The Education Report 2016 / Strategic Plan 2017–2020: Highlights was produced by the Sunnybrook Education Advisory Council (SEAC). The Education Report Co-Chairs are Dr. Ari Zaretsky and Shamena Maharaj. The SEAC Coordinator is Fatima da Costa. To read the online version of the 2016 Annual Education Report, visit sunnybrook.ca/education.

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MESSAGE FROM THE VICE PRESIDENT, EDUCATION

Education is foundational to Sunnybrook’s core mission: inventing the future of health care. Being an outstanding learning organization is one of the main reasons why Sunnybrook continues to be recognized as one of the top employers in Canada. We are proud to be the destination for 4,832 learners from approximately 38 health disciplines and 50 countries. Our aspirational vision is to reinvent the future of health care education. To achieve this vision, our primary goal is to lead in innovative methods of teaching and learning.

We have achieved some success. Over the last two years, we have embarked on and concluded an ambitious plan to enhance the presence and profile of education at Sunnybrook.

In order to work more effectively and more synergistically across our three campuses, Sunnybrook education was organized into four committees reflecting our priorities: Education Research Unit; Technology-Enhanced Teaching and Learning; Education Capacity Building; and Education Excellence and Well-Being.

The Education Research Unit champions education research at Sunnybrook and is working closely with Sunnybrook’s Practice-Based Research and Innovation team. This past year we awarded more than $50,000 in education research seed grant funding. In the coming year, we will build additional capacity in education research through closer linkages with the Wilson Centre, training workshops and mentoring of new researchers.

Our Sunnybrook Canadian Simulation Centre—the first in Canada—was the third in Canada to be re-accredited by the Royal College of Physicians and Surgeons of Canada for a full five years. Over the past year, our Simulation Centre trained more learners than ever before. Our Simulation Centre also developed novel curricula that directly engaged patients and families to provide feedback to medical students about their communication skills and enhanced skill and confidence in discussing end-of-life care with patients and families.

We have expanded patient and family education by working with our Learning Management System to develop online training to promote health literacy in our patients. We are also enhancing the role of “patient as teacher” within our organization. Our efforts to expand the profile of interprofessional education and to link interprofessional education and professional practice seamlessly have also accelerated.

Some of the highlights of this update pertain to our learners. In 2016, we purchased and deployed MedSIS-3C, a sophisticated online student registration system to enhance the learner experience and move us closer to our goal of creating an interprofessional student centre. Feedback from learners has been extremely positive.

We have just concluded a new strategic planning process that builds on these successes and boldly launches us to achieve even more in the next three years. Our four new priorities are: Patient as Educator, Team-Based Learning, Learner Experience and Culture, and Education Scholarship.

Ultimately, the soul of education is our teachers. I would like to thank all of our teachers, supervisors, preceptors, instructors and staff who educate our learners, patients and families. Without your passion and dedication Sunnybrook could not be the world-renowned academic health sciences centre that it is.

If you have any questions, I welcome them at education@sunnybrook.ca. Enjoy!

Ari Zaretaky, MD FRCPC
Vice President, Education
Sunnybrook Health Sciences Centre
At Sunnybrook, we are proud of our role as an academic health sciences centre. We strive for educational excellence for our learners, staff, patients and families.

Thank you to our Vice President, Education Dr. Ari Zaretsky, the Sunnybrook Education Advisory Council and our education champions from across the hospital for their efforts throughout 2016–2017.

Significant changes have occurred in education over the last five years that deserve recognition and celebration. Our annual Sunnybrook Conference on Education (now in its sixth year), our Interprofessional Collaboration Showcase, our Cancer Information Portal, our focus on health literacy and in situ simulation have all raised the profile of education at Sunnybrook both within and outside our organization.

The growth of education at Sunnybrook is important because we aspire to be a leader in innovative methods of teaching. The new 2017–2020 Sunnybrook Education Strategic Plan is forward-looking and very exciting. It builds on Sunnybrook's unique strengths and recognizes that quality, innovation and impact are fundamental to the enhancement of our health care system and health outcomes.

Finally, I’d like to take this opportunity to thank all of our preceptors, teachers, instructors and others who take part daily in educating our learners, patients and their families. Your passion and dedication help Sunnybrook maintain its reputation as a world-renowned academic health sciences centre.

Barry A. McLellan, MD, FRCPC
President and Chief Executive Officer
Sunnybrook Health Sciences Centre
RESEARCH
INNOVATION IN EDUCATION

The Education Research Unit opened on Jan. 1, 2014 as the home for health professions education research and scholarship at Sunnybrook. This innovative hospital-led initiative is leading and helping education researchers in addressing the evolving challenges in health education toward improving the delivery of patient care.

VISION

- To support innovation in health education through research and scholarly study of practice-based education solutions in order to improve patient care

MISSION

- Create opportunities for clinicians, researchers, teachers and leaders through mentorship and resources for research and scholarship

STRATEGIC PRIORITIES

1. SUPPORT: To allow engagement in education research and scholarship
2. COMMUNITY: To create networks for innovation and leadership
3. INTEGRATION: To enable collaboration within and across institutions
4. OUTPUT: To showcase education research and scholarship activities

ACHIEVEMENTS

Our major accomplishment of 2016 is the completion of our inaugural strategic plan “Supporting Innovation in Education.” This plan was developed through extensive consultation with stakeholders and a survey of the 694 SEAC Education Champions Network members. We aim to foster a culture of innovative and critical inquiry in which all stakeholders, from senior leaders to front-line teachers, are supported to approach the design and delivery of all educational programs as opportunities to create new knowledge about best practices.

This strategic plan will provide the means to harness the potential of SEAC, giving shape to ongoing efforts and directions for new initiatives to support research and scholarship in health profession education. The Education Research Unit will work to leverage relationships, strengthen networks and provide the support needed to continue to invent the future of health care education.

The coming year, 2017, will see an improvement in operations efficiency for our programs and an expansion of our offerings such as workshops for research skill development and mentorship opportunities. The Education Research Unit web pages will be redeveloped to facilitate access and communications.

Current programs

- Education research rounds
- Education research and scholarship grants
Education scholars fund
The Education Scholarship for Staff and Physicians at North York General Hospital (NYGH) Continuing Education (ESSNCE) Program partnership
Mentorship opportunities
Ongoing involvement in planning the Annual Sunnybrook Education Conference

Future initiatives
- Sunnynet website redevelopment
- Research and scholarship workshops in collaboration with Practice-Based Research and Innovation
- Extension of mentorship opportunities for internal and external stakeholders

EDUCATION RESEARCH ROUNDS

Four Education Research rounds were held in 2016:

- “Competency by what design? Results of a scoping study and realist synthesis on competency in bedside invasive procedures”: Ryan Bridges, PhD
- “Re-imagining reflective practice in health professions education”: Stella Ng
- “Asking research questions during learner assessments in medical education”: Dr. Lynfa Stroud
- “Incident detection and learning in radiation medicine: a comparison of two educational interventions”: Robert Thompson and team

PRACTICE-BASED RESEARCH

The Education Research Unit is forming a close bond with the Sunnybrook Practice-Based Research and Innovation team. The shared aim is to leverage resources toward providing training in research skills for clinician-scientists in practice-based and education research. We are aiming to launch collaborative workshops in 2017 to meet the needs of these groups.

EDUCATION SCHOLARS FUND

The Education Research Unit is committed to building capacity for rigorous research and scholarship in health professions education at Sunnybrook by investing in training for front-line clinicians and educators. The Fund reimburses the cost of participation for professional development in research skills training to a maximum of $3,000. In 2016, the Education Research Unit was pleased to award Drs. Isabella Cheng and Jeremy Rezmovitz funds to attend the Wilson Centre Atelier “Health Professions Education Research Fundamentals.”

NORTH YORK GENERAL HOSPITAL PARTNERSHIP

The ESSNCE Program is a unique interprofessional education scholarship teaching program. The Education Research Unit has teamed with NYGH to deliver this introductory level emergent design program that supports the acquisition of fundamental education research skills. There are three core components:

- core curriculum
- paired advisors
- paired scientists

Sunnybrook has three staff enrolled in the NYGH-based program. While NYGH delivers the core curriculum, the Education Research Unit supports scientist resources.

