Dr. Rob Fowler, is the 2017 recipient of the Teasdale-Corti Humanitarian Award presented by the Royal College of Physicians and Surgeons of Canada.

This award is given to a Canadian physician to acknowledge their work in health care or emergency medical services, which may have included personal risk or exposure, and went beyond the normal routines of practice.

Dr. Fowler, an associate professor at the Institute of Health Policy, Management and Evaluation (IHPME), is well-known for his first response efforts during the Ebola outbreak in West Africa in early 2014. In the midst of a one year sabbatical, during which he had chosen to work with the World Health Organization (WHO) in Geneva, he soon found himself on the front-line of what would come to be known as one of the most serious epidemics of infectious disease in modern history.

The previous method of treating patients with the Ebola virus, which causes severe dehydration in those infected, was often not aggressive enough to successfully nurse patients back to health, the common belief was that these patients were destined to die. “In the early stages of the outbreak, many health care workers and organizations were very concerned about even placing in an IV drip to sustain hydration due to the risk of infection,” says Dr. Fowler, who is also program director of the IHPME Clinical Epidemiology and Health Care Research stream at the University of Toronto.

Providing adequate re-hydration during the course of the disease proved difficult without proper equipment or clinical protocols in place, but was necessary in order to prevent critical damage to key organs such as the kidneys or the cardiovascular system.

“We thought this approach would help patients and could be done safely, so we advocated for more aggressive therapy for these patients,” says Dr. Fowler, “we then moved on to advocating for blood tests in Ebola treatment units, something that had rarely been done before as there were no lab testing facilities for these units. We wanted to see what exactly was making people sick, which organs were shutting down, and how we could effectively treat them. Essentially we advocated for the best medical care we could provide.”

Dr. Fowler alongside his colleagues from Medicins Sans Frontieres (MSF) and the WHO continued to push for a more supportive method of care that would enable the patient to rid their body of the Ebola virus on their own. Seeking to alter the management of the epidemic, Dr. Fowler and his colleagues in West Africa published on their early experience with the disease as a way to advocate for continued resources and improved care (New England Journal of Medicine). It did take many months – well into the outbreak – before clinicians working in the affected countries were able to obtain standard equipment to support acute medical care sufficiently, with only one unit in West Africa able to provide full critical care with ventilation support and dialysis machines. “These are therapies that could save people’s lives,” says Dr. Fowler, “but they are just not usually available in most West African settings.”

More on the next page...
Previous mortality rates associated with the virus and in the early stages of the outbreak, were set at 80 percent but over the course of 2014 through 2015 with an increasing amount of doctors and clinicians recruited to assist in combating the virus, in addition to Dr. Fowler and his colleagues advocacy for more supportive patient care, the mortality rate was reduced to less than 40 percent and in countries in North America and Europe, the mortality rate was reduced even further, to less than 20 percent.

“This is never an individual award, though it is a privilege to be acknowledged for this work, which speaks to the Canadian response, of which I was just a part. This is really an endorsement of the teams that do this kind of work every day,” says Dr. Fowler, noting that this was and still is a collaborative effort.

“I am humbled to be the recipient of the Teasdale-Corti Award, and to know that I am joining a list of recognized physicians who have done outstanding work in their fields.”

To learn more about Dr. Rob Fowler’s experience in treating Ebola virus patients, see this video interview.

For more information about this award visit the Teasdale-Corti Humanitarian Award website.

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Kimberly Chetwynd is passionate about three things: leadership, health system transformation, and patient care. “I worked for twelve to fourteen years in the private health sector, but I wanted to move into the public health field to really make a difference, especially with patient care management” says Chetwynd. The reason for this shift in career paths was largely due to her parents both being diagnosed with cancer, and while her mother is a survivor and cancer-free, her father succumbed to the disease. “My dad and his patient experience was the catalyst behind my decision to switch into the public health sector and to focus on complex-care management. I accompanied him on his journey with this disease and on the medical side, there were times where I thought his patient experience could have been better.”

Chetwynd felt that with innovation and leadership, system transformation was possible, and she wanted to be a part of helping health administrators see through the lens of the patient in order to provide them with better care management. The Masters of Health Science in Health Administration that Chetwynd will be completing this June, is a professional stream program that allows students the opportunity to work directly in the field through a practicum placement.
Chetwynd was placed at Sunnybrook Hospital and had the opportunity to work on stroke patient navigation, early supportive discharge, and also was tasked with interviewing geriatric patients to discover what they thought the future of senior and elder care should look like. “I was interviewing ninety-five year old patients,” says Chetwynd “and they were drawing and writing out what services the province should be offering in terms of senior and elder care. This opportunity to participate in and conduct this study, correlated with the work that Mr. Livergant was so well known for.”

