

We're the scientists,  
educators, learners  
and staff, who  
have a *strategy to  
transform health for  
everyone*, and this  
is it. We're the ones  
**building the future.**



With gratitude, we acknowledge that the University of British Columbia Faculty of Medicine and its distributed programs, which include four university academic campuses, are located on *traditional, ancestral and unceded territories* of Indigenous peoples around the province.

We respectfully acknowledge that the UBC Vancouver-Point Grey academic campus is located on the traditional, ancestral, unceded territory of the x̣ʷməθḳʷəỵəm (Musqueam), and UBC operations in Vancouver more generally are also on the territories of the Skwxwú7mesh (Squamish) and səliwətaʔ (Tsleil-Waututh).

We respectfully acknowledge that the UBC Okanagan academic campus is situated on the traditional, ancestral, unceded territory of the Syilx Okanagan Nation.

We respectfully acknowledge that the University of Northern BC Prince George campus is located on the traditional territory of the Lheidli T'enneh, who are part of the Dakelh (Carrier) First Nations.

We acknowledge and respect the ləḳʷəŋən peoples on whose traditional territories the University of Victoria is located and the Songhees, Esquimalt and W̱SÁNEĆ peoples whose historical relationships with the land continue to this day.



Carved by Coast Salish artist Luke Marston, the Bentwood Box traveled with the TRC to its events throughout Canada, where people placed personal items into the box to symbolize their journey toward healing and expressions of reconciliation.



We are training more Indigenous doctors  
than ever before, with more than 110  
Indigenous medical graduates since 2004.

Through their work in communities in B.C. and across the country, Indigenous graduates are helping to build a health-care system that is more inclusive, representative and equitable.





Every day 4,500+ students  
are learning in more than  
80 communities across  
British Columbia.



2021-2026 STRATEGIC PLAN

Dean's Message	7
Vision	13
Values	15
Commitments	17
Our contract with society	18
Our contract with ourselves	19
Pillars	20
Education	24
Research	30
Organization	36
Partnership	42
Strategy to Action	46

UBC medical students share their first-hand experiences in learning cultural safety and humility in Indigenous health care with Dean Dermot Kelleher and John Pawlovich, a clinical professor and medical director with Carrier Sekani Family Services in northern B.C.

In its Response to the Truth and Reconciliation Commission of Canada’s Calls to Action, the Faculty is deeply committed to taking the steps needed to bring about change, including doing our part to help develop educational and health-care systems that are equitable, culturally-safe and free of Indigenous-specific racism and discrimination.



DEAN'S MESSAGE

As I reflect on the past five years, I am inspired by what we have accomplished together and energized by the possibilities for our future. With our vision as the aim, guided by our values and commitments, we strive for excellence—in everything we do.

It has been a difficult time for society, and I am struck by the extraordinary efforts of our health-care community members who stepped up to meet this challenge with commitment and compassion. With hope for the future, we find motivation in this experience to redouble our efforts towards health and well-being for all.

Despite the substantial impacts of the COVID-19 pandemic, we continued to implement our strategic plan, *Building the Future: 2016-2021*, in new and innovative ways. As a world-leading Faculty of Medicine, we have seen what can be accomplished at an accelerated pace—translating research findings to benefit people and populations, innovating to safely deliver outstanding educational experiences, enhancing collaboration across the health sector, and finding new ways of working together while apart.

This refreshed strategic plan continues our focus on making a positive impact on society, and for society. It builds on the success of our previous plan, and on the foundation laid by our learners, faculty and staff who have exemplified the excellence for which UBC is known worldwide. Looking through the lens of our new context and ambitions for the future, we consulted broadly, analyzed our progress, and considered other timely and influential documents to update our goals and strategies for the next five years in each of the pillars: Education, Research, Organization and Partnership.

Alongside our externally-focused commitments, which make up our contract with society, we are now taking a new look internally, to our organization and our people. We stand firm in our conviction that racism and discrimination of any kind have no place in our community. Respect, equity, diversity and inclusion—these aren’t just words made popular by repetition. They are in fact central to excellence in our Faculty, and if they are absent our ability to deliver is diminished.

When people, irrespective of background or status, feel free—in fact, encouraged—to express ideas and take risks, we all benefit from the results. With more ideas from diverse perspectives, we produce a more effective academic community with enormous benefits for health and for society.

We must aim to be an organization in which everyone can thrive, where learners can achieve their full potential and carry a spirit of humility and service into their work, where researchers focus on solving important and relevant health questions, and where partnership and collaboration create inter-organizational communities. It is through these commitments to inclusion that we can achieve even greater impact locally, nationally and globally.


Central to fulfilling our contracts with society and with ourselves is our commitment to implementing our response to the Truth and Reconciliation Commission of Canada’s Calls to Action. By doing so in partnership, we will: contribute to advancing reconciliation with Indigenous peoples, improve diversity and inclusion in the Faculty, and eliminate Indigenous-specific racism in the health-care system by embedding practices of cultural safety and humility in order to achieve health equity.

I am grateful for the monumental efforts of everyone in our Faculty community, including our partners. So many of you engaged in this strategic planning process, and we will continue this collaborative approach as we shift our focus to concrete action.

This refreshed strategic plan requires us to think, learn, and work in new and creative ways, and we know the path won’t always be smooth. With humility and respect for ourselves and for one another, a mindset of learning and growth, and the conviction to hold ourselves—and to be held—accountable, we can transform health for everyone.

