TRANSFORMATION THROUGH COLLABORATION

INAUGURAL REPORT







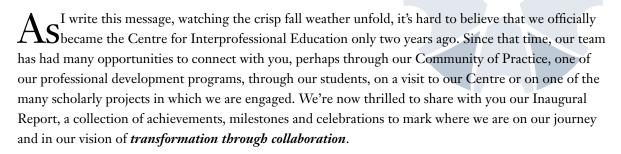
CONTENTS

DIRECTOR'S MESSAGE	4
MEET OURTEAM	6
STRATEGIC DIRECTIONS	8
CURRICULUM INTEGRATION AND EXPANSION	8
PROFESSIONAL DEVELOPMENT ehpic: Educating Health Professionals in Interprofessional Care Collaborative Change Leadership	15 15 18
RESEARCH, SCHOLARSHIP AND INNOVATION Peer-Reviewed Publications Grants Invited and Peer-Reviewed Presentations Awards and Honours	20 20 21 23 28
SYSTEM ENGAGEMENT, ADVOCACY AND INFLUENCE Partnerships Provincial National International Awards of Merit for Excellence in Interprofessional Education	28 30 30 31 32 33
APPENDICES Committees and Working Groups Core Competency Framework	34 36

DIRECTOR'S MESSAGE



Maria Tassone



At our celebration launch, I was joined by more than 100 colleagues, representing the many facets of our health education and health care system—students, faculty, clinicians, leaders, policy makers and scholars. That day, I shared our hopes for the Centre and the notion that the Centre is really made up of all of us committed to making a difference—to clients, patients and families—as we work passionately in the fields of interprofessional education (IPE), research and care. A special moment for all of us was celebrating with Ivy Oandasan as she presented the first Ivy Oandasan Leadership Award, named in her honour as the inspiring woman who led the Office of IPE between 2006 to 2009 and who, through her leadership, set the solid foundation on which our successes as a Centre have been laid.

"Our commitment is to continue collaborating with you and to welcome new learning and partnership."

What a long way we've come since our opening and what an exciting time to be in as IPE and interprofessional care (IPC) are being embraced the world over. As you read this report, my hope is that you will take away a story of innovation and growth, of capacity-building and sharing, of reach and impact. Our Centre is transforming from its significant development phase as an Office of IPE into a phase of expanding to its fullest potential as we sustain and create programs that support our growing community. Working at the interface of education and practice continues to be a hallmark of our strategy and this has resulted in some amazing achievements—expanding our IPE curricular efforts for 3,100 students across 11 professions; adapting new models of learning in clinical settings across all of our fully affiliated teaching hospitals and beyond; reaching a milestone of 500 academic and clinical

"What a long way we've come since our opening and what an exciting time to be in as interprofessional education and interprofessional care are being embraced the world over."

faculty who have been impacted by our professional development programs; and extending beyond our borders to partner with colleagues in places such as Denmark and the US, who hope to build capacity in their own contexts.

Since we opened our doors, we've also had many inspiring moments as a team. I recently asked the Centre team what they were most proud of. As expected, they articulated a diverse set of moments and milestones that reflect our individual diversity, roles and contributions. Some felt proud of our transition to and full implementation of a requisite IPE Curriculum at the University of Toronto. Others felt proud and privileged to be sought out by colleagues locally, nationally and internationally for our knowledge and expertise. Yet others were proud of finishing work on our beautiful new space and collaborative garden at Toronto Western Hospital, made possible through the generous donation of George and Andrea Kalmar. For me, it's about working with inspiring colleagues and the many transformative moments we've witnessed. The students who reflect, "I'm not alone as I care for this patient," or "I'm a better social worker because of IPE," or "I only want to work in an environment that supports IPC." A clinician who says, "How can we get some of what the students are learning?" The leader who acknowledges, "I just realized I can't make this decision because not all the right people are at the table." And a CEO who recently said to me, "Where would we be without the Centre for IPE? Our health care systems are truly transforming because nothing we do now is without an intentional focus on interprofessionalism."

We are so thankful to the Government of Ontario who supported us in the belief that the work we do enables safe, high-quality, patient- and client-centred care; to the Deans and Chairs who originally established the Office of IPE and recognized the tremendous opportunity to leverage a partnership with the Toronto Academic Health Sciences Network (TAHSN) to create our Centre; to our lead hospitals, the Toronto Rehabilitation Institute (Toronto Rehab) and the University Health Network (UHN) for sustaining our work with funding, space and leadership; to the TAHSN CEOs who established IPE/IPC Leaders in their hospitals because they believe that interprofessional teams are central to the mission of caring for complex clients, patients and families; to our academic, community and practice colleagues who work closely with us to create compelling environments for our students; to our students who have shown much leadership to create new and exciting student-led IPE curricular activities; and to our Toronto General & Western Hospital Foundation partners who secured our first donor.

As we head into the next phase of our journey, I'd like to acknowledge my amazing colleagues, the current team at the Centre for IPE—Belinda, Caitlin, Clare, Dante, Ivy, Kathryn, Lynne, Mandy, Scott, Susan and Sylvia—for their leadership, support, dedication and energy! As well, a special note of thanks to previous team members, Doreen Day, Luciano Di Loreto, Angela Elia, Tannis Jarvis, Allia Karim, Brian Simmons and Aleksandra Walczak for their contributions to the Centre. We believe we've taken a good long step toward transformation, in large part due to the collaborative efforts with you, our community. At our Centre, across our province and country and around the world, we share in an amazing possibility of transformation through our joint and collaborative work. Our commitment is to continue collaborating with you and to welcome new learning and partnerships as we contribute to the sustainability and impact of interprofessional education, research and care.

WHO WE ARE

MEET OUR TEAM

The University of Toronto Centre for Interprofessional Education (Centre for IPE) began as a partnership between the University of Toronto and the Toronto Academic Health Sciences Network (TAHSN), with the University Health Network and the Toronto Rehabilitation Institute as lead hospitals. Since October 2009, the Centre has brought together faculty, health and education leaders, researchers, scholars, students and community partners committed to enhancing interprofessional education, research and care.

Leading this effort is a group of committed leaders and staff who currently make up the Centre for IPE team, shown below.



Left to right: Ivy Oandasan, Caitlin Brandon, Susan J. Wagner, Belinda Vilhena, Lynne Sinclair, Maria Tassone, Dante Morra, Mandy Lowe, Kathryn Parker (Photo taken at the Centre launch in September 2010; missing team members include Sylvia Langlois, Scott Reeves and Clare Schlesinger.)



Maria Tassone
Centre Director;
and Assistant Professor,
Department of Physical
Therapy, University of
Toronto (UT)



Mandy Lowe
Associate Director, Toronto
Rehabilitation Institute;
and Assistant Professor,
Department of Occupational
Science and Occupational
Therapy, UT



Dante MorraAssociate Director,
University Health Network;
and Assistant Professor
of Medicine, Faculty of
Medicine, UT



Susan J. WagnerFaculty Lead — Curriculum; and Senior Lecturer,
Department of Speech—
Language Pathology, UT



Sylvia LangloisCurriculum Associate;
and Assistant Professor,
Department of Occupational
Science and Occupational
Therapy



Lynne Sinclair
Innovative Program and
External Development Lead;
and Assistant Professor,
Department of Physical
Therapy, UT



Ivy Oandasan
Senior Advisor, Systems
Integration; and Associate
Professor and Research
Scholar, Department of
Family and Community
Medicine, Faculty of
Medicine, UT



Kathryn ParkerEvaluation Advisor;
and Assistant Professor,
Department of Paediatrics,
Faculty of Medicine, UT



Scott ReevesResearch Advisor;
and Professor, Department
of Psychiatry, Faculty of
Medicine, UT



Belinda Vilhena Manager



Caitlin BrandonEducation Coordinator



Clare Schlesinger Administrative Assistant

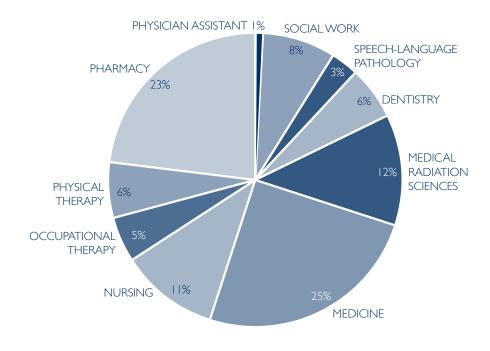
WHAT WE DO - STRATEGIC DIRECTIONS

CURRICULUM INTEGRATION AND EXPANSION

The University of Toronto (UT), building on its own long history of interprofessional education (IPE), now has over 1200 students each year in 11 health science professions—dentistry, medical radiation sciences, medicine, nursing, occupational science and occupational therapy, pharmacy, physical education and health, physical therapy, physician assistant, social work and speech–language pathology—participating in the IPE curriculum. Eight of these 11 individual programs have made the IPE curriculum a requisite for their students.

As the IPE Curriculum evolved over the past two years, the development of new learning activities was guided by the **IPE Core Competencies Framework** (see Appendices). Originally developed in 2008 at the University of Toronto for the IPE Curriculum, these core competencies focus on the acquisition of evidence–based knowledge, skills and attitudes required for collaboration–ready practitioners.

