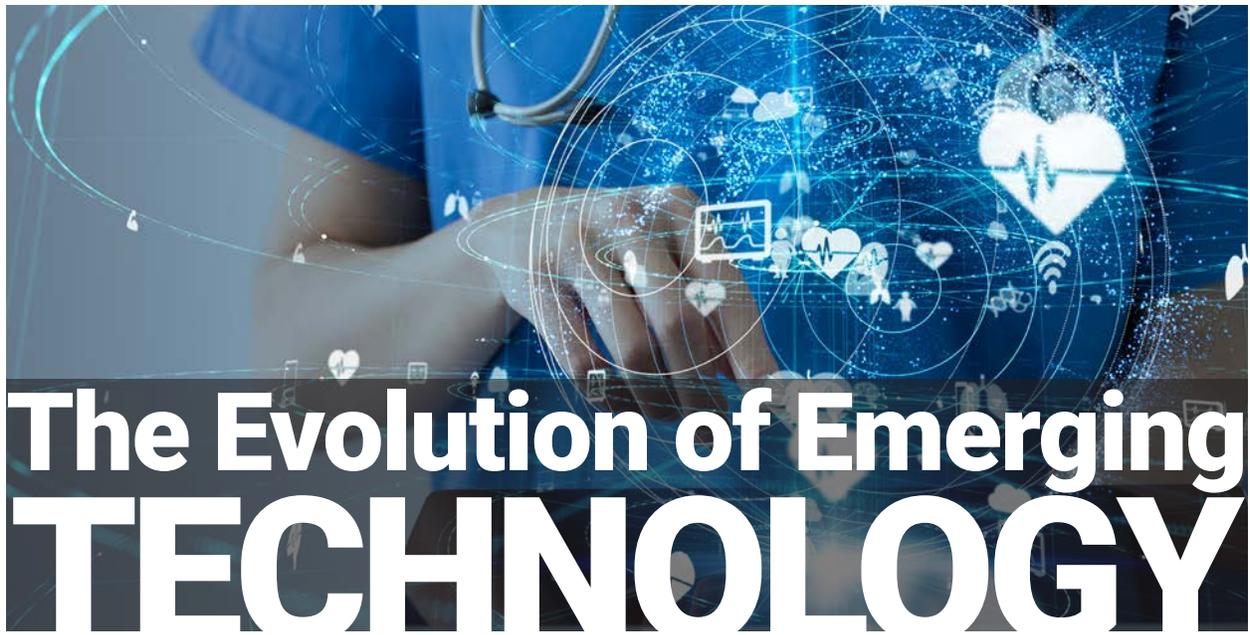
MMS Study: Improving pain management for Northern trauma patients transported by air

In rural and remote areas of the North, when serious accidents happen causing trauma air ambulance is called to transport patients to hospital. For Dr. Sabrina Slade, most critical is the extreme pain many patients must endure during lengthier air transport—an experience she hopes to improve.

Dr. Slade is a second-year orthopedic surgery resident at NOSM and a graduate of the MD Class of 2019 at Queen's University. She currently works part-time in the emergency department at Thunder Bay Regional Health Sciences Centre. Dr. Slade is one year into the MMS program, working on her thesis titled "Alleviating pain for trauma patients transported by air in the North." She recalls her firsthand experiences with emergency trauma patients transported by Ornge, Ontario's provider of air ambulance and critical care transport services.

Working under the supervision of emergency physicians and NOSM faculty members Drs. David Savage, Rob Ohle, Sean Moore, Russell McDonald, the study will also cross-reference air transport pain management techniques in the US, Australia and New Zealand where air transport medics have a progressive scope of practice.

Visit the NOSM website to learn more about the **Master of Medical Studies program**, including a flexible program schedule which allows for full- and part-time options for learners to complete between two to six years. Applications are open until May for a September 2021 start.



NOSM's Clinical Skills Lab

Harvey started his career at NOSM in 2005 with the inaugural class as a proven simulation system to teach cardiac assessment skills that transfer to real patients.

For students, he offered realistic learning opportunities and put NOSM on the map as Canada's first medical school to have a cardio-respiratory mannequin in its human-like simulation collection.

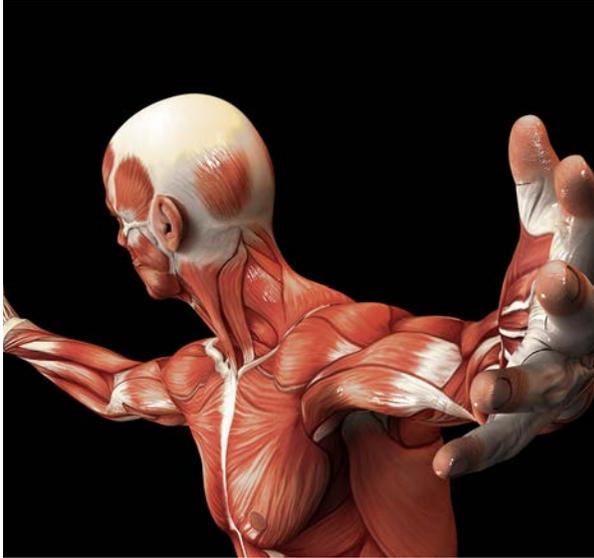
"A unique and important feature of Harvey was his magnetic stethoscope," says Lee Shewchuck, Educational Lab Coordinator at NOSM. "When placed at different positions on the rib cage, the sounds of the abnormalities of the separate heart valves and breath sounds could be heard."

Among his strengths was the ability to allow an entire class to hear heart sounds using infrared stethoscopes. Harvey impressed even more when the labs were upgraded to include video conferencing and Harvey's heart sounds were then broadcast over the audio system.

Remembered for his contributions as the School's first state-of-the-art heart simulator, Harvey retired in 2020 and has been replaced with a smaller, more portable, higher-functioning cardiac simulator called SAM II.

Harvey's farewell can be seen on NOSMtv.





