Education at St. Michael’s Hospital

Collaboration, Innovation, Integration

2009-2016
A Message from the Vice-President of Education

At St. Michael’s Hospital, we are all teachers and we are all learners. We consider everyone at St. Michael’s to be both a learner and a teacher: our students, our staff and physicians, our patients and their families. We learn with, about and from each other.

The Education portfolio works towards improving the student experience, our teaching effectiveness and institutional learning opportunities. We do this with an overall goal of improving patient care. Under our themes of collaboration, integration, and innovation, we have redefined how we educate and support our students, staff, physicians, patients and their families to provide a better patient experience and to improve our health-care systems. We have embraced technology to make teaching and learning more feasible and accessible for all of our learners and we understand the need to continuously evaluate what we do and disseminate what we have learned.

We are innovative.

All of our students are managed through a first-of-its-kind electronic Student Registration System (SRS) which has improved the onboarding experience, and has now been adopted amongst our peer organizations across the Toronto Academic Health Sciences Network (TAHSN). We’ve also led the development and implementation of a learner engagement survey that helps us continually improve the student experience here at St. Michael’s, as well as across the system.

We have integrated programs, processes and systems.

For our staff and physicians, we have partnered with the Leadership and Organizational Development team within the Human Resources portfolio, as well as the Hospital Quality Program to implement many initiatives that support continuing education and professional development goals. This includes launching an online learning website, which serves as a portal to all educational opportunities at St. Michael’s, and the development of tools and resources to aid staff and physicians in the design and implementation of education sessions and materials.

For our patients and their families, we have an extensive library of online resources to improve their knowledge of specific health issues and we have provided health literacy training to our staff to ensure our health professionals are equipped with the right tools to support our patients and their caregivers. Our achievements in supporting the learning needs of our students, staff and physicians, and our patients and their families has positioned St. Michael’s as a nationally recognized leader in health professional education.

Dr. Patricia Houston
Vice-President of Education, St. Michael’s Hospital
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Where We Were

Education is a priority at St. Michael’s Hospital. Our goals and objectives reflect the hospital’s vision of achieving excellent patient outcomes through leadership in health professional education. St. Michael’s commitment to excellence in education extends to all health professionals, hospital staff and students within all levels and departments throughout the organization.

In the fall of 2006, the Executive Team at St. Michael’s decided that the education directives in the 2004 corporate strategic plan were no longer sufficient to provide education direction for the hospital. Internal and external review subcommittees were formed to explore the future of education at St. Michael’s and to critically examine its strengths and weaknesses with respect to education and to gather expert opinion about the education environment externally. The findings were reviewed by the Strategic Planning Steering Committee and as a result, a comprehensive Education Strategic Plan was developed in 2007.

Twelve strategic themes emerged from the planning process representing areas where St. Michael’s had significant opportunities. One of the opportunities identified was the need for a new strategic vision focusing on the investment in strong education leadership with an eye on the whole institution, accountability to the Board of Directors and visibility and recognition within the institution and beyond. As a result of this recommendation, a specialized and distinct Vice President for Education position was created in January 2009, which was identified as a core member of the Executive Committee. With the support of the VP Education, the Education Council initiated the planning process to implement the new Education Strategic Plan in March 2009.
Changing the Conversation on Health Professional Education

The Education Council at St. Michael’s Hospital hosted an Invitational Education Summit in 2009 to help develop a plan for implementing an education strategy. The summit welcomed 65 participants involved with and/or affected by the education received by health professionals, including senior health educators, administrators, faculty, staff, students and partner academic institutions. The top three strategic priorities identified were:

1. Supporting the student experience
2. Developing a corporate approach to Continuing Education and Professional Development (CEPD)
3. Furthering the hospital’s ability to develop technology-enabled learning

The most moving presentation of the day was given by three students – one from Medicine, one from Nursing and one from Health Disciplines. The students were brave enough to not only share, but collectively and collaboratively tell St. Michael’s how it could do better. The hospital was ready to listen and most importantly, move forward with the monumental transformation that they were asking for.

By the end of the summit, the following three educational themes emerged as priorities that would become the foundation for an education strategy.

1. Foster integration and collaboration between professions
2. Strengthen and build partnerships
3. Scholarship (Support innovation, research and evaluation)

The Summit confirmed the importance of ensuring St. Michael’s continued leadership in education, which would strengthen and expand education partnerships, both internally and externally. Enabling three priorities ensured that the Education Strategic Plan would create a culture of learning and discovery at St. Michael’s.

Strategic priorities for the Education Strategy at St. Michael’s Hospital.

Educational themes for the Education Strategy at St. Michael’s Hospital.
Education Becomes a Core Business

A Corporate Strategic Framework was developed in 2011 to visually depict the hospital’s sharpened focus on priorities and three core businesses – Patient Care, Research and Education. The creation of the bridge between the hospital and the Li Ka Shing International Healthcare Education Centre (housed within the Li Ka Shing Knowledge Institute), further signifies the critical link between education and patient care.

Strategic Framework Diagram. Download the PDF from: http://www.stmichaelshospital.com/education2016/where-we-were.html
Where We Are Now

As a result of the 2009 Invitational Education Summit, working groups were formed to develop and implement the short-term priorities that emerged from the discussion.

Student Experience
Focused on activities delivered by the Medicine, Nursing and Health Disciplines. The top priority was to develop an integrated education administration centre. The centre was created as a hub of activity where students from all professions are able to register, seek advice, address administrative issues and interact with each other. It provides a common area with resources for learners at St. Michael’s Hospital, streamlined registration process with web-enabled registration and up-to-date schedules of educational activities that benefit learners.

Continuing Education and Professional Development
Focused on activities delivered through the Centre for Faculty Development, Leadership and Organizational Development and existing continuing education and professional development programs. New programming opportunities were developed with a focus on team performance, research opportunities and partnerships with external institutions.

Technology-Supported Resources
Focused on supporting the creation and delivery of tools required to implement key priorities. The group reviewed emerging trends, implemented integrated learning solutions, and provided advice from an educational perspective on technologies essential to the Education portfolio.
Governance: Commitment to Collaborative Learning

One of the first priorities of the Education Summit was the development of an integrated education administration centre where students from all professions can register, seek advice, address issues, and interact with each other – truly, a client service centre specifically for students. The Student Centre successfully launched in 2010.

To make the students’ request a reality, we created a governance structure that would support this innovative vision. The education leadership from Medicine, Health Disciplines and Nursing came together to create an interprofessional, non-hierarchical Student Experience Committee (SEC). This committee was responsible for policy development and implementation, student registration and orientation processes, management of student spaces, preceptor development and the implementation and evaluation of collaborative learning opportunities for our students.

We discovered that in order to embed and embrace a collaborative learning culture, there must be an organizational commitment to break down perceived and unperceived barriers that perpetuate hierarchical systems. The impact of this leadership model has been disseminated via scholarly work that has been shared locally, nationally and internationally.
Tasks and initiatives of the Student Experience Committee
Creating a Protected space

To further support a superior student experience, St. Michael’s built a Student Resource Centre close to the hospital’s clinical units. This centre was designed for all students and it offered students a space to come together and call their own, whether it’s to rest, prepare a meal, relax and use as a meeting space. The Student Resource Centre is open 24 hours a day, seven days a week.

In response to feedback and need, St. Michael’s created a protected space for students who are mothers. This provides these students a safe and quiet space for breastfeeding and a refrigerator for milk storage. These developments stand as symbols for the hospital’s values and it demonstrates the organization’s support for students and their teaching, learning and wellness.

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Corporate Call Rooms: Improving Wellness

Medical residents play an important role in caring for St. Michael’s patients overnight. In 2013, the hospital renovated all its corporate call rooms and furnished them with new furniture, contributing to the wellness of medical residents. The rooms are now exceeding the Professional Association of Residents of Ontario (PARO) expectations for call rooms.

Clinical Education Spaces: Enhancing student engagement

In September 2014, a new clinical education space for students was opened on the second floor of the Keenan Research Centre. The space includes eight newly dedicated classrooms – hybrids of both teaching and clinical spaces – designed to enhance student engagement and contribute to excellence in curriculum delivery.
The Student Experience Committee (SEC) recognized the commonalities in student management and the benefits to centralizing the orientation process to better support patient, staff, and student safety. Since its launch in July 2011, the electronic Student Registration System (SRS) has provided St. Michael’s Hospital with a digital record of all students. Furthermore, it allows St. Michael’s to communicate with students and their academic institutions. This has become the gold standard for managing student placements and institutions across Canada have sought out St. Michael’s knowledge in creating similar systems.

