

University of
Toronto
Interprofessional
Education (IPE)
Curriculum
Report

2023–2024

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Executive Summary

Through the collaborative leadership of our university programs, practice organizations, and the Centre for Advancing Collaborative Healthcare & Education (CACHE), the Toronto model of interprofessional education and practice continues as an exemplar in large scale interprofessional education (IPE) curriculum innovation. Our model leverages our unique practice-education partnerships and creates system-ready and collaborative health professionals that can continually apply and transform foundational collaborative competencies to enhance patient/family/caregiver outcomes.

The University of Toronto IPE Curriculum employs a learner-centred and collaborative approach. Its offerings are grounded in the Canadian Interprofessional Health Collaborative (CIHC) Competency Framework for Advancing Collaboration (<https://cihc-cpis.com/>). The IPE Curriculum, guided by the InterFaculty Curriculum Committee (IFCC), encompasses a combination of foundational and elective learning that occurs on campus and through experiential workplace-based learning.

The 2023-2024 Annual IPE Curriculum Report highlights the significant achievements and future directions of our IPE activities. This year, CACHE continued to foster collaborative learning environments that prepare health and social care learners for collaborative practice and system transformation. The work described in this report represents the partnership and collaborations of 12 partnered health sciences programs at the University of Toronto, the IFCC, a practice network including more than 15 Toronto hospitals represented by the IPE Leaders (IPEL) Network, Interprofessional Healthcare Students' Association (IPHSA), community and patient/family/caregiver partners, and the Curriculum Portfolio at CACHE.

The implementation of a phased approach to refresh the IPE Curriculum continues to explore approaches to enhance student engagement and expand understandings of team-based collaborative care in the Foundational learning activities. CACHE also strengthened partnerships with local healthcare providers and community organizations, through new and enhanced IPE activities, resulting in enriched, clinically relevant and applicable learning experiences. For example, the Curriculum offered a new longitudinal IPE elective that addresses care for adults with intellectual and developmental disabilities. Additionally, CACHE continues to grow and support the integration of patient/family/caregiver partners in the Curriculum, providing students with valuable insights into and experiences engaging in patient-partnered care. CACHE remains committed to preparing health and social care students who will enter the workforce as collaborative ready practitioners.

CACHE extends its gratitude to all the faculty, practice leaders, students, patient/family/caregiver partners, and community collaborators who have contributed to the success of the IPE Curriculum. Their dedication and support have been instrumental in advancing the vision of a continuously co-created, integrated, evidence-informed IPE Curriculum.

This report highlights our progress through continued innovation and excellence in IPE this last academic year. The format of this year's report focuses on stories and examples of our values while evaluation data continues to be reviewed by and inform curriculum decision making through our IFCC.

Message from the Associate Director, Academics, Sylvia Langlois



As the academic year draws to a close, it is a time for reflection on our experiences to date and anticipation of exciting new possibilities. The Interprofessional Education (IPE) Curriculum was offered to approximately 4500 students from the university's 12 health and social care profession programs. This year, the Curriculum included nine Foundational and 69 unique elective learning activities, aimed at supporting the growth of collaborative competencies required by a healthcare system with evolving needs.

Partnerships play a crucial role in the development, implementation, and evaluation of this well-recognized Curriculum. Program faculty representatives bring tremendous educational expertise; clinical faculty ensure that Curriculum meets the evolving requirements of clinical contexts; patient/family/caregiver partners bring relevance and provide meaningful learning experiences for our learners; student leaders embody passion for relationship-focused care and a commitment to supporting their peers through collaborative practice; and education scientists support mobilization of evidence-informed approaches to education design and delivery.

During the past year, we have collectively focused on refreshing the Curriculum, attending to equity, diversity, Indigeneity, inclusion, and accessibility; continuing engagement with our patient/family/caregiver partners; considering the diversity of teams and how they are conceptualized and operating; integrating education and practice; and prioritizing meaningful learning experiences. These principles will continue to shape curricular offerings and will drive envisioning of new experiences that are responsive to health, social care, education, and community needs.

Collectively, we can prepare collaborative-practice ready graduates who have the skills and knowledge needed to support the transformation of a healthcare system that is currently in crisis. Their ability to lead with compassion, innovation, and resilience will advance much needed changes.

Looking ahead to the 2024-2025 academic year, CACHE aims to expand community engagement by increasing opportunities for students to participate in community-based projects and initiatives, such as through student-led environments and the Senior Interprofessional Design projects. To foster collaborative leadership competencies, the Longitudinal IPE Facilitator Training (LIFT) Program for first year students will launch in the upcoming academic year. LIFT will provide students with in-depth training in education science principles and effective facilitation, followed by opportunities to apply their learning in practice by leading and facilitating Foundational IPE activities. As always, there is a continuous improvement of the Foundational and elective offerings by engaging in ongoing curriculum review and development to ensure alignment with evolving healthcare needs and standards.

Finally, we will consider how to nurture the growth of learning opportunities in practice settings, including hospitals, schools, and community organizations. Student-led environments are an education model that addresses identified gaps in the workplace and fosters the development of collaborative leadership skills. The University of Toronto IPE Curriculum community will consider expansion of these successful experiences to other settings in the coming years, developing collaborative leaders who are impacting the system.

Curriculum Refresh

In our 2022-2023 report, we highlighted initial changes from the Curriculum refresh, such as the shifts in language from the term "Core" to "Foundational" activities. The change to "Foundational" expresses the interconnectedness of the activities with the elective offerings.

As part of this refresh, the Year 1 Foundational activities have also been renamed:

- "Teamwork: Your Future in Healthcare" is now titled **"Why Collaborative Healthcare? Learning from Stories and Science"**;
- "Roles of Health Professions and Team Dynamics" is now titled **"Who are your Collaborators? Valuing What We Do and Challenging What We Think"**;
- "Understanding Patient/Client Partnerships in a Team Context" is now titled **"Cultivating Team Partnerships: Learning from Lived Experiences"**.

