



UNIVERSITY OF TORONTO
FACULTY OF MEDICINE
Continuing Professional Development

CPD 5-YEAR REPORT

2011-2016

This report summarizes the activities and accomplishments of the Continuing Professional Development (CPD) portfolio from 2011 to 2016.

Prepared by Dr. Suzan Schneeweiss, Associate Dean, Continuing Professional Development

FACULTY OF MEDICINE

Vision: Leadership in improving health through education, research and partnerships.

Mission: We develop leaders, contribute to our communities, and improve the health of people and populations through the discovery, application and communication of knowledge.

Strategic Priorities:

- Prepare - Preparing the next generation of leaders in the health sciences
- Discover - Leading research that answers questions of fundamental and societal relevance. Translating discoveries to improve health.
- Partner - An ideal and preferred partner. A gateway to and for the world.

CONTINUING PROFESSIONAL DEVELOPMENT

Vision: International leadership in improving health through innovation in continuing education and research.

Mission: We fulfill our social responsibility by developing CPD leaders, contributing to our communities, and improving the health of individuals and populations through the discovery, application and communication of knowledge.

Values: As leaders who are committed to exceptional results, we embrace the following core values:

- Accountability
- Integrity
- Interprofessionalism
- Social Responsibility
- Inclusiveness
- Innovation
- Lifelong Learning

Strategic Directions 2011-2016:

1. Enhance best practices and faculty development for continuing education
2. Advance research, innovation and scholarship
3. Strengthen and grow practice-based education
4. Foster and embed quality improvement in continuing education
5. Promote patient and public engagement
6. Promote global and Indigenous health

Key Facts

We are Canada’s largest provider of continuing education programs for health care professionals. Attracting local, national and international audiences, our programs are the choice for those who want to learn from the best.

CPD offers programs that meet the needs of health care professionals across a number of specialties and areas. Innovative approaches in content delivery including eLearning and simulation engage professionals committed to continuous learning.

2010-11 to 2015-16 (year to date) snapshot

Total registrants: 204,000+
 Total courses and conferences: 2000+
 Total eLearning programs: 100
 Total programs using simulation: 145
 Departmental CPD Directors: 15
 CPD Course Directors: 500+

Research snapshot (2010-11 to 2014-15)

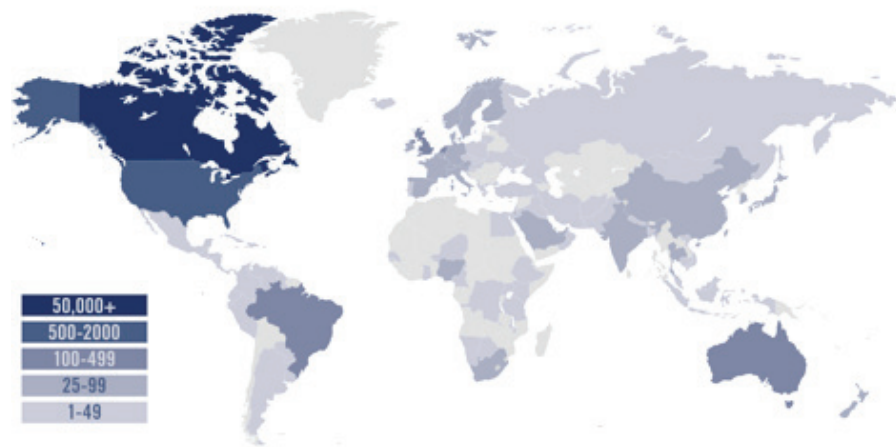
CPD research funding: Approximately \$34M total
 # publications: 297
 # research Grants: 165

	AY10-11	AY11-12	AY12-13	AY13-14	AY14-15	AY15-16
Managed+Partial	57	54	98	98	82	89
Regonly	24	13	32	39	38	34
Accred only	217	215	214	238	261	274
TOTAL	298	282	344	375	381	397

	AY10-11	AY11-12	AY12-13	AY13-14	AY14-15	AY15-16
Managed+Partial	6763	5687	6782	8137	8137	8389
Regonly	973	162	1074	1194	1939	1170
Accred only	24901	25968	24400	27628	27547	30517
TOTAL	32637	31817	32256	36959	37875	40076

Accred only	115	121	114	116	106	111
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CPD's Community of Learners



Current CPD Leadership

Vice Dean, Post MD Education (PGME and CPD)
Dr. Salvatore M. Spadafora

Associate Dean, CPD
Dr. Suzan Schneeweiss

Director, Continuing Professional Development Portfolio
Trevor Cuddy

Faculty Lead, Indigenous and Refugee Health
Dr. Anna Banerji

Manager, Marketing and Communication
Renice Jones

Academic Director, Standardized Patient Program
Dr. Brian Simmons

Introduction

Continuing Professional Development (CPD) at the University of Toronto (U ofT) is a leader in the academic development of continuing education programs in Canada. Our core business is to accredit and manage CPD events by ensuring that CPD Course Directors and course developers meet U ofT standards and use best practices in CPD development and course delivery. In addition we focus on CPD academic development, CPD scholarship/research and CPD global and Indigenous health programs.

CPD courses and conferences provide leading education to a broad spectrum of health professionals. Since 2010-11, learning opportunities offered by CPD attracted a global inter-professional audience with more than 204,000 learners from Canada and abroad participating in more than 2,000 courses and conferences. Alumni from the Faculty of Medicine at U ofT were part of this group of engaged learners. Over 8250 University of Toronto Faculty of Medicine alumni return annually to learn through CPD because they understand the high quality and value of our programs. Our dedicated group of CPD leaders, courses directors and staff provide exceptional service in creating and running innovative programs to drive change and improve healthcare. See Appendix 1 for a list of CPD's primary contributions to CPD.

CPD underwent review by the Committee on Accreditation of Continuing Medical Education (CACME) in March 2013. CPD was found to have exemplary compliance with 10 standards and full compliance with 8 standards. Partial compliance for one standard was identified and full compliance achieved in September 2015.

The CACME identified the following institutional strengths:

1. The support for CPD provided by the Dean, Faculty of Medicine
2. Highly educated and committed professional staff.
3. Clear strategic plan with well-identified milestones monitored at six monthly intervals
4. Continuous investment and re-investment in the operation.
5. Well-developed policies and procedures that are transparent.
6. Well established and resourced program of research and innovation.

This report highlights CPD's major accomplishments and achievements over the past five years in alignment with our 2011-2016 strategic directions to:

1. Enhance best practices and faculty development for continuing education
2. Advance research, innovation and scholarship
3. Strengthen and grow practice-based education
4. Foster and embed quality improvement in continuing education
5. Promote patient and public engagement
6. Promote global and Indigenous health

Dr. Suzan Schneeweiss MD, MEd, FRCPC became Associate Dean CPD in 2015 when the CPD program was re-aligned within the Faculty of Medicine under the Post MD Education portfolio. Previously, Dr. Dimitri Anastakis held the position of Vice Dean, Continuing Education and Professional Development from 2012-2015 and Dr. Ivan Silver was Vice Dean, Office of Continuing Education and Professional Development from 2005-2011.

CPD Overview of Core Activities

CPD Events

An expert team of professionals with proven success in event management and collaborative sponsorship and grant funding

Event planning

- International, national and local event management
- Team of Certified Meeting Professionals
- Venue selection and contract negotiation
- Speaker management
- Catering and AV setup
- Liaising tradeshow relationships
- Full marketing and communications services

Online registration

- Secure information
- Global payments, PCI-compliant
- Course director record keeping: self-managed and real-time access to registrant records
- Registrant record keeping: self-managed access to all CPD courses and post-event materials

Financial services

- Budget development and management
- Expenses tracking and reimbursements
- Cost reconciliation and financial reporting

Academic Development

Our team of educators are here to help make life easier by sharing international best practices, developing leadership skills and working in partnership with Course Directors to plan, assess and evaluate new and ongoing courses and events.

Educational consulting

- Program design and evaluation
- Educational tools and templates
- Gap analysis and needs assessment
- Outcome measurement
- Best practices and quick tips
- Adherence to highest standards of education rigor
- Custom and co-creation of courses
- Universality and transportability of content
- Multicultural and social justice issues

Leadership development

- Community of international CPD Leaders
- 8 CPD leadership and innovation awards

Scholarship and Research

World leading research services to help you transform your courses and events

Research community and networking

- Project collaboration and consulting
- Grant proposals and funding
- International Partnerships
- eRICE (Research in Continuing Education Committee) — an innovative home for CPD scholars and researchers
- RDRB Access — Comprehensive CPD literature database

CPD's scholarship/research division is evolving and will soon have a new Academic and Scholarship Director.

Key Accomplishments 2011-2016

LEADERSHIP (PREPARE)

New Opportunities in Global and Indigenous Health

Dr. Anna Banerji, Director for Global and Indigenous Health, launched the Indigenous Health Conference: Challenging Health Inequities in 2014 with 435 attendees who discussed the health disparities that exist for Indigenous people in Canada. The conference brought together an inter-professional group of health practitioners, community members and the public and aimed to increase the number of culturally competent health care providers who work with Indigenous populations. The conference won the 2015 Canadian Association for University Marketing (CAUCE) Design and Marketing Award 'Marketing on a Shoestring'. The second Indigenous Health Conference was held May 26 and 27, 2016 with 673 attendees.

North American Refugee Health Conference

Dr. Banerji also launched the Canadian conference on refugee health in 2007 that evolved into the largest clinical conference on refugee health globally when the conference merged with its American counterparts to become the North American Refugee Health Conference. It is currently held biannually and brings together over 300 registrants from across Canada, the United States and around the world to discuss pressing issues related to refugee and migrant health. In 2015, the conference drew 475 participants.

Best Practices in CPD

In 2012, CPD offered a one-time Best Practices in CPD webinar series focusing on essential skills in continuing education for healthcare professionals who are involved in planning and delivering continuing education courses, conferences and lectures. Sessions were conducted live with opportunity to engage in interactive discussions with presenters and healthcare professionals with similar interests. The topics covered included: best practices in continuing education; technology and learning: application to personal learning; technology and learning: application to course design; evaluation: beyond the satisfaction survey; and effective presentations.

Foundations in Continuing Health Education Certificate Program

Today the webinar series has evolved into the Foundations in Continuing Health Education Certificate Program. In collaboration with key stakeholders, this program provides fundamental theory and skill acquisition in the areas of educational development, implementation and administration. It is designed to address practical issues commonly experienced in the design, development and implementation of Continuing Health Education (CHE). The program is of particular relevance to CHE administrators, educators and program planners.

Association of Medical Educators of Europe (AMEE) Conference

AMEE is one of the largest medical education meetings in the world and attracts a varied audience of over 2000 delegates from over 80 different countries. CPD is the only North American CPD group invited to the conference and since 2013 has delivered the Essential Skills in Medical Education course in Continuing Professional Development (ESCPD). The course consists of two days of training with topics ranging from the international CPD perspective to the influence of learning theory on CPD and individual to systems based CPD.

Continuing Education Leadership Program (CELP)

CELP is a certificate program designed to meet the needs of individuals who are interested in promoting excellence, innovation, and change in continuing education initiatives for health professionals. This program specifically aims to provide participants with a broad range of valuable management and leadership skills and the tools necessary to lead continuing education initiatives for health professionals in today's complex health care environment.

In 2014 CELP won the Royal College Accredited CPD Provider Innovation Award which recognizes innovative development and implementation of educational processes, policies, resources or tools.

IDEAS Introductory Quality Improvement

CPD has partnered with the Ministry of Health and Long-term Care and 5 other universities to build knowledge, skills and a common language in quality improvement through the IDEAS (Improving and Driving Excellence Across Sectors) program. The 2-day IDEAS Introductory Quality Improvement (QI) Program is designed for physicians, nurses, other healthcare professionals and managers who are participating or would like to participate in quality improvement projects related to Ontario's health system priorities. In 2016, the CPD Ontario Collaborative with the 6 Ontario Universities was awarded the Royal College Accredited Providers Innovation Award for the IDEAS program.

Medical Record Keeping

Medical Record-Keeping is a one-day interactive workshop with case-based exercises, peer assessment exercises and training on practice tools which aims to help participants:

- Maintain Medical Records to ensure quality of care, continuity of care, assessment of care, and evidence of care.
- Navigate and apply the components and direction in the CPSO Medical Records Policy.
- Assess and improve medical records according to criteria defined in the Policy.

This program runs 16 times per year with approximately 20 participants per session. To date, 727 people have participated in this course.

A Fine Balance: Workshops for Women in the Healthcare Professions

CPD provides a series of locally run workshops in 2012 for physicians, nurses, pharmacists, midwives and other health professions related to wellness, mindfulness and lifestyle balance.

Re-Branding CPD

In 2013, CPD re-branded itself as part of a new phase of expansion and development in order to position itself as a strategic partner in transforming healthcare in Ontario and beyond. “Continuing Professional Development (CPD)” replaced the previous “Continuing Education and Professional Development (CEPD)” in order to bring greater focus to professional development and the unit’s expanded emphasis on Quality Improvement and Performance/Professional Improvement. Key new staff roles were added – Academic Program Development (Dr. Suzan Schneeweiss) and Global Health and Aboriginal Affairs (Dr. Anna Banerji) – CPD Research was expanded under Dr. Simon Kitto, and the portfolio was expanded with the addition of I+E (Innovations in Education) and the Standardized Patient Program (SPP). The rebranding also brought CPD communications closer in line with University of Toronto branding, primarily to enhance the connection with the university and build on U of T’s world-wide reputation.

Technology Advances

CPD has made IT advances in the following areas:

- Revamped CPD website using a new open source framework.
- Launched CPD Connect Blog to connect more often with the greater CE community by sharing activities, stories about health care professionals, office news and research developments.
- Mobile-optimized websites were introduced for a number of CPD’s large conferences and twitter discussion feed was integrated for the CME Congress and annual Update in General Surgery. The mobile-optimized sites feature content such as abstracts, speaker biographies and speaker presentations.
- Webcasting was introduced to help faculty deliver programming in innovative and convenient ways such as webcasting locally or internationally, from a single site or multi-sites.
- Social media usage has increased incorporating event marketing strategies such as email blasts, Twitter, Facebook and LinkedIn.

Event Management Software (EvMS)

Information services continues to develop its EvMS software and its growing list of clients, which include the Universities of Toronto, British Columbia, Manitoba and Ottawa, and SimONE. CPD is currently examining other software and learning management systems with a view to developing more advanced technology that, in addition to the current registration system, would provide more comprehensive learner data for courses and tracking.

INNOVATION (CHANGE)

Simulation based events

Simulation provides opportunities for learning using a variety of tools including hi-fidelity simulators, task trainers, computer-based images and standardized patients. CPD continues to innovate in this method and offers 145 simulation-based learning opportunities over the past 5 years. Simulation learning allows practitioners to demonstrate and receive feedback related to their application of knowledge, clinical reasoning, communication, problem-solving and/or ability to collaborate and work effectively in a health care team.

ACPAC Partnership: Advanced Clinician Practitioner in Arthritis Care Program across Canada

ACPAC is an innovative, interprofessional, academic and clinical education training program in advanced musculoskeletal/arthritis care hosted by St. Michael's Hospital, in collaboration with The Hospital for Sick Children. It is a certificate-based program offered at the post-licensure level accredited through CPD. The program focuses on the assessment, diagnosis, triage and independent, but collaborative management of select musculoskeletal (MSK) and arthritis related disorders in adults, children and adolescents. The aim of the program is to prepare experienced physical therapists, occupational therapists and nurses for extended practice roles and to facilitate the development of innovative models of arthritis care across various clinical settings in Ontario. In 2012 Dr. Rachel Shupak was awarded the Queen Elizabeth II Diamond Jubilee Medal by the Arthritis Society. In 2015 the program was awarded the Clinical Innovation Award by the Arthritis Health Professional Association and Dr. Katie Lundon was awarded the Canadian Physiotherapy Association Award for enhancing the practice of physiotherapy through long-term contribution to this program.

Safe Opioid Prescribing

Safe Opioid Prescribing is designed to support physicians and other primary care providers to develop multi-modal approaches to complex chronic pain. This innovative blended learning flipped classroom program has four components: three interactive synchronous webinars (Assessing Complex Chronic Pain, Prescribing Opioids for Chronic Pain, and Addressing Opioid Challenges and Addictions) followed by a one-day problem-based learning small group workshop. This program has attracted more than 350 participants across Canada over the past 2 years and addresses the national opioid crisis with education of safe and appropriate approaches to opioid prescribing.

Application of QI principles to CPD

A number of Clinical Departments are integrating QI principles into their CPD activities. In 2014, the Department of Psychiatry became the first Psychiatry department to become an Association of American Medical Colleges (AAMC) Aligning and Educating for Quality (ae4Q) program site. The AAMC ae4Q supports institutions in aligning continuing education with quality improvement (QI) initiatives. The AAMC ae4Q site program identified current gaps in the alignment of continuing professional development (CPD) and QI in the department. As a result, a national qualitative study was conducted to better understand the national landscape of CPD and QI integration in mental health and explore perspectives of Psychiatry leaders and Psychiatry CPD leads in Canada. The study results highlighted distinct features of CPD and QI mental health including a shared belief that QI and CPD outcomes were measurable and uncertainty about how these areas of mental health could be aligned in our current context. Training in QI was felt to be an instrumental initial step toward integrating CPD and QI in Psychiatry. Subsequently, the Department of Psychiatry has championed a series of CPD activities aimed to bridge gaps in the alignment of CPD and QI through increased support for faculty QI training, creation of a QI culture through quality specific learning activities (e.g. morbidity and mortality rounds in mental health), and the development of performance-based CPD activities to address practice gaps related to mental health quality of care.

The Department of Medicine has worked to lead the development, implementation and evaluation of new models of delivering continuing education. These models integrate clinical, quality improvement and patient safety (QI&PS) content. In the past year, QI&PS topics were regularly featured in citywide and hospital grand rounds. The department continues to support the Quality Grand Rounds format during grand rounds and integrated QI&PS into several Divisional Annual Research & Education Days.

Innovating in eLearning

A number of innovative eLearning initiatives have been developed by CPD partner departments and organizations. For example, the Department of Anesthesia runs the CME Online Anesthesia Rounds, as well as the Perioperative Interactive Education online program. In addition, the Thoracic Anesthesia group of the Toronto General Hospital has created an online bronchoscopy simulator to improve Anesthesiologist's skills in providing lung isolation for thoracic anesthesia by learning bronchial anatomy. The Simulator and Quiz can be accessed on the website www.ThoracicAnesthesia.com.

The Department of Psychiatry provides another example of innovative eLearning through its Training Enhancement in Applied Cessation Counselling and Health (TEACH) Program. The TEACH program ensures that family physicians and other health care providers can obtain the essential knowledge and skills to deliver specialized intensive cessation counselling. The program is offered as a dynamic online competency-based certificate program and is interactive, using innovative learning objects, simulations, videos, case studies and discussion boards.

Innovations in Education Office

The Innovations in Education Office is a Faculty of Medicine business unit that supports, develops and helps translate health education opportunities from the Faculty of Medicine in partnership with the University of Toronto community and partners. The office hosts the InnovatingEdu Seminar Series, workshops that introduce health sciences faculty and staff to innovative tools and technologies that enable new ways of creating, presenting and distributing content. Topics include: new technologies, trends in education; key issues like copyright and trademarks; how to generate new revenues; and how to network with like-minded people.

Standardized Patient Program (SPP)

The Standardized Patient Program (SPP) was founded in 1984 to support the teaching of undergraduate medical students. Over the years, the program grew in many directions, and at its peak in 2014 had 120 internal and external clients, was delivering on 450 projects per year, and had annual revenues in excess of \$3,500,000. With this growth the program had developed a number of foci, including: teaching, assessment, national and international consulting services, instructional media production, research and knowledge dissemination.

Since 2009 the program has been part of the Continuing Professional Development Portfolio. Dr. Brian Simmons, Associate Professor of Pediatrics, was appointed as Program Director on July 1, 2011 and concluded his term July 1, 2015. At the conclusion of his term as Director, Dr. Simmons was appointed to a newly created position of Academic Director with the SPP. Since July 1, 2015, Trevor Cuddy, Director of the Continuing Professional Development Portfolio has served as the acting Director. Since July 1, 2016 the program has reported directly to the Vice-Dean Post MD Education.

Under Dr. Simmons' leadership, the program developed a 5 year strategic roadmap. The roadmap identified 4 goals: develop an academic mandate; improve operational effectiveness and efficiency; achieve fiscal sustainability; and, be recognized as a leader in experiential education. The plan raised considerable concerns about the financial sustainability of the program as a self-funded unit. Due to the loss of a number of major external clients, and budget cuts faced by internal clients, the program incurred significant financial losses. Hence, in March 2016, an administrative reorganization of the SPP was implemented to establish financial stability and to refocus the unit on providing services to support the core mission of the Faculty of Medicine.

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Comprehensive Family Practice Review

The Comprehensive Family Practice Review is an innovative program built on the CanMEDS-FM framework, designed to equip primary care physicians with high quality skills for 21st century practice. CanMEDS-FM roles are developed in the context of a deeper exploration of clinical topics relevant to family practice. Therapeutic themes include chronic disease management, family medicine across the life cycle, preventive medicine and health promotion, mental health, and challenging situations in practice.

