LAW UNDERPINNS HEALTH CARE: IHPME ADJUNCT PROFESSOR AMONG LEADING CANADIAN HEALTH LAWYERS

The list in Shanon Grauer’s briefcase just keeps getting longer.

This specialist in health law, and adjunct professor at IHPME, maintains a document that alphabetically lists all health-related legislation in Ontario and federally. It’s now over five pages. It’s a physical reminder of the ever-present reality in healthcare delivery and administration – regulation is everywhere. “From the Alcohol and Drug Addiction Act and Ambulance Act down to the Voluntary Blood Donation Act, there’s a very wide range of provincial legislation, including those in the regulated professions. On top of that, there are federal healthcare laws. It’s a split jurisdiction.”

Grauer was recently included for the third year in a row in the Canadian edition of Chambers Canada for healthcare. The publication is produced for global markets by UK-based Chambers and Partners. It ranks lawyers and law firms in various areas of law, based on interviews with clients and peers. Three years ago, it added healthcare law as a specialty. Grauer, a partner in McCarthy Tétrault’s business law group, is among a short list of Canadians included in that category.

She points out that broad trends in society are making health law even more relevant to health administrators. “On the litigation side, in addition to malpractice, there is increased attention to health provider obligations in cases involving the right to die, as well as legal issues around consent to treatment,” said Grauer. “Then there is the regulatory side. For example, the long-term care homes that help care for some of the most challenging cases in an aging population are heavily regulated enterprises. Many are under increasing pressure to deliver mandated standards of care and facilities with resources that may not be adequate.”

The “legal underpinning” of healthcare, as Grauer calls it, makes an immediate impression on students in her class. “They have very little idea about the law when they come in, but as health administrators, they will need to understand the impact of law in the healthcare industry. The law underpins much of what we do in health care. As senior leaders, they’ll enter into contracts – so they need to know what is enforceable and unenforceable in contract law. The Broader Public Sector Accountability Act is another example of a law of importance – it governs procurement by hospitals.”

Grauer points out that the legal implications of healthcare delivery seem certain to grow with the adoption of new technologies. “The flip side of new technologies are privacy issues. As more people are cared for in the community, there may be robotics and monitoring equipment in their home – the patient’s right to privacy must be protected. Healthcare providers must ensure their knowledge of legal implications keeps pace with medical progress.

More on the next page...
The law not only underpins healthcare. The rule of law is fundamental to the civil society that we depend on to support and deliver healthcare.

U OF T STUDY:
Recent Immigrants More Likely to Receive Aggressive End of Life Care

University of Toronto researchers studied patterns of end-of-life care among patients of different cultures, religions and ethnicities and found that recent immigrants identified as those who arrived between 1985-2015, were significantly more likely to receive aggressive care in the last 6 months of life compared with other residents.

“The message that palliative care is not the same as giving up, is a difficult message for many clinicians to deliver to patients and families,” said Professor Rob Fowler, Program Director in Clinical Epidemiology at the Institute of Health Policy, Management and Evaluation.

“For patients who have recently immigrated to Ontario from other parts of the world, these conversations are even more challenging when clinicians and patients approach such a potentially stressful period from a different language, a variety of cultural backgrounds, and religions,” said Fowler who is also a physician at Sunnybrook Health Sciences Centre.

Fowler worked with post-graduate trainee Dr. Chris Yarnell, Therese Stukel, Andreas Laupacis, Damon Scales and Ruxandra Pinto as well as collaborators from the Institute for Clinical Evaluative Sciences (ICES) on a study published in JAMA on October 3, 2017 to examine end of life care provided to 967,013 patients in Ontario hospitals between 2004 and 2015.

They found that recent immigrants were significantly more likely to receive aggressive care — mechanical ventilation, dialysis, feeding tube placement — and to die in an intensive care unit (ICU) compared with other residents, a finding that was strongly associated with region of birth. They also discovered that compared to long-time residents, immigrants from Northern Europe were about 16 per cent less likely to die in ICU, while those from South Asia was nearly twice as likely to die in ICU. These differences were determined not to be related to language ability, education or wealth, so while the study has proven their original hypothesis, it has still not explained why.

According to Dr. Fowler, the current default practice in Ontario hospitals, even when an illness is incurable, is focused upon tests, procedures and medication that target a disease, instead of providing care for a patient and their symptoms. He believes a palliative approach and symptom management should be started earlier for the patient in order to complement ongoing treatments for their disease.

Dr. Fowler also notes that in Canada our approach to end of life care can seem like a menu of health care options, where patients and families are asked to choose without it being explained to them that other less aggressive options might be available.

