

NOSM – A Key Government Strategy

Established in 2002 to reverse a chronic shortage of physicians with a mandate to improve the health of Northern Ontarians with a focus on rural/remote, Indigenous and Francophone populations.

Independent legal entity (not-for-profit corporation) since 2002:

- Governed by its own Board of Directors;
- Provincial funding flows directly to NOSM (not the universities);
- Tuition fees collected by universities (on behalf of NOSM) flow-through to NOSM;
- Achieves its own accreditation to be a medical school in Canada;
- Employs its own staff and faculty (225 split 50/50 in Sudbury and Thunder Bay) including its own staff and faculty unions;
- Manages close to 1,800 clinical faculty contracts across the North (the NOSM campus);
- Develops and delivers its own curriculum and grades (pass/fail) its students for graduation;
- Provides its own administration (HR, IT, Finance, Research and Libraries, etc.).



NOSM in Northwestern Ontario

Sioux Lookout

A scenic view of a rocky shoreline next to a calm lake, with a dense forest of trees displaying vibrant autumn foliage in shades of yellow and orange. The sky is clear and blue.

NOSM in Northwestern Ontario

Teaching occurs at more than 75 sites, which includes hospitals, family health teams and clinics.

112 medical students (28 per year) count the Northwest as their home base.

There are currently 68 residents in training throughout Northwest communities in the disciplines of:

- Family Medicine
- General Surgery
- Internal Medicine
- Orthopedic Surgery
- Pediatrics
- Psychiatry
- Public Health and Preventative Medicine

NOSM in Northwestern Ontario

Four communities host third-year medical students for their eight-month clerkship:

- Dryden
- Fort Frances
- Kenora
- Sioux Lookout

Many other communities host medical students completing Integrated Community Experience (ICE) Placements.

Communities in Northwestern Ontario also regularly host visiting Canadian and international medical students and residents for electives, as well as various health sciences, physician assistants and dietetic learners.

NOSM in Northwestern Ontario

Between 2017-2021, Northwest communities have welcomed more than 2,400 learners over approximately 6,000 rotations.

There are 143 grads currently practicing in Northwestern Ontario, of which 56 completed both UME & PGE at NOSM, 26 UME only and 61 PGE only.

In total, there are approximately 632 faculty in the Northwest, of which 23 self-identify as Francophone and 19 as Indigenous.

The majority of faculty are members of one of the 20 Local Education Groups (LEGs) in the Northwest.

An aerial, black and white photograph of a dense forest. A stream flows through the lower left portion of the image. In the center, there is a rocky clearing or a small streambed. The trees are densely packed, and the overall scene is a natural, wooded landscape.

THE NOSM CHALLENGE

Strategic Plan 2021-2025

The NOSM Challenge 2025



Four strategic directions:

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

Four strategic enablers:

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



STRATEGIC DIRECTION # 1

Transform Health Human Resource Planning

NOSM's primary mandate is to provide physicians in areas of need in Northern Ontario. NOSM leads in advocacy for sustainable solutions for health human resources in the region. By preparing, attracting and retaining health-care professionals, the School improves access to equitable, high-quality health care in the North.



Bear Island First Nation

STRATEGIC DIRECTION # 2

Advance Social Accountability

NOSM's graduates, faculty, learners and staff are changemakers who lead health-system transformation in Northern Ontario. The School is a recipient of the Charles Boelen International Social Accountability Award from the Association of Faculties of Medicine of Canada and the prestigious ASPIRE award, which recognize international excellence in social accountability and medical education.



STRATEGIC DIRECTION # 3

Innovate Health Professions Education

Innovation drives the education of NOSM's next generation of health-care professionals and researchers.



Lake Superior

STRATEGIC DIRECTION # 4

Strengthen Research Capacity in Northern Ontario

NOSM connects researchers, learners, teams and their findings to research entities, provincial health teams, research institutes, academic health sciences centres and health-care organizations. The School strengthens research capacity in Northern Ontario, improving performance and measurable outcomes in health services, quality health care, health and biomedical research and knowledge translation.