Going to the Wilson Centre Atelier gave me more insight into the rigour of education scholarship. I loved the atmosphere. The best part was the insight gained after pitching your project to six education scientists. I highly recommend it.

Dr. Jeremy Rezmovitz
Staff Physician, Family Practice
EDUCATION RESEARCH AND SCHOLARSHIP GRANTS

The Education Research and Scholarship Grants (ESRG) provide seed support to new research teams and substantial funding to experienced researchers. Given the stringency of the review process, we have received higher-quality applications over time. Each application is reviewed by a panel of independent clinician-scientists from the Wilson Centre. In 2016, 19 applications were submitted and six grants were funded, for a total of $53,283. Past grants awarded include the following:

Compassion fatigue among surgeons in training

“Trainees within surgery may be at especially high risk of developing compassion fatigue as they are often first-line in the case of very sick and injured patients. They have limited experience, resources and support to help them cope and manage emotionally charged and difficult patient encounters.”

Dr. Paul Karanicolas, Principal Investigator
Surgical Oncologist
Scientist, Sunnybrook Research Institute

Does test-enhanced learning improve success rates of ultrasound-guided peripheral intravenous insertion? A randomized controlled trial

“It is essential that optimal teaching techniques are used when learning new invasive procedural skills. Test-enhanced learning is a technique that has been demonstrated to improve memory for newly acquired material.”

Dr. Jordan Chenkin, Principal Investigator
Physician, Emergency Medicine

Overnight obstetrical outcomes before and after resident work hour restrictions

“There is controversy regarding the tangible benefits of recent duty hour restrictions in North America. Many residency training programs in Canada are now adopting a system that has equivocal benefits in the literature. There is very little data on outcomes before and after duty hour restrictions in Canada, and none for the specialty of obstetrics. Therefore, it would be beneficial to analyze the effects of duty hour restrictions in a Canadian setting while the movement is in its infancy and most provinces do not have legal mandates in place.”

Dr. Jamie Kroft, Principal Investigator
Physician, Obstetrics and Gynecology

Education Research and Scholarship Grants by the Numbers

<table>
<thead>
<tr>
<th>Year</th>
<th>Successful applications</th>
<th>Total applications</th>
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<tr>
<td>2013</td>
<td>$50,276</td>
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<td>2014</td>
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<td>2015</td>
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<td>2016</td>
<td>$53,283</td>
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$10,000 maximum funding awarded per project
4 years in operation

31 research teams received funding
$212,392 total funding awarded through operating grants
TECHNOLOGY

TECHNOLOGY-ENHANCED TEACHING & LEARNING
SIMULATION

In October 2016, the Sunnybrook Canadian Simulation Centre (SCSC) received accreditation from the Royal College of Physicians and Surgeons of Canada for the next five years. We are the first centre in Ontario and the third in Canada to be re-accredited by the Royal College.

We increased learner participation by 28% this year, surpassing our target by 26%. The simulation programs explored opportunities to support corrective action and addictive training, specifically for practice re-entry and competency assessment through simulation.

This fall, the SCSC and Tory Regional Trauma Centre received the Toronto Police Traffic Services Appreciation Award in recognition of their collaboration and support in the development of the Police Officer’s Guide to the Trauma Room. The program combines an in-class session with videos to help new officers become familiar with the trauma environment and team. The first of its kind, this orientation program was delivered at police headquarters to all new officers assigned to the hospital. Following the successful implementation of this guide, Toronto Police Services is recommending that a general version be provided to other provincial police services.

INITIATIVES

Catheter-Associated Urinary Tract Infection (CAUTI) Simulation Course

National Surgical Quality Improvement Program (NSQIP) data indicated that Sunnybrook’s performance on catheter-associated urinary tract infections (CAUTI) was suboptimal. Consequently, Sunnybrook set a target to decrease CAUTI incidence by 60% by April 1, 2016. A strengths, weaknesses, opportunities and threats analysis highlighted an education gap concerning urinary catheter indication, insertion, follow-up and discontinuation.

The course aimed to create a comprehensive educational intervention that encompasses gap analysis, sound instructional design and impact measurement to facilitate the objective of reducing CAUTI by 60% by April 1, 2016. Further analysis indicated that the most significant learning gap was within the medical student population. The following educational interventions were implemented as a mandatory session for all Sunnybrook medical students during their surgery rotation:

- e-module and video
- simulation, including education, demonstration and 60 to 90 minutes of hands-on practice
- assessment: 100% score on procedural checklist completed in the SCSC

Historically, there was an assumption that the current medical curriculum addressed this learning need during “Surgery Boot Camp.” Learners, however, demonstrated significant gaps in catheter indication and insertion procedure during their first catheter insertion.

After one-on-one learning sessions with an expert facilitator, learners were able to perform and demonstrate the correct procedure, showing an increase from 60% to 100% completion of the correct checklist steps.
The current surgery rotations are not sufficient for students to acquire the proper technique to place urinary catheters safely in patients. During the initial insertion learners indicated they did not feel prepared or confident to insert urinary catheters on real patients. After reviewing the video and e-module and completing the simulation course, learners expressed more confidence and preparedness in performing the procedure. Learners found the course helpful for several reasons, including these ones:

- opportunity to practice good hand hygiene and learn how to maintain a sterile field
- availability of male and female models for practice
- good student-to-instructor ratio
- accuracy of simulation models and feedback

With subsequent sessions we will be able to collect additional data to assess further the impact of this project. The evaluation strategy includes the following:

- a pre- and post-training survey
- assessment by the expert instructor using a procedural checklist while performing the skill
- evaluation of hospital CAUTI rates before and after simulation training program
- outcomes assessment against the NSQIP benchmark

The Toronto Police Services recognizes the Sunnybrook Canadian Simulation Centre and Tory Regional Trauma Centre with a special award. L to R: Inspector Andrew Noorie, Debra Carew, Constable Paul Breeze, Sharon Ramagnano, Dr. Avery Nathens, Dr. Ari Zaretsky, Agnes Ryzynski and Dr. Luis Da Luz
Advance Care Planning Simulation: Let’s Talk About It

Advance care planning (ACP) conversations are used to learn about a person’s values, beliefs and wishes related to their future health care. These conversations can occur at any stage of a person’s life, whether they are healthy or have a serious illness. The outcomes of these conversations can then be used to inform goals of care (GOC) discussions when treatment or care decisions are made. Improving communication skills in ACP and GOC conversations will lead to enhanced patient-centred care and greater satisfaction with care.

The ACP simulation program is a comprehensive interprofessional education initiative to build skills and confidence for all Sunnybrook staff to initiate quality of dying conversations. The goal of this corporate initiative and the broader Quality Dying Initiative is to support physicians in initiating conversations with patients and family members around illness understanding. The SCSC initiated the first ACP simulation program, which was launched during National ACP Week with great uptake. Participants commented that this was an extremely valuable resource and experience. Their feedback also demonstrated a demand for more simulation programs that extend to patients and families. Our next step will be to expand the program to encompass regular simulations starting with oncology and general internal medicine.

By the end of the ACP simulation program participants will be able to do as follows:

- identify and clarify the role of the substitute decision-maker
- highlight the importance of person-centred conversations and best approaches
- demonstrate continuum of conversation between ACP and GOC, as well as its iterative nature

Code white simulation for psychiatry

The management of violent outpatient psychiatric patients was an identified gap that posed physical and psychological risk to staff. An interprofessional curriculum was developed for psychiatric nurses, staff psychiatrists and hospital security personnel. We provided a simulation-based training course, which received the Award for Most Outstanding Continuing Education Activity in Psychiatry in Canada from the Council of Psychiatric Continuing Education.

Engaging patients in the education of our learners

Sunnybrook started an initiative to involve real patients in education activities at the hospital. The goal is to use invaluable real patient insight to improve the experience for all Sunnybrook patients. The SCSC was approached...
by senior leadership to create the first program involving patients in education at Sunnybrook. We incorporated this initiative into the anesthesia clerkship simulation curriculum, specifically in the exit-day pre-op scenario.

In this scenario, a Sunnybrook patient volunteer interacts with medical students during a pre-op assessment interview along with a standardized patient. The patient volunteer plays the sister of the standardized patient who is attending the pre-op clinic prior to surgery. At the end of the pre-op station, the volunteer is given the opportunity to speak to the students regarding her experience as a patient. The medical students are given the unique opportunity to hear and get feedback directly from a real patient on their interactions and ways to make the patient experience more comfortable and meaningful.

