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OUR VISION
Transformation Through Collaboration

OUR STRATEGIC PRIORITIES

1. Delivery of interprofessional education (IPE) in a seamless fashion to pre-licensure students, undergraduate and graduate, across the health sciences through **curriculum integration and expansion**.

2. Preparing the practice setting through the education of practitioners and leaders through **professional development**.

3. Engaging and influencing the system in order to grow and sustain the Centre for Interprofessional Education through **system engagement, advocacy and influence**.

4. Contributing new knowledge and innovation to the field of IPE and interprofessional care (IPC) through **research, scholarship and innovation**.
DIRECTOR’S MESSAGE

We are delighted to be sharing this report with you as we celebrate our five year birthday. As a newly-established Centre in 2009, we embarked on a major transformation that would see the scale of a novel interprofessional education curriculum move from concept and pilot, to an integrated set of offerings for over 4,200 students across 11 health science professions. Still unique to the international IPE landscape at that time, the Centre for Interprofessional Education (CIPE) formally partnered with practice communities and intentionally supported clinicians and leaders in these communities through our professional development efforts. This stimulated a wide international reach for the CIPE as we also supported academic and practice organizations around the world to begin and advance their own IPE efforts. Our health system engagement and advocacy work brought us, along with four other Canadian universities, to the Institute of Medicine’s Global Forum for Innovation in Health Professional Education, where we had the opportunity to influence the dialogue and scholarship on collaborative leadership with an international forum of policy makers, academic experts and health system leaders. And over the last five years, we’ve advanced the science and scholarship of IPE and team-based care, and shared our Toronto journey through our book, “Creating the Health Care Team of the Future.”

These comments are just a glimpse of what is contained in this report that celebrates our successes and unique collaborations here at the CIPE. This report also marks the conclusion of our first Strategic Plan (2009-2014), guided by our vision of “transformation through collaboration.” We believe that the transformation in Toronto has been substantive in the past five years, and the concepts of interprofessional education and team-based care are now becoming mainstream.

We would especially like to thank our partners and community for their incredible commitment that continues to ensure the innovation and sustainability of the CIPE. This was especially evident during the Centre’s successful five-year review in 2014. Following the review, I was blessed to be re-appointed as the CIPE’s director for an additional five-year term. I look forward to working with our amazing CIPE team as we transition to a strategically-nuanced vision of “transforming care through collaboration” — one that will challenge us to link IPE and team-based care, demonstrate value to our partners and community, and cultivate the health system transformation needed to meet the needs of our patients, clients and families in Ontario, Canada and beyond.

Maria Tassone
WHO WE ARE

The University of Toronto’s Centre for Interprofessional Education at the University Health Network (UHN) is a unique academic Centre whose mission is to develop a curriculum to provide health professional students with the core competencies needed for the provision of interprofessional evidence-based care in a collaborative, team practice environment, and further establish the University of Toronto (U of T), the University Health Network, and partners as a national and international leader in interprofessional education. The CIPE collaborates with community partners and others to advance interprofessional education, research and care. Leading this effort are the dedicated individuals who make up the CIPE team.

MEET OUR TEAM

Kathryn Parker, Evaluation Advisor
Maria Tassone, Director

Mandy Lowe, Associate Director
Rebecca Singer, Process Lead, Curriculum
Sylvia Langlois, Faculty Lead, Curriculum
Gerick Abaca, Student Intern

Sabrina Bartlett, Education Coordinator
Dean Lising, Collaborative Practice Lead and Curriculum Associate

Eli Cadavid, Administrative Assistant
Lynne Sinclair, Innovative Program & External Development Lead

Belinda Vilhena, Manager
Fatima Mimoso, Administrative Coordinator
Stephanie Lee, Student Intern

Former Team Members: Rachel Dyers, Education Coordinator and Stephanie Lui, Student Intern.
WHAT WE’VE BEEN UP TO

CURRICULUM INTEGRATION AND EXPANSION

BUILDING BRIDGES ACROSS THE SYSTEM

Each year, we welcome up to 1,600 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. Over the course of the curriculum, students engage in four core learning activities (*Teamwork: Your Future in Healthcare; Conflict in Interprofessional Life; Case-Based Learning Activity; IPE Component in a Clinical Placement*) and select from over 180 elective learning activity offerings. The competencies students acquire through the IPE curriculum will enable development of collaborative practice-ready health care professionals with the skills to respond effectively and compassionately to patient/client health needs. Innovation within the IPE curriculum has been realized through collaboration across the system.

