

CREATING A **GOLD STANDARD** FOR CANADA

ANNUAL REPORT 2009/10



CEHPEA
CENTRE FOR THE EVALUATION OF HEALTH
PROFESSIONALS EDUCATED ABROAD

CREATING A **GOLD STANDARD** FOR CANADA

Assessment and Education Programs for Internationally Educated Health Professionals



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MESSAGE FROM THE BOARD CHAIR

The Centre for the Evaluation of Health Professionals Educated Abroad (CEHPEA) was launched three years ago with high expectations from funders and stakeholders. Urgent action was required to address the shortage of health human resources in Ontario and the government's HealthForceOntario strategy was designed to do just that. A key part of that strategy involved expanding and enhancing services for internationally educated health professionals and CEHPEA was expected to play a pivotal role. The Ministry of Health and Long-Term Care had a vision for CEHPEA – that it would create a gold standard for assessment and training of these professionals in Canada. Remarkably, CEHPEA has achieved that vision in a very short time.



Starting with a handful of staff, CEHPEA has evolved into a vibrant, nimble and effective organization that has earned a reputation for its expertise and the credibility of its examinations and programs. As Ralph Marston once said, "Excellence is not a skill. It is an attitude." And it is an attitude that permeates everything that CEHPEA does whether it is recruiting excellent staff, collaborating closely with stakeholders or ongoing evaluation and refinement of everything it does. Often, CEHPEA staff members have been called upon to respond quickly to ministry directions and changing needs of Ontario's health system and they have consistently delivered high-quality services and programs.

As Chair of the founding Board of Directors it has been my privilege to witness CEHPEA's coming of age and beyond that, how it has forged strong partnerships with stakeholders and funders and has assumed a leadership role at the national level.

The Ontario government should be commended for creating the HealthForceOntario strategy, recognizing the importance of internationally educated health care professionals as part of the solution, and supporting CEHPEA in becoming the largest assessment centre of its kind in Canada.

In addition to the government's support and the excellence of CEHPEA's staff, a contributing factor to the organization's success has been the strength of the board and the caliber of our directors. The board is comprised of professional educators, representatives of professional regulatory bodies and members of the general public. In this year's Annual Report, we are pleased to profile our two public board members – internationally educated professionals that have experienced first-hand the challenges of navigating the "system" to gain approval to practice in Ontario and hope to make it better for others.

As a board, we have been entrusted with ultimate accountability for the organization, representing our stakeholders and ensuring fiscal oversight, transparency and public trust. I would like to thank our directors for their commitment to public service as well as their expertise and passion. On behalf of the board, I can say that we are proud of CEHPEA's accomplishments and look forward to its continued success.

Margaret T. Nelligan

MESSAGE FROM THE EXECUTIVE DIRECTOR



Following two years of rapid growth for our organization, 2009/10 has been a time to solidify the gains we have made, while reviewing, revising and expanding our services to keep pace with the needs of our health care system and a rapidly changing environment.

Having created the largest assessment centre of its kind in Canada, we have been invited to share our expertise and leadership as part of the team that is working with the Medical Council of Canada to create a national, standardized objective structured clinical exam (OSCE) for International Medical Graduates (IMGs). As well as participating on the National Executive Committee, our Director of Health Professional Affairs chairs the Advisory Committee for IMG Assessment Programs and our Statistician and Curriculum Consultant chairs the Test Committee that is developing the national OSCE for review by the Advisory Committee.

Our core business originally focused on examinations to assess International Medical Graduates' (IMGs) readiness to train and practice in Ontario. We have continued to refine and grow that part of our business, while applying our assessment expertise to other professions.

Increasingly, we are being asked to apply our expertise in examinations to other professions. When the new Physician Assistant role was introduced

in Ontario and at the request of the Ministry of Health and Long-Term Care, our experts recommended the competency levels required - based on General Comprehensive Clinical Exam (CE1) scores - and created and lead the assessment process on behalf of the province.

This year, we worked closely with the College of Nurses of Ontario to develop an ongoing, OSCE-style practice assessment for certified Nurse Practitioners in the province, with a pilot slated for the spring of 2012. Plans are in the works to develop extensive assessments for other professions.

While we have traditionally been known for our large-scale examinations, we have branched out to create several orientation and training programs to help IMGs make the transition to practice. The Pre-Residency Program for Family Medicine was the first program we created and based on its success, the Orientation to Training and Practice in Canada Program was created for specialists. The latest addition to our training programs is the Integration Program for physicians interested in applying to be Physician

*If you would like to obtain a copy of CEHPEA's audited financial statements for 2009/10 please send your request to info@cehpea.ca

Increasing the Number of Physicians in Ontario

- More than 1,300 training positions and practice ready assessments were offered to IMGs between 2002/03 and 2009/10
- Since 2004/05, Ontario has set a target of 200 postgraduate training positions for IMGs each year and has exceeded that target for the last four years
- Ontario absorbs more IMGs than all other provinces combined. In 2009/10, more than 200 positions were offered to IMGs
- Ontario has essentially added the capacity equal to a new medical school. IMGs are better able to make the most of their abilities and Ontarians benefit by having increased access to care
- IMGs account for approximately one quarter of the total physician workforce in Ontario

Our Partners

As we develop our assessments and orientation programs, we have increasingly collaborated and consulted with our partners and stakeholders, including the provincial and federal governments, medical schools, physicians, nurses and allied health professionals. Other key stakeholders include the College of Physicians and Surgeons of Ontario, the Royal College of Physicians and Surgeons of Canada, the Council of Ontario Faculties of Medicine, the College of Nurses of Ontario, and other regulatory bodies of the various health professions.

Assistants in Ontario. I am pleased to report that in 2009/10, 226 candidates participated in our education programs.

Our growth and accomplishments have only been possible because of the support of the Ministry of Health and Long-Term Care, the Council of Ontario Faculties of Medicine, the outstanding leadership of our Board of Directors and the expertise of our partners and staff.

Building on the foundation that has been established, we will be actively working to expand our services and expertise to other professions – with the goal of helping internationally educated health care professionals who want to practice in Ontario and ultimately, improving access to patient care services.

Anne Marie Crescenzi



MESSAGE FROM THE DIRECTOR OF HEALTH PROFESSIONAL AFFAIRS



The Ministry of Health and Long-Term Care made a commitment to increase opportunities for internationally educated health professionals and CEHPEA was created to play a key role in that expansion.

CEHPEA supports the government's HealthForceOntario strategy by conducting assessments to ensure that internationally educated health professionals meet Canadian standards, as well as providing educational programs to orient them to training and practice in Ontario.

CEHPEA's large-scale written and clinical examinations are constructed and validated by our own experts, working in collaboration with medical education experts from Ontario's universities and professional colleges. We have always taken great care to ensure that rigorous processes are in place to evaluate and validate the accuracy of the testing processes and the calculation of results. It is extremely gratifying that assessments have earned a reputation for unquestionable credibility, providing medical schools with important information to help them select the best candidates.

We have broadened the scope of our examinations, starting with the creation and implementation of the assessment tools and process for IMGs applying to work as Physician Assistants in Ontario.

