

IHPME CONNECT 09.2017

VERNISSAGE HEALTH: SUPPORTING TOMORROW'S HEALTH LEADERS

Leadership in health care is required in today's transformative and rapidly changing health system. Regardless of whether one is a clinician, manager, informatics specialist, policy advisor or researcher, being able to effectively lead and encourage system change as well as innovation is a top priority.

Our health system is a complex, changing world, and health professionals need to be able to go beyond traditional mindsets and diversify their approaches to change, a task that still poses many challenges for today's health system leaders.

Wendy Nelson is an alumna of the [Masters of Health Administration \(MHSc\)](#) program at IHPME. For over thirty years she has held senior leadership roles in healthcare and has been both a leader and active participant in transformation initiatives in the public and private sectors – in primary care, hospitals, and community health. In the early stages of her career, Nelson found that many change initiatives that appeared to be quite successful initially, were not sustained over time. “What is the difference between successful and sustainable change, and change that is not sustained or even “fails” to gain traction? It was this question in particular that inspired me to return to school in my late career and pursue a second master's degree with a focus on international health leadership,” said Nelson.

In her studies, she began to confirm some of her experience and discover new knowledge about change and transformation in complex systems, like health care.



In her work as a health care leader, Nelson had noticed that large scale transformation in systems of care, organizations, and teams was complex and often unpredictable. She began to research, as part of her master's program, what distinguished successful, sustainable transformation from change initiatives that didn't work or didn't “stick.” In her research, she identified one key success factor that seemed to distinguish success from failure – the use of deep, authentic communication among all leaders within a system, often in the form of dialogue.

Nelson found that deeper forms of communication, like dialogue, were critical in creating shared meaning within a system and creating a path forward to a desired future. Looking for ways in which she could bring this type of learning and her research back into the field of health care leadership, Nelson crafted the idea of a dialogue series between emerging and experienced leaders in health care, with a goal to focus on new forms of leadership that are able to effectively support change and transformation in our complex health care system.

With the support of IHPME, Nelson began planning for a learning project that would come to be known as Vernissage Health, a reinterpretation of the 18th century salon, but with a focus on contemporary leadership development. “As an alumni of the University of Toronto and IHPME, I could think of no better place to hold these dialogue sessions and help health care leaders of tomorrow become better versed in the role they can play in spearheading and supporting positive change,” said Nelson.

IHPME's Director at the time, Adalsteinn Brown agreed, “It was easy to support Vernissage Health as it connected two of our most valuable resources – our alumni and our students.” Ready to move forward, Nelson partnered with the [Dalla Lana School of Public Health's](#) Professor Blake Poland, who teaches a course on generative dialogue, and has expertise in hosting dialogue, a skill critical to the Vernissage project.

Poland sees dialogue as a means of enabling leaders to move beyond the common mindset of finding a fast “fix-it” solution to problems. Using generative dialogue unleashes the collective wisdom of a group in ways that exceed the capacity

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of any one individual. Often, the results of participating in generative dialogue are transformative, for participants and for the system of care within which they work. “There is a habit in health care, of trying to produce a “recipe for change” that is driven into a system - that doesn’t always produce the best results,” said Poland. “Change can be quite emotional and take unexpected turns, so the use of dialogue as a tool helps these leaders engage with and recognize the many people who are within a complex system of care. As a result, leaders have a better sense of person and system wholeness when they approach and support change.”

The collaboration between Nelson and Poland led to the emergence of a dialogue series offered to IHPME students in 2017. The sessions were held once a month from January through April, during which the students, from different program backgrounds – management, research and informatics, gathered to engage in dialogue with experienced leaders. Recruited to the project by Nelson, the experienced leaders were diverse in their backgrounds as well - CEOs and senior executives from across the health system including acute care and rehabilitation hospitals, the private sector, home services, health integration networks, and community and mental health services. With such talent and diversity, they represented a variety of experiences and perspectives about leadership and approaches to leading or supporting change and transformation in the health system.

Each session incorporated a formal circle dialogue setting with the intention of demarcating space and time as different from the usual everyday communication found in routine business or clinical meetings. The setting was created to embody wholeness, encourage mindfulness, and authenticity which allowed participants to listen deeply to one another and to speak from the heart about leadership in health care.



Material as part of the circle dialogue. Photo by Theresa Lee

“Blake and I had a shared vision of how we wanted the sessions to feel with an intention to make the space a positive, supportive and authentic environment which invited and compelled participants to connect deeply within themselves and with one another,” said Nelson. “Using symbols, rituals, and specific dialogic procedures,” continued Poland, “distinguished our space from the usual meeting environment they are familiar with and disrupted the usual power dynamics in health care by making everyone an equal.”

