

FORGING FORWARD THROUGH COLLABORATION

MCC ANNUAL
REPORT 2021-2022



MEDICAL COUNCIL
OF CANADA

LE CONSEIL MÉDICAL
DU CANADA



MEDICAL COUNCIL OF CANADA LE CONSEIL MÉDICAL DU CANADA

MCC ANNUAL REPORT 2021 – 2022

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ABOUT THE MEDICAL COUNCIL OF CANADA

The MCC is located in Ottawa on the unceded, unsurrendered Territory of the Anishinaabe Algonquin Nation, whose people continue to care for and sustain the land on which we have the privilege of working. We honour all First Nations, Inuit, and Métis peoples and their valuable past, present and future contributions to this land.

THE MEDICAL COUNCIL OF CANADA (MCC) is the only organization in Canada that provides independent, objective assessments to ensure all practising physicians in Canada have the skills, knowledge, and professional behaviours required to meet the highest standards of patient safety. The Canadian Standard, of which the MCC examinations are an integral part, is similar to the models of other professional disciplines, where standard requirements must be met to receive a licence. In addition, the MCC is expert at verifying and securely storing medical credentials and offers candidates and physicians a variety of data management services that are required on their path to licensure and beyond.

The MCC collaborates with partners, including provincial Medical Regulatory Authorities (MRAs) and medical schools across Canada, to ensure that our exams are rigorous, defensible, and address the evolving healthcare environment in support of safe care for people across Canada. We also ensure that physicians trained outside Canada who wish to practise here meet the required standards.



INTRODUCTION

IN 2021-2022, the MCC once again drew on its strengths to meet the ongoing challenges of the COVID-19 pandemic. Our mandate to support safe healthcare in Canada has been a guiding force, and we are well-positioned to continue with innovations in physician assessment.

The MCC delivered quality services to the medical education, regulatory, and assessment communities. We also made significant decisions, such as changing the requirements for awarding the Licentiate of the Medical Council of Canada (LMCC) and implementing organizational changes. Our team is now smaller and leaner, but we have emerged stronger in the process. We built new relationships, strengthened collaboration with key partners, and began laying the groundwork for how the MCC will deliver assessment services in the future.

The disruption of the past two years has had a lasting impact on people as well as on organizations across Canada and around the world. This year, the MCC team demonstrated incredible resilience and commitment. We are eager to maintain our vital work in physician assessment so that all in Canada can have full confidence in the care they receive.

2021 / 22
TIMELINE

click to link



19 MCC participation at the virtual CCME



16 NCIME Partnership

7 Release of MCCQE Part I results for the Jan.-Feb. 2021 session

31 MCC suspends delivery of the MCCQE Part II

28 3rd update to stakeholders during the virtual MCCQE Part II

26 Opening of the Sept. 2021 virtual NAC Exam application

20 2nd update to stakeholders during the virtual MCCQE Part II

18 First update to stakeholders during the virtual MCCQE Part II

11 Update to stakeholders about upcoming virtual MCCQE Part II session

10 MCC ceases delivery of the MCCQE Part II

4 Statement of Solidarity with Indigenous Peoples in Canada

29 10,500+ candidates took the MCCQE Part I at Test Centres (TC) or by Remote Proctoring (RP) since June 2020

15 First phase of implementing the LMCC service

6 Announcement that the Oct. 2021 NAC Exam will be in-person instead of virtual

18 Release of MCCQE Part I results for the April-June 2021 session

28 Meeting of the new MCC Council

23 Introducing the new Exam Oversight Committee (EOC)

20 Release of MCCQE Part I results for the July 2021 session

16 Message to stakeholders about updates to Oct. 2021 NAC Exam

1 Publication of MCC 2020-2021 Annual Report

**APRIL
2021**

**MAY
2021**

**JUNE
2021**

**JULY
2021**

**AUG.
2021**

**SEPT.
2021**

3 Canada surpasses 1 million COVID-19 cases

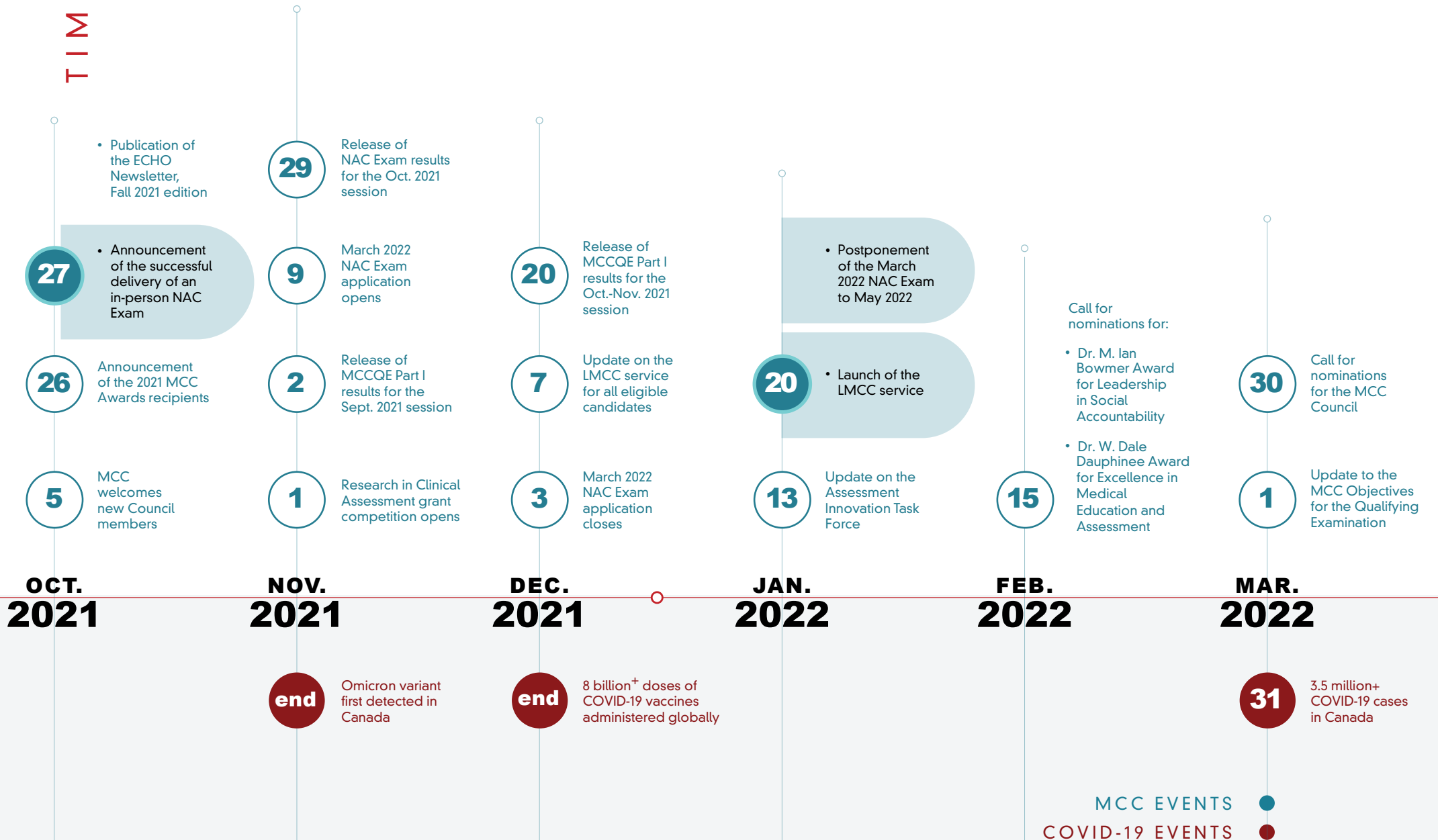
mid Peak of 3rd wave

mid 190 million+ COVID-19 cases / 4 million COVID-19 deaths to date globally

mid 54 million+ doses of COVID-19 vaccines administered in Canada

MCC EVENTS ●
COVID-19 EVENTS ●

2021/22
TIMELINE



MESSAGE FROM THE PRESIDENT

DR . BRUCE
WRIGHT



IN CHALLENGING times, it is essential to take a moment to recognize that sometimes the small wins — things we can easily take for granted — are actually big victories that deserve to be celebrated.

Despite the ongoing challenges of the COVID-19 pandemic, the MCC was able to accomplish an outstanding amount of work to help the organization pivot under extraordinary circumstances. At this critical turning point, the MCC didn't just survive, we seized the opportunity to refocus our activities in a way that will help us thrive in the long run.

