# TRANSFORMATION THROUGH COLLABORATION

# CENTRE FOR INTERPROFESSIONAL EDUCATION

BIENNIAL REPORT July 1,2011 – June 30,2013







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# DIRECTOR'S MESSAGE



Maria Tassone

our short years ago, the people who made up the newlyestablished Centre for Interprofessional Education (IPE) set out to live into our vision of 'transformation through collaboration.' With pride and passion, our core team at the Centre and over 500 academic and clinical faculty have been building capacity for IPE and interprofessional care (IPC) across education and practice, and at home and abroad. Our focus in four strategic areas (Curriculum Integration & Expansion; Professional Development; System Engagement, Advocacy & Influence; and Research, Scholarship & Innovation) has resulted in the amazing successes you'll note in this second biennial report.

Success can be measured in many ways in the early years of a new Centre and a relatively young field. Our hope is that as you read through the pages and narrative that follow, you will see success through a number of lenses: stories of impact, growth and expansion, international reach, scholarly contributions, patient/client and student engagement, and responsiveness to emerging needs, such as simulation and patient safety. Transformation is truly evident since we began our work together in the fall of 2009 and in the last two years since our inaugural report. We believe that the Centre's unique contribution to the healthcare and education systems is to model a new way of leading collaboratively for impactful and sustainable change and to create space for new models of teaching, learning and care to emerge.

There are many examples of this, including our structured IPE placements, which have been adapted and implemented successfully across health education and care. A few short years ago, these were developed and only available at the Toronto Rehabilitation Institute (University Health Network - UHN). Now University of Toronto students, as well as those from other universities and colleges across Toronto, Ontario and Canada, benefit from these live, practice-based experiences in our local hospitals and many other clinical settings. In fact, a number of North American universities credited the Centre for IPE at this year's international Collaborating Across Borders IV conference in Vancouver and at the Institute of Medicine's Global Forum for Innovation in Health Professional Education for providing the innovative curriculum frameworks and practice-learning models that underpin their IPE/IPC programs. As our IPE curriculum grows, we are successfully engaging patients and clients in shaping new learning activities, in sharing their experiences with students as their teachers and mentors, and in helping students redefine professionalism, ethics and safety through chronic illness. At the professional development level, demand for our certificate and customized courses has grown tremendously and we have doubled our graduates to almost 1000 in the past two years. We have supported many academic organizations, such as the University of Minnesota and Indiana University, who have gone on to be exemplars and centres of excellence

within their own contexts. Based in large part on our local and national strengths in IPE, the University of Toronto, along with four other Canadian universities, created the Canadian Interprofessional Health Leadership Collaborative, which was designated an international innovation collaborative by the U.S. Institute of Medicine in 2012. And we are now a permanent and sustainable Centre based on the generous philanthropic support of the Kalmar family who enabled our beautiful new space at Toronto Western Hospital, and the leadership of the Council of Health Sciences (University of Toronto) and UHN who govern and fund our Centre.

The early investments of our provincial government were wise and necessary to begin our work in IPE and IPC. As we take the next step in our journey as a Centre, we recognize the importance of sustaining and scaling our successes, while continuing to focus on impact. As a broader IPE/IPC community, we will need to build the theory linking IPE and IPC before we can be confident that we've picked the 'right' metrics. There is indeed a strategic need to build on the evidence linking IPE and IPC, while noting that this isn't a linear relationship within complex,

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adaptive systems such as healthcare. We will need to be clear on how we define impact and then engage multiple voices in determining it — students, faculty, patients, clients, clinicians, funders, policymakers and leaders. We look forward to this challenge and to collaborating with our many partners on these issues.

As we celebrate our fourth birthday, I'd like to acknowledge our amazing team at the Centre for IPE – Belinda, Dante, Dean, Kathryn, Lynne, Mandy, Rachel, Rebecca, and Sylvia — for their collective leadership, personal support and unbridled passion for this work. A special note of thanks to previous team members, Susan Wagner, our first Faculty Lead, Curriculum, who shepherded the IPE Curriculum for five years and for whom our newest award for student leadership is named; Scott Reeves, our Research Advisor, who has gone on to lead the University of California at San Francisco's Centre for Innovation in IPE; as well as Caitlin Brandon, Education Coordinator and Clare Schlesinger, Administrative Assistant. Beyond our Centre team, a warm thanks to all of our leaders, faculty, students, clinicians, patients, clients and many other partners who have contributed to all that follows in these pages. We have come this far together and we have many more exciting steps ahead!

# CENTRE FOR INTERPROFESSIONAL EDUCATION GRAND OPENING



On November 29, 2011, the Toronto General and Western Hospital Foundation was proud to host a celebration of the opening of the George and Andrea Kalmar Centre for Interprofessional Education. The event paid tribute to the ongoing support of George and Andrea Kalmar in the planning, renovation and completion of the ground-breaking new space.

As a cornerstone of the Interprofessional Education Program at the University Health Network, the new 2,000 square foot Kalmar Centre (home of the University of Toronto, Centre for IPE) brings together experts in healthcare and education to investigate best practices in IPE, driving system-wide change to make interprofessional care a reality.

Over the course of the evening's celebration, Tennys Hanson, President, Toronto General and Western Foundation welcomed the Kalmars to the Partners for Discovery — a group of donors who have made cumulative gifts and/or pledges of \$1 million or more. A storyboard was also unveiled celebrating the Kalmar family's wonderful philanthropy, and is now located in the Centre's front lobby.





# REMEMBERING GEORGE KALMAR



George and Andrea Kalmar are committed to advancing healthcare, and have been strong supporters of the University Health Network (UHN) since 2009.

The Kalmar Family believes in assisting programs that have made a difference in their lives, and will make a real difference for others — in Canada and around the world.

In 2010, George and Andrea Kalmar made

an incredible gift towards interprofessional education — a gift that enabled the building of the George and Andrea Kalmar Centre for Interprofessional Education.

Home to the University of Toronto's Centre for Interprofessional Education (IPE), the Centre is a strategic partnership between the University of Toronto and UHN.

Sadly, Mr. Kalmar passed away in 2012. It is with fondness and appreciation that we remember him, and extend our thoughts and prayers to Andrea and the Kalmar family.



# MEET OUR TEAM

The University of Toronto Centre for Interprofessional Education (IPE) began as a partnership between the University of Toronto and the Toronto Academic Health Sciences Network (TAHSN), with the University Health Network (UHN) and the Toronto Rehabilitation Institute (now part of UHN) 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.



Back Row: Rebecca Singer, Sylvia Langlois, Rachel Dyers, Lynne Sinclair, Mandy Lowe Front Row: Kathyrn Parker, Maria Tassone, Belinda Vilhena, Dean Lising Absent: Dante Morra



**Maria Tassone**Centre Director



**Mandy Lowe** Associate Director



**Dante Morra**Associate Director



**Belinda Vilhena** Manager



**Lynne Sinclair** Innovative Program and External Development Lead



**Kathryn Parker** Evaluation Advisor



**Sylvia Langlois**Faculty Lead, Curriculum



**Dean Lising**Curriculum Associate



**Rebecca Singer**Education Coordinator



Rachel Dyers Administrative Assistant

# CURRICULUM INTEGRATION and expansion

Our focus on Curriculum Integration and Expansion as a strategic priority has been critical to the successful and full scale implementation of the University of Toronto's Interprofessional Education (IPE) Curriculum/Program.

At the beginning of every year, we welcome over 1200 students from eleven Health Science Programs - Dentistry, Kinesiology and Physical Education, Medical Radiation Sciences, Medicine, Nursing, Occupational Science and Occupational Therapy, Pharmacy, Physical Therapy, Physician Assistant, Social Work and Speech-Language Pathology. With the addition of Medical Radiation Sciences in 2011, nine of these eleven individual programs have made the IPE Curriculum requisite for their students. Interprofessional education is a worldwide initiative aiming to increase the standards of patient/client care, health provider satisfaction and to foster the highest quality of collaborative practice. The skills that students learn as part of this curriculum will enable them to be collaborative practice-ready healthcare professionals who will be more prepared to respond to health needs. In recognition of this accomplishment, students receive a letter of completion that can be incorporated into their portfolios upon successful completion of the IPE Curriculum requirements. This competency-based curriculum consists of four core learning activities:

# I) TEAMWORK: YOUR FUTURE IN HEALTHCARE

This introductory learning activity powerfully brings together the entire incoming cohort of first year health science students in beautiful Convocation Hall at the University of Toronto, the historical campus building where they will be graduating. As a part of the session, faculty members demonstrate different ways in which healthcare teams can deliver care. Students also hear the account of a patient/client's journey through the healthcare system, giving them the opportunity to reflect on the healthcare profession they have chosen, as well as how they can be vital members of an interprofessional team.

## 2) CONFLICT IN INTERPROFESSIONAL LIFE

This learning activity targets health profession students in a more advanced level of collaboration. It has been designed to reinforce that conflict is a natural part of working life, and that individuals have a professional responsibility to handle it effectively. Students begin this session with a didactic component, exploring types of conflicts, sources of conflict and strategies for dealing with conflict. Students then review a simulated interprofessional dispute and break into teams where they work with facilitators to address the demonstrated conflict. They have an opportunity for reflection on the activity, discussion of personal experiences with conflict and debriefing.

# 3) CASE-BASED LEARNING ACTIVITY

Interprofessional teams of students learn about interprofessional collaboration in a pain and/or palliative care case. The complexity of the cases allows for interprofessional team discussion with the inclusion of diverse clinical roles, scopes of practices, and themes. Teams contribute through simulated meetings, assessments and management plans.

# 4) IPE COMPONENT IN A CLINICAL PLACEMENT

This learning activity is built into existing clinical placements at one or more practice sites, and focuses on professional competence. This is key to delivering the interprofessional curriculum into a collaborative care setting where the students see actual patients/clients and team members. The IPE component in a clinical placement can be delivered in a structured or flexible model to be completed over the course of the student's educational program with our many clinical partners.

#### **IPE Curriculum Team**

Faculty Lead, Curriculum: Susan J. Wagner 2011 – 2012; Sylvia Langlois – present

Curriculum Associate: Sylvia Langlois 2011 – 2012; Dean Lising - present

Education Coordinator: Caitlin Brandon 2011 – 2012; Rebecca Singer – present

Administrative Assistant: Clare Schlesinger 2011 – 2012, Rachel Dyers – present

Guided through the leadership of the Centre's Faculty Lead, Curriculum, the IPE Curriculum has seen major developments in the past two years. In collaboration with the Curriculum Team, as well as the Interfaculty Curriculum Committee (IFCC), the IPE curriculum has been elevated to a more sophisticated experience for students. With the continuous creation of new, innovative learning activities, as well as the increased quality of existing learning activities, students have the opportunity to learn about, from and with one another through multiple forums, including online activities, blended learning activities and face-to-face sessions.

As a complement to the four core learning activities, each program determines the number of elective learning activities students are required to complete the IPE Curriculum. Students select from a broad scope of over 110 electives that cover a diverse spectrum of health populations, conditions and themes. Electives are also delivered to meet a breadth of learning preferences and opportunities, including interactive sessions, simulations, hearing patient/client/family stories, clinical team-led cases and discussion, student team-based activities, community clinic engagement, as well as facilitated online and blended learning activities.