As Stella Ng, CACHE Director & Scientist, highlighted during the 2023 Curriculum Planning Meeting, "Language is social action – when we change our language, we change possibilities." For instance, the renaming of the activities moves from foregrounding competencies to highlighting their utility in enhancing practice. The Canadian Interprofessional Health Collaborative (CIHC) Competency Framework for Advancing Collaboration encompasses six domains that are intended to be integrated with one another and with clinical and domain expertise, and this integration has always been the intent of the IPE Curriculum. The recent renaming of Foundational activities makes this integrative effort more explicit, and the practical relevance of activities more accessible to learners. These new titles further highlight the importance of collaboration in health and social care, emphasizing and valuing the learning that happens by integrating personal stories and experiential knowledge, and openness to exploring and understanding different perspectives. Some additional changes have been made to the year 1 Foundational activities, including revisions to learning objectives and streamlining small group discussions to foster deeper reflection and engagement. These changes are driven by a commitment to enhance learner engagement, incorporate evidence-informed teaching approaches, and enact principles from the IPE Curriculum refresh.

The Curriculum refresh continues to be a phased approach, with ongoing work concentrating on redefining and enhancing the foundational building blocks of the Curriculum. Looking ahead, in addition to renaming and revision of the Year 2 Foundational activities, the integration of the [refreshed CIHC Competency Framework](#) in all Foundational and elective activities will be a priority. Additionally, the Foundational working groups are exploring more active learning projects to provide students with hands-on experience in collaborative work to deepen the understanding and application of collaborative practice competencies.

IPE Curriculum Highlights

The University of Toronto (UofT) continues to advance interprofessional education (IPE) and collaborative practice through a variety of innovative IPE Curriculum activities and certificate programs. This section of the report highlights several key initiatives, each contributing to the development of well-rounded healthcare professionals equipped with the skills necessary to work effectively and collaboratively across health and social care settings. From immersive workshops to specialized certificate programs, these activities emphasize our commitment to fostering a culture of teamwork, empathy, and shared expertise. The stories that follow explore the remarkable achievements and experiences that exemplify the strength and success of the UofT IPE Curriculum initiatives.



ECHO Ontario Adult Intellectual & Developmental Disabilities (AIDD)

New IPE longitudinal elective learning activity. Enhancing Care for Adults with Intellectual and Developmental Disabilities

Written by: Gabriel Tarzi, Year 3 Medicine Student, Temerty Faculty of Medicine

During the winter term, 80 students across 10 health sciences programs came together for a three-part series, ECHO Ontario Adult Intellectual & Developmental Disabilities (AIDD). Championed by Gabriel Tarzi, 3rd year Medicine student and Dr. Yona Lunsky, Scientific Director of the Azrieli Adult Neurodevelopmental Centre and Director of the Health Care Access Research and Developmental Disabilities Program at the Centre for Addiction and Mental Health (CAMH), this new IPE elective addresses the intersection of intellectual and/or developmental disabilities (IDD) and mental health concerns.

Over the three sessions, facilitated by Gabriel, three patient partners and an interprofessional roster of clinicians from CAMH, Surrey Place, and Project ECHO, students were provided with an introduction to supporting the health of AIDD, team-based trauma-informed care, and promoting physical and mental health in adults with developmental disabilities. In the first two sessions, the ECHO team presented a case that students discussed and analyzed in breakout groups, developing collaborative suggestions on how to best approach care for the patient and their family. The final session featured a case presented by one of the participating students, enriching the experience for all learners. Noted in the evaluations "...listening to a peer present their experience working with a very complex case and how they were unable to understand why certain things happened was very interesting to learn about and caused me to reflect on how I might feel and act in a similar scenario." Throughout the series, students had the invaluable opportunity to hear directly from two adults with IDD and a caregiver, who shared their lived experiences.

Dr. Yona Lunsky highlights the importance of the activity and shared, “We think it is a lovely story because of the engagement and leadership from an IPE student in the Faculty of Medicine, and the inclusion of people with lived experience as teachers. This also fits within the equity, diversity, and inclusion focus in our Faculty.”

Gabriel’s Perspective:

My involvement and interest in working with individuals with intellectual and developmental disabilities (IDD) began at a young age, and having a family member with IDD gave me early experiences with this population. What initially started as simply spending time with family and helping care for my cousin with autism, my interests developed into an awareness of the challenges that individuals with developmental disabilities and their caregivers face in our society. During my medical training, I began to notice the gap in medical education regarding care for individuals with IDD and this inspired me to try and make a change to ultimately improve the care that individuals with IDD receive. I began to work with Dr. Yona Lunsky at the Azrieli Adult Neurodevelopmental Centre, CAMH on medical education projects to address the educational needs of medical students with regards to caring for adults with IDD. Through this, we found that students ultimately had little training and they did not have much interprofessional experience. This was a big gap since interprofessional skills are crucial to care for populations, such as AIDD, who are supported across health and social sectors.

Project ECHO, which has been offered by CAMH for practitioners, is an interprofessional collaboration model that utilizes a “Hub and Spoke” model of teaching that has a “Hub” of experts across different professions that interact with “Spokes” of interdisciplinary professionals through didactic and case-based learning. This model encourages an “all teach, all learn” philosophy so that all participants are learning and teaching. A unique aspect of Project ECHO is the involvement of individuals with lived experience of IDD as teachers, part of the “Hub.” I have been fortunate to observe Project ECHO and knowing how well it worked, I proposed offering it to trainees given there was a need for further training and interprofessional collaboration. Dr. Lunsky was very enthusiastic about this project. She gave her complete support to offer Project ECHO to trainees and we were able to offer a pilot program in summer 2023. The pilot Student ECHO was a great success with 50 students enrolling in the program. Survey data showed high satisfaction and positive impacts on knowledge and self-efficacy in caring for individuals with IDD.

As a UofT student I was very familiar with the IPE program and thought this was a perfect opportunity to expand Project ECHO and offer it to a wider audience of students. Once again, Dr. Lunsky was fully supportive of this program and we were able to offer the three-session program, in collaboration with CACHE, to 80 students from 10 health sciences programs. I was truly humbled by the willingness and engagement of the students to collaborate with one another and expand their knowledge. From being a student in the IPE Curriculum to facilitating an IPE elective, I really appreciated the opportunity to create the changes I wanted to see in health professions education.