The final transition to our new skills-based Council was seamless, thanks to the dedication and talent of people who believe as strongly as I do in the MCC's mandate. In collaboration with our partners and stakeholders, we made strategic choices that, while difficult, will help us serve the medical community even better going forward.

We still have much work to do. We have launched a comprehensive strategic planning process that will set the direction for Council for the coming years. It's an intense but deeply meaningful exercise that will help the MCC use its unique capabilities to deliver valuable services. The willingness of our team to engage in this thoughtful work speaks to the ethos that runs throughout our organization: our ability to listen, learn and adapt to the world around us. That is what it means to forge forward.

When I stepped into the role of President of the MCC, I already had tremendous confidence in its leadership team. That confidence has only grown. I am humbled to be part of an organization that makes such an important contribution to patient safety.

I want to thank everyone in the MCC's orbit for your collaboration, including our colleagues from Medical Regulatory Authorities across Canada, who have signalled their strong support for the place we occupy as an independent provider of assessment services. We are proud of the work we do, and I feel incredible optimism about the opportunity ahead to continue providing value in medical assessment.

MESSAGE FROM THE CEO AND EXECUTIVE DIRECTOR



DR. MAUREEN
TOPPS

ADAPTING to disruption happens in different ways. As the MCC responded to the challenges of the COVID-19 pandemic, our team coped with numerous rapidly changing and evolving situations and circumstances. In the first year, we focused on adapting our services in what we hoped would only be a temporary interruption for candidates and stakeholders. During this past year, we had to intensely consider how to organize ourselves to operate in a world that is forever changed.

Similar to the experience of so many other organizations, the pandemic has had a lasting impact on how the MCC operates. We had to make tough calls, including the decision to discontinue the Medical Council of Canada Qualifying Examination Part II. We also restructured our internal team, and we are now a leaner organization. Thankfully, our team is resilient, resourceful, and highly adept at forging new ways of working together. Even so, there is an adjustment process that comes with such upheaval, which is important to acknowledge and honour.

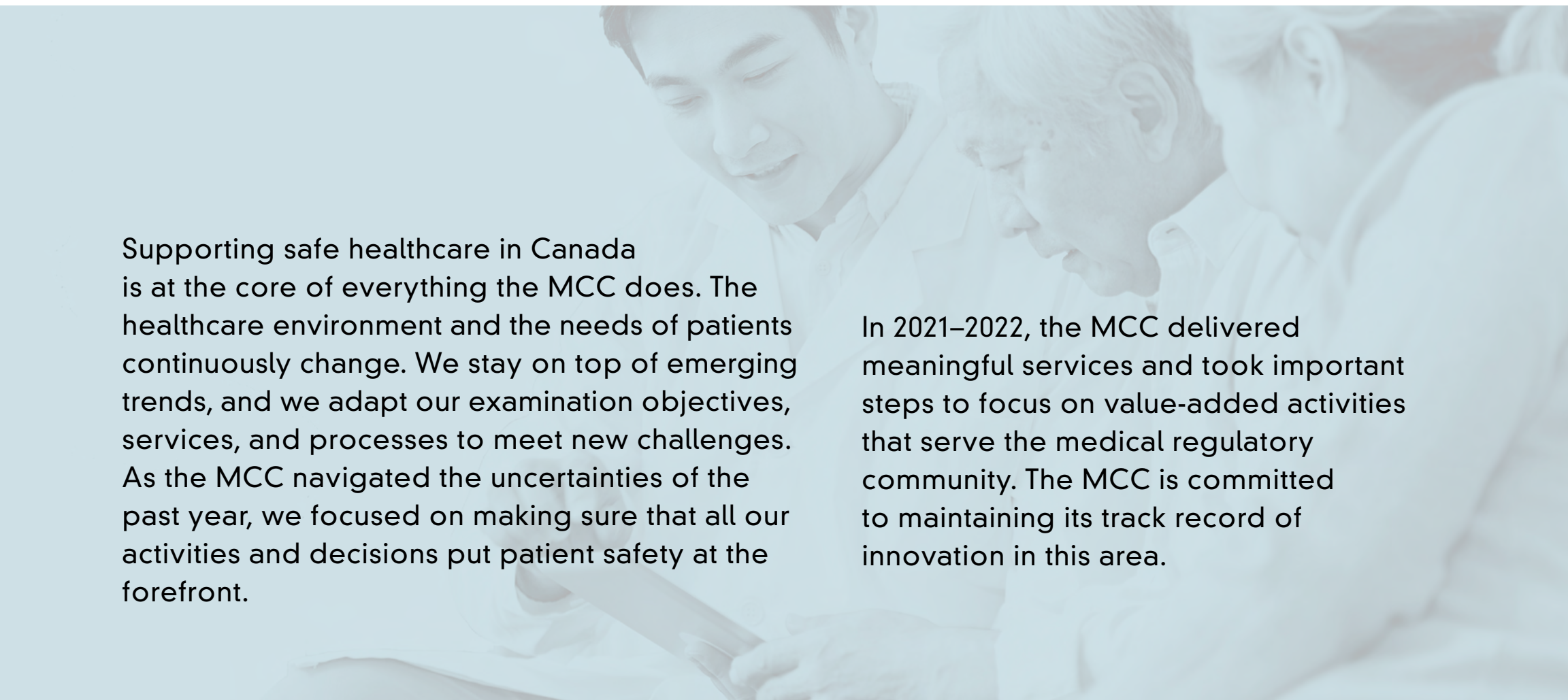
I am confident that unsettling change results in positive outcomes. This past year was equally about building and strengthening relationships, talking with partners and stakeholders, listening to their needs, and reflecting on how we can best meet them. We learned from others, and we drew strength from our shared experiences. I believe all of this has made the MCC more responsive and even better equipped to deliver focused services that fulfill a clear need in the medical community.

I am excited to work alongside Dr. Bruce Wright, together with our skills-based Council, the most diverse Council that has ever led the MCC. We are fortunate to have several new voices from a variety of backgrounds. It is a brave step to take on such a huge responsibility in a time of massive disruption, and I am thankful for their energy, wisdom, and perspectives. This is exactly what we need to forge ahead.

It is my privilege to work closely with an exceptional and dedicated staff as we support the work of the MCC, its governing Council and numerous external committees, whose activities I also wish to acknowledge and recognize. Thank you to everyone at Team MCC for continuing to bring your expertise, enthusiasm, and commitment to the work we do.

A photograph of a doctor in a white lab coat sitting on a hospital bed, showing a tablet to an elderly couple. The doctor is on the left, looking at the tablet. The elderly man is in the middle, looking at the tablet. The elderly woman is on the right, looking at the tablet. The image has a blue overlay and a diagonal line.

SUPPORTING
SAFE
HEALTHCARE
IN CANADA



Supporting safe healthcare in Canada is at the core of everything the MCC does. The healthcare environment and the needs of patients continuously change. We stay on top of emerging trends, and we adapt our examination objectives, services, and processes to meet new challenges. As the MCC navigated the uncertainties of the past year, we focused on making sure that all our activities and decisions put patient safety at the forefront.

In 2021–2022, the MCC delivered meaningful services and took important steps to focus on value-added activities that serve the medical regulatory community. The MCC is committed to maintaining its track record of innovation in this area.

COMPLETING THE TRANSITION TO OUR NEW COUNCIL

This year, the MCC completed the transition to a modernized, skills-based Council and continued to focus on equity, diversity, and inclusion. Changes to the governance model were several years in the making, following a comprehensive review launched in 2018 and Council’s decision to adopt a more agile and responsive model that reflects current best practices for non-profit governance.

The MCC’s new Council is based on a policy model, which means that Council focuses on setting the strategic direction for the organization. The make-up of Council was designed to ensure that key stakeholders are represented and that, together, Council members have the breadth of experience and expertise it needs to make timely, effective decisions.

Starting in 2021–2022, Council includes 12 members, including:

- three individuals with regulatory experience in health professions
- three individuals who are current registrars of provincial or territorial medical regulatory authorities
- three individuals who are experienced medical educators
- three members of the public

The new governance model requires that, to the greatest extent possible, at least half of the Councillors are licensed to practise medicine in Canada or have held a license to practise in the three years prior to their nomination. Councillors may serve for a maximum of nine years (three terms).

As part of the governance changes, in 2021–2022, the MCC adopted an updated process for nominating Councillors and introduced the Exam Oversight Committee (EOC), an oversight body to guide decisions on the MCC’s examinations. The EOC replaces the previous Central Examination Committee (CEC) and NAC Examination Committee (NEC), bringing a standardized approach to all MCC exams. It ensures that examinations offered by the MCC are relevant and appropriate and are administered through validated, standardized, and reliable processes.

