

IHPME CONNECT 12.2016



COMMITTEE TO EXPLORE INSTITUTE'S ROLE IN RESPONDING TO CLIMATE CHANGE

An institution dedicated to scholarship, evidence-based insight and tangible improvement does not take a pledge lightly. This was reinforced when IHPME faculty member Fiona Miller started a discussion with colleagues about the 2020 Health Care Climate Challenge.

"I was seeing the issue coming up in my work around procurement – how to use demand in health care to be more supportive of the public good. It's not happening so much in Canada, but health systems in Europe and the U.S. are putting more emphasis on healthy hospitals, going green and considering social impact," says Fiona.

The 2020 Challenge was created to mobilize health care institutions around the globe to protect public health from climate change. Any hospital, health system, or health organization can join by taking a pledge. "There is strong support for the goals of the 2020 Challenge within IHPME, but faculty and administrators wanted to be sure that the Institute had a plan before signing a pledge," says Fiona.

Climate Change Committee Members

Faculty: Ahmed Bayoumi, Fiona Miller, Aviv Shachak, Tina Smith, Paul Williams

Staff: Anne Louise Pontigon Montgomery

Students: Vineeth Sekharan, Saerom Youn James Byrne

"So, we've formed a climate change committee to look at how the Institute could contribute to addressing climate change issues and impacts, as it relates to health care and public health."

The 2020 Challenge is based on three pillars, which will inform the Committee's work. One, mitigating the health sector's own emissions and impacts on climate change. Two, resilience, described as "preparing for the impacts of extreme weather and the shifting burden of disease." The third pillar is leadership — educating and persuading the public and policy leaders on measures to protect public health in the face of climate change."

The newly formed committee includes faculty, staff and students. "The response from students was great. We're very eager to also have alumni participation. We have reached out to some individuals, but we hope those interested will also come forward." The committee's first task is to prepare for a discussion at IHPME's annual strategic retreat in late January. "We want to use this forum to broaden the conversation about setting goals, defining concrete actions and identifying measurable criteria for assessing progress."

IHPME Director Adalsteinn Brown has been supportive of the committee and is encouraging the group to use the opportunity to generate further discussion on the social purpose of the Institute.

"It's a great reflection of IHPME's shared values that faculty translate what they learn working with the field to ways we can improve our impact on health," says Steini.

The committee will explore ideas on how IHPME's research capacity and educational programs can help health systems be "greener" in their operations, as well as informing broader public policy discussions on climate change mitigation and adaptation. Fiona points out that climate change is already becoming part of the conversation in health care, alongside issues like patient-centred care or health care quality.



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“Vulnerable people will be disproportionately affected by climate change, which will impact public health and see refugees arriving in wealthier northern hemisphere countries, like Canada. She cites, as an example, the Canadian Medical Association’s focus on climate change at their 2016 annual conference.

“Clinicians and others in the health care sector are trusted voices on social issues, and are relied on for insights and leadership in policy debates,” says Fiona. “The IHPME climate change committee provides the opportunity for everyone in the IHPME community to share their thoughts on how the Institute can bring its unique contributions to this profound challenge.” Anyone wishing to participate in the committee should contact ihpme@utoronto.ca.

IHPME NEWS

Providing Care While Improving Care

IHPME CONCENTRATION TRAINS MEDICAL STUDENTS IN SYSTEM INNOVATION

[Thomas Dashwood](#) was drawn to medicine out of a desire to not only treat patients but to help solve some of the underlying issues that bring patients into care in the first place. With a background that includes spending time studying and researching agriculture and nutrition in the Caribbean, he is now combining his U of T medical education with IHPME’s MSc concentration in System Leadership and Innovation (SLI). The new concentration is open to students who have started their studies in undergraduate and postgraduate medical education and want to gain a broader understanding of system innovation — including strategic thinking and planning, healthy policy and research methods.



“Health system leaders with a clinical background are in a position to bridge the experience of the clinician with a broader system approach. Clinicians experience first-hand how interventions work on the ground with a patient – what is working and how improvements can be made,” says Thomas.

SLI core courses are taught by IHPME faculty. Students choose elective courses from other University of Toronto programs to focus on their specific areas of interests in leadership and innovation. The program also includes two practicum experiences with IHPME academic and institutional partners, supervised by faculty.

[Varuna Prakash](#) came to the SLI concentration to build on a clinical engineering background, with a focus on patient safety and quality improvement, medical device usability, and patient-centred design. “The system is under financial strain while also adapting to technological advancement,” says

Varuna. “Tackling complex problems in healthcare requires a truly multidisciplinary mindset. Clinicians need to interact with multiple disciplines, and skill sets need to include a strong ability to work collaboratively.”