Harold L. Livergant was a champion in improving the quality of care that seniors in Canada were receiving. His company Extendicare Inc, founded alongside partner John McKay in 1968, set a precedence of providing quality long-term care facilities for senior patients. “I am so grateful to the Livergant family,” says Chetwynd “for supporting health care visionaries and leaders in their field.”

Chetwynd’s current work at Sunnybrook where she is now employed, has her focused on working with primary care physicians to find ways to help them utilize telemedicine as a means of consultation with their patients. Having an interdisciplinary consultation team, working with the family to come up with a complex care plan, is something that Chetwynd sees as a prime example of system innovation.

“Winning this award, was a huge and unexpected honour,” says Chetwynd, “Mr. Livergant was a pioneer in leadership and innovative thinking. I am reminded everyday of the work that he did and it encourages me to come to work, viewing everything through a leadership lens, ready to find ways to improve the patient experience and health outcomes.”

**HEALTH SYSTEM IMPACT FELLOWSHIPS AWARD APPLICATIONS**

A new funding opportunity for post-doctoral students has arrived in the form of the Health System Impact Fellowship sponsored by CIHR and led by Dr. Adalsteinn Brown and Dr. Stephen Bornstein. There are 37 fellowships available to individuals who have graduated from a doctoral program in HSPR or another related program within the past five years. A major incentive for applicants is that this fellowship offers graduates the opportunity to work outside of academia and invites them to enhance their careers through experiential learning within a host organization. Applicants can choose to apply to a variety of health related for-profit and not-for-profit organizations, including the Ministry of Health and Long-Term Care, Health Canada, Cystic Fibrosis Canada, and Canadian Blood Services to name a few. Initial contact with a host organization must be made prior to submitting a final application to CIHR. The deadline for final applications is May 23, 2017. For a full list of host organizations and contact deadlines see: More Information

**FACULTY APPOINTMENTS**

**New Faculty**

- Mamatha Bhat – Lecturer, Status
- Karen Okrainec – Assistant Professor, Status
- Sonia Pinkney – Adjunct Lecturer
- Angela Punnett – Assistant Professor, Status
- Fahad Razak – Assistant Professor, Status
- Michelle Sholzbert – Assistant Professor, Status
- Jefferson Wilson – Assistant Professor, Status

**NEW STAFF**

We are pleased to welcome Arleen Morrin as our new Administrative and Financial Manager. Arleen has a wealth of experience in higher education having worked for over eight years in the Ontario College system, before joining the University of Toronto as a Business Manager with the Department of Obstetrics and Gynecology. Most recently she was the Department Manager for the Department of English.

Arleen has an M.Ed. in Higher Education (leadership focus) and a Certified Human Resources Leader (CHRL) designation. She is currently pursuing a Doctorate of Higher Education at OISE.

**DR. IRFAN DHALLA RECEIVES DR. MAURICE MCGREGOR AWARD**

In Ottawa on April 25, the Canadian Coordinating Office for Health Technology Assessment now known as CADTH, awarded Dr. Irfan Dhalla, Vice President of Evidence Development Standards at Health Quality Ontario, an associate scientist with the La Ka Shing Knowledge Institute at St Michael’s Hospital, and an assistant professor at IHPME the Dr. Maurice McGregor award. It recognizes individuals who are seen as rising stars in the field of health technology assessment (HTA). Dr. Dhalla is considered an emerging leader in HTA and is an advocate for evidence-based medicine in improving quality care.
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 Annette Paul, Director of Advancement at annette.paul@utoronto.ca or visit IHPME Donate or Support/Campaign. Thank you for your support!

IHPME IN THE NEWS

Health Funding: Why 12 Federal - Provincial Deals are Better than One

IHPME Student Elsie Amoako launches Mommy Monitor
A smart app to improve maternal health care for Canadian women of African, Caribbean, and Latin American descent. Full Story: http://uoft.me/31K

CCA appoints Expert Panel on Medically Assisted Dying

PUBLICATION

Bender JL, Cyr AB, Arbuckle L, Ferris LE

IHPME STORY CAMPAIGN

The Institute of Health Policy, Management and Evaluation has been the leading management and evaluation program in health services and health care research for the past 70 years.