The modernized governance model has already proven its value, as the MCC made significant decisions during its response to the pandemic. In 2021–2022, Council also became the most diverse it has ever been, representing new voices, as well as various skills, experiences, and areas of expertise, which added valuable perspectives to inform the MCC’s work.

“

“Moving to a skills-based board was a strategic decision that I can already see paying off. We know that society has changed and our Council is eager to continue informing the work of the MCC. Working together, we better ensure physicians in Canada are able to meet the needs of the population we serve.”

Dr. Lyn K. Sonnenberg

MCC Vice-President and Council member



“I am pleased to be a new public member on Council participating in MCC’s continuous innovation in delivery of physician assessment. Innovative assessment is critical to meeting the evolving needs of our society for effective and accessible healthcare.”

Dr. Mary Oxner

MCC Council and Finance, Audit and Investments Committee member



”

SUCCESSFUL DELIVERY OF THE NAC EXAMINATION AND THE MCCQE PART I

The MCC administers the National Assessment Collaboration (NAC) Examination to internationally trained candidates who wish to enter a Canadian residency program. It is a national, standardized examination that tests the knowledge, skills, and attitudes essential for entrance into postgraduate medical training in Canada.

The NAC Examination is an Objective Structured Clinical Examination that candidates take in person at a test facility. Administering this exam during the pandemic was challenging, and the MCC worked in close collaboration with testing centres to successfully offer the exam during two sessions in October 2021 and in May 2022, following the postponement of the March 2022 session. A total of 1,732 candidates were able to take the NAC Examination at nine test centres across five provinces.

Through conversations with international colleagues, we learned that the MCC was one of very few assessment organizations that was able to successfully offer a clinical exam under these circumstances. Doing so minimized the disruption to candidates' route to licensure. We were pleased to be able to share our experiences with sister organizations in other jurisdictions to help them adapt their processes.

In 2021-2022, five sessions of the Medical Council of Canada Qualifying Examination (MCCQE) Part I were administered. Between April 2021 and February 2022, over 7,000 candidates took the MCCQE Part I, either at Prometric test centres in Canada and worldwide, or by remote proctoring, allowing them to continue progressing along their route to licensure.

The Therapeutics Decision-Making (TDM) Examination is also delivered through Prometric via both modalities. The exam is challenged by candidates who have applied for a Practice-Ready Assessment (PRA) program, which is a 12-week clinical workplace-based assessment in Canada for physicians who have completed their residency and practiced independently abroad.

2021-2022:
MCC administered

2 sessions of
the TDM Exam on behalf
of the PRA programs to

248 candidates in

6 provinces



NEW AND UPDATED MCC EXAMINATION OBJECTIVES

As healthcare trends change, so must the MCC examinations. In 2021–2022, the MCC collaborated with medical learners, members of the Blueprint Committee and subject matter experts to implement new or revised objectives on seven important topics:

- Disaster preparedness, emergency response and recovery
- Prescribing practices
- Somatic symptoms and related disorders
- Clinical informatics
- Health and the climate crisis
- Indigenous health
- Health of special populations

The MCC appreciates the recent input provided by the Canadian Federation of Medical Students, particularly on the Health and the Climate Crisis Objective. Including these objectives as part of the MCC examinations helps ensure that physicians' knowledge includes topics that are relevant to patient care in a changing environment.

Sharing opioid resources

The development of MCC Examination Objectives can also support physicians on the route to licensure in other ways.

In 2020, the MCC worked with the Association of Faculties of Medicine of Canada and other collaborators to create new objectives on opioids, as part of a collaborative effort to address the prescribing behaviour of physicians.

This year, the MCC provided all its opioid resource material to Canada's medical schools, to support their curriculum on pain management and substance use.

MCC 360 CONTINUES TO IMPRESS

In 2021-2022, over 400 physicians from 12 organizations adopted MCC 360 as a professional development tool. MCC 360 is a multi-source feedback program that physicians can use to validate their competencies as a communicator, professional, and collaborator. The MCC continued to receive positive feedback on the value it delivers for physicians and organizations.

In addition to robust, science-backed survey questions, a defining feature of the MCC 360 is the emphasis placed on patient feedback. After the survey responses have been gathered and compiled into a report, the interpretation process is led by a professional facilitator who works with each physician to help them reflect on the findings of their report and develop a personalized action plan to improve their practice.

This year, in response to user feedback, the MCC made several improvements to the program and began work to move the tool to a new platform. Upgrades include recommendations from the team at North York General Hospital (NYGH), an early adopter of MCC 360. The MCC worked with staff at NYGH to improve the automation and communication features of the program, which led to increased survey completion rates.



2021-2022:
MCC 360 enrolled

400+ physicians
in

12 organizations

As of February 2022:

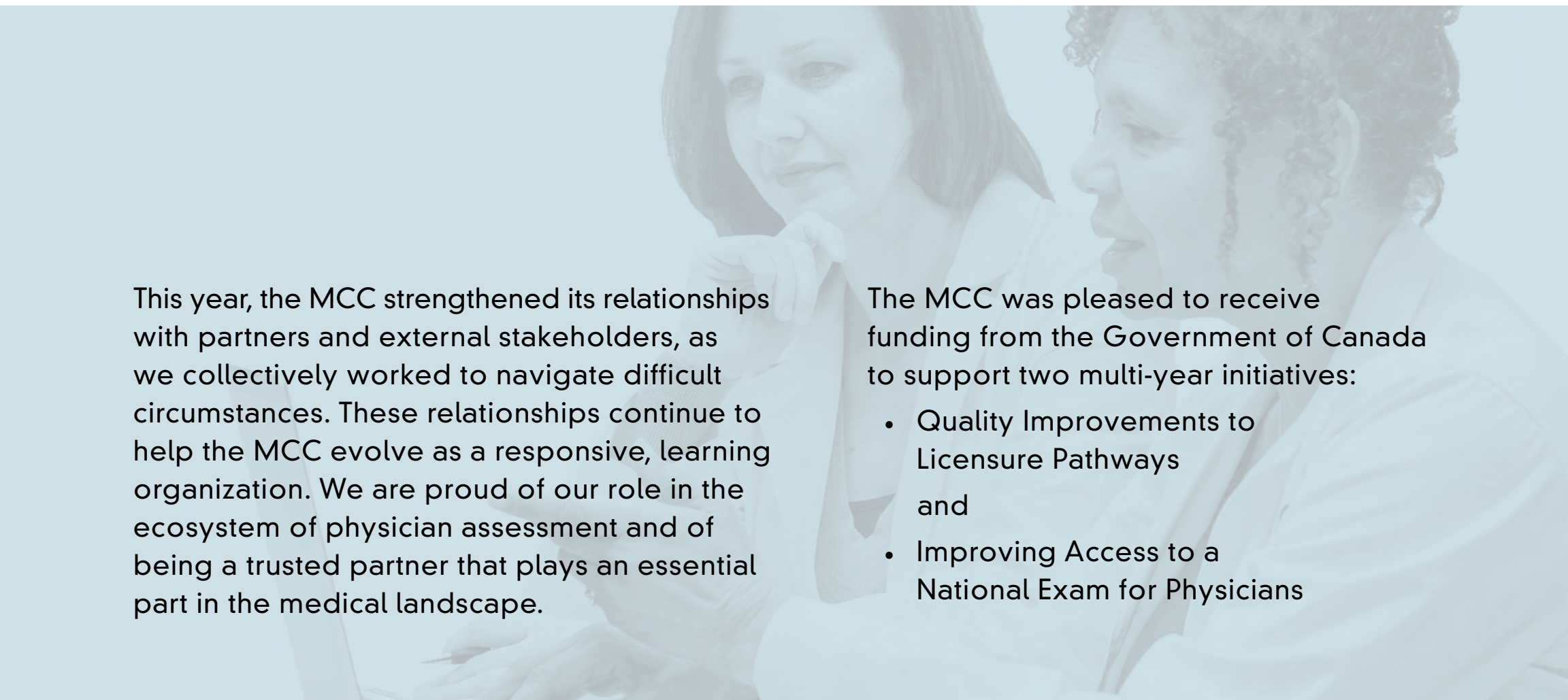
95% of NYGH physicians who enrolled in
MCC 360 completed the process with

42 days median completion time



A photograph of two women in white lab coats sitting at a desk with a laptop. The woman on the left is looking at the laptop screen with her hand on her chin. The woman on the right is pointing at the screen. The image has a blue overlay with diagonal lines.

SERVING
AS A TRUSTED
PARTNER

A photograph of two female physicians in white coats, looking at a laptop screen. The image is faded and serves as a background for the text.