In addition to our examinations, we have created and led several successful educational programs to orient internationally educated health professionals to training and practice in Canada, including the Pre-Residency Program for candidates entering the Family Medicine stream, the Orientation to Training and Practice in Canada for specialists and the Integration Program for IMGs selected for training as Physician Assistants (PAs). Working with the Assessment and Education Sub-Committee of the PA Implementation Steering Committee, we also organized and developed the curriculum for a two-day Professional Education Session for the PAs and their supervising physicians.

A key component of our clinical examinations and training programs is the use of standardized patients who are trained to portray patients in various medical situations, in a consistent manner. They are essential to the assessment of skills as part of our clinical exams and they provide a tremendous opportunity for candidates to practice in a safe environment as part of our orientation programs. In 2007, we developed our own



Standardized Patient Program for our examinations and in a very short time it has become a success, expanding to include 277 standardized patients. We are pleased to profile this important group of individuals in this year's Annual Report and the essential role they play at CEHPEA.

During our first three years of operation, we have dramatically increased the scope of services and programs that we provide. As our activities expand in the future, we are committed to supporting the province's efforts to increase access to medical professionals while ensuring the highest standards for all our assessment and education programs

Murray Urowitz, MD, FACP, FRCP (C)

Ontario Champions International Medical Graduates

Integrating qualified and competent International Medical Graduates (IMGs) into the province's medical system helps to improve access to health care for Ontarians. Ontario has been making significant investment in services for IMGs, making Ontario the leader in Canada when it comes to providing the supports and assessments they need to practice medicine in Ontario.

Not only has the government dramatically increased the number of residency positions available for IMGs, it has also made it easier for them to access information and services. As part of the HealthForceOntario strategy, the government provides funding to support IMGs in all levels of training and assessment in Ontario's medical schools, as well as funding for CEHPEA and the HealthForceOntario Marketing & Recruitment Agency's Access Centre for internationally educated health professionals. The strategy enables all parts of the system to successfully work together, resulting in a streamlined process for IMGs that is much easier to access, more transparent, objective and independent.

ABOUT CEHPEA

The Centre for the Evaluation of Health Professionals Educated Abroad (CEHPEA) is the only organization in Ontario that provides assessment, evaluation and training programs for internationally educated health professionals. With state-of-the-art examination and education facilities in downtown Toronto, CEHPEA is the largest assessment centre of its kind in Canada.

CEHPEA's overall goal is to facilitate entry to training or practice for internationally educated health care professionals. It plays a dual role – assessing International Medical Graduates (IMGs) to ensure that they meet Canadian standards for training and practice, as well as providing programs to orient candidates to training and practice in Canada.

“CEHPEA was set up to raise the bar for the assessment and training of internationally educated health professionals in Canada, and it has ‘arrived,’” says Brad Sinclair, Executive Director of the HealthForceOntario Marketing and Recruitment Agency. “CEHPEA's clinical exams are recognized as the legitimate gold standard. University Program Directors understand the scores and rely on them to make decisions about the best candidates for Ontario.”

VISION

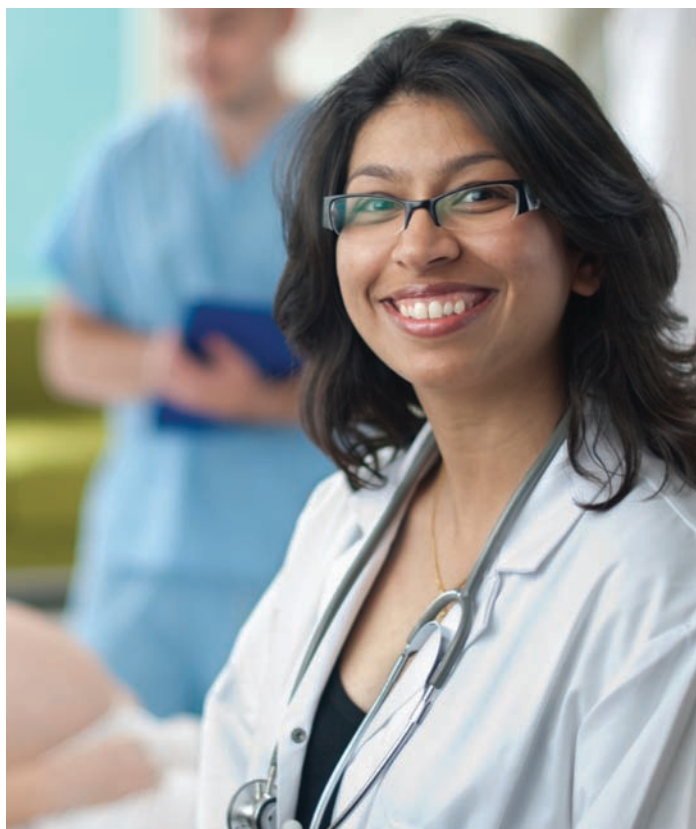
To facilitate access to a health care career to internationally educated health professionals who want to reside and practice in Ontario, through the provision of evaluation and orientation services.

MISSION

To be an integral part of the Ministry of Health and Long-Term Care's health strategy by providing ongoing evaluation and orientation programs for internationally educated health professionals based on the needs of Ontario's health care system and applicants.



CEHPEA FACTS AND FIGURES



Top 10 countries where CEHPEA applicants received their medical undergraduate degrees

Degree Country	2008/09	2009/10
Egypt	13.38%	13.51%
India	13.54%	11.82%
Pakistan	11.33%	11.82%
Iran	9.92%	11.82%
Iraq	6.14%	4.56%
Bangladesh	3.93%	4.39%
Romania	3.30%	3.20%
Sri Lanka	2.99%	3.04%
Nigeria	3.14%	3.04%
Russia	2.99%	2.70%

CEHPEA Examinations Conducted in 2009/10

Establishing CEHPEA has led to a more streamlined and transparent assessment process in Ontario and has increased the number of examinations offered. In total, 492 candidates participated in 10 examinations offered by CEHPEA in 2009/10.

CEHPEA conducted:

- 8 Clinical Exams (CE1) in the Family Medicine Stream
- 1 Specialty Specific Clinical Exam (CE2)
- 1 Specialty Specific Written Exam (SWE)

Age distributions of IMG candidates applying to CEHPEA

Age	2008/09	2009/10
29 or under	6.14%	7.43%
30 - 39	45.82%	43.75%
40 - 49	35.27%	37.50%
50 or older	12.75%	11.31%

Participation in CEHPEA's education programs

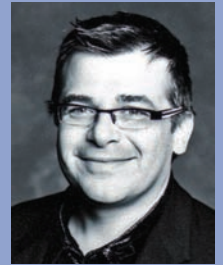
Program	2008/09	2009/10
Pre-Residency Program	126	79
Orientation to Training and Practice in Canada	13	128
Physician Assistant Integration Program	0	19
Total	139	226

WRITTEN AND CLINICAL EXAMINATIONS

LEVELING THE PLAYING FIELD FOR INTERNATIONAL MEDICAL GRADUATES



“What Canada does best is to take people from around the world to co-create a society that is unique, diverse and vibrant. The medical community is really a mirror of that process. We have an obligation to the public we serve, to get the best doctors for Ontario, regardless of where they come from.”



Dr. Salvatore Spadafora,

Vice Dean, Postgraduate Medical Education, Faculty of Medicine,
University of Toronto

Ontario absorbs more International Medical Graduates (IMGs) than all other provinces combined. Even so, the process is extremely competitive.