This longitudinal, small group program ran over the course of 5 weekends with iterations in 2010–2011, 2011–2012 and 2012–2013. In 2013–2014 individual one-day workshops were offered addressing communication, collaboration and professionalism skills. This scholarly work was presented at multiple national and international meetings including the following:

- Family Medicine Forum, 2011
- Department of Family and Community Medicine Walter Rosser day, 2013
- Canadian Association of Continuing Health Education Conference, 2011
- National Accreditation Conference, 2011
- Association of Medical Education in Europe Conference, Lyon France 2012

SCHOLARSHIP (DISCOVER)

Research/Scholarship

From 2012 to 2014, Dr. Simon Kitto launched the CPD research program which aimed to strengthen the linkages between CPD and knowledge translation, quality improvement, and patient safety, both at the level of investigator collaboration and in the focus of research projects. The CPD research foci are:

1. Self-directed learning through innovative use of technology
2. Continuing interprofessional education in the workplace
3. Strategic integration of continuing education theories, methodologies and practices with Quality Improvement, Knowledge Translation and Patient Safety initiatives, and
4. The involvement of patient and family in interprofessional teamwork and education.

See Appendix 2 for a full listing of CPD research funding, publications and grants.

eRICE (Research in Continuing Education)

eRICE is a virtual interprofessional community of practice created to promote knowledge sharing and foster the advancement of continuing professional development (CPD) research, scholarship, education and innovation.

The specific objectives of eRICE are:

1. To highlight innovative and emerging areas in CE research.
2. To build a community of practice in CE scholarship and research at the University of Toronto.
3. To increase research capacity to conduct CE scholarship and research.

In 2014, eRICE began a transition to an online platform where presentations are now facilitated through interactive webinar and hosted for continuous feedback from the global CPD and CE research and education community.

Awards

CPD offers the following awards each year to celebrate excellence in continuing education (see award descriptions in Appendix 3):

- Colin R. Woolf Award for Sustained Excellence in Contributions to Continuing Education
- Colin R. Woolf Award for Excellence in Course Coordination
- Colin R. Woolf Award for Excellence in Teaching at Continuing Education Events
- Ivan Silver Innovation Award
- David Fear Fellowship
- Fred Fallis Award in Distance Education
- Interprofessional Health Care Team Continuing Education Award
- Dave Davis Research Award

COMMUNITY (PARTNERS)

New Commercial Sponsorship Policy and Disclosure Form

CPD released a new Policy on Sponsorship from Commercial Sources of University of Toronto Accredited Continuing Education Activities in 2012. The new policy is in compliance with the accreditation criteria of The College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada and is intended for use as a comprehensive policy to guide planners and developers of CE activities in the Faculty of Medicine. An updated Faculty Disclosure Policy and Declaration Form was also released to reflect changes introduced in the new policy. Faculty and Planning Committees are now expected to identify and fully disclose any potential conflicts of interest covering relevant relationships within the last five years (versus 3 years stated in the previous policy).

Strategic Communications

A new Strategic Communications division was introduced to transform and integrate all communications across CPD, leverage U of T's global reputation in CPD products and services, and to enhance CPD's reputation by rebranding the portfolio and its components with a strong market-driven platform and value proposition.

Expanded Education Consultant services

The design and development of continuing education, especially in the dynamic field of healthcare, involves leveraging a distinct set of skills, and represents a unique area of expertise which includes knowledge of adult and organizational learning principles, systematic educational design and evaluation methodologies.

Recognizing the importance of applying best practices in course identification, design, development, delivery and measurement, CPD offers free access to Education Consulting experts to advise Course Directors on best practices in continuing education and professional development, program development/design (needs assessment, objectives, education/learning formats), evaluation strategies and other essential

components of accreditation/sponsorship—all consistent with delivering outcome-based continuous learning experiences.

CPD's Education Consultants ensure that important health issues and learning best practices are identified, understood and addressed in program design and delivery, to foster improved health outcomes.

Support of departmental CPD activities and collaboration with other educational units and departments Continuing Professional Development is fortunate to have a dedicated group of continuing education directors and leaders committed to providing high quality CPD programs. With 15 Departmental CPD Directors and Other CPD Leaders (see Appendix 4), and more than 500 course directors, a wide range of programs are offered to meet the diverse needs of our learners. These individuals serve a vital role in advancing lifelong learning for health care professionals and improving quality of health care to our patients. See Appendix 5 for a summary of each clinical department's CPD activities.

The Next Five Years

The next five years will see tremendous change in the field of continuing professional development as we integrate new technologies for learning, incorporate workplace and team-based learning into everyday practice and utilize quality improvement and patient safety data to drive performance improvement and advance the care of our patients and populations.

A summary of how CPD's 2011-2016 accomplishments and contributions align with CPD's strategic goals and anticipated outcomes can be found in Appendix 6. CPD is reviewing and renewing its strategic plan in 2016 with a clear focus on the following directions:

1. Leadership
 - Enhance best practice and faculty development for continuing education
 - Promote global and indigenous continuing professional development
2. Innovation
 - Strengthen practice-based education
 - Foster QI in CE
3. Scholarship
 - Advance research, innovation and scholarship
4. Community
 - Promote Patient and Public Engagement
 - Continuing IPE

APPENDIX 1 – CPD’s Primary Contributions to Continuing Professional Development

CPD Course	Description	Offered	# Participants
ACPAC Partnership: Advanced Clinician Practitioner in Arthritis Care Program across Canada	ACPAC is an innovative, interprofessional, academic and clinical education training program in advanced musculoskeletal/ arthritis care hosted by St. Michael’s Hospital, in collaboration with The Hospital for Sick Children. It is a certificate-based program offered at the post-licensure level accredited through CPD. The program focuses on the assessment, diagnosis, triage and independent, but collaborative management of select musculoskeletal (MSK) and arthritis related disorders in adults, children and adolescents. The aim of the program is to prepare experienced physical therapists, occupational therapists and nurses for extended practice roles and to facilitate the development of innovative models of arthritis care across various clinical settings in Ontario.	Delivered annually in an episodic format, including 5 weeks of on-site attendance in Toronto, across a ten-month period.	Approx. 7-10 per year since 2005-06
IDEAS Introductory Quality Improvement	The 2-day IDEAS Introductory Quality Improvement (QI) Program is designed for physicians, nurses, other healthcare professionals and managers who are participating or would like to participate in quality improvement projects related to Ontario’s health system priorities. CPD partners with the provincial government and 5 other universities on this course.	9 courses 2014-2016	462 attendees
Association of Medical Educators of Europe (AMEE) Conferences	<p>AMEE is amongst the largest medical education meetings in the world and although it is based in Europe, it attracts a varied audience of over 2000 delegates from over 80 different countries. In addition to the Annual Meeting, AMEE offers 8 Essential Skills courses which are accredited and offer certificates of completion.</p> <p>CPD is the only North American CPD group invited to the conference and since 2013 has delivered the Essential Skills in Medical Education course in Continuing Professional Development (ESCPD). The course consists of two days of training with topics ranging from the international CPD perspective to the influence of learning theory on CPD and individual to systems based CPD.</p>	<p>2013 Prague</p> <p>2014 Milan</p> <p>2015 Glasgow</p> <p>2016 Barcelona</p>	40 in total

APPENDIX 1 – CPD’s Primary Contributions to Continuing Professional Development

CPD Course	Description	Offered	# Participants
North American Refugee Conference	The North American Refugee Health Conference brings together over 300 registrants from across Canada, the United States and around the world to discuss pressing issues related to refugee and migrant health.	Canadian Refugee Health 2009 – 2011 North American Refugee Health 2013 - 2015	2009: 241 2011: 194 2013: 427 2015: 475
Indigenous Health Conference WON AWARD 2015 Canadian Association for University Marketing (CAUCE) Design and Marketing Award ‘Marketing on a Shoestring’	Created by Dr. Anna Banerji, Director of Global and Indigenous Health at CPD, the inaugural Indigenous Health conference was held in Toronto in 2014 with 435 attendees. The conference allowed for the discussion of health disparities that exist for Indigenous people in Canada and equipped health care providers with an understanding of how to better serve this population. The second Indigenous Health Conference will be held in May 2016.	2014 May 25-26, 2016	2014: 453
Continuing Education Leadership Program (CELP) WON AWARD 2014 Royal College Accredited CPD Provider Innovation Award which recognizes innovative development and implementation of educational processes, policies, resources or tools.	CELP is a certificate program designed to meet the needs of individuals who are interested in promoting excellence, innovation, and change in continuing education initiatives for health professionals. This program specifically aims to provide the participants with a broad range of valuable management and leadership skills and the tools necessary to lead continuing education initiatives for health professionals in today’s complex health care environment.	2010 – 2013	2010: 13 2012: cancelled 2013: 13

APPENDIX 1 – CPD’s Primary Contributions to Continuing Professional Development

CPD Course	Description	Offered	# Participants
<p>eRICE: Research in Continuing Education</p>	<p>eRICE is a virtual interprofessional community of practice created to promote knowledge sharing for the advancement of CPD research, scholarship, education and innovation.</p> <p>eRICE operates to achieve the following three objectives:</p> <ol style="list-style-type: none"> 1. To share information on innovative and emerging areas in CPD research and education 2. To build a global community of practice in CPD research and education 3. To increase research capacity to conduct CPD research and education <p>In 2014, eRICE began a transition to an online platform where presentations are now facilitated through interactive webinar and hosted for continuous feedback from the global CPD and CE research and education community.</p>	<p>eRICE sessions are held five times a year</p>	
<p>Medical Record Keeping</p>	<p>Medical Record-Keeping is a one-day interactive workshop with case-based exercises, peer assessment exercises and training on practice tools which aims to help participants:</p> <ul style="list-style-type: none"> • Maintain Medical Records to ensure quality of care, continuity of care, assessment of care, and evidence of care. • Navigate and apply the components and direction in the CPSO Medical Records Policy. • Assess and improve medical records according to criteria defined in the Policy. <p>This course is formally recognized by the College of Physicians and Surgeons of Ontario (CPSO).</p>	<p>16x / yr 2012 – 2016 to date</p>	<p>727 to date in 2016</p>

APPENDIX 1 – CPD’s Primary Contributions to Continuing Professional Development

CPD Course	Description	Offered	# Participants
Safe Opioid Prescribing	<p>Safe Opioid Prescribing is designed to support physicians and other primary care providers to develop multi-modal approaches to complex chronic pain.</p> <p>This innovative, blended learning, flipped classroom program has four components: three interactive synchronous webinars (Assessing Complex Chronic Pain, Prescribing Opioids for Chronic Pain, and Addressing Opioid Challenges and Addictions) followed by a one-day problem-based learning small group workshop. Each cohort of participants includes 50-75 physicians and other health care providers who can prescribe opioids for chronic pain.</p>	<p>Webinars 3 x / yr</p> <p>2013: 4 cohorts; one module format</p> <p>2014 – 2016: 8 cohorts to date; 3 module format</p> <p>Workshops 2 x / yr</p> <p>2014 - 2015</p>	<p>2013: 74</p> <p>2014-2016: 346</p> <p>2014-2015: 94</p>
Foundations in Continuing Health Education Certificate Program	<p>In collaboration with key stakeholders, this program provides fundamental theory and skill acquisition in the areas of educational development, implementation and administration. It is designed to address practical issues commonly experienced in the design, development and implementation of Continuing Health Education (CHE). The program is of particular relevance to CHE administrators, educators and program planners.</p>	2015-2016	12
A Fine Balance: Workshops for Women in the Healthcare Professions	<p>A series of locally run workshops for physicians, nurses, pharmacists, midwives and other health professions related to wellness, mindfulness and lifestyle balance.</p>	No longer offered. Ran three times between 2011 and 2013.	Approx. 50 participants over 3 programs.
Comprehensive Family Practice Review	<p>The Comprehensive Family Practice Review is an innovative program built on the CanMEDS-FM framework, designed to equip primary care physicians with high quality skills for 21st century practice. CanMEDS-FM roles are developed in the context of a deeper exploration of clinical topics relevant to family practice. Therapeutic themes include chronic disease management, family medicine across the life cycle, preventive medicine and health promotion, mental health, and challenging situations in practice.</p>	No longer offered. Ran annually from 2010-11 to 2012-13.	52 participants over 3 years.

APPENDIX 2 – CPD Grants and Publications

2014-15

Grants

Obstetrics and Gynaecology

Recipients: Balki M, Cooke ME, Windrim R

Project: High-fidelity simulation to assess interprofessional teamwork in obstetric crisis management

Agency: Ontario AHSC AFP Innovation Funds

Amount: \$124,437

Term: 2013-2015

Recipients: Geary M, Freire-Lizama T, Adams S, Berger H, Barrett J, Campbell D, Sgro M, Maguire J, Ray J, Ruiter J, Windrim R

Project: The role of simulation training on shoulder dystocia management and its effect on the incidence of brachial plexus injury

Agency: Ontario AHSC AFP Innovation Funds

Amount: Year 1 funding \$20,856

Term: 2014-2016

Occupational Science and Occupational Therapy

Project: Modular Online Framework for Public Education, Undergraduate & Entry-level Professional Curriculum, & Post-Professional Certification

Agency: ITF grant

Term: Second year

Paediatrics

Recipients: Feldman ME, Wan M, Martimianakis T, Kulasegaram M

Project: Test-Enhanced Continuing Education – A Randomized Controlled Trial

Agency: Education Development Fund, U of T

Amount: \$19,250

Term: 2015-2016

Recipients: King G, Servais M, Shepherd T, S Moodie, Parker K, Willoughby C, Bolack L, Baldwin P

Project: Development of a listening skill simulation intervention for pediatric rehabilitation therapists

Agency: SIM-one Simulation Research and Innovation Grant, Ontario Simulation Network

Amount: \$24,855

Term: 2013 – 2015

Recipients: Martimianakis M. A., (PI) Mylopoulos M, Schneider R, Tse S

Project: “Its not just about getting along”: Discourses of collaboration and team learning.

Agency: Royal College CanMeds Education Grant

Amount: \$23,910

Term: 2014-2016

APPENDIX 2 – CPD Grants and Publications

Recipients: Kwan C, Boutis K, Fischer J, Pecaric M, Pusic M

Project: Learning the interpretation of point-of-care emergency ultrasound Images.

Agency: Academic Pediatric Association

Amount: \$10,000

Term: Mar 2014 – May 2015

Recipients: Boutis K

Project: Learning retention and the timing of refresher education after the deliberate practice of radiograph interpretation

Agency: Royal College of Physicians and Surgeons of Canada

Amount: \$13,333

Term: December 2011- December 2014.

Radiation Oncology

Recipients: Giuliani M, Gillan C

Project: High Fidelity eLearning to support competency-based residency training: radiation oncology as a testing ground.

Agency: EDF Grant

Publications

Kitto S, Grant R. Revisiting evidence-based checklists: Interprofessionalism, safety culture and collective competence. *J Interprof Care*. 2014 Sep;28(5):390-2. doi: 10.3109/13561820.2014.916089. Epub 2014 May 14.

Rowland P, Kitto S. Patient safety and professional discourses: Implications for interprofessionalism. *J Interprof Care*, 2014; 28(4): 331–338

Family and Community Medicine

Antao P, Beber S, Telner D, Krueger P, Meaney C, Peranson J, Meuser J (2015). Are non physician healthcare providers prepared and supported to teach in family medicine? *Family Med*, 47(3) 187-93.

Beber S, Antao V, Telner D, Krueger P, Peranson J, Meaney C, Meindl M, Webster F (2015). Examining the teaching roles and experiences of non-physician health care providers in family medicine education: a qualitative study. *BMC Medical Education*, 15(15).

Medicine

Wong R, Breiner P, Mylopoulos M (2014). Shifting contours of boundaries: an exploration of inter-agency integration between hospital and community interprofessional diabetes programs. *J Interprof Care*, 28(5), 447-52. doi: 10.3109/13561820.2014.909795. Epub 2014 Apr 28.

Brosseau L, Wells G, Brooks-Lineker S, Bennell K, Sherrington C, Briggs A, Sturmeiks D, King J, Thomas R, Egan M, Loew L, De Angelis G, Casimiro L, Toupin April K, Cavallo S, Bell M, Ahmed R, Coyle D, Poitras S, Smith C, Pugh A, Rahman P (2015). Internet-based implementation of non-pharmacological interventions of the “people getting a grip on arthritis” educational program: an international online knowledge translation randomized controlled trial design protocol. *JMIR Res Protoc*, Feb 3;4(1), e19. doi: 10.2196/resprot.3572.

Kitto S, Goldman J, Etchells E, Silver I, Peller J, Sargeant J, Reeves S, Bell M (2015). Quality improvement, patient safety, and continuing education: a qualitative study of the current boundaries and opportunities for collaboration between these domains. *Acad Med*, 90(2), 240-245. doi: 10.1097/ACM.0000000000000596.

Gagliardi AR, Webster F, Perrier L, Bell M, Straus S (2014). Exploring mentorship as a strategy to build capacity for knowledge translation research and practice: a scoping systematic review. *Implement Sci*, 25(9),122. doi: 10.1186/s13012-014-0122-z.

APPENDIX 2 – CPD Grants and Publications

Yu CH, Ivers NM, Stacey D, Rezmovitz J, Telner D, Thorpe K, Hall S, Settino M, Kaplan DM, Coons M, Sodhi S, Sale J, Straus SE (2015). Impact of an interprofessional shared decision-making and goal-setting decision aid for patients with diabetes on decisional conflict—study protocol for a randomized controlled trial. *Trials*, 27(16), 286. doi: 10.1186/s13063-015-0797-8.

Wong BM (2014). How health professions education can advance patient safety and quality improvement. *Healthc Q. 17 Spec No:31-35*.

MacNeill H, Telner D, Sparaggis-Agaliotis A, Hanna E (2014). All for one and one for all: understanding health professionals' experience in individual versus collaborative online learning. *J Contin Educ Health Prof*, 34(2), 102-11. doi: 10.1002/chp.21226.

Gagliardi AR, Webster F, Straus SE (2015). Designing a knowledge translation mentorship program to support the implementation of evidence-based innovations. *BMC Health Serv Res*, 14;15:198. doi: 10.1186/s12913-015-0863-7.

Obstetrics and Gynaecology

Windrim R, Ryan G, Lebouthillier F, Campisi P, Kelly EN, Baud D, Yoo SJ, Deprest J (2014). Development of a high-fidelity simulator for fetal endotracheal balloon occlusion (FETO) insertion and removal. *Prenat Diagn*, 34(2), 180-184. doi: 10.1002/pd.4284. Epub 2013 Dec 27. PMID: 24284906

Hodges R, Simpson A, Gurau D, Sectar M, Mocarski E, Pittini R, Snelgrove J, Windrim R, Higgins M (2015). Learning from experience: Development of a cognitive task list to assess the second stage of labour for operative delivery. *J Obstet Gynaecol Can*, 37(4), 354-361.

Simpson AN, Hodges R, Snelgrove J, Gurau D, Sectar M, Mocarski E, Pittini R, Windrim R, Higgins M (2015). Learning from experience: Development of a cognitive task list to perform a safe and successful kielland forceps deliveries. *J Obstet Gynaecol Can*, 37(5), 397-404.

Simpson AN, Gurau D, Sectar M, Mocarski E, Pittini R, Snelgrove J, Hodges R, Windrim R, Higgins M (2015). Learning from experience: Development of a cognitive task-list to perform a safe and successful non-rotational forceps delivery. *J Obstet Gynaecol Can*, 37(7), 589-597.

Sectar M, Hodges R, Simpson A, Gurau D, Mocarski E, Pittini R, Snelgrove J, Windrim R, Higgins M (in press). Learning from experience: Development of a cognitive task-list to perform a safe and successful vaginal breech delivery. *Journal of Obstetrics and Gynaecology of Canada*

Higgins M, Kfoury J, Biringer A, Seaward G, Windrim R (in press). Teaching an experienced multidisciplinary team about postpartum hemorrhage: Comparison of two methods. *Journal of Obstetrics and Gynaecology of Canada*

O'Brien S, Simpson A, Windrim R, McAuliffe F, Higgins M (in press). Learning from experience: Development of a cognitive task list to perform a caesarean section in the second stage of labour. *Journal of Obstetrics and Gynaecology of Canada*.

Ophthalmology

Mammo ZN, Yousif F, Lam WC (2014). Educational outcome of the University of Toronto visiting professor rounds series. *Canadian Journal of Ophthalmology*, 49(1), 96-101.

Paediatrics

Al-Azri H, Ratnapalan S. Problem-based learning in continuing medical education: Review of randomized controlled trials (2014). *Can Fam Physician*, 60(2), 157-65.

Kempinska AY, Bhanji F, Larouche S, Dubrovsky AS (2014). A novel simulation-based program for ultrasound-guided fracture reductions: Program evaluation. *American Journal of Emergency Medicine*, 32(12), 1547-1549.

King G, Servais M, Shepherd T, Willoughby C, Bolack L, Moodie S, Baldwin P, Strachan D, Knickle K, Pinto M, Parker K, McNaughton N, Savage D (2015). A listening skill educational intervention for paediatric rehabilitation clinicians. *Developmental Neurorehabilitation* (1751-8423). Aug 25:1-13.