Accessible data in real time via the SRS served the hospital’s need to communicate time-sensitive messages to students. For example, during a flu outbreak in a ward with many clinical placements, St. Michael’s was required to inform students assigned to that area about how to keep themselves safe and their role as students during an outbreak. All Medicine, Nursing and Health Disciplines students were contacted via the SRS on the day of the outbreak with the necessary instructions to manage their placement. This replaces an inefficient and error-fraught process of individually contacting each student by manually pulling all paper-based registration forms across three different offices within the hospital. Following the creation of the registration system, it was clear that in order to make the student onboarding process an integrated one, student orientation needed to be innovative and easy to access.

I appreciated having the opportunity to complete my orientation online before starting my rotation... The interactive training sessions, such as the one on infection control, were helpful and will positively impact the care I provide to my patients.

Alexander Suen,
First Year Anesthesia Resident

St. Michael’s was the first TAHSN hospital to roll out the Student Registration System, which allows residents to create a profile with all their pertinent information, including a place to enter their on-call hours to receive their stipend.
Student Registration System login page.

The homepage of St. Michael’s Student Registration System (SRS) provides information on how students can access the system.
Felt Prepared
Orientation: Better Preparing Students

Only 77 per cent of the hospital’s students felt prepared to begin their placement upon completing orientation, which identifies a need for improvement, according to early results from St. Michael’s Student Engagement Survey. The SEC reviewed and revised the orientation program to better align with Toronto Academic Health Sciences Network (TAHSN) partners and the needs of the St. Michael’s community.

As a result, orientation was made more accessible through the use of a dedicated Student Centre website. Large portions of the orientation program are now available online to allow students to complete their mandatory training anytime and anywhere, in advance of their placement. Our students can thus come prepared on day one.
Case study: Postgraduate Medical Student Orientation

Postgraduate (PG) orientation has evolved extensively in the past five years in response to the needs of both trainees and the hospital. PG trainees voiced concerns that the process of orientation, registration, and transitioning between hospital sites presented frequent challenges for individual residents over the academic year. Residents expressed concerns over lengthy registration processes and repetition of mandatory training at each hospital, which took away from their participation in patient care and clinical learning. Even with the orientation provided, some PG trainees felt ill-equipped at their placements.

St. Michael’s was faced with the challenge of effectively and efficiently onboarding 490 residents and 136 fellows over the academic year, bearing in mind their highly active transitory paths, high levels of independence and their schedules.

St. Michael’s brought this question to its students, internal education leaders, external university and hospital colleagues, and the interdisciplinary leadership team at the Student Centre. The hospital sought feedback on how to improve the process and what needs were not being met. After brainstorming and embracing the notion of collaborative practice and education, the model of orientation greatly shifted away from didactic education. To support the PG student experience, St. Michael’s now embraces small group-facilitated learning on items that have been identified as critical.
In response to unmet needs, the hospital now brings residents together at the beginning of each academic year to discuss topics important to their placement – patient privacy, resident wellness, resident safety, collaborative learning for collaborative practice, the use of social media in health care and medication reconciliation. This provides an opportunity for chief residents and more senior PG trainees to support the orientation for first-year PG trainees and clinical fellows who are new to the University of Toronto, and often, to Canada. At the end of the 2015 orientation, one first-year postgraduate student (PGY1) said, “Thank you so much for this opportunity. I was so scared about starting my first day as a doctor, and this orientation has really helped make me feel calm, supported and ready to begin my work!”

The hospital’s Student Engagement Committee (SEC) reviews feedback regularly and discusses modifications to the orientation as a group and with hospital partners. St. Michael’s is proud to be seen as leaders in this area across the TAHSN hospitals.
In 2010, St. Michael’s Hospital introduced a three-week course, Transition to Clerkship, with the University of Toronto. This course was designed to prepare students to work in the hospital as medical clerks, which also includes a clinical skills day. The Transition to Clerkship course is open to students enrolled in the FitzGerald Academy, a medical school academy housed within St. Michael’s.

Fast forward to 2016, the FitzGerald Academy now collaborates with the simulation team at St. Michael’s for an eventful day of practice and feedback during simulated medical crises. Utilizing simulation provides a safe and effective environment for students to learn and practice new skills from crises management to IV insertion to placing EKG leads. The Clinical Skills Day is the highest rated activity by students of the Transition to Clerkship course, garnering positive feedback, including the wish for more time to practice.
New, collaborative-learning programming for students has been an important component of supporting the student experience. The Student IPE and Café Series monthly sessions have proven to be popular and well-received among students. Both series’ are accredited by the Centre of Interprofessional Education at the University of Toronto. There has been a large variety of student types that attend these sessions, including students from Health Disciplines, Nursing, Medicine, Research and Administrative/Operational (i.e. engineering, planning), and each session has an average attendance of more than 20 participants.

Sessions are facilitated by the Collaborative Programming group – a team of interprofessional leaders and clinicians – to ensure that the topics are timely, evidence-based and illustrative of education best practices.

The sessions are intended to be a safe space for any St. Michael’s student to learn with, from and about each other in a variety of contexts related to their roles as current students and future health-care workers. Topics from past sessions ranged from privacy and social media, death and dying, clinician mindfulness, difficult conversations and how to manage the informal curriculum. The overall programming is improved and enhanced via student evaluations completed after each session.
At St. Michael’s, the Education portfolio team imagined what a medical student clerkship would look like if it did not adhere to conventional, rotation-based divisions by disciplines (e.g., Medicine, Surgery, and Pediatrics). Instead, the hospital wanted to see what would happen if it allowed students’ learning to follow the patient.

In 2014, St. Michael’s partnered with the University of Toronto to pilot a Longitudinal Integrated Clerkship (LInC). With engagement from every department, the program’s purpose is to give a select group of students a different type of clerkship experience.

The program met great success and it has allowed medical students to develop deeper connections with their preceptors and patients. Students developed their skills as strong advocates for their patients as they learned more about them and understood the impact of their experiences within health care. The program serves as a template that has informed five additional programs in other medical academies. Currently, 10 per cent of all students at the University of Toronto are participating in a LInC clerkship.

"LInC is a great learning experience because you can form a relationship with the patient and you can see how their story develops over time," said a medical student. "For example, I got to know one patient who needed surgery. I learned about the anxiety and stress she suffered because of her condition, got to be there for the surgery and also helped when she had some concerns weeks after the operation. I got a real sense of the responsibility and satisfaction that comes with treating patients."

**Longitudinal Integrated Clerkship**

"LInC has allowed medical students to:
- develop deeper connections
- build skills as strong advocates
- understand their impact within healthcare"
To ensure that future health-care workers are prepared and engaged in their work and roles, the Education portfolio at St. Michael’s Hospital led and embraced a benchmark engagement survey across the TAHSN organizations. The survey, which includes eight standard TAHSN questions, have led to the identification of trends and issues within the system. The survey ensures that the work done at St. Michael’s is driven by data and metrics. This survey is sent electronically to every student at the end of their placement and it supports longitudinal analysis on how to better support and engage future health-care workers.

This initiative and its associated data will guide future directions, both internally with staff and clinicians and externally within the system. St. Michael’s will be leading a qualitative research study in 2016 to further identify:

1. What do students need to be prepared to start their clinical placements?

2. How can the hospital best support them during placements as they learn the knowledge, skills and attitudes to enter into an independent professional practice?
<table>
<thead>
<tr>
<th>Learner Engagement Survey</th>
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</thead>
<tbody>
<tr>
<td>Number of Survey Responses</td>
</tr>
<tr>
<td>509 Medicine 254 Nursing 255 Health Disciplines</td>
</tr>
<tr>
<td>Overall, the quality of teaching at St. Michael's Hospital was excellent: 91.2% 89.7% 90.5%</td>
</tr>
<tr>
<td>Would you choose to work at St. Michael's in the future? 91.4% 98.1% 90.2%</td>
</tr>
<tr>
<td>I would recommend a placement here to my fellow students 92.4% 92.1% 94.1%</td>
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St. Michael’s has seen a systemic increase in student responses on the quality of the teaching. Through ongoing preceptor support and innovative tools, St. Michael’s hopes to support staff and clinicians in their preceptor roles and move the experience from good to great.
Meaningful work has been done to support staff and clinicians in their role as preceptors, contributing to the goal of improving the student experience. Two excellent examples of innovative and collaborative programming that support preceptors in their development as teachers are highlighted.