“There could be a sense that the most care is the best care, especially for those who may not have had access to treatment at some point in their life,” said Dr. Fowler.

What is the next step? A deeper appreciation of the multiple perspectives that patients and their families can bring to end-of-life discussions.

“While the study has determined where variation in care exists, it is only by tackling the question in a more qualitative manner, and exploring options with dialogue between patients, families and clinicians will we gain the understanding of why differences exist and learn where and how we can improve health care for an increasingly multicultural population,” said Fowler.

AWARDS
U of T Expert on Patient Safety Receives Prestigious Barer-Flood Prize

Federal Health Minister Ginette Petitpas Taylor presented U of T Professor Ross Baker with the Barer-Flood Prize in Health Services and Policy Research at a meeting of Federal and Provincial Health Ministers in Edmonton on Thursday. The Barer-Flood Prize is a prestigious career achievement award from the Canadian Institutes of Health Research (CIHR).

“It’s a real thrill and tremendous honour,” said Professor Baker, who is also the program lead for the Quality Improvement and Patient Safety program at IHPME. “I am very grateful for this award and I recognize that my work has been enabled by the opportunities I have had to work with so
many excellent people here at U of T, within academia, and in the health system."

Professor Baker is well known for his research on quality improvement and patient safety, in particular for his instrumental work on the Canadian Adverse Events Study with Dr. Peter Norton and colleagues, published in 2004. This large-scale assessment was the first of its kind in the country, and found that 7.5% of hospital inpatients experienced unintended harm from healthcare services, with nearly 40% of this harm deemed preventable.

Baker also led the development of the Ontario Hospital Reports initiative, the first “scorecard” that measured the performance of acute care hospitals in the province from 1999-2009. This reporting system has since spread across health sectors and been copied in Canada and elsewhere, helping to bring greater focus on quality improvement and patient safety efforts.

His dedication to quality improvement and patient safety has spanned his entire career and enabled collaborations with researchers in different parts of the world working to assess and improve the quality of care that patients receive. He has worked with patient safety research teams in Ireland, Portugal, Brazil and Japan, and also co-led a working group on patient safety research methods for the World Health Organization.

Research in health policy and quality management became a passion for Baker, who had graduated with a PhD in sociology from the University of Toronto before taking on a post-doctoral fellowship at the University of Alberta in Health Administration. “I was lucky I fell into such a fascinating and engaging field, where you are able make an impact on critical issues in healthcare,” said Baker. “IHPME was a great environment in which to foster this work.”

Management and Evaluation (IHPME) for twenty-eight years, Baker was interested in methods for assessing and improving the quality of care from the beginning of his career in health services research. He developed one of the first courses in North America on quality improvement for quality managers in the Masters of Health Science in Health Administration program (MHSc), and, more recently, led the development of a Master’s of Science in Quality Improvement and Patient Safety for clinicians and managers, a degree program that improves their capabilities to influence change at clinical and leadership levels.

In 2013 Baker, together with Dalla Lana Interim Dean Adalsteinn Brown, co-led the creation of IDEAS (Improving and Driving Excellence across Sectors), a new educational program for professionals, funded by the Ministry of Health and Long-Term Care, that has taught quality improvement and management to over 3000 clinicians and managers.

“Ross has been instrumental in the ongoing struggle to improve patient care,” said Rhonda Cockerill, Acting Director of IHPME, “His focus on patient safety and quality improvement in his teaching, research and leadership positions has had a significant impact on our health care delivery system.”

The $25,000 Barer-Flood prize is named for two former directors of the Canadian Institutes of Health Research, Morris Barer and Colleen Flood. Their leadership and vision for innovation is recognized through this award as it honors an exceptional health policy researcher who has made a lasting contribution to the health system in Canada.

CIHR Institute of Aging Anne Martin-Matthews Doctoral Prize of Excellence

On October 21st at the Canadian Association of Gerontology conference in Winnipeg, Manitoba, Tim Rappon was awarded the CIHR Institute of Aging Anne Martin-Matthews Doctoral Prize of Excellence in Research on Aging. Rappon a 2nd year PhD student in the Health Services Research stream is also a Vanier Scholar. His research focuses on sustainable quality improvement initiatives in elder care, such as those being implemented in hospitals as part of the federally funded Acute Care for Elders Collaborative. Rappon is also a trainee of Translating Research in Elder Care (TREC) where he studies how health care aides’ work life impacts their work outcomes.
“Educating our health leaders of the future is integral,” said Rhonda Cockerill, Acting Director of IHPME, as she opened the fourth annual Moonshot celebration on October 24. Over three hundred alumni, friends, students, and faculty filled the ball room at the Delta Marriott in downtown Toronto, to celebrate the Institute of Health Policy, Management and Evaluation’s 70th anniversary. “IHPME graduates are the connectors who push Ontario closer quality transformation,” noted Dr. Joshua Tepper, President of Health Quality Ontario in his opening remarks.