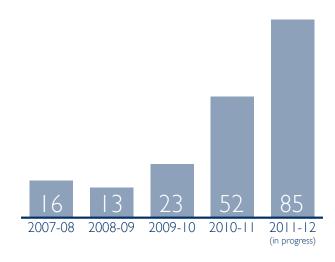
BREAKDOWN OF STUDENTS IN UT IPE CURRICULUM, 2011 (N=3,117)



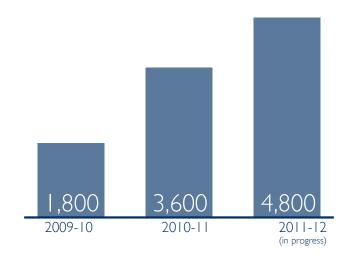
The Centre's Faculty Lead—Curriculum, Susan Wagner, in collaboration with Curriculum Associate, Sylvia Langlois and the Interfaculty Curriculum Committee, has been instrumental in working with faculty and health professional program leaders to ensure the successful development, implementation and evolution of this innovative curriculum. Over the past two years the Centre has focused on increasing capacity in both core and elective learning activities, ultimately achieving a 300% increase in elective sessions. Consequently, the number of student spaces across these sessions, of which there are now 85, has increased from 1800 to 4800.

The recruitment of our Education Coordinator, Caitlin Brandon, has helped us to facilitate the increased and timely provision of resources, tools and coordination for all of our curricular activities. In addition, building on the work of the Academy Associates in the Rehabilitation Sciences sector at the University of Toronto, Caitlin effectively moved the curriculum to a web–based Blackboard platform and an RSVP system that was key to its broad scale implementation in 2009.

NUMBER OF IPE ELECTIVES OFFERED ANNUALLY



AVAILABLE SPACES ACROSS IPE ELECTIVES





YEAR I - TEAMWORK: YOUR FUTURE IN HEALTH CARE

This introductory IPE learning activity powerfully brings together all 1200 first—year health science students in beautiful Convocation Hall as a foundation for collaborative practice. The two-hour session enables students to learn about, from and with each other.

As a part of this session, faculty members demonstrate different ways in which health care teams can deliver care. Students also hear the account of a patient's journey through the health care system, giving them the opportunity to reflect on the health care profession they have chosen and to think about how they can be vital members of an interprofessional health care team.

CONFLICT IN INTERPROFESSIONAL LIFE

This learning activity targets more advanced health professional students and focuses on IPE competencies at the immersion level. It has been designed to reinforce the message that conflict is a natural part of working life and that these students will have a professional responsibility to handle it effectively.

Students begin with a didactic/experiential session that explores personal responses to conflict, sources of conflict and strategies for dealing with conflict. In small groups, students work with facilitators to complete an icebreaker activity, after which a DVD is shown to the larger group demonstrating an interprofessional dispute. Finally, the small groups address the demonstrated conflict through a simulation process.

CASE-BASED: PAIN OR PALLIATIVE CARE

Mixed groups of students learn about interprofessional collaboration in a pain and/or palliative care case that also focuses on competencies at the immersion level.

PAIN CURRICULUM

Students are grouped interprofessionally, ensuring representation from six professions. These groups work on patient cases, which have been adapted by the Interfaculty Pain Curriculum Committee. Over the course of three days, each group develops a pain assessment and management plan, which is then presented to a larger group on the final day. The first and last group meetings are facilitated by clinicians.

PALLIATIVE CARE

In this facilitated session, health sciences students have the opportunity to represent their respective professions by participating in and contributing to an interprofessional team meeting involving a palliative care case. The objective is to give students a greater sense of preparedness for subsequent patient/family meetings involving patients with advanced cancer.

IPE COMPONENT IN A CLINICAL PLACEMENT

This learning activity is built into existing clinical placements at one or more clinical sites and focuses on professional competence. Two models are utilized—structured and flexible—to enable completion of this core component over the course of the student's educational program.

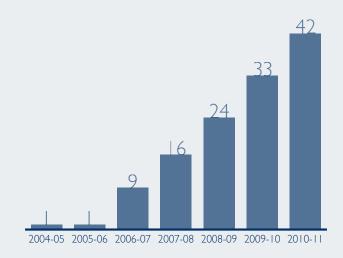
The structured model includes four elements: 1) common clinical area, for which students are placed on the same team at a site where their placements overlap; 2) introductory tutorial, which occurs prior to the four—week period; 3) facilitated patient\client\family—themed tutorials, which occur each week in an area of professional relevance to the students; and 4) shared presentation, which is completed by the student team at the end of the placement.

The flexible model includes three clinical learning activities that allow students to experience interprofessional learning in an array of clinical settings. Activities focus on but are not limited to the following:

- Participating in IP team education
- Interviewing/shadowing a team member
- Participating in team meetings.

Based on significant efforts and leadership in developing the IPE Component in a Clinical Placement learning activity, students now have numerous opportunities to gain important interprofessional learning in practice settings. As of this report, all TAHSN hospitals have implemented structured IPE placements, and this has extended into the Greater Toronto Area. In their previous roles, Mandy Lowe (as Faculty Lead—Clinical and Professional Development) and Lynne Sinclair (as Faculty Lead, Strategic Directions for Clinical IPE settings) enabled this growth, with the tremendous support and leadership of the IPE/Interprofessional Collaboration (IPC) Clinical Leads and the University of Toronto Academic Coordinators of Clinical Education (ACCE). This group also comes together semi–annually in order to enable effective integration across the education and practice interface.

NUMBER OF STRUCTURED IPE PLACEMENTS



ELECTIVE LEARNING ACTIVITIES

These are just a few examples of the many elective learning activities offered.

Dying and Death

Dying and Death, a particularly powerful and popular IPE learning activity, focuses on developing an appreciation of diversity (in terms of faith, culture, personal and professional values), an understanding of the roles and responsibilities shared by the interprofessional team and learning how to communicate and be present with an individual and his or her family around the time of death. The three-hour evening session includes a large group teaching segment with a panel of speakers focusing on three aspects of dying and death. Small group facilitated discussion with guided questions follows, with a final large group summary. Approximately 200 students from nine health science programs and 40 facilitators participate across the health sciences and spiritual care sectors.

Health Mentor Program

The University of Toronto Health Mentor Program, inspired by a program at Thomas Jefferson University, matches an individual (health mentor) living with a chronic health challenge such as multiple sclerosis, HIV/AIDS, rheumatoid arthritis or chronic pain, with a group of interprofessional students. Over the course of three interviews, more than 100 students from eight programs explore the following module topics with the volunteer health mentor: 1) Impact of the Chronic Health Challenge; 2) Ethics and Professionalism Issues; and 3) Patient/Client Safety Issues. Subsequently, students participate in three facilitated on-line discussions and complete a reflective assignment. This is a great opportunity for students to develop an appreciation of the breadth of impact of health challenges. Students have indicated that this experience has been highly valuable in helping them to understand issues beyond those learned in the classroom.



"This program gave me the opportunity to learn more about health professionals and our impact on clients than any other area of my education so far."

- Student

Our IPE Curriculum successes have also been the result of engagement and collaboration with our students, and in particular, the University of Toronto Interprofessional Healthcare Students' Association (IPHSA), a group of health science students interested in promoting IPE within these faculties. Their mandate is to create an educational environment in which students have the opportunity to interact with and learn from one another. Student members of IPHSA believe that fostering a strong interprofessional relationship, involving understanding, appreciation, and co-operation between health professions, is key to providing patients with the best care they can receive.

National Health Care Team Challenge

In March 2011, the University of Toronto collaborated with IPHSA and NaHSSA (the National Health Science Students' Association) to develop and implement new learning activities, specifically the inaugural National Health Care Team Challenge (NHCTC), and a new session on student–led service clinics such as the IMAGINE clinic led by University of Toronto students.

The inaugural NHCTC was held on March 11, 2011, as part of the NaHSSA conference at the University of Toronto. Seven interprofessional teams competed to create a collaborative management plan for a complex two–part case. All participants needed to think on their feet and be prepared to deliver collaborative and creative responses on the spot.

Participating teams represented McMaster University, the Michener Institute, Queen's University, the University of British Columbia (UBC), the University of Ottawa, the University of Toronto (UT) and the University of Western Ontario.

All teams made impressive collaborative presentations focusing on the client/patient. A large audience of students provided feedback following the presentations.





UT Team, from left to right: Isabella Cheng (Faculty Mentor), Yin Chan (Medicine), Evgenia Erenburg (Occupational Therapy), Olivia Ng (Pharmacy), Katy Morrow (Social Work). Missing from photo, Amber Purins (Chiropractics)

"Coming from different professions we all had unique goals and management strategies for our patient, based on what we were taught in our respective programs. Conducting our initial research independently, it seemed like we had each achieved the best care for our patient. However, when we came together to discuss the case, complexities were revealed and the real challenge began. Through effective communication and knowledge sharing, we realized each of us had only one piece of the puzzle, and after putting together the pieces, a coordinated picture fell into place. I came away from the HCTC not only with newly gained insight about providing collaborative health care but also with new friendships."

— Pharmacist, UT (NHCTC)

ASSESSMENT AND EVALUATION

Successes have also been achieved in the area of assessment and evaluation. Susan Wagner, Faculty Lead—Curriculum, and previous Faculty Lead—Assessment, Brian Simmons, in partnership with Memorial University (Newfoundland) and the University of Ottawa, completed work on an assessment rubric for IPC, the first assessment tool to be developed in Canada. Results of global rating scales, based on the IPE core competencies mapped onto each learning activity, have shown that students coming out of our IPE program self-assess that learning has occurred across all levels and types of learning activities. This is also true across exposure, immersion and competence levels and across all professions.

A database to track registration, attendance and completion of curricular elements has been developed under the leadership of the Centre's Associate Director, UHN, Dante Morra, providing useful reports to students, faculty and leaders across the health science programs.

Kathryn Parker, Evaluation Advisor to the Centre, led a Phase 1 utilization-focused evaluation of the IPE curriculum focused on design, delivery and feasibility. As a result, a standardized evaluation tool for all learning activities and also structured debriefing tools for facilitators and working groups were developed for use in the 2011/12 academic year.

In addition, the Centre is partnering with IPHSA to establish an annual student survey that will assess the impact and sustainability of the IPE curriculum.