**Dermot Kelleher**  
MB, MD, FRCP, FRCPI, FMedSci, FCAHS, FRCPC, AGAF  
Professor, Department of Medicine  
Dean, Faculty of Medicine  
Vice-President, Health  
The University of British Columbia



A woman and a young child are standing on a large log on a beach. The woman is on the left, wearing a dark jacket and glasses, looking out at the water. The child is on the right, wearing a light-colored hoodie and striped pants, pointing towards the sun. The sun is low on the horizon, creating a warm, golden glow over the water and the mountains in the background. The water is calm, and the mountains are silhouetted against the bright sky. The overall scene is peaceful and evocative of a beautiful sunset.

Do you remember  
the last time  
you discovered  
something  
**extraordinary?**



Like the first time you stood on a mountain top.  
Or gazed into a microscope. That feeling of hope,  
discovery and infinite possibility.

British Columbia is an astonishing place to live.  
The opportunities to experience and explore are  
unparalleled. But B.C. is more than a just place to  
experience—it's home to the Faculty of Medicine  
at the University of British Columbia.

Fueled by curiosity and conviction, it's where our  
researchers, faculty and administration teams are  
building a future—a future with better health and  
well-being because of the vision we have today.

It's where we train the next generation of doctors,  
health professionals and scientists to become the  
passionate leaders and innovators of tomorrow.  
And where the acceleration of scientific discoveries  
into practice is bringing real and lasting hope to  
patients, families and communities everywhere.

And it's a place with deep commitment to the  
principles of equity, diversity and inclusion to  
transform the way we work, educate and train that  
improves health outcomes for all.

This is UBC's Faculty  
of Medicine, **where  
the extraordinary  
comes to life.**

**Our vision** is the  
*focal point* of our  
strategic plan.

## VISION

Transforming health  
for everyone.

It's about creating pathways to better health and well-being in communities at home and around the world, for everyone—regardless of age, ethnicity, gender, sexual orientation, location, socioeconomic means or ability.

As an internationally-leading Faculty of Medicine, we put people, patients, families and communities at the centre of our work.

Our mission, *health through knowledge and innovation*, provides focus in our efforts to achieve this vision.

Learn more in our award-winning Vision film at [vision.med.ubc.ca](https://vision.med.ubc.ca).

**“Transformation in health isn’t just pushing ahead with new initiatives, it’s also a look into our past. It’s a conversation with Indigenous communities, with our society about the way we practice culturally-safe care and help transform health and wellness for all people across B.C.”**

— Dermot Kelleher  
Dean, Faculty of Medicine & Vice-President, Health, UBC, in the film, *Vision*.



Together with our vision, **our values** form *the core* of our strategic plan.

## VALUES

### Respect

Regard felt or shown towards different people, ideas and actions.

### Integrity

The quality of being honest, ethical and truthful.

### Compassion

The act of showing kindness and empathy to others.

### Collaboration

Working together with an individual or group of people towards achieving a common goal by sharing ideas, skills and actions.

### Equity

Presence of fair and just processes that promote access to opportunities by providing support based on individual and group needs.

**Our organizational values emerged through broad engagement with the Faculty of Medicine community across the province. These values, and the ethical foundations upon which they are based, are embedded in our commitments, goals and strategies, and will guide the actions we take to implement this plan.**



**Our commitments**  
*are foundational* to  
our strategic plan.

## COMMITMENTS

Our commitments are embedded in our contract with society and our contract with ourselves.

Our strategic plan reaffirms the fundamental premise of social accountability—the foundation of our **contract with society**.

In addition, this plan introduces a new and complementary contract: a **contract with ourselves**. This contract speaks to our individual and collective commitment to transform our organizational culture through our own behaviours and the ways we treat one another.

Grounded in our values, these contracts are mutually reinforcing.

Our commitment to creating an inclusive culture where creativity and innovation can flourish is central to achieving excellence in research and education. And it is through this excellence that we can fulfil our commitments to society by educating and training a diverse group of learners who can meet the health needs of people and populations, and by finding and applying answers to important research questions.

**Excellence in all aspects of our work and culture is the pathway to realizing our vision of transforming health for everyone.**



# Our contract with society

## We will put the patient and the public at the centre of our plan.

In all our activities, we will consider, first and foremost, the capacity of our education and research to positively impact people and populations. While the Faculty of Medicine is not directly responsible for clinical care, our mandate includes ensuring our training programs position medical and health professionals to deliver culturally-safe and effective care. Further, we aim to accelerate translation of research findings into application with our national and international partners, and in doing so, contribute to supporting and strengthening health systems in British Columbia, Canada and around the world.

## We will support progress towards health equity.

Geography, economics, racism and injustice contribute to complex health inequities provincially, nationally and globally. It is imperative that through our education and research, and with our partners, we chart a course towards health equity and justice for all. In doing this, we will view patients and populations through multiple lenses including social determinants of health, interfaces between genes, health and well-being, and environment, and the basic cellular and molecular science that informs our knowledge.

## We will serve the whole province.

We will continue to partner with governments, health authorities, Indigenous organizations and peoples, and other universities to embed our education programs in communities where graduates are needed most.

In addition, we seek to create new knowledge and translate research findings in ways that benefit people in every corner of our vast province and beyond. To effectively serve the province, we will maintain strong connections with faculty, staff and learners across B.C. We are particularly grateful to clinical faculty who—through education, research and service—play an essential role in our collective success.