**Nursing Preceptorship Workshops: Offering hands-on Tools**

Prior to 2012, there was no systematic, evidence-informed approach that supported St. Michael’s Hospital staff nurses who assumed a preceptor role to teach undergraduate and graduate nursing students. Despite having mentorship education on an ad-hoc basis, the programming did not effectively address the unique needs of preceptors and how they can best teach and evaluate students. A different knowledge base and skillset is required to teach nursing students compared to providing expert clinical care to patients and families.

St. Michael’s nursing staff shared concerns that they wanted to better support their preceptees, including students and new nursing hires, but they needed better access to tools and resources to do so. As a result of this feedback, a four-hour interactive and evidence-based Nursing Preceptorship workshop was developed and is now offered on an on-going basis.

Nurses who attend the workshop are provided a number of practical hands-on tools that they can take away and use in their preceptor roles. The workshop provides them with the skills and knowledge they need to be an effective preceptor to nursing students.

St. Michael’s has learned how committed preceptors are to the student experience. Many attendees left the workshop with a renewed sense of “excitement to precept again.” This enthusiasm is a powerful driver of student success. Words like “relevant,” “learning,” and “informative” highlight both the attendees’ satisfaction with the workshop and the impact and enhanced awareness that results from their participation.

**Supporting preceptors through the Teaching and Learning for Collaboration program**

The Teaching and Learning for Collaboration Program held by the Health Disciplines leadership team is another example of preceptor support programming. Adapted from the Centre for Faculty Development Series, this five-module program provides facilitated
interactive workshops that teach the basics and best practices in education. Since launching the program in 2012, Health Disciplines has expanded the program and opened it to all St. Michael’s staff and physicians looking to learn more about best practices in education.

To date, there have been 57 staff and clinicians who have completed the entire five-module program, including a number of staff from Health Disciplines, Nursing, Medicine, Administrative and Operational. In an effort to create a community of practice of educators, many participants have gone on to complete a Train the Trainer initiative, which enables former participants to now facilitate the program. To date, 12 people have completed this program and there is a growing community of facilitators who are enthusiastic about enhancing their facilitation skillset and sharing their new education on best practice knowledge.
Continuing Education and Professional Development

As an academic hospital with a strong focus on education, St. Michael’s Hospital’s philosophy is that we are all students and we are all teachers. St. Michael’s is committed to supporting both roles, by focusing on developing all its staff, physicians and leaders in order to support excellent teaching, learning, research and patient care.

In September 2011, the Organizational Learning Scan (OLS) was developed to understand the existing education processes and structures at the hospital and to conduct a needs assessment for staff, physicians and leaders to determine how best to support their learning needs. The project was informed through more than 1,300 survey responses and 24 focus groups with staff and physicians across the organization and within six external peer organizations.

Findings from the OLS were shared with participants of the 2011 St. Michael’s Education Summit and four themes emerged from these discussions.

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ALIGNMENT
Share learning priorities within the governance structure

ACCESS
Easy, equitable access to teaching and learning resources that support staff, physicians and leaders to enhance their current roles, as well as support growth and development

KNOWLEDGE SHARING
Easy accessible opportunities to share best practices in teaching and learning with a strong emphasis on technology-based learning strategies

EVALUATION
Educational programing and outcomes should be standardized and evaluation tools and resources should be easily accessible
Improving the system with Continuing Education and Professional Development

A multidisciplinary, program-wide committee, the Continuing Education and Professional Development (CEPD) Committee, was established to operationalize Organizational Learning Scan (OLS) recommendations that focused on improving current programs and seeking new opportunities.

The CEPD committee, which reports to the Education Council, provides guidance and consultation to staff and physicians at St. Michael's Hospital on the planning, development, delivery and evaluation of educational sessions and programs. It was also designed to act as an advisory body on the governance of continuing education and professional development within the organization and serve as an open exchange of information relating to existing CEPD opportunities and activities, both internally and externally.

Within three years, the initial OLS recommendations were completed and the CEPD recognized the need to re-evaluate the committee’s effectiveness, value and impact to the hospital.

Moving forward, the CEPD committee will oversee the Developing our People and Driving Quality through Education working groups. In addition, the CEPD committee has designed a process to understand and help manage corporate level education initiatives that needs to be implemented. This process will provide a structure for coordinated rollouts for existing and new education initiatives across the organization and it strives to ensure the best possible uptake of knowledge for all learners and teachers.

Formed and governed by the Education portfolio, the CEPD committee was designed to address OLS recommendations and did so in a number of ways.
The creation of the My Learning page on St. Michael’s intranet, which is a one-stop shop for all staff, physicians and leaders for all things learning. Through this page, staff are able to access mandatory training modules and in-house, discipline-specific courses, along with tailored initiatives for leadership development that align with St. Michael’s leadership development tool, LEADS. There is also a central calendar with all the courses and rounds offered at St. Michael’s. The page houses a tools and resources section that provides clinical teachers and educators easy access to resources related to the planning, development and evaluation of educational initiatives for multiple target audiences. For staff who are unable to attend knowledge sharing events in person, the page offers easy access to SMHtube, a repository of rounds, workshops and leadership development videos.

The page also offers St. Michael’s staff an innovative, in-house Continuing Education and Professional Development consultation service that helps educators design, deliver and evaluate educational interventions, which assists the entire organization.

My Learning Page: A One-stop Shop for Learning
Continuing Education Professional Development Policy: Equitable Access to Learning

The establishment of an overarching Continuing Education Professional Development policy, which supports equitable access to learning by aligning individual needs with programmatic and corporate learning priorities. The policy supports the development of personal development plans for all staff through its incorporation within the biannual performance appraisal process. This ensures leaders and staff have meaningful conversations about an individual’s need for growth and development on a regular basis.

Tuition Assistance Program: Supporting Staff in their Learning

To support the external learning endeavours of the hospital’s staff, St. Michael’s offers a Tuition Assistance Program that provides access to financial support for staff growth and development. This program aims to enhance an individual’s contribution to health care and the organization.
In the last decade, research confirmed that low health literacy has negative effects. It is associated with poor chronic disease management, poor comprehension and adherence to medication regimes, increased hospitalization and poor outcomes.

Patient education remains an important focus at St. Michael’s because most patients are not able to understand the disease information they need. Effective patient education can improve patient safety, increase adherence to medication regimes, improve self-efficacy, lower the use of health services and ultimately improve outcomes.

St. Michael’s has adopted a proactive approach to tackling issues related to low health literacy and its impact on patient care. Based on evidence regarding effective interventions, the Patient and Family Education Program established three strategic directions to improve outcomes for those with low literacy:
This approach recognizes that in order for health literacy to improve, the hospital must reduce the health literacy demands of its health-care system, as well as provide support to meet the information needs of patients and families.

To implement these strategic directions, St. Michael’s invested in the following activities:
The Patient and Family Learning Centre (PFLC) provides access to resources to meet the varied needs of patients, families and visitors to the hospital. Staff and trained volunteers help visitors find reliable health information, including brochures, books, DVDs, audiobooks and online information, and they link patients and families to community resources, which can enable better care transitions and support recovery. At the Patient and Family Learning Centre, which opened in June 2011, patients can explore information at their own pace in formats that meet their needs. To expand the services of the PFLC, patient and family education racks have been added to more than 50 locations across the hospital.

The new vision for the centre is to transform it into a combined resource centre and teaching space, which St. Michael’s will implement once the PFLC has moved into a new space in the new patient tower.

“Often we have patients or their family members looking for additional information about their care, some of whom struggle with understanding medical information and now we have a fast and easy way of directing them to our Patient and Family Learning Centre so they can obtain reader friendly information about their condition as well as information on the latest medical trials for their conditions.”