Health Challenges in Northern Ontario



- Being part of the Northern Ontario community means we also have collectively experienced a shortage of health-care professionals, and a drastic shortage of Indigenous (and Indigenous-trained) health-care professionals.
- Northern Ontarians are more likely to have worse health, poorer access to health care, and die earlier than people in other parts of Ontario.
- Northern Ontario has higher rates of suicide, diabetes, complex chronic diseases, obesity, and are more likely to report having multiple chronic conditions. The youth suicide rate of Indigenous people is six times higher than non-Indigenous youth in Canada.
- Mental health and addictions in the North are also some of its greatest challenges. Northeastern and Northwestern Ontario have the first- and second-highest rates of opioid-related deaths in the province.

What do we know about our need for physicians?



Through Health Force Ontario and the Office of Physician Workforce Strategy, we have gathered data community by community and by academic hospitals.

The data remains imperfect and is an **UNDERESTIMATE** because it does not capture community needs in all instances in our urban centres, and reflects **CLINICAL SERVICE** needs only and **NOT** academic work (teaching and research) in addition to clinical service.

What do we know about our need for physicians?

So, accepting these imperfections, currently across Northern Ontario we need **at a minimum:**

- **313 full time equivalent physicians.**
- **Of this group we need 126 family physicians - 86 of these in rural communities.**

We need **160 Royal College specialists** in a variety of disciplines with the highest numbers in:

- **Psychiatry (40)**
- **General Internal medicine (16)**
- **Pediatrics (12)**
- **Emergency medicine (CCFP EM or FRCPC, 12)**
- **Anaesthesia (10)**

We also need small numbers in plastic surgery, respirology and neurology - even though the numbers are small, some of these are critically important to service delivery and so are in “high need.”

What does the data tell us about where NOSM Grads practise?



While NOSM has much to celebrate in its innovative distributed teaching model and the number of graduates who have entered into practice in urban Northern Ontario, **the impact on rural Northern Ontario has been small and the needs in the rural, remote and Indigenous communities of Northern Ontario remain high.**

The bottom line...

We need a minimum of **313 FTE physicians** currently, with > 80 needed in rural generalist practice.

- All of NOSMs learners should be encouraged to see their future here in Northern Ontario.
- Elective learners should be encouraged to come back for postgraduate training opportunities, or future work.
- Medical students working in summer studentship jobs can be encouraged to consider future training and work in Northern Ontario.

... and **NOSM will continue to build other strategies to support you in your work and teaching.**

Distributed Community Engaged Learning

- NOSM's unique **Distributed Community Engaged Learning** (DCEL) model features partnerships and collaborations with over 100 organizations, in over 90 communities, and over 1,700 clinical, human and medical sciences faculty dispersed across all of Northern Ontario (*the NOSM campus*).
- DCEL includes strong ties and engagement with remote rural, Indigenous and Francophone communities.
- DCEL model best prepares its graduates to work in a complex environment with pressing health issues such as multi-morbidity (more prevalent in the North).