My hope for Project ECHO is to continue to expand and to develop health professionals’ skills in interprofessional collaboration to ultimately improve the care that adults with IDD receive with respect to mental and physical health. As a student myself, I truly believe this is a wonderful way to learn and I hope that other students take inspiration from the Project ECHO model to apply it to other populations.

Gabriel Tarzi is a third-year medical student at the Temerty Faculty of Medicine, University of Toronto, with a profound interest in improving care for individuals with intellectual and developmental disabilities.



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The Dream Team: An Interprofessional Approach to Treating Insomnia

Written by: Ayman Lakhani, PharmD Candidate, University of Toronto

March is Pharmacy Appreciation Month (PAM), an opportunity to recognize pharmacy professionals' contributions to healthcare. In honour of PAM, pharmacy student leaders across the country, as members of the Canadian Association of Pharmacy Students and Interns ([CAPSI](#)), host various events to promote public and healthcare professionals' awareness of the role of pharmacists in interprofessional care settings. For the second year in a row, the University of Toronto (UofT) and University of Waterloo (UWaterloo) CAPSI branches collaborated to host an IPE event for their respective student bodies.

This year's event was titled "The Dream Team: An Interprofessional Approach to Treating Insomnia." Insomnia is a sleep disturbance related to sleep quality or quantity, and is the most prevalent sleep disorder worldwide. The complexities associated with insomnia - and the evolving methods of treatment, including prioritizing nonpharmacological management - warrants interprofessional collaboration between an individual's healthcare team.

The objective of this IPE learning activity was for the health professions students to develop an appreciation for and understanding of the roles and responsibilities that different professions play in the care of patients. Namely, students learned how to individualize and communicate care for insomnia between professions and with patients.

The IPE learning activity was hosted on March 14, 2024. In total, 96 students participated, representing a variety of programs including Nursing, Medical Radiation Sciences, Medicine, Pharmacy, Speech-Language Pathology, Dentistry, Occupational Science & Occupational Therapy, and Social Work. The activity began with a case presentation, depicting the experience of a patient with insomnia navigating an interprofessional care setting. Fourteen student facilitators led interactive breakout groups in which students worked through discussion questions. Interactivity and IPE was optimized by ensuring a variety of professions were represented in each room. Students had the opportunity to 1) clarify their roles and scopes of practice, 2) identify instances where interprofessional care could improve patient outcomes, and 3) reflect on their own values including accountability, respect, and trust as it related to an interprofessional team setting. Students then reconvened and the invited panelists led a large group discussion while sharing their own insights.

Student feedback on the IPE activity was overwhelmingly positive. Participants felt engaged when they had the chance to share how they could collaborate with other professions, and appreciated the panelists' insight on tailoring healthcare interventions to the individual patient. Students were interested not only to learn of other professions' scopes of practice, but also the ways in which they could specialize within their own professions, such as acquiring Cognitive Behavioral Therapy (CBT) training. Given the positive feedback, UofT and UWaterloo pharmacy student leaders aspire to continue to host such events, and to invite panelists from varying practice settings to future activities.

We would like to thank Lara Ali and Samir Kanji, 2nd year students at the UofT's Leslie Dan Faculty of Pharmacy for spearheading the planning of this IPE activity, including filming the patient case, recruiting panelists and facilitators, and preparing presentation slides for the event. We would also like to acknowledge Chiquitah Antle and Cassandra Van Drunen of UWaterloo, and Ayman Lakhani and Meriam Salih of UofT, for coordinating PAM initiatives at their respective schools, including the promotion and facilitating of this activity. We would like to express our sincere gratitude to Dr. Sadaf Faisal, Dr. Ashlee Brunt, Dr. Vinita Arora, and Mary Dixon-Bourque for

joining us as panelists and providing their valuable insights. Finally, we greatly appreciate Nolan Barkhouse, Vice President Professional Affairs of CAPSI and pharmacy student at Dalhousie University for preparing this year's IPE case and discussion questions.

Health Impacts of Climate Change: An Interprofessional Response

Written by: Sylvia Langlois, Associate Director, Academics, Centre for Advancing Collaborative Healthcare & Education

Climate change poses a significant threat to global health, necessitating a comprehensive and collaborative response from the health and social care sectors and educators. An interprofessional response equips learners to leverage their diverse expertise to develop and implement effective strategies to mitigate and adapt to climate-related health challenges. During the 2023-2024 academic year, the University of Toronto (UofT) Climate Impact Working Group (with representation from patient partners, faculty experts, students, and clinicians) revised the curriculum and added a third component to this interprofessional elective offered to students across 12 UofT health and social care programs.

Part 1 provides foundational knowledge on planetary health and health consequences of climate change (specifically heat/air quality). Students discuss the key environmental, social, and health inequities disproportionately impacting at-risk communities and populations. Emphasis is placed on how systems and structures create health inequities and exacerbate impacts of climate change for marginalized communities.

Part 2 offers an exploration of evidence-based strategies for effective climate change communication, including approaches to conveying climate change information to patients/clients and the impact of narrative storytelling strategies. By mastering these strategies, students are better equipped to engage in conversations that motivate individuals to adopt healthier behaviours contributing to climate resilience and overall well-being.

Part 3 aims to foster a deeper understanding of actionable approaches to healthcare sustainability. The session encourages students to think about mitigation and adaptation strategies they can implement to enhance the sustainability of their healthcare practices. Emphasis is placed on the state of the healthcare system's contributions to climate change, and practice-level changes that can be applied locally by all.



A curated bank of supplemental resources encourages students to delve into a collaborative response to climate related health impacts.

Evaluation results are strong, with students recognizing the important role they play in addressing climate-related health concerns. The program is supported by the UofT Adams Sustainability Student Grant awarded to Andrea Alves, Gurleen Kaur, and Amanda Hage-Hassan in 2022.