# STUDENT JOURNEY THROUGHTHE UNIVERSITY OFTORONTO'S IPE CURRICULUM

Students from eleven Health Science Programs - Dentistry, Kinesiology and Physical Education, Medical Radiation Sciences, Medicine, Nursing, Occupational Science and Occupational Therapy, Pharmacy, Physical Therapy, Physician Assistant, Social Work and Speech-Language Pathology participate in the IPE Curriculum. As they progress in their education, they develop both uni-professional and interprofessional values and competencies to prepare them for future practice. In the IPE Curriculum, students advance through the developmental levels - Exposure, Immersion and Competence (See Appendix for the UofT IPE Competency Framework) with competencies identified in the Values and Ethics, Communication and Collaboration constructs. Students complete requisite learning activities as well as a variety of electives at each developmental level.

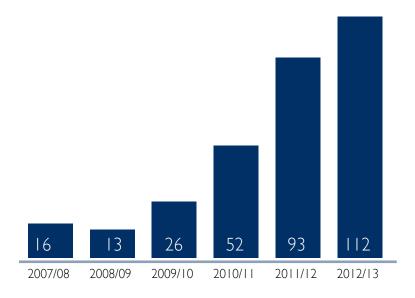
See Appendix for a visual representation of a student's journey through the IPE Curriculum.

# **CURRICULUM PARTNERSHIPS:**

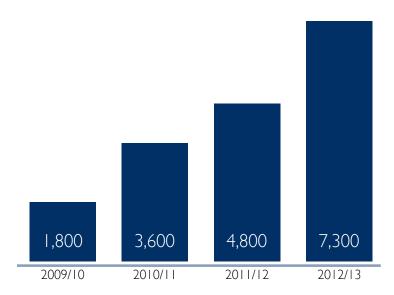
## BUILDING BRIDGES ACROSS THE SYSTEM

The development, implementation and evaluation of an IPE Curriculum as extensive as the University of Toronto's can only be accomplished with the support and involvement of key partners. Students, clinical teams, recipients of healthcare services, our community and faculty all play significant roles in preparing, and delivering an integrated curriculum. The graphs below indicate the expansion of elective learning activities, the number of spaces available across IPE electives and the number of electives led by Toronto hospitals. Our focus on curriculum expansion over the last two years has led to a doubling of electives and a five-fold increase in the number of electives developed within the practice setting.

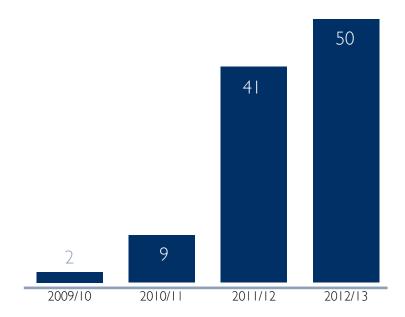
#### NUMBER OF ELECTIVES OFFERED ANNUALLY WITHIN IPE CURRICULUM



#### AVAILABLE SPACES ACROSS ELECTIVES



#### NUMBER OF IPE ELECTIVES LED BY TORONTO HOSPITALS



# STUDENTS: EMBRACING STUDENT LEADERSHIP AND ENGAGEMENT

Many of our curriculum successes have been the result of continuous engagement and collaboration with our students, and in particular, the University of Toronto's Interprofessional Healthcare Students' Association (IPHSA), a group of health science and other health program students interested in the development of interprofessional education and practice. The Centre for IPE is committed to integrating student recommendations, suggestions and offering opportunities for student leadership in elective and core learning activities.

IPHSA connects and represents students from eleven healthcare professional programs across the University of Toronto, as well as the Canadian College of Naturopathic Medicine and the Canadian Memorial Chiropractic College. IPHSA's mandate is to create an engaging and educational environment in which all health profession students have the opportunity to interact and learn about, from and with one another, in both formal and informal settings.

Over the past two years, IPHSA has achieved significant growth in its activities, and its partnership with the Centre for IPE. Positive experiences and relationships led to the inclusion of student representatives on IPE Working Groups, as well as membership with voting privileges on the governing committee for the IPE Curriculum, the Interfaculty Curriculum Committee (IFCC). These roles have truly allowed IPHSA to ensure curriculum development is created with student input at the forefront of decision-making and to ensure the curriculum is relevant, useful and well received by its intended audience. IPHSA also conducts a student survey to solicit students' satisfaction with the IPE curriculum and to identify opportunities for improvement.

In 2012 - 2013, IPHSA established Education and Outreach working groups involving IPHSA members and other interested students. These were led by VP Education, Navjot Rai and VP Outreach, Rachel Lee respectively. This year, IPHSA delivered the third iteration of the IPHSA Orientation, a very well received IPE elective learning activity. In addition, IPHSA organized an interprofessional student shadowing pilot project where students from the Canadian College of Naturopathic Medicine and the Faculty of Medicine were paired together. During this activity, students from the Canadian College of Naturopathic Medicine and the Faculty of Medicine were paired together. Each had the opportunity to shadow and attend lectures with one another, as well as experience a day in the life of the other's profession. IPHSA also established relationships with secondary schools in Toronto and made plans to deliver an interprofessional health careers fair. The objectives of this career fair are to raise high school students' awareness and appreciation of different healthcare professions as they begin to think about university programs and career paths in healthcare.

"Alone we can do so little; together we can do so much." — Helen Keller

# **HEALTHCARE RECIPIENTS:** THE POWER

# OF THE PATIENT/CLIENT STORY

Students in the eleven health science programs at the University of Toronto are educated to provide patient/client-centered care and to empower patients/clients in their care. An innovative way of linking interprofessional studies with real life patient/client experiences is to empower recipients of our healthcare services to participate in the direct education of students.

#### HEALTH MENTOR PROGRAM

The Health Mentor Program, adapted by Sylvia Langlois, Faculty Lead, Curriculum, from a unique program developed by Thomas Jefferson University, Philadelphia, matches interprofessional teams of first year students with an individual who is experiencing chronic health challenges. These individuals have an important story to tell; their experience of the healthcare system and team-based care, create a powerful impact and shapes how students will practice in the future.

There are now more than thirty individuals (Health Mentors) who are committed to working with students to discuss the impact of their health challenges, ethics, professionalism and patient/client safety over three modules. These health mentors have chronic health challenges including multiple sclerosis, stroke, chronic fatigue and pain, HIV and AIDS, among others. The number of Health Mentors is growing steadily as individuals in our community realize the potential role they can play in transforming healthcare.

Health Mentor Program



Dean Lising, Curriculum Associate; Sylvia Langlois, Faculty Lead, Curriculum; Christine Decelles, Health Mentor; Emma Scammell, Student; Jennifer Ladrillo, Health Mentor; Dave Skitch, Health Mentor; Janet Rodriguez, Health Mentor; Chrystal Gomes, Health Mentor; Zal Press, Health Mentor; Rebecca Singer, Education Coordinator; Tim Giblin, Health Mentor; at the Health Mentor Recognition Event.



"The Health Mentor Program was a valuable experience. Students learned to teambuild with other aspiring healthcare practitioners. The Health Mentor Program was also a valuable experience in understanding the patient's/client's experience through their eyes. It gave students a chance to speak directly to the case studies that are often discussed in class by giving a more human and empathetic perspective. Students were able to see the vulnerability and courage of patients who suffer from chronic illnesses. Students were also able to see the value of other healthcare professionals in patient care." — Student

#### EMPOWERING PATIENT/CLIENTS

The HIV Community elective is the first activity involving a patient/client as a full partner in the planning and implementation process. Although we design healthcare services for patients/clients, we often do not fully engage them in the design of curriculum. This was an excellent experience where the planning committee integrated and blended personal narrative, values and experiences with literature and best practices to help students develop an understanding of how important it is for healthcare professionals to develop skills in facilitating empowerment of patients/clients.



"The most important information I learned during this session was the definition of empowerment in depth and how important it was for this individual, or any patient/client with a similar situation." — Student

Student Responses to "What Does Empowerment Mean to You?"



Students discussed the meaning of patient/client empowerment, their role in empowering individuals, as well as the changes in their perspective following the elective. The word cloud above illustrates words representing student understanding of empowerment.



"...having a patient be part of the elective creation process served not only as a great reminder of the importance of interprofessional collaboration in the care of patients but also as a reminder of the bigger picture – that we as future healthcare providers are all striving to provide the best patient-centred care. ... It allows students to transcend the barriers imposed by their professional scopes and all engage in discussions that relate to patient-centred care – a core competency and goal of any healthcare profession curriculum." — Student



Empowerment Working Group

Empowerment Working Group: Sylvia Langlois, Faculty Lead, Curriculum; Joanne Louis, Nursing; Harlon Davey, Patient/Client Member.

Absent: Sharon Gabison, Physical Therapy; and Eileen McKee, Social Work.



"I am enjoying the spirit of collaboration that I've witnessed amongst the different types of healthcare providers. It's also very empowering to feel that by sharing my experiences and my values that I can have an impact on healthcare. I am enjoying the feeling I have of being meaningfully engaged in a process of learning to do things differently and better."

— Patient/Client Member

## **CLINICAL TEAMS/FACULTY:**

# INNOVATION THROUGH COLLABORATION

Clinical teams and faculty are invaluable in providing current, realistic and authentic interprofessional learning experiences. Many teams have provided ongoing, consistent contributions to the IPE Curriculum. Examples of new team collaborations and resulting learning electives from the last two years are:

# MINIMIZING RISK BY MAXIMIZING TEAM COLLABORATION



Lorna Bain, Occupational
Therapy & Interprofessional
Education and Collaboration
Coordinator; and
Zaev Wulffhart, Chief of
Cardiology and Medical
Director of the Heart Rhythm
Programme

Lorna Bain, Occupational Therapist and Zaev Wulffhart, MD from Southlake Regional Health Centre created a compelling two-part learning activity, *Minimizing Risk by Maximizing Team Collaboration*. In this learning activity, students develop an understanding of the management of risk in the aeronautical industry, the impact of human factors, and how this information can be applied to healthcare. They also learn about risk management and team interactions. Students then have the rare opportunity to walk through an adverse incident investigation. Here, they begin to understand the contribution of people, hospitals, regulatory organizations and system factors to the risk model. The importance of minimizing risk and improving quality care by collaborating as a team is clearly articulated.



"The presentation will benefit me in future practice as I will be able to adapt to the new healthcare culture where all members of the health team can vocalize their concerns for better patient care/safety." — Student



"The small group discussion did a fantastic job at reinforcing the importance of not only collaboration, but constant verbal collaboration that focuses on advocating to the best of your professional ability for each client/patient." — Student

#### **EATING DISORDERS**

Eight team members of the University Health Network's (UHN) Eating Disorders Program recently prepared a very popular interprofessional case-based discussion for students. Due to popular demand, they graciously offered to repeat the learning activity to accommodate the one hundred students on the waitlist who were hoping to attend the first session. In this interesting elective, students work through three case scenarios addressing how the team members interacted and collaborated to provide optimal services to their patients/clients.

All clinical team partnerships are critical to a successful IPE curriculum. The University of Toronto is extremely appreciative of all contributions and partnerships, as they are important in the development of collaborative skills of future healthcare practitioners.

Eating Disorders Team



Eating Disorders Team: (Top row) Michal Goldreich, Occupational Therapy; Kalam Sutandar, Psychiatrist; Kelli Young, Occupational Therapy; (Bottom row) Alma Naddafi, Nurse Practitioner; Erin Rudolph, Registered Dietitian; and Keith Thurlow-Bishop, Psychotherapist. Absent: Gina Dimitropoulos, Social Work and Holly Dickinson, Registered Dietician.