PROFESSIONAL DEVELOPMENT

Our second strategic direction focused on professional development for our local, provincial, national and international communities. We were thrilled to note the significant growth of the *ehpic* (Educating Health Professionals in Interprofessional Care) program, hosted annually in June over the past two years.

EHPIC: ADVANCING THE FUTURE OF HEALTHCARE THROUGH INTERPROFESSIONAL LEARNING —A CERTIFICATE COURSE FOR HEALTH PROFESSIONALS, EDUCATORS AND LEADERS

ehpic is the result of the original work of Ivy Oandasan and colleagues (at right), who in 2004 developed a week–long 39–hour certificate course funded through a CanMEDS research and development grant from the Royal College of Physicians and Surgeons of Canada. The program was implemented by the University of Toronto, Office of IPE, the following year for health professional educational leaders from the:

Faculty of Medicine
Department of Nutritional Sciences
Faculty of Nursing
Department of Occupational Science & Occupational Therapy
Faculty of Pharmacy
Department of Physical Therapy
Faculty of Social Work
Department of Speech-Language Pathology

The course was structured to develop academic leaders in interprofessional education, with the knowledge, skills and attitudes to teach learners and fellow colleagues the art and science of working collaboratively for patient–centred care. With the addition of a number of contributors and faculty, this course has since been made accessible to Canadian and international audiences through the Centre as a five–day certificate program and is now provided in a variety of formats—through workshops, seminars, and as a customized three–day course arranged on request.

Since the establishment of the Centre for IPE, the number of spaces for the five–day *ehpic* program has increased from 50 to 64 per session, with substantial waiting lists annually. Participants in the early *ehpic* sessions came primarily from the Toronto community, but increasingly the



Original Authors

Ivy Oandasan (PI)

Keegan Barker

Debbie Kwan

Molyn Leszcz

Azi Moaveni

Denyse Richardson

Ivan Silver

Lynne Sinclair

ehpic Contributors:

Mandy Lowe

Jennifer Macauley

Kathryn Parker

Scott Reeves

Donna Romano

Brian Simmons

Maria Tassone

Belinda Vilhena

Susan J. Wagner



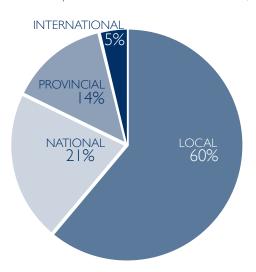
"The most powerful teaching/learning tool seems to be watching the facilitators and learning from them. The role modeling of collaborative practice cannot be an act, it must be lived."

— an ehpic graduate

program draws from across the province and other parts of Canada, from the United States and beyond. A special thanks to Mandy Lowe and Ivy Oandasan, Co–Directors, for their incredible leadership of this program and its faculty for the past two years.

As a result of increasing demand for *ehpic*, the Centre partnered with several clinical and academic organizations in order to create customized versions of *ehpic*. Since 2009, our customized *ehpic* program has been offered at the Centre for Addiction and Mental Health (Toronto), Children's Treatment Network (York Region), the University of Virginia, Ontario Shores Centre for Mental Health Sciences (Whitby), the Veterans Affairs Connecticut Healthcare System, the University of Minnesota, Glostrup University Hospital (Denmark) and SAMSO (Saudi Aramco Medical Services Organization) (Saudi Arabia).







2011 ehpic participants and faculty

- "What impact did the *ehpic* course have for me? I remember going into the course thinking, 'Gee, I hope I learn stuff,' and coming out going, 'Wow, I learned way more than I ever thought I would. A lot of things came out of the course that I wasn't expecting, something moves you. And that doesn't happen with just any course."
 - ehpic graduate

Collaborating Across International Borders

Glostrup University Hospital, Denmark *ehpic* participants



"For a couple of years Glostrup University Hospital has had a very fruitful and inspirational collaboration with the Centre for IPE. It started in 2009 with the participation of 17 delegates from the hospital in a 10–day study trip to Canada. The participants included consultants, physicians, head of education, clinical nurse specialists, clinical nurse educators, physiotherapists, administrators and members of the board of directors. This collaboration has resulted in a Danish version of the *ehpic* Course, with Ivy Oandasan and Maria Tassone co–facilitating the first course in Denmark. We have completed two courses in 2009 and 2010, thus educating 64 facilitators. The course is now being offered to participants from all of Denmark, representing hospitals, communities and academia."

— Jette S. Holtzmann, Organizational Development, Glostrup University Hospital

International Three-Day ehpic—University of Virginia



As part of a grant entitled A Continuing Interprofessional Education Initiative (IPEI) to Improve Sepsis Care by Enhancing Healthcare Team Collaboration, the University of Virginia (UVA), in Charlottesville, VA, engaged 35 participants, in January 2011, in a three-day modified version of the successful five-day *ehpic* course held in June in Toronto each year.

Course participants included UVA physician and nursing faculty, and UVA physicians, nurses, acute care nurse practitioners and respiratory therapists in emergency medicine and critical care settings at the UVA Hospital. The course was aimed at developing health professional leaders in interprofessional education who have the knowledge, skills and attitudes to teach both learners and fellow colleagues the art and science of working collaboratively for patient-centred care. A secondary goal was to provide instruction regarding the use of simulation as an IPE teaching strategy.

COLLABORATIVE CHANGE LEADERSHIP:

ENABLING INTERPROFESSIONAL CARE IN YOUR ORGANIZATION

New at the Centre for IPE and in partnership with the University Health Network, is the Collaborative Change Leadership (CCL) program. Initially funded in 2009 through a grant from HealthForceOntario's Interprofessional Care and Education Fund, CCL is specifically designed for those in healthcare or health education institutions who are leading change throughout their organizations and across the continuum of care. A first of its kind in Canada, the program aims to integrate the practice and evidence related to change leadership, interprofessional collaboration and health care. Although many leadership training programs exist, no other one focuses comprehensively on the future leadership needs of our health education and health care systems.



In its pilot year, the program enabled 54 participants from 23 clinical and academic organizations in Ontario to develop and implement successful organizational strategies that created broad culture shifts and generated sustainable change in priority areas such as IPC, IPE, patient safety and patient—centred care.

Participants attended in organizational teams and brought capstone change initiatives from their own contexts. Over a 10–month period, each participant team developed and implemented an emergent change strategy through a structure of five intensive sessions, experiential learning and coaching from faculty within and between sessions.

CCL has already been a tremendous success. After its first pilot, it was nominated for a Faculty of Medicine, University of Toronto, educational innovation award. More importantly, the evaluation of this program demonstrated that participants had indeed met and exceeded all of the program outcomes. CCL uniquely emphasized context–specific approaches that utilize principles of appreciative and emergent change relating directly to the participants' professional needs. Through this learning experience, participants

COLLABORATIVE CHANGE LEADERSHIP DEFINES A LEADER WHO:

- Leads successful and sustainable change in the face of uncertainty and ambiguity
- Holds multiple lenses and perspectives
- Strengthens and builds relationships
- Leads across and navigates complex systems
- Asks questions with a generative and learner lens
- Reflects on and senses what is needed most in a system

deepened their practice of collaboration as they led collaborative change. A cornerstone of the program was the alignment of course content, design and delivery, including how the faculty modeled emergent change and collaborative leadership throughout.



"All facilitators modeled collaboration and the concepts being taught. The importance of stepping back to get direction—"Go where the energy is."

—CCL graduate





"For those who have an interest in learning how to stimulate change within their healthcare organizations, and who want to use a different approach to identifying and planning future initiatives that will make a difference in their organizations, this program provides all the necessary ingredients."

— CCL graduate

A special thanks to Cate Creede and Jill Shaver, Co–Directors, for their inspirational leadership of the program and its faculty in this first iteration. We look forward to hosting a second cohort of the CCL program in 2012.

CCL PROGRAM CORE FACULTY

Paula Burns, Provost and Vice President, Academic, Northern Alberta Institute of Technology

Cate Creede, Organizational Change Consultant, The Potential Group

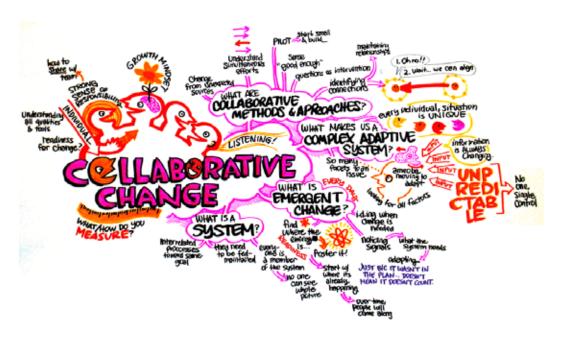
Ivy Oandasan, Senior Advisor, Systems Integration, Centre for IPE, and Associate Professor and Research Scholar, Department of Family and Community Medicine, Faculty of Medicine, University of Toronto

Kathryn Parker, Evaluation Advisor, Centre for IPE, University of Toronto, and Director, Academic Affairs, Holland Bloorview Kids Rehabilitation Hospital

Jill Shaver, B. J. Shaver Consulting Inc.

Maria Tassone, Director, Centre for IPE, University of Toronto and Director, Health Professions, University Health Network

CAPTURING AN EMERGING MODEL OF COLLABORATIVE CHANGE LEADERSHIP FROM PROGRAM PARTICIPANTS



Lastly, warm recognition to **Belinda Vilhena**, Administrative Lead for our Professional Development programs, who created a seamless teaching and learning experience for all of our participants and faculty. And a welcome back to **Lynne Sinclair**, previous Associate Director, returning to the Centre as our Innovative Program and External Development Lead. Lynne will be instrumental in working with the Centre for IPE team to grow our Professional Development programs into the future.

RESEARCH, SCHOLARSHIP AND INNOVATION

PEER-REVIEWED PUBLICATIONS

Our Centre for IPE team, led by Research Advisor Scott Reeves, contributed to the field of IPE and IPC through numerous publications in peer-reviewed journals.