From its early inception as the Department of Health Administration in 1947 to its current role as a leading institute, IHPME has been making progressive changes in research and leadership for many years.

We invite you to share your memories, stories, and snapshots of your time at IHPME, as we compile a collage of stories to showcase our growth and engagement with our community.

To share your story, image or text, please email: ihpme.events@utoronto.ca

Note: Materials will be shared via IHPME social media and will be presented for display at this year’s Moonshot celebration on October 24, 2017.

EVENTS

Research Day

Insight to Impact: Achieving Health System Change
May 3 | 8:15am - 7:00pm | HS 6th and 7th Floor | Free

Our annual Research Day will feature Dr. Werner Brouwer as the keynote speaker, coming to us from Erasmus University, Rotterdam. The day will begin with a panel discussion featuring:

• Melanie Barwick, Head, Child and Youth Mental Health Research Unit, Senior Scientist CHES Research Institute
• Sacha Bhatia, Director, Women’s College Hospital
  Institute for Health System Solutions and Virtual Care
• Karim Keshavjee, Adjunct Professor, Institute of Health
  Policy, Management and Evaluation, University of Toronto
• Karen Michell, Executive Director, Council of Academic
  Hospitals of Ontario (CAHO)
• Karen Tu, Senior Core Scientist, ICES Central Primary
  Care & Population Health Research Program

For a full schedule of the day’s events, visit: http://ihpme.
toronto.ca/research/research-day-2017/

CCHE Seminar Series

Tony Culyer | May 5 | 10:00am - 12:00pm | HS 100

World Health Summit of the M8 Alliance

May 8 - 9 | Palais des congrès de Montréal | $

The Université de Montréal and the Institut de recherches
cliniques de Montréal (IRCM) / Montreal Clinical Research
Institute are proud to announce that they will be hosting the
1st World Health Summit (WHS) of the M8 Alliance to be
held in North America. The world leaders in global health
will be attending this prestigious event, including over 800
researchers, doctors, industry leaders, decision-makers,
government members and civil society actors from around
the world.

Based on the theme of Health and Healthcare Delivery in
Pluralistic Societies, this interdisciplinary event will focus on
the question of human diversity in the practice, education,
research and public policy pertaining to health.

Register Online

IHPME Health Policy Rounds: Agents of
Change: the role of expert advisers in
shaping health policy Brian Abel-Smith,
1926 – 1996

May 10 | 12:30pm - 1:30pm | HS 412

Presentation by Sally Sheard : University of Liverpool

NAO Lecture Series: Brian Rosen

May 11 | 9:00am - 10:30am | HS 108

Public Policy on Dual (Public-Private) Physician Practice:
Israel and Canada Compared

This lecture series features Brian Rosen and Greg Marchildon

Dean’s Leadership Series: Maximizing Urban
Health Minimizing Climate Impact

May 31 | 5:30pm - 9:30pm | HS 610

Opening remarks by Dean Howard Hu, followed by a panel
discussion featuring:

• Paul Braitstein, Associate Prof. DLSPH & CIHR Applied
  Public Health Chair
• Peter Donnelly President & CEO Public Health Ontario
• Fiona Miller Associate Prof. IHPME & Founder of IHPME’s
  Climate Change Committee
• Ifrah Ibdilahi, PHD Student Collaborative Specialization
  in Global Health, DLSPH

Closing Remarks: Adalsteinn Brown, incoming interim Dean
doing DLSPH and Director of IHPME

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student and faculty profiles.
CALL FOR APPLICATIONS

2017-2018 COLLABORATIVE PROGRAM IN PUBLIC HEALTH POLICY

Become a part of a dynamic training and research community in Public Health Policy!

Engage with academic mentors, students and policymakers in governmental and non-governmental public health agencies to learn about real-world policy issues and public health policy agenda setting, and enhance the professional skills required to succeed in your profession.

Any student who has been accepted into a graduate-level program at the University of Toronto may apply.

For application forms and more information about the program, please visit our website or send your information request to publichealthpolicy@utoronto.ca.

Website: www.publichealthpolicy.utoronto.ca

Application Deadline: May 5, 2017 - 5:00 pm.

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 rebecca.biason@utoronto.ca