BodyWorlds exhibit specimens

Another exciting development in NOSM's educational resources are the plastinated cadaveric specimens with pieces from world renowned **Von Hagens Plastination** in Germany, well known for their **BodyWorlds exhibits**. These are one-of-kind teaching specimens which do not require refrigeration, are odorless, and with proper handling can be touched with bare hands.

"The specimens are very life-like," explains Shewchuck. "The dyes used mimic fresh muscle tissue very closely. The way they are plastinated allows for the muscles and structures to be posed and frozen in place to better reveal the adjacent anatomical structures and major nerves and vessels can be prominently displayed and easily located."

What's up next?

"The emergence of technology, artificial intelligence and robotics needs to be integrated into the training of our students and residents and lifelong learning for our faculty," says Dr. Sarita Verma, Dean, President and CEO of NOSM.



Wet lab renovations and upgrades

NOSM's anatomy labs are primarily used by the medical students, so additional cadaveric storage space, dissection tables and a more functional floor space mean the lab could be a valuable space for residents as well. These major improvements allow the space to accommodate twice as many students during demonstrations and rehearsals of clinical procedures and surgical skills. She says the renovations enrich the learning experience.

"The labs at NOSM have been upgraded to open spaces that include stainless steel cadaver tables that can easily be moved, where learners and facilitators are able to maneuver with ease at different angles," says Tamara Boyd, Administrative Manager of Educational Resources at NOSM. "Key upgrades also include hands-free washing stations, stainless steel counters and cabinets for sterilisation, non-permeable seamless flooring, proper cadaveric refrigeration storage and ventilation."

A woman with long brown hair and bangs, wearing glasses and a colorful patterned sweater, is smiling. The background is a blurred outdoor setting with trees.

NORTHERN ONTARIO DATA TO SHAPE UNIQUELY NORTHERN PRIMARY CARE RESEARCH

Dr. Barb Zelek and a team at the Northern Ontario School of Medicine are building Northern Ontario's first research network that includes datasets containing de-identified primary care patient data which can be made accessible to Northern primary care researchers, clinicians, and organisations.



It's the first health information platform of its kind in the region, and the first to prioritize Indigenous data sovereignty in its operations. "We will have an Indigenous data project management lead ensuring Indigenous data sovereignty principles are upheld in partnership with communities and to increase inclusive, equitable primary care research capacity at NOSM," says Dr. Zelek, NOSM's Division Head of Clinical Sciences and practising rural generalist family physician in Marathon. "For Northern physicians and primary care researchers, it means accessing a Northern primary care database to help answer your clinical and research questions, as well as support practice-based quality improvement initiatives."

"It's an opportunity to do applicable Northern-focused research using data from the North to improve health outcomes in the North," says Dr. Zelek. Fittingly, the project is named NORTHH — the Northern Ontario School of Medicine (NOSM) Research Toward Health Hub.

"We want Northern physicians and their practices to join the NORTHH network. It's about quality improvement and many physicians have expressed an interest in wanting to work with NORTHH. Our network is currently seeking clinicians and researchers who are both interested in providing data for and access to this database to support their own practices and inform better care in Northern Ontario. We will also be able to inform medical education at NOSM by using the data to know what health conditions patients are presenting with in primary care."

Dr. Barb Zelek



The NORTHH team is working in partnership with the **POPLAR Network** (Primary Care Ontario Practice-based Learning and Research Network) and **UTOPIAN** at the University of Toronto to create Northern Ontario datasets. Created in 2013, UTOPIAN is an established practice-based research network in Toronto, created as the “living laboratory that partners front-line care providers with academic researchers,” and supports NORTHH by providing a robust and secure computing system. The NORTHH network has its own dataset within UTOPIAN that is coordinating the provincial POPLAR Data Platform.

Each of the provincial network’s datasets feed into the POPLAR Network, Ontario’s primary care practice-based learning and research network, that NORTHH is co-leading with regional networks from across the province. “Much funding in research still goes to secondary and tertiary hospital settings. NORTHH offers an equal opportunity for primary care providers to conduct research that is also accessible to practices across Northern communities.”

It is part of wider regional, provincial and national collaborations all aiming to strengthen primary health care. “If you have bigger research questions, you’ll also gain access to the larger pool of primary care data in Ontario and nationally. It’s also an opportunity to gain new qualifications including being able to access patient data and outcomes, using data presentation tools available through the networks, or for example, understanding common diseases, or comparing your population to others.”

“The greater benefit of joining NORTHH is connecting with NOSM’s excellent team of researchers and access to our supportive community of practice in Northern Ontario.”

- **Learn more about NORTHH.**
- **Watch more about the NORTHH.**
- **Learn more about Marathon Family Health Team joining NORTHH.**

Leveraging research partnerships to improve planning in the North

What types of services do Northern generalists provide most and what's in highest demand? Prenatal care? Addiction care? Palliative care?

These are questions being explored by clinician-researcher Dr. David Savage, NOSM Assistant Professor. He is the co-founder of the Northern Network of Emergency Research (NNER), a group formed to support collaboration across Northern Ontario, and an emergency physician at the Thunder Bay Regional Health Sciences Centre. In collaboration with **ICES**—an independent, non-profit corporation focussed on the study of health informatics for health services research and population-wide health outcomes research in Ontario—and with support from **Northern Ontario Academic Medicine Association** (NOAMA), Dr. Savage's research uses the Ontario Health Insurance Plan (OHIP) billing database to determine the services provided most often.

Dr. Savage and his research team have identified 18 OHIP billable services being offered by family physicians across Ontario. Also, an external

adjunct professor at Lakehead University, Dr. Savage is working closely with computer science colleagues at Lakehead University. Together, they've created "sentinel billing codes" for the services that are being offered most frequently. The hope is that these codes inform big data sets that may help inform health policy and health human resource needs in the North. The findings may also help innovate medical education at NOSM.

"One of our primary goals is to improve Health Human Resources in the North. This study could help inform the School about the skills and training medical learners will need most as physician generalists practising in the North, including emergency medicine, mental health, addictions medicine and palliative care skill sets," says Dr. Savage.