This year, the MCC strengthened its relationships with partners and external stakeholders, as we collectively worked to navigate difficult circumstances. These relationships continue to help the MCC evolve as a responsive, learning organization. We are proud of our role in the ecosystem of physician assessment and of being a trusted partner that plays an essential part in the medical landscape.

The MCC was pleased to receive funding from the Government of Canada to support two multi-year initiatives:

- Quality Improvements to Licensure Pathways
- and
- Improving Access to a National Exam for Physicians

EXTERNAL FUNDING SUPPORTS QUALITY IMPROVEMENTS

Quality improvements and updates to the Application for Medical Registration

The process of obtaining a license to practise medicine in Canada involves several organizations and provincial and territorial regulatory bodies. The MCC facilitates the provisional and independent licensure process through the Application for Medical Registration (AMR).

Under the quality improvement project, the MCC is updating the physiciansapply.ca portal, which is the first point of contact for International Medical Graduates (IMGs) who wish to practise in Canada. These enhancements will help us meet industry best practices for communicating information to candidates, including updates to the processes and technology we use for identity verification and exam administration.

Improving educational modules and exam access

For the Improving Access to a National Exam for Physicians project, the MCC received funding from the Government of Canada's Foreign Credentials Recognition Program to update the educational modules and application processes used by IMGs who wish to practise in Canada. The funding will be used for several initiatives in 2022 and 2023, including work to:

- Enhance the educational orientation modules to include new information on Indigenous health, Black Canadians' health, mental health, transgender health, and opioid addiction in Canada
- Update the bilingual AMR to be used by candidates and Medical Regulatory Authorities
- Enhance the content of the National Assessment Collaboration (NAC) and TDM examinations to ensure they remain relevant for all assessed candidates and involved organizations using these assessments

INNOVATION IN VIRTUAL CARE EDUCATION

Virtual care is just starting to gain attention in competency-based medical education. The pandemic accelerated the need to include virtual care in the curriculum of medical schools. However, practising physicians also need support in the effective delivery of virtual care. In 2021–2022, the MCC developed a new training module that focuses on compassionate virtual care. The module is part of the Communication and Cultural Competence orientation program, a free self-education program for physicians to learn about communication and cultural competencies required in Canada.

The recently introduced module is designed to help physicians recognize the challenges associated with virtual care and select strategies for providing compassionate care in a virtual context. It explores how technology affects human interaction in virtual care, specifically communication, patient-physician relationships, and compassionate care, supported by illustrated examples of what physicians can expect to encounter, as well as exercises and resources.

The module was informed by input gathered during focus groups with physicians, patients, and caregivers. It was created with funding provided by AMS Healthcare and support from the College of Family Physicians of Canada (CFPC).


Bias is inevitable

We all have biases, some that we are aware of, and some that we do not even know that we have. Although it is impossible to eliminate bias, it is important to be aware of how bias can affect one's judgement. This is especially true in a high-stakes situation such as assessment of whether a candidate demonstrates sufficient competence to be ready to practice medicine in Canada.

In October 2021, to challenge biases and promote inclusivity, the MCC introduced a module intended for assessors participating in the National Assessment Collaboration (NAC) Practice Ready Assessment (PRA) programs. This online module is designed to increase their awareness of bias in various forms and to reflect on how bias may affect their judgment. The examples in the module are set in both the clinical context and in everyday life to help show how common bias is.



ENABLING
CONNECTIONS



Under the umbrella of the [physiciansapply.ca](https://www.physiciansapply.ca) portal, the MCC serves as a repository for vital information that candidates and practising physicians need to share with healthcare organizations, MRAs and government agencies.

Since launching the portal in 2013, the MCC has deepened its expertise in credential verification processes and enhanced its capabilities in safe, secure, and effective information sharing.

FACILITATORS OF SECURE INFORMATION-SHARING

The MCC provides a range of services — including source verification of credentials, document translation, and educational credential assessment — and a document-sharing functionality that connects candidates to dozens of external stakeholders. The MCC also offers an online database that provides permanent storage for international medical credentials, which is known as the Physician Credentials Repository. In March 2022, a total of 2,411,230 documents were stored in the Repository. More than 40 organizations across Canada rely on information that is reviewed, verified, and stored by the MCC to make decisions on everything from issuing medical licences to processing immigration applications.

Previously, each province and territory needed to manage its own system for collecting and storing information and sharing it with provincial and national regulators. By providing a pan-Canadian service, the MCC helps to reduce duplication and streamline the way candidates interact with multiple organizations, allowing secure sharing of examination results and medical credentials.

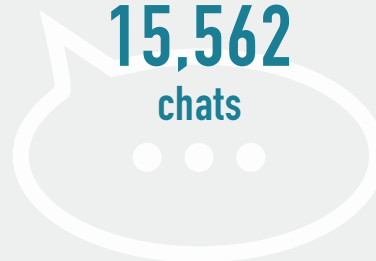
In 2021-2022, the MCC's service desk agents answered:



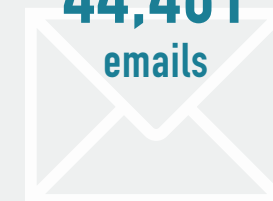
15,780
calls



15,562
chats



44,481
emails



“

The physiciansapply.ca account portal provides a trusted source of information to a variety of organizations in Canada, such as Medical Regulatory Authorities, certifying bodies, evaluation programs, regional public health authorities, and Immigration, Refugees and Citizenship Canada.”



Mr. Pierre Lemay
 Director,
 Repository and Registration
 Centre, MCC

”



15,165
 source verification
 requests



3,388
 document
 translations



2,551
 education credential
 assessment reports

were processed by the MCC's
 Repository and Registration
 Centre in 2021-2022

SHIFTING AWAY FROM THE MCCQE PART II AND DEVELOPING A NEW PROCESS FOR GRANTING THE LMCC

In June 2021, the MCC made the difficult decision to discontinue the Medical Council of Canada Qualifying Examination (MCCQE) Part II. The MCC is committed to delivering defensible and valid exams; following a rigorous review, the logistical challenges of delivering a large-scale clinical exam with pandemic-related restrictions meant we could not meet our high standards. Consequently, the process to receive the Licentiate of the Medical Council of Canada (LMCC) was also adapted.

The LMCC remains a key component of medical licensure and is still a requirement to obtain a full licence to practice medicine. The MCC worked collaboratively with Medical Regulatory Authorities (MRAs) to support them in interim licensing decisions and assist candidates along the route to licensure. On June 9, 2021, the MCC Council established a policy defining the new eligibility criteria for granting the LMCC and a new service to award the LMCC to eligible candidates was subsequently launched at the end of June.

In the first phase, candidates registered for the MCCQE Part II in 2020 and 2021 were processed and their LMCC information was made available to the MRAs via the physiciansapply.ca portal. In January 2022, the service was extended to all eligible candidates. The MCC consulted extensively with MRA representatives across Canada, who expressed a strong need for the MCC to continue our key role in assessing physicians on their route to licensure. We look forward to advancing important conversations with all stakeholders to map out a path forward that reflects our deep expertise and commitment to excellence in assessment.

EXAMINATION STATISTICS

		2019		2020 ¹		2021	
		Tested (#)	Pass rate (%)	Tested (#)	Pass rate (%)	Tested (#)	Pass rate (%)
MCCQE PART I	First-time CMG* takers	2,861	97	2,906	98	2,919	96
	Repeat CMG takers	138	73	86	86	87	78
	First-time IMG** takers	3,929	53	2,711	64	3,140	57
	Repeat IMG takers	950	42	1,026	52	1,203	44
	TOTAL	7,878	68	6,729	77	7,349	71
Number of Licentiatees issued		5,279		21[†]		2,849	
NAC EXAMINATION	First-time takers	1,281	64	1,231	77	982	84
	Repeat takers	424	67	441	83	323	79
	TOTAL	1,705	65	1,672	78	1,305	82

CANADIAN MEDICAL GRADUATES * CMG
(graduates of Canadian
medical schools)

INTERNATIONAL MEDICAL GRADUATES ** IMG
(graduates of medical
schools outside of Canada)