APPENDIX 2 – CPD Grants and Publications

King G, Sheppard T, Servais M, Willoughby C, Bolack L, Strachan D, Moodie S, Baldwin P, Knickle K, Parker K, Savage D, McNaughton N (2014). Developing authentic clinical simulations for effective listening and communication in pediatric rehabilitation service delivery. *Developmental Neurorehabilitation*. Posted online on December 30, 2014. doi:10.3109/17518423.2014.989461.

Ratnapalan S, Uleryk E (2014). Organizational learning in health care organizations. *Systems*, 2(1), 24-33.

Sehgal A, Mehta S, Evans N, McNamara PJ (2014). Cardiac sonography by the neonatologist: Clinical usefulness and educational perspective. *Journal of Ultrasound in Medicine*, 33(8), 1401-1406.

Psychiatry

Ravitz P, Wondimagegn D, Pain C, Araya M, Alem A, Baheretibeb Y, Hanlon C, Fekadu A, Park J, Fefergrad M, Leszcz M (2014). Psychotherapy knowledge translation and interpersonal psychotherapy: using best-education practices to transform mental health care in Canada and Ethiopia. *American Journal of Psychotherapy*, 68(4), 463-88.

Selby P, Goncharenko K, Barker M, Fahim M, Timothy V, Dragonetti R, Kemper K, Herie M, Hays JT (2015). Review and evaluation of online tobacco dependence treatment training programs for health care practitioners. *Journal of Medical Internet Research*, 17(4), e97-0000.

Sockalingam S, Tan A, Hawa R, Pollex H, Abbey S, Hodges BD (2014). Interprofessional education for delirium care: a systematic review. *Journal of Interprofessional Care*, 19(2), 161-181.

Radiation Oncology

Gillan, C et al. (2015). Team-based clinical simulation in radiation medicine: value to attitudes and perceptions of interprofessional collaboration. *Journal of Radiotherapy in Practice*, 14(2), 117-125.

Giuliani, ME et al. (2014). Determining an imaging literacy curriculum for radiation oncologists: An international delphi study. *International Journal of Radiation Oncology* Biology* Physics*, 88(4), 961-966.

Gillan, C et al. (2014). Interprofessionally-based simulation in radiation medicine: Addressing collaborative clinical competencies. *Journal of Medical Imaging and Radiation Sciences*, 2(45), 166.

Jewitt, N et al. (2015). Development and evaluation of patient education materials for elderly lung cancer patients. *Journal of Cancer Education*, 1-5.

Turner, S et al. (2015). Establishing a Global Radiation Oncology Collaboration in Education (GRaCE): Objectives and priorities. *Radiotherapy and Oncology*, 117(1), 188-192.

Kwan, JYY et al. (2015). Mapping the Future: Towards oncology curriculum reform in undergraduate medical education at a Canadian medical school. *International Journal of Radiation Oncology* Biology* Physics*, 91(3), 669-677.

Giuliani, M et al. (2014). Evaluation of high-fidelity simulation training in radiation oncology using an outcomes logic model. *Radiation Oncology*, 9(1), 189.

Milne, RA et al. (2014). Predictors of high eHealth literacy in primary lung cancer survivors. *Journal of Cancer Education*, 1-8.

Gillan, C et al. (2014). Exploring attitudes of Canadian radiation oncologists, radiation therapists, physicists, and oncology nurses regarding interprofessional teaching and learning.

Nguyen, L et al. (2015). Student eLearning imaging module initiative for soft tissue sarcoma radiotherapy treatment. *Journal of Medical Imaging and Radiation Sciences*, 1(46), S25-S26.

Carlone, M et al. (2014). Sci—Fri PM: Topics—05: Experience with linac simulation software in a teaching environment. *Medical Physics*, 41(8), 25-25.

APPENDIX 2 – CPD Grants and Publications 2013-14

CE Research and Development Grants

Recipients: Easty T

Project: Educating Clinicians on Critical IV Push Infusion Concepts Using Novel Visual and Interactive Training

Amount: \$4,750.00

Recipients: Grantcharov T

Project: Evaluating an Approach to the Competency-Based Training and Assessment of Non-Technical Skills in Surgical Residency

Term: \$4,950.00

Recipients: Sockalingam S

Project: The Future of Quality Improvement and Continuing Professional Development in Psychiatry: How Can They Co-exist?

Amount: \$4,990.00

Recipients: Ng S

Project: An Online Flipped Classroom Experience in Continuing Professional Development

Amount: \$4,956.72

Recipients: Razak F

Project: Evaluating the Effectiveness of 'The Rounds Table', a Novel Medical Podcast for Continuing Professional Education

Amount: \$5,000.00

Recipients: Sadavoy J

Project: Development of Innovative Tools for Teaching, Training, and Fidelity Measurement of a Complex Intervention in Geriatric Mental Health

Amount: \$5,000.00

Publications

Paradis E, Leslie M, Puntillo K, Gropper M, Aboumatar H, Kitto S, Reeves S. Delivering interprofessional care in intensive care: A scoping review of ethnographic studies. *Am J Crit Care*. 2014 May;23(3):230-8. doi: 10.4037/ajcc2014155.

Kitto S, Goldman J, Schmitt M, Olson C. Examining the intersection between continuing education, interprofessional education and workplace learning. *J Interprof Care*, 2014; 28(3): 183–185

Leslie M, Paradis E, Gropper M, Reeves S, Kitto S. Applying ethnography to the study of context in healthcare quality and safety. *J Crit Care*. 2013 Dec;28(6):1062-7. doi: 10.1016/j.jcrc.2013.05.015. Epub 2013 Jul 24.

Paradis E, Leslie M, Milic M, Gropper M.A, Kitto S, Reeves S. 833: Opening the black box: A typology of patients and families. *Critical Care Medicine*, December 2013 - Volume 41 - Supplement 1 12, pp: B1-B16,A1-A377.

Paradis E, Leslie M, Gropper M.A, Aboumatar H.J, Kitto S, Reeves S. Interprofessional care in intensive care settings and the factors that impact it: Results from a scoping review of ethnographic studies. *J Crit Care*. 2013 Dec;28(6):1062-7. doi: 10.1016/j.jcrc.2013.05.015. Epub 2013 Jul 24.

Reeves S, Leslie K, Baker L, Egan-Lee E, Legare F, Silver I, Rosenfield J, Hodges B, Curran V, Armson H, Kitto S. Study protocol for a pilot study to explore the determinants of knowledge use in a medical education context. *J Eval Clin Pract*. 2013 Oct;19(5):829-32. doi: 10.1111/j.1365-2753.2012.01858.x. Epub 2012 May 15.

APPENDIX 2 – CPD Grants and Publications

Kitto S, Nordquist J, Peller J, Grant R, Reeves S. The disconnections between space, place and learning in interprofessional education: An overview of key issues. *Journal of Interprofessional Care*, Volume 27, Supplement 2, 2013, pages 5-8.

Reeves S, Paradis E, Leslie M, Kitto S, Aboumatar H, Gropper MA. Understanding the nature of interprofessional collaboration and patient family involvement in intensive care settings: A study protocol. *ICU Director* September 2013 vol. 4 no. 5 242-247.

Nordquist J, Kitto S, Reeves S. Introduction: Future learning environments. *J Interprof Care*, 2013; 27(S2): 1.

Nordquist J, Kitto S, Reeves S. 'Living Museums': Is it time to reconsider the learning landscape for professional and interprofessional education? *J Interprof Care*, 2013; 27(S2): 2-4.

Nordquist J, Sundberg K, Kitto S, Ygge J, Reeves S. Future learning environments: The advent of a 'spatial turn'? *Journal of Interprofessional Care*, Volume 27, Supplement 2, 2013, pages 77-81.

Peller J, Schwartz B, Kitto S. Non-clinical core competencies and effects of interprofessional teamwork in disaster and emergency response training and practice: A pilot study. *Disaster Med Public Health Prep.* 2013 Aug;7(4):395-402. doi: 10.1017/dmp.2013.39.

Family and Community Medicine

Christofilosa V, DeMatteoa D, Penciner R, Outcomes of Commitment to Change Statements after an Interprofessional Faculty Development Program, *Journal of Interprofessional Care*, Volume 29, Issue 3, 2015.

Laboratory Medicine & Pathology

Nafisi H, Cesari M, Karamchandani J, Keith J. Clinicopathological features of brain metastases from ovarian carcinoma: A case series and diagnostic approach. *Mod Pathol* 2014 (suppl 2); 27:439A.

Hosseini N, Dube V, Wong J, Raphael S, Ismiil N, Ghorab Z. SOX10: A Novel Marker with High Sensitivity and Specificity for Diagnosis of Melanoma in Cytology Specimens. *Modern Pathology*. 2014 Feb;27 (Suppl 2):105A (abstract 419).

Ghorab Z, Hosseini N, Han G, Dube V, Wong J, Nofech-Mozes S. GATA3 Is a Useful Marker to Identify Breast Origin in FNA Samples. *Modern Pathology*. 2014 Feb;27(Suppl 2):103A (abstract 412).

Hosseini N, Ghorab Z, Keith J, Slodkowska E, Lu FI, Han G, Hanna W, Nofech-Mozes S. Expression of GATA3 in brain metastases of breast origin. *Mod Pathol* 2014 (suppl 2);27:437A.

Keith J, Pirouzmand F, Diamandis P, Ghorab Z. Intraoperative cytodagnosis of progressive multifocal leucoencephalopathy. *Cytopathology* 2014 Feb;25(1):59-61.

Keith JL, Bilbao J, Croul S, Ang LC, Guiot MC, Rossiter J, Ghorab Z, Hawkins C. Karamchandi J. Clinical neuropathology practice guide 6-2013: morphology and an appropriate immunohistochemical screening panel aid in the identification of synovial sarcoma by neuropathology. *Clin Neuropathol* 2013; Nov-Dec;32(6):461-70.

Helpman L, Kupets R, Covens A, Saad RS, Khalifa MA, Ismiil N, Ghorab Z, Dube V, Nofech-Mozes S. Assessment of endometrial sampling as a predictor of final surgical pathology in endometrial cancer. *Br J Cancer* 2014 Feb; 110(3):609-15.

Hanna WM, Ruschoff J, Bilous M, Coudry RA, Dowsett M, Osamura RY, Penault-Llorca F, van de Vijver M, Viale G. HER2 in situ hybridization in breast cancer: clinical implications of polysomy 17 and genetic heterogeneity. *Mod Pathol* 2014 Jan;27(1):4-18.

Wang T, Hsieh ET, Henry P, Hanna W, Streutker CJ, Grin A. Matched biopsy and resection specimens of gastric and gastroesophageal and adenocarcinoma show high concordance in HER2 status. *Hum Pathol* 2014 Jan 8 [Epub ahead of print]

Rabeneck L, Paszat L, Hilsden RJ, McGregor SE, Hsieh E, Tinmouth J, Baxter NN, Saskin R, Ruco A, Stock D. Advanced Proximal Neoplasia of the Colon in Average Risk Adults. *Gastrointestinal Endoscopy*. 2014 Feb 5. Accepted / In Press.

Grin A, Wang T, Hsieh ET, Henry P, Hanna W, Streutker CJ. Matched biopsy and resection specimens of gastric and gastroesophageal adenocarcinoma show high concordance in HER2 Status. *Human Pathology*. 2013 Dec 19. Accepted / In Press.

APPENDIX 2 – CPD Grants and Publications

Grin A, Hsieh E, Hanna W, Henry P, Hafezi-Bakhtiari S, El-Zimaity H, Howlett C, Parfitt J, Margiean EC, Ngae MY, Ramsay J, Aziz T, Streutker CJ. Rates of HER2 positivity at the gastroesophageal junction vs distal stomach: Are the differences solely due to histology? *Mod Pathol* 2014 (suppl 2);27:176A.

Simpson AN, Feigenberg T, Clarke BA, Gien LT, Ismiil N, Lamframboise S, Massey C, Ferguson SE. Fertility sparing treatment of complex atypical hyperplasia and low grade endometrial cancer using oral progestin. *Gynecol Oncol* 2014 Feb [Epub ahead of print]

Clarke GM, Zubovits JT, Shaikh KA, Wang D, Dinn SR, Corwin AD, Santamaria-Pang A, Li Q, Nofech-Mozes S, Liu K, Pang Z, Filkins RJ, Yaffe MJ. A novel, automated technology for multiplex biomarker imaging and application to breast cancer. *Histopathology* 2014 Jan;64(2):242-55.

Nofech-Mozes S, Hosseini N, Noy S, Lu FI, Slodkowska E, Han G, Hanna W, Ghorab Z. Limitations of breast biomarkers testing in fine needle aspiration cytology preparation. *Mod Pathol* 2014 (suppl 2);27:71A.

Chetty R, Bateman AC, Torlakovic E, Wang LM, Gill P, Al-Badri A, Arends M, Biddlestone L, Burroughs S, Carey F, Cowlshaw D, Crowther S, Da Costa P, Dada MA, d'Adhemar C, Dasgupta K, de Cates C, Deshpande V, Feakins RM, Foria B, Foria V, Fuller C, Green B, Greenson JK, Griffiths P, Hafezi-Bakhtiari S, Henry J, Jaynes E, Jeffers MD, Kaye P, Landers R, Lauwers GY, Loughrey M, Mapstone N, Novelli M, Odze R, Poller D, Rowsell C, Sanders S, Sarsfield P, Schofield JB, Sheahan K, Shepherd N, Sherif A, Sington J, Walsh S, Williams N, Wong N. A pathologist's survey on the reporting of sessile serrated adenomas/polyps. *J Clin Pathol* 2014 Jan 7 [Epub ahead of print].

Moreno CS, Long Q, Xu J, Sannigrahi S, Johnson BA, Zhou W, Gillespie T, Park JY, Nam RK, Sugar L, Stanimirovic A, Seth AK, Petros JA, Osunkoya AO. Biomarkers differentially expressed in prostatic adenocarcinoma gleason score 3+4=7 vs Gleason score 4+3=7 identified by global transcriptome sequencing of formalin-fixed paraffin embedded tissue. *Mod Pathol* 2014 (suppl 2);27:250A.

Moreno CS, Xu J, Long Q, Sannigrahi S, Johnson BA, Zhou W, Gillespie T, Park JU, Nam RK, Sugar L, Stanimirovic A, Seth AK, Petros JA, Osunkoya AO. Global transcriptome sequencing of formalin fixed paraffin embedded patient samples identifies biomarkers that are differently expressed between Caucasian and African American men with prostate cancer. *Mod Pathol* 2014 (suppl 2);27:250A.

Siddiqui I, Chien-Hung Chen J, Hafezi-Bakhtiari S, Li Chang H, Liu J, Serra S, Soucy G, Streuker C, Wong J, El-Zimaity H. Do gastrointestinal pathologists miss gastric atrophy? *Mod Pathol* 2014 (suppl 2);27:204A.

Medicine

Wong R I, Breiner P, Mylopoulos M, Shifting contours of boundaries: an exploration of inter-agency integration between hospital and community interprofessional diabetes programs, *J Interprof Care*. 2014 Sep;28(5):447-52. doi: 10.3109/13561820.2014.909795. Epub 2014 Apr 28.

Manns B, Braun T, Edwards A, Grimshaw J, Hemmelgarn B, Husereau D, Ivers N, Johnson J, Long S, McBrien K, Naugler C, Sargious P, Straus S, Tonelli M, Tricco AC, Yu C; Identifying strategies to improve diabetes care in Alberta, Canada, using the knowledge-to-action cycle, *Alberta Innovates; Health Solutions Interdisciplinary Chronic Disease Collaboration, CMAJ Open*. 2013 Nov 20;1(4):E142-50. doi: 10.9778/cmajo.20130024. eCollection 2013 Oct.

Yu CH, Parsons JA, Hall S, Newton D, Jovicic A, Lottridge D, Shah BR, Straus SE, User-centered design of a web-based self-management site for individuals with type 2 diabetes - providing a sense of control and community, *BMC Med Inform Decis Mak*. 2014 Jul 23;14(1):60. [Epub ahead of print]

PMID: 25056379 [PubMed - as supplied by publisher] Free Article

Yu CH, Stacey D, Sale J, Hall S, Kaplan DM, Ivers N, Rezmovitz J, Leung FH, Shah BR, Straus SE, Designing and evaluating an interprofessional shared decision-making and goal-setting decision aid for patients with diabetes in clinical care - systematic decision aid development and study protocol, *Implement Sci*. 2014 Jan 22;9:16. doi: 10.1186/1748-5908-9-16.

Shah BR, Bhattacharyya O, Yu CH, Mamdani MM, Parsons JA, Straus SE, Zwarenstein M, Effect of an educational toolkit on quality of care: a pragmatic cluster randomized trial, *PLoS Med*. 2014 Feb 4;11(2):e1001588. doi: 10.1371/journal.pmed.1001588. eCollection 2014 Feb. PMID: 24505216 [PubMed - in process] Free PMC Article

APPENDIX 2 – CPD Grants and Publications

MacNeill H, Telner D, Sparagis-Agaliotis A, Hanna E, All for One and One for All: Understanding Health Professionals' Experience in Individual Versus Collaborative Online Learning (pages 102–111), Article first published online: 17 JUN 2014 | DOI: 10.1002/chp.21226

Hanna E, Soren B, Telner D, MacNeill H, Lowe M, Reeves S, Flying blind: the experience of online interprofessional facilitation. *J Interprof Care*. 2013 Jul;27(4):298-304. doi: 10.3109/13561820.2012.723071. Epub 2012 Sep 24. PMID: 23002787 [PubMed - indexed for MEDLINE]

Wong BM, Goguen J, Shojania KG, Building capacity for quality: a pilot co-learning curriculum in quality improvement for faculty and resident learners. *J Grad Med Educ*. 2013 Dec;5(4):689-93. doi: 10.4300/JGME-D-13-00051.1.

Bhatia RS, Dudzinski DM, Malhotra R, Milford CE, Yoerger Sanborn DM, Picard MH, Weiner RB, Educational Intervention to Reduce Outpatient Inappropriate Echocardiograms: A Randomized Control Trial, *JACC Cardiovasc Imaging*. 2014 Aug 5. pii: S1936-878X(14)00481-1. doi: 10.1016/j.jcmg.2014.04.014. [Epub ahead of print]

Kitto SC, Bell M, Goldman J, Peller J, Silver I, Sargeant J, Reeves S, (Mis)perceptions of continuing education: insights from knowledge translation, quality improvement, and patient safety leaders, *J Contin Educ Health Prof*. 2013 Spring;33(2):81-8. doi: 10.1002/chp.21169.

PMID: 23775908 [PubMed - indexed for MEDLINE]

Jeffs L, Abramovich IA, Hayes C, Smith O, Tregunno D, Chan WH, Reeves S, Implementing an interprofessional patient safety learning initiative: insights from participants, project leads and steering committee members, *BMJ Qual Saf*. 2013 Nov;22(11):923-30. doi: 10.1136/bmjqs-2012-001720. Epub 2013 Jun 15. PMID: 23771901 [PubMed - indexed for MEDLINE]

Obstetrics

Walker MG, Windrim C, Ellul KN, Kingdom JC, Web-based education for placenta complications of pregnancy. *J Obstet Gynaecol Can*. 2013 35(4):334-9

Kulkarni A, Wright E, Kingdom J, Web-based education and attitude to delivery by caesarean section in nulliparous women. *J Obstet Gynaecol Can*. 2014 36(9):768-75.

Paediatrics

Al-Azri H, Ratnapalan S. Problem-based learning in continuing medical education: Review of randomized controlled trials. *Can Fam Physician* 2014; 60 (2): pp 157-65.

Alshammary SA, Ratnapalan S, Akturk Z. Continuing medical education as a national strategy to improve access to primary care in Saudi Arabia. *J Educ Eval Health Prof* 2013; 31(10)7.

Leslie K, Baker L, Egan Lee E, Reeves S. Advancing faculty development: a systematic review *Academic Medicine*. 2013; 88(7): pp 1038-1045.

Lundon K, Kennedy C, Rozmovits L, Sinclair L, Shupak R, Warmington K, Passalent L, Brooks S, Schneider R, Soever L. Evaluation of perceived collaborative behaviour amongst stakeholders and clinicians of a continuing education program in arthritis care. *Journal of Interprofessional Care*. September 2013; 27 (5): pp 401-407.

O'Toole J, West DC, Starmer AJ, Yu CE, Calaman S, Rosenbluth G, Hepps J, et al for the I-PASS Study Education Executive Committee (Coffey T, Bismilla Z). Placing Faculty Development Front and Center in a Multisite Educational Initiative: Lessons From the I-PASS Handoff Study. *Academic Pediatrics* May-June 2014; 14 (3): pp 221-224.

O'Toole JK, Sectish TC, Starmer AJ, Rosenbluth G, West DC, Landrigan CP, Allen AD, Noble EL, Srivastava R, Tse LL, Hepps J, Lopreiato JO, Calaman S, Yu CE, Spector ND, and the I-PASS Educational Executive Committee (Coffey T, Bismilla Z). I-PASS Handoff Curriculum: Faculty Development Resources. *MedEdPORTAL* 2013: Available from: <https://www.mededportal.org/publication/9540>.