The study also aims to highlight the most common combinations of physician services being practised in the North. “We know that there are clear trends in terms of the number of services physicians are providing in the North,” says Dr. Savage. “For example, we know that physicians in Northern Ontario provide more overall services than physicians in the South.

Dr. Elizabeth Wenghofer’s research at Laurentian University has clearly shown this trend. It is the combination of services that is interesting and important to understand for health human resource planning,” says Dr. Savage.

The next step for Dr. Savage’s team is to identify the specific and required skill sets that Northern and rural generalists bring to the table. He says processing, analyzing and interpreting big data sets requires a collaborative approach to research. He values his research partnerships

with ICES, NOAMA, Laurentian University and Lakehead University, and he encourages other clinician researchers to also build academic research teams.

“As physicians we have very specific training and bring knowledge about the health-care system however, there are researchers with other skills that are equally important. If you are serious about doing impactful research, partner with academic researchers at our Northern universities or colleges. My research partners—both clinical and academic—enhance and enrich my own research program.”



Dr. Teresa Naseba Marsh, NOSM Assistant Professor, Addiction Medicine, has created and established programs on approaches to trauma-informed care and self-care for learners, health professionals, Indigenous professionals, caregivers, educators, community members and survivors of intergenerational trauma.

“Empathy and compassion are an integral part of social accountability. Elders talked about the compassion that medical students and doctors should understand and practice,” says Dr. Teresa Marsh. To be socially accountable in the North, she says Elders emphasized the need to prioritize the seven grandfather teachings: love, truth, honesty, courage, respect, humility, and wisdom.

Her programs blend Indigenous and Western treatment models through a Northern lens, emphasizing storytelling, human connection, workshops and healing circles.

Dr. Teresa Marsh is contributing socially accountable, culturally appropriate healing

approaches to trauma, addiction, intergenerational trauma, multiple losses and oppression. As a registered and active psychotherapist, she says survivors of trauma often report that they are plagued by intrusive thoughts, and destructive behaviours.

In her book, *Courage of a Nation*, Dr. Teresa Marsh describes the self-determination of Indigenous healing. She cites an experience at an Indigenous healing circle in Ahousaht, on Flores Island in British Columbia, where the group formulated its own prevention strategies and solutions for addiction and trauma through group discussion amongst community members, guidance from Elders, and group consensus decision-making.

“The group felt safe and validated. When we serve others, and we do the work together our pain becomes more bearable. When we bear witness to each other’s suffering, magic is created, and I experienced this as a collective healing. The most significant were changes in spirituality and connection,” she says.

In 2021, Dr. Teresa Marsh taught NOSM medical students in a Case-Based Learning (CBL) session. In her deep awareness and understanding of trauma, vicarious trauma and burnout, she ensured that she created a safe place and atmosphere for students to express their challenges and concerns during COVID-19.

The medical students felt she was a fantastic facilitator. “I really enjoyed and feel lucky to have been in her group. Thank you for sharing your positivity and being supportive to all members of the group!”

“Dr. Teresa Marsh was the best CBL facilitator that I have had yet. She cared deeply about the content that we were studying but she also cared deeply about the students in our group. It is always nice to have a facilitator who practises in the area that is being studied as it aids to the content.”

Read more about this topic:

- **Dr. Teresa Marsh’s research and programs.**
- **Blending Aboriginal and Western healing methods to treat intergenerational trauma with substance use disorder in Aboriginal peoples who live in Northeastern Ontario, Canada**
- **The Application of Two-Eyed Seeing Decolonizing Methodology in Qualitative and Quantitative Research for the Treatment of Intergenerational Trauma and Substance Use Disorders**
- **Indigenous Healing and Seeking Safety: A Blended Implementation Project for Intergenerational Trauma and Substance Use Disorders**
- **Impact of Indigenous Healing and Seeking Safety on Intergenerational Trauma and Substance Use in an Aboriginal Sample**
- **The Sweat Lodge Ceremony: A Healing Intervention for Intergenerational Trauma and Substance Use**

Since 2005, NOSM Faculty Members Have Published

3,522

SCHOLARLY
ARTICLES

321

UNIQUE FACULTY
PUBLICATIONS IN 2020

A donor who made a difference

Dr. Hugh Robertson explains what sparked the largest individual donation in NOSM's history

Dr. Hugh Robertson is a force in the field of radiology. He is Emeritus Professor of Radiology at Louisiana State University Health Sciences Centre and Clinical Professor of Radiology at Tulane University Medical Centre in New Orleans.

And yet, some of his earliest experiences practising in Northern Ontario have remained dearest to him, inspiring his \$1.2 million gift to the Northern Ontario School of Medicine. It is the largest individual donation in the history of the School.

He recognized the need and the opportunity for a **Centre for Social Accountability** at NOSM. He says the timing of the gift had much to do with his intimate understanding of the challenges of remote medicine, now coupled with the pandemic.

The value of rural, remote Residency

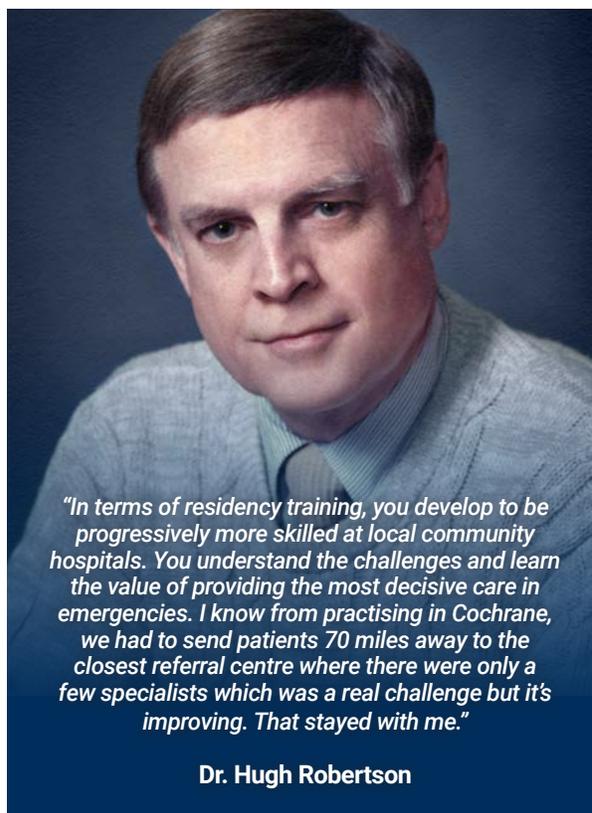
"I think for the students at NOSM who are interested in providing family medicine that this is a real opportunity to advance knowledge in that area. I've met several physicians over the years, and many of the most notable were those I met in rural practices."