Collaboratively Artistic: The 2023-2024 Interprofessional Health, Arts and Humanities Certificate Program

Written by: Donald Bettencourt, Education Coordinator, Centre for Advancing Collaborative Healthcare & Education

The Interprofessional Health, Arts and Humanities (IP-HAH) Certificate Program is a partnership between the [Health, Arts and Humanities Program](#) and the Centre for Advancing Collaborative Healthcare & Education (CACHE) at the University of Toronto. The aim of the certificate program is to foster the development of collaborative, patient/client-centred care skills as well to promote self-care in health professions students. The program is designed to advance a deeper understanding of health, illness, suffering, disability, and the provision of healthcare by creating a community of scholars in the arts, humanities, and clinical sciences.

Program Highlights



This year we welcomed Dr. Sarah Kim as Co-Director of the IP-HAH Program, along with Sylvia Langlois. Sarah is an Assistant Professor in the Department of Family and Community Medicine at the University of Toronto. She serves as the Health Humanities Theme Lead for the Temerty Faculty of Medicine and heads the [Program in Health, Arts & Humanities](#). Within her medical and teaching practice, Sarah integrates the arts and humanities, mindfulness, and movement education as generative components of resiliency and compassion-based care. Her investigations examine the relationship between high performance and historical ideas around the body, exploring embedded hierarchies and the intersection of humanness within industrialized systems. Sarah's method cultivates a non-intrusive approach, inviting dialogue and positive affirmation of the full spectrum of the human experience that support the development of a well and resilient healthcare force, the foundation of a robust and compassionate healthcare system.

The program once again welcomed a cohort of learners from across 10 health science and social care programs, including Medicine, Nursing, Pharmacy, Dentistry, Physical Therapy, Medical Radiation Science, Occupational Science & Occupational Therapy, Speech-Language Pathology, Social Work, and Spiritual Care.

The program featured two units:

- Unit 1 - Narrative-Based Healthcare (unit coordinators: Alisha Kaplan and Jane Zhao). This unit explored relational dimensions of practice (relationship to oneself, patients, team members, and healthcare system) through narrative and provided a foundation for cultivating narrative humility.
- Unit 2 - The Performance of Healthcare: How Creative Play Can Enhance Collaboration, Develop Embodied Presence, and Encourage Supportive Practice (unit coordinator: Hartley Jafine). This unit explored theatre and improv as an embodied relational-centred practice for the purposes of communications skill building, reflection, self-care, and innovation in healthcare.

The program closed with inspirational group presentations by the students that summarized their educational journey. Samples of the group projects can be seen below.

The IP-HAH Certificate Program provides an introduction to an interprofessional narrative medicine community of practice that uses creative arts to cultivate embodied presence, receptivity, and the ability to reflect and communicate in an authentic, empathic, and effective way in the face of illness, trauma, and one's own and others' suffering. The program successfully inspired learners to employ arts-based modalities to enhance reflection, deepen collegial dialogue, and explore creative options for renewal to maintaining wellbeing and resilience across the relational continuum from self to systems.

Below we share an example of one student group’s reflections on their final projects and program experiences.

Waves of Healthcare: Lesson from the Ocean

Piece originally published in Together: Stories of Collective Impact (Volume 2.2 Spring 2024), An International Magazine by CACHE

Art by: Dana Asbury (Nursing Student, University of Toronto); Saba Aslani (Medicine Student, University of Toronto); Mariam El-Diraby (Pharmacy Student, University of Toronto); Dorsa Fathianpour (Physical Therapy Student, University of Toronto); Gagan Purba (Pharmacy Student, University of Toronto)

Being in medical professional training and clinical placements can feel like: treading water, being thrashed by tidal waves, crushed by pressure, chaos, sinking, and terror.

The Interprofessional Health, Arts and Humanities (HAH) sessions have been like intermittent rafts, balance, paths in the sea, and lights in a harbour. HAH and the skills we’ve learned in perspective taking, cultivating curiosity, and seeing/hearing/ making things we didn’t or couldn’t see/hear/make before, helped us experience the ocean as possibility—a place to practice teamwork, full of life and death, of trajectories and altered courses, a place that in its tumult can cultivate flexibility and responsiveness. Still, it can be scary and dangerous and risky and consume us.

This three-panel piece titled Waves of Healthcare: Lessons from the Ocean is our group’s effort to creatively represent our varied experiences navigating health professional training (metaphorized as ocean) as first-year students in physical therapy, medicine, nursing, and pharmacy. The ocean—and health professions training programs—can feel like crushing pressure and chaos just as much as they can be sites for exploration, possibility, and generative transmission.



Panel 1 uses paint, marker, and modeling clay to depict an interprofessional team holding hands and pulling struggling colleagues to shore through supportive relationships. This panel asks, what do we gain when investing in interprofessional collaboration? This piece reflects the themes we returned to throughout the program—interprofessional exchanges and creating supporting relationships.

Panel 2 features paint and magazine clippings to sketch a long calm path through a turbulent parted sea. This piece calls us to keep perspective on our goals and commitments whenever we feel overwhelmed in our practice and health care encounters.

Panel 3 is a mixed media painting/collage of acrylic paint, magazine clippings, reflective beads, torn exam gloves, and excerpts from Arthur Kleinman’s *The Illness Narratives* arranged to depict a deep-sea scape with lessons, reflections, and surprises flourishing in the waves. This piece asks, what becomes possible when instead of fighting transmission, we reframe and encourage it? This piece brings perspective to the word transmission: Transmission has multiple meanings relevant to health, interprofessional exchange, and patient-centred care. Often in our professional healthcare education/practice we focus on limiting or preventing





transmission of infectious agents through the use of barriers like gloves, gowns, and masks. For good reason we aim to control and contain our environments.

Also though, with the HAH program, we practiced how to enhance and expand communication and understanding within our interprofessional relationships, and between providers and patients by recognizing and removing barriers. We learned about the healing potential of sharing or “transmitting” our perspectives and personal stories to one another, in contrast to traditional models of healthcare practice where providers were encouraged to be emotionally distant or detached from patients. Panel 3 represents relinquishing efforts to control or fight against the force of the ocean so we may discover possibilities in the drifts and waves—the waves mechanically transmit us, or our ideas, from one place of potential to another.