Abramovich I, Espin S, Wickson-Griffiths A, Dematteo D, Baker L, Egan-Lee E, Reeves S. (2011). Translating collaborative knowledge into practice: findings from a 6-month follow-up study. J. Interprof. Care. 25(3), 226-227.

Baker L, Egan-Lee E, Leslie K, Silver I, Reeves S. (2010). Exploring an IPE faculty development program using the 3-P model. J. Interprof. Care. 24(5), 597-600.

Baker L, Egan-Lee E, Martimianakis M, Reeves S. (2011). Relationships of Power: Implications for interprofessional education and practice. J. Interprof. Care. 25(2), 98-104.

Cameron A, Ignjatovic I, Langlois S, Dematteo D, Di Prospero L, Wagner SJ, Reeves S. (2009). An Introduction to Interprofessional Education for First-Year Health Science Students: Perspectives of Pharmacy Students and Faculty. Am. J. Pharm. Educ. 73(4), 62.

Cameron A, Rennie S, Di Prospero L, Langlois S, Wagner SJ, Potvin M, Dematteo D, LeBlanc V, Reeves S. (2010). An introduction to teamwork: findings from an evaluation of an interprofessional education experience for 1,000 first year students. 7. Allied Health. 38(4), 220-226.

Cheung D, McKellar J, Parsons J, Lowe M, Willems J, Heus L, Reeves S (in press). Community Re-engagement and Interprofessional Education: The Impact on the Healthcare Provider and Persons Living with Stroke. Top. Stroke Rehab.

Dematteo D, Reeves S. (2011). A critical examination of the role of appreciative inquiry within an interprofessional health care initiative. 7. Interprof. Care. 25(3), 203–208.

Egan-Lee E, Baker L, Dematteo D, Hollenberg E, Tobin S, Reeves S (in press). Neophyte facilitator experiences of interprofessional education: implications for faculty development. J. Interprof. Care.

Goldman J, Meuser J, Lawrie L, Rogers J, Reeves S. (2010). Interprofessional primary care protocols: a strategy to promote an evidence-based approach to teamwork and the delivery of care. 7. Interprof. Care. 24(6), 653-65.

Goldman J, Meuser J, Lawrie L, Rogers J, Reeves S. (2010). Interprofessional collaboration in Family Health Teams: An Ontario-based study involving 14 teams. Can. Fam. Physician. 56, e368-374.

Kenaszchuk C, Gotlib Conn L, Dainty K, McCarthy C, Reeves S, Zwarenstein M. (in press). Consensus on interprofessional collaboration in hospitals: statistical agreement of ratings from ethnographic fieldwork and measurement scales. J. Eva. Clin. Pract.

Kenaszchuk C, MacMillan K, van Soeren M, Reeves S. (2011). Interprofessional simulated learning: short-term associations between simulation and interprofessional collaboration. BMC Med. 9, 29. www.biomedcentral.com/ content/pdf/1741-7015-9-29.pdf

Kenaszchuk C, MacMillan K, van Soeren M, Reeves S. (2011). Interprofessional simulated learning: short-term associations between simulation and interprofessional collaboration. BMC Health Serv. Res. 10, 83.

Lewin S, Reeves S. (2011). Enacting "team" and "teamwork": using Goffman's theory of impression management to illuminate interprofessional collaboration on hospital wards. Soc. Sci. Med. 72, 1595-1602.

McKellar J, Cheung D, Lowe M, Willems J, Heus L, Parsons J. (2011). Healthcare providers' perspectives on an IPE intervention for promoting community re engagement post stroke. J. Interprof. Care. Early online, 1-3.

Pauze E, Reeves S. (2010). Examining the effects of interprofessional education on mental health providers: findings from an updated systematic review. J. Ment. Health. 19, 259–271.



Reeves S, Goldman J, Gilbert J, Tepper J, Silver I, Suter E, Zwarenstein M. (2011). A scoping review to improve conceptual clarity of interprofessional interventions. 7. Interprof. Care. 25, 167–174.

Reeves S, Goldman J, Sawatzky-Girling B, Burton A. (2010). A Synthesis of Systematic Reviews of Interprofessional Education. 7. Allied Health. 39, S198-S203.

Reeves S, MacMillan K, van Soeren M. (2010). Leadership within interprofessional health and social care teams: a socio-historical overview of some key trials and tribulations. 7. Nurs. Manag. 18, 258-264.

Reeves S, Tassone M, Parker K, Wagner SJ, Simmons B (in press). Interprofessional education: an overview of key developments in the past three decades. Work.

Reeves S, Zwarenstein M, Goldman J, Barr H, Freeth D, Koppel I, Hammick M. (2010). The effectiveness of interprofessional education: key findings from a new systematic review. 7. Interprof. Care. 24, 230-241.

Rice K, Zwarenstein M, Gotlib Conn L, Kenaszchuk C, Russell A, Reeves S. (2010). An intervention to improve interprofessional collaboration and communications: a comparative qualitative study. 7. Interprof. Care. 24, 350-361.

Rosenfield D, Oandasan I, Reeves S. (2011). Perceptions vs. reality: a qualitative study of students' expectations and experiences with interprofessional education. Med. Educ. 45(5), 471–477.

Schwartz F, Lowe M, Sinclair L. (2010). Communication in Health Care: Considerations and strategies for successful consumer and team dialogue. Hypothesis. 8(1), e7.

Simmons B, Egan-Lee E, Wagner SJ, Esdaile M, Baker L, Reeves S. (2011). Assessment of interprofessional learning: the design an interprofessional objective structured examination approach. 7. Interprof. Care. 25, 73-4.

Simmons B, Oandasan I, Soklaradis S, Esdaile M, Barker K, Kwan D, Leszcz M, Lowe M, Moaveni A, Richardson D, Silver I, Sinclair L, Tassone M, Wagner SJ. (2011). Evaluating the effectiveness of an interprofessional education faculty development course; the transfer of interprofessional learning to the academic and clinical practice setting. J. Interprof. Care. 25(2), 156-7.

Sinclair L. (2011). Clinician's Commentary on Interprofessional Education in the Acute-Care Setting: The Clinical Instructor's Point of View. Physiother. Can. 63 (1), 76-77.

van Soeren M, Baker L, Egan-Lee E, MacMillan K, Cop S, Reeves S (in press). Simulated interprofessional education: an analysis of teaching and learning processes. 7. Interprof. Care.

van Soeren M, Hurlock-Chorostecki C, Reeves S. (2011). The role of nurse practitioners in hospital settings: implications for interprofessional practice. 7. Interprof. Care. 25, 245–251.

GRANTS

Members of our team also completed work funded by major grants from HealthForceOntario, namely COMPASS and Collaborative Change Leadership (CCL), resulting in the CCL program described in this report and the creation of a new tool to assess readiness for IPE learning in clinical settings authored by co-principal investigators Ivy Oandasan and Kathryn Parker. Additionally, the Centre's work was supported by a number of grants held by team members.

Oandasan I, Yeshayahu M, Lowe M, Wagner SJ, Romano D, Vilhena B. A Longitudinal Study Measuring the Impact of an Interprofessional Faculty Development Course Advancing Leaders in Interprofessional Care. 1st Annual International Faculty Development Conference. University of Toronto Centre for Interprofessional Education Faculty Research Fund. May 2011. \$10,000.

Tassone M, Dalgarno N, Beagrie L, Orchard C, Paterson M, Vilhena B. 2011 Ontario Interprofessional Health Collaborative Conference: Leading cultural change. Canadian Institutes of Health Research (CIHR). October 2010. \$25,000.

Langlois S, Davidson S, Lowe M. Interprofessional collaborative practice in geriatric rehabilitation: Comparison of face-to-face and online discussions to teach team-based care. Department of Occupational Science and Occupational Therapy, University of Toronto, MTCU Grant. 2010–11. \$5,000.

Oandasan I, Parker K, Pauze E. Validating an Interprofessional Cultural Alignment Framework to Enhance The Health Canada Interprofessional Education for Collaborative Patient Centred Care Practice Evolving Framework. January 2010–December 2010. \$25,000.

Hanna E (co-PI), MacNeill H (co-PI), Lowe M, Sinclair L, Hall S, Reeves S. Building Community in COIL (Collaborative Online Interprofessional Learning): An examination of facilitation in online synchronous interprofessional education. Continuing Education Research and Development Award, Faculty of Medicine, University of Toronto. 2010. \$4,425.

Langlois S. Let's Not Play "House." Interprofessional Education Program. Simulated Patient Program Proposal. 25th Anniversary Award for Program Development. 2010. \$5000.

Hunter J (PI), McGillion M, Simmons B, Richardson D, Cameron A, Sinclair L, Lowe M, Wagner SJ, Parker K, Watt-Watson J, Dao T, Reeves S. Pain Knowledge Translation: An interprofessional clinical-learning experience for health care trainees. Pfizer Canada. 2010. \$50,000.

Tassone M, Creede C, Shaver J, Oandasan I, Burns P, Parker K, Vilhena B. Advancing Interprofessional Change Leadership. HealthForceOntario Interprofessional Care/Education Fund. January 2009-June 2010. \$430,500.

Oandasan I, Lowe M, Parker K, Pauze E, Simmons B, Sinclair L, Wagner SJ, Walczak A. IP COMPASS: Interprofessional Collaborative Organizational Measurement and Performance Assessment. HealthForceOntario. January 2009-June 2010. \$450,000.

Kim J (PI), Sivanantham V, Gairy P, Lowe M, Sinclair L. Enhancing Capacity for Interprofessional Care through Team-Building Quality Improvement Projects. HealthForceOntario Interprofessional Care/Education Fund. January 2009-June 2010. \$386,371.