Martha Schroder, Critical Care Unit Resource Nurse
Online Patient Education Library: Improving Health Literacy

St. Michael's launched its first online health library for patients in 2011 using a third-party solution. This library portal was designed according to best practices in adult education and health literacy to help patients maximize their learning. It provides clinicians and patients with information on a variety of medical conditions through health sheets available in print and video, including materials in multiple languages. Clinicians can also work with the Patient and Family Education program to upload their own educational resources to the library.

“The Online Patient Education Library has provided us with a St. Michael’s-endorsed, evidence-based tool, which addressed a gap we had acknowledged,” said one of the first clinicians to use this online tool.

After using this resource for five years, the Patient and Family Education Program will be developing its own custom online solution that will highlight educational resources created at St. Michael’s and from other trusted Canadian sources. This will enable the hospital to build a collection that is better tailored to the needs of patients and families at St. Michael’s.

Online Patient Education Library: Improving Health Literacy

The Patient and Family Education program has created a wide range of educational offerings to raise awareness regarding health literacy barriers and improve patient and family education among staff and students. Some educational highlights include creating Health Literacy eLearning modules, offering the Maximizing Your Patient Education Skills course, providing training on Using Teach-Back and creating a community of practice for patient and family education. To deliver these sessions, the program partnered with others, such as the Late Career Nurse Initiative, the Senior-Friendly Hospital Strategy and the Dietetic Internship program. The program has also begun to work closely with Quality Improvement to enhance delivery of education at critical points of the health care process, such as during a patient discharge.

Through these opportunities, St. Michael’s strives to continuously improve skills in evidence-based strategies, address barriers to understanding and enhance the health literacy of patients and family members.
Evidence-based decision making requires that everyone, especially health care providers, have access to the best possible information. The mission of the library is to support education, research and informed decision-making throughout the hospital. This is achieved by providing high-quality, integrated, knowledge-based information that enables the hospital community to access existing knowledge, create new knowledge and learn in a way that generates curiosity, collaboration, exceptional care and empowered communities.

Through innovative use of the latest technology, the library ensures that hospital staff have seamless and easy access to the best peer-reviewed literature and online information tools. Professional information specialists work closely with clinical, research and administrative staff to maintain a high standard of academic rigour in the work performed by St. Michael’s staff.
1 Moving to the Li Ka Shing Knowledge Institute in 2010

2 Acquiring a computer teaching lab which sees an average of 1,200 monthly visitors

3 Winning the 2015 St. Michael’s Values in Action Award for Excellence

4 Expanding the number of provided training opportunities, i.e. increasing the number of workshops delivered by more than 450%

5 Implementing new technologies to improve access to electronic resources

6 Winning an international competition to provide expert literature search services to the American Heart Association supporting their collaborative work on resuscitation

7 Presenting on creativity in library marketing at an international conference in 2015

8 Winning the 2015 Langlands Award for Library Innovation

9 Winning the Wolters Kluwer Video Contest in 2014 for one of the library’s promotional campaigns
As demonstrated by its many programs and partnerships, the Centre for Faculty Development (CFD) is locally and internationally recognized as an innovator in faculty development. Through its excellence in scholarly educational and research activities, the CFD mobilizes knowledge and inspires transformative educators.

Due to the CFD’s prominence, multiple institutions have reached out to participate in the centre’s programming. In 2015, the CFD educated professionals within:

- 19 of 22 departments in the Faculty of Medicine, University of Toronto
- Seven of seven health science faculties, University of Toronto
- 25 of 25 hospitals affiliated with the Faculty of Medicine, University of Toronto
- 10 local institutions, 11 national institutions and six international institutions

CFD Participation : 2015

25 of 25
Faculty of Medicine, University of Toronto

19 of 22
Faculty of Medicine, University of Toronto

7 of 7
Health science faculties, University of Toronto

6 international institutions
10 local institutions
11 national institutions
Education Scholars Program: Influencing the System

The Education Scholars Program (ESP) is one of the Centre’s core longitudinal programs that strives to enrich and challenge participants’ perspectives and assumptions about their practices as teachers, scholars and leaders in education. Since 2004, the program has aimed to enhance participants’ aptitudes as critical, reflective, scholarly and informed health professional educators. ESP alumni have reported significant successes to date due to their participation in the program:

- Acquired new education leadership roles in health professional education organizations
- Developed and implemented educational products, curricula and innovations
- Awarded grants for educational scholarship
- Presented education scholarship at peer-reviewed meetings
- Published education work in peer-review publications
- Received teaching and education-related awards
- Received academic promotions

ESP alumni have become integral education leaders in the Toronto Academic Health Sciences Network (TAHSN) by leading education innovation and change. A few of the leadership positions held by ESP alumni include:

- Vice President of Education, Sunnybrook Health Sciences Centre
- Director of Medical Education, North York Hospital
- Associate Director, Centre for Quality Improvement and Patient Safety, University of Toronto
- Director, Health Disciplines Practice & Education, St. Michael’s Hospital
- Clerkship Director, Undergraduate Medical Education, University of Toronto
- Preclerkship Director, Undergraduate Medical Education, University of Toronto
- Program Director, Residency Training, General Surgery, University of Toronto
- Director, Education and Professional Development, University Health Network
- Associate Director, Centre for Interprofessional Education, University of Toronto
I did not previously appreciate the importance of making my work count in a meaningful way—both for my own advancement and to inform others of experiences I have had that might be useful to them. This course helped me see different ways in which my work can become scholarly, and how to ensure it is recognized that way.

My professional identity has changed completely since starting the course. I identify myself first as an educator rather than as a clinician. I have come to recognize that much of my career, even my clinical career, has focused on the power of education and sharing knowledge for myself, peers and students.

As a result of this course, I am much more confident in my skills as an educator; in particular, more confident about the importance of such a role and the dedication it requires.

For one alumnus, the ESP program was transformative. While participating in the program, the alumnus worked on his required scholarly project with assigned mentors and this mentoring relationship provided crucial guidance in moving his project forward. The alumnus presented the findings from his scholarly work at a national, peer-reviewed conference in 2015 and is preparing a related paper for publication. In addition to furthering the alumnus’ abilities in education scholarship, his ESP project inspired him to critically analyze his worldview and practices. Through role modelling a willingness to learn and change himself, it is hopeful that he will inspire change among colleagues and students in their understanding of self, systems and behaviour.

The alumnus’ scholarly project is being used to implement transformative learning opportunities. His ESP project on critical pedagogy now serves as a basis for the development of a Cultural Competency curriculum at St. Michael’s Hospital. This curriculum is slated to be offered beyond the walls of the hospital to local and national audiences.
Providing Local Programming

Teaching for Learning and Collaboration Program Extends its Reach

The Centre for Faculty Development (CFD) offers the accredited Teaching for Learning and Collaboration (TLC) program — a six-module, longitudinal teaching, skills program for multi-professional clinicians — developed by three CFD program alumni. As of 2015, nearly 700 health professional teachers and administrators have participated in the TLC program. Additionally, more than 50 individuals from 12 local institutions were certified through the TLC’s Train-the-Trainer program, which provides individuals with the skills and opportunity to tailor and offer the TLC program to meet their site’s needs. Among the Toronto Academic Health Sciences Network (TAHSN), the TLC holds widespread recognition for offering robust program content and design. In addition to the original target group of clinicians and educators, the program is now delivered to chiefs and directors at a public health site, which showcases its far reaching value in supporting teaching and learning.

Focus groups have been conducted to determine next steps.

New and Emerging Academic Leaders Program Develops Leaders

Academic leaders are often promoted into roles based on their academic expertise with little, if any, leadership development. The New and Emerging Academic Leaders (NEAL) program is specifically designed to fill that gap. Launched in 2013, the goal of NEAL is to foster a productive, visionary and collaborative academic leader.

Highlights of St. Michael’s Hospital’s Teaching for Learning and Collaboration Program

New and Emerging Academic Leaders Program video screenshot taken from: https://www.youtube.com/watch?v=4D5WWOY3QY8
Teaching Excellence Competencies:

Aspirational ideal for Clinical Teachers

As a result of network-wide interest in developing an actionable model of teaching excellence, the Centre for Faculty Development (CFD) collaborated with numerous Toronto Academic Health Sciences Network (TAHSN) partners to develop a teaching excellence model, the Teaching Excellence Competencies Model. This model is a developmental and aspirational ideal for clinical teachers to move from competency in foundational teaching to excellence in clinical teaching.