APPENDIX 2 – CPD Grants and Publications

O’Toole JK, Sectish TC, Starmer AJ, Rosenbluth G, West DC, Landrigan CP, Allen AD, Noble EL, Srivastava R, Tse LL, Hepps J, Lopreiato JO, Calaman S, Yu CE, Spector ND, and the I-PASS Educational Executive Committee. I-PASS Handoff Curriculum: Faculty Development Resources. MedEdPORTAL September 2013: <https://www.mededportal.org/publication/9540>.

Ratnapalan S, Uleryk E. Organizational Learning in Health Care Organizations. *Systems* 2014; 2 (1): pp 24-33.

Starmer A, Landrigan C, Srivastava R, Wilson K, Allen A, Mahant S, Blank J, Sectish T, Spector N, West DI. I-PASS Handoff Curriculum: Faculty Observation Tools. MedEdPORTAL: Oct 2013. Available from: www.mededportal.org/publication/9570.

Starmer AJ, O’Toole JK, Rosenbluth G, Calaman S, Balmer D et al for the I-PASS Study Education Executive Committee. Development, Implementation, and Dissemination of the I-PASS Handoff Curriculum: A Multisite Educational Intervention to Improve Patient Handoffs. *Academic Medicine* June 2014; 89 (6): pp 1-9.

Starmer AJ, O’Toole JK, Rosenbluth G, Calaman S, Balmer D, West DC, Bale JF, Yu CE, Noble EL, Tse LL, Srivastava R, Landrigan CP, Sectish TC, Spector ND; and members of the I-PASS Education Executive Committee. Development, Implementation, and Dissemination of the I-PASS Handoff Curriculum: A Multi-Site Educational Intervention to Improve Patient Handoffs. *Academic Medicine* 2014 June; 89 (6): pp 876-884.

Physical Therapy

Yeung E, Woods, N, Dubrowski A, Hodges B, Carnahan H. Sensibility of a new instrument to assess clinical reasoning in post-graduate orthopaedic manual physical therapy education. *Manual Therapy*. Accepted 2014

Radiation Oncology

Brus, Floortje, Christy Brissette, and Caitlin Gillan. “What Factors Impact Referral of Patients by Radiation Therapists at the Princess Margaret Cancer Centre to the Electronic Living Laboratory for Interdisciplinary Cancer Survivorship Research (ELLICSR) Kitchen?.” *Journal of Medical Imaging and Radiation Sciences* 45.2 (2014): 176.

Carlone, Marco, et al. “Sci—Fri PM: Topics—05: Experience with linac simulation software in a teaching environment.” *Medical Physics* 41.8 (2014): 25-25.

Gillan, Caitlin, et al. “Interprofessionally-based Simulation in Radiation Medicine: Addressing Collaborative Clinical Competencies.” *Journal of Medical Imaging and Radiation Sciences* 45.2 (2014): 166.

Gillan, Caitlin, et al. “Defining imaging literacy in radiation oncology interprofessionally: Toward a competency profile for Canadian residency programs.” *Journal of Medical Imaging and Radiation Sciences* 44.3 (2013): 150-156.

Gillan, Caitlin, et al., eds. *Research for the Radiation Therapist: From Question to Culture*. CRC Press, 2014.

Giuliani, Meredith E., et al. “Determining an Imaging Literacy Curriculum for Radiation Oncologists: An International Delphi Study.” *International Journal of Radiation Oncology* Biology* Physics* 88.4 (2014): 961-966.

Giuliani, Meredith, et al. “Evaluation of high-fidelity simulation training in radiation oncology using an outcomes logic model.” *Radiation Oncology* 9.1 (2014): 189.

Masterson, Mark F., et al. “A systematic review of educational resources for teaching patient handover skills to residents.” *Canadian Medical Education Journal* 4.1 (2013): e96-e110.

Rozanec, Natalie, et al. “Concordance of a Clinical Specialist Radiation Therapist and Radiation Oncologist: A Prospective Study Involving Treatment Planning and Assessment of Patients Receiving Palliative Radiotherapy for Bone Metastases.” *Journal of Medical Imaging and Radiation Sciences* 45.2 (2014): 165-166.

APPENDIX 2 – CPD Grants and Publications 2012-13

RICE Peer Reviewed Grants

Recipients: Brouwers M, Bhattacharyya O

Project: Innovations to enhance the capacity of practice guidelines to improve health and healthcare systems: AGREE- REX (Recommendation Excellence)

Agency: Canadian Institutes of Health Research (CIHR)

Amount: \$602,124 CAD

Term: 2013 Aug - 2016 Mar

Recipients: Harris S, Bhattacharyya O

Project: Transformation of Indigenous Primary Healthcare Delivery (FORGE AHEAD): Community-driven Innovations and Strategic Scale-up Toolkits

Agency: Canadian Institutes of Health Research (CIHR)

Amount: \$2,500,000 CAD

Term: 2013 Apr - 2018 Mar

Recipients: Stewart M, Bhattacharyya O

Project: Patient-Centred Innovations for Persons with Multimorbidity

Agency: Canadian Institutes of Health Research (CIHR)

Amount: \$2,500,000 CAD

Term: 2013 Apr - 2018 Mar

Recipients: Liu P, Campbell NRc, Tobe SW, Yeates K, Bhattacharyya O (C), Kilonzo K, Lum-Kwong M, Wentworth J

Project: DREAM-GLOBAL: Diagnosing Hypertension – Engaging Action and Management in Getting Lower BP in Aboriginal and LMIC – A Research Proposal

Agency: Canadian Institutes of Health Research (CIHR)

Amount: \$1,804,100 CAD

Term: 2012 Jul - 2017 Jun

Recipients: Aaron S, Gupta S

Project: Strategies to Improve Diagnosis and Treatment of Asthma in Canadians

Agency: Canadian Institutes of Health Research (CIHR), Operating Grant (Health Services Committee)

Amount: \$1,162,410 CAD 2012 Jul - 2013 Jun: \$232,482 CAD (prorated)

Term: 2011 Jul – 2016 Jun

Recipients: Gupta S

Project: EAAPS - The Electronic Asthma Action Plan System for Implementation in Primary Care. Knowledge Translation in Asthma Study

Agency: Canadian Institutes of Health Research (CIHR), Knowledge-to-Action Grant

Amount: \$198,302 CAD 2012 Jul - 2013 Jun: \$99,151 CAD (prorated)

Term: 2011 Apr - 2014 Mar

APPENDIX 2 – CPD Grants and Publications

Recipients: Garvey N, Liskai C, Cafazzo J, Gupta S

Project: Consumer Access to Personal Health Information for Asthma Self-Management

Agency: Canada Health Infoway

Amount: \$1,362,000 CAD 2012 Jul – 2013 Jun: \$527,226 CAD (prorated)

Term: 2012 Jun – 2014 Dec

Recipients: Ohshima N, Bontje P, Oneyama H, Yoshiura T, Reeves S, Kitto S

Project: Interprofessional disaster preparedness for Japanese health care students and professions

Agency: Ministry of Health, Japan

Amount: \$133,000 CAD

Term: 2013 – 2016

Recipients: Jones J, Alibhai S, Kitto S, Catton C, Cheung A, Hamilton R, Warde P

Project: An integrated multi-faceted knowledge translation intervention to improve bone health in men receiving androgen deprivation therapy for prostate cancer.

Agency: Canadian Cancer Society. Knowledge to Action Grants.

Amount: \$99,919 CAD

Term: 2013 – 2015

Recipients: Reeves S, Mischo-Kelling M, Tappeiner W, Lochner L, Vittadello F, Kitto S

Project: Interprofessional collaboration within the health professions in South Tyrol, Italy: How do the different professions view and evaluate the current status of inter-professional collaboration

Agency: National Agency: Provincia Autonoma di Bolzano Italy

Amount: €272,625 EURO

Term: 2013-2015

Recipients: Morrow R, Norwood C, Kitto S, Alexis K, Tiburcio J

Project: Peer Education with Intersecting Networks: The SACME Project in South

Bronx Public Housing - Implementing the Diabetes Prevention Program Among those Most at Risk and their Healthcare Providers

Agency: Society for Academic CME Research Support Grant

Amount: \$10,000 USD

Term: 2013-2014

Recipients: Reeves S, Kitto S, Provonost P, Grouper M, Aboumatar H, Wachter B

Project: Understanding the nature of interprofessional teamwork in intensive care units: A multi-institutional ethnographic study

Agency: Gordon & Betty Moore Foundation, California

Amount: \$2,167,937 USD

Term: 2012-2015

APPENDIX 2 – CPD Grants and Publications

Recipients: Masiello I, Löfgren S, Ericson A, Bolinder G, Reeves S, Kitto S

Project: Interprofessional competencies in a student-led clinical setting

Agency: Karolinska University Hospital, Karolinska Institutet

Amount: \$162,000 AUD

Term: 2012

Recipients: Moulton CA, Murnaghan ML, Martimianakis T, Kitto S

Project: Pressures on surgeons to ‘measure up’ and their effects on surgical judgment

Agency: Physicians’ Services Foundation

Amount: \$99,043 CAD

Term: 2011-2013

Recipients: Parikh S.V, Michalak, E.

Project: “Quality of Life, Stigma, and Bipolar Disorder: A Collaboration for Change”

Agency: Canadian Institutes for Health Research

Amount: \$200,000 CAD

Term: 2010-2012

Recipients: Parikh S.V, Michalak, E., Hawke LD

Project: Stigma and bipolar disorder: A novel knowledge translation initiative

Agency: University of Toronto CEPD Research Fund

Amount: \$5,000 CAD

Term: 2012-2013

Recipients: Michalak, E and Parikh S.V.

Project: Improving Care and Wellness in Bipolar Disorder: A collaborative knowledge translation network

Agency: Canadian Institutes for Health Research

Amount: \$600,000 CAD

Term: 2011-2014

Recipients: Stelfox HT, Boiteau PJ, Zuege D, Zygun DA, Ghali WA, Perrier L, Straus SE

Project: Identifying Intensive Care Unit Discharge Planning Tools

Agency: Canadian Institutes of Health Research

Amount: \$49,982 CAD

Term: 2012-2013

Recipients: Laupacis A, Aviv R, Burton J, Dueck A, Feasby T, Perrier L, Spears J, Straus S, Thorpe K

Project: Systematic reviews of the evidence that tests for chronic cerebrospinal venous insufficiency (CCSVI) are valid and reproducible, that CCSVI is associated with multiple sclerosis, and of the benefits and harms of endovascular therapy for multiple sclerosis.

Agency: Canadian Institutes of Health Research

Amount: \$99,300 CAD

Term: 2012

APPENDIX 2 – CPD Grants and Publications

Recipients: N Salbach

Project: Bringing Research Findings into Action to Improve Walking Recovery After Stroke

Agency: Early Researcher Award-Round 8, Ontario Ministry of Economic Development and Innovation

Amount: \$150,000 CAD

Term: 2012 April – 2018 March

Recipients: N Salbach, P Solomon, L Dolan, K O'Brien, C Worthington, L Baxter, G Blanchard, W Chegwiddden, A Casey, K Duke, S Eby, T Tran, J Wu

Project: Evaluating the uptake of a new evidence-informed e-resource module for rehabilitation professionals to enhance the care and treatment of people living with HIV and AIDS (PHAs).

Agency: Canadian Institutes of Health Research Knowledge to Action

Amount: \$195,258 CAD

Term: 2012 March – 2013 March

Recipients: M MacKay-Lyons, N Salbach, M Ploughman

Project: Enhancing health outcomes and well-being of stroke survivors through improved clinical application of cardiovascular fitness interventions: Development of an implementation trial of best practice recommendation

Agency: CIHR Meetings Grant competition, March 2012

Amount: \$20,000 CAD

Term: 2011 May – March 2013

Recipients: N Korner-Bitensky, A Menon, M Bayley, D Bourbonnais, J Desrosiers, C Dumoulin, P Duncan, J Eng, L Fellows, J Fung, J Jutai, A Kagan, F Kaizer, L Kloda, M Levin, R Martino, NE Mayo, S Page, CL Richards, A Rochette, N Salbach, R Teasell, A Thomas, S Wood-Dauphinee

Project: StrokeEngine: An interactive e-learning resource for moving evidence-based stroke rehabilitation into clinical practice – Continuation Project

Agency: Canadian Stroke Network

Amount: \$254,700 CAD

Term: 2010 April – March 2013

Recipients: N Salbach, J Clyde, D Brooks, J Cameron

Project: Evaluating the psychometric properties of the Evidence-based practice confidence (EPIC) scale among occupational therapists

Agency: Continuing Education Research and Development Award, Faculty of Medicine, University of Toronto

Amount: \$3,413 CAD

Term: 2011 July – 2012 June

Recipients: N Salbach, S Jaglal

Project: Evaluating test-retest reliability and construct validity of a new scale measuring self-efficacy to implement evidence-based practice among physiotherapists

Agency: University of Toronto Faculty of Medicine Dean's Fund Award

Amount: \$9,999 CAD

Term: 2007 July – 2012 June

APPENDIX 2 – CPD Grants and Publications

Recipients: Silver I, Sargeant J, Mann K, Holmboe E

Project: Performance feedback to inform self-assessment and guide practice improvement: Developing and testing a feedback facilitation model

Agency: Society for Academic CME Manning Award

Amount: \$100,000 USD

Term: 2011 – 2013

Recipients: Rosewall T, Butler A, Higgins J, Slapnicar E, Wiljer D

Project: The 8th Annual Toronto Radiation Medicine Conference; RTi3: Inquire, inspire & innovate

Agency: Canadian Institutes of Health Research (CIHR)

Amount: \$20,000 CAD

Term: July 2011-June 2012

Recipients: Wong BM, Goguen J, Rotteau L, McIntyre K, Kuper A, Shojania K

Project: Building Capacity for Quality: A Realist Evaluation of a Co-Learning Model for Resident Education and Faculty Development in Quality Improvement

Agency: University of Toronto, Department of Medicine Educational Scholarship & Research Grant

Amount: \$12,712 CAD

Term: 2013 Jan – 2013 Dec

Recipients: Stroud L, Wong BM, Coffey M, Papia G, Nousiainen M, Atkinson A, McDonald-Blumer H, Matlow A, Levinson W

Project: Teaching medical error disclosure skills to postgraduate internal medicine, surgery and pediatrics trainees

Agency: Royal College of Physicians and Surgeons of Canada (The). AMS/CanMEDS Research and Development Grant

Amount: \$24,804 CAD

Term: 2012 Jul – 2014 Dec

Recipients: Matlow A, Borschel T, Wong BM, McDonald-Blumer H

Project: Integrating a focus on quality of care into a longitudinal ambulatory care rotation

Agency: University of Toronto. Education Development Fund for Innovation in Education

Amount: \$10,275 CAD

Term: 2012 Jul – 2013 Jun

Recipients: Grimshaw JM, Edwards AL, Ivers N, Lavis J, Manns B, Moher D, Paprica A, Ramsay T, Sargious P, Shojania K, Straus S, Tonelli M, Tricco A, Yu C

Project: Seeing the forests and the trees: Innovative approaches to exploring heterogeneity in systematic reviews of complex knowledge translation interventions to enhance policy decision making.

Agency: Canadian Institutes of Health Research (CIHR), Operating Grant, 275038

Amount: \$200,634 CAD 2012 Jul – 2013 Jun: \$63,358 CAD (prorated)

Term: 2012-2013

APPENDIX 2 – CPD Grants and Publications

Recipients: Manns BJ, Edwards AL, Sargious P, Allan G, Braun T, Grimshaw J, Hemmelgarn B, Ivers N, Johnson J, Long S, McBrien K, Naugler C, Straus S, Tonelli M, Tricco A, Yu C

Project: Translating evidence to improvements in care and outcomes for people with diabetes

Agency: Canadian Institutes of Health Research (CIHR), Partnerships for Health Services Improvement competition, 276737

Amount: \$24,995 CAD 2012 Jul - 2013 Jun: \$11,536 CAD (prorated)

Term: 2012-2013

Awarded but Declined

Recipients: Stroud L, Wong BM, Coffey M, Papia G, Nousiainen M, Atkinson A, McDonald-Blumer H, Matlow A

Project: Teaching medical error disclosure skills to postgraduate internal medicine, surgery and pediatrics trainees

Agency: University of Toronto. Education Development Fund for Innovation in Education.

Amount: \$15,846 CAD

Term: 2012 Jul - 2013 Jun

Non Peer-Reviewed

Recipients: Stewart M and Bhattacharyya O

Lead on \$375,000 subgrant entitled: Seamless Care to Optimize the Patient Experience

Project: Primary Health Care Program

Agency: Ontario Ministry of Health and Long-Term Care

Amount: \$3,720,000 CAD

Term: 2013 Apr - 2016 Mar

Recipients: Bhattacharyya, O

Project: Innovations in Maternal and Child Care, Malaria and TB: Analysis of the Center for Health Market Innovations Database

Agency: Results for Development Institute Inc.

Amount: \$89,811 USD

Term: 2012 Dec - 2013 Jun

Recipients: Bhattacharyya, O

Project: Reported Outcomes Strategy and Performance Measurement: Analysis of the Center for Health Market Innovations Database

Agency: Results for Development Institute Inc.

Amount: \$129,996 USD

Term: 2012 Jan - 2012 Dec

Recipients: Kitto S, Reeves S

Project: Evaluation of Future Learning Environments: How Space Impacts Learning

Agency: Karolinska Institutet

Amount: \$35,000 AUD

Term: 2011-2013

APPENDIX 2 – CPD Grants and Publications

Recipients: N Salbach

Project: Stroke teams' adherence to evidence-informed practice recommendations:

A cluster randomized controlled trial. Lead, analysis of data from the Stroke Canada Optimization of Rehabilitation by Evidence-Implementation Trial (SCORE-IT).

Agency: Team Optimize grant, Toronto Rehabilitation Institute–University Health Network

Amount: \$10,000 CAD

Term: 2012 March –

Combined CEPD Research Funding: \$19M+ CAD*

*Total of all Peer-Reviewed and Non Peer-Reviewed grants converted to CAD dollars.

Rice Publications

Sherwin NH, McKeown M., Evans M., Bhattacharyya O. (2013) The waiting room “wait”: from annoyance to opportunity. *Canadian Family Physician*. 2013 May. Vol. 59, Issue 5, 479–481. PMID: 23673581

Chatterjee A, Bhattacharyya O, Persaud N. How can Canadian guidelines recommendations be tested? *Canadian Medical Association Journal*. 2013 April. Vol. 185, Issue 6, 465–467. doi: 10.1503/cmaj.121830. Epub 2013 Mar 4. PMID: 23460631

Booth GL, Bishara P, Lipscombe LL, Shah BR, Feig DS, Bhattacharyya O, Bierman AS. Universal Drug Coverage and Socioeconomic Disparities in Major Diabetes Outcomes. *Diabetes Care*. 2012 Nov. Vol. 35, Issue 11, 2257–2264. doi: 10.2337/dc12-0364. Epub 2012 Aug 13. PMID: 22891257

Reeves S, Perrier L, Goldman J, Freeth D, Zwarenstein D. (2013). Interprofessional education: Effects on professional practice and healthcare outcomes (update). *Cochrane Database of Systematic Reviews*. Mar 28;3:CD002213. doi: 10.1002/14651858.CD002213.pub3.

Suter E, Goldman J, Martimianakis T, Chatalalsingh C, DeMatteo D, Reeves S. (2013). The use of systems and organizational theories in the interprofessional field: Findings from a scoping review. *Journal of Interprofessional Care*, 2013 Jan. Vol. 27, Issue 1, 57–64. doi: 10.3109/13561820.2012.739670

Boulet LP, Hernandez P, Devlin H, Freeman MA, Gupta S. (In Press) Asthma and COPD Guideline Implementation: Lessons Learned On Recruitment of Primary Care Physicians to a Knowledge Translation Study. *Canadian Respiratory Journal*.

Boulet L, Bourbeau J, Skomro R, Gupta S. (In Press) Major Care Gaps in Asthma, Sleep and COPD: A Road Map for Knowledge Translation. *Canadian Respiratory Journal*.

Gupta S, Licskai C, Van Dam A, Boulet LP. (In Press) Introducing The Canadian Thoracic Society Framework for Guideline Dissemination and Implementation, with Concurrent Evaluation. *Canadian Respiratory Journal*.

Gupta S, Camp P. (In Press) Introducing The Canadian Respiratory Journal's Knowledge Translation Issue. *Canadian Respiratory Journal*.

Wu R, Appel L, Morra D, Lo V, Kitto S, Quan S. (In Press) Short Message Service or disService: Issues with text messaging in a complex medical environment. *International Journal of Medical Informatics*.

Reeves S, Paradis E, Leslie M, Aboumatar H.J, Chesluk B, Clark P, Courtenay M, Franck L, Lamb G, Lyndon A, Mesman J, Puntillo K, Schmitt M, Van Soeren M, Wachter R, Zwarenstein M, Gropper M, Kitto S. (In Press) Exploring the nature of interprofessional collaboration and family member involvement in an intensive care context. *Journal of Interprofessional Care*.