He describes the value of being a medical resident in Northern Ontario for his opportunities to explore the specialties and expand his career into radiology.

"When I think of rural medicine, I think 'large scope of practice' you're talking about everything from high-risk obstetrics to dealing with rare disease. When covering for family physicians as a locum it's such a unique experience. I learned very quickly that I had to be as knowledgeable as possible on all aspects of medicine."

"I have great respect for the people of the North. They have less access to health care than other parts of Canada and yet, I noticed that people had a great fondness for life in the North."

To learn more visit **NOSM News**. If you are interested in contributing to the future of medicine in Northern Ontario, contact NOSM's **Advancement Team** or visit nosm.ca.



"In terms of residency training, you develop to be progressively more skilled at local community hospitals. You understand the challenges and learn the value of providing the most decisive care in emergencies. I know from practising in Cochrane, we had to send patients 70 miles away to the closest referral centre where there were only a few specialists which was a real challenge but it's improving. That stayed with me."

Dr. Hugh Robertson



NOSM 'Ask Alumni'

event builds a culture of mentorship

Medical students recently connected with NOSM Alumni during the School's inaugural virtual NOSM 'Ask Alumni' mentorship event. The evening was an opportunity for current medical students to speak with alumni about top-of-mind issues and burning questions, including preparing for the Canadian Resident Matching Service (CaRMS) in fourth year, writing the medical licensing exam, and study tips. Twenty-two medical students participated with a panel of three alumni fielding their questions.

The event was also an important tool to reduce student stress and anxiety commonly felt in relation to applying and preparing for residency—known as the most challenging part of medical school. A recent NOSM student-led study identified that the most stressful times in the medical student's experience are the first year and the fourth year, which is the application period for residency.

"I personally connected with several pediatric residents throughout my second to fourth year as a NOSM medical student. I found this very helpful when selecting electives, specifically having a mentor to connect to, to review my personal letters for residency and to provide words of encouragement prior to the CaRMS match," says Dr. Josée Lalanne, NOSM alumna (MD 2017). "I felt lucky to have developed these connections and I think all medical learners should have this opportunity."

Mentorship is identified as an enabler in the NOSM Strategic Plan 2025. Building and fostering a culture of continuous learning and support has been even more valuable during the COVID-19 pandemic, as students navigate new and evolving challenges.

"It is fundamental to have someone to support students during these strenuous times," says Dr. Lalanne. "NOSM is a resilient community of learners, residents, faculty and staff, and that close-knit nature allows for strong friendships and long-lasting, critical support."

The single most valuable piece of advice Dr. Lalanne's mentors shared with her, and she hopes to impart, is that medical school is tough, and you are not alone. "There will be ups and downs but trust the process, everything will fall into place. There are many different paths after graduation and mentors are both helpful and inspiring."

The next NOSM "Ask Alumni" event is planned for 2022. Interested medical students in first and second year will receive an invitation. To participate as an alumni mentor, contact the NOSM Alumni Office at alumni@nosm.ca.

NOSM staff build critical relationships

Sam Senecal supports First Nation partner communities who provide experiential learning opportunities to NOSM medical students. It's a fundamental, integral part of medical education at the Northern Ontario School of Medicine. Sam continues to be a critical, highly valued community liaison since the School's inception—it's a complex job that he's been at for 16 years.



"There's inherent risk in sending medical students to remote and fly-in First Nations communities. For most of the students, it's the first time in their lives that they've been on-reserve. But I was all-in since day one. I saw the opportunity, there's so much potential here," says Sam, Community Coordinator at NOSM.

Reciprocity and responsibility are the focus. Northern Ontario's remote First Nations communities are steadfast supporters of the School since its inception. Even before the first MD class was welcomed in 2005, NOSM committed to improving the health of all peoples and communities of Northern Ontario. In its earliest stages of the School's development, NOSM engaged Indigenous communities as part of its mandate to be socially accountable to the region it serves. NOSM depends on the experience of community leaders to improve education for all learners and to move the School forward.



Indigenous graduates

Many communities who partner with the School still do not have access to a full-time family physician. There is no straight-forward solution. It's been identified as an ongoing long-term challenge. "When I speak with communities, I'm very up front about it. I know NOSM is going to see an immediate return on their partnership—the students come back more culturally and socially aware of what's really going on in communities," says Sam. "However, the benefit to communities is less immediate. It is going to take time and we're making slow and steady progress. So far, NOSM has graduated more than 50 Indigenous doctors."

For Sam, the dream is to see a NOSM graduate from each of the 42 communities who partner with NOSM, but he says that's going to take time. Sam highlights other benefits, including the lasting relationships between students and community members, and community youth who have been encouraged and inspired by visiting medical students to consider pursuing a career in the health professions.

"Addressing the imbalance of power at the highest levels, passing risk, hearing our voices, and, putting an end to the quieter, harder to pinpoint racist behaviours, that's the challenge. It's important to realize that our people are like a rainbow. You could be talking to an Indigenous person and they could be fair skinned, and you wouldn't even know it. How do we empower our students to speak up? Not just Indigenous students, but all students."

Sam Senecal

Sam says culture at the School is key, especially among peers of learners. It comes down to mutual respect and a true understanding of the inequities that others face. "I'm so proud of our students. They've overcome a lot of barriers to get where they are. There are so many misnomers that others don't understand. It means other people can face those same barriers with success."