The goal for developing this framework was to create a model relevant for all teachers within a healthcare context (i.e., not profession specific) and to identify an actionable set of relational competencies that describe an excellent teacher (as opposed to a minimally, competent teacher).

The Teaching Excellence Competencies Model serves as a guide for individuals and organizations to develop their thinking and practices about teaching and to encourage the ongoing pursuit of excellence in teaching and learning. By describing a set of competencies for teaching excellence, it will promote an alignment of resources, tools, professional development and evaluation within the system and be a tool that educators and faculty developers use to inform their work.

Information about the model has been disseminated at local, national and international peer-reviewed meetings and the CFD plans to track and assess the model’s usage.

The Teaching Excellence Competencies Model and the accompanying nine-page guide, which includes case scenarios illustrating the framework’s application by individuals in different roles and in various contexts, is downloadable at the CFD Resources page.
Influencing Competencies Internationally

Establishing an International Conference on Faculty Development in the Health Professions

As of 2009, there was no academic conference that provided a global platform for research engagement and discovery to faculty developers. The Centre for Faculty Development (CFD) was integral in filling this void with the establishment of the first International Conference on Faculty Development in the Health Professions (ICFDHP) in 2011, which coincided with the opening of the Li Ka Shing Knowledge Institute at St. Michael’s. The ICFDHP was a joint venture between the CFD and the Centre for Medical Education and Faculty Development at McGill University. Several international partnerships were forged to ensure the success of this venture:

- Asian Medical Association
- Australian and New Zealand Association for Health Professional Educators
- Association for the Study of Medical Education
- Association of American Medical Colleges
- Association of Medical Education in Europe

In the first iteration of this conference, there were 320 participants from 28 countries. Interest exceeded physical capacity.

The conference continues to impact the education of international health professions and faculty development communities. Its second iteration was held in conjunction with the Association for Medical Education in Europe conference in Prague (2013), the third was held in conjunction with the Asia Pacific Medical Education Conference in Singapore (2015) and the fourth is slated to be held in Helsinki (2017). Since ICFDHP’s inception, more than 1,500 participants from over 30 countries have attended.
Supporting the Successful Delivery of a New Brazilian Medical School Curriculum

The University of Sao Paulo Brazil (USP) – the country’s preeminent medical school – approached the CFD to support the development of faculty as part of a large-scale curriculum renewal. A short-term proposal was developed to gain a fulsome understanding of the needs of faculty and to offer on-site programming to support a pilot group comprised of senior leaders, curriculum committee members, faculty involved in curriculum implementation and faculty development leads. The guiding principles assisted faculty in evaluating their capacity to deliver a new, revamped, competency-based undergraduate medical education program and to create a local community of practice to support faculty development across the institution. This was supported through a partnership with the University of Toronto and the CFD.

The support and programming offered was a success and the CFD is exploring future work in global faculty development that builds on this collaboration.
Researching Best Practices in Education

Leading reforms in practice, teaching and learning through Education Research

There was little research literature published about the establishment of faculty development centres and members of the St. Michael’s Hospital team aimed to resolve this gap. Lindsay Baker, Research and Education Consultant in the Centre for Faculty Development (CFD), along with CFD Director Dr. Karen Leslie and other CFD members, published a paper in 2010 that described a ‘fishhook’ model, which highlighted seven key factors that support the successful formation of centralized faculty development.

In 2013, the CFD serendipitously saw the far-reaching effects of this innovative work. At the second International Conference on Faculty Development in the Health Professions, Dr. Nadia Fida presented a poster on how three medical schools in Saudi Arabia employed the ‘fishhook’ model to reflect on their local goals, settings and culture in their staff development programs. This paper had an impact beyond a citation count and it generated a model that directly contributed to changes in faculty development at three sites in Saudi Arabia.

Lindsay Baker and her colleagues1 published another paper in 2011 on the important, but under-explored influence of power relations in interprofessional education (IPE). This paper has had a strong scholarly impact with 64 citations (a high number of citations in the field of health professions education), 76 Mendeley library bookmarks and several interactions on social media, to date.

In 2015, a review paper on power and conflict in IPE literature, Louder than Words: Power and Conflict in Interprofessional Education Articles, 1954–2013, was published by colleagues at the University of Toronto (Dr. Elise Paradis and Dr. Cynthia Whitehead). Among 2,191 papers identified in this review, only six focused on power and conflict in IPE and the 2011 paper published by Lindsay Baker and colleagues was noted as the “exemplar for future power-related research in IPE.” The 2011 paper was also added to new curriculum initiatives on power and collaboration in undergraduate medical education at the University of Toronto. Every medical student will now better understand crucial ideas and questions around sociological power and its effects on IPE. Improving interprofessional relations will support better patient care in the future.

1 Eileen Egan-Lee, Tina Martimianakis and Scott Reeves

Education Research Community: Researching Education

In 2014, the CFD and St. Michael’s Hospital’s Education portfolio co-launched the Education Research Community (ERC) which aims to provide excellent education that is informed by research. The ERC is comprised of more than 60 individuals with diverse backgrounds from St. Michael’s and the broader Toronto community, including businesspeople and medical students to clinicians and scientists.

The community provides members with an active mailing list of resources and opportunities and weekly in-person participation among small groups to allow for deeper dialogue. Weekly meetings may be facilitated discussions with ERC facilitators on education research topics, open sessions for ERC members to gather feedback for works-in-progress, sessions with invited speakers or a journal club.

Since launching the ERC in 2014, there has been a notable increase in the number of presentations accepted and given at the Canadian Conference on Medical Education. This is one of the measurable outputs that has increased since its inception.

But there are other ways participants have benefited from ERC meetings. “The sessions are meeting and exceeding expectations. Research can be intimidating, but the ERC setup and facilitation make it non-threatening. Topics are stimulating, relevant, and timely,” says one ERC participant.

To join the ERC mailing list or attend sessions, interested members are welcome to email cfdresearch@smh.ca. Everyone is welcome.
Technology-Supported Resources
Allan Waters Family Simulation Centre

The Allan Waters Family Simulation Centre at St. Michael’s Hospital is a state-of-the-art learning space with a full Operating Theater that engages learners across professions to improve both individual technical skills and teamwork skills. As the second-only simulation centre in Canada, which opened in 1996, it has pioneered interprofessional simulation education and solidified its expertise in this area. Upon its establishment, it offered training programs in Trauma and Anesthesia for medical students and residents from the University of Toronto, while pioneering the integration of simulation into the medical training curriculum.

The simulation program reached a significant milestone in 2015 when it achieved a five-year accreditation by the Royal College of Physicians and Surgeons of Canada — a title shared by only 11 centres in the country. Accredited simulation programs are nationally recognized as leaders in simulation-based learning. This title recognizes the program’s efforts to provide learning activities that adhere to the latest educational research to ensure patient safety and quality care provided by health professionals. It signifies that St. Michael’s meets the rigorous standards for accreditation and showcases its commitment to pursuing excellence in healthcare education and scholarship.
Growth

In 2009-2010, the simulation centre began a period of growth through supporting more clinical education programs and introducing simulation education trainings for nursing staff and students. During this year, the simulation centre supported hands-on training for nearly 1,300 users. From this point on significant growth came from the introduction of interprofessional team training in Trauma, Code Blue, Critical Care, Medical Imaging and Neonatology.

Today, the simulation centre supports education and research activities for over 6,000 interprofessional users every year.

New Home

In 2011, the Allan Waters Family Simulation Centre moved from its one-room location in the hospital to its new home in the Li Ka Shing Knowledge Institute and became the newest and most advanced hospital simulation centre in Canada. The centre is situated within the Education portfolio and is considered a strategic enabler that is accessible to all hospital staff, physicians, educators, researchers and students.
Curriculum

The Department of Anesthesia established the first program in Canada to incorporate simulation-based technology in medical education. Since 2009, the Anesthesia Crisis Resource Management (ACRM) program has been incorporated into the core curriculum for all anesthesia residents.