Faculty and mentors were also acknowledged for their commitment to the department and our graduate students, while Professor Raisa Deber recognized past directors of the Institute such as Louise Lemieux-Charles, and Vivek Goel, with a superbly written song adding even more fun to the evening.

The celebration’s highlight was of course the key note address by Mary Uhl Bien, professor of management at the TCU Neely School of Business. Her fantastic talk focused on adaptability and leadership within complex networks, a fitting discussion for our many alumni working within our complex health system.

As IHPME looks to the future and the next 70 years, we aim to continue to foster impact, innovative research, and system change within the Canadian health system and globally. View the entire photo gallery online.

In Brazil, physical activity programs are federally sponsored to promote population health, but they have yet to be assessed for their cost effectiveness, and ability to function as expected. Dr. Flavio da Guarda of the Federal University of Pernambuco is looking to lead research on these initiatives. He will be here at the Institute of Health Policy, Management and Evaluation at the University of Toronto for six weeks as a visiting professor, working closely with Dr. Peter Coyte to develop an assessment for cost-effectiveness. There are 2,942 cities in Brazil that utilize the physical education programs, but there are few studies evaluating their impact.

“My goal is to introduce this type of research and evaluation to find out how effectively the programs are functioning, as they use primary healthcare resources” said Dr. da Guarda.

He has been active in the field of physical education and public health for many years. In 2004 after receiving a degree in physical education from the State University of Pernambuco, Dr. da Guarda worked as a physical education professional (PEP) at the Academia da Cidade Program. In this role he implemented a new physical activity program, Se Bole Olinda, which in 2007 was identified by the Brazilian Ministry of Health as a successful program in promoting healthy and active lifestyles. Following the completion of his Masters (2009) and PhD degrees (2014) Dr. da Guarda has continued to work on physical education programs as part of the federal and municipal government’s health promotion strategies, while also teaching in the Masters of Physical Education at the Federal University of Pernambuco. “I have always seen physical activity as an important health promotion tool, and when I started working in public health services, I discovered that there was a need for further research that would help managers in decision making to improve the quality of these interventions,” said Dr. da Guarda.

Over the next few weeks Dr. da Guarda is looking to exchange experiences, research and more during his time as a visiting scholar. “I am hoping to learn a lot from Dr. Coyte’s team and everyone else here at UofT.”
MSC/PHD DEFENSES

Clinical Epidemiology and Health Care Research

Keerat Grewal, MSc
Thesis Topic: Continuity of Care and Oncological Expertise for Patients with Active Cancer who require Emergency Department Care: A Population-Based Assessment Date: October 2, 2017

Stephanie Mason, PhD
Thesis Topic: A Population-Based Evaluation of Long-Term Outcomes Following Major Burn Injury Date: October 10, 2017

Katarzyna Jerzak, MSc
Thesis Topic: Prognostic Associations of Plasma Hepcidin in Women with Early Breast Cancer Date: October 25, 2017

PUBLICATIONS


Christopher JD Wallis, Bheeshma Ravi, Natalie Coburn, Robert K Nam, Alan S Detsky, Raj Satkunasivan. Comparison of postoperative outcomes among patients treated by male and female surgeons: a population based matched cohort study. BMJ. October 10, 2017 http://www.bmj.com/content/359/bmj.j4366


EVENTS

CCHE Seminar Series
Fridays | 10:00am - Noon | HS 108 | Free

Rose Ann Devlin - November 10
Sarah Allin - November 17
Reza Yousefi Nooraie - November 24

Read the DLSPH BLOG
**Ignite 2017 IHPME Practicum Showcase**

November 8 | 5:00pm - 7:00pm | HS 610 | Free

In the spirit of enhancing the student + educator experience, IHPME is pleased to announce the second annual IHPME Practicum Showcase: An Ignite® Event on Wednesday, November 8, 2017 at the Dalla Lana School of Public Health 6th Floor Auditorium. This is a chance for students to showcase their work and the work for their preceptor through a unique presentation format.

Register Now

**IHPME Preceptor Workshop**

November 8 | 3:00pm - 5:00pm | HS 208 | Free

An interactive session on best practices for practicum placements.

In appreciation for hosting IHPME students, preceptors and project hosts are invited to to an afternoon seminar with guest speakers and case presentations.