Langlois S, Oandasan I. Empowering Patients as Mentors for Our Students: The Implementation and Evaluation of an Interprofessional Mentorship Program. University of Toronto Education Development Fund. 2009-10. \$9,548.

Wagner SJ, Simmons B, Reeves S. Evaluation of case-based interprofessional education: development and implementation. Undergraduate Medical Education Curriculum Renewal Fund, University of Toronto. 2009–10. \$13,952.

Simmons B, Wagner SJ, Reeves S. Assessment of an interprofessional objective structure clinical examination (iOSCE). Undergraduate Medical Education Curriculum Renewal Fund, University of Toronto. 2009–10. \$19,862.

Simmons B, Reeves S, Wagner SJ. The interprofessional Objective Structure Clinical Examination simulation tool. Educational Development Fund, University of Toronto. 2009–10. \$16,413.

Simmons B, Reeves S, Wagner SJ. Design and Evaluation of an Interprofessional Objective Structured Clinical Examination Development Simulation Tool. Network of Excellence in Simulation for Clinical Teaching & Learning. 2009-10. \$49,200.

INVITED AND PEER-REVIEWED PRESENTATIONS

The team has also made invited and peer-reviewed presentations at numerous venues, including the international All Together Better Health conference (Australia), two IPE Ontario conferences, the Faculty Development in the Health Professions conference, and the Association of Medical Education in Europe (AMEE).

Tassone M. Expanding the boundaries of interprofessional education and care. Sunnybrook Health Sciences Centre: IPE/IPC Showcase, Toronto, ON. June 2011.

Oandasan I. THE Workshop II—Together in Health Education: Skills for collaborative clinical practice — invited workshop facilitator and keynote address. Dalhousie Medicine New Brunswick, St. John, NB. June 2011.

Reeves S. Interprofessional education: where next? (seminar). Institute of Education, University of London, UK. June 2011.

Reeves S. Using the sociological imagination for interprofessional education and collaboration (keynote lecture). Centre for the Advancement of Interprofessional Education Annual General Meeting, London, UK. June 2011.

Reeves S. Interprofessional Collaboration: why bother? (keynote lecture). From Expert to Expert: Many Professions One (Expert) Patient. Claudiana Institute, Bozen, Italy. May 2011.

Shaver J, Burns P, Tassone M, Creede C, Oandasan I, Parker K, Vilhena B. Facilitating transformation learning: a case for collaborative change leadership programming. International Faculty Development Conference, Toronto, ON. May 2011.

Kwan D, Barker K, Richardson D, Wagner SJ, Austin Z. Effectiveness of a faculty development program in fostering interprofessional education competencies: A randomized controlled trial (oral research paper). First International Conference on Faculty Development in the Health Professions, Toronto, ON. May 2011.

Baker L, Kwan D, Leslie K, Yeung E, Batty H, Bernstein S, Egan-Lee E, Lieff S, McCaffrey J, Mehtha S, Richardson D, Silver I, Wagner SJ, Reeves S. Increasing the cadre of faculty developers via an evolving train-thetrainer workshop (oral research paper). First International Conference on Faculty Development in the Health Professions, Toronto, ON. May 2011.

Oandasan I, Yeshayahu M, Lowe M, Wagner SJ, Romano D, Vilhena B. A longitudinal study measuring the impact of an interprofessional faculty development course advancing leaders in interprofessional care (oral research paper). First International Conference on Faculty Development in the Health Professions, Toronto, ON. May 2011.

Wagner SJ, Shaver J, **Lowe M**, Tipping J. *The art and science of interprofessional education facilitation* (workshop). First International Conference on Faculty Development in the Health Professions, Toronto, ON. May 2011.

Leslie K, Egan-Lee E, Baker L, Reeves S. Exploring the longer-term outcomes of an IPE faculty/staff development program. AFMC Canadian Conference for Medical Education, Toronto, ON. May 2011.

Boet S, Bould D, Bharat S, Birze A, Naik V, Reeves S, Grantcharov T. Kirkpatrick evaluation of interprofessional simulation-based education for preoperative crisis resource management. AFMC Canadian Conference for Medical Education, Toronto, ON. May 2011.

Lowe, M., Kim, J., Abramson, S., Leung, V., Graham, L., Risden, M. Interprofessional education and quality improvement: synergy in complex continuing care (workshop). Clinical Scholarship: Promoting Evidence-informed Interprofessional Practice in Complex Continuing Care, Toronto, ON. April 2011.

Wagner SJ, Di Loreto D, Simmons B. The University of Toronto health care team challenge: A social-demic interprofessional education experience. Poster presented at the Canadian Association of Speech-Language Pathologists Conference, Montreal, QC. April 2011.

Oandasan I. Interprofessional Care and the Medical — New Paradigms for Care and Education (invited workshop facilitator). Society of Teachers of Family Medicine, New Orleans, USA. April 2011.

Reeves S. Evidence for interprofessional education across the globe (lecture). Södersjukhuset Hospital, Stockholm, Sweden. March 2011.

Reeves S. Assessing Interprofessional education using simulation (workshop). Karolinska Insitutet, 13th Educational Congress, Stockholm, Sweden. March 2011.

Tassone M, Creede C, Bournes D, McGrath P, McNally MJ, Fitzgerald B, Hart J, Mallette C, Ferguson-Pare M. The Best of Nursing: Creating Opportunities for the Future of Interprofessional Collaboration. Quality Worklife-Quality Healthcare Collaborative Summit, Mississauga, ON. March 2011.

Quant, S, Baker, T, Brunins, I, Rustu, T, Lowe, M. Developing an interprofessional goal-setting process for complex continuing care patients (poster presentation). GTA Rehab Best Practices Day 2011, Toronto, ON. March 2011.

Lowe M, Kim J. Greater than the sum of its parts: Quality improvement and continuing interprofessional education. GTA Rehab Best Practices Day 2011. Rapid Podium Presentation, Toronto, ON. March 2011.

Oandasan I. Interprofessional Care... Walking the Talk. (Keynote speaker). Toronto Rehabilitation Institute — Report Card on Elder Care — Making the Grade: Geriatrics Symposium, Toronto, ON. February 2011.

Oandasan I, Robinson J. Taking up the Gauntlet. (plenary speakers). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Tassone M, Burns P, Creede C, Karim A, Oandasan I, Parker K, Shaver J, Vilhena B. Building Capacity of Collaborative Change Leaders: Transforming Interprofessional Care in Ontario. IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Wagner SJ, Kilmartin C, Palmer C, Chapman W, Hardie C, Cockburn L, Cameron A, Mainwaring L, Switzer-McIntyre S, Kanofsky S, Litvack A, Tassone M. How An Interfaculty Curriculum Committee Supports An interprofessional Education Curriculum. IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Morra D, Plaza C. Innovation in Healthcare Feedback: the utilization of a feedback tool for learning and process improvement. IPE Ontario 2011: Leading Cultural Change. Toronto, ON. January 2011.

Simmons B, Wagner SJ, Langlois S. Demonstration of interprofessional education student learning: Global rating scale assessment (oral presentation). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Langlois S. Using patent/client narratives to highlight ethics and professionalism to future health care practitioners. IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Langlois S. Teaching patient/client safety: A narrative approach. IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Langlois S. Empowering patients as mentors for our students: The implementation and evaluation of an interprofessional mentorship program. IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Simmons B, Wagner SJ, Esdaile M, Egan-Lee E, Reeves S. Development, implementation and evaluation of the interprofessional objective structured clinical examination (iOSCE) assessment tool (oral presentation). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Leslie K, Egan-Lee E, Baker L, Andrews M, Burns P, Richardson D, Shaver J, Simmons B, Wagner SJ, Silver I, Reeves S. Exploring the longer-term outcomes of an IPE faculty/staff development program (oral presentation). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Curran V, Casimiro L, Banfield V, Hall P, Gierman T, Lackie K, McCarthy P, Oandasan I, Simmons B, Wagner SJ. Development and validation of an interprofessional collaborator assessment rubric (oral presentation). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Wagner SJ, Di Loreto D, Simmons B. The University of Toronto health care team challenge: A social-demic interprofessional education experience (poster). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Macdonald G, Wagner SJ. Sustainable IPE: Embracing educational technology (workshop). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Simmons B, Wagner SJ, Jeffries A, Reeves S. How to achieve useful assessment in interprofessional education. (Workshop). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Wagner SJ, Simmons B, Esdaile M, Reeves S. Evaluation of case-based interprofessional education (IPE) sessions: Development and implementation (oral presentation). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Hanna E, MacNeill H, Lowe, M, Hall S, Sinclair L, Soren B, Reeves S. Uncharted waters in the brave new world: Synchronous online IPE facilitation training (oral presentation). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Rowland P, McLaney E, Lowe M. Adopting and innovating: Building interprofessional education programs at community teaching hospitals (oral presentation). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Kim J, Lowe M. Enabling quality improvement through interprofessional education and collaboration (oral presentation). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Gold K, Lowe M, McGillicuddy P. From case-based to story-based: An exploration of the use of narrative methods to promote interprofessional learning through dialogue (workshop). IPE Ontario 2011: Leading Cultural Change, Toronto, ON. January 2011.

Wagner SJ. Dealing With Conflict (workshop). Family Physician Partnership, Baycrest Centre for Geriatric Care, Toronto, ON. January 2011.

Reeves S. Interprofessional education—key developments in Canada (lecture). Niigata University of Health and Welfare, Niigata, Japan. December 2010.

Reeves S. Evaluating interprofessional education (workshop). Tokyo Metropolitan University, Japan. December 2010.

Reeves S. Interprofessional facilitation—key strategies (workshop). Tokyo Metropolitan University, Japan. December 2010.

Wagner SJ, Simmons B, Esdaile M, Egan-Lee E, Reeves S. Interprofessional Objective Structured Clinical Examination (iOSCE). SIM-one—Provincial Simulation Network, Expo Day, Toronto, ON. December 2010.