Feedback from the volunteers highlighted three themes:

1. Students need to simplify their language by avoiding medical jargon
2. Students need to improve their active listening skills
3. Students were highly confident and professional

There was consensus among the medical students that the initiative contributed positively to their professional development by providing an opportunity to understand better the patient's perspective. Based on feedback, 77% of students said this experience motivated them to change their practice, particularly with respect to body language, active listening, sensitivity, empathy and mindful communication.

Automated electrical defibrillator simulation for nephrology

The dialysis unit is being relocated from the main campus to another building where there will not be cardiac arrest teams. As such, automated electrical defibrillators (AED) were purchased for the new location. All nurses and dialysis physicians underwent interprofessional simulation training on this new equipment prior to the move to ensure patient safety at the new location. This course also provided nurses and physicians with the necessary competencies to identify and treat deteriorating patients and operate an AED safely. There were three learning objectives for this course:

1. To respond to emergency situations in a timely manner utilizing critical thinking skills
2. To apply knowledge and skills related to basic cardiac life support with AED appropriately, within a non-threatening environment
3. To communicate effectively and work collaboratively as a team

Enhancing Code Blue response at Sunnybrook

The SCSC has partnered with the Emergency Preparedness Department and the CPR Executive Committee to develop and implement routine mock Code Blue simulations throughout Bayview campus. The goal of these simulations is to improve the team response time to first defibrillation to less than three minutes. By running simulations in real settings team members will be able to improve their technical skills, strengthen team communication and enhance situational awareness. These simulations will be conducted on an ongoing basis.

Future initiatives

- Increase the number of teachers and learners
- Acquire new simulation equipment to expand access and opportunities for learners
- Expand quality improvement initiatives via skill acquisition, practice and impact measurement
- Expand national and international leadership

LEARNING MANAGEMENT SYSTEMS

This year, Learning Management Systems partnered with mdBriefCase to ensure accessibility for physicians. All staff and physicians now have access to myEducation. We continue to explore opportunities for development and growth of mobile learning.

Sunnybrook's New Online Registration System: a One-Stop Shop for Students

With more than 4,000 learners arriving at Sunnybrook each year, we knew that we needed a more user-friendly way for students to register. Working together across 38 professions, we have implemented a robust system that can handle all of the information for our three campuses. Our students now have access to register from anywhere in the world with our easy-to-use web-based system. For our education team, we also have a significantly enhanced way of managing data, compiling reports and communicating with our students. Having all of our student information in one place is fantastic.
Over the last year, Sunnybrook’s education team partnered with the vendor Knowledge4You to implement MedSIS 3C, a system that supports functions at every step of the learner life cycle—from registration to deregistration. Working together across professions has helped us to streamline our processes and provide a more consistent service to our students. In addition, it has helped us to grow as a team. Staff and students have responded enthusiastically to the new system.

**Our Students Say**

It was very organized—I was here last year, and I find this more convenient.

It was very helpful not running around for forms. No more carrying paper!

I actually enjoyed my registration. (Did I just say that?!)

**Our Staff Say**

I am very pleased with the outcome of our new registration system, especially with how this system has enhanced the students’ registration experience.

Sinthujah Santhirasiri, Manager Postgraduate Medical Education and Education Observers

It was amazing to see this very complicated project come to fruition with amazing team work with educators across all health care professions!

Dr. Eugenia Piliotis, Director Peters Boyd Academy
Sunnybrook Library Services is your connection to the latest medical information resources. This year, we created a whole new way to connect you to high-quality and evidence-based medical information resources on cancer. On April 6, 2016 we launched the Cancer Information Portal (CIP), the first comprehensive cancer portal of its kind in the Toronto Academic Health Science Network (TAHSN). As a one-stop shop, the CIP is an easy-to-use online tool that provides curated cancer resources for staff, students, volunteers, patients and families.

Users can access internal and external resources, such as the library's premium subscribed databases, journals, print and electronic books, as well as reliable open-access content. During the development stage of the portal, we met with stakeholders across the Odette Cancer Centre and held focus groups to decide which types of resources users need to support their cancer-related patient care, teaching and research. The portal includes categories in the field of oncology, and categories such as cancer news, interprofessional collaboration, patient education and others. We have carefully curated these resources and built a user-friendly tool so that our clinicians, scientists, staff and students can save time in finding the information they need on a daily basis.

Access points for the CIP can be found on various departmental intranet pages on Sunnymet, including the Library Services, Odette Cancer Centre and Medical Education home pages, as well as on SunnyCare. The patient education component of the portal is publicly available on the internet at sunnybrook.ca. The portal is accessible 24-7 from any computer or mobile device connected to the network at Sunnybrook. We continue to update the CIP as new resources become available and, as always, welcome feedback and resource recommendations from our users.

This portal brings the library to the screens of our users. We will continue increasing our online presence so our users can stay connected with the information they need to deliver the best care, teaching and research at Sunnybrook. We plan to create more information portals for Sunnybrook’s other priority programs.

Sunnybrook Library Services provides new print and e-books, databases, journals and other resources to different areas across the hospital to help improve patient care, education, teaching and research. We also updated our patient education collection to include new books that are accessible and relevant for patients. In the past year we added approximately 200 new books and e-books relevant to Sunnybrook’s priority programs as well as other hospital departments. We have been able to develop our collection to meet users’ needs despite serious shortages in our collections budget.

In addition to connecting with users online, we continue to increase our in-person contact with the Sunnybrook community. We held orientation sessions for student groups and education leaders to teach them how Library Services can support teaching, learning, research and patient care. Our Library Services booth can be found at many Sunnybrook events, such as World Diabetes Day and Surgical Oncology Education Day. Our monthly health awareness displays highlight resources for a different health topic each month and allow us to share information while connecting with staff and patients.

We also continue to support research and learning with our reference and literature searching services. Last year we received more requests for systematic review searches from researchers. These complex and time-consuming searches involve working closely with users to create a comprehensive and accurate search strategy.
that can be applied across multiple databases to uncover relevant literature for their review. This paves the way for researchers to publish more systematic reviews. Our small team of professionals is proud to offer continuously high-quality and timely services to the hospital’s staff, students, trainees and volunteers, and to meet the information needs of the Sunnybrook community.

We plan to develop FAQ-based video tutorials about the library’s resources, services and facilities in the coming months to augment technology-enhanced learning experiences. Our staff will create these short online videos using a screen-capture program that makes it easy for viewers to follow along with on-screen instruction. These videos will focus on using and accessing library resources and will be available from any computer on site.

Library Services by the Numbers: 2016

- 2,004 document delivery and interlibrary loans requests
- 2,227 literature searches
- 4,278 reference questions answered
- 200K searches in premium databases
- 1,226 tours and orientations
- 710 participants in classroom and one-on-one training
- 15,250 visits to library services intranet homepage
- 4,540 print books in our collection
- 369 e-books in our collection
- 3,000 journals (print and electronic) in our collection
CAPACITY

EDUCATION CAPACITY BUILDING
The goal of the Education Capacity Building committee is to build and enhance education capacity across Sunnybrook in the areas of educator development, continuing professional education, and patient and family education.

Tamara Harth and Agnes Ryzynski from the Sunnybrook Education Advisory Council completed the Collaborative Change Leadership certificate through the University of Toronto. This interprofessional education leadership training required participants to apply their learning to an initiative prioritized in the health care system. The initiative selected was advance care planning. The design of this education strategy included three key stages:

1. Seeking input from all users, including patients
2. Appreciative inquiry to obtain input from stakeholders across the health care system
3. Application of the social accountability lens

This resulted in a robust Advanced Care Planning Patient and Staff Education Strategy.

PATIENT AND FAMILY EDUCATION

Patient and Family Education is a critical part of care as it provides knowledge about conditions and treatments, empowers people to be active participants in their care, and has an impact on the effectiveness of their treatment and overall health.
This past year, we provided $15,000 in funding across Sunnybrook for the development of patient education materials that met a gap in clinical care, adhered to best practices in patient education and applied universal precautions to mitigate low health literacy. (See descriptions of some of the projects on the next page.)