Building bridges across the system has been critical to the successful implementation of the University of Toronto’s Interprofessional Education Curriculum. As we pause to celebrate the conclusion of the five–year strategic directions with our partners, we reflect on some of the curricular innovations and successes of the past two years.

Number of Elective Learning Activity Offerings Per Annum 2009-2015

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
</tr>
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<tbody>
<tr>
<td>2009-10</td>
<td>23</td>
</tr>
<tr>
<td>2010-11</td>
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<tr>
<td>2013-14</td>
<td>127</td>
</tr>
<tr>
<td>2014-15</td>
<td>189</td>
</tr>
</tbody>
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INTERPROFESSIONAL CERTIFICATES OF DISTINCTION

Students and faculty have identified the value of engaging in opportunities for enhanced interprofessional longitudinal experiences within key healthcare themes. Although the development of IPE competencies are embedded in interprofessional learning activities recognized by the CIPE, additional formalized learning activities provide opportunities to enhance collaborative learning within particular areas of interest. Since September 2013, three interprofessional certificate programs have been launched: Management of Chronic Health Challenges, Quality and Safety and Health, Arts & Humanities.

MANAGEMENT OF CHRONIC HEALTH CHALLENGES

Students gain an enhanced appreciation of the complexity of health issues and interprofessional best practices. In the final component of the program, students compete in the Health Care Team Challenge at the U of T.

QUALITY AND SAFETY

This program advances a deeper understanding of quality process improvement including: optimization of safe practices; prevention of errors; team problem solving and decision-making to provide patient/client-centered collaborative care.

The U of T Institute for Healthcare Improvement (IHI) Student Chapter and CIPE have partnered to build future leaders in quality improvement (QI) through supporting certificate students with new QI IPE seminars in and a focus on interprofessional learning at their annual Quality Improvement and Patient Safety conference.

HEALTH, ARTS & HUMANITIES

This program is offered by the CIPE, in conjunction with the Health, Arts and Humanities Program in the Faculty of Medicine at the U of T, to advance understanding of health, illness, suffering, disability and the provision of healthcare in the arts, humanities and clinical practice.

“...I was able to meet people who spoke from experience - either former patients or health care providers...Students were able to practice different scenarios to improve our interprofessional communication and patient care.”
— Student

Health Care Team Challenge Team Members 2015

Quality and Safety Workshop 2015

Reflection 2014: Justin Lam, Student
STUDENT ENGAGEMENT: 
EMBRACING STUDENT LEADERSHIP AND ENGAGEMENT

Student engagement in IPE learning activity development, curriculum design and delivery, as well as peer facilitation has grown significantly. In response, the Interprofessional Student Facilitator Workshop was developed in early 2014 to provide students with the opportunity to develop foundational knowledge, enhance understanding of interprofessional collaboration and develop leadership and interprofessional facilitation skills. Following a successful pilot, a new IPE learning activity for senior students was developed to further advance interprofessional facilitation competency. Many of these student leaders continue to refine their skills through student-led initiatives; the examples below highlight just a few of the student collaborations.

IPHSA (Interprofessional Healthcare Students Association) is a well-recognized student association in the health sciences at the University of Toronto. Student members have become increasingly engaged and involved in interprofessional opportunities both within the university setting and in practice. IPHSA has expanded its community advocacy and outreach agenda, collaborated with the CIPE to develop two new IPE elective learning activities - IPHSA SYMPOSIUM and IPHSA PATIENT CARE CHALLENGE; as well, IPHSA has continued to provide guidance and leadership for advancing interprofessional education for health sciences students.

The IMAGINE (Interprofessional Medical and Allied Groups for Improving Neighbourhood Environment) clinic is an interprofessional student-led community initiative aiming to “foster partnerships between students and marginalized communities to promote the delivery of holistic health care,” (imagine.uoftmeds.com). The IMAGINE clinic is staffed by an interprofessional team of students and preceptors offering holistic care for underserved populations in downtown Toronto. In partnership with CIPE, IMAGINE created the INNER CITY HEALTH LONGITUDINAL EXPERIENCE in January 2015. This interprofessional activity enables students to gain knowledge regarding issues relevant to inner city populations through three components: a workshop, a shadowing opportunity at an inner city health placement and a debrief.