RSVP HERE

**Health Services, Systems and Policies Research Seminar Series**

November 8 | 4:00pm - 5:30pm | HS 412 | Free

A new HSR seminar series will be launched on November 8 with guest James Dearing of the Department of Communication, Michigan State University. Join us for his lecture on “Applied Network Approaches to Diffusion Health Innovations.” Webinar also available, details at: [http://ihpme.utoronto.ca/events/hssp-seminar-11082017/](http://ihpme.utoronto.ca/events/hssp-seminar-11082017/)

**Student Town Hall Meeting**

November 10 | 11:30pm - 2:00pm | HS 208 | Free

Acting Director Rhonda Cockerill will be providing students an opportunity to give feedback and ask any questions regarding student life at IHPME. Discussion can be about issues related to courses, funding issues or the student study space and anything pertaining to your student experience.

Lunch will be provided. Register Now If you can’t attend questions can be sent in advance to: ihpmesu@utoronto.ca

**IHPME GSU Lunch and Learn: Sacha Bhatia**

November 14 | 12:00pm - 1:00pm | HS 106 | Free

What Healthcare Can Learn from the NBA? Dr. R. Sacha Bhatia is the Director of the Institute for Health System Solutions and Virtual Care (WIHV) at Women’s College Hospital, where he also a staff cardiologist. As Director of WIHV, Dr. Bhatia leads evaluation for Choosing Wisely Canada, a national initiative managed through the University of Toronto in collaboration with the CMA.

Register Now

**2017 MHSC Webinar for Prospective Applicants**

November 14 | 5:00pm - 6:00pm | Online | Free

The Institute of Health Policy, Management and Evaluation will host an online information webcast for individuals interested in the MHSc Health Administration Program. Please consider forwarding this information to any colleagues who might be interested in and/or considering a return to school to advance their careers.


**Health Informatics Seminar Series: Dr. Ewan Affleck**

November 15 | 12:00pm - 1:30pm | WB 219 | Free

Health Informatics in the North. Dr. Ewan Affleck, Chief Medical Information Officer of the Northwest Territories, will be presenting on health informatics in the North followed by a panel discussion with students who have worked in Northern communities. Panelists include Allie Margaret May, Rebecca Rich, Aviva Elman and Sophie Roher. Register Now

**Syria: War and Health**

November 16 | 12:00pm - 1:00pm | HS 106 | Free

Talk given by Dr. Khaled Almilaji, EMHI student and Syrian physician.

Register Now
Event Celebrating the History of Innovation at U of T

November 15 | 5:30pm - 8:00pm | Great Hall, Hart House | Free

As part of the Dalla Lana School of Public Health Leadership Series, join U of T’s Vice-President of Research and Innovation Vivek Goel, Dalla Lana School of Public Health Interim Dean Adalsteinn Brown, and Faculty of Medicine Dean Trevor Young for a discussion about how today’s health researchers and system innovators are narrowing the gap between research and impact while keeping health-care accessible to all.

Panel featuring:

• Leah Cowen, Professor Molecular Genetics, U of T Medicine
• Emily Seto, Assistant Professor, Health Informatics, Institute of Health Policy, Management and Evaluation
• Laura Rosella, Assistant Professor, Epidemiology, Dalla Lana School of Public Health

Register Now

PHP Rounds: Dr. Lorraine Ferris

November 17 | 12:00pm - 2:30pm | HS 106 | Free

Keynote Address on Managing Conflict of Interest in Public Health, with discussants Prof. Ross Upshur and PhD student Jeremiah Hwee.

2017 MHI Webinar for Prospective Applicants

November 27 | 4:00pm - 5:00pm | Webinar Online | Free

Join us for an online information session for prospective Master of Health Informatics (MHI) program applicants. This event features a short presentation by Program Director Julia Zarb and an opportunity for dialogue on key topics for prospective students.

Note: The webinar will be oriented towards both regular and executive stream applicants.

Questions can be submitted in advance to Zoe Downie-Ross: ihpme.mhi.grad@utoronto.ca

Research Ethics in the Health Sciences: Info Sessions 2017-18

November 23 | 10:00am - 12:00pm | McMurrich Building Rm 107 | Free

November 24 | 10:00am - 12:00pm | McMurrich Building Rm 107 | Free

November 27 | 10:00am - 12:00pm | McMurrich Building Rm 107 | Free

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!

JOIN US FOR THE IHPME HOLIDAY PARTY

December 7 | 5:00pm - until late | Great Hall, Hart House | Free. RSVP HERE
CONNECT WITH IHPME ON SOCIAL MEDIA

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