Interfaculty Pain Curriculum Week 2024

Written by: Karen Ng & Sharona Kanofsky, Co-Chair of the Interfaculty Pain Curriculum, University of Toronto Centre for the Study of Pain (UTCSP)

In March 2024, over 1200 students from eight programs (including Medicine, Dentistry, Nursing, Pharmacy, Physical Therapy, Occupational Science & Occupational Therapy, Social Work, and Physician Assistants) took part in the University of Toronto Interfaculty Pain Curriculum (IPC). This three-day intensive curricula provided an opportunity for students to learn with and from each other about acute and chronic pain management.

Pain Week has a dual focus of foundational learning about pain through the lens of health equity as well as teaching interprofessional approaches to pain care with the patient as a core team member. Students learn through mixed formats with the components of Pain Week detailed below:

Components of Pain Week	
 <p>PRE WORK</p> <ul style="list-style-type: none"> • Pre-Work Module with: Team Norms Student Expectations and an introduction to Health Equity 	 <p>INTERPROFESSIONAL WORK</p> <ul style="list-style-type: none"> • Teams of 10 students • Creating Acute and Chronic Pain Management Plans • Facilitated Sessions
 <p>SPEAKERS</p> <ul style="list-style-type: none"> • Keynote Speaker • Panelist Speakers • Person with Lived and Living Experience Presentation • Concurrent Sessions 	 <p>PROFESSION-SPECIFIC WORK</p> <ul style="list-style-type: none"> • Hybrid delivery of pain-related content according to profession
	 <p>PAIN RESOURCES</p> <ul style="list-style-type: none"> • Modules, recorded lectures, presentations, podcast and other resources on pain • Give time to complete during IPC

Some changes this year included:

- 1) Fewer in-person sessions with only one half-day for the interprofessional sessions.
- 2) More flexibility on when and how students engage with Concurrent Sessions (live synchronous and pre-recorded asynchronous sessions available).
- 3) More focus on the patient with lived and living experience: patient partners in planning committee and within small-group facilitation.
- 4) Enhanced learner engagement by integrating students in the planning process with a student representative on the planning committee/working group and involvement in the Kickoff Activity.
- 5) Rebranding of the IPC with a UofT-aligned logo and colour palette to aesthetically unify the curriculum and represent the clear delivery and cohesive design.



The Pain Week icon represents the multidimensional approach to understanding and managing pain. At the core of the logo are three interconnected figures: care providers, educators, and, at the centre, the person living with pain. These three figures symbolize both diversity and collaboration and highlight the importance of a patient-centred approach to pain care. The flowing pages of a book represent knowledge sharing and emphasizes continuous learning and collaborative practice.

We continue to improve our curricula, using evaluation data and best practices in teaching to inform changes. Feedback from students this year shows that 90% agree that the interprofessional group work increased both their skills in collaborating with other professions and their knowledge about assessment and management of pain.

"The most useful part of this activity was having the opportunity to collaborate with students in other health professions. I enjoyed hearing their perspectives and having the opportunity to work on a case where we could all contribute to the interventions."

As we look ahead to the 2025 curricula, some considerations for future directions include:

- Streamlining and aligning IPC Pain Week learning goals and objectives with the University of Toronto's Interprofessional Education (IPE) Curriculum to create a more cohesive and focused learning experience for the students.
- Revamping Pain Week pre-work with materials that better prime and prepare students for the interprofessional work ahead.
- Enhancing student engagement by providing innovative formats for learning that allow for more choice on activities to support flexible and personalized learning experiences and offering peer-led leadership opportunities within the curricula.

Pain management remains an excellent topic for learning interprofessional care and collaboration competencies because pain is so complex, and it exemplifies the importance of team-based care. The skills that students learn from working together are highly transferable to future practice areas.

Student-Led Environments to Deliver Virtual Autism Supports for Wait-times (SLED-VAST)

Part of this was previously published in the CACHE Biennial Report

Student-Led Environments to Deliver Virtual Autism Supports for Wait-times (SLED-VAST) is an IPE elective and one of the newer [Student-Led Environments \(SLEs\)](#). An SLE is an innovative educational model that provides workplace-integrated learning, alleviates system and capacity pressures, and addresses gaps in community services while nurturing the next generation of collaborative, compassionate leaders of meaningful change.

SLED-VAST was designed to build capacity in the workforce of core clinical service providers by providing autism-focused clinical education and alleviating system pressures by nurturing students as current and future leaders of change. Interprofessional cohorts of SLED-VAST learners and facilitators learn and work together, co-creating solutions to address identified gaps with community partners through projects. Learners are not only gaining knowledge and skills related to autism, they are learning about autism interprofessionally, coming to understand and integrate understanding of autism *through* other professional lenses. Learners involved in SLED-VAST worked on two projects which will provide foundational supports for autistic children and their families during wait-times: (1) a strengths-based observation tool for the early identification of autism and (2) the Kids Appreciating Neurodiversity (KAN) Program to increase understanding of neurodiversity to support social inclusion in schools. These projects will be shared via the [Network for Education, Scholarship, and innovaTion in autism care \(NEST\)](#).

As an integrated practice/education model, SLED-VAST supports students' leadership and interprofessional collaboration competencies in a learning and practice environment informed by the [transformative paradigm to education](#) and the [SLED-VAST principles](#). Including two Family as Faculty, Gunjan Seth and Alifa Khan, as part of the core facilitation team role models the valuing of experiential knowledge that patient/family/caregiver partners bring and recognizing the importance of their perspectives as core team members.

The program aims to foster critical reflection; in the context of SLED-VAST, specifically around noticing and questioning (critical reflection on) current norms and assumptions related to autism (e.g. language describing autistic individuals and experiences), autism care approaches and practices (e.g. assessment tools, SOAP note and report-writing language), and structures that govern how we practice (e.g. power relations and their effects on how we relate to one another, or structures that enable or impede collaborative practice).

By creating a space to share knowledge meaningfully through dialogue and fostering [critical reflection](#) – that is, questioning, challenging, and disrupting potentially harmful assumptions and norms in practice – SLED-VAST provides students with a way to reimagine and enact more collaborative, compassionate ways of being and practicing, both for this specific initiative but also as a framework in their future learning and clinical practice.