## We will meet the commitments in our response to the Truth and Reconciliation Commission of Canada’s Calls to Action.

The Faculty of Medicine’s response to the Truth and Reconciliation Commission of Canada’s Calls to Action<sup>1</sup> was developed with input and feedback from Indigenous students, alumni, faculty, staff and leaders at UBC, from Indigenous community representatives and organizations outside of UBC, and from other Faculty of Medicine leaders, staff and faculty. It outlines the steps we are committed to take across all pillars, developed in partnership and founded upon mutually respectful relationships with Indigenous peoples, communities and organizations. By doing so, the Faculty will help develop educational and health-care systems that are accessible, equitable, effective, culturally-safe and free of Indigenous-specific racism and discrimination.

## We will demonstrate responsible stewardship of provincial resources and contribute to economic prosperity.

As a public institution, we are committed to demonstrating benefit through effective and responsible use of resources. Beyond this, we will add value to B.C.’s knowledge economy through research innovation and translation, improving health system sustainability, drawing investment and developing and attracting innovative commercial activity that brings top talent and new jobs to the province.

# Our contract with ourselves

## We will transform our culture to be safe, inclusive, respectful and equitable.

We are committed to nurturing an organizational culture where everyone feels a sense of inclusion and belonging, and where people and their contributions are respected and supported by their colleagues and by the Faculty as an organization. We will work to ensure the systems and structures with which members of our community interact are designed and implemented equitably.

## We will vigorously counteract racism and other forms of discrimination.

Beyond our commitments to respect and inclusion, we resolve as individuals and as an organization to confront racism and discrimination, to re-examine how we interact with each other, and to find new ways of thinking and learning together that transform systems of oppression and injustice. This includes a firm commitment to overcoming systemic Indigenous-specific racism through the actions pledged in our response to the Truth and Reconciliation Commission of Canada’s Calls to Action.

## We will pursue excellence in all that we do and in how we work and learn together.

While academic excellence as it has been traditionally understood remains fundamental, our pursuit of excellence goes beyond scholarly work. We are committed to achieving excellence in all that we do, including the ways we work together and treat one another. We believe that creativity and innovation flourish in a culture that is safe, inclusive, respectful, equitable and free from discrimination—and that this leads to excellence.

## We will recognize all faculty, staff and learners as our platform for success.

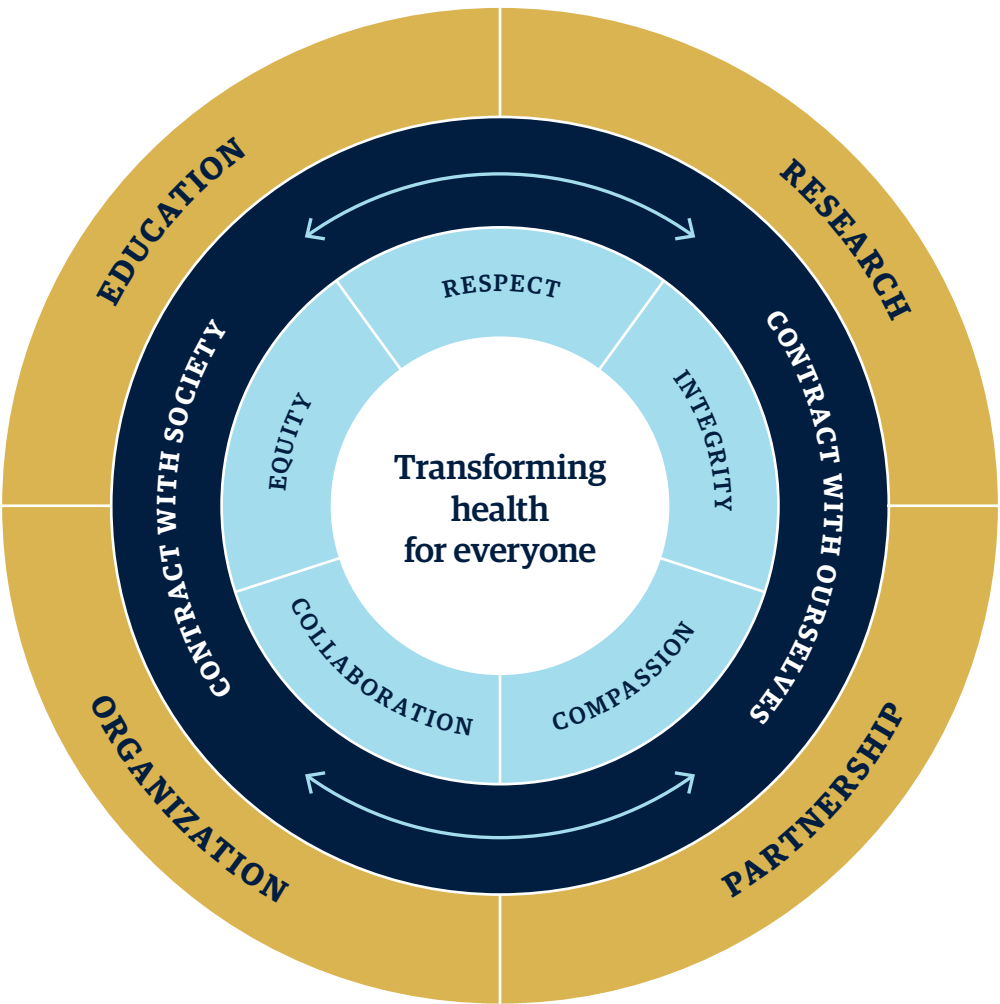
People are at the heart of our organization, and we will prioritize the cultivation of an environment that enables both learners and colleagues throughout our entire enterprise to fulfil their potential. We recognize that our contributions, as individuals and teams, are essential to our collective success in transforming health for everyone.