In collaboration with the CIPE, U ofT Speech Language Pathology student, Vibhuti Jethava, led the development of a humanities-based learning activity, Readers Theatre. As a unique way to reconnect with the human side of health care delivery, this monthly activity includes reviewing a script written from the perspectives of patients and clients, their caregivers and their health care providers. Following the reading, students engage in a discussion to critically reflect on the social, cultural and ethical issues embedded in interprofessional practice.
HEALTH MENTORS: ENGAGING THE PATIENT VOICE

Through participation in the IPE Curriculum, students learn to provide patient/client–centered care, empowering and collaborating with patients/clients. The Health Mentor Program (HMP), adapted from a unique program developed by Thomas Jefferson University in Philadelphia, brings together interprofessional teams of students with an individual in our community experiencing chronic health challenges. This experience offers students the opportunity to appreciate and learn from the influential, impactful story of each individual to shape how students will practice in the future. Integrating opportunities for these individuals to provide narrative elements into both the process and content of activities ensures students receive authentic, engaging learning opportunities aligned with the patient/client experience.

As critical partners in the curriculum, health mentors have been increasingly engaged in the development and delivery of various learning activities, curricular initiatives and the 2015 IPE Curriculum Planning Day Retreat, amongst other opportunities for partnership.

“I’m a transgendered woman, I became a health mentor due to some of the misconceptions and stigma that the transgendered face when it comes to finding practitioners and care. One of the students in the HMP said, “I can do my job now and not make the mistakes those before me did.”

– Christine Decelles, Health Mentor

“23 years ago pain came into my life and stayed. It impacted everything: work, play, relationships, and finances. I was powerless until I became a health mentor. Now, I use my knowledge and experience to teach about what I need as a patient to lead a balanced healthy life with my chronic condition.”

– Janet Rodriguez, Health Mentor

“It’s about suffering and joy. When students connect with people in pain and fear, they share the suffering. The contact reveals the joy and reward that their human equipment is benefitting another. It’s a profoundly elevating experience for both student and patient. It hurts more but provides great joy. To do without the hurt they do without the joy.”

– Zal Press, Health Mentor

CIPE Members and Health Mentors

From left to right: Dean Lising, CIPE; Sylvia Langlois, CIPE; 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, CIPE; Tim Giblin, Health Mentor.
FROM OUR PRACTICE COMMUNITY

Healthcare providers offer invaluable, authentic learning experiences for students engaged in interprofessional learning. Our practice community provides ongoing leadership in curriculum development, interprofessional facilitation and teaching, and innovations in the field of IPE.

Below represents only a few of the examples of the many innovations from the practice community in the past two years.

INNOVATIONS IN IPE PLACEMENTS

In 2014, the UHN designed and piloted two different formats of the IPE-structured placement model; one theme-based and the other work-shadow based.

The theme-based model, “transitions in care” (e.g., shift changeovers, acute care to rehabilitation), was created to enhance student participation from across professions, clinical areas and the continuum of care.

The work-shadow placement model provided students with the opportunity to shadow and work with staff from various professions over a two-day period during their placement.

CREATING INTER-ORGANIZATIONAL SYNERGIES

As practice settings continue to develop interprofessional elective learning activities, there are many opportunities for inter-organizational collaboration. This year, Sunnybrook Health Sciences Centre and St. Michael’s Hospital partnered with the CIPE, and a quality and patient safety expert, to pilot one interprofessional learning activity at each of the respective practice sites. Each hospital developed a patient safety themed IPE learning activity that was broadcast, recorded, and shared at the partner organization. In collaboration with the CIPE, the IPE Lead ensured that facilitator guides and participant evaluations were informed by similar principles, however adapted for organizational context. Most recently, the UHN successfully delivered this opportunity to their students and staff.
FACULTY COLLABORATIONS

Faculty representing the eleven health science programs committed to the IPE Curriculum partner with the CIPE to advise on the direction, implementation and evaluation of the curriculum as members of the InterFaculty Curriculum Committee (IFCC). These leads collaborate both with faculty within their uniprofessional programs and with other professional programs, developing and delivering interprofessional learning activities and initiatives.

Since 2013, the IPE Curriculum Assessment Sub-Committee (comprised of IFCC members from Occupational Science and Occupational Therapy, Nursing, Pharmacy and Physician Assistant programs, practice partners and assessment experts), has been collaborating to develop a comprehensive, longitudinal assessment strategy for the IPE Curriculum. In September 2014, select programs piloted the initial phase of the assessment strategy, implementing a set of interactive modules designed to provide students with foundational knowledge of IPE and the U of T IPE Curriculum.