What Wellness looks like in the North

The Northern Ontario School of Medicine is prioritizing personal wellness—including the benefits of time spent in nature—in an effort to impact change across the wider culture of medicine, starting early with medical students and residents. It comes at a time when evidence-based studies on the benefits of nature are, for the first time, being prescribed to patients across Ontario.

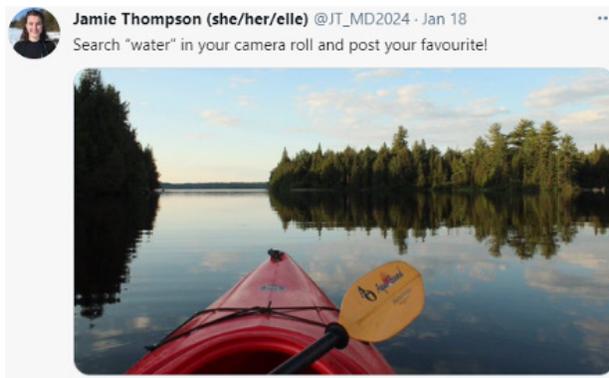
“Forming lasting healthy habits that start during medical education and role modelling those habits amongst peers in the medical profession and to our patients is formative. For example, recognizing the personal benefits you feel after a hike on a trail or a swim in the lake is actually a remedy to combat stress, anxiety and burnout,” says Dr. Lee Toner, NOSM Interim Associate Dean, Undergraduate Medical Education.

In a recent **Northern Routes blog**, Dr. Sarita Verma, NOSM’s Dean, President and CEO, encouraged everyone in the School community to take a breath and consider the gifts of the natural world outside. “The next time you find yourself outside, inhale deeply. There is almost no pollution in the air this winter. The crisp, clean air is the equivalent to winning the lottery. It’s a great feeling.”

Lyndon Letwin, second-year NOSM medical student, says he feels relaxed, satisfied, accomplished, reconnected, and refocused after spending time in nature. “I find it does make me a better student. The online learning environment has made it more difficult to concentrate when I have pent up energy, so any outing greatly aids in my ability to maintain a calm mind, focused work ethic, and elevated mood.”

First-year NOSM medical student, Jamie Thompson, is a Métis, French-speaking student from Manitouwadge who is active outdoors and enjoys sharing social media posts about her adventures. She says the experience refreshes her body and mind. “A long day of camping or hiking always improves my wellness significantly. There’s something about being outside, unconnected, without distractions, that really gets rid of my background thoughts, worries, and brain fog.”

She is one of an up-and-coming generation of future physicians who have experienced an intense shift into online learning during the COVID-19 pandemic. Time outdoors is helping all NOSM learners endure long hours of online study.



“I definitely recommend getting outside for anyone because we need to take breaks,” says Jamie. “This is especially true in a COVID-19 world, where all of our social, education, and work life is on screens. Even just to get out and do a quick walk around your neighborhood, getting the blood pumping, some vitamin D, and those endorphins can help both your body and your mind when you get back to the tasks at hand.”

The hope is that in this new culture of medicine—where breaks are designed to improve performance and mental health—will become more professionally acceptable and encouraged in an environment where residents continue to endure 24-hour shifts and overnight study sessions. And it’s not limited to time in nature. Ways of feeling better could include exercise, activities, hobbies or interests that help individuals or learners feel renewed or refreshed. In addition to being outdoors, Jamie also enjoys traditional beadwork.

“I think it’s really important to take that time for wellness in its variety of forms in medical school, and I would certainly say it’s becoming more accepted,” says Jamie.

Read more on this topic:

- **Ontario doctors set to turn over a new leaf with program that lets them prescribe ‘nature’ to ailing patients**
- **Visit the PaRx website: People who spend at least two hours in nature each week report significantly better health and wellbeing.**
- **B.C. Doctors are now prescribing nature to boost patient health; The parks prescription program is the first of its kind in Canada.**



Participants felt
‘DEEPLY MOVED’
by the Dean’s Lecture Series:
RACISM IN MEDICINE

The first student-led, organized and developed school-wide discussion on racism

Black, Indigenous and People of Colour (BIPOC) medical students, faculty, staff and allies at the Northern Ontario School of Medicine came together to hold a deeper discussion about racism in medicine—the first of its kind at NOSM.

“Still absolutely floored by this session. Thank you so much to our brave student organizers and panelists for bringing this to life. I’m at a loss for words,” wrote Nada Abdel-Dayem, a BIPOC first-year NOSM medical student.

Over 100 people from the NOSM community participated in the very personal and heartfelt conversation with emotional testimonial and truth-telling by special guests and physician leaders across Canada.

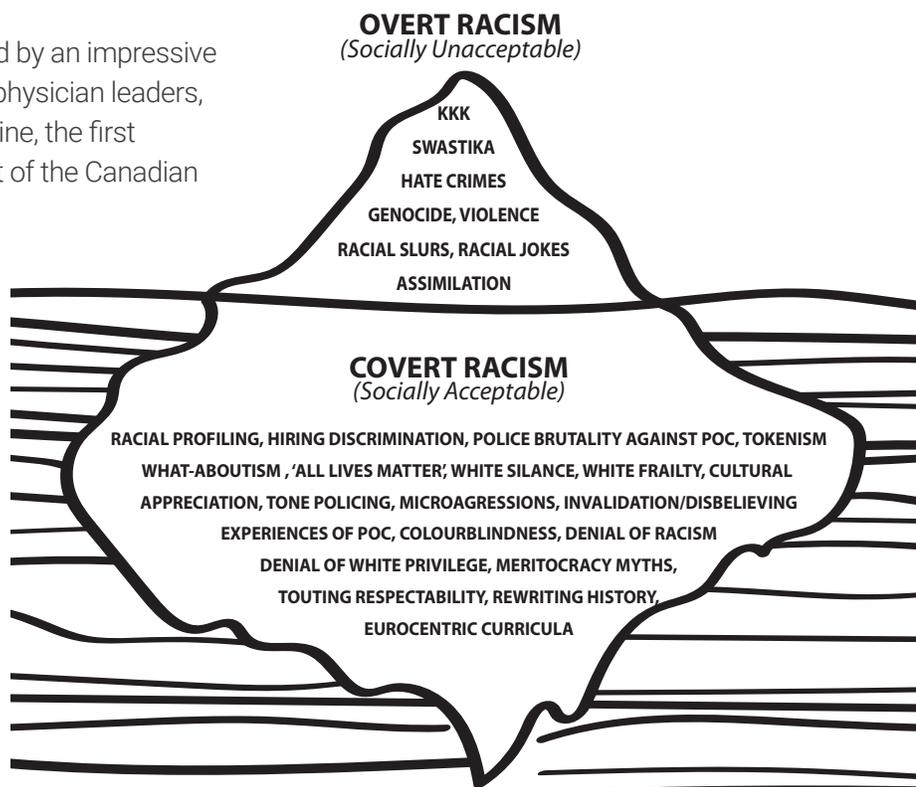
NOSM medical students Dee Shin, Justina Marianayagam, Tamika Hamlet, Nusha Ramsoondar, Madeleine Nolan and Brooke Raycraft decided that in today’s climate, it was necessary to bring the conversation of racial injustice to NOSM. An impactful moment was when the BIPOC student leaders took a moment to dedicate the presentation to their parents, all immigrants to Canada from several countries, including the Caribbean, South Korea, Trinidad and Tobago, Sri Lanka and Zambia.