SLED-VAST has trained 67 students so far over two years. The SLED-VAST Consortium and learners received the Ministry of Colleges and Universities' [2021/2022 Minister's Awards of Excellence in the category of Future-Proofing Ontario's Students](#), recognizing faculty and staff who have led the way in adapting programs that support new ways of learning. Read more from Holland Bloorview about [SLED-VAST capturing the Minister's Award](#). SLED-VAST represents a leading practice-education model evidenced by speaking invitations at NOSM University, Speech-Audiology Canada, and the International Congress on Academic Medicine. SLED-VAST is co-lead by CACHE and Holland Bloorview Kids Rehabilitation Hospital, in partnership with George Jeffrey's Children's Centre, NOSM University, McMaster University, UHN's The Institute for Education Research (TIER), and Western University. A larger [SLE Steering Committee](#) continues to meet regularly, advancing the science and practice of SLEs including a growing number of SLEs across Toronto Academic Health Science Network (TAHSN) and in the IPE Curriculum.



Photo on left: Farah Friesen, Gunjan Seth, Minister Jill Dunlop, Amanda Binns, Alifa Khan at the Minister's Award of Excellence, February 2023.

Reflections from learners:

"I see myself less as a student, and more and more as a member of the professional community as well. Not only being able to learn, but having something to contribute. The structure of SLED-VAST was very empowering in that way."

"People talk about safe spaces but I really felt like this was a supportive, safe space. I never felt judged like what will they think about me if I don't know anything."

"I didn't use to question anything - how is language affecting how we're seeing things in the child and how we're communicating to parents."

"This was not a waste of time. With the model of education you chose, I knew you were leading us somewhere but at same time I knew I had to figure it out myself. That's what I appreciated. You're your own teacher. You're not spoon feeding us."

Community Engagement

One of the pillars of our IPE Curriculum is a vibrant network of curricular groups that drive our mission of fostering inclusive and impactful educational experiences. Our success is built on the collaboration and dedication of diverse groups, including patient/family/caregiver partners, the InterFaculty Curriculum Committee (IFCC), and the IPE Leaders (IPEL) Network, to name a few. Each group brings unique perspectives and expertise, ensuring the Curriculum remains dynamic, relevant, and responsive to the evolving needs of our communities. The following section highlights the work of two groups within our network this past year.

The IPE Leaders (IPEL) Network: Advancing Interprofessional Education and Transforming Care

Written by: Elizabeth McLaney & Darlene Hubley, Co-Chairs, IPE Leaders Network

The IPE Leaders (IPEL) Network is a partnership between CACHE, education leaders from the Toronto Academic Health Science Network (TAHSN), and other interested partners. Through the exchange of best practices and identification of collective priorities, the IPEL Network champions the IPE Curriculum in innovative, impactful, and sustainable ways.

The IPEL Network priorities in the last year have been:

- 1) To host an event at the [Collaborating Across Borders \(CAB VIII\) Conference](#) to facilitate sharing of best practices and networking for those in practice settings that support interprofessional learning.



The IPEL Network contributed to the success of the [Interprofessional Collaboration \(IPC\) Showcase](#), which was held in Toronto on May 17th, 2023, within the larger CAB VIII Conference. The Showcase, offered jointly by Sunnybrook Health Sciences Centre, the University of Toronto, and CACHE, celebrated excellence in team-based learning,

collaborative care, collaborative leadership, interprofessional scholarship, and quality improvement. Students in the health professions who attended the Showcase received recognition towards the IPE Curriculum.

The 2023 theme was “Sharing Best Practices for Interprofessional Learning in the Workplace.” The Showcase started with 3 stories highlighting collaborative learning:

- i. The Art of Facilitation Through the Eyes of a Patient Partner & Student (CACHE);
- ii. A Collaborative Approach to Interprofessional Education Innovation: Virtual Reality Training for Suicide Risk Assessment and Opioid Overdose Response (Centre for Addiction and Mental Health);

- iii. It Takes a Village: A Collaborative Community Elevates the Student-Led Environment Experience (Holland Bloorview Kids Rehabilitation Hospital, Unity Health Toronto, University Health Network, CACHE).

After a musical break with Sunnybrook Health Sciences Centre’s “Sing Sunnybrook Sing,” attendees met in small groups to share enablers such as promoting the importance of empathy and lived experience, highlighting the patient voice as an integral part of the interprofessional team, fostering a sense of community, building collective capacity, and engaging students to further bridge the gap between theory and practice. The Showcase wrapped up with a networking event.

2) To develop a multi-organization, practice setting IPE learning activity for students focused on equity, diversity, inclusion, and accessibility as linked to the Canadian Interprofessional Health Collaborative (CIHC) Competency Framework for Advancing Collaboration.

While systems of oppression have always existed, with bias and discrimination leading to adverse health effects, the world was changed in May 2020 by the murder of George Floyd which increased much-needed focus on anti-Black racism and structural oppression. Studies highlighting how COVID disproportionately affected disabled and BIPOC populations further pushed healthcare systems to recognize systemic inequities. In response, there was a rise in equity, diversity, inclusion, and accessibility (EDIA)-based education for healthcare faculty members and uniprofessional groups of students. What remained missing was attention to how EDIA concepts and systems of oppression relate to collaborative practice in clinical settings.

In the summer of 2022, the IPEL Network and CACHE created a working group to design an IPE elective attending to EDIA principles within a clinical healthcare team environment. We aimed to create space for learners to examine and reflect on existing clinical experiences, attending to both EDIA principles and collaborative practice competencies.

Informed by the transformative paradigm of education, we as educators were also transformed. The design process was not a linear journey as the team took time to critically reflect on our perspectives and re-examine instructional approaches. Working group members were supported by expert consultants and by partnering with individuals with lived experience. We examined our own positionality, unpacked biases and assumptions, and problematized notions of “safe space” for learning. Working group conversations reflected on who was missing as part of the design process and what members were noticing and feeling. Throughout the pilot and subsequent iterations, facilitator debriefs were key to allow responsiveness in design and delivery.

Since the EDIA IPE elective began, six institutional sites have partnered and created spaces for dialogue and reflection with learners from over 10 different health professions. We recognize that the journey taken as a working group will need to ongoing changes and considerations as we continue to expand and deliver this IPE elective.

