April 20th 3:15- 4:30 pm workshops:

**Teaching with Technology (Role as Educator Track) - Jobin Varughese**
Increase your awareness of Clinically and Educationally useful apps available as well as online resources. Boost your knowledge of where to access online resources to aid in education of learners.

**Integrating EBM Principles in Clinical Teaching (Research and Scholarship Track) - Michael Lee-Poy**
McMaster is considered to be the founder of Evidence Based Medicine (EBM). EBM is considered foundational to the McMaster Family Medicine Residency Program. Come review the core EBM principles that are taught to residents and learn tips to integrate these principles into practice and clinical teaching. We will also share and review secondary sources for reliable evidence based information that we can use in clinical settings.

**Just Watch Me! - Peer Observation of Teaching (Leadership Track) - Allyn Walsh and Jon Miklea**
An increasing literature has identified the advantages for building our teaching skills through observing each other in practice. Participants in this session will examine the benefits of both observing and being observed by our peers, as well as some of the practical considerations that are involved.
Fostering Resiliency in Physicians to Avoid Burnout: Why are we failing? (Resilience and Wellness Track) Keyna Bracken
Burnout, mental health issues and substance use affect physicians at a higher rate compared with the general public. The toll on struggling medical trainees in particular, can be enormous, from the burdens of anxiety, depression and substance use, to avoidable critical adverse patient outcomes and the tragedy of suicide. How can we foster the development of resilient, humanistic physicians across the spectrum of lifelong learning so they can avoid depersonalization and erosion of spirit? We will discuss how medical training emphasizing individual, autonomous medical expertise may undermine the social humanities which may contribute to burnout. Strategies to reduce stress and foster resiliency will be discussed applicable across the spectrum of medical education.

April 20th 4:45- 6:00 pm workshops:

The Inquiry Stream: a new face for QA/QI/Research/EBM Curriculum for Residency Training (Role as Educator Track) Dale Guenter
It is time to modernize this important piece of the residency curriculum, and plans are underway. Join us to hear some ideas and provide your input. We will describe how these faces of inquiry might work better as a blended curriculum; some of the “must have” competencies and teaching for all McMaster residents; plans for a few changes for the coming year; and a few teaching tricks. Whether you are a current tutor of QA/QI or EBM, or you have had thoughts of becoming one, or you are just interested in supporting resident inquiry in your practice, this will be an important session for you. And your ideas will be very important for us.

Part I: Primer on Research and Scholarship in Family Medicine (Research and Scholarship Track) Lawrence Grierson, Dee Mangin, Meredith Vanstone
Interested in gaining a better understanding of conducting primary care research in the Department of Family Medicine? This session will review the classic domains of research specific to primary care, the integrated way in which various streams of inquiry contribute to DFM’s Research mission, and how the relationship between what is known and what needs to be known influences decisions around the types of research questions that can be asked, the methodologies used to answer those questions, and the overall research plan. Relevant and easily accessible resources will be shared.

Help! I need somebody: mentoring and being mentored (Leadership Track) Allyn Walsh
All of us both mentor and are being mentored informally. But how does mentoring differ from teaching or precepting? How can we recognize and build our opportunities in mentoring? In this session, a case based approach will be used to apply key concepts in mentoring to common
situations, and to examine some of the common pitfalls, as well as the benefits, for both mentor and mentee.

The Parallel Chart: Promoting wellness in our learners (Resilience and Wellness Track) Cindy Donaldson
The parallel chart is a teaching tool employed to encourage reflection on learner’s patient’s experiences of illness, and to examine what they the learners undergo in caring for patients. The parallel chart provides an opportunity for the writing of thoughts and reflections that, when shared in a group setting of peers and faculty, form the starting point for discussion and narrative inquiry.

Participants will be introduced to the idea of the parallel chart through a mini-workshop format, allowing for a first-hand experience of this teaching tool. The experience of Parallel Chart Rounds within the Community Based Residency Training (CBRT) program over the past 2 years will be shared and the academic underpinnings of this initiative will be reviewed. Participants will leave the session well prepared to incorporate the parallel chart into their teaching practice.

April 21\textsuperscript{st} 10:45 am – 12:00 pm workshops:

Identifying and working with the struggling learner (Role as Educator Track) Joyce Zazulak
One of the most challenging issues we face as educators is working with the learner who is struggling. This is challenging for both the preceptor and learner. This workshop will look at challenges and barriers with working with the struggling learner, examine a number of different frameworks to help with “diagnosing” the problem(s), and identify strategies for interventions most likely to lead to success for your learner.

Part II: Innovative systems of care: Short stories of research success (Research and Scholarship Track) - Lawrence Grierson, Dee Mangin, Meredith Vanstone, Cathy Risdon, Tejal Patel, Henry Siu, Pam Forsyth, Margaret Sandborn
Building on Part 1, this session gives participants the opportunity to hear about the experiences their colleagues in primary care have had as they enter into the world of answering clinically relevant questions. How did they get started with a question and engaged in the research process? What challenges did they experience? What supports and resources were they able to access? Was funding required and if so, how was it obtained? Real world stories will be shared and participants will have the chance to ask questions, engage in meaningful discussion, and lay the foundation of participation in a research-focused community of practice.
Teaching for Transformation: Teaching Compassion and Social Justice (Resilience and Wellness Track) Arno Kumagai

Teaching and learning topics of social relevance in medicine, such as professionalism, medical ethics, the doctor-patient relationship, global health, and social justice, requires that we stand the traditional model of medical education on its head. Learning is active and imaginative and demands engagement of the whole person, collaboration, and risk-taking—both by teachers and learners.

Education in these areas involves the fostering of critical consciousness of the self, others, and the world and is stimulated by small group discussions, stories of patients and their families, readings, essays, and creative art.

This model reflects a view that education in these areas enhances an understanding of—a deep and abiding connection with—the social responsibilities of the physician. This approach aspires towards transformation, i.e., the development of practical wisdom (phronesis), which links the knowledge and skills of the biomedical and clinical sciences with a moral orientation and action that aims at addressing human needs and answering the call of justice in the practice of medicine.