The discussion was guided by an impressive panel of Canadian BIPOC physician leaders, including: Dr. Alika Lafontaine, the first Indigenous President-Elect of the Canadian

“The Iceberg of Racism” presented during the discussion.

Medical Association (CMA); Dr. Doris Mitchell, an Indigenous physician scholar, NOSM Alumna and NOSM Assistant Professor; Dr. Gigi Osler an ENT Surgeon and former CMA President; Dr. Amy Tan, a Palliative Care Physician; and, Dr. Kona Williams, Canada’s first Indigenous Forensic Pathologist and NOSM Assistant Professor.

Anti-racism was the lead topic of conversation as participants shared some of their personal experiences with incidents of overt and covert racism. Students educated participants on the importance of understanding the differences between various forms of racism, highlighting that all forms are unacceptable and should not be tolerated. They also shared strategies for allyship that go beyond social media and more “optical” shows of support by informing yourself, volunteering, advocating, donating, and using your privilege for allyship.



ENABLERS

“Anti-racism is embedded into our Strategic Plan at NOSM,” said Dr. Verma. “Our Board of Directors passed a motion on anti-racism and have asked us to address it in the curriculum, in our policies and to speak out and eliminate racism at NOSM. We had planned for the year of 2021 to be dedicated to climate change and social justice – we are committed to the anti-racism movement at NOSM.”

Read more articles like this:

- **Hope is bulletproof. We at NOSM have hope.**

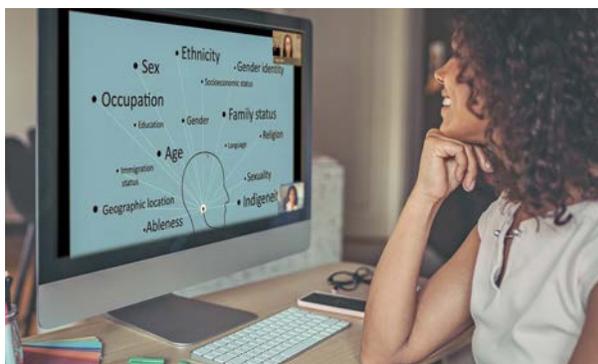
The panelists highly recommended the following influential books addressing racism:

- **The Inconvenient Indian by Thomas King**
- **When Breath Becomes Air by Paul Kalanithi**
- **Caste by Isabel Wilkerson**
- **Me and White Supremacy by Layla Saad**
- **Seven Fallen Feathers by Tanya Talaga**
- **How to be an Antiracist by Ibram X Kendi**
- **Dignity-Conserving Care by Harvey Chochinov**
- **21 Things You May Not Have Known About the Indian Act by Bob Joseph**
- **From the Ashes by Jesse Thistle**



A virtual capture of the leaders of NOSM's 'Racism in Medicine' Dean's Lecture Series includes (in alphabetical order by group) physicians Dr. Alika Lafontaine, Dr. Doris Mitchell, Dr. Gigi Osler, Dr. Amy Tan, Dr. Sarita Verma, Dr. Kona Williams; NOSM medical students Justina Marianayagam, Madeleine Nolan, Nusha Ramsoondar, Brooke Raycraft, Dee Shin; and NOSM staff member Lise Lalonde

Daring Leadership in an ever-changing and unpredictable world



NOSM's Northern Lights Forum features a key address from Dr. Jane Philpott and Dr. Gigi Osler

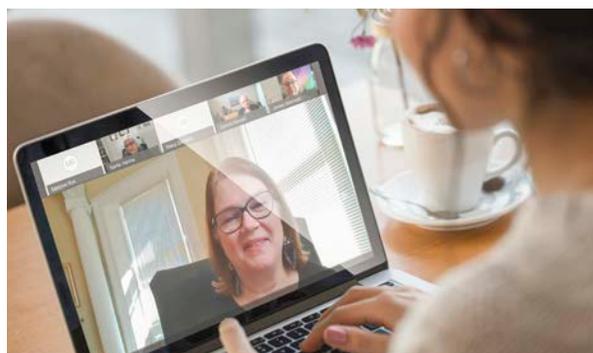
Dr. James Goertzen, NOSM's Associate Dean, Continuing Education and Professional Development (CEPD), spearheaded the 2021 Northern Lights Forum. He and the organizing team arranged for Drs. Jane Philpott and Gigi Osler to each provide a keynote address on the theme of Daring Leadership in Difficult Times. This virtual forum enabled NOSM faculty to join small breakout sessions where they had opportunities to ask questions and interact directly with Drs. Philpott and Osler.

"When I became CMA president, I hadn't truly recognized the importance of representation in leadership until men and women came up to me—and still do—to say they'd never seen someone that looked like them in a position of power. Because of that, they could see themselves in a position of power. And I realized that it's hard to be, until you see."

