A5 ISSUES & CHALLENGES IN TRANSFORMING THE CMHF INTO A TRANS-DISCIPLINARY ORGANIZATION

Let's begin by agreeing that the CMHF is a Canadian treasure, and that it is a product of the vision and commitment of many physicians, and their ability to raise funds to create and sustain it.

Following are a series of questions that I believe we need to address before taking on the challenge of moving the Hall from one focused on essentially honouring physicians and medical scientists to a Hall that embraces the breadth or some segment of the health science professions and the scientists that underpin their work.

- 1. **Why do this?** Is it a good thing to do? Would it signal that the Hall believes the march to creating an interdisciplinary health care system would be acknowledged and perhaps enhanced by doing this? Is there a downside to explicitly expanding the Hall beyond Medicine?
- 2. Would expanding the CMHF to explicitly encompass many/select health disciplines be a drag on its development to date?
 - a. Would it delay the election of many worthy living physicians and medical scientists and thus, unfairly expand the roster of those who are deceased?
 - Would it diminish the honour of being elected to the Hall in the eyes of the medical profession? I don't believe any of these outcomes have plagued the Canadian Academy of Health Sciences but it started life as a trans-disciplinary organization
- 3. Does it have implications for the name of the Hall?
 - a. The term, Medicine, means different things to different disciplines.
 - b. Health disciplines beyond physicians may not see themselves under the label of Medicine, nursing being a case in point.
 - c. Social Work, as it does at U of T, can even resist coming under the rubric of health.
 - d. Nursing views itself as one of the health sciences but not a medical science but this has much to do with the intertwined history of the two disciplines which most of the other health science disciplines don't share.
 - e. The public tends to view Medicine and medical care as all-encompassing health care terms.
 - f. The CMHF website uses the phrase 'Medicine and the Health Sciences'. Does the name, Canadian Health Hall of Fame have the same caché as the CMHF?
- 4. Would the same number of laureates be selected each year by the same review panel using the same criteria and standards?
 - a. Would the Hall be open to all health disciplines or to a pre-determined range of them (remembering in Ontario there are 30* regulated health disciplines by 26 colleges)?

- b. Would there be a plan to elect a pre-determined number of each of the health disciplines if there were sufficient candidates or would they all go into the same "hopper" and compete against each other?
 - i. Nursing (or physio or occupational therapy) did not do well under the MRC banner even after Henry Friesen opened up the competitions in the late 1990's, whereas under CIHR (at least until now) nurse scientists have held their own in the competitions. What changed? One factor may have been that from the beginning CIHR was explicitly interdisciplinary.
- 5. The CMHF has a number of initiatives beyond electing and honouring laureates: Discovery Days, scholarships for medical students, scholarships for high school students. Some of these are already trans-disciplinary in orientation.
 - a. Would all these initiatives be designed to be trans-disciplinary?
 - b. If the latter, would each of the participating disciplines be expected to undertake fund raising to support participants in their disciplines? The fund raising capacity of the disciplines varies tremendously, e.g., the Faculty of Medicine at the University of Toronto has a target of \$500m in their current fund raising campaign whereas the Faculty of Nursing has \$20m as a target and so far Medicine is doing much better than Nursing in reaching its target.
- 6. Are there some "untouchable" aspects of the Hall, e.g., location in London.
- 7. Is the current location large enough to accommodate an expanded roster of disciplines or would expanding the range of disciplines require a move? Would each discipline have its own section?
- 8. How would we go about getting the other disciplines and the schools that educate them on board?

*Regulated health disciplines

| Audiologists | Nurses |
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| Chiropodists, Chiropractors | Occupational Therapists |
| Dental Hygienists | Opticians, Optometrists |
| Dental Technologists | Pharmacists, Pharmacy Technicians |
| Dentists | Physicians and Surgeons |
| Denturists | Physical Therapists |
| Dietitians | Podiatrists |
| Homeopaths | Psychologists |
| Kinesiologists | Psychological Associates |
| Massage Therapists | Psychotherapists |
| Medical Laboratory Technologists | Respiratory Therapists |
| Medical Radiation Technologists | Speech-Language Pathologists |
| Midwives | Traditional Chinese Medicine Practitioners |
| Naturopaths | And Acupuncturists |