We also worked with Organizational Development to deliver eight health literacy workshops for staff and physicians, host a patient education session during Education Week featuring teach back and provide a hands-on workshop at the Education Conference. The workshop included video scenarios on health literacy, exercises for developing plain-language materials and practice sessions on teach back.

Effective patient education must consider the learner’s abilities and skills, how the learner most effectively learns, and how to ensure and validate learner understanding. The workshops, patient education grants and health literacy sessions were launched to build capacity among Sunnybrook staff and physicians to deliver excellent patient family teaching.

“Patient as teacher” is becoming one of the most important aspects of patient education work at Sunnybrook. Integrating patient knowledge and experience into the design, development and delivery of patient education programming is essential to ensuring that patients feel empowered and motivated to participate in their care.

The Odette Cancer Program has taken the lead on this concept by offering education workshops to patients and families on topics where patients stand side by side with clinicians to talk about disease, treatment and support. They have also created a series of “patient as teacher” videos, which feature patients providing teaching tips about their cancer experience. Patients also participate in clinic alongside the rest of the health care team to share their perspective and connect people to the resources and teaching tools they used to navigate their cancer journey. This approach proved to be very effective and received excellent feedback from patients and families. We hope to roll out similar “patient as teacher” initiatives across the hospital in other clinical areas.

As a physiotherapist and regulated health professional, I take pride in my profession’s promotion of lifelong learning. I owe it to my patients to be the best clinician I can be.

It’s also important for me to be in an organization that values education. Sunnybrook supports me in my professional development by ensuring I have access to paid education days and helping to fund these opportunities.

Tina Sahota, registered physiotherapist
PRINT FUND COMPETITION:
PUTTING PATIENTS FIRST

We provided grants of up to $1,000 to groups to develop printed education materials that meet a gap in clinical care, adhere to best practices in patient education and apply universal precautions to mitigate low health literacy. Here are a selection of those materials.

Brochure inserts to communicate Creative Arts Therapies services to patients, families and staff

The materials will support the diverse needs of the community by ensuring that patients and families have access to Creative Arts Therapies services at Sunnybrook. The group strives to communicate how the unique services of art, horticultural and music therapy services can contribute to quality of care, and maintenance of health and well-being. The inserts will support patients and families in playing an active role in their health care decisions and enhance the delivery of psychosocial services to patients and families.

Postpartum booklet: a guide for caring for yourself and your baby

This booklet will provide information about what is taught to families during their postpartum stay, and a review of existing knowledge. It will cover what to anticipate following a vaginal or caesarian birth, how to care for a newborn baby and breastfeeding. This booklet will also serve as an interprofessional teaching tool enhancing consistent messaging to families.

Ranchos Los Amigos Scale of Cognitive Recovery: a guide for family and friends

Recovery from traumatic brain injury (TBI) is complex. The widely used Rancho Los Amigos Scale of Cognitive Recovery (RLAS) helps family members to be more aware of what is happening to their relative with a TBI. Because recovery from TBI can be prolonged, the RLAS explains the trajectory, how families can interact with the patient appropriately and optimally, and cognitive processes following TBI.

Erections, cancer and your treatments: a guide for men and their partners

An assessment of prostate cancer patients at the Odette Cancer Centre (OCC) found that erections were the most important topic on which they wanted more information. There are no resources at the OCC, however, that address cancer and erectile function. This lack of education may cause anxiety and lead patients to under-report concerns to health care professionals. Evidence suggests that when patients are not given information they look to other, potentially less reliable, sources. This can lead to misinformation, more anxiety and purchase of treatments that are not evidence-based, potentially harmful and expensive.

COPD: a guide for patients and families

Patients with chronic obstructive pulmonary disease (COPD) frequently visit the emergency department (ED) for COPD exacerbations. Self-management of symptoms helps to reduce the number of ED visits and hospital admissions for COPD. To provide education on self-management, the General Internal Medicine (GIM) program distributes material provided by the Lung Association on inhaler technique and symptom management. The material is extensive, and is not senior friendly or effective for patients. Creating a resource with clear and simple messaging on how to manage COPD symptoms at home could reduce the number of COPD exacerbations requiring hospital admissions and reduce the burden on our health system.

Exercise Rx: “prescribing exercise” for health

In addition to being important for physical health, exercise improves psychosocial well-being and mental health. This project aims to create a brochure for patients and a complementary “prescription pad” for health care providers to work with patients to document activity goals (e.g., to walk for 30 minutes three times per week for the next four weeks). The prescription may be dispensed by any member of the interprofessional team as a catalyst for change, to communicate the importance of the exercise recommendation and to help patients set goals.
The role of the Student Experience Committee is to optimize the student experience in alignment with Sunnybrook’s education strategy and to report on associated metrics. Our work is grounded in supporting student safety and well-being. We represent all students at all three campuses.

This year, we created terms of reference to enhance our impact. In February 2016 we introduced a new event, our inaugural Student Wellness Fair. The goal was to provide short, hands-on and easily applicable opportunities for students to enhance their wellness during placements and rotations. We covered topics such as mindfulness, healthy eating choices and self care for caregivers.

After the event, 92% of students rated their satisfaction level as “satisfied” or “very satisfied.” Our evaluations also indicated that this initiative helped students feel supported in their well-being and that they hoped to attend more events like this in the future. We now offer two annual large-scale events in the fall and winter semesters to help us to support a sense of community among students.

Capturing the voice of the student is essential to our committee’s work! We have five student members on the committee, but with more than 4,000 students passing through Sunnybrook each year, we know we need to work hard to ensure that trainees have opportunities to provide feedback. This year we reinvented our survey using feedback from students and committee members. We reduced the survey length by half and enhanced our survey distribution process to improve our response rate. Highlights from the survey are shown on the facing page.

At Sunnybrook we see students as leaders as well as learners. This year we expanded opportunities for student...
engagement in strategic initiatives and corporate events such as:

- including students in the planning process for our future online documentation system
- working with students to create our student wellness event
- having a student act as a judge for the presentations at our Interprofessional Collaboration Showcase
- inviting students to attend and present at SEAC meetings

We continue to expand our student experience events and are exploring the possibility of creating a student experience week. We are also actively engaged in creating a communications plan and template to ensure that student feedback is shared with the organization. By creating a feedback loop we can collaborate with stakeholders across Sunnybrook to optimize the student experience.
The Interprofessional Education (IPE) Committee is responsible for enhancing organizational capacity with respect to interprofessional collaboration, a key priority of Sunnybrook’s interprofessional collaboration strategy. Our focus is to create opportunities where staff, physicians and students learn about, from and with each other within and across Sunnybrook’s three campuses to enable effective collaboration and improve health outcomes.

In the last year we formally established our focus and solidified our alignment with Sunnybrook’s interprofessional collaboration strategy by creating terms of reference. We also championed 10 elective credit activities with three new topics introduced:

- Appreciating the impact of wellness on collaborative teamwork and care
- Surviving the shipwreck together: an introduction to Sunnybrook’s core competencies for interprofessional team collaboration
- The gentle persuasive approach

The initial focus is with staff from the Odette Cancer Centre. This pioneering pilot program of four core sessions will inform the larger goal of implementing a mindfulness initiative across Sunnybrook. The aim is to launch the mindfulness sessions as part of a workshop series by autumn 2017.

We organized eight interprofessional grand rounds last year: four at the Bayview campus and two each at the Holland Centre and St. John’s Rehab. To continue to build champions and a community of practice for teamwork, we led the 7th Annual Interprofessional Collaboration Showcase and partnered with the Michener Institute at University Health Network to offer an on-site interprofessional collaboration certificate program for 24 attendees.

We are rolling out Sunnybrook’s core competencies for interprofessional team collaboration across clinical units and departments. Committee members are delivering a fun and interactive workshop to ensure that all Sunnybrook teams can speak the same language. Interprofessional communication, conflict resolution, role clarification, shared decision-making, reflection and values and ethics are essential to how our teams excel!

At the next level, we are working to partner with patients and their families. For example, this year we included patients and family members as keynote speakers and podium presentation judges at the Interprofessional Collaboration Showcase, content experts and co-facilitators in our IPE structured placements, and presenters at interprofessional grand rounds.