"The group discussions provided me with a better awareness of the roles of different health professions in treating clients with eating disorders." - Student

# ACADEMIC FACULTY: ENDLESS PARTNERSHIPS

Enthusiastic faculty members from all health science programs regularly contribute to the development of core and elective learning activities.

Many faculty members also contribute in various groups working on the development and implementation of elective learning activities.

#### HEALTH AND WELLNESS

A new working group, Health and Wellness, chaired by Susan J. Wagner, Speech - Language Pathology and initiated by the Faculty of Kinesiology and Physical Education, piloted and hosted a session this year, in which students learned about notions of wellness, social determinants of wellness, health and health literacy. This dynamic session offers a variety of activities with an aim to achieve maximum engagement by utilizing an immersive learning experience. Students engage in mindful, physical, dialogic, creative and critical interaction.

Experiential and interactive pedagogies deployed in this session have fostered interprofessional understandings of personal and social determinants of health and wellness among students and working members alike.

# Health and Wellness Working Group



Health and Wellness Working Group: Susan J. Wagner, Chair, Speech-Language Pathology; Geraldine MacDonald, Nursing; Barry Trentham, Occupational Science and Occupational Therapy; Margaret MacNeill; Kinesiology and Physical Education; Susan Lee, Kinesiology and Physical Education.

Absent: Michele Chaban, Social Work; Robyn Davies, Physical Therapy; Lynda Mainwaring, Kinesiology and Physical Education; Katrina Mulherin, Pharmacy

#### **CHAIRS FOR CORE LEARNING ACTIVITIES**

Teamwork: Your Future in Healthcare Chair, Marc Potvin, Medical Radiation Sciences and Co-Chair Andrea Cameron, Pharmacy (2011–2012)

#### Pain Curriculum

Chair Robin Davies, Physical Therapy

#### Palliative Care

Chair Jeff Myers, OISE (2011–2012) and Sylvia Langlois, Occupational Science and Occupational Therapy (2012–2013)

#### Conflict in Interprofessional Life

Chair Susan J. Wagner, Speech-Language Pathology (2011–2012) and Sylvia Langlois, Occupational Science and Occupational Therapy (2012–2013)

#### DYING AND DEATH

The Dying and Death working group chaired by Rev. Jeffrey Brown, Multi-Faith Centre for Spiritual Study and Practice (2011 – 2012) and Sylvia Langlois, Occupational Science and Occupational Therapy (2012 – 2013), is responsible for the continuous development of the Dying and Death elective learning activity. This popular learning activity offers students the opportunity to experience various professions involved in end of life care. During this session, students and facilitators share a meal together, and hear about physical, psychosocial and spiritual considerations in dying and death. Students then participate in facilitated interprofessional team discussions regarding a relevant case.

Dying and Death Working Group



Sylvia Langlois, Chair, Faculty Lead, Curriculum; Brian Walsh, Spiritual Care Provider and presenter; Michele Chaban, Applied Mindfulness Meditation Program and presenter; Rev. Jeffrey Brown, Multi-Faith Centre for Spiritual Study and Practice; Doris Leung, Nursing.

Absent: Laurie Coleman, Social Work; Marco Mascarin, Applied Mindfulness Program; Richard Chambers, Multi-Faith Centre for Spiritual Study and Practice; Aisha Sheikh, Radiation Oncology; Vinita Arora, Pharmacy, Susan J. Wagner, Speech-Language Pathology.

A special thanks to all those who contribute to making the Interprofessional Education Curriculum at the University of Toronto a success.

# PROFESSIONAL DEVELOPMENT

Our second strategic direction continued to focus on interprofessional education and interprofessional care (IPE/IPC) capacity building through **Professional Development** for our local, provincial, national and international communities. Over the past two years, there has been a high demand for our established certificate programs, customized workshops and courses, as well as increasing requests for site visits and onsite consultations. In large part, this is a result of the unique role the Centre for IPE plays as an international exemplar of success and sustainability at the education-practice interface. Organizations who are just starting on their IPE/IPC journey and those with growing programs continue to look to the Centre for IPE for its innovative approach to capacity building.

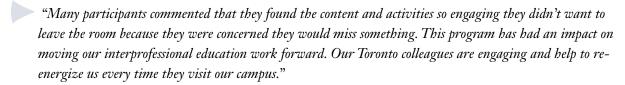
## **CORE PROGRAMS**



We continue to build on the success of our core professional development programs, ehpic™ (Educating Health Professionals in Interprofessional Care) and Collaborative Change Leadership (CCL).

ehpic™:Advancing the Future of Healthcare Through Interprofessional Learning — A Five-Day Certificate Course for Health Professionals, Educators and Leaders

Entering its ninth year, ehpic™ continues to be hosted annually in Toronto each June with participants drawn from both academic and practice organizations in Ontario, across Canada and beyond. Since the development of ehpic™ in 2004 (funded through a CanMEDS research and development grant from the Royal College of Physicians and Surgeons of Canada and the result of original work by Ivy Oandasan and colleagues), this week–long 39–hour accredited certificate course continues to be highly anticipated and well attended. The course is designed to equip leaders with the knowledge, skills and attitudes to teach learners and fellow colleagues the art and science of working collaboratively for patient–centred care. The course continues to evolve and new faculty and content contribute to the continued growth and success of ehpic™. A special thanks to Mandy Lowe for her leadership of the course as ehpic™ Director over the last few years.



— Barbara Brandt, Associate Vice President for Education in the University of Minnesota's Academic Health Center & Director, National Center for Interprofessional Practice and Education



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Lynne Sinclair\*

Patti McGillicuddy

Maria Tassone

Azi Moaveni\* Belinda Vilhena (Program Administrator)

Ivy Oandasan\* Susan J. Wagner

Kathryn Parker

## ehpic™ Around the Globe

With increasing need to build capacity for IPE and IPC locally, nationally and globally, the Centre has also seen growth in the demand for ehpic<sup>™</sup>. The Centre continues to partner with clinical and academic organizations to create customized and locally contextualized versions of ehpic<sup>™</sup> that are tailored to address the needs of organizations and systems in three-day versions. Since July 2011, the customized three-day ehpic<sup>™</sup> course has been offered on-site at the Winnipeg Regional Health Authority; the University at Buffalo; Indiana University; and the University of Minnesota which has since been selected by The Health Resources and Services Administration (HRSA) to be the National Coordinating Centre for Interprofessional Education and Collaborative Practice in the United States.

Following are stories that highlight the impact of ehpic™ from local, national, and international partners.

#### St. Michael's Hospital, Toronto: Student Cafe

In June of 2010, St. Michael's Hospital sent an interprofessional team to the ehpic™ course. The team was comprised of Spring Crabbe, Medical Radiation Technologist (R), Colette Deveau, Social Work, Pam Greco, Respiratory Therapist, and Peter Thompson, Chaplain. The goal was for the team to develop a new interprofessional education offering for students and to evolve their own interprofessional care competencies. Through ehpic<sup>™</sup>, they developed an appreciation for one another's unique styles, perspectives and values, creating the foundation for this collaborative team. Finding common ground, while learning about, from, and with one another, was the breakthrough moment they were looking for and the result was the creation of St. Michael's Hospital Student Café.

The goal of the Café is to provide an interprofessional safe environment that encourages reflective learning, self-assessment, understanding and sharing of personal perspectives on a variety of sensitive healthcare themes. With support from Ellen Newbold, IPE Lead at St. Michael's Hospital and the Centre for IPE, the team developed strategies for the sessions that would help students reflect on and share their clinical experiences in a facilitated, safe IPE environment. Students in the Café engage in facilitated discussion of common themes, share their experiences and explore their reactions. The Café team is committed to raising sensitive subjects and to continuous improvement of the sessions, by ensuring that activities and student feedback are reviewed and assessed on an ongoing basis.

The Student Café continues to grow as an approved IPE Curriculum Red Elective Learning available monthly for all students at St. Michael's with rising student numbers and positive student outcomes. The Café has been recently recognized by the Michener Institute Award for Clinical Interprofessional Collaboration and Education and the Centre for IPE Team Award of Merit for Excellence in Interprofessional Teaching.

 Dean Lising, Curriculum Associate, Centre for IPE & Beverly Bulmer, Director Health Disciplines Practice and Education, St. Michael's Hospital



## Winnipeg Regional Health Authority: Let's Collaborate

Based on the Winnipeg Regional Health Authority's (WRHA) relationships with the University of Manitoba and the University of Toronto, a dynamic five-day conference provided a select group of health professionals with the opportunity to gain further understanding about collaborative care guiding principles and the concepts of LEAN. Forty-seven people participated from October 22 − 26, 2012. The University of Toronto (UofT) facilitated the first three days, which focused on ehpic<sup>™</sup>. It provided engaging and integral information to help health professionals, educators and leaders further their understanding of Collaborative Care. The University of Toronto's experience and style of presentation was instrumental in setting the foundation for the weeks learning's which focused on advancing the future of healthcare through interprofessional learning.



"The facilitators are very welcoming and help to engage discussion", "Great presenters/great speakers and engaging the participants; found activities enjoyable and helpful to the learning process", "Your (UofT) enthusiasm is inspiring!"

The WRHA complemented this course with regional experts presenting on social identity, LEAN management process, and change management. Time was then devoted to addressing issues around sustaining work in collaborative practice such as creation of a community of practice, leadership and participant support, and the development of resources and knowledge translation. By the end of the week, participants had gained the capacity to be a resource, to mentor and educate their teams. These professionals are motivated to take the concepts learned and put them into practice. Participants commented that they hoped to continue the exciting momentum that comes with a deeper understanding of Collaborative Care principles. Based on the UofT performance and participant evaluations we will continue to partner with UofT as we build our Region's knowledge and capacity in Collaborative Care. A second cohort will participate in ehpic™ in February 2014.

— Carol Deckert, Chronic Disease Specialist, Winnipeg Regional Health Authority



# University of Southern California Interprofessional Education Collaborative Conducts a Successful IPE Workshop

As a result of attending ehpic<sup>™</sup> in June of 2012, the University of Southern California Interprofessional Education (IPE) Collaborative held its first faculty development workshop in October 2012 that focused on how to more effectively utilize interprofessional teamwork and principles within their departments. Faculty leaders, including Deans from the schools of Occupational Therapy, Physical Therapy, Medicine, Physician Assistant Studies, Dentistry and Social Work, were in attendance.

There was an overwhelmingly positive response from those who attended and many reported that they were able to immediately implement the principles that they learned from the workshop. Among the success stories are the following: The Interprofessional Geriatric Curriculum Director immediately changed the residency evaluation forms to include the development of team ground rules and a reflective exercise. The Associate Chair of the Division of Physical Therapy described the workshop as an "epiphany" to change the current faculty focus from client intervention to building interprofessional facilitation skills.

A couple of student leaders of the Interprofessional Student Run Clinic attended and reported that they walked away realizing that although their leadership considered themselves a team, they weren't experiencing teamwork. They implemented one of the team-building exercises in their leaders' meeting and the results were amazing. The Collaborative is now planning a second IPE training workshop in Spring 2013.

— Christopher Forest, Director of Research & Assistant Professor of Clinical Family Medicine, Keck School of Medicine of the University of Southern California

# ehpic<sup>™</sup> Three-Day Course at Indiana University (IUPUI)



Graduates and Faculty at Indiana University engaged forty-two participants in a three-day modified version of the successful five-day ehpic<sup>™</sup> (educating health professionals for interprofessional care) course held in June in Toronto each year. Course participants included IUPUI faculty and staff from many programs including medicine, nursing, dentistry, pharmacy, health and rehab sciences, social work, and optometry. 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."