Through large-scale written and clinical exams, CEHPEA assesses the skill level of internationally educated health professionals and their readiness for practice in Ontario. CEHPEA's standardized evaluations help to level the playing field for IMG candidates. The exams ensure that IMGs meet the standards for Canadian training and practice, they allow them to compare their clinical competencies with those of Canadian medical graduates and they improve their chances of obtaining residency positions.

“The Canadian system is very complex and our medical education standards are among the highest in the world,” says Dr. Salvatore Spadafora, Vice Dean, Postgraduate Medical Education, Faculty of Medicine, University of Toronto. “In order to make sure that IMGs meet these standards, assessments need to be effective, objective, fair and

transparent. CEHPEA is an important part of that process and has earned a reputation for the validity and credibility of its assessments and processes.”

According to Spadafora, CEHPEA has achieved this, in part, through close collaboration with the Deans of Postgraduate Education of Ontario's six medical schools. CEHPEA's Executive Director and Director of Health Professional Affairs regularly attend meetings with the Postgraduate Deans to present curriculum and evaluations and solicit input. “CEHPEA communicates and collaborates with its stakeholders every step of the way.”

While other provinces mostly focus on assessment of fully-trained physicians, Ontario (through CEHPEA) provides assessments of IMGs across the entire spectrum of readiness, ranging from candidates with no prior experience, to those with partial training and practice experience, to physicians that have years of medical practice experience in another country.

Examinations Offered By CEHPEA

Type of Examination	Purpose
Family Medicine and PGY1 Stream General Comprehensive Clinical Exam (CE1)	Assesses readiness for entry-level training Prerequisite for CE2 and SWE for the following specialties: <ul style="list-style-type: none"> • Anesthesia • Orthopedic Surgery • General Surgery • Psychiatry
Specialist Stream Specialty Specific Clinical Exam (CE2) Specialty Specific Written Exam (SWE)	Assesses competency level for new Physician Assistant role Tests candidates' appropriateness for the Advanced Level Training (PGY2 or Practice Ready Assessment levels) in the following specialty streams: <ul style="list-style-type: none"> • Anesthesia • Dermatology • General Surgery • Internal Medicine • Obstetrics and Gynecology • Ophthalmology • Orthopedic Surgery • Otolaryngology • Pediatrics • Psychiatry

CEHPEA assesses IMGs to determine their preparedness for the following levels of postgraduate medical education:

- 1) Entry-Level Training (PGY1 – first year of postgraduate training in Family Medicine or Specialty Residency Program)
- 2) Advanced Specialty Training (PGY2 – second year of postgraduate training in a Specialty Residency Program)
- 3) Practice Ready Assessment (PRA – six month assessment in a clinical setting)

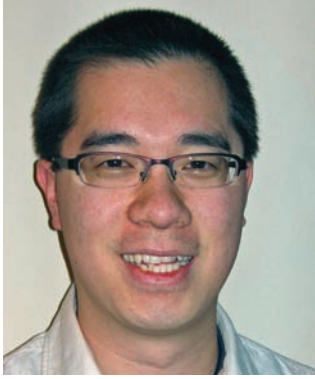
“Physicians have a lot of different roles, including management, scholarship, collaboration and communication,” says Spadafora. “When we assess potential physicians we look at their educational background and the results of written examinations. But we also need practical exams to assess their clinical skills. We are not just interested in what they do, but also, how they do it.”

CEHPEA’s OSCE-style clinical examinations, using standardized patients and simulations, provide a proven method for observing and assessing candidates’ clinical skills and competence.

In the last few years, CEHPEA has broadened its scope, lending its expertise in examinations of physicians to other areas. It started by creating and implementing the assessment tools and process for IMGs applying for the newly created role of Physician Assistant in Ontario. CEHPEA has also been working closely with the College of Nurses of Ontario to create an ongoing OSCE-style practice assessment for certified Nurse Practitioners in the province, with a pilot slated for the spring of 2012. Plans are in the works to develop extensive assessments for other professions.

ASSESSING READINESS FOR ENTRY-LEVEL TRAINING

The backgrounds of International Medical Graduates (IMGs) seeking residency in Ontario are diverse and varied. Some IMGs may be students studying abroad with limited experience, while others may have been practicing physicians for many years. The application process is extremely competitive and CEHPEA's General Comprehensive Clinical Examination (CE1) provides a good tool for assessing and selecting the best candidates for Ontario.



Dr. Fok-Han Leung

The CE1, which is unique to Ontario, evaluates each candidate's general knowledge, skills, attitude and behaviour. The skills evaluated can include history taking, physical examinations, data interpretation, clinical problem solving, diagnosis, management skills, ethics, safety, interviewing and communication.

The CE1 is an objective structured clinical exam (OSCE) consisting of 12, 10-minute stations depicting various

clinical scenarios. Objectivity is achieved by using standardized guidelines for the administration of the examination, the use of trained physician examiners, standardized patients and consistent scoring sheets.

Although the CE1 is not mandatory for IMGs applying for entry-level post

graduate training positions (PGY1 level) through the matching service administered by the Canadian Residency Matching Services (CaRMS), it has become increasingly important to University Residency Program Directors as a rich source of objective information about candidates' clinical practice skills.

"I have participated in many different examinations over the years and what sets CEHPEA apart is the rigour of the preparation and training that all participants go through, whether they are physician examiners, staff members or standardized patients," says Dr. Fok-Han Leung a family physician at St. Michael's Hospital and the Chief Examiner for CE1.

The patient cases used in the exam are always refreshed and kept up-to-date and the standardized patients go through extensive screening and training. As well, in his role as Chief Examiner, Leung conducts dry runs with the standardized patients before each exam where he "puts them through their paces." He points out, "Although the cases and roles are standardized, the candidates are not. So it is very important that the standardized patients are prepared to deal with the many different personalities of the candidates."

Initially CEHPEA held one CE1 exam a year, but the number of exams it offers has increased over the years and in 2009/10, 8 examinations were held. By comparison, most provinces offer a similar assessment once a year.

"Large-scale clinical examinations, like the CE1, require a lot of planning and administrative support to run smoothly," says Leung. "CEHPEA's exam experts have it down to a science."

National Assessment Collaboration

As CEHPEA's CE1 is by far the largest and most comprehensive in the country, its Executive Team is playing a leadership role in a national initiative to standardize the exam and ensure portability of credentialing across jurisdictions. Currently, each province has its own assessment; however, the Medical Council of Canada (MCC) is working with representatives from the federal and provincial governments and assessment centres to create and roll out a standardized OSCE across the country next year.

Dr. Murray Urowitz, CEHPEA's Director of Health Professional Affairs, chairs the Advisory Committee for IMG Assessment Programs and Arthur Rothman, EdD, CEHPEA's Statistician and Curriculum Consultant, chairs the National Test Committee, which is developing the national OSCE examination for review by the Advisory Committee. Both Dr. Urowitz and Dr. Rothman sit on the National Assessment Central Coordinating Committee (NAC3), responsible for the development and delivery of the national OSCE.