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Two of our committee members, Leanne Hughes and Nora Mark, presented at the Therapeutic Recreation Ontario Conference held in Toronto in June 2015. In September 2015 members of the IPE Committee had the honour of presenting five IPE-related abstracts at Collaborating Across Borders, a joint conference linking Canada and the United States around the key themes of interprofessional education and practice.

The abstracts and participants are as follows:

**A tale of two hospitals: creating inter-organizational synergies in student IPE**
Lindsay Beavers (St. Michael’s Hospital [SMH]), Isabella Cheng, Lina Gagliardi, Brigette Hales, Aimee Hindle (SMH), Elizabeth McLaney, Sasha Miles (SMH), Rebecca Singer (Centre for Interprofessional Education)

**Strategic planning beyond the boardroom: Using a collaborative change leadership approach to create an organizational interprofessional education strategy**
Lisa Di Prospero, Siobhan Donaghy, Sandi Ellis, Shamena Maharaj, Elizabeth McLaney

**Developing hospital-focused core competencies for interprofessional team collaboration**
Sandi Ellis, Elizabeth McLaney

**Surviving the shipwreck together: an interactive, interprofessional role playing game for teams**
Tracey DasGupta, Siobhan Donaghy, Sandi Ellis, Elizabeth McLaney, Lisa Di Prospero

**The highlight of my IPE placement was when they arranged for a former patient from St. John’s Rehab to speak. Paul talked about how overwhelmed and frightened he was when he was admitted, but how his fears were relieved once he met the interprofessional team. He recalled the mutual respect, trust and open communication. The image of the interprofessional team gathered at Paul’s bedside stuck with me. Working with the team and the patient to set goals is a core competency that informs my practice daily.**

Karen Steele
Occupational therapy and physiotherapy assistant student

**Therapeutic clowning and music therapy bring creative solutions to health care through interactive interprofessional education**
Helen Donnelly (Holland Bloorview), Darlene Hubley (Holland Bloorview), Elizabeth McLaney

Interprofessional Education Committee Co-Chairs L to R: Sandi Ellis and Elizabeth McLaney
STUDENT AND STAFF WELL-BEING

The purpose of the Student and Staff Well-Being Subcommittee is to do as follows:

- Enhance staff and student well-being through mindful psychoeducation and experiential programming
- Complement and align with wellness initiatives under the human resources portfolio
- Help staff and students identify their personal well-being needs to support resilience, provide experiential education to those who would benefit from it and direct those in need to appropriate resources

We conducted the pilot program with outpatient registered nurses (RNs) in the Odette Cancer Centre. The goal was to develop an intervention to reduce symptoms of burnout and improve stress management and well-being of staff and students. The program, which needed to be educational, feasible and scalable, was also designed to draw attention to the risks of burnout in health care.

We disseminated a survey to 100 outpatient RNs in the Odette Cancer Centre and achieved a response rate of 45%. Of those who responded, 95.6% expressed interest in signing up for this program, with 64.4% saying they were “very” interested. Two-thirds of respondents indicated they were willing to commit to roughly 10 hours of classroom time and 10 to 20 minutes per day of home practice. Of the 15 respondents who expressed no interest, four listed “too much home practice” as their reason. The rest cited institutional factors as their reason.

The program, titled “Mindfully working with stress,” provides principles from various sources, including mindfulness, cognitive-behavioural approaches and positive psychology.

The 10 hours of classroom time included:

- one hour for introduction
- one hour, 45 minutes for each of the four core weekly sessions
- one hour dedicated to synthesis and planning well-being
- one hour follow-up and wrap-up session held approximately one month later

The implementation of this program included:

- six outpatient RNs from the Odette Cancer Centre
- classroom time during paid working hours, which included back-filling the nursing staff shifts
- top-down support from management as demonstrated by back-filling staff shifts

After the program ended, participants saw a difference in the primary outcomes of emotional exhaustion and mental well-being. Participants also provided positive feedback on the program, highlighting the need for and effectiveness of such a strategy. We learned several lessons from this pilot program:

- There is an appetite for this type of program.
- The results for the participants are effective.
- The time and energy required is feasible.
- The program requires strong support from management.
- The perception of the program among participants and staff is complex.
Our next step is to work with Sunnybrook leadership to identify cohorts who will be offered the workshop series next. Similar outcomes will be tracked.

PETERS-BOYD ACADEMY

The Peters-Boyd Academy (PBA) comprises three main teaching sites: Sunnybrook, Women’s College Hospital (WCH) and NYGH. The PBA hosts more than 400 students each year, including visiting students and those here for core electives or selectives.

Our initiatives from this past year include:

- A student mentorship catalogue focused on career advice, research and clinical shadowing opportunities. The catalogue consists of U of T faculty at all academy sites.
- The PBA Student Portal on MedSIS (U of T) to share information and learning tools specifically designed for our students and to enhance communication.
- A patient volunteer program video to refresh our patient pool for patient student simulation sessions in preclerkship courses.

The PBA continues to host orientation, award and social events throughout the academic year. These include:

- year-one student orientation
- transition to clerkship
- Golden Stethoscope Awards and CC3 luncheon
- annual holiday party
- clerkship and longitudinal integrated clerkship information night
- PBA Student and Teaching Awards
- “Meet the professor” luncheons
- annual academies tour
- CC4 graduation luncheon

In 2015–16 we strengthened our partnerships with the WCH and NYGH academy sites through meetings and information sharing in an inclusive teamwork approach.

This year was also the pilot year for longitudinal integrated clerkship at the PBA, which is being streamed in conjunction with the standard block clerkship. Three students at Sunnybrook and four at NYGH are taking part.

We continue to assist and support student initiatives, such as the new PB-2-PB Mentorship Project launched this year and the Student Wellness Project that is in progress. We are very proud of our students and their achievements, including their passion and commitment to the Academy Cup Challenge. Since 2012 we have won four cups in a row, and we have our fifth cup in sight!

Future initiatives

- Delivery and implementation of the new foundations curriculum to cover preclerkship teaching for year one and two medical students
- Development of the PBA website

Jeremy Zung
Peters-Boyd Academy medical student (1T8)
At Sunnybrook, education matters! As part of this ongoing commitment, the Sunnybrook Education Advisory Council (SEAC) was formed in 2010 to provide a forum for leaders across all health professions at Sunnybrook to drive education strategic planning and implementation.

The council is helmed by the Vice President, Education and comprises the four committees detailed in this report, along with students and patients.
TRAINEES BY THE NUMBERS

4,832 trainees in 2015–2016

ADMINISTRATION
Medical administration 12
Human resources co-op 1
Total 13

MEDICAL TECHNOLOGY
Cardiorespiratory technology 1
Magnetic resonance imaging 2
Laboratory 13
Nuclear medicine 3
Radiation therapy 29
Radiological technology 7
Ultrasound technology 2
Total 57

MEDICINE
Undergraduate 675
Postgraduate 1,600
Total 2,275

NURSING
Total 1,577

PHARMACY
Pharmacy 127
Pharmacy technicians 10
Total 137

OBSERVERS
High school students 7
Undergraduate and graduate students 106
Health professionals 27
Non-clinical health professionals 9
Nursing 4
Physicians 89
Postgraduate medical or dental 33
Total 275

OTHER HEALTH PROFESSIONS
Ambulance dispatch 1
Art therapy 1
Audiology 6
Chiropractic 12
Clinical nutrition 11
Dental hygiene 1
Hearing instrument specialist 3
Massage therapy 70
Midwifery 6
Music therapy 2
Occupational therapy 103
Others 10
Physiotherapy 153
Recreation therapy 11
Respiratory therapy 26
Social work 65
Speech language pathology 17
Total 498
Our **TRainees** come from more than **50 COUNTRIES**
**AWARDS**

**PETERS-BOYD ACADEMY**

**Golden Stethoscope Award**
Stephanie Klein  
David Wang  
Marie Yan

**Preclerkship Faculty Teaching Award**
Dr. Nir Melamed  
Mechanisms, Manifestations & Management of Disease Teaching Award