Choy I, Kitto S, Adu-Aryee N, Okrainec A. (2013) Barriers to the uptake of Laparoscopic surgery at a Regional Hospital in a Lower-Middle Income Country. *Surgical Endoscopy*, 2013 November. Vol. 27, Issue 11, 4009–4015. doi: 10.1007/s00464-013-3019-z

Willems A, Waxman B, Bacon A, Smith JA, Kitto S. (2013) Interprofessional non-technical skills for Surgeons in Disaster Response: A literature review, *Journal of Interprofessional Care*. Published Online June 10, 2013. Published September 2013, Vol. 27, Issue 5, 380–386 doi: 10.3109/13561820.2013.791670

APPENDIX 2 – CPD Grants and Publications

- Reeves S, Peller J, Goldman J, Kitto S. (2013) Ethnography in Qualitative Educational Research: AMEE Guide No. 80. An International Association for Medical Education (AMEE) Publication. *Medical Teacher Journal*, Early Online June 28. Published 2013 August. Vol. 35, Issue 8, e1365-79. doi: 10.3109/0142159X.2013.804977
- Reeves S, Kitto S, Masiello I. (2013) Editorial: Crew resource management: How well does it translate to an interprofessional health care context? *Journal of Interprofessional Care*, Vol. 27, Issue 3, 207-209. doi: 10.3109/13561820.2012.748722
- Kitto S, Schmitt M, Olson C. (2012) Call for Papers: Workplace Learning in Continuing Interprofessional Education. *Journal of Interprofessional Care*, 26 (4), 259-260. doi: 10.3109/13561820.2012.681251
- Kitto S, Bell M, Goldman J, Peller J, Silver I, Sargeant J, Reeves S. (2013) (Mis)perceptions of continuing education: Insights from knowledge translation, quality improvement and patient safety leaders. *Journal of Continuing Education in the Health Professions*, published March 2013, Vol. 33, Issue 2, 81-88. doi: 10.1002/chp.21169
- Kitto S, Bell M, Peller J, Sargeant J, Etchells E, Reeves S, Silver I. (2013) Positioning continuing education: Boundaries and intersections between domains continuing education, knowledge translation, patient safety, and quality improvement. *Advances in Health Sciences Education: Theory and Practice*, published March 2013, Vol. 18, Issue 1, 141-56. doi: 10.007/s10459-011-9340-1
- Willems A, Waxman B, Bacon A, Smith JA, Peller J, Kitto S. (2013) Interprofessional Non-technical Skills for Surgeons in Disaster Response: The Qualitative Study of the Australian Perspective, *Journal of Interprofessional Care*, published March 2013, Vol. 27 Issue 2, 177-183. doi: 10.3109/13561820.2012.706337
- Higgins J, Bryant M, Villanueva E, Kitto S. (2013). Managing and avoiding delay in operating theatres: A qualitative, observational study. *Journal of Evaluation in Clinical Practice*, Published February 2013, Vol. 19, Issue 1, 162-6. doi: 10.1111/j.13652753.2011.01787.x
- Jin CJ, Martimianakis MA, Kitto S, Moulton CA. (2012) Pressures to “Measure Up” in Surgery: Managing Your Image and Managing Your Patient, *Annals of Surgery*, published December 2012, Vol. 256, Issue 6, 989-993. doi: 10.1097/SLA.0b013e3182583135
- Ahmed N, Gotlib Conn L, Chiu M, Kurabi B, Qureshi A, Nathens A, Kitto S. (2012) Career satisfaction among general surgeons in Canada: A qualitative study of enablers and barriers to improve recruitment and retention in general surgery. *Academic Medicine*, 2012 Nov. Vol. 87, No. 11, 1-6. doi:10.1097/ACM.0b013e31826c81b6
- Campbell RM, Hodges B, Fisman D, Klei A.G, Kitto S. (2012) A Comparison of Health Access between Permanent Residents, Undocumented Immigrants and Refugee Claimants in Toronto, Canada. *Journal of Immigrant and Minority Health*, published online 03 November 2012. doi: 10.1007/s10903-012-9740-1
- Jeffs L, Kitto S, Merkley J, Lyons RF, Bell CM. (2012) Safety Threats and Opportunities to Improve Interfacility Care Transitions: Insights from Patients and Family Members, *Dove Press Journal: Patient Preference and Adherence*, published October 5 2012, Vol. 2012:6, 711-718. doi: <http://dx.doi.org/10.2147/PPA.S36797>
- Hanna E, Soren B, Telner D, MacNeill H, Lowe M, Reeves S. (In Press) Flying blind: The experience of online interprofessional facilitation. *Journal of Interprofessional Care*. Posted Online September 24, 2012.
- Arweiler D, Millette B, Maniate JM, Reeves S, Hodges B, Parker S, Martimianakis T. (2013) Fostering leadership and innovation capacities for change in medical education and medical practice. 2013; *MedEdWorld Publish*, March 8, 2013
- Yatham LN, Kennedy SH, Parikh SV, Schaffer A, Beaulieu S, Alda M, O'Donovan C, Macqueen G, McIntyre RS, Sharma V, Ravindran A, Young LT, Milev R, Bond DJ, Frey BN, Goldstein BI. (2013) The evolution of CANMAT Bipolar Disorder Guidelines: Past, present, and future. *Bipolar Disorders*, 2013 Feb. Vol. 15, Issue 1, 58-60. doi: 10.1111/bdi.12038
- Michalak EE, Hole R, Livingston JD, Murray G, Parikh SV, Lapsley S, McBride S. (2012) Improving care and wellness in bipolar disorder: Origins, evolution and future directions of a collaborative knowledge exchange network. *International Journal Mental Health Systems*. 2012 Sep. Vol. 6, Issue 1, 16. doi: 10.1186/1752-4458-6-16
- Perrier L, Persaud N, Ko A, Kastner M, Grimshaw J, McKibbon KA, Straus SE. (2013) Development of two shortened systematic review formats for clinicians. *Implementation Science*. 2013 June. Vol. 14, Issue 8, 68. doi: 10.1186/1748-5908-8-68

APPENDIX 2 – CPD Grants and Publications

Tricco A, Cogo E, Ashoor H, Perrier L, McKibbin A, Grimshaw J, Straus SE. (2013) Sustainability of knowledge translation interventions in healthcare decision-making: Protocol for a scoping review. *BMJ Open*. 2013 May. Vol. 3, Issue 5: e002970. doi: 10.1136/bmjopen-2013-002970

Stelfox HT, Perrier L, Straus SE, Ghali WA, Zygun D, Boiteau P, Zuege DJ. Identifying intensive care unit discharge planning tools: Protocol for a scoping review. *BMJ Open* 2013 Apr. Vol. 3, Issue 4. pii: e002653. doi: 10.1136/bmjopen-2013-002653.

Munce SE, Perrier L, Tricco AC, Straus SE, Fehlings MG, Kastner M, Jang E, Webster F, Jaglal SB. (2013) Impact of quality improvement strategies on the quality of life and well-being of individuals with spinal cord injury: A systematic review protocol. *Systematic Reviews*. 2013 Feb. Vol. 2, 14. doi: 10.1186/2046-4053-2-14

Al-Ansary LA, Tricco AC, Adi Y, Bawazeer G, Perrier L, Al-Ghonaim M, AlYousefi N, Tashkandi M, Straus SE. (2013) A systematic review of recent clinical practice guidelines on the diagnosis, assessment and management of hypertension. *PLoS One*. Vol. 8, Issue 1: e53744. doi: 10.1371/journal.pone.0053744

Gotlib Conn L, Rotstein OD, Greco E, Tricco AC, Perrier L, Soobiah C, Moloney T. (2012) Enhanced recovery after vascular surgery: Protocol for a systematic review. *Systematic Review*. 2012 Nov. Vol. 1, 52. doi: 10.1186/2046-4053-1-52

Murthy L, Shepperd S, Clarke MJ, Garner SE, Lavis JN, Perrier L, Roberts NW, Straus SE. (2012) Interventions to improve the use of systematic reviews in decision-making by health system managers, policy makers and clinicians. *The Cochrane Database of Systematic Reviews*. 2012 Sep; 9:CD009401. doi: 10.1002/14651858.CD009401.pub2

Kastner M, Tricco AC, Soobiah C, Lillie E, Perrier L, Horsley T, Welch V, Cogo E, Antony J, Straus SE. (2012) What is the most appropriate knowledge synthesis method to conduct a review? Protocol for a scoping review. *BMC Medical Research Methodology*. 2012 Aug; 12:114. doi: 10.1186/1471-2288-12-114

Wu RC, Tran K, Lo V, O'Leary KJ, Morra D, Quan SD, Perrier L. (2012) Effects of clinical communication interventions in hospitals: A systematic review of information and communication technology adoptions for improved communication between clinicians. *International Journal of Medical Informatics*. 2012 Nov. Vol. 81, Issue 11, 723-732. doi: 10.1016/j.ijmedinf.2012.05.014

Zaher E, Ratnapalan S. (2012) Practice-based small group learning programs: Systematic review. *Canadian Family Physician*, 2012 June. Vol. 58, Issue 6, 637-642, e310-6

Douglas L, Cheskes S, Feldman M, Ratnapalan S. (2012) Paramedics' experiences with death notification: A qualitative study. *Journal of Paramedic Practice*. 2012 Sep. Vol. 4, Issue 9, 533-539

Menard L, Ratnapalan S. (2013) Teaching Moment: Reflection in medicine: models and application. *Canadian Family Physician*. 2013 Jan. Vol. 59, Issue 1, 105-107, e57-9

Douglas L, Cheskes S, Feldman M, Ratnapalan S. (2013) Death notification education for paramedics: Past, present and future directions. *Journal of Paramedic Practice*, 2013 Mar. Vol. 5, Issue 3, 152-159

Sibley KM, Straus SE, Inness EL, Salbach NM, Jaglal SB. (2013) Clinical balance assessment: Perceptions of commonly-used standardized measures and current practices among physiotherapists in Ontario, Canada. *Implementation Science*, 2013 March; 8:33. doi: 10.1186/1748-5908-8-33

Salbach NM, Howe J, Brunton K, Salisbury K, Bodiam L. Partnering to increase access to community exercise programs for people with stroke, acquired brain injury or multiple sclerosis. *Journal of Physical Activity and Health*, 2013 May. [Epub ahead of print] PMID: 23676952.

Salbach NM, O'Brien K, Evans C, Yoshida K. (2013) Dissemination of student research in a Canadian Masters of Science in Physical Therapy programme. *Physiotherapy Canada*. 2013 May. Vol. 65, Issue 2, 154-157. doi: 10.3138/ptc.2012-18

Jaglal SB, Haroun VA, Salbach NM, Hawker G, Voth J, Lou W, Kontos P, Cameron J, Cockerill R, Bereket T. (2013) Increasing access to chronic disease self-management programs in rural and remote communities using telehealth. *Telemedicine Journal and e-Health: The official journal of the American Telemedicine Association*. 2013 June. Vol. 19, Issue 6, 467-473. doi: 10.1089/tmj.2012.0197

Salbach NM, Jaglal SB, Williams JI. (2013) Reliability and validity of the evidence-based practice confidence (EPIC) scale. *Journal of Continuing Education in the Health Professions*. Vol. 33, Issue 1, 33-40. doi: 10.1002/chp.21164

APPENDIX 2 – CPD Grants and Publications

Spencer R, Fee T, Hall E, Rogers A, Sluzar M, Law D, Weitzner E, Wheeler V, Salbach NM, Cooper N. Development of the screen for limitations in mobility (SLIM): A self-report tool for surgical oncology patients. *Journal of Student Physical Therapy Research* 2012; Vol. 5, Issue 2, 12-24.

Michalski A, Glazebrook CM, Martin AJ, Wong WW, Kim AJ, Moody KD, Salbach NM, Steinnagel B, Andrysek J, Torres-Moreno R, Zabjek KF. Assessment of the postural control strategies used to play two Wii Fit™ videogames. *Gait and Posture*. 2012 July. Vol.36, Issue 3, 449-453. doi: 10.1016/j.gaitpost.2012.04.005

Kamath T, Pfeifer M, Banerjee-Guenette P, Hunter T, Ito J, Salbach NM, Wright V, Levac D. Reliability of the Motor Learning Strategy Rating Instrument (MLSRI) for Children and Youth with Acquired Brain Injury (ABI). *Physical and Occupational Therapy in Pediatrics*. 2012 Aug. Vol. 32, Issue 3, 288-305. doi: 10.3109/01942638.2012.672551

Petzold A, Korner-Bitensky N, Salbach NM, Ahmed S, Menon A, Ogourtsova T. (2012) Increasing knowledge of best practices in occupational therapists treating post-stroke unilateral spatial neglect: Results of a knowledge-translation intervention study. *Journal of Rehabilitation Medicine*. 2012 Feb. Vol. 44, Issue 2, 118-124. doi: 10.2340/16501977-0910

Andrysek J, Klejman S, Steinnagel B, Torres-Moreno R, Zabjek K, Salbach NM, Moody KD. (2012) Preliminary evaluation of a commercially available videogame system as an adjunct therapeutic intervention for improving balance among children and adolescents with lower limb amputations. *Archives of Physical Medicine and Rehabilitation*. 2012 Feb. Vol. 93, Issue 2, 358-366. doi: 10.1016/j.apmr.2011.08.031

Kitto S, Sargeant J, Reeves S, Silver I. (2012). Towards a sociology of knowledge translation: The importance of being disinterested in knowledge translation. *Advances in Health Sciences*

Education: Theory and Practice. 2012 May. Vol. 17, Issue 2, 289-299. doi: 10.1007/s10459-011-9303-6

Shojania KG, Silver I, Levinson W. (2012) Continuing medical education and quality improvement: A match made in heaven? *Annals of Internal Medicine*. 2012 Feb. Vol. 156, Issue 4, 305-308. doi: 10.7326/0003-4819-156-4-201202210-00008

Silver I. (2013) Letter in response to Mitchell et al. 'Collective amnesia: Reversing the global epidemic of addiction library closures'. *Addiction*. 2013 Feb. Vol. 108, Issue 2, 437. doi: 10.1111/add.12027

Urowitz S, Smith K, Alkazaz N, Apatu E, Quartey NK, Wiljer D. (2012) Patient Accessible Electronic Health Records for the Chronically Ill: A review of the literature. *Journal of Hospital Administration*. 2012 Dec. Vol. 1 No.2, 64-72. doi: 10.5430/jha.v1n2p64

Urowitz S, Wiljer D, Dupak K, Kuehner Z, Leonard K, Lovrics E, Picton P, Seto E, Cafazzo JA. (2012) Improving diabetes management with a patient portal: A qualitative study of diabetes self-management portal. *Journal of Medical Internet Research*. 2012 Nov. Vol.14, Issue 6:e158. doi: 10.2196/jmir.2265

Bender J, Wiljer D, Matthew A, Cancil MC, Legere L, Loblaw A, Jewett M. (2012) Fostering partnerships in survivorship care: Report of the 2011 Canadian genitourinary cancers survivorship conference. *Journal of Cancer Survivorship*. 2012 Sept. Vol. 6, Issue 3, 296-304. doi: 10.1007/s11764-012-0220-3

Bender J, Wiljer D, To M, Bedard P, Chung P, Jewett M, Matthew A, Moore M, Warde P, Gospodarowicz M. (2012) Testicular cancer survivors' supportive care needs and use of online support: A cross-sectional survey. *Supportive Care in Cancer*. 2012 Nov. Vol. 20, Issue 11, 2737-2746. doi: 10.1007/s00520-012-1395-x

Apatu E, Alperin M, Miner KR, Wiljer D. (2013) A drive through Web 2.0: An exploration of driving safety promotion on Facebook™. *Health Promotion Practice*. 2013 Jan. Vol.14, Issue 1, 88-95. doi: 10.1177/1524839911405845

Wiljer D, Walton T, Gilbert G, Boucher A, Ellis PE, Schiff S, Sellick SM, Simunovic M, Kennedy E, Urowitz S. (2013) Understanding the needs of colorectal cancer patients during the pre-diagnosis phase. *Journal of Cancer Education*. 2013 May. Epub ahead of print.

Wiljer D, Urowitz S, Jones J, Kornblum A, Secord S, Catton P. (2013) Exploring the use of the survivorship consult in providing survivorship care. *Supportive Care in Cancer*. 2013 Aug. Vol. 21, Issue 8, 2117-2124. doi: 10.1007/s00520-013-1760-4

Stroud L, Wong BM, Hollenberg E, Levinson W. (2013) Teaching Medical Error Disclosure to Physicians-in-Training: A scoping review. *Academic Medicine*. 2013 Jun. Vol. 88, Issue 6, 884-892. Study design, data abstraction and analysis, writing of manuscript.

Wong BM, Kuper A, Hollenberg E, Etchells EE, Levinson W, Shojania KG. (In Press) Sustaining Quality Improvement and Patient Safety Training in Graduate Medical Education: Lessons from Social Theory. *Academic Medicine*. Study design, data abstraction and analysis, writing of manuscript – accepted March 2013.

APPENDIX 2 – CPD Grants and Publications

Squires J, Presseau J, Francis J, Bond CM, Fraser C, Patey A, Porteous T, Vachon B, Hillmer M, Paprica A, Tonelli M, Yu C, Grimshaw J. Self-Formulated Conditional Plans for Changing Health Behaviour [Protocol]. *Cochrane Database of Systematic Reviews*. Submitted.

Jones H, Berard LD, MacNeill G, Whitham D, Yu C. Self-Management Education. *Canadian Journal of Diabetes*. 37 (2013) S26eS30. Published.

Tricco AC, Antony J, Soobiah C, Hemmelgarn B, Moher D, Hutton B, Yu C, Majumdar SR, Straus SE. (2013) Safety, effectiveness, and cost of dipeptidyl peptidase-4 inhibitors versus intermediate acting insulin for type 2 diabetes: Protocol for a systematic review and network meta-analysis. *Systematic Reviews*. 2013 June. Vol.2, Issue 1, 47. doi: 10.1186/2046-4053-2-47

Peer-Reviewed Report

Headrick LA, Baron R, Mayer D, Pingleton S, Sklar D, Skeff K, Varkey P, Wong BM, Davis N, Englander R, Davis D. Teaching for Quality: Integrating Quality Improvement and Patient Safety across the Continuum of Medical Education. A report of AAMC's Best Practice for Better Campaign and Integrating Quality Initiative. January 2013, pp. 1-40.

2011-12

Rice Grants

Recipients: Goldman J.

Project: Frederick Banting and Charles Best Canada Graduate Scholarship Doctoral Award

Agency: Canadian Institutes of Health Research

Amount: \$35,000 per year

Term: 2011-2014

Recipients: Aaron S (Principal Investigator) and Gupta S (Principal Site Investigator)

Project: Strategies to Improve Diagnosis and Treatment of Asthma in Canadians

Agency: Canadian Institutes of Health Research (CIHR), Operating Grant (Health Services Committee)

Amount: \$1,162,410

Term: 2011 July – 2016 June

Recipients: Gupta S (Co-Principal Investigator)

Project: EAAPS - The Electronic Asthma Action Plan System for Implementation in Primary Care

Agency: Canadian Institutes of Health Research (CIHR), Knowledge-to-Action Grant

Amount: \$198,302

Term: 2011 Apr – 2013 Mar

Recipients: Garvey N, Liskai C, Cafazzo J (Principal Investigators), Gupta S (Co-Investigator)

Project: Consumer Access to Personal Health Information for Asthma Self-Management

Agency: Canada Health Infoway

Amount: \$1,000,000

Term: 2012 Jun – 2014 May

APPENDIX 2 – CPD Grants and Publications

Recipients: Muller M, Mckernan P, Hughes B, Kitto S (Principal Investigator), Straus S, Siddique N, Leung E.

Project: Hand Hygiene and Knowledge Translation: A merger of hand hygiene practices between 2 Bond and 7 CC North

Agency: Quality Innovation Fund, St. Michael's Hospital

Amount: \$16,750

Term: 2011-2012

Recipients: Zakrison TA, Nathens A, Kitto S (Co-Investigator)

Project: Improving Communication and Patient Safety in Trauma Patients Admitted to the Intensive Care

Unit: A Pilot Feasibility Study

Agency: Physicians' Services Incorporated Grant

Amount: \$12,197

Term: 2011-201

Recipients: Zakrison T, Nathens A, Leung E, Kitto S (Co-Investigator), McFarlan A, McCredie V, Campos, ID, Baker A, Barratt L, Hicks C.

Project: Making Handover Safer for our Trauma Patients: A grassroots approach to quality

Agency: St. Michael's Foundation Quality Innovation Fund

Amount: \$18,921.40

Term: 2011-2012

Recipients: Kitto S (Co-Principal Investigator), Bell M, Reeves S, Sargeant J, Etchells E, Silver I.

Project: Improving Patient Outcomes: Mapping practice boundaries and intersections between the domains of Continuing Education, Knowledge Translation, Patient Safety and Quality Improvement

Agency: Association of Faculties of Medicine of Canada

Amount: \$20,000

Term: 2011-2012

Recipients: Reeves S, Leslie K, Légaré F, Silver I, Rosenfield J, Hodges B, Curran V, Kitto S (Collaborator), Armson H.