Dr. Gigi Osler

NOSM's Northern Lights forum blended leadership development activities with engaging learning opportunities at the School. Those who attended the event said it was one of NOSM's best and most memorable to-date.

"It was exciting to have 53 NOSM faculty members learning with and opening up on the topic of daring and vulnerable leadership and the concept of learning from failure," says Dr. Goertzen. "Imposter syndrome was mentioned many times. We were all able to recognize that even leaders with a wealth of experience can feel the same sense of emotions as a new or inexperienced physician leader."



NOSM celebrated its pan-Northern community at the School's 10th annual Northern Constellations faculty development conference on April 30 and May 1, 2021. Dr. Jillian Horton, plenary guest speaker, spoke about strategies to advocate against physician burnout. She highlighted practical strategies including advocating for organizational change, mindfulness, personal narrative and influencing culture change to take care of ourselves.

Leadership at NOSM

Ingenuity. Inspiration. Resilience. These are the words that I use to describe the team at the Northern Ontario School of Medicine. Everyone at this School has played a part in making this first stage of our strategic plan a success. The Executive Group and Management Group have been irreplaceable, and all staff, learners and faculty have been supportive and open to the changes we faced this year. This report only mentions a very few in a cast of hundreds who have led and shaped the history of this school and will lead us into the future.

My very sincere thanks to the NOSM Board of Directors who have done a herculean job navigating our governance challenges in the past few months. We couldn't have made it this far without you.

As NOSM evolves, it will undergo many shifts in response to its primary mandate: meeting the health care needs of Northern Ontario. Fasten your seatbelts and put on your helmets. This will continue to be an amazing, exciting journey.

NOSM's Executive and Management Group Leadership

- **Dr. Robert Anderson** – Associate Dean, Postgraduate Medical Education and Health Sciences
- **Anita Arella** – Director, Faculty Affairs
- **Lyne Aubry-Yates** – Director, Human Resources
- **Jeff Bachiu** – UME Administrative Director
- **Dr. Tara Baldisera** – Assistant Dean, Clinical Education
- **Danielle Barbeau-Rodrigue** – Director, Francophone Affairs
- **Dr. Douglas Boreham** – Division Head, Medical Sciences
- **Tamara Boyd** – Manager, UME Educational Resources
- **Dan Burrell** – Budget Administrator
- **Miriam Cain** – Director, Admissions and Learner Recruitment
- **Sherrie-Ann Camilli** – UME Administrative Manager
- **Rita Campbell** – Human Resources Consultant
- **Tina Carswell** – Human Resources Consultant
- **Dr. Catherine Cervin** – Vice Dean, Academic
- **Jacalyn Cop-Rasmussen** – Manager, Academic Health Sciences Network
- **Dr. Kristy Côté** – Manager, Postgraduate Medical Education and Health Sciences
- **Demetrios Demetrakopoulos** – Manager, Information Technology
- **Rahim Dharamsi** – Chief Advancement Officer
- **Jennifer Fawcett** – Senior Director, Postgraduate Medical Education and Health Sciences
- **Patty Fink** – Director, Research and Health Sciences Library
- **John Friesen** – Senior Director, Undergraduate Medical Education
- **Dr. James Goertzen** – Associate Dean, Continuing Education and Professional Development
- **Ray Hunt** – Chief Operating Officer
- **Kate Kearney** – Manager, Postgraduate Medical Education and Health Sciences Office
- **Steve Kelly** – Director, Information Technology
- **Gina Kennedy** – Corporate Secretary and Manager, Policy and Governance Relations
- **Kimberley Larkin** – Manager, Communications
- **Nicole Lauzon** – Chief of Staff

- **Dr. Joseph LeBlanc** – Associate Dean, Equity and Inclusion
- **Joel Leduc** – Manager, Community Relations
- **Joe Lipinski** – Director, Finance and Facilities
- **Mathieu Litalien** – Director, Office of Institutional Intelligence
- **Dr. David Marsh** – Associate Dean, Research Innovation and International Relations
- **Joey McColeman** – Director, Continuing Education and Professional Development
- **Dr. William McCready** – Special Advisor and Senior Associate Dean
- **Joanne Musico** – Director, Communications and External Relations
- **Dr. Sarah Newbery** – Assistant Dean, Physician Workforce Strategy
- **Lorna Pedneault** – Project Manager, Vice Dean Academic
- **Lori Piccolo** – Manager, Financial and Administrative Services
- **Dr. Owen Prowse** – Assistant Dean, Admissions
- **Denise Raftis** – Program Manager, Northern Ontario Dietetic Internship Program (NODIP)
- **Dr. Michael Ravenek** – Manager, Health Sciences
- **Dr. Jason Shack** – Assistant Dean, Learner Affairs
- **Dr. Harshad Telang** – Associate Dean, Faculty Affairs
- **Dr. Lee Toner** – Associate Dean, Undergraduate Medical Education
- **Jennifer Turcotte-Russak** – Manager, Postgraduate Medical Education and Health Sciences
- **Dr. Sarita Verma** – Dean, President and CEO
- **Grace Vita** – Director, Planning and Risk
- **Kari Wakefield** – Human Resources Consultant
- **Yolanda Wanakamik** – Director, Indigenous Affairs
- **Dr. Barbara Zelek** – Division Head, Clinical Sciences

2020-2021 Awards and Recognition

As of May 10, 2021

There are many outstanding faculty, learners and staff at NOSM who make a difference in their community and help bring recognition to the School. Miigwetch, merci and thank you for your ongoing work and commitment.

The **Northern Ontario School of Medicine** was honoured by the Society of Rural Physicians of Canada (SRPC) with the Rural Medical Education Award on April 13, 2021. This was the tenth time that NOSM has been recognized with this award.

The NOSM Trivia Challenge—created by the **NOSM Communications Unit** and Launchfire—won an international Communicator Award in the Advertising and Marketing category for contests and promotions. Communicator Awards is the leading international awards program recognizing excellence in communication, championing effective and meaningful work.