In 2012, a published research study by Dr. Teodor Grantcharov and his team confirmed the value of simulation in medical education. Students trained through St. Michael’s simulation-enhanced curriculum performed twice as well technically and displayed an increased knowledge of procedures. The study’s results convinced the University of Toronto to implement the training program for surgical residents, before their research article, Development and Validation of a Comprehensive Curriculum to Teach an Advanced Minimally Invasive Procedure: A Randomized Controlled Trial, was published in the July 2012 issue of the Annals of Surgery.

Today’s simulation-based education has been adopted and incorporated into the postgraduate medical curriculum for areas such as General Surgery, Critical Care, Emergency Medicine and OBGYN.

Team

The simulation centre welcomed a new leadership team in early 2013. New roles and responsibilities were also created that same year, bringing together the comprehensive simulation team of seven professionals. A new mission statement was also created:

“Our mission is to improve patient safety and quality of care by providing a safe learning environment to all patrons, interprofessionally and individually. We achieve this by offering quality simulation education and research opportunities, using a wide array of simulation modalities.”
Opportunities

The simulation program has been involved in the process of designing the new Intensive Care Unit (ICU) bed spaces for the St. Michael’s 3.0 project (Peter Gilgan Patient Care Tower). This was a collaborative project between the planning team, simulation program, ICU educators, ICU team, biomedical engineering, carpentry, information technologists, and electricians. As a part of a research project on human factors to consider while designing ICU bed spaces, the simulation session allowed the ICU design team to determine the final design for the ICU space in the Peter Gilgan Patient Care Tower. Simulation centre is working closely with the Planning and Development team and will be involved in different phases of the St Michael’s 3.0.

The scope of the simulation centre has also expanded to work closely with Quality Improvement teams to investigate and better understand how health care teams work together in the clinical environment. The simulation centre plans to further develop its in-situ program by identifying educational gaps, process and policy issues and latent safety threats, which impede timely and quality care throughout the hospital.

Recognition

The simulation program achieved a five-year accreditation by the Royal College of Physicians and Surgeons of Canada — a title shared by only 11 centres in the country.
Quality Improvement

Quality improvement (QI) is at the heart of everything at St. Michael’s. It enhances the way the hospital delivers care and service to patients across the hospital and keeps staff focused on their daily work. Since 2014, in collaboration with different partners across the hospital, the simulation program has supported at least one QI initiative through in-situ simulation every year. Two projects are highlighted below.

QuiTSE Study

In collaboration with the Quality of Care Council (QCC), operating room team, blood bank and medical media, the simulation program successfully conducted a series of in-situ simulations in the operating room with more than 50 members of interprofessional teams including: Registered Nurses, Technical Assistants, Surgeons, Anesthesiologists, Respiratory Therapists, Porters, and Blood Bank Technicians. Simulation technology was used to identify gaps in non-technical skills, such as communication, situational awareness and resource allocation to better understand the team performance when initiating the process for ordering blood products for a patient.

TRUST Study

The Trauma Resuscitation Using in-Situ Simulation Team Training (TRUST) program is a series of in-situ trauma simulations that are based on recurrent themes identified in previous morbidity and mortality reviews from the St. Michael’s trauma registry. Sessions are conducted on a monthly basis and are unannounced in the Trauma Bay. The objective is to identify issues that may impact team performance and patient safety in partnership with human factors experts. Seven successful sessions have been held since July 2015 and more than 70 staff and trainees, across multiple specialties and disciplines (MDs, RTs, RNs, health disciplines, x-ray, CAs, porters) have participated in TRUST sessions to date.
Over the last few years, St. Michael’s implemented a range of Life Support training and programs at the simulation centre and across the hospital. Below is a list of what St. Michael’s currently offers:

**Advanced Cardiac Life Support Course (ACLS)**

ACLS is an advanced, instructor-led classroom course that highlights the importance of team management of a cardiac arrest, team dynamics and communication, systems of care and immediate post-cardiac-arrest care.

**Basic Life Support Course (BLS)**

The BLS training course is an interactive team-building program that is designed to train individuals to respond to cardiac arrests with a particular focus on St. Michael’s Code Blue Protocols. Emphasis is placed on early recognition of a cardiac arrest, delivery of good quality cardiopulmonary and understanding the importance of early defibrilation for an adult.

**Code Blue Training**

This program is designed to teach medical residents on rotation from the University of Toronto’s School of Medicine. The goal is to review the algorithms, but more important to get the chance to practice running a Code Blue as an interprofessional team in a safe learning environment at our simulation centre.

The St. Michael’s Hospital code Blue training program has been recognized citywide as an outstanding interdisciplinary, team-based program. The curriculum has been validated by the Cardiac Arrest Committee and was developed, established and run by Dr. Natalie Wong, along with our highly skilled ACLS certified instructors.

**Code Pink Training**

This program is designed to teach individuals and interprofessional team members who may be required to resuscitate newborn babies. The team consists of medical residents, nurses and respiratory therapists and the program is offered at the simulation centre, as well as in-situ in NICU.

**CPR/AED Training for Patients, Families and Friends**

The simulation centre offers an interactive and hands-on course on cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) training to patients and family members.
In 2012, St. Michael’s Hospital expanded its eLearning footprint by moving the program to the Education portfolio and hiring a permanent eLearning specialist. By dedicating a resource to spearhead the Learning Management System (LMS), St. Michael’s was able to increase its usage across the organization and harness its untapped potential.

Within the Education portfolio, the eLearning program set its sights on achieving three core organizational objectives:

- To provide effective, easily accessible online training for all staff and physicians through use of a LMS
- To provide tools and mechanisms for management to create content for and evaluate the effectiveness of online training for staff
- To serve as a means of determining compliance for provincially mandated and organizationally required training through the generation of evaluation data

3 Core Objectives: Provide online staff training; provide tools for management to evaluate training; serve as means for compliance for training
The implementation of a decentralized content creation model greatly expanded eLearning course development. Content experts gained the ability to offer their existing, instructor-led training in an online format. This allowed them to expand their reach and offer their training asynchronously, without the need to schedule instructors and book meeting rooms to accommodate large groups of learners. Learners across the hospital gained greater flexibility to access the content at their own pace and in their own time. Learners now have access to more than 80 eLearning modules and more than 450 instructor-led courses on various topics, such as clinical, technical and leadership training.

In 2014, senior leadership implemented a mandatory learning policy for all staff, students and physicians at St. Michael’s. The eLearning program played a key role in supporting the implementation by offering six of the eight mandatory requirements online via the LMS. The LMS provided the ability to automate course assignments to all learners and to generate mandatory compliance reports.

The eLearning Program is Preparing for Exciting New Changes Ahead

The acquisition of a robust LMS was set as a corporate objective for 2013 and St. Michael’s community stakeholders were enlisted to determine requirements for a new LMS. With their input and guidance, the project moved to a Request for Protocol (RFP) and the new LMS is expected to be implemented by late 2016. For the first time the LMS will expand its audience from staff and physicians, to also include students, researchers, volunteers and contractors. The new LMS will empower all educators and learners with innovative ways to teach, learn and collaborate.
Telemedicine

Technology is transforming the delivery of health-care services. New technologies and innovative approaches are continually being introduced into the system as a way to bridge the gaps between patients and physicians and educators and students.

Accessing specialized care and health care resources at St. Michael’s Hospital has never been easier. The hospital’s telemedicine program uses technology to overcome barriers, such as distance, cost and mobility, which limit a patient’s access to care. Secure videoconferencing makes it possible for patients to have “virtual” clinic visits with their specialists. Store and Forward technology allows the hospital’s Family Health physicians to consult with a specialist by simply logging into a secure portal and sending images.
<table>
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<th><strong>St. Michael’s is ONE of TWO</strong></th>
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Providing care through the Telemedicine Follow-up Clinic

St. Michael’s is one of two regional trauma centres in Toronto where patients from across the province are transferred for care. Once patients are discharged to their home communities, they still need to visit trauma follow-up clinics. For some patients, travel to Toronto is time consuming, costly and uncomfortable. The Trauma Telemedicine Follow-up Clinic was created to eliminate this barrier to follow-up care.

