

## **GIM Subspecialty Update**

We had a very productive meeting with the Royal College staff on June 2, 2010. It was attended by Finlay McAlister (President CSIM) and Brian O'Brien (Chair, Specialty Committee in Internal Medicine), Narmin Kassam (incoming chair of the GIM Program Directors), Michel Normand (member Specialty Committee for Region 4), Sharon Card (outgoing chair of GIM Program Directors and member Specialty Committee for Region 2), Tom Maniatis (Chair, Canadian Association of Internal Program Directors), William Fitzgerald (RC President), Andrew Padmos (RC CEO), Ken Harris (RC Director of Education), Susan Tallett (Deputy Chair Committee on Specialties) and Jason Frank (Assistant Director of Education), Jennifer Stewart and other staff from the RC Office of Education.

We obtained further information about the concerns that the Committee on Specialties (COS) had about the GIM application. We discovered that there were a number of misconceptions circulating about the details of the application and the possible consequences of recognition of GIM as a subspecialty and have developed a plan to move forward. The views of the six Associate Deans of Postgraduate Education from Ontario and those of the Canadian Association of Interns and Residents strongly influenced the COS' decision to defer approval of our application. The RC is committed to assisting us to develop a satisfactory re-application that will be addressed by the Education Committee this fall.

Our next steps include:

- Preparing a short FAQ document to clarify that we are proposing a subspecialty of GIM, which each university can, if it wishes, apply to establish and each resident can apply to enter if they wish (it will not be compulsory, but a choice just like the other currently approved RC subspecialty programs). This program will provide two years of advanced training in GIM after three core years of Internal Medicine, but will not extend training for those who wish to complete Internal Medicine after four years. This is analogous to obtaining extra training in any one of the many existing sub-specialty areas. We will specifically clarify that we are not proposing all 400 trainees in Internal Medicine do five years of training in General Internal Medicine before proceeding to sub-specialty training in Cardiology, Endocrinology, etc. (as this appeared to be a common misperception around the COS table), but rather that our proposal for the GIM sub-specialty concerns the sixty or so residents who choose not to enter any of the currently RC recognized sub-specialty programs.
- Clarifying that our major objective is to allow the eight medical schools that currently offer two years of GIM to apply to provide the GIM sub-specialty program with nationally agreed upon objectives, standards and evaluation.
- Clearly defining GIM competencies as distinct from those of Internal Medicine and to clarify the scope of practice and the skills of a 5 year General Internist compared to a 4 year Internist, with inclusion of level of mastery of particular domains by GIM.
- Developing specific replies to each of the concerns raised by the various groups who opposed the application and were willing to have their stance shared with us. (We are not privy to any concerns raised anonymously to the COS, but believe in addressing the concerns we do know about, we will hopefully cover off the other concerns as well).
- Rallying support for the application from the faculty and residents of medical schools who already offer the training to counteract the criticism from those schools who do not.

We believe that all of us came away from the meeting with the feeling that GIM has captured the attention of all levels in the RC and that there is strong support within the Royal College to proceed with this application and to find the way to make it successful.

Brian O'Brien  
Finlay McAlister