**Clerkship Faculty Teaching Award**
Dr. Giuseppe Papa  
Vascular and Endovascular Surgery, Critical Care Medicine

**Dr. Steven Shumak**  
General Internal Medicine

**Dr. Nikola Grujich**  
General Internal Medicine

**Dr. Akita Verma**  
Emergency Medicine

**Dr. Rebecca Stoller**  
Family and Community Medicine

**Medical Mentorship Award**
Dr. Shelly Dev

**Resident Teaching Award**
Dr. Yyi Huang  
Dr. Ori Scott

**Student Case Report Award**
Tina Felfeli  
Preclerkship

**Laura Betcherman**
Clerkship

**Outstanding Contribution by a Student Award**
Alisha Olsthoorn

**Dr. A.W. Harrison Award**
Stephanie Klein

**Schulich Award**
Katherine LePage  
Alexandra Mardimae  
David Sheps

**Director's Special Award**
Mary Anne Cooper

**EXTERNAL**

**Dr. Mary Bell**  
2015 Rheumatologist of the Year Award, Ontario Rheumatology Association

**Dr. Sandra Black**  
2015 Officer of the Order of Canada, Governor General of Canada

**Dr. George Christakis**  
2015 John Provan Outstanding Surgical Educator Award, Canadian Association of Surgical Chairs

**Sandi Ellis**  
2015 Excellence in Clinical Teaching & Supervision, Michener Institute for Applied Health Sciences

**Dr. Rob Fowler**  
2015 Meritorious Service Cross (Civil Division), Governor General of Canada  
2016 Order of Ontario, Lieutenant Governor of Ontario and Chancellor of the Order of Ontario

**Dr. Michelle Hladunewich**  
2016 Human Touch Award, Cancer Care Ontario

**Sonali Kirshenbaum**  
2016 Greater Toronto Chapter of Oncology Nurses Chapter Champion Award, Canadian Association of Nurses in Oncology

**Dr. Irene McGhee**  
2016 Innovations in Patient Safety Education Award, Canadian Patient Safety Institute

**Dr. Robert Nam**  
2016 PARO Award, Professional Association of Resident of Ontario

**Dr. Julian Nedzeliski**  
2016 Order of Ontario, Lieutenant Governor of Ontario and Chancellor of the Order of Ontario

**Ilana Perlman**  
2016 Hospital Social Worker of the Year Award, Award of Excellence in Brain Injury Rehabilitation, Ontario Brain Injury Association

**Dr. Kathleen Pritchard**  
2015 Canadian Breast Cancer Foundation Lifetime Achievement Award, Canadian Cancer Society

**Dr. Jeremy Rezmovitz**  
2016 Early Career Development Award, The College of Family Physicians of Canada

**Susan Sutherland**  
2015 Distinguished Fellow, Association for Academic Psychiatry

**Dr. John Teshima**  
2015 Distinguished Fellow, Association for Academic Psychiatry

**Yili Wang**  
2015 Board of Governors’ Silver Award of Academic Excellence in Radiological Technology, Michener Institute for Applied Health Sciences

**Dr. Martin Yaffe**  
2015 Order of Canada, Governor General of Canada

**SUNNYBROOK**

**Shawn Binda**  
2015 Golden Apple Award

**Dr. Catherine Birt**  
2016 Dr. William Dixon Surgical Teaching Award

**Dr. Thomas Canil**  
2016 Harrison Award for Best Resident Teacher

**Fatima da Costa**  
2016 Bertin Award for Excellence in Customer Service

**Dr. Richard Holtsy**  
2016 Marvin Tile Award, Department of Surgery

**Daphne Steinberg**  
2015 The Golden Pear Preceptoring Award, Department of Clinical Nutrition

**Ronald Boudah**  
2016 Values in Action, Michener Institute for Applied Health Sciences

**Susan Crisp**  
2017 Bayer MR Award, Canadian Association of Medical Radiation Technologists

**Krista Dawdy**  
2017 Bayer MR Award, Canadian Association of Medical Radiation Technologists

**Stella Keriazis**  
2016 Values in Action, Michener Institute for Applied Health Sciences

**Dr. Yulia Lin**  
2016 CSTM-Ortho Award, Canadian Society for Transfusion Medicine, Canada

**Brian Liszewski**  
2016 CAMRT Steward of the Profession, Canadian Association of Medical Radiation Technologists

**Merrylee McGuffin**  
2016 Outstanding Reviewer of the Year, Journal of Medical Imaging and Radiation Sciences

**Dr. Umberin Nejeeb**  
PARO Lois H Ross Resident Advocacy Award, Province of Ontario
Dr. Tarek Abdelhalim  
2016 PARO Clinical Teaching Award

Dr. Shaheeda Ahmed  
2016 Pre-clerkship Award, Department of Medicine

Dr. Oleh Antonyshyn  
2016 Department of Surgery Undergraduate Teaching Award, Department of Surgery

Mark Anunciacion  
2016 Recognition Award, Department of Physical Therapy

Dr. Clare Atzema  
2015 Anna Jarvis Award for Teaching Excellence in Emergency Medicine, Division of Emergency Medicine, Department of Medicine

Dr. Mary Bell  
2015 Dafna Gladman Award, Division of Rheumatology

Cynthia Benchetrit  
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine  
2016 Recognition Award, Department of Physical Therapy

Dr. Scott Berry  
2015 Teaching Excellence Award, Division of Medical Oncology  
2016 Award for Excellence in Postgraduate Medical Education for Teaching, Performance, Mentorship and Advocacy

Dr. Grace Bradley  
2016 Alumni of Distinction Award, Faculty of Dentistry

Dr. Robert Cartotto  
2016 Recognition Award, Department of Physical Therapy

Dr. Adrienne Chan  
2016 Social Responsibility Award, Postgraduate Medical Education

Dr. Hall Chew  
2015 J.D. Morin Award  
2015 Toronto Ophthalmology Residency Introductory Course Award

Benji Choo  
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine  
2016 Recognition Award, Department of Physical Therapy

Dr. Edward Chow  
2016 Postgraduate Medical Education Excellence in Research Supervision Award, Department of Radiation Oncology

Mary Clarke  
2015 Fieldwork Supervision Recognition Award & 2016 Sustained Outstanding Service Contribution Award, Department of Occupational Science and Occupational Therapy

Dr. Gideon Cohen  
2017 Surgical Skills Centre Distinguished Education Award for Outstanding Contributions

Robyn Davies  
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine

Dr. Joel DeKoven  
2016 Part-time Teaching Award, Department of Medicine

Lisa Di Prospero  
2016 Colin Woolf Award for Long Term Commitment to Continuing Education

Dr. Andrew Dueck  
2016 Best Teacher of Residents, Division of Vascular Surgery

Dr. Craig Earle  
2016 William J. Sibbald Faculty Mentoring Award, Department of Medicine

Vera Fung  
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine

Edith Gagnon  
2015 Fieldwork Supervision Recognition Award, Department of Occupational Science and Occupational Therapy

Dr. Dov Gandell  
2016 Young Teacher Award, Department of Medicine

Dr. William Geerts  
2016 Department of Medicine Leadership Award

Dr. Phyllis Gianc  
2016 Outstanding Faculty Mentor Award Department of Medical Imaging, Faculty of Medicine

Sandra Harrop  
2016 Recognition Award, Department of Physical Therapy

Dr. Sender Herschorn  
2016 Clinical Teaching Award for Resident Teaching, Division of Urology, Department of Surgery

Dr. Michelle Hlandunewich  
2016 Continuing Teaching Education Award Department of Medicine

Annie Hoang  
2015 Interprofessional Teaching Excellence Award, Department of Family and Community Medicine

Stephanie Horner  
2015 Fieldwork Supervision Recognition Award, Department of Occupational Science and Occupational Therapy

Dr. Alayne Kealey  
2016 Dr. Gerald Edelist Award, Department of Anesthesia, Faculty of Medicine

Rahul Jain  
2015 New Teacher Award in Postgraduate Clinical Teaching, Department of Family and Community Medicine

Dr. Julia Keith  
2016 Teaching Award, Department of Laboratory Medicine and Pathobiology

Judy Knighton  
2016 Recognition Award, Department of Physical Therapy

Dr. Ron Kodama  
2016 Michael Jewett Postgraduate Lecture Award, Division of Urology, Department of Surgery

Dr. Jerome Lois  
2016 In-patient Teaching Award, Department of Medicine

Dr. Stanley Liu  
2016 Postgraduate Advocacy & Mentorship Award, Department of Radiation Oncology