In 2013, Dr. Najma Ahmed, Dr. Joao De Rezende-Neto, Dr. Bernard Lawless, Dr. John Marshall, Dr. Ori Rotstein and Dr. Sandro Rizoli, physicians from the Trauma and Acute-Care Surgery team, began holding Trauma Telemedicine Follow-up Clinics for patients treated primarily for abdominal or thoracic injuries. These patients are connected to a trauma physician, nurse practitioner and resident via telemedicine.

These virtual clinics are the next best thing to having the patient attend an ambulatory clinic. A nurse accompanies the patient and they help to facilitate the examination by checking vital signs and operating a specialist examination camera. This offers the St. Michael’s team a clear view of the wound in the telemedicine studio in the Shuter wing.

Today, about 115 clinicians from specialty programs such as Cardiology, Respiratory (Cystic Fibrosis), Allergy and Immunology, Geriatrics Nephrology, Rheumatology and Vascular Surgery are using telemedicine to care for patients in communities across the province. In 2015-2016, more than 2,000 patients were seen via telemedicine by a St. Michael’s specialist.

New, affordable desktop videoconferencing solutions, such as Personal Computer VideoConferencing (PCVC), make it possible for specialists, nurse practitioners and other health professionals to embed telemedicine into their office routine. Today, more than 20 clinicians conduct telemedicine consultations in their offices. Going forward, a plan is in place to roll out PCVC to programs across the hospital and in Family Health Teams.

What Others are Saying

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St. Michael's is well known for caring for the disadvantaged and vulnerable in the community near the hospital, but telemedicine has allowed us to extend our community up to northern Ontario...

Geography is no longer a barrier for these patients. With a click of a button I can see and interact with them on my computer from their telemedicine location.

Dr. Peter Vadas, Telemedicine

The goal of the telemedicine program is to promote the adoption of telemedicine technologies through education and collaboration with clinicians to integrate telemedicine into routine practice.

Carol Flewelling, Telemedicine Project Manager

St. Michael’s is the only Canadian hospital to participate in these weekly Pan-American Trauma Rounds, which involves participants from Paraguay, Brazil, Iraq, Iran, Trinidad, Indonesia and the United States. These rounds are a core element of the trauma and acute care department’s continuing education program.

The goal is to share medical knowledge, best practices, perspectives on approaches to care and gain insights into how other trauma physicians from around the world would have dealt with a particular situation.

The residents love to participate in the video conference because it provides them with the opportunity to see high level discussions on how to manage trauma cases.

Dr. Sandro Rizoli, Chief Trauma and Acute Care Service

In addition to monitoring a patient’s physical recovery, our trauma telemedicine clinics also provide an opportunity to check how patients are recovering socially and emotionally. These are often harder elements to visualize than a wound.

Having the ability to interact with ease via telemedicine makes these consultations just as valuable as in person visits and helps us assess any struggles they may have around returning to everyday life, such as returning to work or school.

Kirsty Nixon, Nurse Practitioner, Primary Health Care Trauma and Neurosurgery Department
Case Study: Teaching Through Tele-education

For an academic health science centre where patient care and teaching are interconnected, videoconferencing (tele-education) is also an effective means to facilitate distance learning and bringing together educators and learners from across the city or around the world. The benefits of tele-education include cost savings, travel avoidance, convenience for both educators and learners. The interactive quality of videoconferencing sets it apart from other distant learning modalities.

The telemedicine program promotes best practices in tele-education by encouraging more participatory educational approaches to be used so that all learners – local and remote – are engaged. Over the past 12 years, St. Michael’s has hosted more than 4,500 tele-educational events. Sessions are broadcast regularly for journal clubs, grand rounds, case conference, undergraduate and post-graduate teaching seminars, and for patient education.

There are plans to develop a strategic roadmap for telemedicine and improve communication between St. Michael’s and the Family Health teams.
Where We Are Headed
Learning Collaboratively
Everyone will understand their individual and collective impact on the patient’s journey and will be empowered to learn and teach as a team. This work will allow all learners, including physicians, staff, students, patients and families, to experience increased accessibility to collaborative learning opportunities and make this way of learning, a corporate priority at St. Michael’s Hospital.

Engaging the Patient
The importance of active patient and family engagement and lived experience will be reflected in all elements of teaching and learning at the hospital.

Advancing Academic Practice
St. Michael’s will support knowledge creation and mobilization through the establishment of communities of practice, innovative educational design and ongoing program evaluation. The hospital will support the corporate strategy by integrating research and education, through the cultivation of academic practice, with the ultimate goal of improving patient care.

Driving Quality through Education
Education will enable the success of all programs in advancing the hospital’s quality agenda. This work will be advanced through seeking opportunities for strategic growth and development aligned with the corporate strategic plan; fostering relationships through outreach to the hospital’s community and beyond to create new possibilities; and measuring the results and outcomes of programs and their impact upon the patient experience.

Developing Our People
St. Michael’s will support lifelong learning through the continuing professional development of staff, physicians and students.

Enablers
The Education portfolio will leverage its existing technology and infrastructure – Allan Waters Family Simulation Centre, telemedicine services, eLearning services and the Scotiabank Health Sciences Library – to deliver quality education programs for staff, physicians and students. At the same time, St. Michael’s will continue to explore exciting teaching and learning opportunities made possible by new advancements in technology.
Education Priority Areas

Venn Diagram: Education, Quality, and L & OD

Infographic demonstrating collaboration of education strategic priorities across St. Michael’s Hospital
We believe this plan sets us on course to achieve great momentum around enhancing our educational interactions with our patients and families, supporting collaboration amongst our peers and advancing our academic practice. By learning you will teach, and by teaching you will learn.

Dr. Patricia Houston, Vice President of Education

In September 2014, the Education portfolio released its new three-year strategic plan. The plan is the culmination of an extensive internal and external scan, including individuals within the Education portfolio, the hospital and external academic partners, and builds on the portfolio’s accomplishments. This includes enhancing the student experience, increasing continuing education and professional development opportunities and creating a new model for patient and family education.

Embedded in the plan are five strategic directions: Learning Collaboratively, Engaging the Patient, Advancing Academic Practice, Developing our People and Driving Quality through Education.

Technology and infrastructure are key components of the plan and the portfolio will continue to leverage its cutting-edge tools and resources to enable groundbreaking impact across all its strategic directions.
Leaders in health professional education

St. Michael’s provides a portfolio of health education programs and services to the hospital’s community and beyond with a goal of enabling excellence in patient outcomes.

Opportunities
Seek out strategic areas of growth and/or development

Outreach
Foster relationships in the hospital’s community and beyond which will create new possibilities

Outcomes
Achieve and measure results of work to pursue strategic opportunities
Our Accomplishments

Between September 2014 and April 2016, the Education Council defined strategic priorities and agreed upon a number of activities that aligned with strategic objectives within St. Michael Hospital’s Strategic Plan. Outlined in the table below are specific implementation priorities that laid a strong foundation to address the longer-term initiatives and several quick wins were implemented.

Learning Collaboratively

Summary: September 2014 - April 2016:

- Established a working definition of collaborative learning
- Held focus groups to understand what educators across the organization need to develop and deliver collaborative learning
- Partnered with the Centre for Faculty Development to host St. Michael’s Faculty Development Day, 2016 on collaborative learning

Moving Forward: Keeping the Momentum

- Increase capacity within the organization to design, develop and deliver collaborative learning programs
- Facilitate embedding collaborative learning principles into Corporate Education Programs
Engaging the Patient
Summary: September 2014 - April 2016:
- Collaborated with Quality Improvement teams on discharge planning and PFAC work
- Developed and Delivered Teach-Back Education

Moving Forward: Keeping the Momentum
- Develop a sustainable online patient and family education library
- Participate in development of TAHSN supported recommendations on best practices in Patient and Family Education
- Support Quality Improvement team in discharge planning and patient “teach-back” training by refining education training and materials

Advancing Academic Practice
Summary: September 2014 - April 2016:
- Drafted an impact tracking plan for education and developed and education bibliography
- Launched the Education Innovation Awards and the Education Research Community

Moving Forward: Keeping the Momentum
- Track the impact of educational work/academic practice in the Education Portfolio, and expand to include qualitative metrics
- Submit paper related to impact tracking in education research
- Determine breadth of innovative education initiatives offered by the St. Michael’s Education Portfolio and identify corporate education program “best practices”
- Develop a comprehensive and impactful cultural competency education program for staff and physicians
Developing Our People