Spring 2015 InterFaculty Curriculum Committee Members

Top Left to Right: Anton Nicouline, Student Representative; David Burnes, Social Work; Della Croteau, Pharmacy; Karen Burgess, Dentistry; Kieng Tan, Medical Radiation Sciences; Maria Tassone, CIPE; Mark Bonta, Medicine; Lindsay Schnarr, Student Representative; Lynda Mainwaring, Kinesiology and Physical Education; Rebecca Singer, CIPE; Susan Wagner, Speech-Language Pathology; Sylvia Langlois, Occupational Science and Occupational Therapy; Sharona Kanofsky, Physician Assistant; Zoraida Beekhoo, Nursing. No photo: Judith Hunter, Physical Therapy; Administrative support provided by Elizabeth Cadavid, CIPE.

Former InterFaculty Curriculum Committee Members

Ashley Stirling, Kinesiology and Physical Education; Catherine Palmer, Medical Radiation Sciences; Meredith Smith, Physical Therapy; Karen Yoshida, Physical Therapy; Noam Berlin, Student Representative; Lynn Ellwood; Speech-Language Pathology; Shelly Craig, Social Work.
THE ABC’S OF PROFESSIONAL DEVELOPMENT

Advancing IPE/IPC through Advising, Building Capacity, and Collaborating With Teams

The CIPE provides an array of professional development approaches tailored to the unique needs within practice and/or university/college settings working to advance interprofessional education and care. The CIPE has expanded coaching and customized courses/workshops through a robust model of interprofessional development described as ABC (Advising/consulting, Building capacity and Collaborating with teams). Over the past two years, the CIPE supported interprofessional development across 8 Canadian provinces and 12 countries.

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A) Advising/Consulting

*Advising to lead transformative change*

The CIPE offers specialized advising and consulting in the areas of interprofessional leadership and strategy; research and scholarship; as well as curriculum design, faculty engagement and interprofessional development. CIPE also provides coaching and mentoring of CIPE course graduates who are working to lead, design, implement and evaluate local programs, thereby enabling ongoing leadership development and sustainability of work across unique contexts.

B) Building Capacity

*Educating to advance interprofessional education and care*

Building capacity through formal professional development programs remains a cornerstone of professional development led by the CIPE. In addition, the Centre has partnered with international 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 and other learning sessions.

The Centre’s longstanding ehpic™ (*educating health professionals in interprofessional care*) program entered its 11th year in 2015 with a grand total of 1294 ehpic™ graduates to date from around the world. This course aims to develop 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 to deliver patient/client-centered care.

The **Collaborative Change Leadership™ (CCL)** Program develops individuals and teams to lead health system transformation and enable socially accountable change in their community. In 2014, the University Health Network (UHN) partnered with the Canadian Interprofessional Health Leadership Collaborative (CIHLC) in a unique opportunity to offer a proof of concept program that integrated social accountability and community engagement as core concepts of the CCL program. The third cohort of this innovative, advanced leadership program graduated in 2015. To-date, 108 leaders have graduated from the program.

“The Collaborative Change Leadership core concepts created a transformational lens (that) I have worked to apply not only professionally, but also personally. Through application, I have come to the understanding that rather than applying or ‘building the concepts in’…, I see this as a mindful day-to-day way of practicing being. … I am able to completely and congruently lead through example while the process of choosing to practice these principles will … allow me to develop further into the leader to which I aspire.”

– 2014/2015 CCL Program Participant
The CIPE also continues to work collaboratively with many partners (e.g. Centre for Faculty Development (CFD), University of Toronto; SIM-one; University of Toronto’s Masters of Science in Quality Improvement and Patient Safety; Centre for the Study of Pain and others) to provide a wider range of interprofessional development opportunities. More recently the CIPE contributed to Health Quality Ontario’s IDEAS Project Team (Improving and Driving Excellence Across Sectors).

“\(2015\) ehpic™ Graduates

“The two-day consultation was very positive and enabled the identification of concrete actions for the Saint Louis University Center for Interprofessional Education & Research Center leadership, and also resulted in a commitment to have a team of six clinical coordinators attend the ehpic™ Training Program. I am confident that the ehpic™ training was a valuable investment by Saint Louis University.”

– David Pole, Director, Center for Interprofessional Education and Research, Saint Louis University
C) Collaborating with Teams

*Facilitating teams for interprofessional models of care*

Customized collaborative practice modules to improve team-based care have been developed by the CIPE for point-of-care teams. The first pilot ran from August 2014 to April 2015 in which team members from the Endocrine Team at the Toronto General Hospital, UHN, advanced their own team communication, conflict management and role clarity through facilitated application to practice for interprofessional models of care. This highly interactive and applicable learning opportunity laid a strong foundation for team learning and collaborative care.

