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**Aims of the Summit**

The Second World Summit on Rural Generalist Medicine is a follow-up to the First Summit held in Cairns, Australia in 2013 and aims to strengthen healthcare systems in rural communities by promoting the practice of Rural Generalist Medicine.

Communities living in rural, remote and isolated areas have a just claim to effective, safe and affordable healthcare. This requires a strong ‘generalist’ approach to health services. In particular, rural communities typically need the services of skilled doctors who can provide a broad scope of clinical care in the rural context, working with other members of the health care team.

**Rural Generalist Medicine: Serving Communities**

It is important to note that services to the community are the focus of this definition, not the health professionals. Not all doctors who work in rural communities provide such a broad scope of clinical services and nor do they need to, and not all those who do so, work in rural locations.

Rural Generalist Medicine offers an important contribution to meeting some of these challenges. The First World Summit on Rural Generalist Medicine was held in Cairns, Australia, from October 30 to November 2 2013. It was attended by two hundred delegates from 19 countries and hosted by the Australian College of Rural and Remote Medicine and the Rural Doctors Association of Australia. The Cairns Consensus Statement on Rural Generalist Medicine records the outcomes of the Summit as finalised by an expert International Steering Group and has been endorsed by many organisations and individuals from around the world. The statement creates common principles which may be used and adapted by each country that participates as a signatory, recognizing the respective certifying, accrediting, and credentialing realities of each country.

To meet the healthcare needs of rural communities by strengthening Rural Generalist Medicine, the Cairns Consensus Statement on Rural Generalist Medicine identified three key areas for international action, these being:

1. Recognition of Rural Generalist Medicine within healthcare systems as a distinct scope of medical practice that is essential for effective rural healthcare, and that has always been a part of rural healthcare.
2. Development of training pathways to produce and support doctors who are willing and able to provide the full scope of Rural Generalist Medicine in rural communities.
3. Development of a strategic research agenda to advance Rural Generalist.

Focus of the Second World Summit on Rural Generalist Medicine

The intent of the Second World Summit on Rural Generalist Medicine in Montreal is to build on the foundation work undertaken in Cairns. The focus for the Second World Summit will be on investigating and initiating ‘next-steps’ that will increase international, national and local commitment and momentum around Rural Generalist Medicine so as to meet the priority healthcare needs of rural communities. The Summit will flesh out the key action areas for advancing Rural Generalist Medicine: recognition, training pathways and the strategic research agenda.

**Conference Objectives**

By the conclusion of the 2015 Summit, participants will be able to:

1. Identify the importance and applicability of Rural Generalist Medicine in fostering health system reform to address the health of rural citizens throughout the world.
2. Apply the knowledge gained in how Rural Generalist Medicine and the contents of the Cairns Consensus are relevant to a range of contexts from low resource to high resource nations and regions, and identify how this process can be applied to reduce the unacceptable disparity between the health status of urban and rural populations throughout the world.
3. Integrate the evidence of relevant research pertaining to rurality in supporting and extending Rural Generalist Medicine.
4. Differentiate approaches for determining communities’ medical needs integrated with the concept of “rural proofing” policies, programs, and services in and for rural communities from the perspectives of medical education and care.
5. Investigate asset based community development tools that build on strengths and assess needs but with a very different lens than traditional needs assessments.
6. Design and apply a framework that highlights the intent and future goals of Rural Generalist Medicine.
The 2nd World Summit on Rural Generalist Medicine
April 8th and 9th Montréal Canada
Moving Forward Together
www.ruralgeneralismsummit.net

Wednesday April 8th AM
Beyond Cairns
- Welcome And Overview Of Goals Of Summit
- Generalism In Canada
- Cairns And Beyond
- Producing Rural Generalists
- Successes In Low Resource Countries
- Better Health For The Bush
- Regional Reports
- Enhanced Surgical Skills Report

Wednesday April 8th PM
Community Needs – Working Together
- Asset Based Community Development
- Rural Proofing
- Training Generalists By Foreign Exchanges And Capacity Building
- Role Of Generalism In Canadian Armed Forces
- The View From Here – Cross Canada Round Up
- Work Group Sessions
- More On Asset Based Community Development
- More On Rural Proofing
- More On ‘Island’ Training
- The View From Up Here
- Certificate Of Added Competency And Rural Generalism

Thursday April 9th AM
Training The Present and Future Generalist
- Rural Teams To Meet Community Needs
- Collaborative Leadership
- The Rural Physician Team
- Building Medical Schools In Low Resource Countries
- Generalism Training For Specialists
- Building On Family Medicine Programs
- Rural Pipelines
- The Future Generalist
- Work Group Sessions
- More On Defining Generalism
- More On Teams
- More How Does Undergraduate Medical Education Need To Change
- MOC / CPD For The Rural Generalist

Thursday April 9th PM
Research In Support of Generalism
- Ten Questions That Matter To Advocating For Generalism
- Evidence For Enhanced Surgical Services Provided By Generalists
- Evidence For And Against Credentialing
- Status Of Health Care Health System Change - Time For Generalism
- Poster Session – Oral Presentations

Rural WONCA
The Rural WONCA meeting in Dubrovnik will follow closely after the Montréal summit. Delegates may wish to attend both to maintain momentum in advancing Rural Generalist Medicine. The 23rd annual Rural and Remote conference of the Society of Rural Physicians of Canada will be occurring April 9-11, 2015 in the same venue. Delegates may also wish to participate in the rich educational and social offerings of this conference.
We hope to go beyond just words in support of Rural Generalist Medicine and come away with concrete actions to be taken home to our communities and countries.