Madeline Angus is the recipient of NOSM's Learner Peer Teaching Award.

Dr. Chi Cheng, a leader in developing educational standards in the School's Psychiatry Program, received NOSM's Clinical Scholar Award.

Dr. Yves Jean-Guy Côté received a Family Medicine Resident Award for Scholarly Achievement from the College of Family Physicians of Canada's (CFPC) Foundation for Advancing Family Medicine.

ENABLERS

Dr. Brett Danielson received NOSM's 2020 Learner-Nominated Teacher Award.

Dr. Zacchary Fredette received the Professional Association of Residents of Ontario (PARO) Resident Teaching Award, honouring residents who have provided outstanding clinical teaching experiences to junior housestaff and clinical clerks.

Dr. Kyle Harper received a Family Medicine Resident Award for Scholarly Achievement from the CFPC's Foundation for Advancing Family Medicine.

Dr. Ed Hirvi was named as the recipient of the Canadian Association for Medical Education (CAME) Certificate of Merit in January 2021 recognizing faculty members committed to medical education in Canadian medical schools.

Dr. Lois Hutchinson, a psychiatry clinician, teacher and mentor, was named NOSM Associate Professor Honorarius.

Dr. Ben Joseph is the recipient of NOSM's 2020 Learner Advocate & Leader Award. He also received the Coordinators of Psychiatric Education Special Fund award for a paper titled Gladue courts and advocacy training in residency.

Dr. Brent Kennedy received the Physician Clinical Teachers Association (PCTA) Leadership Award.

Dr. Roy Kirkpatrick received the SRPC's Rural Specialist Merit Award. Presented to a specialist living and working in rural Canada, this award recognizes the demonstrated long-term commitment to serving one's community.

Dr. Michael Kirlew received the Jean-Pierre Despins Award honouring a CFPC family physician member identified as an outstanding advocate and public spokesperson for family medicine, family physicians, and their patients.

Dr. Bryan MacLeod received the PARO Clinical Teaching Award Recipient, recognizing the essential role that good clinical teachers play in the training of new physicians.

Justina Marianayagam is the recipient of NOSM's 2020 Learner Scholarly Activity Award.

Dr. Jai Mashru received the PARO Citizenship Award for Medical Students.

Dr. Michael Mason received the PARO Excellence in Clinical Teaching Award, acknowledging the essential role that good clinical teachers play in the training of physicians.

Dr. Janet McElhaney was the recipient of the Jonas Salk Award from March of Dimes Canada recognizing an extraordinary contribution to preventing, alleviating, or eliminating a physical disability.

Dr. Sarah McIsaac received the Canadian Women in Medicine's second annual Inspiring Woman Physician award for 2020.

Dr. Radu Alexandru Moise, Associate Professor researching the roles of nutrition in health and disease, received NOSM's Scholar Award.

Dr. Sean Moore was named a recipient of the Canadian Association of Emergency Physicians (CAEP) Emergency Physicians of the Year award in December 2020 in recognition of excellence in emergency medicine.

Donna Newhouse, a medical educator who led the development of the School's anatomy labs, received NOSM's Medical Educator Award.

Brittany Pennock recipient of the Canadian Medical Hall of Fame Award 2020. The award recognizes second-year medical students who exemplify perseverance, collaboration and an entrepreneurial spirit.

Dr. Niharika Shahi received the Canadian Medical Award for Young Leaders (Student) for her outstanding advocacy efforts on unique Northern Health issues.

Dr. Roger Strasser, NOSM Founding Dean Emeritus, has been named a 2020 Honorary Fellow of the Royal College of Physicians and Surgeons of Canada.

Dr. Zacharias Suntres, Assistant Dean and Chair of the Student Assessment and Promotions Committee, was the recipient of NOSM's Academic Leader Award.

Dr. Jenny Thomas received a Medical Student Scholarship from the CFPC's Foundation for Advancing Family Medicine.

Dr. John Tuinema is the recipient of NOSM's Learner Peer Teaching Award.

Dr. Diana Urajnik received a Laurentian University Teaching Excellence Award.

Dr. Sarita Verma, NOSM's Dean, President and CEO, was named to the Canadian Health Network's 2021 Power List.

Dr. Stephen Viherjoki received the SRPC's Rural Service Award in recognition of his service to a rural Canadian community for 10 or more years.

Dr. Katrina Ward received a Family Medicine Resident Scholarship from the CFPC's Foundation for Advancing Family Medicine.

Dr. Janice Willett, a practising gynaecologist for over 25 years in Sault Ste. Marie and former NOSM Associate Dean, was named NOSM Associate Professor Honorarius.

Dr. Malcolm Wilson, an active clinician, mentor, and teacher to residents and faculty in the North, was named NOSM Associate Professor Honorarius.

Dr. Barb Zelek received the SRPC's Rural Mentorship Award. This award is presented to a rural physician that demonstrates outstanding commitment to mentoring and supporting future rural physicians, and/or rural physicians already in practice.

FACULTY PROMOTIONS 2020 & 2021

Professor

- **Dr. Neelam Khaper**

Assistant Professor

- **Ms. Cara Green**

Associate Professor

- **Dr. Alex Anawati**
- **Dr. Olexiy Aseyev**
- **Dr. Bindu Bittira**
- **Dr. Sarah Clark**
- **Dr. Bruce Cook**
- **Dr. Jonathan Dellavedova**
- **Dr. Kurt Droll**
- **Dr. Hazem El Mansy**

- **Dr. Greg Gamble**
- **Dr. Andreas Kumar**
- **Dr. Nicole Laferriere**
- **Dr. William MacGregor**
- **Dr. Jennifer McPhail**
- **Dr. Mary Olsten**
- **Dr. Krzysztof Opryszczko**
- **Dr. Christine Pun**
- **Dr. Katherine Richardson**
- **Dr. Deborah Saunders**
- **Dr. Walid Shahrour**
- **Dr. Andrew Smith**
- **Dr. Jonathan Smith**
- **Dr. Silavana Spadafora**
- **Dr. Ioannis Voutsadakis**
- **Dr. Diane Whitney**