Reflections from learners:

- *“These sessions fostered my courage to confront some of the systematic and collaborative challenges we find as some of my colleagues in this IPE session have done.”*
- *“Language is extremely important and has a large impact on communication. I will be more aware of my words in the future to ensure my relationships thrive.”*
- *“All students were able to share their experiences in the clinical setting regarding EDIA. Their experiences made me feel like I could relate to theirs, and learn how to approach different situations appropriately.”*

Reflections from facilitators:

- “...understanding EDIA is on a continuum – with no end point and we just need to get going. If we wait to feel comfortable or unafraid, before engaging, we will never get started.”

3) An additional and ongoing area of focus for the IPEL Network has been to share accountability in optimizing system capacity for practice-based IPE learning activities. The IPEL Network supports (i) Foundational activities such as the IPE Component in a Practice Setting (structured or flexible models), (ii) innovations in education such as Student-Led learning Environments (SLEs) and, (iii) practice-led IPE elective learning activities. The following example from Holland Bloorview Kids Rehabilitation Hospital (Holland Bloorview) provides a tangible example and highlights the ways in which the IPEL Network continues to contribute to the IPE Curriculum in a collaborative way.

Holland Bloorview collaborated with CACHE, the Interprofessional Healthcare Students’ Association (IPHSA), people with lived experience, patient educators, clinicians, and community partners (Province of Ontario Neurodevelopmental Disorders Network [POND] and Ontario Brain Institute [OBI]) to co-create a new practice-led IPE elective that addresses the gap in mental health care for neurodivergent youth. Using an art and humanities-based framework, students in the health professions participated in viewing digital stories written by youth and engaged in facilitated dialogue about mental health care in the activity titled, “Mental Health is Everyone’s Business!” Preliminary evaluation data underscores student interest in the topic as a means to develop collaborative competencies and student hope for better interprofessional and system collaboration.

In the coming year, the IPEL Network looks forward to:

- i. Continuing to deepen our learning about EDIA and reflecting on opportunities to bring elements into our work and contexts. For example, we will continue to broaden the number of practice settings participating in the EDIA IPE elective.
- ii. Extending our collaboration with respect to ongoing evolution of curriculum elements happening in practice settings and support alignment with academic components. For example, we will partner with CACHE to co-chair a new working group focused on IPE in practice settings and co-develop a graphic representation of the IPE Curriculum which will aide translation of these concepts in the practice setting by providing an at-a-glance overview of the UoT IPE Curriculum components.

Patient, Family, Caregiver Partners

Written by: Elizabeth Cadavid, Interim Curriculum Supervisor, Centre for Advancing Collaborative Healthcare & Education

At CACHE, we value working collectively and learning together with all who are involved in health and social care across sectors. This includes the 12 health and social care profession programs and students at the University of Toronto, students beyond UofT, our education, practice and research communities, and importantly, those with lived experience. At the heart of our healthcare ecosystem are the patients, family members, and caregiver partners who inspire future health and social care providers to advocate for patients/clients and families/caregivers to be recognized and included as active partners on the team, and to practice in collaborative, relationship-focused ways, such as ensuring patients/families/caregivers are engaged in shared decision-making processes. Patient/family/caregiver partner involvement helps to bridge the gap between theory and practice. They inspire future health professionals to see beyond diagnoses and treatments—to recognize the human beings living with the conditions. Our students learn not only from textbooks but from patient/family/caregiver partner stories—through narratives etched with resilience, compassion, and authenticity. Their lived experiences shape our students’ understanding of holistic care, cultural competence, and the importance of effective communication. The patient partner program has been instrumental in

integrating real-world experiences into the IPE Curriculum, providing invaluable insights that shape our approach to IPE and the students' future collaborative practice.

This past 2023-2024 academic year, we are proud to highlight activities and achievements within this unique patient/family/caregiver program.

On September 27, 2023 we hosted our **annual kick-off event** – this is a free information session for patients, families, and caregivers in the community interested in engaging with the University of Toronto's (UofT) Interprofessional Education (IPE) Curriculum. Participants heard from a family/caregiver partner, Amy, who shared their experience as a patient partner with CACHE, and two UofT students, Alex and Athena, who shared their experience in learning from patients, family members, and caregivers, as well as the importance of patient/family/caregiver partner involvement in health professions education. We had 60 new patients, family, and caregiver partners attend, a huge uptake compared to the 15 folks who attended in 2022. The kick-off event will continue as an annual information session as we look to expand and diversify our community of partners and educators with lived experience of the health and social care system.

On November 8, 2023, in the Schatz Hall of the Michener Institute of Education, Jennifer Boyle (Patient Partner), Janet Rodriguez (Patient Partner), and Elizabeth Cadavid (Interim Curriculum Supervisor) were present on behalf of CACHE's Patient/Family/Caregiver Partner Advisory Committee to accept the **UHN Local Impact President's Patient Partner Award**. This award recognizes a group of Patient Partners who contribute their time to help deliver the best patient-centred care possible. [Read more about this achievement published in *Together: Stories of Collective Impact* \(Volume 2.2 Spring 2024\), An International Magazine by CACHE.](#)



The Health Mentor Program, hosted in November 2023, is designed to engage students from health and social care programs in a longitudinal experience involving multiple encounters with a health mentor (patient/family/caregiver partner). Patient/family/caregiver partners who live with a variety of chronic health challenges are empowered to share their experiences navigating the health and social care system. Through a simulated team interview, students develop an understanding of the impact of chronic health challenges, as well as an understanding of the unique roles of the various professions involved in the health mentors' experiences. The programs hosted 49 students and 10 patient/family/caregiver partners; four of these partners assumed the role of facilitator for the small student group, and six partners participated as health mentors who were interviewed by the students. The following is an excerpt from the student evaluation survey:

"Thank you for sharing your story! Even though I may not be in applicable field, listening to yours and your family's story really makes me think about transparency, public and private care, and the future of my patients, and alternative forms of care not covered in the public sector. I have been doing a lot of activities for IPEs and this is the first one that felt real, if that makes sense. All the best to you and your family!"

In December 2023 we hosted the **Storytelling Workshop** which helped patient/family/caregiver partners to understand the power of storytelling and approaches to sharing lived experiences in education. In total, 32 of 47 registrants attended, compared to a much smaller group of eight partners who attended in 2022.