Project: A Pilot Project to Explore the Determinants of Knowledge Use in a Medical Education Context

Agency: KT Canada Seed Funding Award Knowledge Translation Canada

Amount: \$30,000

Term: 2011-2012

Recipients: Reeves S, Boet S, Sharma S, Kitto S (Co-Investigator)

Project: Strengthening the Sociological Fidelity of Interprofessional Team-based Simulation Scenarios: An empirical study

Agency: Continuing Education Research Funds, Continuing Education and Professional Development, Faculty of Medicine, University of Toronto

Amount: \$4,995

Term: 2011-2012

APPENDIX 2 – CPD Grants and Publications

Recipients: Moulton CA, Murnaghan ML, Martimianakis T, Kitto S (Collaborator)

Project: Pressures on surgeons to ‘measure up’ and their effects on surgical judgment.

Agency: Physicians’ Services Foundation

Amount: \$99,043

Term: 2011-2013

Recipients: Reeves S, Kitto S (Co-Principal Investigator), Provonost P, Grouper M, Aboumatar H, Wachter B.

Project: Understanding the nature of interprofessional teamwork in intensive care units: a multi-institutional ethnographic study

Agency: Moore Foundation, California

Amount: \$2,101,828

Term: 2012-2015

Recipients: Straus SE, Beyene J, Goldsmith C, Hemmelgarn B, Juurlink D, Majumdar S, Mamdani M, Perrier L, Tricco A.

Project: National Knowledge Synthesis Research Unit

Agency: Canadian Institutes of Health Research

Amount: \$950,000

Term: 2011

Recipients: Tricco AC, Straus SE, Kastner M, Perrier L, Welch V.

Project: Scoping Review: Knowledge synthesis methods across multi-disciplinary fields

Agency: Canadian Institutes of Health Research

Amount: \$50,000

Term: 2011

Recipients: Webster F, Zhong T, Pusic A, Jadad A, Perrier L, Ginsburg O.

Project: Patient-reported outcomes in international surgical reconstruction missions

Agency: Canadian Institutes of Health Research Planning Grant

Amount: \$25,000

Term: 2011-2012

Recipients: Douglas L, Cheskes S, Feldman M, Ratnapalan S (Senior Responsible Investigator)

Project: Paramedics attitude towards death notification in the field

Agency: Paramedics Research Consortium

Amount: \$14,074

Term: 2011-2013

Recipients: Ravitz P, Leszcz M; Co-investigators: Lancee W, Maunder R; Collaborators: Rawkins S, Fefergrad M.

Project: Enhancing Supervision of Psychotherapy (ESP)

Agency: University of Toronto, Faculty of Medicine, Education Development Fund; matched with funds from the University of Toronto, Mt. Sinai Hospital, & Sunnybrook Health Science Centre Departments of Psychiatry

Amount: \$20,000

Term: 2010-2012

APPENDIX 2 – CPD Grants and Publications

Recipients: Tasca G, Balfour L, Gandhi J, Hunsley J, Joyce A, Kinley J, Koszycki D, Leszcz M, Lybanon-Diagle V, Mercer D, Ogrodniczuk J, Ravitz P, Ritchie K, Sylvestre J, Talbot J.

Project: Scanning the way ahead: Developing a shared vision of practice-based psychotherapy research in Canada

Agency: Planning / Meeting Grant – Canadian Institutes of Health Research

Amount: \$24,410

Term: 2012-2013

Recipients: Worthington C (PA), Mangion M, O'Brien K, Rueda S, Salbach N (CoA), Solomon P.

Project: Getting to work: Development of an evidence-informed educational program for professionals to promote labour force participation for people living with HIV in Canada

Agency: Canadian Institutes of Health Research Knowledge to Action

Amount: \$126,593

Term: 2010 May – 2012 Apr

Recipients: Korner-Bitensky N (PL/PA), Menon A (co-PL), Bayley M, Bourbonnais D, Desrosiers J, Dumoulin C, Duncan P, Eng J, Fellows L, Fung J, Jutai J, Kagan A (HQP), Kaizer F (HQP), Kloda L (HQP), Levin M, Martino R, Mayo NE, Page S, Richards CL, Rochette A, Salbach N (CoA), Teasell R, Thomas A (HQP), Wood-Dauphinee S.

Project: StrokEngine: an interactive e-learning resource for moving evidence-based stroke rehabilitation into clinical practice – Continuation Project

Agency: Canadian Stroke Network

Amount: \$254,700

Term: 2010 Apr – Mar 2013

Recipients: Salbach N (PA), Clyde J, Brooks D, Cameron J.

Project: Evaluating the psychometric properties of the Evidence-based practice confidence (EPIC) scale among occupational therapists Agency: Continuing Education Research and Development Award, Faculty of Medicine, University of Toronto

Amount: \$3,413

Term: 2011 July – 2012 June

Recipients: Salbach N (PA)

Project: Contextual factors influencing rehabilitation providers' use of standardized measures of walking capacity post-stroke across the care continuum

Agency: Connaught New Researcher Award, Faculty of Medicine, University of Toronto

Amount: \$10,000

Term: 2011 May – 2013 Apr

Recipients: Salbach N (CoPA), Solomon P (CoPA), Dolan L (Knowledge User CoPA), O'Brien K, Worthington C, Baxter L, Blanchard G, Chegwidan W, Casey A, Duke K, Eby S, Tran T, Wu J.

Project: Evaluating the uptake of a new evidence-informed e-resource module for rehabilitation professionals to enhance the care and treatment of people living with HIV and AIDS (PHAs)

Agency: Canadian Institutes of Health Research Knowledge to Action

Amount: \$195,258

Term: 2011 July – 2013 June

APPENDIX 2 – CPD Grants and Publications

Recipients: Salbach N (PA)

Project: Lead, analysis of data from the Stroke Canada Optimization of Rehabilitation by Evidence – Implementation Trial (SCORE-IT) to determine stroke teams' adherence to evidence-informed practice recommendations: a cluster, randomized controlled trial

Agency: Team Optimize, Toronto Rehabilitation Institute

Amount: \$10,000

Term: 2012 Mar

Recipients: MacKay-Lyons M (PA), Salbach N (CoA), Ploughman M.

Project: Improving Quality of Care for Canadians at High Risk for Fractures: A Knowledge to Action Approach

Agency: CIHR Meetings Grant competition, March 2012

Amount: \$25,000

Term: 2012 Mar – 2013

Recipients: Salbach N (PA)

Project: Bringing research findings into action to improve walking recovery after stroke

Agency: Early Researcher Award-Round 8, Ontario Ministry of Economic Development and Innovation

Amount: \$150,000

Term: 2012 Apr – 2016 Mar

Recipients: Wiljer D, Catton P, Jaffray D, Harnett N, Montgomery F, Gospodarowicz M.

Project: Quality Care: Innovating with Confidence for Tomorrow's Radiation Therapy

Agency: Varian Inc.

Amount: \$1,000,000

Term: 2010 – 2014

Recipients: Wiljer D, Catton P, Jaffray D, Harnett N, Montgomery F, Gospodarowicz M.

Project: Image-guided radiation therapy education proposal: Adapt, engage, and connect

Agency: Elekta Inc.

Amount: \$1,900,000

Term: 2011– 2015

Recipients: Principal Investigator: Slaughter, G; Collaborators: Chenkin J, Cheung M, Wong BM (Co-Investigator), Stroud L.

Project: Implementing a Bedside Ultrasound Curriculum for Procedures into an Internal Medicine Residency Program

Agency: University of Toronto, Faculty of Medicine, Education Development Fund for Innovation in Education

Amount: \$19,984

Term: 2011 Jun - 2012 Jul

Recipients: Principal Investigator: Matlow A. Collaborators: Borschel T, Wong BM (Co-Investigator), McDonald-Blumer H.

Project: Integrating a focus on quality of care into a longitudinal ambulatory care rotation

Agency: University of Toronto, Faculty of Medicine, Education Development Fund for Innovation in Education

Amount: \$10,275

Term: 2012 Jul - 2013 Jun

APPENDIX 2 – CPD Grants and Publications

Recipients: Principal Investigators: Stroud L and Wong, BM. Collaborators: Coffey M, Papia G, Nousiainen M, Atkinson A, McDonald-Blumer H, Matlow A, Levinson W.

Project: Teaching medical error disclosure skills to postgraduate internal medicine, surgery and pediatrics trainees

Agency: Royal College of Physicians and Surgeons of Canada (The). AMS/CanMEDS Research and Development Grant

Amount: \$24,803.50

Term: 2012 Jul - 2014 Apr

Recipients: Principal Investigator: Yu CHY; Collaborators: Straus S, Laupacis A, Shah B, Bhattacharyya O, Evans M.

Project: Effect of a web-based self-management intervention for patients with type 2 diabetes on psychological and clinical outcomes

Agency: Canadian Institutes of Health Research (CIHR). 193133.

Amount: \$178,550

Term: 2009 Mar – current

Recipients: Yu, CHY (Co-Principal Investigator)

Project: Evaluation of a strategy to improve cardiovascular disease screening and treatment for people with diabetes

Agency: Canadian Institutes of Health Research (CIHR)

Amount: \$199,809

Term: 2009 Aug – current

Recipients: Yu, CHY (Principal Investigator)

Project: The ABCs of DKA: Development, testing and evaluation of an interactive computer simulation of DKA management

Agency: Banting and Best Diabetes Centre (BBDC)

Amount: \$20,000

Term: 2011 July – current

Rice Publications

Smink DS, Peyre SE, Soybel DI, Tavakkolizadeh A, Vernon AH, Anastakis DJ. (2012). Utilization of a cognitive task analysis for laparoscopic appendectomy to identify differentiated intraoperative teaching objectives. *American Journal of Surgery*, 203(4), 540-545.

Goldman J, Abramovich IA, Sadovy B, Murphy KJ, Rice K, Reeves S. (2011). The development and implementation of an electronic departmental note in a colposcopy clinic. *Computers, Informatics, Nursing: CIN*, Oct 19.

Boet S, Sharma S, Goldman J, Rzeves S. (2012). Medical education research: An overview of methodologies, designs and methods. *Canadian Journal of Anesthesia*.

Reeves, S, Kenaszchuk, C, Sawatzky-Girling, B, Goldman J. (2012). Understanding the “impact” of the impact factor. *Journal of Interprofessional Care*, 26(1), 2-3.

Gupta S, Faughnan ME, Tomlinson G, Bayoumi AM. (2011). A Framework for Applying Unfamiliar Trial Designs in Studies of Rare Diseases. *Journal of Clinical Epidemiology*, 64(10):1085-94.

APPENDIX 2 – CPD Grants and Publications

Gupta S, Wan FT, Chignell MH, Straus SE. (2011). Wikibuild – A New Online Collaboration Process for Multi-Stakeholder Tool Development and Consensus Building. *Journal of Medical Internet Research*, 13(4):e108. (Accompanying Editorial: Archambault PM. (2011). WikiBuild: A New Application to Support Patient and Health Care Professional Involvement in the Development of Patient Support Tools. *Journal of Medical Internet Research*, 13(4):e114 URL: <http://www.jmir.org/2011/4/e114/> doi: 0.2196/jmir.1961)

Gupta S, Wan FT, Ducharme FM, Chignell MH, Lougheed MD, Straus SE. (2012). Asthma Action Plans are Highly Variable and do not Conform to Best Visual Design Practices. *Annals of Allergy, Asthma, and Immunology*, 108(4): 260–265.e2.

Gupta S, Wan FT, Hall SE, Straus SE. (in press). An Asthma Action Plan Created through Physician, Educator, and Patient Online Collaboration with Usability and Visual Design Optimization. *Respiration*.

Kitto S, Sargeant J, Reeves S, and Silver I. (2011) The Importance of Being Dis-interested in Knowledge Translation: Towards a sociology of knowledge translation. *Advances in Health Sciences Education*. First published online, June 2011. doi:10.1007/s10459-011-9303-6.

Kitto S, Villanueva EV, Peller J, Gruen R, and Smith JA. (2011). Rural Surgeons' Attitudes Towards and Usage of Evidence-based Medicine in Surgical Practice, *Journal of Evaluation in Clinical Practice*, 17, 678–683. doi: 10.1111/j.1365-2753.2011.01695.x.

Higgins J, Bryant M, Villanueva E, and Kitto S. (2011). Managing and avoiding delay in operating theatres: a qualitative, observational study. *Journal of Evaluation in Clinical Practice*, First published online, October 26. doi: 10.1111/j.13652753.2011.01787.x.

Kitto S, Bell M, Peller J, Silver I, Etchells E, and Reeves S. (2011). Improving Patient Outcomes: Mapping Practice boundaries and intersections between the domains of Continuing Education, Knowledge Translation, Patient Safety and Quality Improvement. *Advances in Health Sciences Education*, online first December 2011. doi:10.1007/s10459-011-9340-1.

Nordquist J, Kitto S, Peller J, Ygge J, and Reeves S. (2012). Editorial: Focusing on future learning environments: Exploring the role of space and place for interprofessional education. *Journal of Interprofessional Care*, 25 (6), 391–393. doi:10.3109/13561820.2011.624809.

Kitto S, Schmitt M, and Olson C. (2012). Call for Papers: Workplace learning in Continuing Interprofessional Education. *Journal of Interprofessional Care*, 26 (4), 259–260. DOI: 10.3109/13561820.2012.681251.

Reeves S, Leslie K, Baker L, Legare F, Silver I, Rosenfield J, Hodges B, Curran V, Armson H, and Kitto S. (2012). Study protocol for a pilot study to explore the determinants of knowledge use in a medical education context. *Journal of Evaluation in Clinical Practice*, published online 15 May. doi: 10.1111/j.1365-2753.2012.01858.x.

Shearer B, Marshall S, Buist MD, Finnigan M, Kitto S, Hore T, Sturgess T, Wilson S, and Ramsay W. (2012). What stops hospital staff from following protocols? An analysis of the incidence and factors behind failure of bedside clinical staff to activate the rapid response system in a multi-campus Australian metropolitan healthcare service. *BMJ Quality & Safety*, published online 23 May. Doi:10.1136/bmjqs-2011-000692.

Ahmed N, Gotlib Conn L, Chiu M, Kurabi B, Qureshi A, Nathens A, and Kitto S. (in press). Career satisfaction among general surgeons in Canada: A qualitative study of enablers and barriers to improve recruitment and retention in general surgery. *Academic Medicine*.

Willems A, Waxman B, Bacon A, Smith JA, and Kitto S. (in press). Non-Technical Core Competencies for Surgeons in Disaster Response: A Literature Review, *Journal of Interprofessional Care*.

Willems A, Waxman B, Bacon A, Smith JA, and Kitto S. (in press). Non-Technical Core Competencies for Surgeons in Disaster Response: The Australian Perspective. *Journal of Interprofessional Care*.

Jin J, Martimianakis T, Kitto S, and Moulton CA. (in press). Pressures to 'Measure Up' in Surgery: Managing Your Image and Your Patient, *Annals of Surgery*.

Wooster D, Manchul L, Wooster E. "Developing a Mini-Practice Audit for Continuing Education and Professional Development". Presented at the Canadian Conference on Medical Education Annual Meeting, Banff, Alberta, April 14–17, 2012.

Parker K, Burrows G, Nash H, Rosenblum ND. (2011). Going Beyond Kirkpatrick in Evaluating a Clinician Scientist Program: It's Not "If It Works" but "How It Works." *Academic Medicine*, 86(11):1389.

APPENDIX 2 – CPD Grants and Publications

Jacobson A, McGuire M, Zorzi R, Lowe M, Oandasan I, Parker K. (2011). The group priority sort: a participatory decision-making tool for healthcare leaders. *Healthcare Quarterly*, 14(4):47-53.

Reeves S, Tassone M, Parker K, Wagner S, Simmons B. (2012). Interprofessional education: an overview of key developments in the past three decades. *WORK: A Journal of Prevention, Assessment, & Rehabilitation*, 41(3):233-45.

Parker K, Jacobson A, McGuire M, Zorzi R, Oandasan I. (in press). How to build high quality interprofessional collaboration and education in your hospital: the IP-COMPASS tool. *Journal of Quality Management in Health Care*.

Patcai, J. (2011). Polling the audience using text messaging – A tool for medical education. *Medical Teacher*, 33(8), 684-685.

Perrier L, Mrklas K, Lavis JN, Straus SE. (2011). Interventions encouraging the use of systematic reviews by health policymakers and managers: a systematic review. *Implementation Science*, 6:43.

Kastner M, Estey E, Perrier L, Graham ID, Grimshaw J, Straus SE, Zwarenstein M, Bhattacharyya O. (2011). Understanding the relationship between the perceived characteristics of clinical practice guidelines and their uptake: protocol for a realist review. *Implementation Science*, 6:69.

Wu RC, Tran K, Lo V, O’Leary KJ, Morra D, Quan SD, Perrier L. (June 2012). Effects of clinical communication interventions in hospitals: A systematic review of information and communication technology adoptions for improved communication between clinicians. *International Journal of Medical Informatics*, published online ahead of print, 22 June 2012. <http://dx.doi.org/10.1016/j.ijmedinf.2012.05.014>

Murthy L, Shepperd S, Clarke MJ, Garner SE, Lavis JN, Perrier L, Roberts NW, SE Straus. (in press). Interventions to improve the use of systematic reviews in decision-making by health system managers, policy makers and clinicians. *Database of Systematic Reviews 2012*.

Kastner M, Tricco AC, Soobiah C, Lillie E, Perrier L, Horsley T, Welch V, Cogo E, Antony J, Straus SE. (in press). What is the most appropriate knowledge synthesis method to conduct a review? Protocol for a scoping review. *BMC Medical Research Methodology 2012*.

Leung FH & Ratnapalan S. (2011). A framework to teach self-reflection for the remedial resident. *Medical Teacher*, 33(3):e154-7.

Al Odhayani A & Ratnapalan S. (October 2011). Teaching communication skills. *Canadian Family Physician*, 57(10):1216-8.

Ratnapalan S, Brown K, Cieslak P, Cohen-Silver J, Jarvis A, Mounstephen W. (March 2012). Charting errors in a teaching hospital. *Pediatric Emergency Care*, 28(3):268-71.

Zaher E & Ratnapalan S. (June 2012). Practice-based small group learning programs: Systematic review. *Canadian Family Physician*, 58: 637-642.

Ravitz P, Lancee B, Maunder R, Lawson A, Leszcz M, Hunter J, McNaughton N, Pain C. (in press; CPA). “Improving doctor-patient communication: a study of coaching residents on videotaped interviews with standardized patients”. *Academic Psychiatry*.

Dennis CL, Ravitz P, Grigoriadis S, Jovellanos M, Hodnett E, Ross L, Zupancic J. (in press; CPA). “Study Protocol for a Randomised Controlled Trial to Evaluate the Effectiveness of Telephone-Based Interpersonal Psychotherapy for the Treatment of Postpartum Depression: The Mothering Transitions Trial.” *Trials*.

Salbach NM, Veinot P, Jaglal SB, Bayley M, Rolfe D. (2011). From continuing education to personal digital assistants: What do physical therapists need to support evidence-based practice in stroke management? *Journal of Evaluation in Clinical Practice*, 17(4):786-793. Impact Factor=1.487.

Salbach NM, Jaglal SB. (2011). Creation and validation of the evidence-based practice confidence scale for health care professionals. *Journal of Evaluation in Clinical Practice*, 17(4):794-800. Impact Factor=1.487.

Petzold A, Korner-Bitensky N, Salbach NM, Ahmed S, Menon A, Ogourtsova T. (2012). Increasing knowledge of best practices in occupational therapists treating post-stroke unilateral spatial neglect: results of a knowledge-translation intervention study. *Journal of Rehabilitation Medicine*, 44 (2):118-24.

APPENDIX 2 – CPD Grants and Publications

Salbach NM, Bell M, Sriharan A, Kitto S, Anastakis D, Silver I. Formation of the research in continuing education (RICE) group to foster interdisciplinary scholarship in continuing education. Canadian Medical Education Congress 2012, Toronto, Ontario, May 30-June 2, 2012.

Sibley K, Jaglal S, Salbach NM, Inness E, Straus S. (e-publication ahead of print). Balance assessment practices and use of standard measures among Ontario physical therapists. *Physical Therapy*.

Gillan C, Harnett N, Catton P, Jaffray D, Wiljer D, Gospodarowicz M. Approaching technological innovation collaboratively in radiation medicine: the implementation of image-guided radiation therapy. *Practical Radiation Oncology*.

Wong BM, Cheung CM, Dharamshi H, Dyal S, Kiss A, Morra D, Quan S, Sivjee K, Etchells EE. (2011). Getting the Message: A Quality Improvement Initiative to Reduce Pages Sent to the Wrong Physician. *BMJ Quality & Safety*, E-pub ahead of print November 2011.

Wong BM, Levinson W, Shojania KG. (January 2012). Quality Improvement in Medical Education: Current State and Future Directions. *Medical Education*, 46(1):107-19.