Before joining the MSc SLI program, Varuna worked with the Healthcare Human Factors group at University Health Network. Her first SLI practicum provided the opportunity to pursue her passion for working at the intersection of health care and technology. Working at the Women’s College Hospital Institute for Health System Solutions and Virtual Care, she helped create an “innovation incubator” — a space to try new and creative models of care, particularly for patients with complex, chronic conditions. In a second practicum, she worked with Health Quality Ontario on best practices for improving complaints handling across the province.



Thomas worked with Public Health Ontario to improve emergency preparedness networks through a social network analysis of emergency management organizations. He also worked with a team at Princess Margaret Cancer Centre exploring health care delivery models for chronic myelogenous leukemia patients, with a specific focus on shared care.

The SLI concentration can be completed on a full-time basis (one year) or on a part-time basis for those students who want to simultaneously continue their medical education. Graduates are prepared to evaluate health system innovation, conduct policy analysis and design techniques for system change. Thomas’ participation in the program builds on his work with Canadian Doctors for Medicare. “I think there is, overall, greater potential for improving outcomes for patients through innovation rather than shifting to privatization, though valuable lessons can be learned from private-sector management principles,” he says.

The SLI concentration has reinforced Varuna’s belief in the value of collaboration and the importance of physician leadership in supporting quality improvement across a fragmented healthcare system. She hopes that an education in leadership, combined with her education in engineering and medicine, will empower her to champion such efforts. “When people take the initiative to improve the continuum of care, not only does the patient experience improve, the most tangible benefit, but it also leads to improved models of care at reduced cost,” says Varuna. “Because clinicians are directly exposed to the patient experience, they see the system, first, through the experience of the individual. This can help identify opportunities for system change that leads to better outcomes for patients and also greater efficiency in the system.”

IHPME IN THE NEWS

[DLSPH, IHPME Partner with City of Barrie to Improve Population Health and Health System Sustainability](#)



Photo (from left to right): Dr. Brent Elsey, past Medical Director with the Barrie and Community Family Health Team (BCFHT); Dr. Anne DuVall, IT Clinical Lead with the BCFHT; Professor Adalsteinn Brown, IHPME; Mayor Jeff Lehman of Barrie; Anna Kazcor from Northwest Property Management; George Bitaxis from Northwest Property Management; Michael Feraday, Executive Director of the BCFHT; Dr. Eric Hoskins; and Ann Hoggarth, Liberal MPP for Barrie.

[U of T helps Jerusalem College of Technology establish health informatics program](#)

The latest Canada-Israel collaboration will launch Israel's first academic program in the cutting-edge field of health informatics.

SUPPORT IHPME

The Institute of Health Policy, Management & Evaluation, as part of the Dalla Lana School of Public Health, is the first Canadian public health school to launch its own fundraising campaign. With the support of our generous donors, our Boundless Campaign will enable IHPME to continue shaping training and research in health systems, management and policy.

For more information on how you can get involved, give annually, create a named fund, or consider the School in your estate planning, please contact **Ryan Lindsay, Senior Development Officer** at ryan.lindsay@utoronto.ca or visit [IHPME Donate](#) or [Support/Campaign](#). Thank you for your support!

PUBLICATIONS

[Silver, M.P.](#)

Canadian Family Physician

[A critical reflection on physician retirement.](#)

Young TK, Chatwood S and [Marchildon GP](#)

Healthcare Policy

[Healthcare in Canada's North: Are We Getting Value for Money?](#)

[Marchildon, GP](#)

HealthCare Papers

[Regionalization: What Have We Learned?](#)

Timilshina N, Ouellet V, [Alibhai SMH](#) et al

World U Urol

[Analysis of active surveillance uptake for low-risk localized prostate cancer in Canada: a Canadian multi-institutional study](#)

AWARDS



Congratulations to **Joseph Carson**, winner of this year's Harry and Rose Perlstein Graduate Award. This award recognizes his outstanding paper on hospital quality and safety, *Improving long term care transfer reports to the emergency department in London, ON*.

In 2016, he completed a Master of Science degree in quality improvement and patient safety at the University of Toronto. Joey's research focussed on service integration between acute and long-term care organizations. In 2015, he founded the London Transfer Project to address clinical communication gaps between ten long-term care homes and two hospitals in London, Ontario.

Over the next year, Joey is expanding the London Transfer Project to further improve health quality and safety for long-term care residents. He is also participating in the MaRS Studio [Y] fellowship program to study health innovation and systems leadership.

[Advancing Patient Safety – Reducing Alarm Fatigue in the Intensive Care Unit \(Credit Valley Hospital\)](#)

Cynthia Welton, MSc QIPS (Nov 2016) worked on a project for the MSc QIPS practicum course that won a first place quality award at Trillium Health Partners, presented during Patient Safety Week: the second annual Advancing Patient Safety Award.