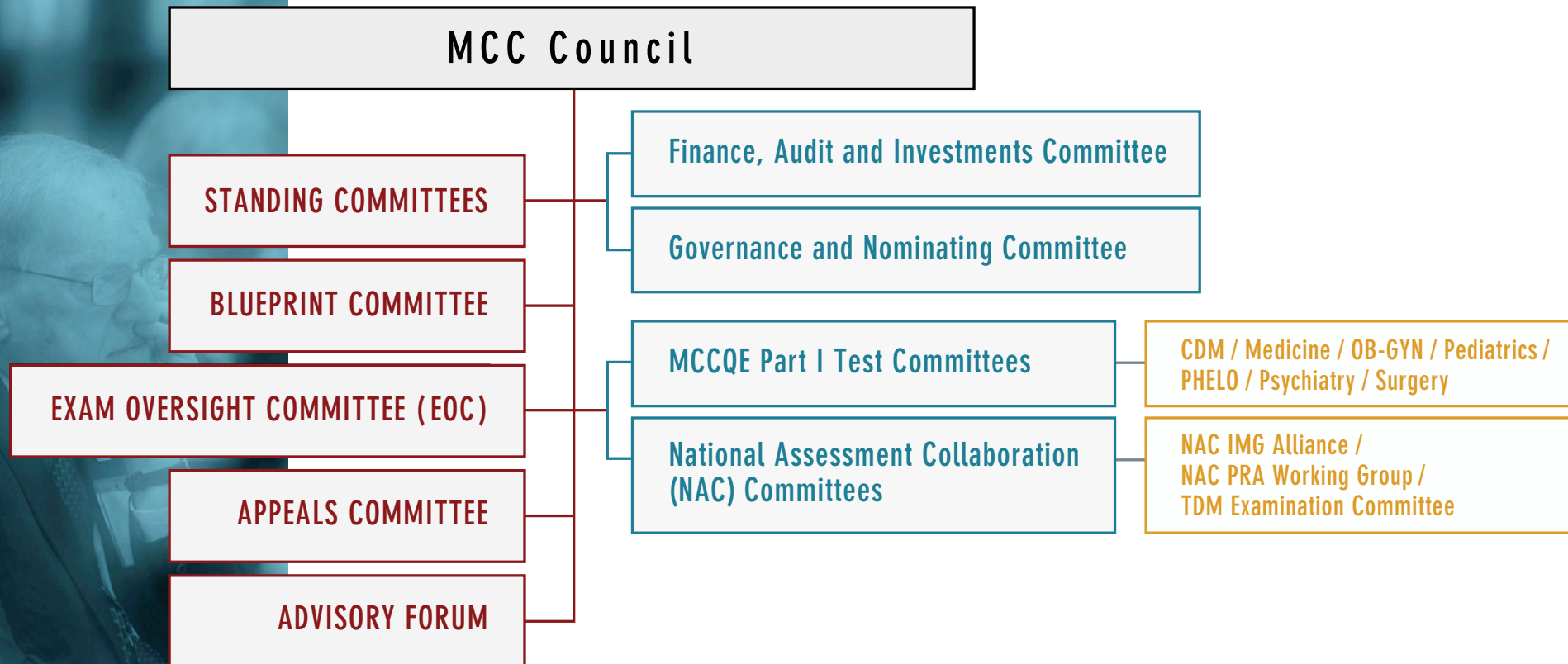
¹ At the time of the approval of results by CEC/NEC members.
Data may differ slightly from other publications (e.g., technical reports) due
to post-exam changes such as of candidates' status after result recheck or
reconsideration requests (Denied/No Standings results).

NOTE:

Denied Standing and No Standing are not included in the examination statistics

[†] Licentiatees of the Medical Council of Canada issued after result recheck,
reconsideration and appeal processes.

GOVERNANCE



At the 108th Medical Council of Canada (MCC) Annual Meeting in 2020, a decision was made to transition from our previous governance structure to a smaller, skills-based Council composed of up to 12 individuals. This change facilitates a robust and effective governance structure supporting the MCC as it continues to meet its vision, mission and strategic goals.

As part of this evolution, the new Exam Oversight Committee (EOC) came to life in July 2021 and was officially launched in September 2021. Recommended by the Exam Oversight Committee Review Panel and then appointed by Council, the Chair and six members of the EOC ensure that the MCC examinations are assessing the current competencies required to maintain the highest level of medical care in Canada.



2021-2022 MCC COUNCIL MEMBERS

PRESIDENT	Dr. Bruce Wright
VICE-PRESIDENT	Dr. Lyn Sonnenberg
MEMBERS	Dr. Theresa Farrell
	Dr. Sarah Funnell
	Dr. Gordon Giddings
	Mr. Brian Mazer
	Dr. Scott McLeod
	Dr. Cyril Moyse
	Dr. Heidi Oetter
	Dr. Mary Oxner
	Dr. Isabelle Tardif
	Ms. Kate Wood

4th row: Dr. Isabelle Tardif / Dr. Cyril Moyse / Dr. Scott McLeod / Dr. Mary Oxner
 3rd row: Dr. Heidi M. Oetter / Dr. Theresa Farrell / Dr. Lyn Sonnenberg / Dr. Sarah Funnell
 2nd row: Dr. Bruce Wright / Dr. Gordon Giddings
 1st row: Dr. Maureen Topps / Ms. Kate Wood
 Absent: Mr. Brian Mazer



STANDING COMMITTEES

**FINANCE, AUDIT AND
INVESTMENTS COMMITTEE**

CHAIR Dr. Heidi Oetter

MEMBERS Ms. Mélanie Dubé
Dr. Cyril Moyse
Dr. Mary Oxner
Ms. Kate Wood

**GOVERNANCE AND
NOMINATING COMMITTEE**

CHAIR Dr. Jay Rosenfield

MEMBERS Dr. Theresa Farrell
Mr. Brian Mazer
Dr. Scott McLeod

BLUEPRINT COMMITTEE

CHAIR Dr. Nancy Brager

MEMBERS Dr. Ian Johnson
Dr. Darren Martin
Dr. Andrea Mitchell
Dr. Kent Stobart
Dr. Preston Tran

ACTIVE UNTIL
JULY 2021

CENTRAL EXAMINATION COMMITTEE (CEC)



CHAIR	Dr. Teresa Cavett
VICE-CHAIR	Dr. Isabelle Desjardins
MEMBERS	Dr. Michel Chiasson
	Dr. Ciaran Goohja
	Dr. Jill Lawless
	Dr. Paul Hayes
	Dr. Michael Hogan
	Dr. Merrill Pauls
	Dr. Robert (Bob) Porter
	Dr. Lauren Zanussi

ACTIVE AS OF
JULY 2021

EXAM OVERSIGHT COMMITTEE (EOC)

CHAIR	Dr. Teresa Cavett
MEMBERS	Dr. Michel Chiasson
	Dr. Isabelle Desjardins
	Dr. Michael Hogan
	Dr. Julie Okapuu
	Dr. Jean Rawling
	Dr. Debra Sibbald

EOC - cont.



MEDICAL COUNCIL OF CANADA QUALIFYING EXAMINATION (MCCQE) PART I TEST COMMITTEES

Clinical Decision-Making (CDM)

CHAIR	Dr. Florin Padeanu (ON)	
VICE-CHAIR	Dr. Carey Matsuba (BC)	
MEMBERS	Dr. Nadine Abdullah (ON)	Dr. Susan Mercer (NL)
	Dr. Sandra Biem (QC)	Dr. Richard Scheirer (AB)
	Dr. Nancy Brager (AB)	Dr. Mary Wells (NL)
	Dr. Louis-Xavier D'Aoust (QC)	

Medicine

CHAIR	Dr. Karen Toews (MB)	
MEMBERS	Dr. Valerie Gratton (ON)	Dr. Mark Lees (SK)
	Dr. Amanda Hanson (AB)	Dr. Michèle Mahone (QC)
CONSULTING	Dr. Philippe Imbeault (QC)	Dr. Naheed Rajabali (AB)

Obstetrics and Gynecology

CHAIR	Dr. Ciaran Goojha (BC)	
VICE-CHAIR	Dr. Andrea Skorenki (AB)	
MEMBERS	Dr. Martine Robichaud (NB)	Dr. Catherine Tremblay (QC)
CONSULTING	Dr. Daniel Etarsky (ON) (Jan. 2022)	Dr. Amy Nakajima (ON) (Jan. 2022)



Pediatrics

CHAIR	Dr. Robert Porter (NL)	
VICE-CHAIR	Dr. Christine Racette (QC)	
MEMBERS	Dr. Keyna Bracken (ON)	Dr. Gillian MacLean (ON)
	Dr. Jan Kotarba (ON)	Dr. Bich-Hong Nguyen (QC)
	Dr. Jane Pegg (BC)	Dr. Sandra Simon (AB)

Population Health, Ethical, Legal and Organizational Aspects of Medicine (PHELO)