<sup>1</sup> [med-fom-faculty.sites.olt.ubc.ca/files/2021/06/FoM-Response-to-the-TRC-21-06-25-Final.pdf](https://med-fom-faculty.sites.olt.ubc.ca/files/2021/06/FoM-Response-to-the-TRC-21-06-25-Final.pdf)



**Our four pillars—**  
Education, Research,  
Organization,  
and Partnership—  
provide an *organizing  
framework* for our  
goals and strategies.

Our pillars bring clarity and help drive action.



This refreshed plan identifies an updated goal and four strategies for each pillar. Implementation planning will focus on building out specific actions and indicators of success for each strategy. As with *Building the Future: 2016-2021*, people from across the Faculty of Medicine and our partner organizations will be engaged in implementation.

Our vision, values and commitments have driven the development of the goals and strategies in each pillar. As we implement and evaluate our progress, we will reflect on and respect the ethical frameworks that underpin this plan.





For us, the solution to achieving the *extraordinary* lies in **doing things differently.**

It's what led us to expand medical and health professions training to communities all around British Columbia. Along the way, we've grown an ambitious program – one of the first of its kind in Canada and in the world – and become a global leader in distributed medical education.

Because transforming health for everyone is deeply connected to our contract with society – and it starts with ensuring everyone in B.C. has equitable access to the health care they need.

Explore the journey we've taken to remap medical education and research for B.C. [Read Pathways: Homegrown Health.](#)



## Education

*Our goal* is to educate, develop and mentor future and current health practitioners, educators and researchers who can work together effectively to serve evolving health needs.

As a Faculty of Medicine, we have a fundamental responsibility to train people who can meet the health needs of individuals and society. This pillar encompasses all of our educational offerings—undergraduate and graduate degree programs, professional and postdoctoral training, faculty development, and continuing professional development—all of which focus on enabling learners to succeed in their careers and support health and well-being wherever they choose to work and practise, in all corners of our province and around the world.

We must work with health system partners to identify emerging educational needs in human resource planning, and adapt our programs to meet those needs. This involves expanding the group of potential learners, domestically and internationally, including those who identify as part of historically, persistently, or systemically marginalized groups.

Across our educational offerings and services, we are committed to supporting and recognizing the patients, staff and educators in classroom, laboratory, clinical and community settings, who are all essential to achieving this goal and ultimately our vision.

Education Strategies

1. Enhance program accessibility, inclusion and support services for current and future learners who identify as members of underrepresented groups.

To best serve the needs of society, we must expand the diversity of our learner and prospective learner populations, and enhance the sense of belonging they experience in our programs.

Key to this is improving accessibility. We will identify and take active steps to address systemic barriers to increase inclusion of historically, persistently, or systemically marginalized groups by reviewing admissions processes, admissions requirements, and financial supports across programs. In addition, we will engage current learners from various locations, backgrounds and perspectives as ambassadors to proactively reach out to potential learners early in their educational journey and encourage them to consider health-related fields.

We recognize that increasing the diversity of our learner population is not enough. To enhance inclusion and support, we will create mentorship opportunities, in particular for learners who identify as members of underrepresented groups. In addition, we will ensure that services, including financial, academic and well-being services, are delivered based on the principles of equity so that all learners feel that they have access to the supports they need to succeed in achieving learning outcomes.

By taking concrete action to enhance diversity and inclusion in our programs and embedding cultural safety and humility in our curricula, we can play a pivotal role in eliminating racism and discrimination in the health-care system more broadly.

2. Foster sustainability and excellence of educational programs and services by effectively supporting and developing all faculty and staff.

Staff and faculty are the foundation of our educational offerings and services, and achieving excellence in education must include supporting all team members by providing the tools, processes and training required to be effective and efficient, and to maintain well-being.

We will create and deliver staff and faculty development opportunities focused on adapting to change as a competency required to meet the evolving demands of delivering education with a continued focus on enabling the best possible learning outcomes.

In addition, we will design and implement approaches to managing and enabling clinical education in a way that honours the immense contributions of our clinical faculty, and minimizes process or system barriers that sometimes get in the way.

Finally, we will develop and deliver faculty training on practical ways to create culturally-safe, inclusive, and respectful learning environments in which creativity, empowerment and collaboration can thrive, resulting in better educational experiences for both our educators and our learners.

3. Empower lifelong learners to meet evolving societal needs and career requirements through deliberate and ongoing adaptation of our educational offerings.

All of our educational offerings are designed to equip lifelong learners with the competencies required to engage in the health system workforce and serve society.

To enhance our capacity to achieve this, we will create a nimble, systematic approach to identifying evolving needs and addressing them through creation, expansion, regional distribution, realignment and renewal of educational offerings. This process will be informed by our partners, patients and society at large, and will use an evidence-based approach to evaluate and enrich our educational offerings in ways that improve learning outcomes.

For example, we will integrate into our programs important competencies that were emphasized by the COVID-19 pandemic including teamwork, the ability to embrace and adapt to change, advocacy and system analysis. In addition, we will strengthen learner skills in providing care and conducting research in ways that consider and support diversity and oppose racism and discrimination in all its forms.

4. Promote educational innovation and actively apply lessons learned across educational offerings to improve outcomes and access to education.

We recognize innovation as essential to progress, and will strive to create a culture where we evaluate and learn from both our successes and our failures. Digital and virtual technologies have tremendous potential to further enhance education and access, and we will apply the lessons we have learned through the shift to remote and blended learning catalyzed by the pandemic in a systematic and deliberate way.