CE1 Fast Facts for 2009/2010

- **8 exams**
- **491 candidates participated**
- **Each CE1 required up to 36 examiners for stations – (12 examiners per track for 3 tracks); spare examiners and a Chief Examiner**
- **288 examiner positions supported the exams**
- **111 standardized patients worked in one or more of the exams**
- **36 support staff including registration attendants, station timers and hall monitors work at each exam**

EXAMINATIONS FOR EXPERIENCED PHYSICIANS SEEKING ADVANCED LEVEL TRAINING

IMGs who have experience as physicians in other countries may be able to apply for Advanced-Level Training and Practice Ready Assessment (PRA).

Advanced Level Training (PGY2) refers to the second year or more advanced years of postgraduate training in a specialty area. IMGs entering at this level have been assessed as requiring between one and four years of training in order to meet the registration requirements to practice in Ontario.

The PRA allows physicians, with previous practice experience in another country, to undergo a six-month assessment in a supervised clinical setting to assess whether or not they need further training or are ready to enter directly into practice. Upon successful completion of the PRA, they can apply for registration to practice medicine in Ontario. This process yields huge benefits by fast-tracking the process, saving time and money and increasing the number of qualified specialists in the province.

CEHPEA provides the following examinations to test candidates' appropriateness for the PGY2 or PRA levels in the specialty stream:

- Specialty Specific Clinical Exam (CE2)
- Specialty Specific Written Exam (SWE)

Improving the Specialist Assessment Process

In the past year, CEHPEA has streamlined the assessment process for IMGs looking for admission to Advanced Level Training in Ontario. Previously, IMGs took specialty stream examinations without knowing if positions were available. And often there were limited positions available for successful candidates.

"It was similar to research awards – meritorious but not funded," says Dr. Murray Urowitz, CEHPEA's Director of Health Professional Affairs. "It was a frustrating situation for everyone."

CEHPEA recognized the roadblock and took action on a few fronts to rectify the situation. For one thing, CEHPEA now polls University Residency Program Directors in advance and only offers exams where there are positions available. Specialty assessments are now aligned with identified need and positions available.

"The process is now more fair and transparent," says Urowitz. "It helps to temper expectations according to the reality and it is better for faculties, hospitals and candidates."

As well, CEHPEA is exploring ways to increase the number of specialty positions in Ontario. Traditionally, these positions only existed in university centres, but working in collaboration with HealthForceOntario, CEHPEA is exploring other centres such as community hospitals that are short of specialists and have the capability to provide evaluation. The response so far has been very positive.



ASSESSING COMPETENCY LEVEL FOR NEW PHYSICIAN ASSISTANT ROLE

While Physician Assistants (PAs) have worked for decades in the United States, the Canadian Forces and elsewhere, the PA is a newcomer to the Ontario health care system. The PA role was introduced by the Ministry of Health and Long-Term Care (MOHLTC) in 2007 through a series of demonstration projects in hospitals, community health centres and diabetes care and long-term care settings across the province.

At the request of the MOHLTC, CEHPEA developed the assessment standards for IMGs applying to become PAs in Ontario. CEHPEA's medical experts recommended the competency level for PAs, based on the General Comprehensive Clinical Examination (CE1) scores and created the assessment and selection process. CEHPEA also led the IMG selection process including: ranking (based on exam scores, recency of practice and nature of experience) and standardized interviews. Successful candidates were then interviewed and selected by the demonstration sites.

BUILDING THE INFRASTRUCTURE TO SUPPORT EXCELLENCE IN TESTING

In a few short years, CEHPEA has created a world-class centre for rigorous and objective assessment. However, in keeping with the old adage, "The road to excellence is always under construction," CEHPEA is constantly evaluating, refining and raising the bar for testing excellence at a national level. There are several critical factors that contribute to its success:

- Collaborating with Partners
- Providing World-Class Examination Facilities
- Ensuring Accuracy and Validity of Results
- Ongoing Refinement of the Examination Process
- Building an Outstanding Standardized Patient Program

Collaborating with Partners

As it develops its assessments and orientation programs, CEHPEA has increasingly collaborated and consulted with its partners and stakeholders, including the provincial and federal governments, medical schools, physicians, nurses and allied health professionals. Other key stakeholders include the College of Physicians and Surgeons of Ontario, the Royal College of Physicians and Surgeons of Canada, the Council of Ontario Faculties of Medicine, the College of Nurses of Ontario, and other regulatory bodies of the various health professions.

Providing World-Class Examination Facilities

CEHPEA's unique facilities have been designed to accommodate large-scale written and clinical examinations. The state-of-the-art examination and education centre is a 50,000 square foot facility in downtown Toronto. Special features include two floors linked by an internal staircase, large training rooms, a sequestering area and a security monitoring and

recording system. CEHPEA also has 54 clinical examination rooms equipped with medical examination tables and diagnostic equipment and extensive conference space.

Ensuring Accuracy and Validity of Examinations and Results

Exams created by CEHPEA are constructed and validated by its own in-house experts working in collaboration with medical education experts from Ontario's universities. CEHPEA works with the Chief Examiners for the specialty exams, program directors and specialists within the faculty and surgical skills labs to constantly refine its clinical and written exams. On an ongoing basis, CEHPEA takes an exceptional amount of care to ensure the validity and accuracy of its examinations and results.

Constantly Refining the Examination Process

Committed to excellence in testing, CEHPEA is constantly fine-tuning its examination content and processes based on evaluation reports and input from candidates, examiners and participants.

"Over the years we have focused on documenting, clarifying, fine-tuning and streamlining our processes," says Marla Nayer, PhD, CEHPEA's Director of Assessment Operations. "The result is a sophisticated, documented system that runs very smoothly."

To further enhance the process, in 2009/10, CEHPEA developed and launched an examiner training program. One third of the examiners have been through the program and the rest will follow.

Building an Outstanding Standardized Patient Program

In 2007, CEHPEA established its own Standardized Patient Program for clinical examinations. To find out more about this unique provincial resource program, please see the profile on Standardized Patients and their role at CEHPEA.



PROFILE:

STANDARDIZED PATIENTS PLAY KEY ROLE IN ASSESSMENT AND TRAINING



In this year's Annual Report, CEHPEA is pleased to profile standardized patients – a group of individuals that work behind-the-scenes at CEHPEA and contribute enormously to the success of its clinical examinations and orientation programs.

Standardized patients have been trained to portray patients in various medical situations, in a consistent, standardized manner. While some standardized patients are actors, many are not. They are men and women of all ages, physical types, ethnic groups and backgrounds to represent the various types of patients they will be portraying. What they do have in common is that they are strong communicators, have the ability to learn quickly and adapt easily to a variety of different situations.

Standardized patients learn cases based on real patients, simulating their physical signs in simulated interviews and examinations by IMGs.

STANDARDIZED PATIENTS ARE CRITICAL TO SUCCESS OF CLINICAL EXAMINATIONS

Patient simulations are a core component of CEHPEA's CE1 exam, which consists of 12, 10-minute stations depicting various clinical scenarios with individuals playing the role of patients. The candidates have seven minutes to interact with a standardized patient. The interaction may involve the candidates taking a history, conducting a physical exam, explaining a

management plan or counseling a standardized patient. This is followed by three minutes for the candidates to answer the examiner's questions.

Here are some examples of clinical scenarios in the examination:

- Alex Martino is a 25-year-old with a history of headaches
- Valerie Beaton is a 20-year-old student who comes to the emergency department, having had abdominal pain for 24 hours. Her temperature is now 38.2C and her RR 18Hr 86/min

In 2007, CEHPEA developed its own Standardized Patient Program, and in a very short time, it has become a success, expanding to include 277 standardized patients, four trainers and a Standardized Patient Coordinator.