Morra D. Improving Healthcare through Innovation. BI-International Innovation Forum, Munich, Germany. October 2010.

Morra D. Improving Healthcare through Innovation. West Park Hospital Innovation Forum, Toronto, ON. October 2010.

Tassone M, Sinclair L. Integrating Interprofessional Education into Clinical Practice. Indiana University School of Medicine—Interprofessional Education: The New Foundation for Healthcare Delivery, Indianapolis, USA. October 2010.

Simmons B, Wagner SJ, Egan-Lee E, Esdaile M, Baker L, Reeves S. The development and implementation of the interprofessional objective structured clinical examination (iOSCE) assessment tool. Richard K. Reznick Wilson Centre Research Day, Toronto, ON. October 2010.

Tassone M. Transforming Teaching, Learning and Care: The Next Horizon. St. Joseph's Health Centre— Interprofessional Education Week, Toronto, ON. October 2010.

Tassone M. Models of interprofessional education and care. Baycrest Hospital Education Retreat, Toronto, ON. September 2010.

Tassone M. A Collaborative Approach to Quality Care: The Dental Hygiene Connection. Ontario Dental Hygienists' Association Provincial Conference, Toronto, ON. September 2010.

Tassone M. Interprofessional Care: "How To" and "So What". Ontario Hospital Association, Toronto, ON. Sept. 2010.

Di Loreto D, Wagner SJ. The University of Toronto health care team challenge: A social-demic interprofessional education experience (poster). Association of Medical Education in Europe (AMEE), Glasgow, Scotland. August 2010.

Simmons B, Wagner SJ, Egan-Lee E, Esdaile M, Baker L, Reeves S. The development and implementation of the interprofessional objective structured clinical examination (iOSCE) assessment tool (short communication). Association of Medical Education in Europe (AMEE), Glasgow, Scotland. August 2010.

Leslie K, Egan-Lee E, Andrews M, Burns P, Richardson D, Shaver J, Simmons B, Wagner SJ, Silver I, Baker L, Reeves S. Exploring the longer-term outcomes of an IPE faculty development program. AAMC Group on Faculty Affairs Professional Development Conference, Toronto, ON. August 2010.

Reeves S. Key directions for the interprofessional field (seminar). Centre for Interprofessional Practice, University of East Anglia, UK. July 2010.

Reeves S. A synthesis of three qualitative studies of interprofessional collaboration: implications for learning and intervention design (seminar). Centre for Medical Education, Queen Mary University of London, UK. July 2010.

Pauze E, Hollenberg E, McCarthy C, Reeves S. Working Across Organizational Boundaries: Why is it important? How do we do it? (poster). Canadian Public Health Association Centenary Conference, Toronto, ON. June 2010.

Wagner SJ. Dealing With Conflict (workshop). University Health Network, Allied Health, Toronto, ON. June 2010.

Wagner F, Langlois S, Wagner SJ. Teaching ethics in an interprofessional environment. Canadian Bioethics Society, Kelowna, BC. June 2010.

Tassone M. Enhancing Capacity for Interprofessional Care through Team-Building Quality Improvement Projects (keynote speaker). HealthForceOntario, Toronto, ON. May 2010.

Wagner SJ. Collaborative Patient-Centred Care: The Role of Physician as Collaborator: Orientation to Education/Training & Practice in Canada (workshop). Centre for the Evaluation of Health Professionals Educated Abroad (CEHPEA), Toronto, ON. May 2010.

Wagner SJ. Dealing With Conflict (workshop). Department of Family Practice, St. Michael's Hospital, Toronto, ON. May 2010.

Wagner SJ. Dealing With Conflict (workshop). Plastic Surgery Residents, Department of Surgery, Women's College Hospital, Toronto, ON. May 2010.

Wagner SJ, Brown J, Alli D, Arora V, Barry M, Chaban M, Chambers R, Crowley S, Day D, Hurst C, McMaster K, Zammit P, Simmons B. Dying and Death: How An Interprofessional Education Session Fills A Gap (poster). Canadian Association of Speech-Language Pathologists and Audiologists Annual Conference, Whitehorse, YT. May 2010.

Wagner SJ, Langlois S, Simmons B. Developing an interface between interprofessional collaboration and interprofessional education: Bringing the workplace to the students (poster). Canadian Association of Speech-Language Pathologists and Audiologists Conference, Whitehorse, YT. May 2010.

Ellwood L, Johnson CJ, Steele C, Wagner SJ. Active learning about professional ethics (poster). Canadian Association of Speech-Language Pathologists and Audiologists Annual Conference, Whitehorse, YT. May 2010.

Reeves S. Interprofessional education: a review of its evidence base (keynote speaker). Faculty of Health Professions, University of New England, Portland, USA. May 2010.

Oandasan I. Collaborative Practice—Enhancing Care (keynote speaker). University of Manitoba Department of Continuing Education, Winnipeg, MB. May 2010.

Reeves S. Developing and delivering interprofessional education: key lessons (workshop). Faculty of Health Professions, University of New England, Portland, USA. May 2010.

Lieff S, Baker L, Chin K, Reeves S. The Personal, Relational and Contextual—Key Factors in the Academic Identity of Health Professional Educators. AFMC Canadian Conference for Medical Education, St Johns, NL. May 2010. [Awarded best oral presentation: runner up]

Leslie K, Baker L, Egan-Lee E, Allen S, Andrews M, Burns P, Merkley J, Richardson D, Shaver J, Wagner SJ, Silver I, Reeves S. The use of an online forum to facilitate an interprofessional community of learners. AFMC Canadian Conference on Medical Education. St Johns, NL. May 2010.

Oandasan I. Advancing Change in the System... (plenary speaker). Learn Together, Practice Together— The Northern Interprofessional Collaborators Conference, North Bay, ON. May 2010.

van Soeren M, Hurlock-Chorostecki C, Reeves S. The Positive Impact of Nurse Practitioners on Interprofessional Care Promotes Improved Health Resource Utilization (podium presentation). Canadian Association for Health Services and Policy Research Conference, Toronto, ON. May, 2010.

Oandason I, Tassone M, Burns P, Creede C, Karim A, Parker K, Shaver J, Vilhena B. Building Capacity of Collaborative Change Leaders. All Together Better Health V, Sydney, Australia. April 2010.

Wagner SJ, Simmons B, Langlois S. Can Learning Be Assessed in IPE Using a Global Rating Scale? All Together Better Health V. Sydney, Australia. April 2010.

Wagner SJ, Kilmartin C, Palmer C, Chapman W, Hardie C, Cockburn L, Cameron A, Mainwaring L, Switzer-McIntyre S, Litvack A, Tassone M. How an Interfaculty Curriculum Committee Supports An Interprofessional Education Curriculum. All Together Better Health V, Sydney, Australia. April 2010.

McGillicuddy P, Tassone M, Reynolds C, Neary MA, Ocampo S, Lowe M, Sinclair L. Working and Learning in Context: Developing a Schema for Understanding Interprofessional Education as a Driver for Collaborative Care. All Together Better Health V, Sydney, Australia. April 2010.

Tassone M. Interprofessional education and care: the next horizon. Sunnybrook Health Sciences Centre—Inaugural IPE/IPC Symposium, Toronto, ON. April 2010.

Oandasan I. Formalizing the "Kumbaya" of Teamwork-Substantiating Its Imperative in Patient Safety (keynote speaker). 8th Annual Quality Improvement Forum: Designing and Educating for the Delivery of Higher Quality Healthcare Outcomes, Calgary, AB. February 2010.

Oandasan I. Teamwork and Patient Safety–Knowing How to Place Nice in the Sandbox Makes a Difference—a workshop. 8th Annual Quality Improvement Forum: Designing and Educating for the Delivery of Higher Quality Healthcare Outcomes, Calgary, AB. February 2010.

Nasmith L, Oandasan I. Primary Care Teams: Practical approaches for integrating practitioners into the team and evaluating team functioning (keynote plenary speakers). CIHR Primary Healthcare Summit: Patient-Oriented Primary Healthcare—Scaling Up Innovation, Toronto, ON. January 2010.

Morra D, Plaza C. The Team Feedback Tool. IPE Ontario 2010 Conference, Toronto, ON. January 2010.

Wagner SJ, Langlois S, Lowe M. Building an Interprofessional Education Curriculum: Core Competency and Learning Activity Integration. IPE Ontario 2010 Conference, Toronto, ON. January 2010.

Simmons B, Langlois S, Wagner SJ. Can Learning Be Assessed in IPE Using a Global Rating Scale? IPE Ontario 2010 Conference, Toronto, ON. January 2010.

Wagner SJ, Langlois S, Yeung E. Enhancing Facilitator Education to Meet Challenges of Large Interprofessional Education. IPE Ontario 2010 Conference, Toronto, ON. January 2010.

Wagner F, Langlois S, Wagner SJ. Teaching Ethics in an Interprofessional Environment. IPE Ontario 2010 Conference, Toronto, ON. January 2010.

Langlois S, Yeung E, Wagner SJ. Developing an Interface between IPC and IPE: Bringing the Workplace to the Students. IPE Ontario 2010 Conference, Toronto, ON. January 2010.

MacMillan K, Devlin-Cop S, van Soeren M, Baker L, Kenaszchuk C, Reeves S. Using simulation to enhance patient safety through interprofessional care (poster). The Canadian Health Care Safety Symposium, Montreal, QC. October 2009.

AWARDS AND HONOURS

Ted Freedman Award for Innovation in Education

In partnership with the Toronto Academic Health Sciences Network (TAHSN), The Wilson Centre and the Centre for Faculty Development, Centre team members were awarded the prestigious, international Ted Freedman Award for Innovation in Education for the Catalyzing and Sustaining Communities of Collaboration Around Interprofessional Care Project. This unique project resulted in the first interprofessional faculty development program offered to teams of leaders across the TAHSN teaching hospitals by U of T and the first multi–hospital/university collaboration affecting simultaneous and interdependent change.