Beyond the use of technology, we will take an innovative approach to improving our inter-professional, team-based and cross-sectoral education by testing innovative approaches to learning in person. This will enhance our learners’ ability to work in the health system, which is rapidly moving towards more collaborative, team-based models.

Finally, we will promote and cultivate creativity, innovation skills, and knowledge translation across disciplines so that we can use what we learn from educational research. It is through innovation that we can reach people in society whom we have not yet reached, accelerate the application of new findings to make a positive impact on people and populations, and create new ways of delivering care that result in better outcomes while minimizing negative impacts on the environment.





The **rapid response and health innovations** during the COVID-19 pandemic have been truly *extraordinary*.

Together, we have witnessed scientific excellence, relentless conviction and the courage of our researchers, staff and partners who have risen to the challenge of accelerating translational medicine—leading to critical discoveries in new treatments and a vaccine.

It's why we've created the **Academy of Translational Medicine**: a powerful innovation hub dedicated to accelerating the translation of scientific discoveries into clinical practice, rapidly solving some of life's most pressing health challenges from cancer, to diabetes and dementia. This is **hope, accelerated**.

The opportunities are limitless.

*Learn more about how a UBC spin-off company co-founded by Dr. Pieter Cullis, professor in the department of biochemistry and molecular biology, developed the lipid nanoparticle technology that allows the Pfizer-BioNTech mRNA vaccine to enter human cells.*



## Research

*Our goal* is to create, translate, and implement knowledge at scale across all research areas to increase global impact and promote improved individual and population health.

An essential element of this goal is for our research, in all Faculty of Medicine disciplines, to be impactful—for findings to make a meaningful difference in society as part of our broader vision to transform health for everyone. The key to accomplishing this is translation across the continuum from foundational science to clinical application, programs and policy.

We will focus on addressing current barriers to accelerated translation, which involves supporting excellence in all research areas, driving research innovation, creating a culture of connection and collaboration, and expanding and amplifying research—and doing it all at scale. A vital part of this is engaging with the growing and vibrant life sciences and biotechnology industry here in B.C.

By including people and patients and embedding respect, diversity, equity and inclusion in all aspects of research, we aim to reach broader audiences, which can ultimately lead to informing policy, programs and practise at a provincial, national and global scale.



Research Strategies

1. Catalyze innovation and excellence in foundational, clinical and health systems research to accelerate translation across the continuum and enhance precision and population health.

Foundational science has inherent value in its potential to change the world and, while the ways in which findings may be applied in the future are not always immediately clear, they enrich our knowledge base and provide the building blocks for future impact through translation. We will support basic and foundational science as essential components in expanding our body of knowledge.

Translational medicine aims to reduce the time and cost of applying new findings, approaches, and technologies that improve health and well-being, and that contribute to the local and national economy. Through effective knowledge sharing, we will enhance our capacity to apply research findings to the next translational stage, whether related to foundational science, clinical application, evaluation and implementation science, health economics or policy.

We will connect people and organizations along the translational medicine pipeline by providing ways and means to collaborate, innovate, and accelerate research deliverables and the delivery of outputs from research that benefit people and populations. The COVID-19 pandemic highlighted inefficiencies and systemic barriers that can hinder innovation. We must apply the lessons learned from this experience, here and around the world, to demonstrably shorten the timeline from discovery to translation and implementation.

2. Facilitate research excellence by taking a strategic approach to creating and supporting core platforms across the province.

Research platforms support excellence across disciplines. We have multiple levels of platforms, from laboratory-based platforms that have been made available to other researchers, through to larger platforms that serve researchers in many departments and faculties.

We will develop a set of guiding principles that support Faculty of Medicine decision-making related to platform creation and consolidation. These principles will consider research focus areas and the needs of our research community across the province, including in rural and remote areas, while remaining responsive and capable of anticipating future demands and technological advances.

Specifically, we will strengthen current platforms related to omics, precision health, biomedical engineering, research computing, data science and artificial intelligence, imaging and biobanking. We will further identify and strategically coordinate platforms such as early clinical trial capabilities, regulatory affairs, methods for patient engagement and inclusion, approaches to measuring impacts for people and populations, clinical quality improvement and health economics.

To meet our increasing responsibility to support open science and open access publishing for knowledge sharing and mobilization, we will continue to improve digital technology supports and processes that protect intellectual property.

3. Integrate equity, diversity and inclusion principles in team composition and throughout the research lifecycle from design to translation.

To transform health for everyone, we must ensure our research findings are relevant and equitable, which means considering the range of needs of the populations we serve in how we design and carry out research. We will continue to engage people and communities in research, with public and patient involvement in all aspects of the research process. This also involves considering research from the perspective of different populations, including through the lenses of sex and gender, age and ethnicity.

Importantly, we will ensure that any research involving Indigenous peoples is conducted in a manner that is respectful, trauma-informed and culturally-safe, comes from a perspective of cultural humility, and meaningfully works with and supports Indigenous peoples in all aspects of the process. In addition, Indigenous-led research and fulsome partnerships will be central to achieving this strategy.

Finally, we will work with the Education pillar to critically examine the barriers that currently exist to engaging trainees from diverse and historically, persistently, or systemically marginalized populations, and will advocate to funding agencies for additional international scholarships.

4. Enhance our ability to respond nimbly to changing circumstances by creating opportunities for collaboration, training and team science.