At Indiana University, we hosted the ehpic<sup>™</sup> Conference in April 2012. This conference, from the course content to the expert facilitators, is simply a 'must do' for any University or Health System that is invested in furthering their development in the area of Interprofessional Education and Collaborative Practice. The Centre for Interprofessional Education at the University of Toronto offers external content expertise, an impressive bibliography of IPE scholarship, and facilitators that are energetic, professional, and up to date. We were most impressed by the willingness of the ehpic<sup>TM</sup> course facilitators to truly 'customize' the course for the needs of the host organization. As an example, we had specific goals for faculty development that we wanted the ehpic<sup>™</sup> facilitators to address and they did not disappoint! At the conclusion of each day of the course, the facilitators met with our planning team to make real-time adjustments to the next day's course content and events. We can say with confidence, that the ehpic<sup>TM</sup> course was a catalyst for positive change at our institution and was integral to the formation of our recently created Center for Interprofessional Education and Practice. If you are a host organization considering the ehpic<sup>™</sup> course do not hesitate to bring their team to you. They are worth the investment and you will not be disappointed."

— Lee Wilbur, Associate Professor of Clinical Emergency Medicine & Assistant Residency Director, Indiana University

#### COLLABORATIVE CHANGE LEADERSHIP

In partnership with the University Health Network, the Centre for IPE hosted the second iteration of the Collaborative Change Leadership (CCL) program. Initially funded in 2009 through a grant from HealthForceOntario's Interprofessional Care and Education Fund and led by Maria Tassone, CCL was 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 healthcare. Although many leadership training programs exist, no other one focuses comprehensively on the future leadership needs of our health education and healthcare systems.

CCL continued to emphasize context–specific approaches that utilize principles of appreciative, emergent change and complexity related to the participants' professional needs. Through this learning experience, participants deepened their practice of collaboration as they led collaborative change.

#### **CCL Program Core Faculty**

Paula Burns Cate Creede Kathryn Parker Jill Shaver Maria Tassone

Belinda Vilhena Program Administrator

#### Program Overview:

- Session 1 Discovering What Is exploring change theories and practices; setting up a capstone project; and organizational inquiry.
- Session 2 Imagining the Possibilities interpreting organizational inquiry results; deepening knowledge of emergent change and meaning making; begin designing change strategies and evaluation.
- Session 3 Designing and Implementing navigating the tension between implementing a change plan and sensing system needs and adapting accordingly; leading meaning-making processes.
- Session 4 Sensing, Evaluating and Adapting assessing movement, reflection and adapting strategies based on what is emerging as meaningful in the organization.
- Session 5 Accomplishments, Reflection and Adaptation presenting work and celebrating each other; assessing movement, reflecting on and adapting strategies based on what is emerging as meaningful in the organization and the system.

We look forward to hosting a third cohort of the CCL program in 2014.



Capturing an emerging conceptualization of Value of the Collaborative Change Leadership Program from 2012 – 2013 Program Participants

"The Program provided us with conceptual understanding and practical application – use this knowledge to really be strong change agents — leaving the comfort and confines of teams we know well, have worked with for a long time — really having the opportunity to really knock this out of the park — principles, posing questions — really make a big difference in a large place."

#### — CCL Participant

"Value of the program/work we're doing – for the organization, for the system — value will be seen in the outcomes — what we're doing is an initiative that's really about how people think about things — being focused back on caring for patients — caring for each other in the workplace."

#### — CCL Participant

# "Leading Change Collaboratively for Enhanced Interprofessional Practice" Recognized as Leading Practice at HealthAchieve

Each year the Ontario Hospital Association's HealthAchieve Conference in cooperation with Longwoods Publishing, offers the Leading Practices Electronic Display to showcase new thinking and ideas in the delivery, policy, and administration of healthcare.

In 2011, St. Joseph's Care Group, Thunder Bay was the recipient of the Leading Practices Award in the Governance and Integration category for the presentation titled "Leading Change Collaboratively for Enhanced Interprofessional Practice".

The presentation was based on an innovative quality improvement project titled the Collaborative Leadership Initiative (CLI), which was developed and implemented by Michelle Addison and Linda Belcamino. The idea for the project came from their participation in the Collaborative Change Leadership (CCL) program offered by the University Health Network and the Centre for Interprofessional Education – University of Toronto. Time was allotted throughout the CCL program to develop this capstone project and many of the skills and approaches modeled by program instructors, such as Appreciative Inquiry and Emergent Change, were incorporated. In fact these were identified as critical success factors by participants of the Collaborative Leadership Initiative.

The CLI was piloted with three healthcare teams. Healthcare professionals and their managers worked with facilitators to collaboratively lead meaningful and sustainable change to further enhance interprofessional practice (IPP). All teams developed and implemented goals that enhanced IPP while achieving the project objectives to: create sustainable IPP and improve patient-centred care and team function and processes.

— Michelle Addison, Physiotherapist & Professional Practice Leader, Physiotherapy, St. Joseph's Care Group

# COLLABORATIVE PROGRAMS

The Centre for IPE is also building capacity for IPE/IPC teaching and leadership through collaborations with other University departments and centres as a means of responding to emerging community needs in interprofessional facilitation, simulation, quality and patient safety.

The Centre continued a highly successful collaboration with the **Centre for Faculty Development**, **University of Toronto at St. Michael's Hospital**, in delivering the Facilitating Groups in IPE half-day workshop. This workshop started in 2009 and enabled a wide range of participants to learn more about IPE facilitation in preparation for a wide range of interprofessional care and education initiatives and curricula. To date, over 200 attendees have participated.

#### **Synergies Faculty**

Bruce Ballon (Co-Director)
Mandy Lowe (Co-Director)
Dominic Giuliano
Darlene Hubley
Kathryn Parker
Lynne Sinclair

With growing recognition of the importance of simulation as a highly valuable teaching and learning methodology in interprofessional education, the Centre for IPE partnered with **SIM-one (Ontario Simulation Network)** to co-create a new course entitled Synergies: Simulation and Interprofessional Education. This two-day intensive, highly interactive program was successfully piloted in Toronto in the spring of 2013 at Holland Bloorview Kids Rehab. We look forward to hosting this program again in the spring of 2014.

The Centre for IPE was also invited to co-teach with the Institute of Health Policy, Management and Evaluation's

new MSc concentration in Quality Improvement and Patient Safety in partnership with the **University of Toronto's Centre for Patient Safety**. Two workshops were held for the class in the Fall and Winter term to explore both Teamwork and Communication, as well as Interprofessional Education and Simulation for improved Patient Safety and Quality.

Scholarship collaborations evolving from our ehpic<sup>™</sup> courses have also proven to be productive for the Centre for IPE at provincial, national and international conferences. (Please see Research, Scholarship and Innovation section).

## CUSTOMIZED COACHING & PROGRAMS

As the community evolves and grows in capacity for IPE/IPC leadership, we have expanded our coaching and customized courses/workshops. The Centre for IPE offers specialized coaching to graduates of our courses in co-creating, designing, implementing and evaluating local programs in their own organizations. This has continued to build leadership and further local sustainability through "train-the-trainer" sessions and direct coaching.

Examples: St. Michael's Hospital, Ontario Shores Centre for Mental Health Sciences, Royal Victoria Hospital, Southlake Regional Health Centre, Wellington-Dufferin-Guelph Public Health, ErinoakKids Centre for Treatment and Development.

In addition, the Centre has partnered with international IPE/IPC experts, to develop programs for further professional/faculty development and leadership enhancement. The Centre has worked with existing programs and travelled to host customized workshops, consultant sessions and meetings to provide input and teaching support to other leaders.

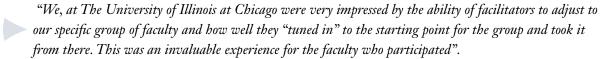
Examples: College of Applied Health Sciences at the University of Illinois at Chicago, Curtin University and Charles Sturt University in Perth Australia, University of the Incarnate Word in San Antonio Texas, Michigan Health Council.



"Feedback from participants at Curtin University in Australia indicates that the decision to collaborate with the University of Toronto was very positive. The program made a substantial impact on participants' knowledge of interprofessional education and practice, evaluation and assessment and change leadership.

Feedback for the facilitators across the two days was outstanding. Qualitative feedback for day one was focused on the enthusiasm and quality of the facilitators. Other aspects of day one were also mentioned, including the opportunity to meet and engage with different professionals, the frameworks provided and the DVD interprofessional scenarios and how they were used. A number of different benefits were frequently mentioned in the qualitative feedback including resources, tools and skills gained that allowed attendees to function as change agents and interprofessional practice advocates."

— Margo Brewer, Director, Interprofessional Practice, Teaching & Learning, Faculty of Health Sciences, Curtin University



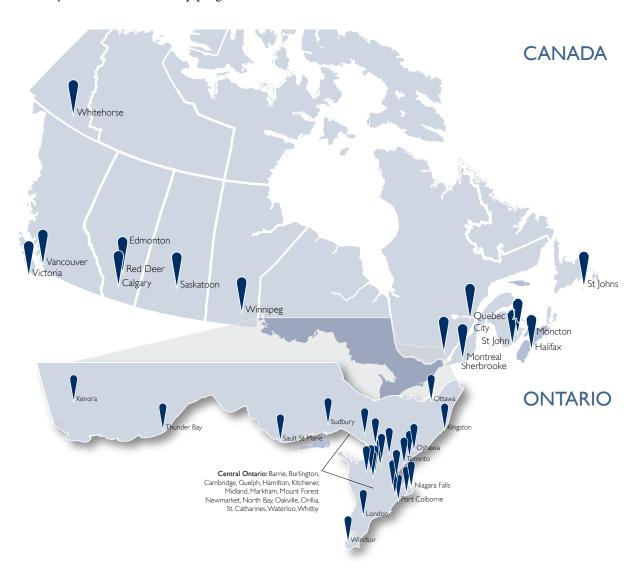
- Mary T. Keehn, Adjunct Clinical Associate Professor of Occupational Therapy, Visiting Associate Dean for Clinical Affairs, College of Applied Health Sciences, University of Illinois at Chicago
- "I thought the faculty training was really well done. It was a good mix between giving background about IPE and helping us to develop skills necessary for the IPE event."
  - Faculty Participant



# SYSTEM ENGAGEMENT, ADVOCACY AND INFLUENCE

## **PARTNERSHIPS**

The Centre for IPE continues to be recognized as a regional, provincial, national and international leader and resource for students, clinicians, academics, leaders and policy makers. The graphics below demonstrates our reach and successful partnerships on 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. Of special note is a new initiative with the Institute of Medicine (see Canadian Interprofessional Health Leadership Collaborative on page 36), and our growing Community of Practice, including recent award winners and a recently-launched membership program.



## **UNITED STATES**



# Manchester Norfolk Bristol London Brighton Athens Optahran Riyaeth Singapore Sendai Nigata Koshigaya Tokyo Brisbane New Castle Sydney Melbourne

# CANADIAN INTERPROFESSIONAL **HEALTH LEADERSHIP COLLABORATIVE**

When the U.S. Institute of Medicine asked global universities to develop new approaches to health education, Sarita Verma (Deputy Dean, Faculty of Medicine and Professor, Department of Family and Community Medicine) and Maria Tassone (Director, Centre for Interprofessional Education; Senior Director, Interprofessional Care & Education, University Health Network and Assistant Professor, Department of Physical Therapy) spotted an opportunity for innovation and the ignition of health professions education reform.