For the emerging leaders participating in these sessions, the goal was to help them to reflect deeply on their own views about leadership and approaches to change; to listen and learn from experienced leaders about past experiences; and to share and receive support for the often deeply personal

challenges facing emerging leaders in today’s environment. “This is a unique and deep form of learning and mentorship, where emerging leaders spend four sessions of two hours each, listening, sharing and reflecting on their own beliefs and practices about leadership. But we end each evening informally over a shared meal. This allows everyone to have an informal conversation and network,” said Nelson. Nelson is also grateful for project sponsor, [Associated Medical Services \(AMS\)](#) for their generous financial support of these networking dinners, which were a critical component of the series.

Turning learning and insights into personal action was one of the final steps in the Vernissage Health experience. Prior to the last session, emerging leaders reflected on key learnings and insights from the experience writing a personal letter to their “future selves.” These sealed and securely stored letters will be mailed to emerging leaders in six months as a gentle reminder of lessons they make take upon their leadership journey, a practice that was effectively received. “The exercise of writing a letter to my future self was like looking into a crystal ball and seeing the person that I’d hoped to be some day,” said emerging leader Craig Thompson, now Executive Director of [Patient Ombudsman](#). “It knitted together my ideas about personal values, professional integrity and leadership style, into a manifestation of myself that I could relate to and learn from. Through that process, I realized I was actually getting to know my authentic self, which has helped me to be a better person to the people around me and a better leader within my organization.”

Following the last session, participants completed an anonymous survey and were asked to evaluate and provide feedback on the dialogue series. With a 90% participation rate, the series was given a 93% approval rating by emerging



Experienced and emerging leaders engaged in discussion during Vernissage Health Session 4. Photo by Theresa Lee

leaders, and 100% felt the initiative met its aims and were very satisfied with the structure, format and conditions of all sessions.

Some constructive advice was provided for future series’, including offering a more fulsome orientation session for students regarding the theoretical underpinnings between leadership, leading change and dialogue. As well, many recommended adding a fifth dialogue session to deepen the

conversation and more formally focus on how leaders might bring this learning experience into their work within health organizations or the community. "This response shows there is a significant demand for a new type of learning experience about leadership, and a thirst to learn from and make personal connections with experienced leaders," said Nelson.

With the success of the first Vernissage Health series documented in a formal evaluation, it has been renewed for another year and will re-launch in January of 2018. Vernissage Health will double in size to two groups, expanding to include graduate students in Public Health Sciences, including the Public Health and Preventive Medicine Residency program, as well as graduate students in IHPME. One group will focus on leadership and leading change in organizations and the health system, while the second group will focus on leadership and leading change in the community and society at large. Experienced leaders will be recruited from public health, NGOs, and include social movement activists to augment this new focus.

"With the rising tidal wave of ecological and social issues, we need to tap into our collective wisdom," said Poland. Adds Nelson, "Vernissage Health can be the catalyst to unleash the leadership potential in everyone and help harness this energy for positive change."

For more information about Vernissage Health, contact Wendy Nelson, IHPME Adjunct Professor, Founder and IHPME Project Lead at wnelson@rogers.com

AWARDS

eMHI Student Wins Barford Advanced Practice Nursing Scholarship

Created in 2013, and generously funded by the Barford Family, the [Barford Advanced Practice Nursing Scholarship](#)



allows [CAMH](#) registered nurses the opportunity to pursue a Master's degree in nursing, health administration or health informatics. IHPME is pleased to announce that eMHI student Tsega Eyasu is a recipient of this prestigious award, that will allow her to pursue further education without the financial constraints that often accompany graduate studies.

The scholarship funds a six month paid internship through CAMH, allowing nurses to draw upon their graduate learning experience and apply it directly into the field.

Recipients are also paired with a mentor who provides them with educational and professional guidance throughout their graduate studies.

Tsega Eyasu has been a registered nurse at CAMH since January 2013. Her decision to pursue nursing in the area of mental health is one she says, began at an early stage in her career during nursing school placements. Working in hospitals and group homes for individuals with chronic mental illness, she was drawn to the fact that nursing in mental health care, incorporated science and technology as a means of helping the most vulnerable patients in our health system.

As an undergraduate nursing student, Eyasu was exposed to a variety of clinical placements where the transition between paper and electronic documentation was still ongoing, sparking her interest in the use of technology in the health care field. "I was already witnessing the large scale benefits of electronic documentation and wanting to know more about these advantages, I decided to take an introductory course in health informatics to better understand the principles and foundations of the discipline," said Eyasu. While completing her graduate placement at CAMH, Eyasu was involved in the Centre's major transition to an electronic system, making her realize that pursuing further education in the field of health informatics would be beneficial not only to her career, but to the patients she works with. "During the transition, I was involved in some of the working groups that were looking at improving workflow and optimizing the system to best fit the specialty of mental health care services," said Eyasu, "I realized that pursuing a degree in health informatics would allow me to contribute to improving patient care in mental health."