“(We are now) more respectful of the unique contribution of each team member (as) it assists with shared decision making.”

– Participant
The CIPE continues to be recognized as a local, provincial, national and international leader and resource for students, academics, leaders and policy makers. The graphics below demonstrate our reach locally, nationally and internationally through successful partnerships, collaborations, research projects, education and professional development and strategic work at an inter-organizational, committee and policy level.

**OUR REACH**

**NATIONAL**

- **Community Of Practice (CoP):** 200 Annually
- **Twitter:** 300+
- **CIPE Newsletter:** 1900+
- **Facebook:** 80+

Alberta
British Columbia
Manitoba
New Brunswick
Nova Scotia
Ontario
Quebec
Saskatchewan
The CIPE was honoured to be the home and Secretariat for the Canadian Interprofessional Health Leadership Collaborative (CIHLC), a multi-institutional partnership led by the University of Toronto, in collaboration with the University of British Columbia, the Northern Ontario School of Medicine, Queen’s University and Université Laval. Based on our local and national strengths in interprofessional education, the Institute of Medicine’s (IOM) Board on Global Health chose the CIHLC as one of four international innovation collaboratives from a competition of academic institutions around the world. The CIHLC’s work was supported by the five universities, as well as the Ontario Ministry of Health and Long-Term Care between 2011-2015.

The IOM’s sponsorship of the CIHLC enabled the five universities to showcase the strength and innovation of the Canadian health and education systems to an international forum of policy makers, academic experts and senior health leaders in Washington, D.C. The CIHLC was successful in internationally illustrating Canada’s leadership in interprofessional education, and through its research, delivery and knowledge transfer activities, raising the profile and importance of collaborative leadership, together with community engagement and social accountability, as a key lever to health system and education reform.

A main goal of the CIHLC was to develop, implement, evaluate and disseminate a national evidence-based program in collaborative leadership that built capacity for health systems transformation. As such, the Integrated Collaborative Change Leadership Program was created, implemented, and evaluated, in a partnership of the CIHLC and the University Health Network. This advanced program, built on the already-established CCL Program housed at the CIPE, attracted 31 senior and high potential leaders and was uniquely anchored in social accountability.

The final evaluation showed that learners rated the Integrated CCL Program to be of very high quality with many valuable concepts and pedagogical strategies. They further reported a variety of impacts including being transformed, learning a new language, acquiring new knowledge and ways of being, increased confidence, and feeling energized. This Program appeared to have set the learners on the right path for achieving transformative changes in health systems. In addition, there was evidence of considerable impact at the team and organizational level beyond the individual that would enable and catalyze health system change.

The Lancet Commission called for a new breed of collaborative leader to truly transform health systems at a global level. The CIHLC responded to this call for action to explore a much needed, and less traditional type of leadership as an effective approach for complex system transformation. While the CIHLC formally disbanded in June 2015, the CCL Program, in its enhanced form, will continue to be offered by the CIPE and UHN to health leaders across the country and beyond. The next cohort begins in October 2015.
AWARDS OF MERIT FOR EXCELLENCE IN INTERPROFESSIONAL EDUCATION

Ivy Oandasan Leadership Award For Outstanding Contributions In Advancing IPE
2013-14: Lisa Di Prospero, Sunnybrook Health Sciences Centre
2014-15: Rick Penciner, North York General Hospital

Award Of Merit For Excellence In Interprofessional Teaching
2013-14: Interprofessional Education Committee, Sunnybrook Health Sciences Centre
2014-15: Lorna Bain and Zaev Wulffhart, Southlake Regional Health Centre

Merit For An Outstanding Team That Role Models Interprofessional Collaboration For Patient-Centred Care To Learners
2013-14: Hertz Multidisciplinary Neurotology Clinic, University Health Network
2014-15: Brain Injury Rehabilitation Team, Holland Bloorview Kids Rehabilitation Hospital

Susan J. Wagner Student Leadership Award In Interprofessional Education
2013-14: Amy Dhindsa, Department of Speech-Language, Faculty of Medicine, University of Toronto
Nikki Fischer, Faculty of Medicine, University of Toronto
2014-15: Kaspar Ng, Faculty of Medicine, University of Toronto

2013–2014 Award Recipient Lisa Di Prospero, with Ivy Oandasan
2013–2014 Award Recipients Interprofessional Education Committee – Sunnybrook Health Sciences Centre
2013–2014 Award Recipients Hertz Multidisciplinary Neurotology Clinic – UHN with Dean Lising
2013–2014 Award Recipient Amy Dhindsa with Susan Wagner
The Centre for IPE team contributed to the field of IPE and IPC through selected publications, grants, as well as invited and peer-reviewed presentations below.