As co-leads of the Canadian Interprofessional Health Leadership Collaborative (CIHLC) they have established, in partnership with four Canadian universities, a world-class structure of teams and projects to develop a global program on collaborative leadership. The project includes the University of Toronto, the University of British Columbia, the Northern Ontario School of Medicine, Queen's University and Université Laval, and was chosen as the only North American innovation collaborative alongside projects from India, Uganda and South Africa. As the CIHLC develops a learner-focused and competency-based educational model through its pan-Canadian approach, it will address the needs of diverse populations across the country. CIHLC's vision is collaborative leadership for health system change to globally transform education and health.

In February 2013, the project received a commitment of \$2.7million over three years from the Ontario Ministry of Health and Long Term Care (MOHLTC), in support of the goals and ideas of the Lancet Commission Report, Health Professionals for a New Century: Transforming Education to Strengthen Health Systems in an Interdependent World.

"Health disparities, the complexity of chronic illnesses and movement towards community-centred care require new ways of delivering care," says Verma. "It's important to focus on collaborative leadership skills to train emerging leaders with the competencies to work in complex and challenging environments."

Tassone adds, "Our project brings together a diverse group of Canadian partners with experience serving indigenous, francophone and inner-city populations. Leveraging our diversity allows us to bring ideas to the table that are transferable around the globe."

## 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 in 2007. The IPE/IPC CoP now meets on a regular basis, to continue the momentum and collective work with IPC in Toronto. The goals of the CoP include:

- To support a time and place on a quarterly basis to continue dialogues and networking about IPE/IPC,
- To share successes, milestones, challenges and resources and,
- To maintain the interprofessional learning exchange

# AWARDS OF MERIT FOR EXCELLENCE IN INTERPROFESSIONAL EDUCATION

The Centre for Interprofessional Education established annual Awards of Merit for Excellence in Interprofessional Education in 2009 to recognize outstanding leaders, educators and students involved in interprofessional education and care.

Maria Tassone announced a new award in 2013 named the *Susan J. Wagner Award for Student Leadership in Interprofessional Education* in honor of Susan's contributions to interprofessional education curricula at the University of Toronto.

# Ivy Oandasan Leadership Award for Outstanding Contributions in Advancing Interprofessional Education

Elizabeth McLaney St. Joseph's Health Centre -Toronto (2012)

# Susan J. Wagner Student Leadership Award in Interprofessional Education

Elisa Simpson - Lawrence S. Bloomberg Faculty of Nursing (2013)

Lisa Wu - Leslie Dan Faculty Of Pharmacy (2013)

# Individual Award of Merit for Excellence in Interprofessional Education Teaching

Darlene Hubley, Holland Bloorview Kids Rehab (2013)

Sheena Bhumji-Hewitt, The Michener Institute (2012)



Maria Tassone and Susan J. Wagner



2012 Award Recipient
Elizabeth McLaney with Ivy Oandasan



2012 Award Recipient Sheena Bhimji-Hewitt with Sylvia Langlois

# Team Award of Merit for Excellence in Interprofessional Teaching

Student Café Team – St. Michael's Hospital (2013) Student Experience Committee – St. Michael's Hospital (2012)

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

Toronto Western Hospital - Krembil Neurosciences IPEC Team (2012)



2012 Award Recipients
Representatives from the St. Michael's
Hospital Student Experience
Committee with Mandy Lowe



2012 Award Recipients
Representatives
from the Toronto Western Hospital
Krembil Neurosciences IPEC Team
with Dante Morra



2013 Award Recipient Lisa Wu



2013 Award Recipient Elisa Simpson



2013 Award Recipient Darlene Hubley

# **MEMBERSHIP**

In recognition of the many contributions of the Centre for IPE community, a new Centre membership program was introduced in 2012.

Levels of membership include General, Research, Educator and Associate.

Membership is free and anyone (e.g., students, healthcare providers, academic faculty, researchers, administrators, etc.) can apply to become a member. The Centre for IPE offers members various benefits, including IPE/IPC scholarly recognition, networking opportunities, bursaries and invitations to special events. The Centre was pleased to support a number of members to attend the Collaborating Across Borders Conference IV in Vancouver, British Columbia this year. For more information about the membership program, please visit the Centre's website at www.ipe.utoronto.ca.

### Current Membership

Michelle Addison, St. Joseph's Care Group-Thunder Bay, Educator

Michal Basch, University Health Network, General

Marion Briggs, Northern Ontratio School of Medicine, General

Carrie Clark, Centre for Addiction and Mental Health, General

Jennifer Clifford, Trillium Health Partners, Educator

Laura D'Alimonte, Sunnybrook Health Sciences Centre, General

Krista Dawdy, Sunnybrook Health Sciences Centre, General

Collette Deveau, St.Michael's Hospital, General

Lisa Di Prospero, Sunnybrook Health Sciences Centre, Research

Miriam Granek, University of Toronto, General

Lisa Harper, Trillium Health Partners, Educator

Denise Hervias, University Health Network, General

Christine Homonylo, College of Physicians & Surgeons Of Ontario, General

Dale Kuehl, Centre for Addiction and Mental Health, Educator

Elizabeth McLaney, St. Joseph's Health Centre, Educator

Karen Moline, Sunnybrook Health Sciences Centre, General

Susan Morris, Centre for Addiction and Mental Health, General

Michelle Nelson, Bridgepoint Health, General

Debbie Rolfe, University of Toronto, General

Daniel Shafran, University of Toronto, Research

Ivan Silver, Centre for Addiction and Mental Health, Associate

Anna Marie Sneath, Providence Healthcare, Educator

Ewa Szumacher, Sunnybrook Health Sciences Centre, Research

# RESEARCH, SCHOLARSHIP AND INNOVATION

# PEER-REVIEWED PUBLICATIONS

The Centre for IPE team and current Centre members within the categories of Researcher, Educator and Associate contributed to the field of IPE and IPC through numerous publications, grants, as well as invited and peer-reviewed presentations.

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. *Journal of Interprofessional Care*. 25(3), 226-227.

Baker L, Egan-Lee E, Martimianakis M, **Reeves, S.** (2011). Relationships of power: Implications for interprofessional education. *Journal of Interprofessional Care*. 25(2), 98-104.

Cheung D, McKellar J, Parsons J, Lowe M, Willems J, Heus L, Reeves, S. (2012). Community re-engagement and interprofessional education: The impact on healthcare providers and persons living with stroke. Topics in Stroke Rehabilitation. 19(1), 63-74.

Dematteo D, **Reeves, S.** (2011). A critical examination of the role of appreciative inquiry within an interprofessional healthcare initiative. *Journal of Interprofessional Care*. 25(3), 203-208.

**Di Prospero L,** Bhimji-Hewitt S. (2011). Learning is in the facilitation: faculty experiences with facilitated teaching – findings from informal discussions. *Journal of Allied Health*. 40(4), e61.

**Di Prospero L**, Bhimji-Hewitt S. (2011). Teaching Collaboration: A Retrospective Look at Incorporating Teamwork into an Interprofessional Curriculum. Journal of Medical Imaging and Radiation Sciences (JMIRS). 42(3), 118-123.

Egan-Lee E, Baker L, Tobin S, Hollenberg E, Dematteo D, Reeves, S. (2011). Neophyte facilitator experiences of interprofessional education: Implications for faculty development. *Journal of Interprofessional Care*. 25(5), 333-338.

Hanna E, Soren B, Telner D, MacNeill H, **Lowe M**, **Reeves**, **S.** (2012). Flying blind: The experience of online interprofessional facilitation. *Journal of Interprofessional Care*. Early Online, 1-7.

Jacobson A, McGuire M, Zorzi R, Lowe M, Oandasan I, Parker K. (2011). The group priority sort: a participatory decision-making tool for healthcare leaders. Healthcare Quarterly. 14(4), 47-53.

Kenaszchuk C, MacMillan K, Van Soeren M, **Reeves**, **S.** (2011). Interprofessional simulated learning: short-term associations between simulation and interprofessional collaboration. BioMed Central Medicine. 9(29), DOI:10.1186/1741-7015-9-29.

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

Lingard L, Vanstone M, Durrant M, Fleming-Carroll B, **Lowe M**, Rashotte J, **Sinclair L**, Tallett S. (2012). Conflicting Messages: Examining the Dynamics of Leadership on Interprofessional Teams. Academic Medicine. 87(12),1762–1767.

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. *Journal of Interprofessional Care*. 25(5), 380-2.

Parker K, Jacobson A, McGuire M, Zorzi R, Oandasan I. (2012). How to Build High-Quality Interprofessional Collaboration and Education in Your Hospital: The IP-COMPASS Tool. Quality Management in Healthcare. 21(3), 160-168.

Reeves, S, Tassone M, Parker K, Wagner SJ, Simmons B. (2012). Interprofessional education: An overview of key developments in the past three decades. Work - Journal of Prevention, Assessment and Rehabilitation. 41(3), 233-245.

Reeves, S, Goldman J, Gilbert J, Tepper J, Silver I, Suter E. (2011). A scoping review to improve conceptual clarity of interprofessional interventions. *Journal of Interprofessional Care*. 25(3), 167-74.

Rosenfield D, Oandasan I, Reeves, S. (2011). Perceptions versus reality: A qualitative study of students' expectations and experiences of interprofessional education. *Medical Education*. 45(5), 471-477.

Rosenfield D, Oandasan I, Reeves, S. (2011). You never forget your first time: A qualitative study examining medical student attitudes towards interprofessional education. Medical Education. 2011, 471-477.

Simmons B, Egan-Lee E, Wagner SJ, Esdaile M, Baker L, Reeves, S. (2011). Assessment of interprofessional learning: The design of an interprofessional objective structured clinical examination (iOSCE) approach. *Journal of* Interprofessional Care. 25(1), 73-74.

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 S. (2011) Evaluating the effectiveness of an interprofessional education faculty development course: the transfer of interprofessional learning to the academic and clinical practice setting. Journal of Interprofessional Care. 25(2), 156-157.

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

Turner A, Zhou R, Tran C, Chin L, Di Prospero L. (2012) Translating Theory to Practice: The Use of Interprofessional Student Research Teams to Model Interprofessional Collaborative Practice: What We Learnt. Journal of Medical Imaging and Radiation Science (JMIRS) e-publication. January 2012.

Van Soeren M, Hurlock-Chorostecki C, **Reeves**, S. (2011). The role of nurse practitioners in hospital settings: implications for interprofessional practice. *Journal of Interprofessional Care*. 25, 245-251.

# **GRANTS**

Verma S, Tassone M, Bainbridge L, Berry S, Careau E, March D, Paterson M. Canadian Interprofessional Health Leadership Collaborative (CIHLC). (2012 – 2015). Ministry of Health and Long-Term Care. \$2,738,400.

Simmons B, Wagner SJ, Reeves, S. (2009 - 2011). Assessment and Evaluation of an Interprofessional Objective Structured Clinical Examination (Matching funds). Medical Council of Canada. \$10,000.

Simmons B, Wagner SJ, Reeves, S. (2009 - 2011). Assessment and evaluation of a pilot interprofessional OSCE (iOSCE). Undergraduate Medical Education Curriculum Renewal Fund, University of Toronto. \$19,141.

Simmons B, Wagner SJ, Reeves, S. (2009 - 2011). The interprofessional OSCE development simulation tool (Part II). Educational development fund, University of Toronto. \$16,827.

Simmons B, Wagner SJ, Reeves, S, Deland M. (2009 - 2012). Resuscitation Competencies in InterProfessional Education (ReCIPE). Neonatal Resuscitation Program Research Grant, Canadian Paediatric Society. \$17,590.