Upon completion of the eMHI, Eyasu is looking forward to becoming an Advanced Practice Nurse with a clinical informatics specialty, using her work experience in acute and complex mental health care to improve patient care and outcomes. "There is great potential in using technology to improve front line care as well as using collected data to improve the overall healthcare system," said Eyasu, "the eMHI equips me with the ability to understand how to improve quality of care for mental health care patients by focusing on ongoing assessment tools, managing data flow, and developing integrated technology within mental health care nursing."

HSR student wins Enid Walker Award

The [Enid Walker Graduate Student Award in Women's Health](#) offered by Women's College Research Institute at Women's College Hospital, supports graduate students at the University of Toronto, whose research has a particular influence on women's health. Shawna Cronin, a third year PhD student in Health Services Research at IHPME has received this award for the second time, for her research on dementia patients

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DLSPH Bulletin



and access to care.

According to the [Alzheimer's Society of Canada](#), 65% of dementia sufferers over the age of 65 are women. Cronin's research looks to determine how spatial access to primary care and community services for people with dementia, influences their health outcomes. The results of her research will also indicate how women might access dementia care and how this determines the outcomes in their health.

FACULTY APPOINTMENTS

New Faculty

Bernard Lawless – Assistant Professor, Status
Natasha Leighl – Professor, Status
Yoga Rampersaud – Professor, Status
Michelle Science – Assistant Professor, Status
Ron Wald – Associate Professor, Status

Renewed Appointments

Nick Daneman – Associate Professor, Status
Anne Matlow – Professor, Status
Damon Scales – Associate Professor, Status

MSC/PHD DEFENSES

Clinical Epidemiology and Health Care Research

Joelle Helou, MSc
Thesis Topic: *A Comparative Study of Quality of Life in Patients with Low and Intermediate-risk Prostate Cancer Treated at a Single Institution: Stereotactic Radiotherapy vs. High-dose rate Brachytherapy Monotherapy vs. High dose-rate Brachytherapy Boost* Date: August 18, 2017

Introducing the HSR Alumni Mentorship Program

The IHPME GSU is excited to announce an Alumni Mentorship Program, starting late October, 2017. This will be the program's inaugural year and we aim to connect current MSc and PhD students in the health services research stream (HSR) with HSR Alumni. We hope to pilot this program with

HSR students and roll it out to other IHPME streams in the future.

Over the years, IHPME has produced many graduates who have successfully moved on to various roles in government, academia, consulting and beyond. Current students are in the training and planning stages of this trajectory and would greatly benefit from Alumni guidance and support. We hope that HSR Alumni will consider giving back to the IHPME community by helping current students on their paths towards future careers. As for current upper year HSR students, we strongly recommend you take advantage of this tremendous opportunity for bespoke mentorship. Students and Alumni, please stay tuned for an invitation to participate in your inbox in the coming weeks. We look forward to your support in this exciting new initiative!

IHPME IN THE NEWS

1 in 19: New Study Shines Light on Reality of Suicide Among New Ontario Moms, Moms-to-be CMAJ study from authors including Prof. Paul Kurdyak and Prof. Simone Vigod look at causes of death for new mothers over 15 year period in Ontario: <http://www.cbc.ca/news/canada/toronto/mothers-suicide-ontario-study-1.4267417>

Striking Difference in Rates of Suicide Attempts between Provinces Revealed in Mental Health Findings Prof. Paul Kurdyak, co-author of new ICES study weighs in: <http://www.cbc.ca/news/health/mental-health-services-between-provinces-canada-1.4267168>



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PUBLICATIONS

Kirst, M., Im, J., Burns, T., [Baker, G.R.](#), Goldhar, J., O'Campo, P., Wotjak, A., Wodchis, P. (2017). What Works in Implementation of Integrated Care Programs for Older Adults With Complex Needs? A Realist Review. International Journal for Quality in Health Care, (August). <https://doi.org/10.1093/intqhc/mzx095>

[Kuluski, K.](#), Ho, J. W., Hans, P. K., & Nelson, M. L. (2017). Community Care for People with Complex Care Needs: Bridging the Gap between Health and Social Care. International Journal of Integrated Care, 17(4). <http://www.ijic.org/articles/10.5334/ijic.2944/>