Summary: September 2014 - April 2016:
• Conducted reviews of current employee performance assessment tools and data and developed an approach to support continuous learning and professional development that utilizes personal development plans
• Evaluated and redefined Continuing Education and Professional Development committee structure
• Procured and implemented a new Learning Management System
• Established an organizational baseline related to the per cent of global learning dollars

Moving Forward: Keeping the Momentum
• Analyze and thematically assess internal & external scan results in order to identify tools and key messages that will assist with the roll-out of personalized development plans
• Establish baseline corporate targets for time and budget dedicated to learning and knowledge exchange
• Procure and implement new Learning Management System (LMS)

Driving Quality through Education

Summary: September 2014 - April 2016:
• Re-organized, implemented and evaluated the Quality Improvement (QI) Fellowship
• Partnered with Leadership and Organizational Development to integrate QI and Leadership Insights

Moving Forward: Keeping the Momentum
• Develop a workshop series that will build on the capacity of leadership, staff and physicians to improve quality planning, management and patient safety
• Develop a consistent methodology to evaluate impact of the Quality Improvement and Patient Safety Education programs.
Enablers

Summary: September 2014 - April 2016:

• To ensure the goals and priorities reflect the current realities at St. Michael’s, the Education Council will continue to support and develop objectives for the upcoming year

Moving Forward: Keeping the Momentum

• Health Information and Knowledge Mobilization
  • Develop and maintain a “lessons learned” database for quality improvement projects across the organization.
  • Present proposal for a new improved web presence for the library that would substantively improve the client experience
  • Conduct a follow up survey to the 2013 library user satisfaction survey, analyze results and identify areas for improvement
  • Present proposal for a cost recovery model for e-Learning development including policies and procedure for standardizing processes related to e-Learning development.

• Allan Waters Family Simulation Centre
  • Develop a strategic plan and begin implementation of the operational plan

• Develop a simulation program to support a corporate quality improvement priority

• In collaboration with Centre for Faculty Development (CFD), develop, implement and evaluate a simulation faculty development program for the department of psychiatry at the University of Toronto

• Develop and implement simulation education sessions to support collaborative learning/collaborative practice

• Telemedicine
  • Develop a strategic roadmap for telemedicine
  • Improve communication between St. Michael’s and the Family Health Teams by integrating the use of telemedicine and/or other medical information communications technologies

• Funding
  • Establish and recruit a Professor in Technology-Enabled Education
  • Establish and recruit a Chair in Health Professions Teaching and Learning
  • Develop proposal for In-situ Simulation Program
  • Conduct an annual review of corporate funding that supports education
Projects, Programs and Opportunities to Come

St. Michael’s Hospital is uniquely positioned to transform how teaching and learning occur. As a hospital with a reputation for supporting the disadvantaged, providing leadership in critical care and engaging its urban community, St. Michael's is the ideal living lab for health professions’ teaching and learning research. An unparalleled opportunity exists to create and optimize teaching and learning techniques in the actual setting where they matter the most (and have the most impact): at the bedside and in the community.

Aligning Education with a Patient-Centred Experience

St. Michael’s Hospital’s quality priorities are defined by SOAPEE (Safety, Outcomes, Access, Patient-centred, Equity and Efficiency). An enhanced focus on patient-centredness is known to be a key determinant of improved quality outcomes. Engaging patients, empowering them in their own care and providing tools and resources to help them navigate along their care continuum are key enablers to the patient-centred priority at St. Michael’s.

In an effort to support this priority, the Education portfolio will work collaboratively with the Quality and Performance Department to support the organization in further engaging and partnering with patients and families to create the best possible patient experience.

Some projects we are working on in 2016 - 2017 include:

• Harnessing the voices of patients and families by engaging members of the Patient and Family Advisory Program to:
  • Guide the development of St. Michael’s Online Patient Library
  • Inform the planning and evaluation of discharge planning initiatives (including Patient Oriented Discharge Summaries)
  • Participate in the Patient and Family Education program planning process
• Developing deeper connections with community organizations in the St. Michael’s catchment area that provide support to the disadvantaged and marginalized patient population.
Establishing a Term Chair in Health Professions Teaching and Learning

As the complexity of patient and community needs grows, how St. Michael’s teaches patient care and learns to provide patient care must respond – or better yet – lead the way. The chair position will provide the high level expertise needed to bring together the best of both worlds – excellent education for high quality care. This chair will be the first of its kind within an academic teaching hospital. It will leverage the clinical environment and the broader hospital community to study, create, implement, test, and optimize how we teach health professionals in the very context of care. It will help to close the gaps between how research says we should optimally teach health professionals, and the realities and complexities of hospital and patient communities. The Chair will position St. Michael’s as a world leader in bringing the best teaching and learning knowledge to take on the care of patients and communities.

Establishing a Professor in Technology-Enabled Education

Technology is revolutionizing the world at an extraordinary pace—nowhere more so than in medical education. Canada’s first Professor in Technology-Enabled Education will drive the adoption of technology to improve patient care and sustain lifelong learning. As training programs in health professions move toward competency-based models of education across the globe, there is an increasing need for robust high-quality, efficient, and cost-effective simulation-based training and assessment programs.

A Professor in Technology-Enabled Education will enable St. Michael’s to attract and retain a leading scientist and educator who can bring together the hospital’s local experts and lead technology-based programs with exemplary scholarship and best practices. The position will support St. Michael’s international Research Fellows who will study the design and delivery of innovative educational programs, inspiring learning around the world. The Professor will also align and uphold the hospital’s corporate goals through collaborative research, thoughtful innovation, and a commitment to enhance the quality in health care.
Innovation in Dietetics Training (PMDip)

St. Michael’s Dietetic Internship Training program has had a long and significant history in Dietetics training. The program started in 1936 and was nationally recognized for providing outstanding training for future dietitians. St. Michael’s offered the first Dietetics training program to become accredited in Canada and over the years, the program evolved to continually provide the most current and rigorous training for dietetics students. The program attracts high numbers of applicants and graduates successfully find careers in Dietetics.

St. Michael’s reached out to Ryerson University, one of its neighbours, and September 2015 marked the inaugural year of the collaborative St. Michael’s Hospital - Ryerson University Collaborative Professional Masters Diploma in Dietetics (PMDip).

This new collaborative program is an innovative and first-of-its-kind dietetics training model. The eight students are now Ryerson students and have the enhanced benefit of accessing student resources available at Ryerson. Resources between St. Michael’s and Ryerson are shared to increase efficiencies and consistency in managing students to ensure their success. The new structure enables St. Michael’s to deliver the program in a way that preserves its history, autonomy, and identity, while sharing policies, processes, documentation and program structure. St. Michael’s continue to provide on-site practicum coordination.

Education Research that Advanced understanding of Reflection in Education

Dr. Stella Ng, Farah Friesen, and collaborators from TAHSN and Western University, published a paper in April 2015 that provided a critical narrative review to challenge the field of health professions education to do better in regard to one of its most popular educational foci: reflection and reflective practice. This practice has led to the implementation of checklists, portfolios and other tools to inspire and document reflection.

The paper received wide exposure. To date, 52 people tweeted about the paper, 24 readers bookmarked the paper in their electronic library on Mendeley, three writers blogged about the paper, and Dr. Ng was invited to discuss her research on a podcast.

While the nature of academic scholarship means that this recently published paper will not see its full impact through citations for some time, early indicators (altmetrics using scholarly social media) demonstrate the potential and emerging impact of this work in the field. This paper has begun to reshape both practice and theory around reflection in local and international contexts.

For example, Dr. Ng was consulted by the undergraduate medical education office admissions leaders at the University of Toronto, Dr. Arno Kumagai recommended this paper as a “great reference on reflection,” and MedEdWorld has included this paper in its database of Key Journal Articles.
Education is Critical to the Future Success of St Michael’s Hospital.

It takes courage to continuously improve – the courage to acknowledge there is always a better way. Education is an enabler that will keep our hospital on the leading edge of an increasingly complex health care system. It is through education that barriers can be broken, our mission and values showcased and our culture renewed and strengthened.
If you can dream it, you can do it.