# **INVITED AND PEER-REVIEWED PRESENTATIONS**

Addison M. (June 2013). Leading change collaboratively: Enhancing interprofessional practice and patient-centered care. National Health Leadership Conference. Oral Presentation. Niagara Falls, Ontario

Addison M. (June 2013). Leading change collaboratively – Relevance within and beyond Interprofessional Practice. Collaborating Across Borders IV. Workshop. Vancouver, British Columbia.

Addison M. (October 2012). The Reach of Collaboration - Interprofessional Practice and Beyond. Rendez-Vous 2012: Together and Engaged. Workshop. Thunder Bay, Ontario.

Barker R, Di Prospero L. (October 2011). What's All This Talk about Interprofessional Education? ASRT 2011. Workshop. Miami, Florida.

Beagrie L, Berry S, Burnett D, Foulds B, Hart C, Jacobs S, Jung B, Orchard C, Paterson M, Patrick L, Redpath S, Ross C, Devlin-Cop S, Tassone M, Thibault-Chabot F. (November 2011). Ontario's Colleges and Universities: One Big Interprofessional Sandbox. Collaborating Across Borders III. Oral Presentation. Tucson, Arizona.

Bristow B, Curle E, Gibson L, Das Gupta T, Court A, Eisen A, Di Prospero L. (September 2012). With a Little Help from My Friends: An Interprofessional Approach To Integrating Smoking Cessation Into An Ambulatory Cancer Centre. 2012 International Cancer Education Conference (CPEN). Presentation. Ann Arbor, Michigan.

Careau E, Berry S, Paterson M, Vandijk J, Remtulla K, Bainbridge L, Marsh D, Tassone M, Verma S. (April 2013). Fostering interprofessional learning and practice through the development of collaborative leadership competencies. Canadian Conference on Medical Education. Workshop. Quebec City, Quebec.

Davidson S, Langlois S, Lowe M. (June 2013). Innovative Learning in Geriatric Rehabilitation - Occupational Therapy Perspectives. Canadian Association of Occupational Therapy Conference. Oral Paper Presentation. Victoria, British Columbia.

Di Loreto L, Guidolin A, Wagner SJ, Simmons B. (March 2012). The Canadian Healthcare Team Challenge: A social-demic interprofessional education experience. National Academies of Practice: Successful Interprofessional Practice in a New Healthcare Environment Annual Meeting and Forum. Poster Presentation. Arlington, Virginia.

Di Loreto L, Guidolin A, Wagner SJ, Simmons B. (November 2011). The Canadian Healthcare Team Challenge: A social-demic interprofessional education experience. Collaborating Across Borders III. Poster Presentation. Tucson, Arizona.

Di Prospero L, Zeng L, Zhang L, DasGupta T, Vachon M, Holden L, Jon F, Chow E. (September 2011). Comparison of occupational stress in the rapid response radiotherapy program interprofessional team, the radiation therapists and nurses at the Odette Cancer Centre. Canadian Association of Radiation Oncologists (CARO) 2011. Presentation. Winnipeg, MB, Halifax, NS.

Fitch M, Di Prospero L, McAndrew A. (September 2011). Let's do better: The patient experience at the Odette Cancer Centre - what our patients told us. Canadian Association of Radiation Oncologists (CARO) 2011. Presentation. Halifax, Nova Scotia.

Gold K, Lowe M, McGillicuddy P. (November 2011). From Case-Based to Story-Based: the Use of Narrative Methods in Promoting Interprofessional Reflection and Dialogue. Collaborating Across Borders III. Workshop. Tucson, Arizona.

Grief C, Lowe M, Campbell S. (March 2013). An Interprofessional Education Series in Geriatric Psychiatry and Palliative Care. American Association for Geriatric Psychiatry's 2013 Annual Meeting. Poster Presentation. Los Angeles, California.

Hanna E, Langlois S, Lising D, Wagner S. (June 2013). Riding the tsunami: Meeting the challenge of online IPE. Collaborating Across Borders IV. Poster Presentation. Vancouver, British Columbia.

Hubley D, Langlois S, Sinclair L. (June 2013). Strengthening IPE and IPC through a collaborative approach to website renewal - results of a needs assessment. Collaborating Across Borders IV. Poster Presentation. Vancouver, British Columbia.

Hanna E, MacNeill H, Lowe M, Sinclair L, Hall S, Reeves, S. (November 2011). Building Community in COIL (Collaborative Online Interprofessional Learning): An Examination of Facilitation in Online Synchronous Interprofessional Education. Poster Presentation. Collaborating Across Borders III. Tucson, Arizona.

Hanna E, Bissell M, Lowe M. (November 2011). Clicking Collaboratively: Meeting the challenges of online interprofessional education (IPE) facilitation. Collaborating Across Borders III. Workshop. Tucson, Arizona.

Langlois S, Davidson S, Lowe M. (June 2013). Developing Team-Based Collaboration and Communication Competency in Geriatrics: A Comparison of Face-to-Face and Online Learning. Collaborating Across Borders IV. Paper Presentation. Vancouver, British Columbia.

Langlois S, Gabison S, Davey H, Louis J, McKee E. (June 2013). Engaging patients/clients in the development of interprofessional education (IPE) learning activities: Examples from an HIV program. Collaborating Across Borders IV. Oral Paper Presentation. Vancouver, British Columbia.

Langlois S, Wagner S, Andreoli A, Arora A, Cambly C, Kilmartin C, Power R, Richardson D. (June 2013). The name of the gams is Let Us Not Play House: An innovative interprofessional education simulation. Collaborating Across Borders IV. Oral Paper Presentation. Vancouver, British Columbia.

Langlois S. (May 2013). Interprofessional Education: The Key to Unlocking the Door to Quality. Southlake Regional Health Centre Interprofessional Collaboration Showcase. Newmarket, Ontario.

Langlois S, Davidson S, Lowe M. (May 2013). Innovative Learning in Geriatric Rehabilitation – Occupational Therapy Perspectives. Paper Presentation. Canadian Association of Occupational Therapists (CAOT) Conference. Victoria, British Columbia.

Langlois S. (November 2012). Patient-Centred Education: Examples from a Health Mentor Program. Best Practice in Education Rounds. University of Toronto. Toronto, Ontario.

Langlois S, Davidson S, Lowe M. (October 2012). Developing Team-Based Collaboration and Communication Competency in Geriatrics: A Comparison of Face-to-Face and On-line Learning. All Together Better Health VI. Poster. Kobe, Japan.

Langlois S, Wagner S, Andreoli A, Arora A, Cambly C, Kilmartin C, Power R, Richardson D. (October 2012). The Name of the Game is Let Us Not Play House: An Innovative Interprofessional Education Simulation. All Together Better Health VI. Poster Presentation. Kobe, Japan.

Langlois S. (June 2012). Empowering Clients as Mentors for our Students. Canadian Association of Occupational Therapy. Oral Paper Presentation. Quebec City, Quebec.

Langlois S, Cockburn L. (June 2012). Integrating Interprofessional Education (IPE) into Occupational Therapy Curriculum. Canadian Association of Occupational Therapy. Poster Presentation. Quebec City, Quebec

Langlois S, Herbert D. (June 2012). Using client narratives to highlight ethics and professionalism. Canadian Association of Occupational Therapy. Oral Paper Presentation. Quebec City, Quebec.

Lowe M, Ballon B, Giuliano D, Hubley D, Parker K, Sinclair L. (June 2013). Interprofessional Education and Simulation: Application and Opportunities. Collaborating Across Borders IV. Workshop. Vancouver, British Columbia.

Lowe M, McLaney E, Peranson J. (February 2013). Evaluating learning needs of an interprofessional team. Workshop. St. Michael's Hospital Faculty Development Day. Toronto, Ontario.

Lowe M, Hubley D, Giulano D. (December 2012). Simulation and IPE. SIM-one Expo 2012. Workshop. Toronto, Ontario.

Lowe M, McGillicuddy P. (November 2012). Interprofessional Collaboration and Education. 6th Annual Anesthesia Assistant Professional Development Day. Toronto, Ontario.

Lowe M, Silver I. (February 2012). Enhancing Students' Interprofessional Learning in Practice. Inaugural Don Wasylenki Day Faculty Development Day. Department of Psychiatry, University of Toronto.

Lowe M. (January 2012). Enhancing Students' Interprofessional Learning Practice: Tips for Teams. West Michigan Interprofessional Education Initiative. Anticipating Healthcare Reform: The Central Role of IPE and Practice. Fourth Annual Conference. Grand Rapids, Michigan.

Lowe M. (October 2011). IPE and Simulation. SIM-one Essentials of Simulation Certificate Program. SIM-one. Workshop. Toronto, Ontario.

Lowe M. (October 2011). Essentials of Simulation: Interprofessional Education (IPE). Essentials of Simulation. SIM-one. Workshop. Toronto, Ontario.

Lundon K, Kennedy C, Shupak R, Passalent L, Brooks S, Sinclair L, Schneider R, Soever L, Warmington K, Rozmovits L. (February 2013). Evaluation of Interprofessional Patient-centred Collaborative Practice Behaviour and Perceptions Following an Intensive Continuing Education Development Initiative in Arthritis Care. Collaborating Across Borders IV. Poster Presentation. Vancouver, British Columbia.

MacIntosh S, Bainbridge L, Blue A, Dean H, Grymonpre R, Kearney A, Naismith L, Newton C, Pfeifle A, Oandasan I, Tassone M, Wagner S. (November 2011) Interprofessional education (IPE) as a platform for scholarship for faculty recruitment, retention, promotion and tenure. Collaborating Across Borders III. Oral Presentation. Tucson, Arizona.

McGillicuddy P, Bloom R, Cross N, Gold K, Lowe M, Mitchell G. (June 2013). Surfacing Values, Meaning and Respect: Narrative and Non-deliberative approaches to Interprofessional Education and Research. Collaborating Across Borders IV. Workshop. Vancouver, British Columbia.

McGillicuddy P, Lowe M. (May 2013). Interprofessional Collaborative Care and Education with Anaethesia Assistants. Canadian Society of Respiratory Therapists Annual Education and Trade Show. Presentation. Niagara Falls, Ontario.

Oandasan I, Lowe M, Romano D, Vilhena B, Wagner S, Yeshayahu M. (June 2013). Embedding Transformational Learning Theory into Practice: Outcomes of a 5 Year Study Measuring the Impact of ehpic<sup>TM</sup> - University of Toronto's IPE Faculty Development Course. Collaborating Across Borders IV. Oral Presentation. Vancouver, British Columbia.

Oandasan I, Lowe M, Romano D, Sinclair L, Tassone M, Vilhena B. (November 2011). The Play within the Play: Advancing Approaches for IPE Faculty Development. Collaborating Across Borders III. Oral Presentation. Tucson, Arizona.

Owen J, Brashers VL, Oandasan I, Lowe M, Vilhena B. (November 2011). Collaborating Across Borders to Create an IPE Simulation Faculty Development Program for Health Professionals, Educators, and Leaders. Collaborating Across Borders III. Workshop. Tucson, Arizona.

Owen JA, Brashers VL, Oandasan I, Lowe M, Vilhena B. (September 2011). Collaborating across borders to create an IPE simulation faculty development program for health professionals, educators, and leaders. European Interprofessional Practice & Education Network (EIPEN) 2011 Conference. Paper Presentation. Ghent, Belgium.

Paterson M, Bainbridge L, Dumont S, Berry S, Marsh D, Verma S, Tassone M. (October 2012). The Canadian Interprofessional Health Leadership Collaborative. All Together Better Health VI. Poster Presentation. Kobe, Japan.

