What is DPAS?
The Doctor, Patient and Society curriculum presents a series of thematic courses, typically 4-5 weeks in duration, delivered in the first two years of undergraduate medical instruction. Themes are multidisciplinary and integrative, melding core concepts and health perspectives from the humanities and social sciences with the clinical and basic sciences. The content and learning approaches explored in DPAS aim to prepare future physicians to function effectively and responsibly over the course of their professional lives within an evolving Canadian Health Care system situated in a multicultural and pluralistic society.

DPAS Mission Statement, Principles and Goals
The mission of DPAS “is to recognize and be responsive to our contracts with our students, the profession, the university and our faculty, and society and its representatives (e.g., government).”

Several principles govern the development and implementation of the DPAS curriculum, including
- being responsive to changing needs, expectations and requirements of society;
- to provide a diversity of learning opportunities centered on notions of holism, spirited enquiry and critical thinking
- encouraging collegiality among faculty (block leaders, lecturers and tutors) and students
- fostering professional, academic and clinical excellence

Among the goals which follow from implementing this mission and guiding principles, two are central:
- to develop relevant skills and attitudes toward practice and learning while instilling a body of requisite knowledge
- to provide for an evolving understanding of the student’s professional responsibilities and specifically of critical issues in the doctor/patient relationship within a diverse socio-cultural milieu.
DPAS in the Expanded Medical Program
The Northern Medical Program provides for undergraduate medical education in partnership with the Vancouver Mainland Medical Program, and the Island Medical Program. All incoming medical students spend the first term in the lower mainland. Consequently, DPAS in the NMP will consist of Year I Term II (January to May; ca. 20 weeks) and Term I (Sept – Dec, ca. 12 weeks) and Term II (Jan – May, ca. 18 weeks) in Year II. There will be considerable reliance on technologically-enhanced learning (e.g., video across all three sites).

A total of 24 undergraduate medical students are admitted into the NMP each year. By the end of the first graduating class (2007-08), a total of 96 students will be studying at the Prince George campus and in the regions it serves.

The DPAS Curriculum
The DPAS curriculum is presented in years I (designated DPAS 410) and II (DPAS 420), over a total of four terms. Currently, DPAS 410 meets on Wednesday afternoon, and DPAS 420 on Monday afternoon, and typically comprises a one-hour plenary / lecture or panel discussion followed by a two-hour tutorial.

The plenary / lecture is delivered by an expert(s), originating in one site and distributed to the other two via real-time video conference. Local experts may also be on-hand at the distributed sites to add unique perspectives and case studies.

During the tutorial, students break out into groups of 8. This largely self-directed learning experience is guided and assessed by a continuity tutor (see below). Both the students and the tutor are provided with manuals / resources to assist in their exploration of that week’s theme / topic.

The following table outlines the block themes, including those for Year I Term I, delivered in Vancouver (shaded).

<table>
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<tr>
<th>Year</th>
<th>Term</th>
<th>Theme</th>
<th>Weeks</th>
<th>Topics within Themes include…</th>
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| I | II | Social Sciences and Health | 9 | Social determinants of health, health beliefs and non-western health systems, and history of the Canadian health system |
| I | Ethics | 5 | Ethics projects |
| I | II | Public Health and Community Medicine | 5 | Public Health and Epidemiology; outbreak investigation |
| II | Addiction Medicine and Inter-collegial Responsibility | 5 | Addiction services, smoking and recreational drugs, harm reduction |
| II | Evidence-Based Medicine | 5 | Group projects; clinical study design |
| II | Sexual Medicine | 4 | Kids and sex, sexual orientation, sexual misconduct |
| II | I | Politics & Reality | 3 | The Canada Health Act, Aboriginal health, rationing |
| I | Community Interventions | 4 | Interventions; occupation health |
| I | Violence | 4 | Domestic violence, child abuse and neglect |
| II | II | Art & Science of Healing | 7 | Health seeking beliefs and philosophies, spirituality and self-care, chronic pain |
| II | Health Policy, Ethics and Law | 9 | Technological imperatives, mental health, child abuse, reproductive choices, death and dying, professional responsibility |

**What is a ‘Continuity Tutor’?**
The continuity tutor facilitates self-directed and small group learning. In many respects, they serve as a moderator, rather than a teacher, per se. Tutorial groups consist of 8 students, the membership of which remains constant throughout the year (barring exceptional circumstances). In this
way, a long-term commitment and relationship is established among the students within the group, and between the students and their tutor.