CHAIR	Dr. Merrill Pauls (MB)	
VICE-CHAIR	Dr. Fiona Bergin (NS)	
MEMBERS	Dr. Martine Baillargeon (QC)	Dr. Arnaud Samson (QC)
	Dr. Lara Kent (ON)	Dr. Chris Sikora (AB)
	Dr. Jacinthe Lampron (ON)	Dr. Gaynor Watson-Creed (NS)
CONSULTING	Dr. Katherine Larivière (ON)	

Psychiatry

CHAIR	Dr. Lauren Zanussi (AB)	
VICE-CHAIR	Dr. Marie Hayes (QC)	
MEMBERS	Dr. Julie-Eve Arseneault (NB)	Dr. Glendon Tait (ON)
	Dr. Emiko Moniwa (BC)	Dr. Eric Vickar (MB)
	Dr. Katherine Stringer (NS)	

Surgery

CHAIR	Dr. Émilie Comeau (QC)	
MEMBERS	Dr. Sampa Das (ON)	Dr. Darren Martin (NB)
	Dr. Robert Farrell (NL)	Dr. Ari Meguerditchian (QC)
	Dr. Catherine Mann (NL)	Dr. Mark O'Driscoll (NL)



ACTIVE UNTIL
JULY 2021

NAC EXAMINATION COMMITTEE (NEC)

CHAIR	Dr. Jean Rawling (AB)	
VICE-CHAIR	Dr. Bruce Holmes (NS)	
MEMBERS	Dr. Diana Chang (BC)	Dr. Rabin Persad (AB)
	Dr. Natalie MacLeod Schroeder (MB)	Dr. Carl Sparrow (NL)
	Dr. Julie Okapuu (QC)	Dr. Preston Tran (ON)
	Dr. Gordon Page (BC)	

EOC - cont.

NATIONAL ASSESSMENT COLLABORATION (NAC) COMMITTEES

NAC IMG Alliance

CHAIR	Dr. Jon Witt (SK)	
VICE-CHAIR	Dr. Elizabeth Bannister (NL)	
MEMBERS	Dr. Jean Rawling (AB)	NAC Examination Committee Chair
	Dr. Sten Ardal (ON)	Touchstone Institute representative
	Dr. Diana Chang (BC)	IMG PGME Programs representative
	Dr. Jack Burak (BC)	NAC PRA Working Group Chair
	Dr. Ghaida Rhadi (BC)	IMG representative
	Dr. Brent Kvern (ON)	CFPC representative
	Dr. Viren Naik (ON)	RCPSC representative
	Dr. Stéphane Ouellet (QC)	CMQ representative
	Dr. Anna Ziomek (MB)	FMRAC representative
	Ms. Cassandra Lacombe (ON)	Health Canada observer
	Mr. Terry Risbey (AB)	Committee on Health Workforce representative
	Dr. Maureen Topps (ON)	MCC Executive Director and CEO
<i>retired Sept. 2021</i>	Dr. Claire Touchie (ON)	MCC Chief Medical Education Officer
	Ms. Alexa Fotheringham (ON)	MCC staff representative



NAC Practice-Ready Assessment (PRA) Working Group

CHAIR	Dr. Jack Burak (BC)	
MEMBERS	Dr. Fiona Bergin (NS)	Dr. Martina Reslerova (MB)
	Dr. Nathalie Duchesne (QC)	Dr. Pamela Snow (NL)
	Ms. Jill Hastings (AB)	Dr. Jon Witt (SK)

Therapeutics Decision-Making (TDM) Examination Committee

CHAIR	Dr. Julian Midgley (AB)	Pediatric nephrologist
VICE-CHAIR	Dr. Peter Switakowski (ON)	Family Physician/Emergency
MEMBERS	Dr. Joseph Akinjobi (SK)	Family Physician
	Dr. Andria MacAulay (NS)	Family Physician
	Dr. Tara McCallan (BC)	Family Physician
	Dr. Michael Welsh (NS)	Pharmacist

DISCONTINUED
IN JULY 2021

MCCQE PART II TEST COMMITTEE

CO-CHAIR	Dr. Jill Lawless	
CO-CHAIR	Dr. Michael Hogan	
MEMBERS	Dr. Karen D'Silva	Dr. Martin Plaisance
	Dr. Therese Hodgson	Dr. Pierre Plourde
	Dr. Caroline Langlais	Dr. Gabriel Suen (<i>retired April, 2021</i>)
	Dr. Andrea Mitchell	Dr. Laura Weins
	Dr. Amita Modi	

AWARDS AND RECOGNITIONS



Outstanding Achievement Award in the Evaluation of Clinical Competence

This prestigious award recognizes the recipient's exceptional contribution to the Canadian health care and health care research. This distinction is unique in that the recipients come from a broad range of health disciplines, such as dentistry, physical therapy and medical practice.



Dr. Kelly Burak, Dr. Lara Cooke and the Physician Learning Program (PLP) team

FORMED IN 2009, Alberta's *Physician Learning Program (PLP)* is a unique program in Canada that supports physicians in their continuing professional development (CPD) by using clinical data to transform practice. The PLP at the University of Calgary (UofC) is led by the Associate Dean of Continuing Medical Education and Professional Development (CME&PD)—Dr. Kelly W. Burak (2017-2021), Dr. Lara Cooke (2012-2016). The PLP has developed the *Calgary Audit and Feedback Framework (CAFF)*¹, a strategy that provides physicians with their own individual practice data, while enabling them to compare their performance to that of peers or benchmarks. This program helps them use their clinical information to identify perceived and unperceived learning needs and create action plans to align their practices with best evidence. Over the past three years, the PLP team at the UofC has demonstrated a measurable impact in changing clinical practice.

DR. KELLY W. BURAK is a Professor of Medicine and Oncology at the Cumming School of Medicine of the UofC. He works as Hepatologist with special interests in liver cancer and liver transplantation and served as the Director of the Southern Alberta Liver Transplant Clinic for almost 20 years. Since joining the UofC in 2001, he has been actively involved in medical education and has received awards locally and nationally. He co-leads PLP with Dr. Denise Campbell-Scherer from the University of Alberta, and together they have worked collaboratively with provincial stakeholders to develop a new Provincial CPD Network.

DR. LARA COOKE is a Professor of Neurology at the Cumming School of Medicine of the UofC and is the Section Head of Neurology in the Department of Clinical Neurosciences. She practices Headache Medicine and provides general, hospital-based and ambulatory neurology care in a tertiary academic health setting and to under-served populations in Calgary. Dr. Cooke is also a Clinician Educator at the Royal College of Physicians and Surgeons of Canada (RCPSC) and has served in a variety of educational leadership roles including Residency Program Director and Associate Dean of CME&PD at the UofC. She led the Calgary Office of the PLP from 2012-2016 and in that capacity oversaw the development of the CAFF.

¹ Cooke et al., *Implement Sci* 2018;13(1):136

Dr. Louis Levasseur Distinguished Service Award

This award is presented annually to a past or present Council, staff or committee member of the MCC or to a person whose collaboration has contributed in an extraordinary manner to the vision and mission of the MCC. In 2021, the award went to Dr. Claire Touchie.



Dr. Claire Touchie

DR. CLAIRE TOUCHIE was the Chief Medical Education Officer at the Medical Council of Canada until 2021 and was the physician lead for the MCC's Blueprint project that transformed the Medical Council of Canada Qualifying Examination (MCCQE) Part I and Part II. She is a general internist at The Ottawa Hospital and a full professor at the University of Ottawa.

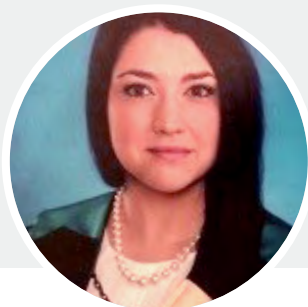
As a medical educator, she co-led the Association of Faculties of Medicine of Canada (AFMC) entrustable professional activities (EPA) working group helping medical schools develop and implement EPAs for the transition between medical school and residency. She is a founding faculty member of the international course on EPAs: Ins and Outs of EPAs. Dr. Touchie is an active member of the International Competency-Based Medical Education Collaborators.

Her medical education research interests include various aspects of student and resident training, high-stakes assessments (including written, performance and workplace-based), educational and assessment outcomes, entrustable professional activities and multi-source feedback.



Dr. M. Ian Bowmer Award for Leadership in Social Accountability

Created in honour of Dr. Bowmer's many years of service as the MCC Executive Director and Registrar, this award is given to one medical student and one resident who have demonstrated leadership in social accountability within the schools of medicine in Canada. Dr. Zach Sagorin and Dr. Jessie Nault are the 2021 recipients of this award.