Reinhart R, D'Alimonte L, Bristow, Di Prospero L. (October 2012). Educating our Patients Collaboratively: A Novel Inter-professional Approach. Sunnybrook Health Sciences Education Expo. Presentation. Toronto, Ontario.

Reinhart R, D'Alimonte L, Bristow B, Robson S, Burnett J, Osmar K, Court A, Szumacher E, Di Prospero L. (September 2012). Educating Our Patients Collaboratively: A Pilot Study to Assess a Novel Interprofessional Approach to Education Prostate Cancer Patients Receiving Radiation Therapy. 2012 International Cancer Education Conference (CPEN). Presentation. Ann Arbor, Michigan.

Shaver J, Burns P, Creede C, Karim A, Oandasan I, Parker K, Tassone M, Vilhena B. (June 2013). Facilitating Transformational Learning: A Case for Collaborative Change Leadership Programming for Interprofessional Education (IPE) and Interprofessional Care (IPC). Collaborating Across Borders IV. Oral Presentation. Vancouver, British Columbia.

Sick B, Miller J, Sinclair L, Oandasan I, Molgaard L, Pittenger A, Foley W. (June 2013). Building an IPE Simulation Case: An Innovative International Partnership. Collaborating Across Borders IV. Poster Presentation. Vancouver, British Columbia.

Simmons B, Deland M, Hyndman M, Jefferies A, Wagner SJ, Reeves, S, Esdaile M. (May 2012). The development and assessment of neonatal Resuscitation Competencies in Interprofessional Education (ReCIPE). Continuing Medical Education (CME) Congress. Poster Presentation. Toronto, Ontario.

Simmons B, Wagner SJ, Langlois S. (November 2011). Demonstration of interprofessional education student learning: Global rating scale assessment. Collaborating Across Borders III. Paper Presentation. Tucson, Arizona.

Simmons B, Wagner SJ, Egan-Lee E, Esdaile M, Baker L, Reeves, S. (November 2011). Assessment in interprofessional education: Determining utility by examining development of an interprofessional objective structured clinical examination. Collaborating Across Borders III. Workshop. Tucson, Arizona.

Simmons B, Jefferies A, Wagner SJ. (August 2011). Performance Assessment for Competency-Based Health Professional Education. Association of *Medical Education* in Europe (AMEE) Conference. Workshop. Vienna, Austria.

Simmons B, Wagner SJ, Langlois S. (August 2011). Demonstration of interprofessional education student learning: Global rating scale assessment. Association of *Medical Education* in Europe (AMEE) Conference. Oral Paper Presentation. Vienna, Austria.

Sinclair L. (May 2013). Interprofessional Education (IPE) Possible: Opportunities for Learning. Georgian College. Workshop. Barrie, Ontario.

Sinclair L. (May 2012). Developing and Debriefing Simulations for Interprofessional Education. SIM FEST 2012. Oral Presentation. Edmonton, Alberta.

Sinclair L, Lowe M. (March 2012). Enabling Interprofessional Collaboration: Making a Difference with my Team. Workshop. Centre for Addiction and Mental Health. Toronto, Ontario.

Sinclair L. (March 2012). Interprofessional Education and Care: Why the 'Buzz' and So What? Presentation. Humber College. Toronto, Ontario.

Szumacher E, Di Prospero L, Barker R. (November 2011). Fostering Scholarship in Medical Education in Cancer Care through Inter-institutional Collaboration. Collaborating Across Borders III. Presentation. Tucson, Arizona.

Szumacher E, Barker R, Di Prospero L. (September 2011). Fostering Scholarship in Medical Education in Cancer Care through Inter-institutional Collaboration. Canadian Association of Radiation Oncologists (CARO) 2011. Workshop. Winnipeg, Manitoba.

Tassone M, Verma S, Bainbridge L, Berry S, Careau E, Lovato C, Marsh D, Paterson M, Vandijk J. (June 2013). Collaborative leadership for Health system change to globally transform education and health. Collaborating Across Borders IV. Poster Presentation. Vancouver, British Columbia.

Tassone M, Sinclair L, Richards J. (June 2013). Developing an Interprofessional Care Framework to Strengthen Patient Experiences and Outcomes. Collaborating Across Borders IV. Oral Presentation. Vancouver, British Columbia.

Tassone M, Lowe M, Morra D, Langlois S, Parker K, Sinclair L, Vilhena B. (June 2013). Sustaining the Momentum for a New Culture of Collaboration: Learnings from the University-Practice Interface. Collaborating Across Borders IV. Oral Presentation. Vancouver, British Columbia.

**Tassone M**, Careau E. (May 2013). Innovations in teaching leadership through professionalism. Institute of Medicine Global Forum on Innovation in Health Professional Education – Establishing Transdisciplinary Professionalism for Health Workshop. Panel Discussion. Washington, DC.

Tassone M. (May 2013). Fostering interprofessional learning and practice through the development of collaborative leadership curricula. Canadian Association of Occupational Therapy (CAOT) 2013. Poster Presentation. Victoria, British Columbia.

Tassone M. (February 2013). Emerging Directions in Interprofessional Education. Bridgepoint Active Healthcare Education Celebration - Transforming Healthcare through Education. Bridgepoint Health. Oral Presentation. Toronto, Ontario.

Tassone M. (December 2012). Emerging Directions in Interprofessional Education. Council of Health Sciences Education Retreat – University of Toronto. Oral Presentation. Toronto, Ontario.

Tassone M. (September 2012). The Shift to Interprofessional Learning in Practice: Early Impacts and Outcomes. Oncology Grand Rounds. Sunnybrook Health Sciences Centre. Oral Presentation. Toronto, Ontario.

**Tassone M**, Fischer N, Harris A, Kwong J. (May 2012). The learner experience in interprofessional education: setting the stage for interprofessional practice and care. Toronto Interprofessional Care Conference Panel. Ontario Hospital Association. Panel. Toronto, Ontario.

Tassone M. (May 2012). An Ontario Exemplar - The Toronto Academic Health Sciences Network and University of Toronto. Ontario Interprofessional Health Collaborative Summit. Oral Presentation. Toronto, Ontario.

Tassone M. (January 2012). Impact of interprofessional education on clinical placements for students. Sunnybrook Health Sciences Centre Special Rounds. Oral Presentation. Toronto, Ontario.

Tassone M, Burns P, Creede C, Karim A, Oandasan I, Parker K, Shaver J, Vilhena B. (November 2011). Building Capacity of Collaborative Change Leaders: Transforming Interprofessional Education and Practice. Collaborating Across Borders III. Oral Presentation. Tucson, Arizona.

Tassone M. (September 2011). Interprofessional education and care: the next horizon. Providence Health Centre IPE/C Symposium. Oral Presentation. Toronto, Ontario.

Verma S, Tassone M. (November 2012). Educating for Practice: Using collaborative leadership to improve health education and practice. Global Forum Innovation in Health Professions Education, Institute of Medicine. Oral Presentation. Washington, DC.

Verma S, Tassone M, Bainbridge L, Paterson M, Berry S, Marsh D, Dumont S. (October 2012). Building Community in Generating a Canadian Interprofessional Health Leadership Collaborative. Rendez-Vous 2012. Poster Presentation. Thunder Bay, Ontario.

Verma S, Tassone M. (August 2012). Linking Health Professions Education to Practice: Canadian Successes and Lessons Learned. Global Forum Innovation in Health Professions Education, Institute of Medicine. Oral Presentation. Washington, DC.

Wagner S, Langlois S. (June 2013). Evolution of an interprofessional education curriculum: From concept to emergent reality. Collaborating Across Borders IV. Poster Presentation. Vancouver, British Columbia.

Wagner S, Langlois S. (June 2013). Designing interprofessional learning activities from interprofessional continuing education programs: On-line experiences focused on HIV and rehabilitation. Collaborating Across Borders IV. Oral Paper Presentation. Vancouver, British Columbia.

Wagner S, Langlois S, Beekhoo Z. (June 2013). Conflict in interprofessional life: Educating students for what lies ahead. Collaborating Across Borders IV. Workshop. Vancouver, British Columbia.

Wagner S, Langlois S, Simmons B. (October 2012). Assessment of interprofessional education student learning: The global rating scale landscape. All Together Better Health VI. Poster Presentation. Kobe, Japan.

Wagner SJ, Shaver J, Lowe M. (May 2012). The art and science of interprofessional education facilitation: Meeting the challenge. Continuing Medical Education (CME) Congress. Poster Presentation. Toronto, Ontario.

Wagner SJ, Simmons B, Esdaile M, Reeves, S. (April 2012). Evaluation of case-based interprofessional education sessions: Development and implementation. Education Achievement Day, Faculty of Medicine, University of Toronto. Poster Presentation. Toronto, Ontario.

Wagner SJ, Simmons B, Esdaile M, Reeves, S. (November 2011). Evaluation of case-based interprofessional education sessions: Development and implementation. Collaborating Across Borders III. Paper Presentation. Tucson, Arizona.

Wagner SJ, Langlois S. (November 2011). Framework for the development of interprofessional competencies: Balanced curriculum development and integration. Collaborating Across Borders III Workshop. Presentation. Tucson, Arizona.

Wagner S, Shaver J, Lowe M, Tipping J. (November 2011). The Art and Science of IPE Facilitation: Meeting the Challenge. Collaborating Across Borders III. Workshop. Tucson, Arizona.

Wagner SJ, Falconi A, Cheesman J, Jones-Stokreef N, Castellon R. (November 2011). Interprofessional collaboration panel. Health and Well-Being in Developmental Disabilities: Engaging Healthcare Professionals Conference. Plenary Keynote. Toronto, Ontario.

Wagner SJ. (September 2011). Developing interprofessional education learning activities: Where to start. Mississauga Academy of Medicine at Credit Valley Hospital. Workshop. Mississauga, Ontario.

Wu D, Verma S, Tassone M, Bainbridge L, Berry S, Careau E, Marsh D, Paterson M, Vandijk J. (June 2013). Collaborative leadership for patient-centred health system transformation. 2013 National Health Leadership Conference. Poster Presentation. Niagara Falls, Ontario.

Wulfhart Z, Bain L, Langlois S. (October 2012). Minimizing patient risk by maximizing team collaboration. All Together Better Health VI. Kobe, Japan.

# **APPENDICES**

# COMMITTEES

# **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 Healthcare Institutions, University of Toronto

**Robert Bell** President and Chief Executive Officer, University Health Network

**Daniel Haas** Dean, Faculty of Dentistry, University of Toronto

**Brian Hodges** Vice President, Education, University Health Network

**Henry Mann** Chair, Council of Health Sciences, and Dean, Leslie Dan Faculty of Pharmacy, University of Toronto

**Sioban Nelson** Dean, Lawrence S. Bloomberg Faculty of Nursing, University of Toronto

**Tim Rutledge** President and Chief Executive Officer, North York General Hospital

**Sal Spadafora** Vice–Dean, Postgraduate Medical Education, University of Toronto

Maria Tassone Director, Centre for IPE



Dante Morra, Robert Bell, Henry Mann



IPE/IPC Community



University of Toronto 2013 National Healthcare Team Challenge winners

# 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. 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, Centre for IPE Representative(s) and two student representatives from the Interprofessional Health Science Students Association (IPHSA).