The mission of the program is to have a standardized patient realistically convey an illness to a candidate in a consistent and measurable way. To achieve this, CEHPEA is constantly refining its screening and training processes for standardized patients, along with ongoing evaluation of the



Marla Nayer, PhD, and Aimee Leung

standardized patients' performance during examinations by the trainers, examiners, and CEHPEA staff. Trainers undergo intensive training sessions where they learn new training techniques that will enhance standardization and consistency of patient portrayals.

"This work has nothing to do with finding dramatic moments, entertaining or playing to an audience," says Marla Nayer, PhD, CEHPEA's Director of Assessment Operations. "It is essential during clinical assessments that the patient presents the same way for every candidate. It is important to ensure that each candidate has the same task and same experience with the patient so that all candidates can be assessed in a fair and equitable way. This job is not easy and it is not for everyone. The job requires energy, memorization, discipline, concentration and excellent communication skills."

Training is quite rigorous. CEHPEA has created complete scenarios for the standardized patients to learn, including medical complaints, histories and personal details about their lives. CEHPEA's trainers show the standardized patients how to move like the patients they are representing and how to respond to the physical examination. They also explain how to portray the appropriate affect for the role. Before each examination, the standardized patients complete a dry run with the Chief Examiner to ensure they are standardized and presenting the role accurately.

According to Aimee Leung, CEHPEA's Standardized Patient Program Coordinator and Trainer, what makes CEHPEA's program so outstanding is the commitment from the trainers, the standardized patients and the examiners.

"They all believe in the importance of the standardized patient performance within CEHPEA's assessment program," says Leung. "They are genuinely dedicated to the cause of helping the candidates demonstrate their knowledge and skills. The training and standardization outcomes are clearly defined, and the trainers and standardized patients are all working towards the same goals. On examination day, the standardized patients have direct contact with the candidates and are focused on portraying their roles accurately and being as consistent as possible in order for the candidates to be able to perform at their best."

PATIENT SIMULATIONS ALLOW CANDIDATES TO PRACTICE IN A SAFE TRAINING ENVIRONMENT

CEHPEA's orientation and training programs help internationally educated health professionals make the transition to practice in Ontario. A major thrust of the programs is orienting candidates to Canada's patient-centred approach, including communication skills.

"Learners trained in other countries may not understand the medical, cultural and professional behaviours expected of physicians in Canada," says Cathy Smith, PhD, CEHPEA's Standardized Patient Consultant for orientation programs.



Cathy Smith, PhD

CEHPEA's educational programs include classroom instruction followed by practice with standardized patients in simulations. Smith works closely with Dr. Sheldon Mintz, CEHPEA's Director of Educational Programs, and clinicians from the faculties of medicine to choose roles to support the clinical lectures. The simulations, using standardized patients supplied by the University of Toronto, take place in large and small groups as well as in one-on-one interviews.

The standardized patients are specifically trained for these sessions, which also include facilitators and instructors. While many of the standardized patients in the orientation program are from acting backgrounds, this role requires very different skills. On the one hand, they must be able to be in the role and in the "moment", but on the other hand, they must be able to observe, step out of the role and give feedback to the candidate.

The approach is learner-centred. Candidates are asked to identify strengths and weaknesses, create learning goals and are given the opportunity to practice. For example, the candidate may want to get some experience taking a sexual history or discussing issues of sexual orientation, addiction or mental health.

"Rather than telling them what to do, they get feedback from standardized patients, colleagues and the facilitators related to their learning goals and can try the simulation again," says Smith. "We strive to create a safe learning environment where it is OK to make mistakes and try things out. It is so rewarding to see the candidates increase their awareness and hone their skills."

While there are other patient simulation programs in Canada, what is unique about CEHPEA's approach is that it provides extended, ongoing orientation for IMGs with simulation embedded every day. Simulation requires a total team approach and CEHPEA has created an environment to allow the team to survive and thrive.

"We have built a solid foundation," says Smith. "It is amazing to work so closely with highly-qualified students. These learners have overcome extraordinary barriers to practice as doctors in Ontario. They are at the top of their game and they challenge us to be at the top of ours."

CANDIDATE EXPERIENCE



Dr. Ahmed Jehaan Ilyas

Dr. Ahmed Jehaan Ilyas completed his undergraduate medical degree at Saba University School of Medicine in the Caribbean and was accepted for a psychiatric residency with McMaster University, working in various hospitals in the Hamilton area.

He found CEHPEA's Orientation to Training and Practice in Canada (OTPC) Program and standardized patients extremely helpful in preparing him for his residency.

He liked the fact that he was asked what he wanted to work on. For one thing, he knew that he tended to be rather rigid in his interviews with patients, with a checklist of questions he wanted to ask to help him make a diagnosis. The OTPC program exposed him to different techniques and gave him a chance to practice. With feedback from his classmates, facilitators and the patients, he learned how let the conversation flow and still get the answers he was looking for in a more engaging way.

"The program created a comfortable atmosphere where we could practice and the simulated patients were so helpful," says Ilyas.

His first residency rotation was in psychiatry and he was able to hit the ground running. During his first week working in a hospital emergency department, a senior resident asked him if he was comfortable speaking to an extremely agitated patient. Without any qualms, he stepped in to interview the patient.

"The practice sessions at CEHPEA helped me to further refine skills I had garnered through my life experience and in medical school so that I was totally confident in intervening."

EDUCATION PROGRAMS

EASING THE TRANSITION FOR INTERNATIONALLY EDUCATED HEALTH PROFESSIONALS



CEHPEA plays an important role in providing orientation and training programs to help internationally educated health professionals make the transition to practice in Ontario.

In 2007, CEHPEA launched a Pre-Residency Program for Family Medicine Residents that was so successful Program Directors from Ontario Universities asked that a similar program be created for specialty streams. The Orientation to Training and Practice in Canada was created in 2008 and has grown from 13 participants in 2008/09 to 128 in 2009/10. As well, CEHPEA developed and led a four-month integration program for 61 IMGs interested in applying for the new Physician Assistant role in Ontario.

PRE-RESIDENCY PROGRAM HELPS PREPARE IMGs FOR FAMILY MEDICINE TRAINING

A few years ago, Program Directors from Faculties of Medicine across the province realized that a significant number of IMGs seemed to be struggling and had difficulty with the transition into training. They identified a need for a program to hone communication skills and orient IMGs to Canada's patient-centred approach to care, which is based on partnership and negotiation with the patient. Responding to that need, CEHPEA developed the Pre-Residency Program for Family Medicine.

There are modules on difficult topics such as family violence, breaking bad news and active listening. There are educational sessions as well as patient simulations. Phase I is six weeks of classroom seminars and simulations and Phase II is seven-weeks of on-site clinical rotations at the sites where the residents have been assigned for their two-year residency program. They are paired up with mentors (residents that are already in the program) to observe the life of a resident and are given an orientation to all the areas in which they will work.

The Pre-Residency Program for Family Medicine has been very well received in medical circles across Canada and around the world and is now a mandatory orientation program for all IMGs who are accepted in an Ontario Family Medicine Residency Program.