In January 2024, we hosted another learning opportunity for the patient/family/caregiver community through the **IPE Facilitator Workshop**. This workshop supports the preparation for those who facilitate IPE activities, gaining exposure to different facilitation models and enhancing their skills and strategies as an IPE facilitator.

This workshop welcomed 54 participants, 22 of which were patient/family/caregiver partners. This number represents the growing interest in patient/family/caregiver partners as facilitators in health professions education. As this group of patient/family/caregiver facilitators continues to expand, this past year 28 partners acted as facilitators across 27 IPE learning activities.

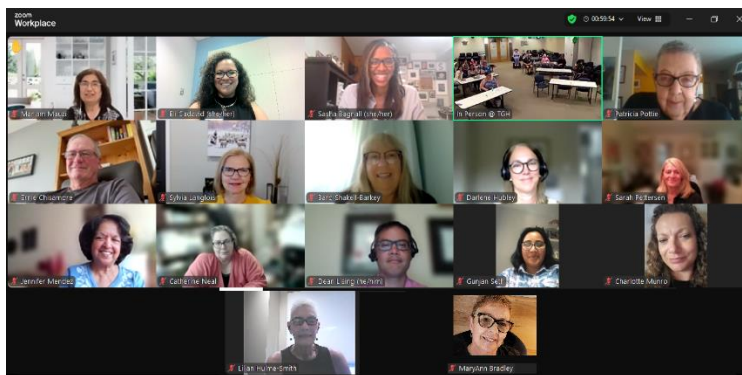
Also in January 2024, we held our annual IPE Foundational activity **“Cultivating Team Partnerships: Learning from Lived Experiences”** which hosted over 950 students and 37 patient/family/caregiver partners. Through this activity, students explore partnerships with patients, family members, and caregivers in a team context by learning from a patient/family/caregiver partner and by engaging with a Reader’s Theatre script on partnership. The following are two excerpts from the student evaluation survey:

“[the activity] made me more aware of the impact healthcare professionals have on patients - what may seem like a daily mundane thing to us can hold a lot of significance to patients, so be aware to be considerate and empathetic at all times.”

“Thank you for having the courage to come forth and share your story to help us learn and better the future of healthcare.”

On May 1, 2024 we held our second **Patient Partner Showcase Event**, co-led by Kateryna Metersky (Patient Partner) and Jennifer Boyle (Patient Partner). There were 14 patient/family/caregiver partners who shared and highlighted their professional and personal talents, work, and activities which extend beyond their contributions to the IPE Curriculum and CACHE. We learned about woodworking as a self-care method; writing to time-travel; multiple areas of expertise including philanthropist, athletes, poets, artists, vinyl collector, authors, vintage clothing creator and model, and a wedding officiant; and someone who developed and patented the world’s first blind spot sensors for wheelchairs. Imagine what this list would look like if all 150+ patient partners showcased their work and talents. This also supports learners and clinicians to develop a holistic view of every patient/family/caregiver, as a human being, beyond a clinical context.

On July 9, 2024 we hosted our annual **Appreciation Event** in a hybrid format, bringing together patient/family/caregiver partners who have engaged and contributed to the IPE Curriculum and CACHE this past year. This annual event has been essential in recognizing and emphasizing the invaluable contributions of patient/family/caregiver partners in healthcare and health education. These partners play a vital role in enhancing the learning experience of health professions students and healthcare workers, and in contributing to research and innovation, toward a more compassionate, person-centred, and excellent healthcare system.



Photos above: Sub-group of the patient/family/caregiver partners who attended the Hybrid Appreciation Event, July 9, 2024.

We express our deepest gratitude to our patient/family/caregiver partners for their invaluable contributions to the IPE Curriculum. Their willingness to share their experiences, insights, and perspectives has a profound impact on the students' learning journey. Through their stories, challenges, and resilience, they enrich the students' understanding of patient-centred and more importantly, patient-partnered care, empathy, and collaboration. Their generosity in sharing their time, wisdom, and vulnerability is a gift that transforms our students into compassionate, competent practitioners. Together, we create a more empathetic and patient-centred healthcare system—one where collaboration thrives, and patients are truly at the heart of everything we do.

Thank You!

On behalf of the Centre for Advancing Collaborative Healthcare & Education (CACHE), we extend our gratitude to all our partners and collaborators who have significantly contributed to the development and success of the IPE Curriculum and for sharing their stories for inclusion in this report.

The success of these initiatives is a testament to the collaborative spirit and shared commitment to advancing IPE and collaborative practice. The community's passion and hard work inspire and enable students to thrive in diverse, inclusive, and supportive learning environments. Thank you for making these stories and the IPE Curriculum truly exceptional.

Thank you again for your many contributions in advancing IPE this 2023 - 2024 academic year! We look forward to another wonderful year of partnerships and collaboration ahead.

Resources

Canadian Interprofessional Health Collaborative

<https://cihc-cpis.com/>

- 2024 Refreshed Competency Framework: <https://cihc-cpis.com/new-competency-framework/>

Canadian Association of Pharmacy Students and Interns

<https://capsi.ca/>

CASCADES Canada - Creating a Sustainable Canadian Health System in a Climate Crisis

<https://cascadescanada.ca/>

Centre for Advancing Collaborative Healthcare & Education (CACHE)

<http://www.ipe.utoronto.ca>

- CACHE 2021-2023 Biennial Report: <https://bit.ly/CACHEBiennialReport2021-2023>

Interprofessional Health, Arts and Humanities Certificate Program

<https://ipe.utoronto.ca/interprofessional-health-arts-humanities-certificate-program>

Project ECHO: Adult Intellectual & Developmental Disabilities

<https://camh.echoontario.ca/programs-aid/>

Student-Led Environments (SLE)

<https://ipe.utoronto.ca/sle-steering-committee>

***Together: Stories of Collective Impact* - An international magazine by the Centre for Advancing Collaborative Healthcare & Education (CACHE)**

https://ipe.utoronto.ca/Together_CACHEMagazine

University of Toronto Centre for the Study of Pain

<https://utcsp.utoronto.ca/>