THUNDER BAY INTERNAL MEDICINE LEG – CHALLENGES AND SUCCESSES

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CONFLICT OF INTEREST

• No conflicts to declare

T. BAY IM LEG

- History
 - Founded 2012-March
 - 15 Initial Members
 - Now 34 Members

DEPARTMENTS OF THE THUNDER BAY INTERNAL MEDICINE LEG

- Cardiology
- Endocrinology
- Gastroenterology
- General Medicine (MCTU)
- Geriatrics
- Infectious Disease

- Nephrology
- Neurology
- Respirology
- Rheumatology
- Physiatry
- Not in LEG –Hematology/Oncology and ICU

- Clinical funds are distributed via various methods
- There is a 10% hold back, this is used to fund non-remunerated activities
- Examples:
 - General Medicine (MCTU), Geriatrics, Nephrology, Neurology, Respirology split evenly
 - Cardiology pools their funds as a group
 - Individuals receive their funds directly

- The 10% hold back was to be applied to the point system
- But this was the reality



DISTRIBUTION OF FUNDS (10% HOLD BACK)

Activity	Points
I. Royal College Style Bedside Physical Exam Teaching	30 (12 events/yr, one Per member – 2 hrs)
I. Academic Half Day (Max. 50, probable 25/yr)	I 5/ half day
I. Noon hour or afternoon rounds (I hr, max I/wk when not on service – MCTU/subspecialty	10/ event, max 50/yr
I. Learner Evaluation (ITER/FITER)	5/ evaluation*
I. Mini CEX or equivalent (observed clinical event with feedback	5/ evaluation, max. 2/learner/block
I. Resident Led Journal Club attendance	3/event, max 12 events/yr
I. Royal College Study Sessions – residents (2-3 hrs, max. 24 sessions/yr)	30/session
I. Student Teaching Session IM (2hrs/event)	I5/event
I. Resident Remediation (2 hrs/event)	30/event

- The point system was never operational
- So we distribute the funds to support the critical aspects of the Internal Medicine Program
- A motion is circulated and voted on by email, majority carries
- To date the funding has gone to:
 - Staffing resident OSCE, Faculty Development Attendance, Resident Interview Attendance
 - More recently we have added a Noon Hour Teaching
 - Resident support: Graduation, and Welcome get togethers, Graduating Resident Gifts and we buy the incoming residents MKSAP which is a study program for internal medicine

- Our members have stepped up every time to ensure that these activities are properly staffed (I do not think the stipend is the important factor)
- However, as the number of activities grows and the number of staff participating grows we will need to adjust the stipend to maintain our budjet
- Therefore, we will have to revert back to the point system, adjust it for our priorities and then adjust the stipend based on points

SCHOLARLY ACTIVITIES

- During the 2017-2018 academic year there were over 25 active scholarly projects amongst the group members but I was only able to report on 4
- It is difficult to get members to submit information or to read emails
- Our LEG does not directly support research, it has not been a member priority