Continuity tutors within DPAS are a diverse lot – some have a medical background (physicians, nurses) or work in related fields (social work, psychology). Others do not, and come from fields in the social sciences and humanities, bringing a richness of life experience to the role.

The tutor attends the entire session (plenary and tutorial), comprising either Monday (DPAS 420) or Wednesday (DPAS 410) afternoons. In some weeks, they may be joined in the tutorial by a guest/expert tutor having specific expertise relevant to the topic at hand (e.g., in the ethics block).

Assessment
Tutors contribute to both formative (constructive criticism / feedback) and summative (evaluative testing) assessment of DPAS students. Successful completion of DPAS is based upon tutorial participation and several criterion-based term projects. For both 410 and 420, participation accounts for a substantive proportion of their assessment. Assessment is currently a ‘paper-based’ enterprise, though work is underway to switch this to an electronic (e.g., web) format.

Some components are not given a numerical weight, but must be completed in order to fulfill DPAS requirements. The tutor provides an overall assessment reflective of the student’s participation, on a ‘does not meet’, ‘borderline’ or ‘meets expectations’ continuum. The DPAS course director reviews all assessment outcomes with a view to identifying irregularities in performance and students in distress.

Tutor Support
Tutors are supported and ‘resourced’ via a number of different avenues.

The Course Director – The DPAS course director for the Northern Medical Program is Dr. Richard Lazenby (nmp-dpas@unbc.ca; 960-6696). The responsibilities of the course director include the ‘care and feeding’ of continuity tutors, plenary speakers, community panelists and, of course, the
students. Working with counterparts at the affiliate institutions, the NMP course director is charged with ensuring that the students in the NMP enjoy an equivalent educational experience to that of students in the VMMP and the IMP, and that this experience reflects the mission, objectives and goals of DPAS as outlined above.

*The Tutor Manual* – The tutor manual is the tutor’s ‘bible’ (it is currently under revision for the class of 2007/08). In addition to providing a general description of the DPAS curriculum, it outlines schedules, provides insight into running effective small-group discussions, itemizes the special projects and term assignments for DPAS, gives guidelines to assessment and evaluation and lists contact information for DPAS administrators (course directors and block leaders). It also discusses remuneration (see below).

Medicol – is a WebCT-based component of the undergraduate course delivery, built and managed through UBC. Medicol stands for Medicine and Dentistry Integrated Curriculum Online. Students, instructors and administrators are able to interact through this portal; they can retrieve course materials online, engage in chat-rooms, submit assessment etc. It is a virtual community and is central to the delivery and management of the undergraduate medical (and dental at UBC) education.

*Faculty Development* – Considerable resources are committed to assisting instructors and tutors acquire and maintain the skills needs the be effective teachers. Continuity tutors have special responsibilities (they work more closely with students than, say, block leaders or lecturers and have direct input into evaluation). Faculty development for the NMP DPAS tutors is currently envisioned as including a trip to view a DPAS session in the fall term (at UBC), as well as to participate in a workshop on effective small-group teaching.

*Tutor Support Meetings* – Over the course of each term, tutor support meetings are held at the end of each block. Historically, these have taken place during the lunch hour prior to the DPAS session, and provide opportunities to give feed-back to the course directors and block leaders, discuss alternate teaching strategies, brain-storm solutions to common problems, and generally ‘air out the laundry’. With the expanded program, these sessions will continue, but will incorporate a teleconference mode so that the NMP and IMP tutors can participate.
Remuneration
Imagine having all this fun creating future generations of doctors and getting paid for it! DPAS continuity tutors are paid at a rate of 1.5 units / hour of classroom instruction. As of 2005, a ‘unit’ as defined by UBC is $80.00 for physician clinical faculty and $40.00 for all others. Most DPAS tutors fall into the ‘other’ category, receiving a total of $120.00/tutorial.