**PEER-REVIEWED PUBLICATIONS**


**PEER-REVIEWED PRESENTATIONS**


Careau, E., Paterson, M., Verma, S., Van Dijk, J., Biba, G., Bainbridge, L., Berry, S., Marsh, D., & Tassone, M. (2013, November). *We are all teachers and we are all learners: Program Design for Teaching Collaborative Leadership.* Poster presented at 5th International Symposium on Service Learning (ISSL), Stellenbosch, South Africa.


**GRANTS**


**BOOKS & CHAPTERS**


INVITED LECTURES AND PRESENTATIONS


**Langlois, S.** (2015, March). *Facilitating Interprofessional Groups*. Webcast lecture presented in collaboration with Islamic Republic of Iran and Faculty of Pharmacy, University of Toronto, Toronto, ON, Canada.


**Langlois, S.** (2014, May). *Advancing Interprofessional Education: The University of Toronto Experience*. Lecture presented at the University of Rhode Island’s Health Summit, Kingston, RI, United States.


**Lising, D.** (2015, June). *Collaborative Practice Matters*. Keynote address presented at Joseph Brant Hospital Collaborative Practice Week, Toronto, ON, Canada.

**Lising, D.** (2014, August). *Interprofessional Education and Care: Emerging Themes, Resources and Next Steps*. Keynote address presented at Centennial College’s School of Community and Health Studies meeting, Toronto, ON, Canada.


Tassone, M. (2014, October). *Educating Practice: Using collaborative leadership to improve health education and practice*. Invited speaker at Institute of Medicine, Global Forum Innovation in Health Professions Education,


COMMITTEES

EXECUTIVE COMMITTEE

Many 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.

Current Members

Sarita Verma (Co-Chair), Deputy Dean & Associate Vice Provost, Health Professions Education, Faculty of Medicine, University of Toronto

Brian Hodges (Co-Chair), Vice President, Education, University Health Network

Heather Boon, Dean, Leslie Dan Faculty of Pharmacy, University of Toronto

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

Faye Mishna, Dean, Factor-Inwentash Faculty of Social Work and Chair, Council of Health Sciences, University of Toronto

Tim Rutledge, President & CEO, North York General Hospital

Sal Spadafora (sabbatical in 2015)/Glen Bandiera (Acting), Vice-Dean, Post-Graduate Medical Education, Faculty of Medicine, University of Toronto

Ann Tourangeau, Associate Dean, Lawrence S. Bloomberg Faculty of Nursing, University of Toronto

Maria Tassone, Director, Centre for Interprofessional Education

Belinda Vilhena (Committee Secretary), Manager, Centre for Interprofessional Education

Former Members Between 2013-2015

Catharine Whiteside, Dean, Faculty of Medicine, University of Toronto

Zubin Austin, Academic Director, Centre for Practice Excellence, Leslie Dan Faculty of Pharmacy, University of Toronto

Robert Bell, President and CEO, University Health Network

Justine Jackson, Executive Vice–President and Chief Financial Officer, University Health Network
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.

INTERPROFESSIONAL EDUCATION AND CARE LEADS NETWORK (IPEL)

Interprofessional Education and Care Leads Network is comprised of leads from various sites across the Greater Toronto Area. This group meets to collaborate and share opportunities for the advancement, development and delivery of IPE and IPC experiences in their respective practice settings.

ACADEMIC COORDINATORS OF CLINICAL EDUCATION (ACCE)

The Academic Coordinators of Clinical Education are a group of faculty members from the University of Toronto responsible for the clinical education of students from their health science programs. Their focus is the development, coordination and oversight of clinical or fieldwork placements or rotations for students.

COMMUNITY OF PRACTICE (COP)

The Centre for Interprofessional Education’s Interprofessional Community of Practice meets quarterly to explore new innovations within our community, opportunities for collaborations and to continue the momentum and collective work within IPE and IPC in the Greater Toronto Area.
A WARM THANKS TO OUR COMMUNITY AND PARTNERS
FOR THEIR DEDICATION AND SUPPORT.

Note: A special thank you to those who contributed to the development of this report.