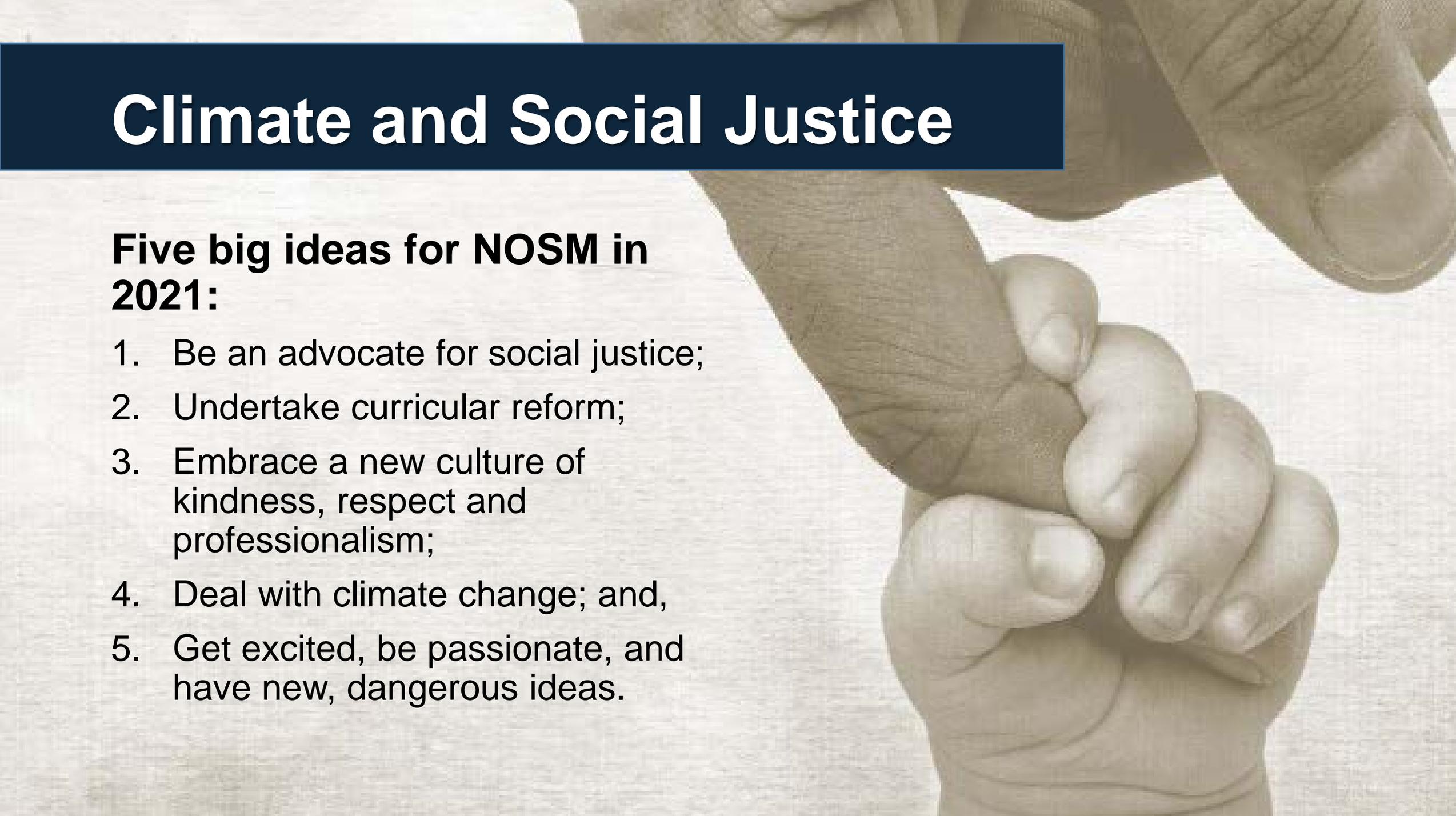
Sioux Lookout Meno Ya Win Health Centre

NOSM Pan-Northern Model



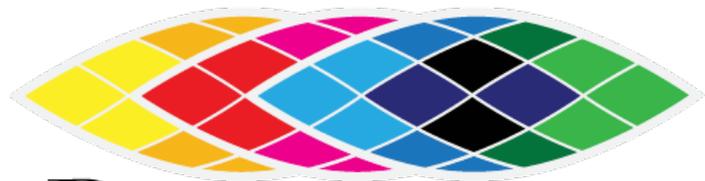
NOSM

Climate and Social Justice



Five big ideas for NOSM in 2021:

1. Be an advocate for social justice;
2. Undertake curricular reform;
3. Embrace a new culture of kindness, respect and professionalism;
4. Deal with climate change; and,
5. Get excited, be passionate, and have new, dangerous ideas.



**Respect
the Difference.™**

culture.nosm.ca

Climate and Social Justice

Activism. Advocacy. Agency.