Massuci, L., Beca, J., Sabharwal, M., [Hoch, J.S.](#) (2017) Methodological Issues in Economic Evaluations Submitted to the Pan-Canadian Oncology Drug Review (pCODR). PharmaEconomics Open, 2 (1-9). <https://link.springer.com/article/10.1007/s41669-017-0018-3>

Thakkar, V., Sullivan, T. (2017). Public Spending on Health Service and Policy Research in Canada, the United Kingdom, and the United States: A Modest Proposal. International Journal of Health Policy and Management, 6(1-4). http://ijhpm.com/article_3348_bbfdbf181f181d3928370959e9ebb491.pdf

U of T Policy Reports Repository

U of T Libraries and the Office of the Vice-President Research and Innovation is looking to catalogue and make accessible grey literature published by our faculty members and trainees. The online searchable repository would contain reports that address diverse areas of policy at the municipal, provincial, national and global level. The repository would be made available through Tspace, U of T's online secure research repository. The University is looking to collect publications from faculty that align with the following criteria:

- Reports - not including journal articles.
- Reports authored/produced by IHPME - not externally commissioned.
- Authors/co-authors are faculty, staff, student from IHPME at time of publication - may be in partnership with authors from other institutions.
- Published/issued within the last 10 years.
- To submit a publication or if you have questions about the criteria email: vpri.reports@utoronto.ca

EVENTS

[Peggy Leatt Knowledge and Impact Award](#)

September 7 | 5:00pm - 7:00pm | Faculty Club



This year's Peggy Leatt award winner is Chris Ham, CEO of The King's Fund. Join us in celebrating and recognizing Chris Ham on his achievements.

[Register Online](#)

[Rural and Indigenous Health Symposium](#)

September 21 | 9:00am-5:00pm | Faculty Club

The Rural and Indigenous Health Symposium is a joint initiative by the Institute of Health Policy, Management and Evaluation and the Northern Ontario School of Medicine. We invite you to join us for a day of presentations and panels focused on creating an agenda for research and health system design for rural and northern communities. Featured speakers include, Suzanne Stewart, Carrie Bourassa, James Rourke, Greg Marchildon, and more.

View a full list of speakers on the event page.

[Register Today](#)

[CCHE Seminar Series](#)

Fridays | 10:00am - Noon | HS 108 | Free

Please note the upcoming seminars:

- [Nathan Yang September 22](#)
- [Jill Furzer September 29](#)

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NAO Lecture Series: Save the Date

September 25 | 9:00am - 10:30am | HS 106



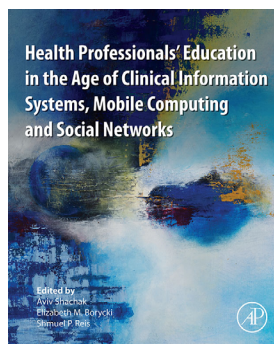
Our third lecture from the North American Observatory on Health Systems and Policies features James Gillespie, Associate Professor, School of Public Health at the University of Sydney, who will speak on “Perverse Policies? Comparing Private Health Insurance in Australia and Canada.”

This event is free of charge and all are welcome.

Book Launch for Prof. Aviv Shachak

September 26 | 5:00pm - 7:00pm | HS 208

Professor Aviv Shachak's latest book offers an in depth analysis of the ways in which information and communication technology, is changing the way health professionals receive their education or perform in the health care field. Copies of the book will be available to purchase. Toasts begin at 5:30pm.



RSVP: ihpme.events@utoronto.ca

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!

GREEN CORNER

Update: The Environmental Committee recently convened to discuss a strategic plan that will allow the Institute to achieve its overarching goal, which includes being a part of the solution in supporting environmental friendly and sustainable health systems. Through a series of steps, involving educational outreach, as well as research and operational changes, IHPME looks to succeed in fostering innovative change in health system planning with an environmental approach. Watch us as we grow from a sprout to a tree! Stay tuned for further details.

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.

DON'T MISS IT

Into the North: A Health Informatics Experience

We hope you have been keeping up with our student blogger Allie Margaret May, who is in the final stages of her four month practicum in the Northwest Territories as part of the Masters of Health Informatics Program. Her recent posts have covered everything from what's new and exciting in Yellowknife to why she chose a career as a health informatician. Read more at: <http://ihpme.utoronto.ca/category/into-the-north-a-health-informatics-experience/>



Smoky skies due to wildfires, Yellowknife NWT. Photo by Allie May, 2017

IHPME IS A SCENT FREE ZONE

A reminder to faculty, staff and students: please refrain from wearing scented products in the department.



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Follow **@ihpmeuoft** to hear more about faculty research, alumni events and IHPME in the news.



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