LIFELINE SYRIAN CHALLENGE



The Khalaf family arrived safely and have been in Toronto since November 2nd and are settling in well. The four children are in school and the parents are taking ESL lessons five days a week. They have had general health checkups and basic dental care as well. And they are experiencing life in Toronto – the Santa Claus Parade, the Nutcracker Suite, and Aquarium to name a few outings. There was a birthday party on Sunday for the oldest boy who turned 12. The sponsoring committee wants to thank all of the DLSPH and IHPME folks who contributed time, money, clothes, toys, schools supplies and furniture to the family.

CALL FOR SUBMISSIONS

IHPME graduates are leaders in government, health care, academia and research – shaping our health care system through innovative and creative thinking and leadership.

The IHPME Society of Graduates supports and celebrates this excellence through its [Leadership, Innovation and Literary Awards](#), recognizing the accomplishments and contributions of IHPME Alumni.

IHPME Website: [Criteria & How to Submit](#)

Deadline: January 15, 2017

STUDENT NEWS

[What it's really like to be a pediatric cardiologist](#)

Q&A with Dr. Emilie Jean St. Michel, an MSc Clin Epi student.

FACULTY APPOINTMENTS

New Appointments

Peter Busch – Associate Professor, Status-Only
Mark Camp – Assistant Professor, Status-Only
Susan Chatwood – Assistant Professor, Status-Only
Maria Chiu – Assistant Professor, Status-Only
Lesley Gotlib Conn – Adjunct Professor
Michele Farrugia – Assistant Professor, Status-Only
Lilian Gien – Associate Professor, Status-Only
Shiphra Ginsburg – Professor, non-budgetary Cross
Yehoshua (Josh) Gleicher – Adjunct Lecturer
Michelle Greiver – Associate Professor, Status-Only
Anne-Marie Guerguerian – Assistant Professor, Status-Only
Susan Horton – Professor, Status-Only
Tianhua Huang – Assistant Professor, Status-Only
Monika Kastner – Assistant Professor, Status-Only
Bindee Kuriya – Lecturer, Status-Only
Lisa Richardson – Assistant Professor, Status-Only
Deborah Robertson – Assistant Professor, Status-Only
Daniel Roth – Assistant Professor, Status-Only
David Rudoler – Assistant Professor, Status-Only
James Shaw – Assistant Professor, Status-Only
Valerie Ulstad – Adjunct Professor

Renewed Appointments

Ronald Bercaw – Adjunct Lecturer
Pierre Cote – Associate Professor, Status-Only
Eddy Fan – Assistant Professor, Status-Only
Liane Fernandes – Adjunct Lecturer
Andrew Howard – Professor, Status-Only
Sindhu Johnson – Assistant Professor, Status-Only
Gerald Lebovic – Assistant Professor, Status-Only
Latifa Mnyusiwalla – Adjunct Lecturer
Gordon Rubinfeld – Professor, Status-Only
Joanne Sale – Associate Professor, Status-Only

Hold the Date

IHPME Faculty Retreat

Tuesday, January 31 | Noon - 5:00 pm

RSVP: ihpme.events@utoronto.ca



EVENTS

Breakfast with the Chiefs - Longwoods

December 7 | 8:00 am - 9:00 am | Free

(breakfast at 7:15 a.m.)

New Book: Patient Engagement - Catalyzing Improvement and Innovation in Healthcare

Authors: [G. Ross Baker](#), et al

Location: The Peter Gilgan Centre for Research and Learning, 2nd floor Auditorium, 686 Bay Street, Toronto

IHPME-GSU Lunch & Learn with Gavin Wardle

December 8 | Noon - 1:30 pm | HS 208 | Free

Gavin Wardle is a Partner at PSG and he is the firm's senior methodologist for health analytics. Gavin designs and implements ways to improve planning, evaluating, and funding health services across the continuum. Gavin will provide a brief survey of health care consulting in Ontario and describe his firm's work and staff.

Applied Workshop: Using Discrete Choice Experiments in Health Economics

February 6-8 | Banff Conference Centre, Alberta | \$

Presenters:

Dr. Deborah Marshall (University of Calgary) &
Dr. Mandy Ryan (University of Aberdeen)

Registration Deadline: January 3, 2017

Full details: www.eiseverywhere.com/ehome/192966

WE'D LIKE TO HEAR FROM YOU

We're pleased to receive submissions of 400 words or less for consideration in upcoming editions. If you'd like your event listed, please send full details.

Contact: rhonda.cockerill@utoronto.ca and
ihpme@utoronto.ca

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DLSPH Bulletin