Dr. Zach Sagorin

DR. ZACH SAGORIN is a first-year resident doctor in general surgery at the University of British Columbia (UBC) and recent UBC Doctor of Medicine (MD) graduate. He served as the President of the UBC Medical Undergraduate Society during the onset of the COVID-19 pandemic. During this time, he contributed to founding of the British Columbia (BC) COVID-19 Medical Student Response Team and worked alongside a small team to set up physician support projects as well as public health initiatives for medical students in BC. He developed new leadership roles within the Medical Undergraduate Society to address issues related to Equity, Diversity, and Inclusion as well as Planetary Health.

During his medical school training, Dr. Sagorin was invested in research projects that explored advancements in medical education, quality improvement in opioid agonist therapies, and gender equity in general surgery. Since starting general surgery training, he has been elected to sit on the Department of Surgery Resident Education Committee as well as represent residents throughout the province as a Board Member of Resident Doctors of BC.

Dr. Jessie Nault

DR. JESSIE NAULT is an Indigenous resident in Obstetrics and Gynecology at the University of Montreal. She has also completed a Bachelor's degree in Biology specializing in Metabolism and is a proud alumni of the Indigenous medical program at the University of Ottawa. During her medical studies, she received several awards such as the Society of Obstetricians and Gynaecologists of Canada (SOGC) Aboriginal Health Initiative Bursary and the Canadian Medical Foundation Aboriginal Student Bursary. She is working with the Indigenous Women Health Committee at the SOGC and the Indigenous Health in Speciality Postgraduate Medical Education Steering Committee at the Royal College of Physician and Surgeon of Canada to advance and promote Indigenous women health in Canada. She is currently working to complete her residency program and to create a mobile clinic to provide gynaecologic care to remote communities.



Dr. W. Dale Dauphinee Award for Excellence in Medical Education and Assessment

To honour Dr. Dauphinee's endeavors for change in educational practices and performance assessment and commitment to learning, this award is given to one medical student and one resident who have demonstrated excellence in medical education and assessment within the Schools of Medicine in Canada. Dr. Ivry Zagury-Orly and Dr. Rachel Curtis are the 2021 recipients of this award.



Dr. Ivry Zagury-Orly

DR. IVRY ZAGURY-ORLY grew up in Montreal and attended McGill University, graduating with honours with a Bachelor of Science in Rehabilitation Science, Major in Occupational Therapy. After completing his second year of medical school at Université de Montréal, his passion for education led him to pursue a two-year Master's of Medical Sciences in Medical Education at Harvard Medical School as part of a dual medicine-research path. His affinity for teaching extends to medical education research, particularly in clinical reasoning and critical thinking, in addition to evidence-based medicine and assessment. Dr. Zagury-Orly continues to be actively involved in research, particularly fascinated by the intersection between medicine and surgery.

Dr. Rachel Curtis

DR. RACHEL CURTIS is a fifth-year ophthalmology resident at Queen's University, where she also completed her BSCH (Bachelor of Sciences, Honours) and medical degrees. She has held the position of Co-Chair of the Queen's Resident Medical Education Committee (QRMEC) as well as ophthalmology resident Competency Based Medical Education (CBME) lead. Through her smart phone ophthalmoscopy research, she solidified her interest in seeking out novel and engaging teaching methods in ophthalmology.

As an advocate for the use of digital slit lamp photography for both patient and resident education, Dr. Curtis has helped create image-based learning modules for emergency medicine residents, as well as an anterior segment ophthalmic image library. Her latest project involves evaluating assessment and analyzing the quality of feedback in her own residency program as an early adopter of CBME.

Research in clinical assessment grant program

To support medical assessment research, the MCC offers research grants to interested faculty members, staff members or graduate students of Canadian medical faculties.



Grants are intended to support and provide a principal investigator with the financial resources required to further complete his or her research, while promoting the MCC's vision of striving for the highest standard of medical care in Canada.

The following are the recipients of the 2021 Research in Clinical Assessment grant program.

Dr. Susan Humphrey-Murto

Does learner handover bias ratings, entrustment decisions and feedback over time?



Dr. Walter Tavares

Examining the Role and Practical Implications of Philosophical Positions in Assessment

MCC EMPLOYEE SERVICE AWARDS

The MCC recognizes long-standing service of staff and congratulates all the service awards recipients for their continued service and loyalty. Here are the employees who received service awards for the milestones achieved from 2020 to 2022.

5 YEARS	NAME	DEPT.
	Kristen Abel	P&C
	Martine Clermont	RRC
	Alyssa Esposito	C&M
	Brian Jackson	BT
	Myriam Marshall	RRC
	Katherine Mason	RRC
	Johanne Gaudet	BT
	Stephanie Roy	C&M
	Tammy Walker	F&CS

10 YEARS	NAME	DEPT.
	Anne-Marie Ferland	AD
	Andrea Gotzmann	AD
	Martine Joly	C&M
	Steve Lepage	RRC
	David Mitchell	BT
	Quyên Nguyen	AD
	Derek Rumig	BT
	Mariann Talla	RRC

15 YEARS	NAME	DEPT.
	Denise Hubbard	C&M
	Fudong Ma	BT
	Thi Murphy	AD
	Hong Shen	BT

LEGEND OF DEPARTMENTS

AD	Assessment
C&M	Communications & Marketing
F&CS	Finance & Corporate Services
P&C	People and Culture
BT	Business Technology
RRC	Repository & Registration Centre



A man with short dark hair and glasses, wearing a white striped shirt, is sitting on a light-colored sofa. He is looking down at a tablet computer he is holding with both hands. The background is a blurred bookshelf filled with books. The entire image has a blue tint and a diagonal line crossing it from the top-left to the bottom-right.

PUBLICATIONS AND PRESENTATIONS

Research publications

2021

de Groot, J. M., Kassam, A., Swystun, D., & Topps, M. (2021). Residents' transformational changes through self-regulated, experiential learning for professionalism. *Canadian Medical Education Journal*, 13(1), 5–16. doi.org/10.36834/cmej.70234.

Morin, M., Alves, C., & de Champlain, A. (2021). The show must go on: Lessons learned from using remote proctoring in a high-stakes medical licensing exam program in response to severe disruption. *Journal of Applied Testing Technology*, 23(Special Issue), 15-35. jattjournal.net/index.php/atp/article/view/165790

Dizon, S., Malcolm, J. C., Rethans, J. J., & Pugh, D. (2021). Assessing the validity of an OSCE developed to assess rare, emergent or complex clinical conditions in endocrinology & metabolism. *BMC medical education*, 21(1), 288. doi.org/10.1186/s12909-021-02653-4

Humphrey-Murto, S., Shaw, T., Touchie, C., Pugh, D., Cowley, L., & Wood, T. J. (2021). Are raters influenced by prior information about a learner? A review of assimilation and contrast effects in assessment. *Advances in health sciences education: theory and practice*, 26(3), 1133–1156. doi.org/10.1007/s10459-021-10032-3

Presentations

2021

Roduta Roberts, M. & Alves, C. (2021, April 8–12). *Collecting validity evidence for CASPer: Predicting OSCE and fieldwork performance within an occupational therapy program* [Paper presentation]. 2021 American Educational Research Association Annual Meeting.

Bartman, I., Chen, K.J., Topps, D., Desjardins, I., Pugh, D., & Archibald, D. (2021, April 17–20). *How to measure utilization of Electronic Medical Record (EMR) in patient-physician communication from a patient perspective* [Poster session]. Canadian Conference on Medical Education 2021.

Chen, K.J., Bartman, I., Topps, D., Archibald, D., Desjardins, I., Forgie, M., & Pugh, D. (2021, April 17–20). *Exploring communication skills when introducing an EMR in an OSCE* [Paper presentation]. Canadian Conference on Medical Education 2021.

Eva, K., & Touchie, C. (2021, April 17–20). *MCC Assessment Innovation Task Force consultation session* [Business session]. Canadian Conference on Medical Education 2021.

Halman, S., Fu, A., & Pugh, D. (2021, April 17–20). *Entrustment within an Objective Structure Clinical Examination (OSCE) progress test: bridging the gap towards competency-based medical education* [Paper presentation]. Canadian Conference on Medical Education 2021.

Roy, M., Touchie, C., & Lockyer, J. (2021, April 17–20). *Working towards practice improvement: An examination of context, mechanisms, and outcomes impacting QI action plans* [Poster session]. Canadian Conference on Medical Education 2021.

Tian, F., Roy, M., de Champlain, A., Touchie, C., Kvern, B., & Witt, J. (2021, April 17–20). *Gathering evidence of validity for a Therapeutics Decision-Making (TDM) Examination for assessing international medical graduates* [Paper presentation]. Canadian Conference on Medical Education 2021.