Sandy Lyeo  
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine

Beth Mahy  
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine

Dr. Andrew McDonald  
2015 Anna Jarvis Award for Teaching Excellence in Emergency Medicine, Division of Emergency Medicine, Department of Medicine

Dr. Carrie McQuarrie  
2015 Innovation in Education, Postgraduate Educational Achievement Award, Department of Family and Community Medicine

Dimple Mistry  
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine

Dr. George Mochizuki  
2016 Early Career Excellence in Supervision and Mentorship Award, Rehabilitation Sciences Institute
Dr. Gerard Morton
2016 Postgraduate Teaching Award
Department of Radiation Oncology

Dr. John Murnaghan
2016 Recognition Award, Department of Physical Therapy

Dr. Robert Nam
2016 Postgraduate Surgical Teaching Award
Division of Urology, Department of Surgery

Dr. Umberin Najeeb
2017 Sarita Verma Award for Advocacy and Mentorship, Postgraduate Medicine, Faculty of Medicine

Veronica Palinkas
2016 Recognition Award, Department of Physical Therapy

Dr. Eileen Rakovitch
2015 Residents Award for Excellence in Clinical Teaching, Department of Radiation Oncology, Faculty of Medicine

Helen Razmjou
2016 Exceptional Recognition Award, Department of Physical Therapy, Faculty of Medicine

Lauren Sacks
2015 Fieldwork Supervision Recognition Award, Department of Occupational Science and Occupational Therapy

Tara Sardella
2016 Fieldwork Supervision Recognition Award, Department of Occupational Science and Occupational Therapy

Shahiroz Juma
2016 Recognition Award, Department of Physical Therapy

Christine Simion
2016 Recognition Award, Department of Physical Therapy

Emily Stairs
2015 Fieldwork Supervision Recognition Award & 2015 Exceptional Fieldwork Teaching Award, Department of Occupational Science and Occupational Therapy

Dr. Lynfa Stroud
2017 William Goldie Prize and Travel Award, Medical Education Scholarship and Research Department of Medicine

Dr. Ewa Szumacher
2016 Ivy Oandasan Leadership Award for Outstanding Leadership in Advancing Interprofessional Education, U of T and Centre for Interprofessional Education

Dr. Jordan Tarshis
2017 Clinical Excellence Award, Department of Anesthesia, Faculty of Medicine

Leslie Taylor
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine

Amy Wainwright
2016 Recognition Award, Department of Physical Therapy

Kaili Walters
2015 Teaching Award, Department of Physical Therapy, Faculty of Medicine

Dr. Anne Wideman
2015 DFCM Teaching Excellence in Family Medicine Clerkship Award & 2016 Teaching Excellence Award for Postgraduate Program, Department of Family and Community Medicine

Dr. Harvey Wong
2016 Ambulatory Teaching Award, Department of Medicine
SEAC CELEBRATING EXCELLENCE IN EDUCATION

Elaine Avila
2016 Patient & Family Education Award

Dr. Carole Cohen
2016 Educating Beyond Sunnybrook Award

Siobhan Donaghy
2016 Educating Sunnybrook Award

Dr. Jeremy Gilbert
2017 Teaching Award

Lawrence Jackson
2017 Allan Knight Lifetime Achievement in Teaching Award

Dr. Marc Jeschke
2017 Educating Beyond Sunnybrook Award

Dr. Yoo-Joung Ko
2016 Teaching Award

Mark Pasetka
2017 Student Experience Award

Dr. Dominique Piquette
2017 Educational Research Award

Dr. Anita Rachlis
2016 Allan Knight Lifetime Achievement in Teaching Award

Linda Ramjohn
2017 Educating Sunnybrook Award

The Learning Centre and the PEARL Volunteers
2017 Patient and Family Education Award

Dr. Hany Soliman
2016 Teaching Award
STRATEGIC PLAN 2017–2020: HIGHLIGHTS

The 2017–2020 Sunnybrook Education Strategic Plan builds on the Strategic Plan that began in 2012 and was refreshed in 2014. The original plan focused on improving communication, presence and process; enhancing quality, innovation and evaluation; and augmenting infrastructure.

In 2014, the plan was refreshed to address a new committee structure for the Sunnybrook Education Advisory Council (SEAC): Technology-Enhanced Teaching and Learning, Education Capacity Building, Education Excellence and Well-Being, and the Education Research Unit. These committees created ambitious two-year work plans that addressed the original strategic goals of education at Sunnybrook.

A four-step process to develop the strategic plan was adopted including a global scan, interviews with key stakeholders within and outside Sunnybrook, a retreat and documentation of the strategy to create a plan. Underpinning the development of the 2017–2020 Education strategy for Sunnybrook was the recognition that Sunnybrook Education must overcome internal silos, enhance communication, engage inquiry and scholarship, and play a leadership role in improving health care in Canada and beyond. An Education focus on quality, innovation and impact are fundamental to the enhancement of our health care system and outcomes.

VISION, MISSION, VALUES

VISION
Reinventing the future of health care education

MISSION
Lead in the development and dissemination of novel innovative methods of teaching and learning

VALUES*
• Promote excellence, accountability, compassion and respect in all the learning and teaching that we do
• Enable everyone to learn and teach
• Embed patient and family experiences and perspectives in all teaching and learning
• Create, transfer and apply knowledge across the organization
• Empower people at Sunnybrook to learn as they work
• Support a culture of continuous quality improvement, team-based learning and organizational transformation
• Enable equity and access to knowledge, education and health information
• We will seek to bridge silos, foster interprofessionality and inclusivity, enhance communication, and engage in inquiry and scholarship

*Derived with permission from the Centre for Addiction and Mental Health Guiding Principles for the CAMH Learning Organization, 2013
STRATEGIC PRIORITIES

The 2017–2020 Sunnybrook Education Strategic Plan emphasizes four priorities: Patient as Educator, Team-Based Learning, Learner Experience and Culture, and Education Scholarship.

The Plan elaborates on these four priorities through implementation strategies, 2017–2018 workplan activities (to be followed in the next year by 2018–2019 and 2019–2020 workplans), and metrics to measure performance in meeting the plan’s goals.
**Activity** | **Outcome**
--- | ---
Establish Patient as Educator Committee | Patient as Educator Committee established with annual workplan for 2018–2019
Create Patient as Educator training program | Patient as Educator training program established with involvement of all Sunnybrook clinical programs
Develop Patient as Educator video library | Patient as Educator series will include Advance Care Planning, Discharge Planning and Digital Narrative Medicine
Create formative feedback tool (completed by patients and families) for Sunnybrook student learners addressing their communication skills | Formative feedback tool on communication skills finalized

**Implementation Strategies**

- Leverage the lived experiences of patients and families in the development of patient education tools
- Develop innovative curriculum with patients and families for health care professionals
- Improve patient family education competencies through formative feedback to health professional learners
- Implement new models of team-based learning in collaboration with patients and families
- Integrate patient voice into team-based learning assessment tools
- Align Patient as Educator work with team-based learning and education scholarship, and increase linkage to person-centred care, Advance Care Planning, and relevant priority Program Quality Improvement Plans
- Integrate Office of Patient Experience representation and perspective into Patient as Educator committee

**Metrics for Patient as Educator**

- Number of Patient and Family Education (PFE) tools created in collaboration with patients and families at Sunnybrook per year
- Number of times formative feedback is provided by patients and families to student learners per year at Sunnybrook
- Number of health care professional curricula developed together with patient and families at Sunnybrook per year
- Number of Patient as Educator experts at Sunnybrook per year
## Team-Based Learning