Wong BM, Hollenberg E, Etchells EE, Kuper A, Levinson W, Shojania KG. (May/June 2012). The Emergence of Quality Improvement (QI) and Patient Safety Training in Postgraduate Medical Education: An Updated Systematic Review of QI and Patient Safety Curricula. *American Journal of Medical Quality*, 27(suppl. 2):20S-23S.

Drucker AM, Cavalcanti RB, Wong BM, Walsh SRA. (in press). Teaching dermatology to internal medicine residents: needs assessment survey and possible directions. *Journal of Cutaneous Medicine and Surgery*.

Yu CHY, Parsons J, Mamdani M, Lebovic G, Shah B, Bhattacharyya O, Laupacis A, Straus SE. (2012). Designing and evaluating a web-based self-management site for patients with type 2 diabetes – Systematic Website Development and Study Protocol. *BMC Medical Informatics and Decision-making*.

Yu CHY, Bahniwal R, Laupacis A, et al. (January 2012). Systematic review and evaluation of web-accessible tools for management of diabetes and related cardiovascular risk factors by patients and healthcare providers. *Journal of the American Medical Informatics Association*.

2010-11

CPD Grants

Recipients: Brosseau L, Lineker S, Wells GA, Bell MJ, Egan M, Casimiro L, Poitras S, Tugwell P, Foré R, Lyddiatt A

Project: Innovative strategies to implement clinical practice guidelines for rheumatoid arthritis and osteoarthritis through popular interactive tools

Agency: Canadian Institutes of Health Research (CIHR). Knowledge synthesis

Grant 2010

Amount: \$100,000

Term: 2010-2011

Recipients: Cooke R, Ravitz P, Mitchell S, Rogers A, Teshima J (co-PI)

Project: CE to Go: Capacity Building in Under-served Communities Through Knowledge Dissemination

Agency: CAMH AFP Innovation Fund

Amount: \$62,000

Type: Peer reviewed, University Hospital and Provincial Agency

Term: May 2009-May 2011

APPENDIX 2 – CPD Grants and Publications

Recipients: Goldman J, Reeves S, Wu R [CPI]

Project: An ethnography of patient safety in general and internal medicine wards

Agency: Canadian Health Institutes for Research

Amount: \$60,000

Type: Peer-reviewed, National Agency

Term: 2011-2014

Recipients: Hanna E, Mac Neill H, Lowe M, Sinclair L, Hall S, Reeves S

Project: Building Community in Collaborative Online Interprofessional Education: An examination of facilitation in online synchronous interprofessional education

Agency: Continuing Education Research & Development Award, UofT

Amount: \$4,425

Term: 2010-2011

Recipients: Korner-Bitensky N, Menon A, Bayley M, Bourbonnais D, Desrosiers J, Dumoulin C, Duncan P, Eng J, Fellows L, Fung J, Jutai J, Kagan A, Kaizer F, Kloda L, Levin M, Martino R, Mayo NE, Page S, Richards CL, Rochette A, Salbach N, Teasell R, Thomas A, Wood-Dauphinee S

Project: StrokEngine: an interactive e-learning resource for moving evidence-based stroke rehabilitation into clinical practice

Agency: Continuation Project, Canadian Stroke Network

Amount: \$254,700

Term: 2010-2013

Recipients: Lancee W (CI), Maunder R, Rawkins S (C), Fefergrad M

Project: Enhancing Supervision of Psychotherapy (ESP)

Agency: University of Toronto, Faculty of Medicine, Education Development Fund; matched with funds from the University of Toronto, Mt. Sinai Hospital, & Sunnybrook Health Science Centre Departments of Psychiatry

Amount: \$20,000

Term: 2010-2012

Recipients: Lineker S, Bell MJ, Badley EM, Kirby FD, Fleet LJ, Curran VR, Tugwell P

Project: Getting a Grip on Arthritis Online

Agency: The Arthritis Society. Canadian Institutes for Health Research Planning and Dissemination Grant

Amount: \$23,305

Term: 2010-2011

Recipient: Norman C.D.

Project: Core competencies for youth engagement through the arts: Developing a learning framework

Agency: Social Science & Humanities Research Council of Canada (SSHRC)

Amount: \$24,510

Term: 2011

APPENDIX 2 – CPD Grants and Publications

Recipient: Norman C.D.

Project: Design thinking for complex problem solving

Agency: Social Science & Humanities Research Council of Canada (SSHRC)

Amount: \$35,810.00

Term: 2011-2013

Recipients: Ravitz P, Reeves S, Cooke R, Swenson R

Project: 'CE to Go: Capacity Building through distance education in rural underserved communities'

Agency: Ontario Ministry of Health and Long-term Care

Amount: \$134,000

Term: 2010-2011

Recipients: Reeves S, Leslie K, Egan-Lee E, Baker L

Project: A systematic review of the effects of faculty development

Agency: Faculty Development Fund, Royal College of Physicians and Surgeons of Canada

Amount: \$4,995

Term: 2010-2011

Recipients: Reeves S, Leslie K, Légaré F, Silver I, Rosenfield J, Hodges B, Curran V, Armson H, Kitto S [PI]

Project: An exploration of the determinants of knowledge use in a medical education context

Agency: KT Canada

Amount: \$30,000

Type: Peer-reviewed, National Agency

Term: 2011-2012

Recipients: Reeves S, Sharma S, Boet S, Kitto S [PI]

Project: Enhancing the use of sociological fidelity in interprofessional simulated learning

Amount: \$4,950

Type: Peer-reviewed, Local Agency

Term: 2011-2012

Recipients: Salbach N, Clyde J, Brooks D, Cameron J

Project: Evaluating the psychometric properties of the Evidence-based practice confidences (EPIC) scale among occupational therapists

Agency: Continuing Education Research and Development Award, Faculty of Medicine, University of Toronto

Amount: \$3,413

Term: 2011-2012

APPENDIX 2 – CPD Grants and Publications

Recipients: Salbach N, Solomon P, Dolan L, O'Brien K, Worthington C, Baxter L, Blanchard G, Chegwidden W, Casey A, Duke K, Eby S, Tran T, Wu J

Project: Evaluating the uptake of a new evidence-informed e-resource module for rehabilitation professionals to enhance the care and treatment of people living with HIV and Aids (PHAs)

Agency: Canadian Institutes of Health Research Knowledge to Action

Amount: \$195,258

Term: 2011-2013

Recipients: Scott S, Kovacs-Burn K, Klassen T, Hartling L, Dryden D, Thompson D, Jones C, Newton A, Hofmeyer A, Ball G, Grimmer-Somers K, Kumar S, May E, Barr H, Suter E, Reeves S

Project: A systematic review of knowledge translation strategies used in the allied health professions

Agency: Canadian Institutes of Health Research

Amount: \$99,387

Term: 2010-2011

Recipients: Sidani S, MacMillan K, van Soeren M, Reeves S, Donald F, Hurlock C, Staples P

Project: Development of a research program to enhance utilization of nurses and nurse Practitioners in their professional and interprofessional practice

Agency: Nursing Secretariat, Ministry of Health and Long-Term Care

Amount: \$1,243,250

Term: 2010-2013

Recipients: Silver I (CI), Gagliardi A, Straus SE, Brouwers M, Victor JC, Hoch J, Grunfeld E, Radhakrishnan A, Kennedy E, Urbach D, Finelli A, Campbell CM, Marlow B

Project: Facilitating physician self-assessment: Experimental, economic and qualitative evaluation of instructional tools versus peer mentorship

Agency: Canadian Institutes of Health Research

Amount: \$634,017

Term: 2010-2013

Recipients: Silver I (CI), Kitto S, Bell M, Sargeant J, Reeves S, Etchells E

Project: Improving Patient Outcomes: Mapping practice boundaries and intersections between the domains of Continuing Education, Knowledge Translation, Patient Safety and Quality Improvement

Agency: AFMC-SCCPD National CPD research fund

Amount: \$30,000

Term: 2011

Recipients: Silver I (CI), Leslie K, Legare F, Rosenfield J, Hodges B, Curran V, Kitto S

Project: A pilot project to explore the determinants of knowledge use in a medical education context

Agency: KT Canada seed funding project

Term: 2011

APPENDIX 2 – CPD Grants and Publications

Recipients: Silver I (CI), Sargeant J, Allen M, Borduas F, Grimshaw J, Lockyer J, Legare F, Sketris I, Straus S, Hill T, Luconi F, Stenerson H

Project: Moving research forward: a collaboration of national CME/CPD and KT researchers

Agency: Canadian Institutes of Health Research Meeting Grant

Amount: \$17,250

Term: 2010-2011

Recipients: Silver I (CI), Sargeant J, Mann K, Holmboe E

Project: Performance feedback to inform self-assessment and guide practice improvement: Developing and testing a feedback facilitation model

Agency: Society for Academic CME Manning Award

Amount: \$50,000

Term: 2011-2013

Recipients: Worthington C, Mangion M, O'Brien K, Rueda S, Salbach N, Solomon P

Project: Getting to work: Development of an evidence-informed educational program for professionals to promote labour force participation for people living with HIV in Canada

Agency: Canadian Institutes of Health Research Knowledge to Action

Amount: \$126,593

Term: 2010-2012

Recipients: Yu C, Chignell M, Chow CM, Brydges R, Straus S

Project: Development, usability testing and validation of a computer-based simulator for DKA management

Agency: Banting and Best Diabetes Centre

Amount: \$20,000

Term: 2010-2011

CPD Publications

Abramovich, I., Espin, S., Wickson-Griffiths, A., Dematteo, D., Baker, L., Egan-Lee, E., Reeves, S. (2011) Translating collaborative knowledge into practice: findings from a 6-month follow-up study. *Journal of Interprofessional Care* 25:226-227

Albert, M., and Reeves, S. (2010) Setting some new standards in medical education research (Commentary). *Medical Education* 44:638-639

Baker, L., Egan-Lee, E., Leslie, K., Silver, IL ., Reeves, S. (2010) Exploring an IPE faculty development program using the 3-P model. *Journal of Interprofessional Care* 24(5), 597-600

Baker, L., Egan-Lee, E., Martimianakis, M., Reeves, S. (2011) Relationships of Power: Implications for interprofessional education & practice. *Journal of Interprofessional Care* 25:98-104

Baker, L., Reeves, S., Egan-Lee, E., Silver, I. (2010) The ties that bind: a network approach to creating a program in faculty development. *Medical Education* 44:132-139

Bell, MJ. (2010) The role of patients, family and stakeholders in guideline development: Meta-ethnography of qualitative research on peer support in chronic disease. *Otolaryngology - Head and Neck Surgery* 143: 41. DOI; 10. 1016/J.OTOHNS.2010.04.180

Bell, MJ., Havens, C., Price, D. (2011) Introduction in Dennis K. Wentz (ed.): *Continuing Medical Education: Looking Back, Planning Ahead*, Dartmouth Publishing Group ISBN-10: 1584659882

APPENDIX 2 – CPD Grants and Publications

Bell, MJ., Veinot, P., Embuldeniya, G., Nyhof-Young, J., Sale, J., Sargeant, J., Cox-Dublanski, M. (2011) Peer to Peer Mentoring for Individuals with Early Inflammatory Arthritis: Peer Mentor Training. University of Toronto Ogryzlo Research Day. Toronto ON

Bellamy, N., Bell, MJ., Goldsmith, CH., Lee, S., Maschio, M., Raynauld, J-P., Torrance, GW., Tugwell, P. (2010) BLISS index using WOMAC index detects between group differences at low-intensity symptom states in osteoarthritis. Online in Journal of Clinical Epidemiology 63(5):566-574

Britten, N., Embuldeniya, G., Veinot, P., Bell, E., Nyhof-Young, J., Sale, J., Bell, M. (2011) Perceived Impact and Experience of Participating in Peer Support Interventions: A Qualitative Synthesis. Paper ID No: W0006337 British Sociological Association Medical Sociology Group 43rd Annual Conference. Chester UK

Brosseau, L., Wells, GA., Tugwell, P., Egan, M., Dubouloz, C-J., Casimiro, L., Bugnariu, N., Welch, V.A., De Angelis, G., Francoeur, L., Milne, S., Loew, L., McEwan, J., Messier, S.P., Doucet, E., Kenny, G.P., Prud'homme, D., Lineker, S., Bell, M., Poitras, S., Li, J.X., Finestone, H.M., Laferriere, L., Haines-Wangda, A., Russell-Doreleyers, M., Lambert, K., Marshall, A.D., Cartizzone, M., Teav, A. (2011) Ottawa Panel Evidence-Based Clinical Practice Guidelines for the Management of Osteoarthritis in Adults Who Are Obese or Overweight. Vol 91 No 6 Physical Therapy

Brosseau, L., Wells, GA., Tugwell, P., Egan, M., Dubouloz, C-J., Casimiro, L., Bugnariu, N., Welch, V., Francoeur, L., Milne, S., Loews, L., McEwan, J., Bell, M. (2011) Ottawa Panel Evidence Based Clinical Practice Guidelines in the Management of Osteoarthritis in Obese and Overweight Adults. Physical Therapy 91(6):843-61

Cameron, A., Rennie, S., DiProspero, L., Langlois, S., Wagner, S., Potvin, M., Dematteo, D., LeBlanc, V.,

Reeves, S. (2010) An introduction to teamwork: findings from an evaluation of an interprofessional education experience for 1,000 first year students. Journal of Allied Health 38:220-226

Carter, W., Grigoriadis, S., Ravitz, P., Ross, LE. (2010) Conjoint IPT for Postpartum Depression: Literature Review and Overview of a Treatment Manual. American Journal of Psychotherapy Vol. 64, No. 4

Dixon, D., Takhar, J., Macnab, J., Eadie, J., Lockyer, J., Stenerson, H., François, J., Bell, M., Monette, C.,

Campbell, C., Marlow, B. (2011) Controlling quality in CME/CPD by measuring and illuminating bias. Journal of Continuing Education in the Health Professions 31: 109–116. doi: 10.1002/chp.20114

Dorman, T., and Silver, I. (2011) CME: Comment on Clinician Attitudes about Commercial Support of CME – An Editorial. Archives of Internal Medicine 171(9):847-848

Egan-Lee, E., Baker, L., Freitag, S., Reeves, S. (2011) Twelve tips for ethical approval for education studies. Medical Teacher 33:268-272

Frank, J., Snell, L., Ten Cate, O., Holmboe, E., Carraccio, C., Swing, S., Harris, P., Glasgow, N., Campbell, C., Dath, D., Harden, R., Iobst, W., Long, D., Mungroo, R., Richardson, D., Sherbino, J., Silver, I.L., Taber, S., Talbot, M., Harris, K. (2010) Competency-based medical education: Theory to practice. Medical Teacher 32(8), 638-645 35 Office of Continuing Education & Professional Development Annual Report 2010-2011

Gagliardi, AR., Légaré, F., Brouwers, MC., Webster, F., Wiljer, D., Badley, E., Straus, S. (2011) Protocol: developing a conceptual framework of patient mediated knowledge translation, systematic review using a realist approach. Implementation Science 6(1):25

Gagliardi, AR ., Perrier, L., Webster, F., Leslie, K., Bell, M., Levinson, W., Rotstein, O., Tourangeau, A., Morrison, L., Silver, I.L., Straus, SE . Exploring mentorship as a strategy to build capacity for knowledge translation research and practice: protocol for a qualitative study. Implement Science 4:55

Gillan, C., Lovrics, E., Halpern, E., Wiljer, D., Harnett, N. (2011) The evaluation of learner outcomes in interprofessional continuing education: A literature review and an analysis of survey instruments. Medical Teacher 33(9):e461-70

Gillan, C., Wiljer, D., Harnett, N., Briggs, K., Catton, P. (2010) Changing stress while stressing change: the role of interprofessional education in mediating stress in the introduction of a transformative technology. Journal of Interprofessional Care 24(6):710-21

APPENDIX 2 – CPD Grants and Publications

- Goldman, J. (2011) The contribution of ethnographic methods to our understanding of interprofessional teamwork. *Journal of Interprofessional Care* 25,3, 165–166
- Goldman, J., Meuser, J., Lawrie, L., Rogers, J., Reeves, S. (2010) Interprofessional primary care protocols: a strategy to promote an evidence-based approach to teamwork and the delivery of care. *Journal of Interprofessional Care* 24:653–65
- Goldman, J., Meuser, J., Lawrie, L., Rogers, J., Reeves, S. (2010) Interprofessional collaboration in Family Health Teams: An Ontario-based study involving 14 teams. *Canadian Family Physician* 56:e368–374
- Hodges, BD., Albert, M., Arweiler, D., Akseer, S., Bandiera, G., Byrne, N., Charlin, B., Karazivan, P., Kuper, A., Maniate, J.M., Millette, B., Noyeau, E., Parker, S., Reeves, S. (2011) The Future of Medical Education: A Canadian Environmental Scan. *Medical Education* 45: 95 – 106
- Horsley, T., O'Neill, J., McGowan, J., Perrier, L., Kane, G., Campbell, C. (2010) Interventions to improve question formulation in professional practice and self-directed learning. *Cochrane Database System Review* (5):CD 007335
- Kastner, M., Estey, E., Bhattacharyya, O. (2011) Better guidelines for better care: enhancing the implementability of clinical practice guidelines. *Expert Review of Pharmacoeconomics & Outcomes Research* (3):315–24
- Kastner, M., Estey, E., Perrier, L., Graham, ID., Grimshaw, J., Straus, SE., Zwarenstein, M., Bhattacharyya, O. (2011) Understanding the relationship between the perceived characteristics of clinical practice guidelines and their uptake: protocol for a realist review. *Implementation Science* 6:69
- Kenaszchuk, C., MacMillan, K., van Soeren, M., Reeves, S. (2011) Interprofessional simulated learning: short-term associations between simulation and interprofessional collaboration. *BMC Medicine* 9:29
- Kenaszchuk, C., Reeves, S., Nicolas, D., Zwarenstein, M. (2010) Validity and reliability of a multiple-group measurement scale for interprofessional collaboration. *BMC Health Services Research* 10:83
- Kenaszchuk, C., Wilkins, K., Reeves, S., Zwarenstein, M., and Russell, A. (2010) Nurse–physician relations and quality of nursing care: Findings from a national survey of nurses. *Canadian Journal of Nursing Research* 42:120–136
- Kim, J., Lowe, M., Srinivasan, V., Gairy, P., and Sinclair, L. (2010) Enhancing capacity for interprofessional collaboration: A resource to support program planning. Toronto Rehabilitation Institute: Toronto, Ontario
- Kitto, S., Chesters, J., Thistlethwaite, J., Reeves, S (eds). (2011) *A Sociology of Interprofessional Healthcare Practice: Critical Reflections and Concrete Solutions*. Nova Science Publishers, Hauppauge, NY
- Kitto, S., Sargeant, J., Reeves, S., Silver, IL. (2011) Towards a sociology of knowledge translation: The importance of being disinterested in knowledge translation. *Advances in Health Sciences Education*. Published online
- Kuper, A., Zur Nedden, N., Etchells, E., Shadowitz, S., Reeves, S. (2010) Teaching and learning at morbidity and mortality rounds: an ethnographic study. *Medical Education* 44:559–569
- Lacasse, M., Routhier, G., LeBlanc, P., Théorêt, J., Glenn, J., and Ratnapalan, S. (2010) Teaching Residents to Teach: Do Program Directors and Trainees Agree on Format and Content? *Canadian Medical Education Journal* 1(1) e18–e28
- Leung, FH., Ratnapalan, S. (2011) A framework to teach self-reflection for the remedial resident. *Medical Teacher* 33(3):e154–7. 9
- Lewin, S., Reeves, S. (2011) Enacting ‘team’ and ‘teamwork’: using Goffman’s theory of impression management to illuminate interprofessional collaboration on hospital wards. *Social Science and Medicine* 72:1595–1602
- Lineker, SC., Bell, MJ., Badley, EM. (2011) Evaluation of an inter-professional educational intervention to improve the use of arthritis best practices in primary care. *The Journal of Rheumatology* (5):931–7
- MacNeill, H., Reeves, S., Hanna, E., Rankin. (2010) The Community of Inquiry framework: a pertinent theory of online interprofessional education? In Bromage, A., Couder, L., Gordon, F., Thistlethwaite, J. (eds) *Interprofessional E-Learning and Collaborative Work: Practices and Technologies*. IGI Global, Hershey, PA
- Maniate, JM. (2010) A Resident Program Evaluation (RPE), Developed by Residents, for the Strengthening of the Canadian Residency Education Accreditation System. *Academic Medicine* 85 (7): 1196 – 1202