**Centre for IPE:** Maria Tassone, Director; and Rebecca Singer, Education Coordinator

**Dentistry:** Renee Kilmartin, Karen Burgess

**IPHSA:** Nikki Fischer, Stacey Creak, Young-In Kim, Kaspar Ng

Medical Radiation Sciences: Cate Palmer, Kieng Tan

Medicine: Cynthia Whitehead, Mark Bonta

Nursing: Zoraida Beekhoo

Occupational Therapy: Lynn Cockburn, Sylvia Langlois

Pharmacy: Andrea Cameron, Jamie Kellar

**Kinesiology and Physical Education:** Lynda Mainwaring, Margaret MacNeill, Ashley Stirling

**Physical Therapy:** Kim Moody, Sharon Switzer-McIntyre, Karen Yoshida

Physician Assistant: Sharona Kanofsky

**Social Work:** Charmaine Williams, 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 Greater Toronto Area. 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 and IPE electives. 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.

### **Members**

**Baycrest:** Faith Boutcher, Lisa Sokoloff, Sharon Faibish

Bridgepoint Health: Elizabeth Hanna

Centre for Addiction and Mental Health (CAMH): Dale Kuehl, Jane Patterson

Holland Bloorview Kids Rehabilitation Hospital: Darlene Hubley

**Hospital for Sick Children:** Bonnie Fleming-Carroll, Vera Gueorguieva

**Humber River Hospital:** Marisa Vaglica

Mount Sinai Hospital: Donna Romano

North York General Hospital: Daphne Flatt, Margaret Beatty, Susan Woollard

**Providence Healthcare:** Shawn Brady, Jennifer Joachimides, Valerie McWhinnie, Heidi Hunter

Southlake Regional Health Centre: Lorna Bain

St. Joseph's Health Centre: Elizabeth McLaney

**St. Michael's Hospital:** Mary Ellen Newbold, Beverly Bulmer, Dean Lising

**Sunnybrook Health Sciences Centre:** Ruth Barker, Sioban Donaghy



**Trillium Health Partners:** Lisa Harper, Jennifer Clifford

Toronto East General Hospital: Lindsay Martinek, Paul Man-Son-Hing, Paula Rowland

**Toronto Rehab:** Tracy Paulenko

University Health Network: Patti

McGillicuddy, Debbie Rolfe

West Park Healthcare Centre: Sarah Wesseling

William Osler Health System: Jennifer Santos

Women's College Hospital: Karen Gold, Anne

**Fourt** 

Centre for IPE: Mandy Lowe

# 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.

**Members** 

Dentistry: Karen Burgess, John McComb

Kinesiology and Physical Education: Ashley Stirling, Susan Lee

Medical Radiation Sciences: Renate Bradley, Dave Newall, Bonnie Sands

Medicine: Mark Bonta, Stacey Bernstein, Anita Rachlis

Nursing: Zoraida Beekhoo

Occupational Therapy: Sylvia Langlois, Donna

Barker

Pharmacy: Andrea Cameron, Annie Lee, Katrina

Mulherin

Physical Therapy: Brenda Mori, Meredith Smith

Physician Assistant: Sharona Kanofsky

Social Work: Eileen McKee

Speech-Language Pathology: Susan Wagner

Northern Ontario School of Medicine:

John Shea

Centre for IPE: Sylvia Langlois

# Interprofessional Healthcare Student's Association (IPHSA)

### **CO-PRESIDENT**

Kaspar Ng, Medicine, 2012-2013 Elisa Simpson, Nursing, 2012-2013 Lisa Wu, Pharmacy, 2011-2012 Youn Park, Pharmacy, 2011-2012

### **VP EDUCATION**

Navjot Rai, Medicine, 2012-2013

### **VP INTERNAL**

Suhani Shah, Naturopathic Medicine, 2012-2013

### STUDENT REP

Edith Gracey, Nursing, 2012-2013 Laura Slingerland, Nursing, 2011-2012 Amr Abouzeid, Dentistry, 2011-2012/2012-2013

Amanda D'Aurelio, Dentistry, 2012-2013

Farha Sardar, Dentistry, 2011-2012

Erika North, Physician Assistant, 2012-2013

Sara Abura, Social Work, 2012-2013

Rebecca Bliss, Social Work, 2012-2013

Stacey Creak, Social Work, 2011-2012

Kasia Pytlik, Social Work, 2011-2012

Nikki Fischer, Medicine, 2011-2012

Mary Bowden, Speech-Language Pathology, 2012-2013

Jamie Lee, Speech-Language Pathology, 2012-2013

Amy Dhindsa, Speech-Language Pathology, 2012-2013

Laura Booth, Speech-Language Pathology, 2011-2012

Jacky Lam, Physiotherapy, 2012-2013

Bonnie Winship, Physiotherapy, 2011-2012

Danielle D'Alessandro, Occupational Therapy, 2012-2013

Bonnie Thai, Occupational Therapy, 2011-2012

Susan Tung, Kinesiology & Physical Education, 2012-2013

Kathleen Abreo, Kinesiology & Physical Education, 2011-2012

Rana Khafagy, Pharmacy, 2012-2013

Adam Lam, Pharmacy, 2011-2012

Erica Doyle, Medical Radiation Sciences, 2011-2012

Jacky Leung, Chiropractic, 2012-2013

Patricia Galata, Chiropractic, 2012-2013

Pearl Mehra, Chiropractic, 2011-2012

Natalie Siu, Chiropractic, 2011-2012

Andrew Krausc, Naturopathic Medicine, 2011-2012

### **VP OUTREACH**

Rachel Wing-Tung Lee, Physiotherapy, 2012-2013

### NAHSSA REP

Mayu Kanakasundram, Naturopathic Medicine, 2012-2013

### **IFCC REP**

Ilyse Lax, Occupational Therapy, 2012-2013 Young-in Kim, Pharmacy, 2012-2013

# UNIVERSITY OF TORONTO IPE COMPETENCY FRAMEWORK



A Framework for the Development of Interprofessional Education Values and Core Competencies Health Professional Programs, University of Toronto

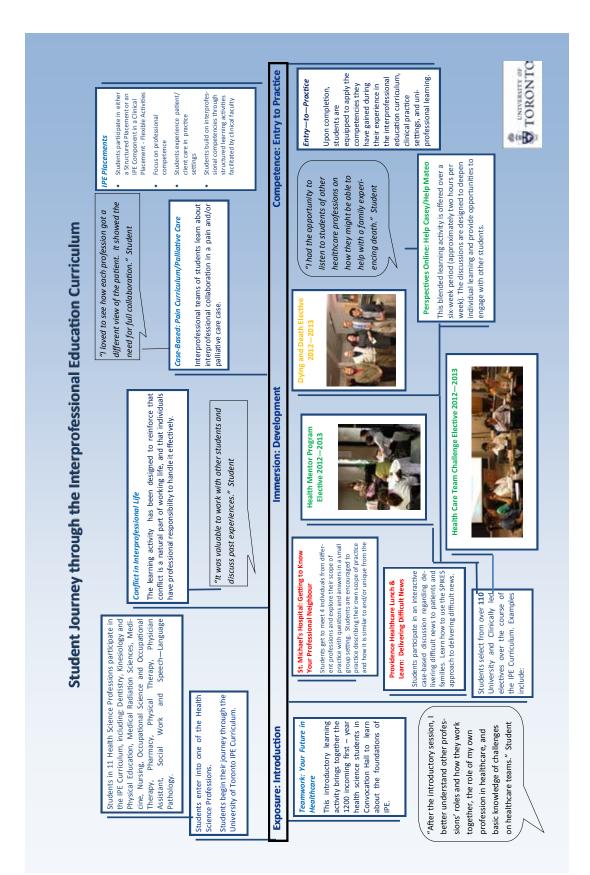
TORONTO

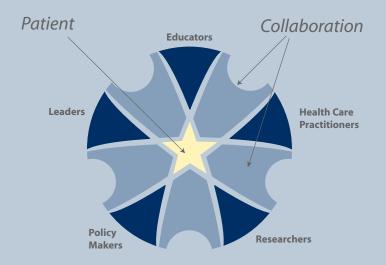
# INTERPROFESSIONAL PARTNERSHIP AND COLLABORATIVE PRACTICE FOR OPTIMIZATION OF CLIENT/PATIENT HEALTH OUTCOMES including power and hierarchy. Fleebiling and adaptably a Work collaboratively with others, as appropriate, to assess, plan, provide care/ intervention and make decisions to optimize client/patient/family health outcomes and improve quality of care. Demonstrate leadership in advancing effective IP team function through a variety of strategies including, but not limited to: - Reflection, Develop awarness of and contribute to continual improvement of IP team dynamics and group processes through effective IP communication. Promotion of effective decision-making, identification of factors that contribute to or hinder team collaboration, Accept, through respect and value, others and their contributions in relational-centred care. Communicate effectively, including giving and receiving feedback. **COMPETENCE:** Entry-to-Practice Perform effectively to develop shared team values. Practice ethically in an IP environment. Able to use a framework for ethical decision-within an IP team. Skill / Behaviour **TNAMSSASSA AVITAMMUS** 8 I ш Accurately describe the roles, responsibilities and scopes of practice of other professions. $\cdot \text{Contribute to: }$ -Advance values including accountibility, respect, confidentiality, frust, integrity, honesty and ethical behaviour, equity as it relates to IP team functioning to maximize quality, safe patient care. Effective decision-making in IP teamwork utilizing judgment and critical thinking. Team effectiveness through reflection on IP team function. The establishment and maintenance of effective IP working relationships/ againteelips. Involving other professions in client/patient/family care appropriate to their roles and responsibilities. of and openness to utilize and develop effective IP communication skills. REFLECTION, LEARNING AND FORMATIVE ASSESSMENT **IMMERSION:** Development Contribute to effective IP communication, including: - Giving and receiving feedback. - Addressing conflict or difference of opinions, - Self-reflecting. Skill / Behaviour Guided by an ethics frame Skill/Behaviour Attitude ۵ × Reflect on own values, proronal and professional, and respect those of other IP team memberodients/demiles. - Carify values including accountbility, respect, confidentiality, trust integrity, honesey and ethical behaviour equity as it relates to IP team functioning to maximize quality, safe patient care. Describe own role responsibilities, values and scope of practice effectively to client pattern familie and other professionals. Describe intergratifies and other professionals, with respect to the science and theories behind teamwork. Describe IP team dynamics as they relate to individual team members' values and the impact on team functioning in ethical dilenmas. Describe the nature of IP ethical reasoning and justification. Describe the context and culture of the interprofessional (IP) environment that facilitates or inhibits collaboration, and its constraints. Identify instances where P care will improve clerr/patient/family outcomes. Recognize and understand how the uniqueness of other team members, including power and hierarchy within the IP team, may contribute to effective communication and/or IP tension. Recognize and understand how ones own uniqueness, including power and interactly within the IP team, may contribute to effective communication and/or IP tension. Utilize the basic skills of reasoning and justification ethical issues within an IP team. **EXPOSURE:** Introduction · Identify IP ethical issues within a team context. Skill / Behaviour **ENTRY-LEVEL ASSSESSMENT** Roles, responsibilities, accountabilities and scope of practice Decision-making/critical thinking Perform as an effective team mer – Flexibility, cooperation, contribution, organization/ efficiency, team health mainten Context and culture of the health care system Listening Giving feedback · Interprofessional (IP) theory Common language Dealing with conflict Diversity sensitive Interdependence Creativity/innovation Values and Ethics • Relational-centred Self-reflection · Change - Proactive CONSTRUCTS

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- LEARNING CONTINUUM

# STUDENT JOURNEY THROUGH THE **IPE CURRICULUM**





# **Centre for Interprofessional Education**

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