ORIENTATION TO TRAINING AND PRACTICE IN CANADA PROGRAM FOR SPECIALISTS

Given the success of the Pre-Residency Program for Family Medicine, University Program Directors asked CEHPEA to create a similar program for IMGs accepted into residency positions for other specialties. The Orientation to Training and Practice in Canada (OTPC) Program was created by CEHPEA in collaboration with specialty program experts. The four-week program, which was launched in February 2009, is now a mandatory orientation program for all IMGs who are accepted into the first year of postgraduate training in specialty residency positions at Ontario medical schools.

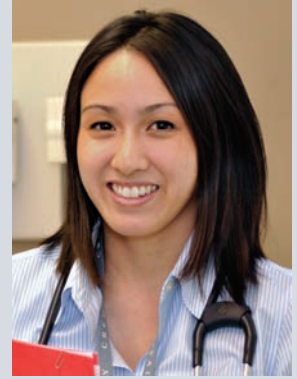
The OTPC is an intensive preparatory program that addresses key competency areas, while giving candidates a safe environment to hone their skills before residency. The topics covered focus on communication skills, the patient-centred interview, CanMeds and Canadian medical culture and includes information sessions with many medical organizations.

Photos courtesy of Credit Valley Hospital and St. Michael's Hospital

CANDIDATE EXPERIENCE Pre-Residency Program (PRP) and Orientation to Training and Practice in Canada (OTPC)

Dr. Christine Chen – Dr. Christine Chen completed her medical training in Grand Cayman Islands with clinical placements in the United States, which included Chicago, New York and Cleveland. Her experience in the United States as well as her previous career as an X-Ray technologist in Ontario meant that she was very familiar with the North American medical system.

“PRP was a really good experience,” says Chen. “The six weeks of lectures were very useful. For example, there were lectures on pharmaceuticals, which were critical as drugs in Canada and the United States often have different names. Also Phase II of PRP was extremely helpful. When I started my residency at Credit Valley Hospital, I already knew the staff, hospital layout and became more familiar with the Canadian clinical practices and guidelines. I think overall, that the PRP program is a great opportunity to prepare those who were trained internationally to provide primary health care within Ontario”.



Dr. Shajan Ahmed – For Dr. Shajan Ahmed, who obtained his medical degree in the Caribbean with clinical placements in the United States, the most important part of the PRP was Phase II, which involves clinical training as a medical student while matched to a senior resident. He completed that training at St. Joseph’s Health Centre in Toronto, prior to starting his residency there.

“Each hospital has its own way of doing things and so the placement was a great orientation to the hospital, staff and systems,” says Ahmed. “It helped me to prepare for my residency so that when I started, I felt confident, prepared, current and up-to-date. It definitely gave me an advantage over residents that have not taken PRP”.

Dr. Ali Novin – Originally a chiropractor, Dr. Ali Novin completed his undergraduate medical training at Ross University School of Medicine in the Caribbean, with clinical placements in New York, Chicago, Colorado, Vancouver and Manitoba. Prior to starting his residency (specializing in psychiatry) at St. Michael’s Hospital, Novin participated in the OTPC program.

“The classes really made you think and I met a lot of nice people,” says Novin. “OTPC was a great review of many things, including conducting physical examinations. The standardized patients were wonderful. We did a lot of role playing with many types of patients from different cultural and religious background wearing various body and face coverings.”

Novin also found the lectures useful and practical. For example, there was a class on “Life as a resident” that provided information about things residents may encounter, books they should buy, financial management and coping with stress.

“The OTPC program was a good thing. It was beneficial, and a great way to review, refresh and come back into the system.”



Dr. Ahmed Jehaan Illyas – Dr. Ahmed Jehaan Illyas, originally from Nova Scotia, completed his undergraduate medical degree at Saba University School of Medicine in the Caribbean and was accepted into a specialty residency in psychiatry at McMaster University.

Given his knowledge of Canada, he was originally skeptical about taking the OTPC program, but he quickly became a fan. In addition to the experience he gained through simulations, using standardized patients, he found the program to be very relevant.

“I had been thinking about how best to use the couple months before starting residency,” says Illyas. “OTPC was great and there was lots of helpful information. It is so relevant to know and understand the Canadian system as there are many differences among countries and provinces.”

Lectures and guest speakers helped Illyas and other candidates cut through the paperwork and provided them with tips, information and resources to help them understand and navigate through things such as the Return of Service Requirements, PAIRO benefits and OMA membership and services.

PHYSICIAN ASSISTANTS

PROFESSIONAL EDUCATION DAY – 2009



“The event was a real success with a wide range of topics and great speakers,” says Dr. Mikhael. “CEHPEA knew how to go after the best people and chose the right clinicians for the right topics. The result was an excellent conference that was professional, well-run and provided a great catalyst for physician engagement.”

Dr. Nadia Mikhael
Chair, Physician Assistant Planning Committee

What is a Physician Assistant?

A Physician Assistant (PA) is a health care provider who works under the supervision of a registered physician. Depending on the scope of practice of the supervising physician and individual PA competencies, PAs may:

- Interview patients and take medical histories
- Perform physical examinations
- Provide counseling on preventive health care
- Perform other tasks that the physician deems the PA qualified to complete

In November 2009, the MOHLTC sponsored a two-day Physician Assistant (PA) Professional Education Session to support professional development and provide an opportunity for information-sharing and networking. The event was organized by a PA Planning Committee, chaired by Dr. Nadia Mikhael with representatives from the Assessment and Education Sub-Committee (a sub-committee of the PA Implementation Steering Committee), the PA demonstration projects, the Canadian Association of Physician Assistants and educational experts. CEHPEA was an integral part of the planning committee, organizing and running the event without a hitch.

Building on the success of the 2008 PA Day, this year’s planning committee, introduced several new features. The curriculum was developed based on an extensive needs assessment that included

INTEGRATION PROGRAM HELPS IMGS TRANSITION TO NEW PHYSICIAN ASSISTANT ROLE

While Physician Assistants (PAs) have worked for decades in the United States, the Canadian Forces and elsewhere, the PA is a relative newcomer to the civilian health care system in Ontario. Partnering with the Ontario Medical Association and in collaboration with the Ontario Hospital Association and the Association of Ontario Health Centres, the Ministry of Health and Long-Term Care began introducing the PA role in 2007 through a series of demonstration projects. Over 65 PAs are now working in hospitals, community health centres, diabetes care and long-term care settings, and Family Health Teams across the province.

When opportunities opened up for International Medical Graduates (IMGs) to pursue PA positions, CEHPEA led the assessment process and created and ran a four-month comprehensive Integration Program, which was required for IMGs prior to starting clinical practice as PAs.

Three “cohorts” of IMGs (61) have participated in the program, many of whom are still working as PAs in health care settings across the province.

“CEHPEA has been incredibly important to the success of the PA Demonstration Project,” says Jane Seltzer, Manager of the Ministry of Health and Long-Term Care’s Allied Health Human Resources Policy and Planning Unit. “This is one more example of CEHPEA’s flexibility and sensitivity, quickly stepping up to the plate and delivering high-quality services and programs in response to ministry direction and the changing needs of Ontario’s health care system.”



Jane Seltzer



reviewing evaluations from the last session, surveying PAs in the demonstration projects to understand their requirements and conducting a focus group of project participants and supervising doctors. Based on the needs assessment and with advice from the planning committee, CEHPEA developed the curriculum, arranged the speakers and facilitators to deliver the sessions, and secured approval for continuing/professional education credits for the event from the Canadian Association of Physician Assistants, the College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada.