Topps, M., Carroll, B., & Morin, M. (2021, April 17–20). *A year of impacts and innovation at the MCC: The benefits and challenges of introducing remotely proctored high-stakes exams* [Business session]. Canadian Conference on Medical Education 2021.

Roduta Roberts, M., Alves, C. B., & Chen, F. (2021, June 7–9). *Data-driven approaches to support the admissions process* [Poster presentation]. Altus Admissions Summit.

Alves, C., Morin, M., Robert, N., Carroll, B., Lacelle, B., & Kendall, J. (2021, June 8–11). *Pandemic is a portal: High-stakes medical licensing exam during COVID-19 times* [Paper presentation]. 2021 National Council on Measurement in Education Conference.

Morin, M., Alves, C. & de Champlain, A. (2021, June 8–11). *In-person proctoring versus remote proctoring with a medical licensing examination* [Paper presentation]. 2021 National Council on Measurement in Education Conference.

Shin, J., Guo, Q., Alves, C., & Morin, M. (2021, June 8–11). *Interaction log analysis of proctoring modalities in high-stakes medical licensing exams* [Paper presentation]. 2021 National Council on Measurement in Education Conference.

Humphrey-Murto, S., Shaw, T., Touchie, C., Pugh, D., Cowley, L., & Wood, T.J. (2021, August 27–30). *Are raters influenced by prior information about a learner? A review of assimilation and contrast in assessment* [Paper presentation]. Association for Medical Education in Europe 2021 Conference.

Wood, T.J., Daniels, V., Pugh, D., Touchie, C., Halman, S., & Humphrey-Murto, S. (2021, August 27–30). *Will raters overcome their first impressions when learner performance changes: Implicit versus explicit first impressions in the workplace* [Paper presentation]. Association for Medical Education in Europe 2021 Conference.

Chen, K.J., Bartman, I., Pugh, D., Topps, D., Desjardins, I., Forgie, M., & Archibald, D. (2021, Oct. 17–20). *Exploring communication skills when introducing an EMR in an OSCE* [Paper presentation]. International Conference on Communication in Healthcare 2021.

2022

Topps, M. (2022, February 17). Adaptability of MCC teams in a time of complexity: Experiences we learn and grow from. In E. Ferris (Chair), *Perspectives on Virtualization* [Symposium]. Touchstone Institute's Annual Symposium. youtube.com/watch?v=qODLNdoyKZg

Karkache, W., Halman, S., Tran, C., Nie, R., & Pugh, D. (2022, March 25). *Can't touch this: designing a touchless physical examination for a virtual Objective Structured Clinical Examination* [Paper presentation]. Meridith Marks Day 2022, University of Ottawa, ON.

A close-up photograph of a person's hands typing on a calculator. The image is overlaid with a semi-transparent blue filter and several diagonal lines that create a geometric pattern. The text 'FINANCIAL POSITION' is written in a light blue, sans-serif font on the left side of the image.

FINANCIAL
POSITION

STATEMENT OF OPERATIONS

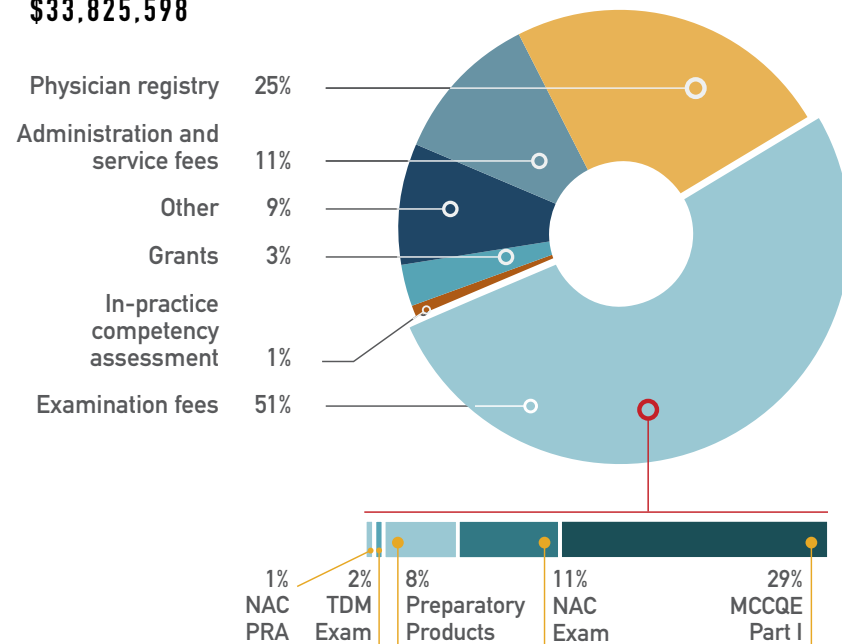
As the MCC navigated through the unpredictability of the second year of the pandemic, we faced new challenges, notably the discontinuation of the MCCQE Part II which resulted in the loss of over \$13.7M in annual revenue.

To ensure sustainability in a context where we were offering fewer exams, we immediately undertook organizational downsizing and reduced expenses. The short-term impact to MCC's financial position was further mitigated by the government assistance received that totaled \$1.8M (\$2.7M in 2020) in the form of the Canada Emergency Wage Subsidy. Funding from Employment and Social

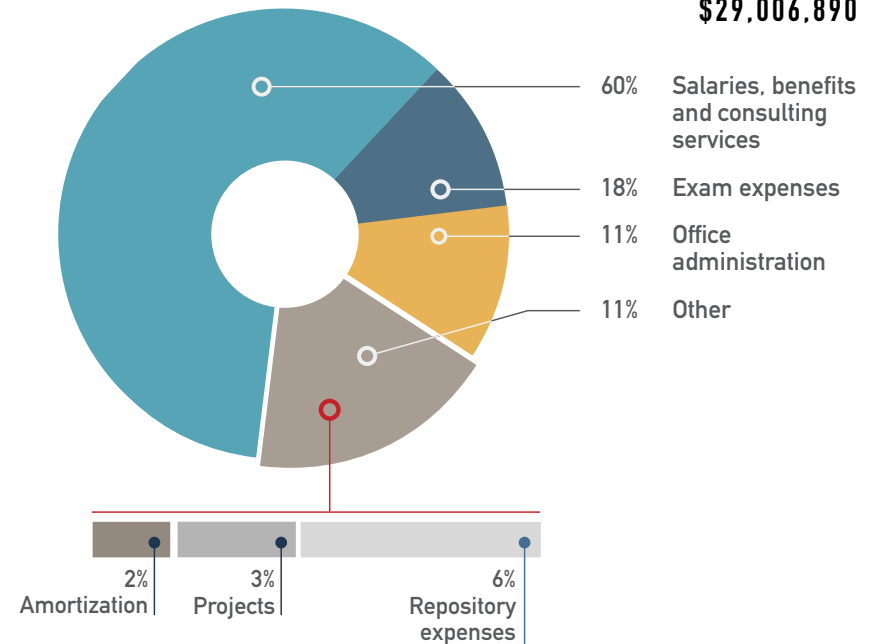
Development Canada (ESDC) in support of planned service and assessment improvements commenced during the year (\$1.1M), helping to support our continued commitment to innovation.

As the world continues to grapple with the impacts of the pandemic and volatile market conditions, the MCC is striving to rebuild and ensure sustainability. Our focus remains to be a vital and forward-looking organization that continues to provide independent assessments, secure data management and credential verification services necessary to ensure safe health care in Canada.

Operational revenue: \$33,825,598



Expenses: \$29,006,890



MEDIC

NAME

AGE

LICENTIATES

1. Rodaich, Thomas	George	
Thornston, Robert	Stinton	60
Atherton, Alfred	Beunison	57
Bapty,	Gallin	70
Brett,	Robert	29
Counell,	James	61
Dagman, Rufus	Cameron	57
Gilman,		

2021 Licentiates

The Licentiate of the Medical Council of Canada (LMCC) is a key part of the Canadian Standard, the set of requirements for awarding a full licence.

A physician who meets the criteria of the LMCC is enrolled in the Canadian Medical Register as a Licentiate of the Medical Council of Canada and receives a Certificate of Registration.

Licenciates awarded from January 2021 to March 2022:

	No. of LMCCs
Jan. to Dec. 2021	2,849
Jan. to March 2022	4,464
TOTAL	7,313



MEDICAL COUNCIL OF CANADA LE CONSEIL MÉDICAL DU CANADA

MCC Annual Report 2021–2022
FORGING FORWARD THROUGH COLLABORATION

Medical Council of Canada
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Ottawa, Ontario K1G 5L5
mcc.ca

Questions? Please contact the MCC:
communications@mcc.ca