The COVID-19 pandemic accelerated inter-, multi- and trans-disciplinary collaboration, and this strategy builds on that experience through a deliberate focus on supporting collaboration and team science within our organization, across organizations, and with other stakeholders. We need to be nimble, adaptable, and focused on building the relationships required to enable this, including by advocating for increased team grant opportunities with funding agencies, and seeking ways to value and recognize team science through the organization pillar.

We will invite and include different perspectives and expertise, and apply our collective energy to research questions. The power of data science and artificial intelligence is an example of one area that presents tremendous opportunity, and where we must expand our investigative and analytic capabilities to enhance the impact on health research.

This collaborative and team-based approach represents a fundamental shift towards a new way of thinking about research. It involves considering complex questions and systems and, in connection with the Partnership pillar, engaging broadly across disciplines and organizations to remove barriers and maximize creativity and progress.





With more than 16,000 learners, staff, scientists and educators, we are home to an *extraordinary* **community of people.**

Through inspired and collective action, we believe that – when provided with an inclusive and diverse learning and work environment free of racism and discrimination – people with drive and curiosity can transform health for everyone, here at home and around the world.

**And it starts with us** to build this future. A future in which human rights are respected and everyone has access to culturally-safe and compassionate health care.

*Learn more about the Office of Respectful Environments, Equity, Diversity & Inclusion. [Visit the REDI website.](#)*



## Organization

*Our goal* is to cultivate a respectful, inclusive and discrimination-free organizational culture with systems that support everyone in achieving their fullest potential.

This pillar encompasses the people, places, structures, processes and tools that support the work of the Faculty of Medicine. As an organization, we are focused on transforming our culture towards one in which all people, no matter who or where they are, feel valued and respected.

We will eliminate systemic barriers, ensure equity across all of our policies, processes, guidelines and norms, and foster a culture that actively extinguishes any discrimination that may arise. It is in this culture and environment that all of our existing and future community members can thrive.

This applies equally to all members of our Faculty of Medicine community, including learners, staff and faculty across locations, partnerships, units, professions and disciplines. Advancing this goal will also continue to build our provincial, national, and international profile and reputation as a first-choice place to work and learn.

Organization Strategies

1. Promote engagement and well-being by creating and sustaining respectful and supportive learning and work environments in which people are recognized for their contributions.

Through this strategy, we seek to ensure that all members of our community feel safe, welcome and encouraged to engage in the activities of the Faculty. This will happen when individuals feel valued and recognized for their contributions, and when well-being is prioritized, resulting in an environment in which all of us can thrive.

We will create meaningful and respectful engagement opportunities for members of the Faculty of Medicine community, including through participation in, for example, town halls, committees and working groups, well-being and learning programs, and strategic investment fund opportunities.

To support people, we will create or enhance both formal and informal systems and structures that enable effective mentorship, timely and constructive feedback, open interpersonal communication and opportunities for growth and development. By creating a community of upstanders, we will hold ourselves and one another accountable for living our values and cultivating respectful and supportive environments.

Effectively recognizing the range of contributions our community members make on a daily basis is part of demonstrating respect. In addition to recognizing professional and academic successes, we will celebrate those who live our organizational values and set positive examples of how to interact with colleagues in respectful and inclusive ways. Further, we will consider our values and individual well-being in performance evaluation to reinforce our commitment to this cultural transformation.

2. Increase diversity, inclusion and representation in our organization through faculty and staff recruitment, retention and leadership development.

Diversity leads to a stronger organization by expanding ways of thinking and innovating, and enhancing excellence in all its forms. We aim to reflect our population’s diversity across our organization; however, diversity alone is insufficient. We must also focus on building a sense of belonging for all, and actively foster inclusion at all levels, especially in our leadership.

To do this, we will continue developing recruitment and retention guidelines and processes, including methods to recruit for competencies related to respect, equity, diversity, and inclusion. Further, we will create professional and leadership development opportunities with a focus on building capacity and new pathways to support those who have been historically, persistently, or systemically marginalized. We recognize that leadership can take many forms and development programs will support the process of building on individual strengths.

We will review and improve the ways that opportunities for career progression, awards, and merit are made available to ensure equitable access, and we will create programs for leadership to build skills related to cultivating inclusive teams. In addition, we will create training and resources for all staff and faculty to build concrete skills related to equity, diversity and inclusion.

3. Build flexibility and sustainability into how and where we work by updating policies and procedures and optimizing our virtual and physical spaces.

The COVID-19 pandemic highlighted our capability to be flexible and responsive when necessary. This strategy is focused on maintaining that ability to change and adapt in proactive and reactive ways through deliberate and timely actions. We will ensure our policies, spaces and technology continue to support our work consistently, efficiently, and responsively.

To enhance our sustainability, we will work both within our organization and with our partners to identify and implement opportunities to reduce negative environmental impacts of our work and of health-related fields more broadly.

Finally, we will enhance our physical spaces to better meet our needs and also reflect new ways of working. Our virtual collaboration spaces and technology have always been important in this province-wide organization, but they are even more critical now with persistent acceleration of new digital and virtual technologies, and changes to the ways we work and learn.

4. Apply innovative approaches to improve operational effectiveness and efficiency for individuals and teams.

To identify and implement innovative ways of continuously improving our operations, we will seek opportunities to collaborate and align processes and methods across units and teams. In addition, we will review our budget allocation model with a continued focus on sound financial management and improving budget forecasting.

Beyond this, we will maintain our ability to invest in strategic priorities to accelerate our progress and engage people from across the organization in exciting and rewarding ways.