Top row to front row, from left to right: Lianne Jeffs, Anton Hart, Jack Mandel, Jane Merkley, Jacques Lee, Danny Nashman, Maria Tassone, Louis J. Vesprini, Vice President, Ontario Public Sector and Healthcare, HP Enterprise Services, Louise Lemieux-Charles, Ivan Silver, Mary Agnes Beduz, Ivy Oandasan (PI), Ted Freedman and Lynne Sinclair. Missing from the team: Bob Bell, CEO, UHN, Debbie Kwan, Scott Reeves.

SYSTEM ENGAGEMENT, ADVOCACY AND INFLUENCE

Our commitment to growing and sustaining the Centre for IPE as a regional, provincial, national and international resource for students, clinicians, academics and policy makers continues. We are especially proud of the growth of our IPE/IPC Community of Practice, which now includes over 250 academic and clinical health care professionals, who meet several times a year to share their knowledge of successful programs and initiatives across health education and health systems.

To meet the needs of our community, we have revamped our website to include a central access point for our team, tools and resources. In an effort to increase the resources available through the Centre, additional tools and products have been developed at the Centre for IPE. New tools such as the IPE Component in a Clinical Placement—Flexible Model and Tip Sheets that are available at no cost through the Centre for IPE. A new workshop, Clicking Collaboratively, in partnership with Surrey Place Centre and Bridgepoint Health was also piloted. This highly successful workshop was designed to

build capacity for effective online interprofessional education, an emerging methodology and a priority in the field.

We have responded to many invitations, locally and globally, to speak about successful strategies and programs targeted at the interface of education and practice. In addition, we have fielded numerous requests—from Dalhousie University, Memorial University, The Michener Institute, George Brown College and Ryerson University, among other institutions—to present special workshops structured to assist in building IPE capacity.

We were gratified to learn from our peers and colleagues at other universities (Dalhousie University, University of Manitoba, University of Sherbrooke, Northern Ontario School of Medicine, University of Minnesota, Medical University of South Carolina, University of Ottawa, Queen's University), that they have based components of their own IPE programs and initiatives on our University of Toronto model—including core competencies, curriculum, structured IPE placements and faculty/professional development programs.

During the past 18 months the Centre has welcomed visitors from Denmark, England, Scotland, Japan and the United States, interested in learning from our work and experience. We co–sponsored the 2011 IPE Ontario conference with York University, the first provincial SIM–one conference with the theme of IPE and Simulation, and the GIM Symposium 2011: Complex Care Forum in partnership with the Centre for Innovation in Complex Care at the University Health Network and Hospital of Ontario Pension Plan (HOOPP).

It is significant to note that our activities and successes over the past 18 months were largely the result of strategic partnerships and community engagement, which are intended to enable our long–range sustainability.

GIM SYMPOSIUM 2011: COMPLEX CARE FORUM: ENABLING INTERPROFESSIONAL TEAMS FOR HEALTH SYSTEM TRANSFORMATION

The Centre for Innovation in Complex Care (CICC) hosted the 3rd Annual General Internal Medicine (GIM) Symposium on April 8, 2011, at the MaRS Centre in partnership with the Hospital of Ontario Pension Plan (HOOPP), and the University of Toronto's Centre for Interprofessional Education (IPE). The goals of the symposium were to increase the awareness of the diversity and complexity of General Internal Medicine (GIM), to reinforce the key concepts of interprofessional collaboration and to provide educational opportunities in an interprofessional environment. The event culminated with a captivating Innovation Debate on physician payment between Ron Sapsford (Chief of Strategy, Ontario Medical Association) and Kevin Smith (President and CEO, St. Joseph's Health System) that was moderated by Bob Bell (President and CEO, University Health Network) and judged by Andreas Laupacis (Executive Director, Li Ka Shing Knowledge Institute) and Terry Sullivan (Chair of the Boards of the Canadian Agency for Drugs and Technologies in Health and the Ontario Agency for Health Protection and Promotion). The Symposium concluded with optimistic words from Deputy Minster Saäd Rafi on the subject of health system transformation.

PARTNERSHIPS

The Centre for IPE is recognized as a regional, provincial, national and international resource for students, clinicians, academics and policy makers. Its many working partnerships support collaborative research projects, development initiatives in IPE and IPC, faculty and professional development, education and teaching, formal consultations, and strategic work at an inter–organizational, committee and policy level.

Provincial

Addiction Services for York Region	Community Living Huronia	Muskoka Algonquin Healthcare	
Algonquin College	Conestoga College	Niagara College	
Barrie Family Health Team	COTA Health	Niagara Region Senior Services	
Baycrest Centre for Geriatric Care	Council of Academic Hospitals of	North York General Hospital	
Blue Hills Child and Family Services	Ontario Credit Valley Hospital	Northern Ontario School of Medicine	
Bridgepoint Health	Élisabeth-Bruyère Research	North Simcoe Muskoka CCAC	
Brock University	Institute	Office of Continuing Education and Professional Development, University of Toronto	
Cambridge Memorial Hospital	ErinoakKids Centre for Treatment and Development		
Canadian Chiropractic Memorial College	George Brown College	Ontario Chiropractic Association	
Canadian Patient Safety Institute	Georgian College	Ontario Dental Hygienists' Association	
Canadore College	Halton Healthcare Services		
Catulpa Community Support	HealthForceOntario	Ontario Hospital Association	
Service	Holland Bloorview Kids Rehabilitation Hospital	Ontario Interprofessional Health Collaborative	
Centennial College of Applied Arts and Technology	Hospital for Sick Children	Ontario Ministry of Health and Long-Term Care	
Central CCAC	Hospital for Sick Children: The	Ontario Ministry of Training,	
Centre for Addiction and Mental	Learning Institute	Colleges and Universities	
Health	Hotel Dieu Hospital	Ontario Shores Centre for Mental Health Sciences	
Centre for Effective Practice	Humber College		
Centre for the Evaluation of Health Professionals Educated Abroad	Joint Centre for Bioethics	Orillia Soldiers' Memorial Hospital	
(CEHPEA)	Kingston General Hospital	Queen's University	
Centre for Faculty Development,	Lakehead University	Rouge Valley Health System	
St. Michael's Hospital	Lake of the Woods District Hospital	Royal Ottawa Hospital	
Children's Treatment Network	London Health Sciences Centre	Royal Victoria Hospital	
Closing the Gap	Markham Stouffville Hospital	Runnymede Healthcare Centre	
College Boreal	McMaster University	Ryerson University	
College of Midwives of Ontario	Michener Institute	Sault Area Hospital	
College of Physicians and Surgeons	Mount Forest Chiropractic	Scarborough General Hospital	
of Ontario	Mount Sinai Hospital	Sheridan College	

Simcoe Community Services The Scarborough Hospital University of Toronto SIM-one The Speech Clinic University of Waterloo South East Toronto Family Health The Wilson Centre University of Western Ontario Team Thunder Bay Regional Health University of Windsor Sciences Centre Southlake Regional Health Centre West Park Healthcare Centre St. John's Rehab Hospital Toronto Academic Health Sciences Wilfred Laurier University Network CEO Group St. Joseph's Care Group, Thunder William Osler Health Centre Toronto Academic Health Sciences Network: IPE Leaders Women's College Hospital St. Joseph's Health Centre, Toronto Toronto Catholic District School York Catholic District School Board St. Michael's Hospital Board York Central Hospital St. Michael's Hospital: Li Ka Shing Toronto CCAC Institute York Early Intervention Services Toronto East General Hospital Sunnybrook Health Sciences Centre York Region District School Board Toronto Rehabilitation Institute Surrey Place Centre York Support Services Network Trillium Health Centre Taddle Creek Family Health Team York University University Health Network The Network of Excellence in Simulation for Clinical Teaching University of Ontario Institute of and Learning Technology The Ottawa Hospital University of Ottawa

National

Research (CIHR)

Collaborative (CIHC)

Canadian Interprofessional Health

Canadian Nurses Association

Alberta Children's Hospital Canadian Paediatrics Society Surgeons of Canada Association of Faculties of Medicine Capital District Health Authority Saint John Regional Hospital of Canada (AFMC) Chinook Health Saskatchewan Health Network Association of Faculties of College of Family Physicians of Saskatchewan Institute of Applied Pharmacy of Canada (AFPC) Canada Science and Technology Atlantic Health Sciences University of Alberta Dalhousie University Corporation University of British Columbia Laval University Calgary Health Region McGill University University of Calgary Canadian Association of Speech-Language Pathologists and Memorial University University of Manitoba Audiologists Mount Royal University University of New Brunswick Canadian Health Services Research National Health Sciences Students' University of Saskatchewan Foundation (CHSRF) Association (NaHSSA) University of Sherbrooke Canadian Institutes of Health

Red Deer College

University of Victoria

Renfrew Victoria Hospital

Vancouver Island Health Authority

Royal Alexandra Hospital

Yukon College

Royal College of Physicians and



International

American Association of Colleges of Pharmacy (AACP), USA

Brighton and Sussex Medical School, UK

Butler University, USA

Centre for the Advancement of Interprofessional Education (CAIPE), UK

Centre for Teaching and Learning, Australia

Claudiana Institute, Italy

Curtin University of Technology, Australia

Duke University, USA

Glostrup University Hospital, Denmark

Grand Rapids Medical Education Partners, USA

Grand Valley State University, USA

Hong Kong Polytechnic University, Hong Kong

Humanitarian City Hospital, Saudi Arabia

Indiana State University, USA

Indiana University Northwest, USA

Japan College of Social Work, Japan

Karolinska Institute, Sweden

Linkoping University, Sweden

National University of Singapore, Singapore

Niigata University of Health and Welfare, Japan

Queen Mary University of London, UK

Rosalind Franklin University of Medicine and Science, USA

Saitama Prefectural University, Japan

SAMSO (Saudi Aramco Medical Services Organization)