In another new development, Primary Supervising Physicians were invited to participate along with PAs in the 2009 session. Close to 100 people attending including almost all PAs in the project (61) and 29 physicians.

PROFILE:

PUBLIC MEMBERS BRING FIRST-HAND EXPERIENCE TO THE BOARD



Dr. Elena Sourovtseva and Steven Watts are the first public members appointed to CEHPEA's Board of Directors. Although they are from different professions, what they share is their experience as internationally educated professionals navigating the "system" and their commitment to make it easier for others.

Dr. Elena Sourovtseva, who was a practicing pediatrician in Russia, has directly experienced the challenges of gaining entry to practice in the Canadian medical system. She immigrated to Canada with her husband in 1999 and went through an extensive process to receive a license to practice.

Sourovtseva went back to school, completing an Honours Bachelor of Commerce and a Masters of Business Administration at the University of Windsor. She then wrote the United States and Canadian medical licensing exams and in 2004, just as Ontario opened up additional international medical graduate (IMG) positions, she was accepted into the IMG-Ontario program where she passed written and clinical examinations and accepted a position in a full family medicine residency program at the University of Western Ontario. She completed the residency in 2006, securing a full, unrestricted license and is currently a hospitalist with the Niagara Health System.

Looking back on her experience and that of her colleagues from other countries, she can see how the system has improved over the years.

"There have been tremendous changes in the IMG process in Ontario," says Sourovtseva. "It's much easier to get into a residency program than it was before. The process is much more user-friendly and CEPHEA staff members have made major improvements in the system since the first time I applied in 2002. They have reduced the number of examinations, streamlined services, standardized the approach to testing and have made the whole process much more transparent."

As a member of the Board of Directors of CEHPEA, Sourovtseva continues to advocate for IMGs and other immigrated health professionals.



Steven Watts, a Financial Services Partner at KPMG LLP, is passionate about removing roadblocks to practice for qualified, internationally educated professionals. His own frustrating experience when he immigrated to Canada in 1998 as a foreign-trained chartered accountant trying to get his Canadian designation, resulted in a precedent-setting case that has helped to blaze a trail for others.

When KPMG invited Steven Watts to work in its Toronto office, he already had achieved his Indian Chartered Accountant and had worked in its offices around the world. He became a resident of Canada, obtained his American Certified Public Accountant designation and applied through the Applications Committee of the Institute of Chartered Accountants of Ontario for exemptions based on his experience, references and prior designations. With the full support of KPMG and after extensive red tape and considerable effort, he was able to get some precedent-setting exemptions, successfully wrote the final exam and achieved his Canadian Chartered Accountant (CA) designation.

He immediately applied to be part of the same Applications Committee that had reviewed his credentials. "The committee evaluated people from around the world but appeared to know very little about skill sets from other countries at the time I went through the process," says Watts.

The committee members embraced his involvement and Watts was able to bring a unique perspective to the Committee's deliberations as it assessed the relevant work experience and academic qualifications of the applicants.

According to Watts, the committee has become more open and has made it easier for foreign-trained accountants to obtain their Canadian CA designation.

As well, Watts realized that immigrants faced a vicious cycle: They couldn't get a CA without relevant work experience and they couldn't get work experience without a CA. So he became active in the Toronto Region Immigrant Employment Council, which creates and champions solutions to better integrate skilled immigrants in the Greater Toronto Region labour market. He helps candidates by giving advice on resumes and job search techniques, conducts mock interviews to help them understand the subtleties of Canadian culture and of course, directs them to review his precedent-setting file for tips on building a case for exemptions.

"I am passionate about this, because I went through it myself," says Watts. "CEHPEA deals with similar issues, but as it is within the health care field, it is extremely enlightening and expands my horizon. I am very impressed by the enthusiasm, expertise and caliber of the other directors on the board. With my passion and perspective, I believe I can make a meaningful contribution."

INTRODUCING

CEHPEA'S BOARD OF DIRECTORS 2009/10

Margaret T. Nelligan, Chair

Margaret Nelligan has been a partner with Aird & Berlis LLP since 1989. She is a former practice group leader of the firm's Corporate Finance Group, as well as a member of the Energy, Mergers and Acquisitions and Private Equity and Venture Capital Teams. She practises in the areas of corporate and securities law, including investments for financial institutions and pension plans, mergers and acquisitions, restructurings, public financings, acquisition financings, private placements, proxy solicitations, corporate reorganizations and general corporate work.

Ms. Nelligan is a former member of the Securities Advisory Council of the Ontario Securities Commission and is an Adjunct Professor at Osgoode Hall Law School. She has also been selected for the *Women in the Lead* directory, featuring women whose professional expertise and experience recommend them as candidates for corporate board appointments. Recently, Ms. Nelligan was recognized as a "Woman of Influence" by Women of Influence Inc., a Canadian organization dedicated to the advancement of women.

She has acted as counsel to one of Canada's largest gas distribution utilities, one of Canada's largest pension plans, as well as numerous public and private industrial companies. She regularly advises the boards of directors of public companies on corporate governance and other matters. Ms. Nelligan is a director of Horizon Utilities Corporation, Ontario's third largest electricity distributor. She is also a director of Alpine Ontario Alpin, the provincial governing body for the sport of alpine ski racing in Ontario.

Anne Coghlan

Anne Coghlan is the Executive Director and Chief Executive Officer of the College of Nurses of Ontario. The College is the regulatory body for Registered Nurses and Registered Practical Nurses in the province.

Ms. Coghlan has over 20 years of leadership experience in varied professional practice, management, regulatory and educational roles. She obtained both her Baccalaureate and Master of Science in Nursing degrees from the University of Toronto and started her nursing career at the Hospital for Sick Children as a staff nurse and Paediatric Clinical Nurse Specialist. Ms. Coghlan introduced the roles of Director of Professional Practice and Chief of Nursing Practice at Markham Stouffville Hospital in the early 1990s. She has also held faculty positions in the Faculty of Nursing at the University of Toronto and Ryerson's School of Nursing. Prior to joining the College of Nurses in May 2000, she was a Principal in the health care practice of Ernst & Young Consulting Services.

Currently, Ms. Coghlan serves on the Executive of the Federation of Health Regulatory Colleges of Ontario as Past President. She also holds an appointment as Adjunct Professor in the Lawrence S. Bloomberg Faculty of Nursing, University of Toronto. Her professional interests include leadership in knowledge-based organizations, the public accountability of self-regulated professionals and the impact of globalization on regulatory policy.

Dr. Rocco Gerace

Rocco Gerace was appointed Registrar of the College of Physicians and Surgeons of Ontario in May 2002. Dr. Gerace carries out the Registrar's statutory duties and oversees the College's statutory obligations designated in the Regulated Health Professions Act. He also directs the administrative and financial operations of the College, and the implementation and monitoring of policies set by the Council.

Dr. Gerace graduated from the University of Western Ontario in 1972. He is a fellow of the Royal College of Physicians and Surgeons of Canada in Emergency Medicine, and a diplomat of the American Board of Emergency Medicine. Dr. Gerace is also certified in Medical Toxicology from the American Board of Emergency Medicine.