Improve the performance of interprofessional teams through team assessment, self-directed team development, practice-based simulation, and the promotion of team innovators.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct an organizational inquiry to identify Sunnybrook’s interprofessional team-based learning needs</td>
<td>• Committee reflective of key stakeholders created and implemented&lt;br&gt;• Targeted evidence-informed communication plan regarding the value of team-based learning developed and implemented&lt;br&gt;• An organizational inquiry survey/interview process created, implemented and analyzed for themes&lt;br&gt;• Evidence-based, interprofessional team-based learning program defined and developed</td>
</tr>
<tr>
<td>Develop, implement and evaluate a competency-based team-based learning toolkit</td>
<td>• Competency-based team-based learning toolkit developed, implemented and evaluated</td>
</tr>
<tr>
<td>Develop a self-assessment process for teams to reflect on their collaborative work and initiate development plans</td>
<td>• Teams have completed team assessment and created their development plans</td>
</tr>
<tr>
<td>Develop simulation-specific team assessment tools to enhance understanding interprofessional team performance</td>
<td>• Simulation-specific self-reflective team performance assessment tool developed with incorporation of “Core Competencies for Interprofessional Team Collaboration”&lt;br&gt;• Simulation-specific global team performance assessment tool developed for simulation with incorporation of “Core Competencies for Interprofessional Team Collaboration”</td>
</tr>
<tr>
<td>Provide opportunities for active interprofessional team-based learning through simulation</td>
<td>• Sunnybrook’s “Core Competencies for Interprofessional Team Collaboration” mapped to common simulation debriefing tools/methodologies&lt;br&gt;• Simulations completed with inclusion of “Core Competencies for Interprofessional Team Collaboration” and related curriculum developed&lt;br&gt;• Method established for engaging patients in team-based learning simulations</td>
</tr>
<tr>
<td>Build additional capacity to foster team-based learning innovators</td>
<td>• BOOST program (Sunnybrook/CIPE collaboration) piloted to ensure alignment with team-based learning strategic priority</td>
</tr>
<tr>
<td>Create recognition strategy for team-based learning</td>
<td>• Structure created to recognize successful interprofessional team-based learning</td>
</tr>
</tbody>
</table>

### Implementation Strategies

- Identify Sunnybrook’s interprofessional team-based learning needs
- Develop, implement and evaluate a competency-based team-based learning toolkit
- Develop a self-assessment process for teams to reflect on their collaborative work and initiate development plans
- Develop simulation-specific team assessment tools to enhance understanding of interprofessional team performance

- Provide targeted opportunities for active interprofessional team-based learning through simulation
- Build additional capacity to foster team-based learning innovators
- Create a recognition strategy for team-based learning
Metrics for Team-Based Learning

- Number of team assessments completed
- Number of “hits” to team-based learning toolkit on intranet
- Number of team-based learning abstracts, posters and presentations submitted by members of the key stakeholder committee
- Number of team-based learning simulations conducted and number of participants
- Number of BOOST participants

- Patient satisfaction/experience (Source NRC/CPES): How would you rate how well the team members on your unit worked together?
- Percentage of Sunnybrook learners answering “Yes” to TAHSNe Student Experience Questionnaire: “I experienced team members learning together collaboratively across professions”
- Number of red and yellow flags on accreditation self-assessment (for evaluating team performance and assessing how different professionals work together)

To create our EDUCATION STRATEGIC PLAN, we conducted interviews with many individuals and groups. Their feedback was critical to informing our priorities and work plans.
## Learner Experience and Culture

Optimize learner experience and engagement by exploring the student and teacher experience, advancing infrastructure and building partnerships.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Outcome</th>
</tr>
</thead>
</table>
| Assess and enhance the student experience | • Communication plan implemented to foster organizational knowledge of the student experience (including sharing of performance metrics)  
• Guidance provided to groups with identified improvement goals based on detailed analysis of student experience survey results  
• Interprofessional forum for sharing created and inventory of best practices and improvement strategies obtained |
| Optimize the student orientation process | • Focus groups results obtained from study entitled “Perceptions of Orientation for Health Professional Learners” to identify salient elements of orientation  
• Priorities identified to improve student orientation and work plan created |
| Invest in student wellness and engagement | • Mechanism established for students to alert key education leaders when stressors are encountered in the learning environment  
• Ongoing wellness and community-building events planned and implemented with input from students  
• Forum developed to celebrate student accomplishments (e.g., student rounds) |
| Explore the patient experience in relation to students | • Research study completed entitled “Developing a Tool for Patients To Contribute to the Evaluation of Nonmedical Expert Skills of Health Professional Students in Training”  
• Messaging developed to educate patients, families and the community regarding student contributions to Sunnybrook and participation in health care  
• Sources of patient feedback regarding interactions with students explored and developed |
| Understand the teacher experience | • Key stakeholder working group developed  
• Teacher experience survey developed |
| Advance infrastructure to support policy, procedure, space planning and operations | • Student registration system and centre planning initiatives ongoing and on target |
| Assess opportunities to strengthen partnerships internally and externally | • Enhanced number of knowledge exchange and partnership conversations conducted internally and with affiliated academic institutions, peer hospitals, extra-departmental units (EDUs) and community organizations |

## Implementation Strategies

- Assess and enhance the student experience
- Optimize the student orientation process
- Invest in student wellness and engagement
- Explore the patient experience in relation to students
- Understand the teacher experience
- Advance infrastructure to support policy, procedure, space planning and operations
- Assess opportunities to strengthen partnerships internally and externally

## Metrics for Learner Experience and Culture

- Student experience survey results (including comparative performance for metrics tracked across TAHSN)
- “I felt prepared to begin my placement after orientation”
- “I felt welcome and accepted as part of the team”
- Student experience event feedback (number of attendees and overall satisfaction)
- Qualitative data from study entitled “Perceptions of Orientation for Health Professional Learners”
- Qualitative data from study “Developing a Tool for Patients To Contribute to the Evaluation of Nonmedical Expert Skills of Health Professional Students in Training”
- Number of student experience improvement initiatives and best practices identified via Student Experience Committee
<table>
<thead>
<tr>
<th>Activity</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Realign structure of Practice-Based Research and Innovation (PBRI), and Education Research Unit (ERU)</td>
<td>Director of PBRI and ERU, with ongoing ERU Executive Advisory Committee</td>
</tr>
<tr>
<td>Establish endowed Chair in Education at Sunnybrook utilizing SHUTC Trust Fund</td>
<td>Education Scientist assumes role of Sunnybrook Chair in Education Research</td>
</tr>
<tr>
<td>Appoint Education Scientist to Evaluative Clinical Sciences Platform of Sunnybrook Research Institute (SRI)</td>
<td>Education Scientist appointed to SRI</td>
</tr>
<tr>
<td>Appoint patient or family member to Education Research Unit</td>
<td>Input from patient/family member is integrated into Education Research Grant judging</td>
</tr>
<tr>
<td>Increase collaboration with Wilson Centre to increase number of staff trained and supported to conduct education research</td>
<td>Increased number of Sunnybrook staff that apply for and successfully win Education Research Grants compared to 2016–2017</td>
</tr>
<tr>
<td>Together with PBRI, SRI and Decision Support, create ERU Productivity Working Group</td>
<td>Database created to measure Sunnybrook Education grants and publications accurately</td>
</tr>
<tr>
<td>Advertise Sunnybrook Education Grant for Novel Curriculum Design</td>
<td>Annual award for new educational curriculum that is developed by Sunnybrook staff or faculty that has impact beyond Sunnybrook</td>
</tr>
<tr>
<td>In collaboration with SRI and PBRI, create scorecard for Education Research</td>
<td>Scorecard for Education Research</td>
</tr>
</tbody>
</table>

### Implementation Strategies

- Realign leadership and increase linkage between PBRI and ERU
- Work with SRI to integrate ERU into SRI Evaluative Clinical Sciences Platform
- Increase linkage with AFP Innovation Grants
- Integrate patient and family feedback on Sunnybrook education research priorities
- Invest in recruiting and retaining PhD education scientist
- Build education research support infrastructure
- Update Sunnybrook Education Researcher database
- In collaboration with PBRI, conduct needs survey of education research of Sunnybrook
- Enhance quantity and quality of education research workshops and mentoring
- Work with Decision Support and SRI to measure education grants and papers at Sunnybrook
- Create a TAHSNp Fellowship opportunity with primary focus in simulation
- Support scholarship in curriculum development through designated funding from Annual SEAC Research Grant Competition

### Metrics for Education Scholarship

- Number of education research peer-reviewed grants carried at Sunnybrook per year
- Total amount of education research funding carried at Sunnybrook per year
- Number of teaching and education peer-reviewed publications with at least one Sunnybrook staff or faculty author per year
- Annual number of abstracts, presentations, grants and publications by Sunnybrook Education Research Grant recipients
- Number of new curricula created at Sunnybrook disseminated outside of Sunnybrook: local, provincial and national