We will develop leadership continuity and succession plans for key positions, and continue to streamline operational processes, including governance, internal communications and information flow. We will build our capacity to accommodate individual needs, balanced with a view to what is best for the organization as a whole. Together, these efforts will create robust, resilient organizational structures that can endure and adapt through change.





*Extraordinary*  
**partnerships**  
**are at the core**  
of who we are and  
everything we do.

And never has there been a point in time when academia, industry, government and health partners have been more aligned and committed to sustaining efforts and in producing a world-class framework for bio-innovation and a life sciences industry here in British Columbia.

It's through strong collaborations that we have the potential to make important advances in health care research – building a more equitable and inclusive health care system.

Together, we can transform health for everyone.

*Learn how* Dr. Anita Palepu, professor and head of the department of medicine, is investigating the long-term effects of COVID-19 and working in partnership with St. Paul's Hospital and the Government of B.C. to improve patient lives.



## Partnership

*Our goal* is to advance health system alignment through collaboration to shape practises and policies that improve the health and well-being of people and populations.

Achieving our vision relies on strong and collaborative relationships with other units within UBC, our academic partners across the province, health system organizations, industry, governments, and communities. We will continue to align efforts so that together we can best support the health and well-being of people and populations by helping to shape practises and policies that most effectively serve society. This involves listening to a wide range of voices and operationalizing what we hear through implementation of our goals and strategies.

We will continue to engage with our partners in ongoing efforts to counteract racism and discrimination in the health-care system. This includes collaborating to create and sustain shared learning and work environments where all can thrive and where all people, patients, families and communities feel respected, included, valued and safe.



Partnership Strategies

1. Implement our response to the Truth and Reconciliation Commission’s Calls to Action in partnership with Indigenous peoples to advance reconciliation and contribute to achieving health equity.

The UBC Faculty of Medicine collaborated to develop a comprehensive and meaningful Response to the Truth and Reconciliation Commission of Canada’s Calls to Action.<sup>1</sup> The response is focused particularly on Calls to Action 18-24, and it identifies 14 action statements to which we are committed.

We will engage with Indigenous peoples, nations, communities, and organizations to seek partnerships with the aim of advancing these actions, which are related to Indigenous relationships, learning and work environments, admissions, curriculum, graduate, postgraduate, and professional education and Indigenous health research.

All our actions will be guided by the principles outlined in the United Nations Declaration on the Rights of Indigenous Peoples, in concordance with Call to Action 43, which stipulates the Declaration’s use as the framework for reconciliation. As stated in our response to the Truth and Reconciliation Commission’s Calls to Action, we recognize the central importance of the universal human right to self-determination, particularly as a determinant of health, and our clinical, educational, research and administrative practises will be guided by this principle moving forward.

Our commitments in this response are aligned with and further operationalize the UBC Indigenous Strategic Plan for the Faculty of Medicine. In addition, we will work with all relevant partners to advance the recommendations in the In Plain Sight<sup>2</sup> report and the First Nations Health Authority policy statement on Cultural Safety and Humility.<sup>3</sup>

We are committed to delivering on the pledges we have made and we expect to be held accountable as we make our way forward to a better future together.

2. Collaborate with health system and government partners to enhance integration and synergies between clinical care, research and education.

Clinical care, research, and education are shared responsibilities of many organizations and individuals. We will build on our strong foundational relationships to further enhance collaboration within and across organizations to achieve greater synergy between these three interconnected activities through Academic Health Centres and Systems.

Our health system partners include health authorities, individual clinicians and clinical faculty, the B.C. government, the B.C Academic Health Sciences Network, patient and citizen groups, professional associations and colleges, and industry. We intend to work with these partners to create formal and informal structures that enable distinct organizations to better collaborate and improve governance without adding unnecessary bureaucracy.

We will collaborate with our partners to advance the ability of academic clinicians to dedicate time for clinical and/or didactic teaching, research activities, and clinical care delivery, all of which are mutually reinforcing and contribute to improving quality of care.

In addition, many of the people affiliated with the Faculty of Medicine are also part of partner organizations, and many of the environments in which they work are shared jurisdiction. We will actively collaborate on creating and sustaining respectful learning and work environments in all settings.

3. Engage UBC units, other academic institutions and alumni, to identify and advance shared priorities related to education, clinical education and research.

UBC Health enables cross-Faculty and cross-program collaboration, and the Faculty of Medicine is committed to engaging in these efforts. We see tremendous opportunity to advance shared priorities related to team-based care, collaborative and interdisciplinary research, inter-professional education, and data science and artificial intelligence that supports health education and research.

We will build on existing collaborative ventures, such as the School of Biomedical Engineering with the Faculty of Applied Science and the Life Sciences Institute with the Faculty of Science, and seek new opportunities for collaboration with other Faculties and Schools at UBC.

We continue to appreciate and value the strong relationships we have, both internally at UBC Vancouver and UBC Okanagan, and with our partners at the University of Northern BC and the University of Victoria, which have been vital to the success and growth of the distributed medical program, and more recent expansion and distribution of the Master of Physical Therapy and Master of Occupational Therapy programs. The strength of these relationships is a firm foundation for new collaboration with academic, health, and government partners to further expand and distribute training programs in order to meet regional health needs across B.C.

The Faculty of Medicine has a vast network of alumni who are committed to improving the health and well-being of patients, families, and communities. We seek to engage alumni from all Faculty of Medicine programs in further defining shared priorities and identifying mechanisms for mutual support and action.

4. Advance coordination with local, national and international partners to improve health and health systems for people and populations locally and globally.