Sapporo Medical University, Japan

Sendai University, Japan

Simmons College, USA

Singapore Health Services, Singapore

Society of Teachers of Family Medicine (STFM), USA

Södersjukhuset Hospital, Sweden

St. Louis College of Pharmacy, USA

SUNY — The State University of New York, USA

Thomas Jefferson University, USA

Tokyo Metropolitan University, Japan

UC Davis University, USA

University of Athens, Greece

University of Bristol, UK

University of Colorado School of Medicine, USA

University of East Anglia, UK

University of Fortaleza, Brazil

University of London, UK

University of Manchester, UK

University of Maryland School of Nursing, USA

University of Melbourne, Australia

University of Minnesota, USA

University of New England, USA

University of New Mexico, USA

University of Pittsburgh, USA

University of Southern California, USA

University of Texas, USA

University of Virginia, USA

University of Washington, USA

VA Connecticut Healthcare System, USA

Yale University, USA





CENTRE FOR IPE — AWARDS OF MERIT FOR EXCELLENCE IN INTERPROFESSIONAL EDUCATION

In 2009, through the former Office of IPE, the Inaugural Awards of Merit for Excellence in Interprofessional Education were established to recognize excellence in our IPE community. In 2010, the Leadership Award was renamed the Ivy Oandasan Leadership Award in honor of Ivy's outstanding contribution in the field of interprofessional education and care.

Ivy Oandasan Leadership Award for Outstanding Contributions in Advancing IPE

- Joshua Tepper (2011)
- Bonnie Fleming Carroll (2010)

Inaugural Leadership Award for Outstanding Contributions in Advancing IPE

- Susan J. Wagner (2009)
- Filomena Meffe (2009)

Individual Award of Merit for Excellence in Interprofessional Education Teaching

• Elizabeth Hanna (2011)

Team Award of Merit for Excellence in Interprofessional Teaching

- Centre for Addiction and Mental Health—The Training Enhancement in Applied Cessation Counselling and Health (TEACH) Project (2011)
- Department of Family and Community Medicine—St. Michael's Hospital (2009)

Merit for an Outstanding Team that Role Models Interprofessional Collaboration for Patient-Centred Care to Learners

- Toronto East General Hospital—Transitional Care Team (2011)
- Mount Sinai Hospital—Inpatient Psychiatry Team (2010)
- Southlake Regional Health Centre—The Arthritis Program (2009)



Ivy Oandasan; with 2010 Award Winner Bonnie Fleming-Carroll



2010 Award Winners: Virginia Fernandes, Donna Romano and Edred Flak with Dante Morra

APPENDICES

COMMITTEES AND WORKING GROUPS

Executive Committee

Warm thanks to our governors, members of our Executive Committee who provided insightful advice and support of the strategies necessary to enable our current growth and reach.

Members

Catharine Whiteside (Chair) Dean, Faculty of Medicine and Vice Provost Relations with Health Care Institutions, UT Carolyn Baker President and CEO, St. Joseph's Health Centre Robert Bell President and CEO, UHN

Brian Hodges Vice President, Education, UHN (incoming) **Henry Mann** Chair, Council of Health Sciences, and Dean, Leslie Dan Faculty of Pharmacy, UT

Sioban Nelson Dean, Lawrence S. Bloomberg Faculty of Nursing, UT

Elizabeth Peter Associate Dean, Academic Programs, Lawrence S. Bloomberg Faculty of Nursing, UT

Mark Rochon President and CEO, Toronto Rehab (until June 2011)

Sal Spadafora Vice–Dean, Postgraduate Medical Education, UT **Maria Tassone** Director, Centre for IPE

Interfaculty Curriculum Committee (IFCC)

The IFCC is charged, on behalf of the Council of Health Sciences and respective faculties and departments, with overseeing and endorsing the development, implementation and evaluation of the IPE longitudinal curriculum for the University of Toronto (UT). The IFCC shares collaborative leadership across professions and provides a forum for dialogue, consultation and decision-making regarding emerging interprofessional curricular issues.

Members

The Director, Centre for IPE, Education/Curriculum Chairs, or designates, as approved by the Dean/Chair of each of the health science programs and two student representatives from the Interprofessional Health Science Students Association (IPHSA).

Centre for IPE: Maria Tassone Dentistry: Renee Kilmartin

IPHSA: Nikki Fischer, Stacey Creak
Medical Radiation Sciences: Cate Palmer



Dean Henry Mann, Dean David Mock



Dante Morra, Kathy Sabo, Robert Bell



Mark Rochon, Robert Bell, Catharine Whiteside



Joshua Tepper, Maria Tassone



Catharine Whiteside, Susan J. Wagner, Sharon Switzer-McIntyre, Maria Tassone



Medicine: Cynthia Whitehead, Bill Chapman

Nursing: Kate Hardie

Occupational Therapy: Lynn Cockburn

Pharmacy: Andrea Cameron, Deborah Sibbald

Physical Education and Health:

Margaret MacNeill, Lynda Mainwaring

Physician Therapy: Sharon Switzer-McIntyre **Physician Assistant:** Sharona Kanofsky

Social Work: Andrea Litvack

Speech-Language Pathology: Susan J. Wagner

IPE/IPC Clinical Leads

The IPE/IPC Clinical Leads group is comprised of IPE/IPC Leaders from across the GTA. These individuals lead clinical IPE experiences in their respective hospitals and practice settings and are active in shaping the IPE experiences of students learning in the IPE curriculum. Because their work brings together interprofessional education theory and practice on a daily basis, their experiences and observations have been of particular value to the development and implementation of the IPE Component in a Clinical Placement. This group meets formally several times each year and works closely with the Academic Coordinators of Clinical Education (ACCEs, see below) to build capacity for IPE in clinical settings.

Academic Coordinators of Clinical Education (ACCE)

The Academic Coordinators of Clinical Education are a group of faculty members from the University of Toronto responsible for the clinical education of students from their health science programs. Their focus is the development, coordination and oversight of clinical or fieldwork placements or rotations for their students. The ACCE meets semi–annually with IPE/IPC Clinical Leads in clinical settings to enable and enhance the critically important IPE curriculum component.



The Electric Maze is an exercise used at St. Joseph's Health Centre to provide a unique interprofessional learning opportunity for students. The maze contains carpet tiles that beep if you step on an unsafe square. Students work in teams to solve the puzzle and find a safe path across the maze. The catch is that after a brief period to strategize they are no longer allowed to talk! Elizabeth McLaney, Director of Interprofessional Education and Collaboration, reports, "The exercise really gets to the root of competencies for collaboration. It highlights how much effective communication is based on nonverbal messages and causes the students to grapple with competition versus collaboration at a very subtle level."

IPE/IPC Community of Practice

A Community of Practice (CoP) around Interprofessional Care (IPC) evolved out of the Catalyzing and Sustaining Communities of Practice Around Interprofessional Care (CCIC) project, which was funded by the HealthForceOntario Interprofessional Mentorship, Preceptorship, Leadership and Coaching fund. The IPE/IPC CoP now meets on a regular basis, to continue the momentum and collective work with IPC in Toronto.

CORE COMPETENCY FRAMEWORK

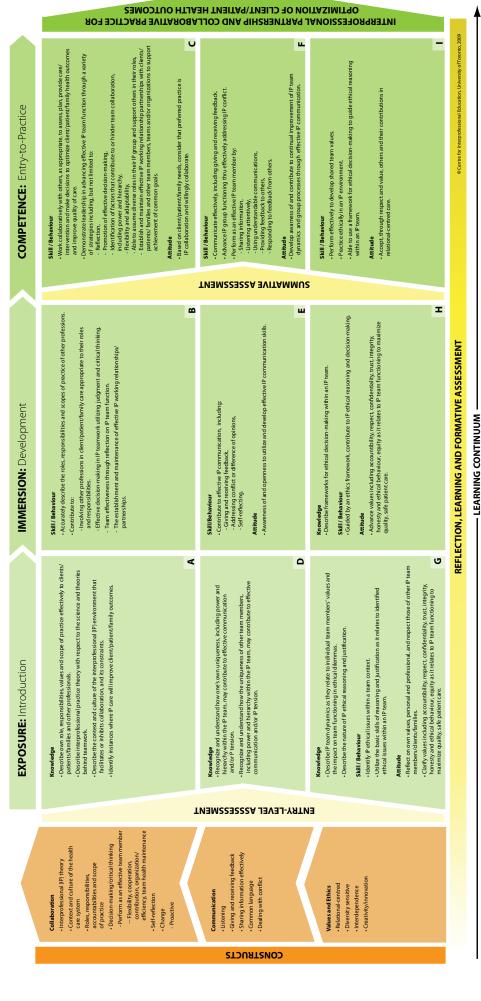
To access document in larger format, visit http://ipe.utoronto.ca.

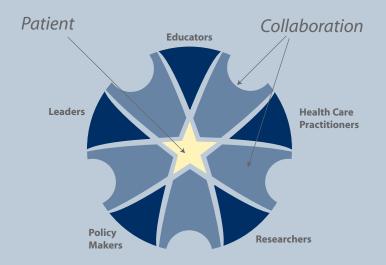
UNIVERSITY OF TORONTO

A Framework for the Development of Interprofessional Education Values and Core Competencies

Health Professional Programs, University of Toronto

Centre for INTERPROFESSIONAL EDUCATION





Centre for Interprofessional Education

University Health Network, Toronto Western Hospital 399 Bathurst Street, Nassau Annex Toronto, Ontario M5T 2S8 Tel: 416–603–5800 ext. 2577 Fax: 416–603–5580 www.ipe.utoronto.ca