Prior to his appointment as Registrar, Dr. Gerace was an attending staff physician in the Department of Emergency Medicine at the London Health Sciences Centre and a Professor in the Department of Medicine, Division of Emergency Medicine at the University of Western Ontario. He was also a consulting staff member at the Poison Information Centre at the Hospital for Sick Children in Toronto.

Dr. Gerace is also a Past-President of the Medical Council of Canada.

Dr. Ken Harris

Ken Harris is currently the Director, Office of Education at the Royal College of Physicians and Surgeons of Canada and Professor Emeritus, Schulich School of Medicine & Dentistry at the University of Western Ontario. Prior to his move to Ottawa he had served as Associate Dean, Postgraduate Medical Education at the University of Western Ontario as well as being the Director of the Education Research and Resource Unit. He also served as Chair, Postgraduate Management Committee of the Council of Ontario Faculties of Medicine.

Prior to his appointment as Associate Dean, Dr. Harris was Chair of the Division of Vascular Surgery, London Health Sciences Centre, and Richard Ivey Professor and Chair of the Department of Surgery, UWO. He has also held positions of Chief of the Department of Surgery at the London Health Sciences Centre and with St. Joseph's Health Care London.

From 2006 until 2009, Dr. Harris has served as Chair of the Postgraduate Education Committee of the Council of Ontario Faculties of Medicine. He was also a member of the Accreditation Committee of the Royal College of Physicians and Surgeons of Canada, on the Board of Directors of the Fowler-Kennedy Sports Medicine Clinic and a member of the Interprofessional Education Working Group of the Ministry of Health and Long-Term Care.

Dr. Harris graduated from Queen's University in 1977. He is a fellow of the Royal College of Physicians and Surgeons of Canada in General Surgery and Vascular Surgery. In 2007 he was awarded the Vicky Blair Vascular Surgery Fellowship and is the recipient of the James IV Association of Surgeons Travelling Fellowship, BCOE Teaching Award and USC Teaching Honour Role.

CEHPEA'S BOARD OF DIRECTORS 2009/10 *Continued...*

Dr. Elena Sourovtsseva

Elena Sourovtsseva is a hospitalist with the Niagara Health System, a position that she has held since 2006. For the past several years, she has volunteered her services to help Canadian families to adopt children abroad. Dr. Sourovtsseva is an active member of the Canadian Foundation for Plastic and Reconstructive Surgery, organizing and leading humanitarian missions to Russia to help children and orphans with congenital and traumatic facial deformities to have hope for the future.

Prior to joining the Niagara Health System, she completed all Canadian and American medical license exams while working as a Physician Leadership consultant at Sunnybrook & Women's hospital in Toronto. In 2004, Dr. Sourovtsseva entered a full Family Medicine residency program at the University of Western Ontario, which she completed in 2006. At the same time, she was actively involved with many volunteer organizations and activities and was an Executive Member of Professional Associations of Interns and Residents of Ontario (PAIRO), advocating on behalf of residents and specifically, International Medical Graduates (IMGs). As a member of the Board of Directors of CEHPEA, Dr. Sourovtsseva hopes to continue to advocate for IMGs and other immigrated health professionals.

Dr. Sourovtsseva has an Honours Bachelor of Commerce and a Masters of Business Administration from the University of Windsor. Prior to immigrating to Canada in 1999, she practiced as a pediatrician in Russia and completed her PhD. Her PhD research explored the pathogenesis of hemolytic-uremic syndrome and the role of coagulation abnormalities in its pathogenesis. The work led to 23 publications and therapeutic changes that contributed to a dramatic reduction in mortality rates for this disease in Russia.

Dr. Mark Walton

Mark Walton is the Assistant Dean, Postgraduate Medical Education at McMaster University and was appointed to this position in August 2004. He is also currently the Chair, Postgraduate Management Committee of the Council of Ontario Faculties of Medicine (PGM:COFM). Since 2004, Dr. Walton has been a member of the Royal College Accreditation Committee and at that time was also appointed as a member of the Postgraduate Dean Committee for the Royal College. He is Chair of the Standing Committee on Postgraduate Medical Education for the Association of the Faculties of Medicine of Canada (AFMC). Prior to his appointment as Assistant Dean, Dr. Walton was the Program Director for the Department of Surgery at McMaster University.

Since November 2005 Dr. Walton has been a member of the Joint working group on PG Medical Education which involves many of the Postgraduate Deans in Canada and the Provincial Ministries of Health. His research is mainly clinically based however his main focus is one of Undergraduate and Postgraduate Medical Education and clinical innovation.

Dr. Walton graduated from the University of Alberta in 1985. He is a Fellow of the Royal College of Physicians and Surgeons of Canada in General and Pediatric Surgery.

Steven C. Watts, C.A.

Steven Watts is a partner in KPMG LLP. He specializes in serving clients in the financial services industry. His clients include Canadian Schedule I and II banks, and leasing and finance companies. Prior to immigrating to Canada in 1998, Mr. Watts worked in KPMG's offices in Amsterdam and Dubai.

He obtained his Canadian CA and American Certified Public Accountant designations after moving to Canada. He obtained his Bachelor of Commerce designation in Mumbai (Bombay) and Indian CA designation while training with a Big 4 CA firm.

Mr. Watts served on the Applications Committee of the Institute of Chartered Accountants of Ontario for eight years. In that role, he helped evaluate the credentials of foreign-trained accounting professionals who were interested in pursuing their Canadian CA designation. He hopes to share the experience he gained while on the Applications Committee with other Board members of CEHPEA.

Mr. Watts is the co-chair of the Islamic Finance Working Group of the Toronto Financial Services Alliance. He is also a past mentor under the Toronto Region Immigrant Employment Council's Mentorship Program, a former member of the Finance Committee of Tafelmusik Baroque Orchestra, and past Vice-Chair of the Toronto Chapter of the Institute of Chartered Accountants of India.

CEHPEA EXECUTIVE TEAM

Anne Marie Crescenzi, Executive Director

Arin De Fazio, Director of Finance and Administration

Dr. Sheldon Mintz, MD, Med, FRCP(C), Director of Educational Programs

Marla Nayer, PhD, Director of Assessment Operations

Dr. Murray Urowitz, MD, FACP, FRCP (C), Director of Health Professional Affairs

CEHPEA 2009/10 Conference Presentations

The Pathology OSCE – M Nayer, J McIlroy, B Chapman. Canadian Conference on Medical Education, St. John's, NFLD May 1-5, 2010.

Beyond Medical Expert and Communicator – Assessing Additional CanMEDS Roles in an OSCE. M Nayer Canadian Conference on Medical Education, St. John's, NFLD May 1-5, 2010 (1.5 hr workshop).

Developing and Using OSCE stations that assess the Collaborator, Manager or Scholar CanMEDS role – M Nayer, J McIlroy. Royal College of Physicians and Surgeons of Canada, International Conference on Residency Education, Sept. 24-26, 2009, Victoria, British Columbia.

The CEHPEA Rating Scale Can Distinguish Year of Training in Canadian Medical Graduates (CMGs): A Validation Study – J McIlroy, M Nayer, M Levine, R Walker, I Witterick, W Chapman, A Zaretsky and Arthur Rothman. Royal College of Physicians and Surgeons of Canada, International Conference on Residency Education, Sept. 24-26, 2009, Victoria, British Columbia.



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