As one of the leading Faculties of Medicine in Canada and the world, we seek to engage with other Canadian academic institutions, the federal government, and other national bodies to advance shared priorities. Beyond this, we will leverage UBC’s position as North America’s most international university, as recognized by the *Times Higher Education*, and build on our extensive international relationships to develop and implement our approach to global health and international relationships. Specifically, we will build alignment with national and international partners related to public health, global health, Indigenous health and wellness, and health system sustainability.

Industry and private companies play an important role in health and health systems in B.C. and around the world. The *Times Higher Education* also ranked UBC first in the world on the industry, innovation, and infrastructure category. We will build on this strength by continuing to enable industry partnerships and facilitating the commercialization process in appropriate, respectful and responsible ways. Through these partnerships with industry, we will maximize the impact of our work on improving lives around the world.

We are grateful for our current and future donor community with which we will continue to partner in support of important and innovative advances in research and training for improved health and health systems. Together with donors and civil society, we will collaborate on shared health and well-being priorities for the benefit of all, and in particular for underserved populations, to fulfil our contract with society.

1 med-fom-faculty.sites.olt.ubc.ca/files/2021/06/FoM-Response-to-the-TRC-21-06-25-Final.pdf  
2 engage.gov.bc.ca/app/uploads/sites/613/2020/11/In-Plain-Sight-Full-Report.pdf  
3 fnha.ca/documents/fnha-policy-statement-cultural-safety-and-humility.pdf



**STRATEGY TO ACTION**

Now we turn our  
attention from  
strategy to action.

This refreshed strategic plan reflects the ideas and insight of all who contributed throughout the process. We are grateful for their time and energy.

Continuing to engage people from across our organization, and from our partner organizations, we will define concrete actions to advance each strategy and identify mechanisms to monitor and measure our progress.

This process of implementing strategy through action, and of demonstrating accountability through transparency is key to our success. This strategic plan provides a framework that sets out our priorities and will guide our decisions and actions for the next five years. It will also facilitate our ability to reflect and adjust as needed.

The collaborative and individual efforts that each of us makes will contribute to the success of the Faculty of Medicine as a whole. With each step towards our goals, we move closer to meeting our commitments to society and to ourselves, living our values, and realizing our vision of transforming health for everyone.



*Discover how the Faculty of Medicine's School of Audiology and Speech Sciences is training the next generation and advancing research to support people with hearing difficulties and speech and language disorders.*



# A look back at 20 things we are *most* proud of.

Since the inaugural launch of **Building the Future** in 2016, we are delighted to share some of our most important impacts over the past five years.

Ranked among the world's top medical schools with the fifth-largest MD enrollment in North America, the UBC Faculty of Medicine is a leader in championing innovation and growth in education, medical science and research translation into improving health and well-being for society. Our people at all levels are leading the way in influencing Canada's research and policy, developing talented researchers, educators and trainees, and engaging patients and the public.

## 1 More doctors and health professionals for B.C.

1,355 MD and health profession entry-level positions every year.



## 3 Historic high in research funding

\$1.8+ billion propelling research excellence.



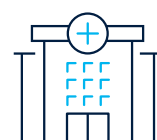
## 2 Global-leading COVID-19 translational medicine

Key component of Pfizer-BioNTech vaccine developed at UBC.



## 4 New Academy of Translational Medicine

Accelerating scientific discoveries from bench to bedside to population.



## 5 B.C.'s first Clinical Research Coordination Initiative

Collaborating across boundaries to accelerate translational research.

## 9 Propelling innovation through the Strategic Investment Fund

\$8+ million invested in faculty- and staff-led projects to advance the Strategic Plan.

## 13 Expansion of health profession programs in northern B.C.

Ensuring more patients get access to physical and occupational therapy closer to home.



## 17 Building our digital research capabilities

Digital innovations and solutions through new data management services and tools.



## 6 UBC-grown biotech companies drive health innovation and fuel Canada's economy

UBC-spin offs include Abcellera, Precision NanoSystems and Acutias Therapeutics.

## 10 Prioritizing Indigenous health outcomes

First-in-Canada Indigenous cultural safety training in response to TRC's Calls to Action 23 and 24.



## 14 Standing up for Change

Transforming culture through new office of Respectful Environments, Equity, Diversity & Inclusion.



## 18 World Leader in Distributed Medical Education

4,500 learners training in more than 80+ communities across B.C.

## 7 Historic gift in Healthy Aging

Dr. Edwin S.H. Leong's \$24M gift for research leadership to advance knowledge that helps people live longer and enjoy a better quality of life.



## 11 Growing our community

Created 36 new junior faculty positions and attracted top research talent through Canada Excellence Research Chairs, Canada 150 and President's Excellence Chairs.

## 15 Moving discoveries into solutions

824 patents issued or filed.



## 19 +110 Indigenous MD graduates

Since 2004, significant growth in Indigenous students becoming doctors.

## 8 Travelling the Road to Reconciliation

Working in partnership to develop equitable, culturally-safe educational and health-care systems free of Indigenous-specific racism and discrimination.

## 12 New School of Biomedical Engineering

Designing transformative technological solutions to improve patient health.

## 16 Developing powerful core platforms

For example, mobilized team-based health care across B.C. by investing in the Primary Care Innovation Support Unit.



## 20 Igniting the power of mentoring

By connecting 74 clinical faculty in a new mentorship program.



*Transform*

*Translate*

*Build*

*Inspire*

*Discover*

*Equalise*

*Educate*

*Lead*

*Enable*

**the future.**





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