APPENDIX 2 – CPD Grants and Publications

- McBride, CM., Zuroff, DC., Ravitz, P., Koestner, R., Moskowitz, DS., Quilty, L., Bagby, M. (2010) Autonomous and Controlled Motivation and Interpersonal Therapy for Depression: Moderating Role of Recurrent Depression. *British Journal of Clinical Psychology* 49, 529-545
- McGlynn, M., Solway, S., Lowe, M., Howe, J., Hebert, D., Velji, K. (2011) Organizational process for clinical best practice in rehabilitation and complex continuing care. *Healthcare Quarterly* 14 (1) 62 – 69
- McKellar, J., Cheung, D., Lowe, M., Willems, J., Heus, L., and Parsons, J. (2011) Healthcare providers' perspectives on an IPE intervention for promoting community re engagement post stroke. *Journal of Interprofessional Care*. Early Online, 1-3
- McQueen, K., Dennis, C-L., Stremler, R., and Norman, C.D. (2011) A pilot randomized controlled trial of a breastfeeding self-efficacy intervention with primiparous mothers. *Journal of Obstetric, Gynecologic & Neonatal Nursing* 40, 35-46
- Norman, CD., Charnaw-Burger, J., Yip, A., Saad, S., and Lombardo, C. (2010) Designing health innovation networks using complexity science and systems thinking: The CoNEKTR Model. *Journal of Evaluation in Clinical Practice* 16, 1016-1023
- Norman, CD ., Huerta, TR ., Mortimer, S., and Buchan, A. (2011) Evaluating the science of discovery in complex health systems. *American Journal of Evaluation* 32, (1), 70-84
- Oswald, AE., Bell, MJ., Wiseman, J., Snell, L. (2011) The impact of trained patient educators on musculoskeletal clinical skills attainment in pre-clerkship medical students. *Medical Teacher* 33(5):e227-35
- Oswald, A., Wiseman, J., Bell, M., Snell, L. (2011) Musculoskeletal Examination Teaching by Patients Versus Physicians: How Are They Different? Neither Better Nor Worse, but Complementary. *CMTE: Medical Teacher*. Vol 33 No 5 pp. e227-e235(9)
- Patcai, J. (2011) Polling the audience using text messaging – A tool for medical education. *Letter in Medical Teacher* 33: 684–685
- Pauze, E., Reeves, S. (2010) Examining the effects of interprofessional education on mental health providers: findings from an updated systematic review. *Journal of Mental Health* 19:259-271
- Perrier, L., Mrklas, K., Lavis, JN., Straus, SE. (2011) Interventions encouraging the use of systematic reviews by health policymakers and managers: A systematic review. *Implementation Science* 6(1):43
- Perrier, L., Mrklas, K., Shepperd, S., Dobbins, M., McKibbon, KA., Straus, SE . (2011) Interventions encouraging the use of systematic reviews in clinical decision-making: a systematic review. *Journal of General Internal Medicine* 26(4):419-26
- Price, D., Havens, C., and Bell, M. What Will Practicing Physicians Want In (And Need From) CME in The Future? In Dennis K. Wentz (Editor), *Continuing Medical Education: Looking Back, Planning Ahead*. Dartmouth College Press; ISBN 1584659882
- Ravitz, P., Wondimagegn, D., Watson, P., Grigoriadis, S., Pain, C. (2011) IPT-TAA PP (Toronto Addis Ababa Psychiatry Project): Interpersonal Psychotherapy adapted for use in Ethiopia
- Reeves, S. (2010) Future directions (Editorial). *Journal of Interprofessional Care* 24:3-4
- Reeves, S. (2010) Ideas for the development of the interprofessional field (Editorial). *Journal of Interprofessional Care* 24:217-219
- Reeves, S. (2011) Looking back, looking forward (Editorial). *Journal of Interprofessional Care* 25: 1-2
- Reeves, S. (2010) The need to problematize interprofessional education and practice activities (Editorial). *Journal of Interprofessional Care* 24:333-335
- Reeves, S. (2011) Using the sociological imagination to explore the nature of interprofessional interactions and relations. In Kitto, S., Chesters, J., Thistlethwaite, J., Reeves, S. (eds) *A Sociology of Interprofessional Healthcare Practice: Critical Reflections and Concrete Solutions*. Nova Science Publishers, Hauppauge, NY
- Reeves, S., Goldman, J. (2010) Medical education in an interprofessional context. In T. Dornan, K Mann, A Scherpbier, J Spencer (eds) *Learning Medicine*. Elsevier, Maryland Heights, MO
- Reeves, S., Goldman, J., Gilbert, J., Tepper, J., Silver, I., Suter, E. (2011) A scoping review to improve conceptual clarity of interprofessional interventions. *Journal of Interprofessional Care* 25(3):167-74

APPENDIX 2 – CPD Grants and Publications

Reeves, S., Goldman, J., Sawatzky-Girling, B., Burton, A. (2010) A Synthesis of Systematic Reviews of Interprofessional Education. *Journal of Allied Health* 39:S198-S203

Reeves, S., MacMillan, K., van Soeren, M. (2010) Leadership within interprofessional health and social care teams: a socio-historical overview of some key trials and tribulations. *Journal of Nursing Management* 18:258-26

Reeves, S., Zwarenstein, M., Espin, S., Lewin, S. (2010) *Interprofessional Teamwork for Health and Social Care*. Blackwell-Wiley, London

Reeves, S., Zwarenstein, M., Goldman, J., Barr, H., Freeth, D., Koppel, I., Hammick, M. (2010) The effectiveness of interprofessional education: key findings from a new systematic review. *Journal of Interprofessional Care* 24:230-241

Rice, K., Zwarenstein, M., Gotlib Conn, L., Kenaszchuk, C., Russell, A., Reeves, S. (2010) An intervention to improve interprofessional collaboration and communications: a comparative qualitative study. *Journal of Interprofessional Care* 24:350-361

Rosenfield, D., Oandasan, I., Reeves, S. (2011) Perceptions vs. reality: a qualitative study of students' expectations and experiences with interprofessional education. *Medical Education* 45:471-477

Salbach, NM., Guilcher, S.J.T., Jaglal, SB., Davis, DA. (2010) Determinants of research use in clinical decision making among physical therapists providing services post-stroke: a cross-sectional study. *Implementation Science* 5:77

Salbach NM, Jaglal SB. Creation and validation of the evidence-based practice confidence scale for health care professionals. *Journal of Evaluation in Clinical Practice* (2011) 17(4):794-800

Schmitt M, Baldwin DC, Reeves S. Continuing interprofessional education: collaborative learning for collaborative practice. In D. Wentz (ed) *Continuing Medical Education: Looking Back, Looking Forward*. University Press of New England, Lebanon, NH (2011)

Sharma, S., Boet, S., Kitto, S., Reeves, S. (2011) Interprofessional simulated learning: the need for 'sociological fidelity' (Editorial). *Journal of Interprofessional Care* 25:81-83

Simmons, B., Egan-Lee, E., Wagner, S., Esdaile, M., Baker, L., Reeves, S. (2011) Assessment of Interprofessional learning: the design an interprofessional objective structured examination approach. *Journal of Interprofessional Care* 25:73-4

Simmons, B., Oandasan, I., Soklaridis, S., Barker, K., Esdaile, M., Kwan, D., Wagner, S. (2011) Evaluating

the effectiveness of an interprofessional education faculty development course: The transfer of interprofessional learning to the academic and clinical practice setting. *Journal of Interprofessional Care* 25(2):156-7

Skinner, W., Cooper, C., and Chamberlain, C. (2010) *Concurrent Disorders and Motivational Interviewing*. In: CE to Go: Evidence Supported Psychotherapeutic Techniques. Series editor, Ravitz, P

Valani, R., Sriharan, A., Scolnik, D. (2011) Integrating CanMEDS competencies into global health electives: an innovative elective program. *Canadian Journal of Emergency Medicine* (1):34-9

van Soeren, M., Hurlock-Chorostecki, C., Reeves, S. (2011) The role of nurse practitioners in hospital settings: implications for interprofessional practice. *Journal of Interprofessional Care* 25:245-251

Yu, C., Batty, H. (2010) Targeting educational interventions to clinician's stage of change. *Diabetes Research and Clinical Practitioner* 89(3):e43-5

APPENDIX 3 – CPD Award Descriptions

COLIN R. WOOLF AWARDS

Three Colin R. Woolf Awards are offered annually and awarded to exceptional faculty in:

- Excellence in course coordination
- Excellence in teaching at continuing education events
- Sustained excellence in contributions to continuing education for at least five years

DAVID FEAR FELLOWSHIP

The David Fear Fellowship is awarded to a Faculty of Medicine faculty member to attend an educational leadership course in continuing education and professional development, visit another CPD department, or complete an innovative educational program or grant.

DAVE DAVIS RESEARCH AWARD

The Dave Davis Research award recognizes an outstanding completed research project in continuing education and professional development in the Faculty of Medicine.

FRED FALLIS AWARD IN DISTANCE EDUCATION

The Fred Fallis Award recognizes an individual or group which has demonstrated innovation and excellence in online learning for health professionals.

IVAN SILVER INNOVATION AWARD

The Ivan Silver Innovation Award recognizes an innovative CPD initiative developed and delivered by a University of Toronto faculty member or team that has demonstrated an effect on health professional performance or health outcome.

INTERPROFESSIONAL HEALTH CARE TEAM CONTINUING EDUCATION AWARD

This award recognizes excellence in interprofessional team continuing education and professional development designed to enhance interprofessional team practice to improve health care delivery.

APPENDIX 4 – Continuing Education Directors and Leaders

CPD Directors	
Anaesthesia	Dr. Peter Slinger
Family & Community Medicine	Dr. John Axler (replaced Dr. Jamie Meuser in 2012)
Lab Medicine/Pathobiology	Dr. Nadia Ismiil
Medical Imaging	Dr. Kartik Jhaveri (replaced Dr. Mostafa Atri in 2014)
Medicine	Dr. Brian Wong (replaced Dr. Mary Bell in 2012)
Obstetrics & Gynaecology	Dr. Rory Windrim (replaced Dr. Fay Weisberg in 2013)
Ophthalmology	Dr. Wai-Ching Lam
Occupational Sciences & Occupational Therapy	Debbie Hebert
Otolaryngology	Dr. Yvonne Chan (replaced Dr. Ian Witterick in 2014)
Paediatrics	Dr. Mark Feldman (replaced Dr. Suzan Schneeweiss in 2013)
Physical Therapy	Dr. Cathy Evans
Psychiatry	Dr. Sanjeev Sockalingam (replaced Dr. Sagar Parikh in 2014)
Radiation Oncology	Dr. Douglas Moseley (replaced Dr. Lee Manchul in 2015)
Speech-Language Pathology	Pascal van Lieshout (replaced Susan Wagner in 2015 and Luigi Girolametto in 2013)
Surgery	Dr. Terry Axelrod
Other Leaders	
Centre for Faculty Development	Dr. Karen Leslie
Global Health	Dr. Arnold Noyek
Medical Alumni	Dr. Martina Trinkaus
Nursing	Dr. Leslie Vincent
Oncology	Dr. Ronald Feld
Pharmacy	Rita McDowall (replaced Maria Bystrin in 2014)
CPD Associate Dean	Dr. Suzan Schneeweiss
CPD Education Consultant	Kate Hodgson
CPD Education Consultant	Jane Tipping

APPENDIX 5 – Departmental CPD Activities

Anesthesia

The Continuing Education Committee for the Department of Anesthesia supervises the Toronto Interactive Anesthesia Meeting (an annual two-day course that provides a combination of lectures, workshops and problem-based learning discussions for both Fellowship and GP Anesthetists) and also supports the development and accreditation of ongoing CE courses produced by the U ofT Department of Anesthesia Faculty. These include the department's CME Online Anesthesia Rounds (15 educational modules) and a Perioperative Interactive Education online program (teaching modules include Patient Simulation, Cardiac Anesthesiology, CV Pharmacology, Malignant Hyperthermia, Obstetric Anesthesia, Point of Care Ultrasound, and Transesophageal Echocardiography). The Thoracic Anesthesia group of the Toronto General Hospital has also created an online bronchoscopy simulator to improve Anesthesiologist's skills in providing lung isolation for thoracic anesthesia by learning bronchial anatomy. The Simulator and Quiz can be accessed on the website www.ThoracicAnesthesia.com.

Family and Community Medicine

The Professional Development Committee of the Department of Family and Community Medicine (DFCM) runs an annual 1-day accredited program on Faculty Wellness and Resilience that deals with the frustrations and fears that faculty members in academic medicine commonly experience. Workshop topics include Wellness Strategies and Fatigue Management, Mindfulness for Health Care Professionals: Managing Stress and Enhancing Peak Performance, Time Saving Technologies, and Managing Our Careers - From Shifts to Transitions. The department offers many other CPD courses, including Basics and Beyond Basics for all new faculty members and the annual Primary Care Today conference, as well as Academic Fellowship and Clinical Teaching or Research certificate programs. The department also has the DFCM Open website - a repository of peer reviewed, evidence-based, family-medicine focused tools and resources that are clinical, educational or research-oriented in nature.

Laboratory Medicine and Pathobiology

The department established the Digital Pathology Library to foster continuous education within and outside the University of Toronto. The library reflects the level of collaborative efforts among all laboratory medicine practitioners to ensure best practices and the recognition that digital pathology is an integral component in the future of laboratory medicine. The library has accumulated a significant number of images of various benign and malignant entities from different organ systems. The department hosts numerous other courses and conferences such as: Pathology Update, Saturday in Pathology, and various courses offered by the Ontario Forensic Institute. On-line modules, such as Blood Easy On-line, are also available to faculty.

Medicine

The Department of Medicine offer CE models that integrate clinical, quality improvement and patient safety (QI&PS) content and are regularly featured in citywide and hospital grand rounds. The department supports the Quality Grand Rounds format during grand rounds and integrates QI&PS into several Divisional Annual Research & Education Days. Many department members have integrated quality, safety and value as themes for national society conferences and meetings. The department has also pursued the development of innovative educational offerings for academic faculty who want to engage more actively in QI&PS work. Local QI&PS training programs such as IHPME MSc in QI&PS, Faculty-resident co-learning curriculum in QI and the development and delivery of national and international programs such as the RCPSC's ASPIRE program and AAMC's aTe4Q program demonstrate the Department of

APPENDIX 5 – Departmental CPD Activities

Medicine's leadership role in this area. The department also has a mentorship program where mentees benefit from bi-monthly face to face meetings and explore topics related to quality improvement including: Ethical Considerations for Quality Improvement Projects; and Optimizing patient and educational outcomes: Uniting Clinician Teachers, Educators and Quality Improvers.

Medical Imaging

The department recently launched the Medical Imaging for Family and Community Medicine Physicians. This course teaches: ACR and Choosing Wisely Canada imaging appropriateness criteria to highlight and educate optimal utilization of medical imaging in practice; symptom-based approaches to imaging test ordering; and deciphering imaging report conclusions and management of incidental findings. The department hosts the Annual Organ Imaging Review Course, which includes multidisciplinary content and engages radiologists in a clinical care team environment and increases insight into the specific impact of radiology reporting on patient management. University of Toronto Faculty contribute to lectures designed to promote and improve Quality Initiatives in Radiology. The Advanced Imaging and Education Center (AIEC) provides a variety of hands-on workshop sessions in small classroom settings on advanced cardiac imaging as well as virtual colonoscopy, which is a great resource for radiologists to acquire or enhance new skill sets.

Obstetrics and Gynecology

Members of the Department of Obstetrics and Gynecology are invited to represent the University of Toronto at provincial, national and international CPD events, such as the first comprehensive International Fetal Therapy Course, presented in Washington DC. This course used fetal and maternal simulators that were designed and created by the department, in collaboration with Dr. Francis Lebouthillier from the sculpture department at OCAD University. The University of Toronto simulators have been purchased by centres around the world and are used in teaching fetal therapy. The department is also involved in global CPD through its fellowship programs with Moi University, Eldoret, Kenya.

Occupational Science and Occupational Therapy

The CPD Occupational Science and Occupational Therapy committee offers: certificate courses such as Facilitating Work Integration Across Rehabilitation Populations; an inter-professional Brain Matters course which involves Anatomy, Physiotherapy, Speech and Language Pathology and OS and OT; community based non-profit courses from the Play Group for Network ChildCare Services and Silver Creek; other standalone courses in the neurorehabilitation area; etc. The committee also has a NeuroRehabilitation Community of Practice.

Ophthalmology and Vision Sciences

The Department of Ophthalmology and Vision Sciences provides accredited annual CPD events, instructional workshops at the Canadian Ophthalmological Society annual meeting, and the web-based teaching modules of neuro-ophthalmology. The Visiting Professor and combined Toronto Ophthalmological Society/University of Toronto rounds are an important ongoing CPD event for academic and community ophthalmologists. In addition, the department offers a number of courses such as the Walter Wright Conference and the Toronto Cataract Course, which provide generalists and specialists with updates in the field from local and international experts.

APPENDIX 5 – Departmental CPD Activities

Otolaryngology

The department's Grand Rounds include presentations from visiting professors, guest lecturers, community & academic faculty, fellows, and residents. Grand Rounds can be watched live or are archived videos through the OTN (Ontario Telemedicine Network) to help provide our community academic faculty with easier access to these educational activities. Other professional development courses offered by the department include: the Rhinology Update with a keynote plenary session and cadaveric dissection by world renowned Dr. Heinz Stammberger; a live endoscopic sinus surgery; and an "ask the expert" session. A departmental innovation has been the development of the Otosim, an educational tool used in medical education at the University of Toronto to teach learners the otoscopic examination.

Paediatrics

The Continuing Education Committee develops and supports a breadth of programming, including the Annual Paediatric Update which is the largest general paediatric conference by a Department of Paediatrics in Canada and attracts a local, national and international audience. Recognizing the importance of assessment and feedback in continuing education, an innovative, electronic, pre & post conference test ("Test-Enhanced Learning") was introduced at the conference. It includes a self-assessment (pre-test), reflection (pre-conference) and peer assessment with feedback (post-test). The department also runs quarterly City Wide Paediatric rounds.

Physical Therapy

The University of Toronto, Department of Physical Therapy is moving to the delivery of CPD using online and social media, working collaboratively with other partners such as the Dept. of Anatomy, Dept. of Occupational Therapy, Canadian Physiotherapy Association, Orthopaedic Division. A web-based animated whiteboard video is available entitled: Feedback do you get it? The department's online courses include Evidence Based Practice, the Canadian Health Care System, as well as face to face single event courses such as Exercise Prescription for Cervical Spine Dysfunction for Physical Therapists. The department also focuses on development of continuing education resources for the Ontario Internationally Educated Physiotherapy Bridging Program covering a wide range of clinical and professional areas, such as clinical reasoning, record keeping, etc.

Psychiatry

The Department of Psychiatry was the first mental health department to join the Association of American Medical Colleges Aligning and Education for Quality (AAMC ae4Q) network. This has encouraged the alignment of CPD and QI in mental health, and the launch of initiatives to increase the number of QI trained faculty, including creating an online repository for QI training opportunities and developing a job description for a Clinician in Quality and Practice Innovation. The department's Continuing Professional and Practice Development (CPPD) committee has piloted Psychiatry Morbidity and Mortality (M&M) Rounds and has developed an M&M Rounds toolkit. In collaboration with the Canadian Academy of Psychosomatic Medicine (CAPM), the CPPD Office is involved in delivery of programs related to capacity and consent in medical psychiatry, improving delirium care, etc. The CPPD also provides "Group Mentoring" during its meetings where committee members can describe the CE projects they are undertaking, and get group feedback on design, execution, and evaluation of the project.

APPENDIX 5 – Departmental CPD Activities

Radiation Oncology

The Department of Radiation Oncology Continuing Education program is made up of a curriculum comprised of a fixed core of annual elements including UT DRO Rounds, the conference Target Insight, and the Radiation Therapy Conference, Inspire, Inquire and Innovate (RTI3). There is also a variable program hosted by UT DRO faculty where each program element has a Course Director, an inter-professional program and planning committee, and is based on educational needs. The RTi3 radiation therapy conference is the premier research and education program for radiation therapy within Canada. DRO provides a Radiation Therapy Patient Education Video Series. The department has also been involved in the World Congress of Biomedical Engineering and Medical Physics.

Speech Pathology

The Department of Speech-Language Pathology is involved in a variety of CPD activities, such as: the “Advanced Literacy Practices: Make It Happen” course, offered with the Ontario Association of Speech-Language Pathologists and Audiologists (OSLA), which describes contemporary and advanced approaches to assessment and intervention in emergent literacy, reading, and writing disorders; the J.F.Walker Lecture, a half-day workshop that attracts a diverse audience of speech-language pathologists, audiologists, clinical educators, faculty and students; the Rehabilitation Sciences Sector Annual Clinical Education Workshop, an inter-professional half-day event including workshops on clinical education for clinical educators developed and implemented collaboratively by the Departments of Occupational Science and Occupational Therapy, Physical Therapy and Speech-Language Pathology; Speech-Language Pathology Clinical Placement Workshops to prepare clinical educators for student placements.

Surgery

The department provides many CPD events, including: the Update in General Surgery; the Urology Update; the Competency Based Education Training Workshop; the Burn Symposium; the Canadian Foot and Ankle Symposium; the Annual Pediatric Wound Care Symposium; the Hand and Upper Extremity Update; etc. Other initiatives include a longitudinal fellowship of continuing education, simulation programs, mentorship programs, etc.

APPENDIX 6 - Strategic Directions, Actions and Accountability Measures

STRATEGIC DIRECTION	GOALS	ACTIONS
<p>1. Enhance Best Practices & Faculty Development for Continuing Education</p>	<p>1-1 Promote and enable effective life-long learning</p> <p>1-2 Expand and enrich faculty development related to best practices in CPD</p> <p>1-3 Increase educational outreach, portability and use of new technologies in CE</p> <p>1-4 Promote CE as an academic career track</p>	<ul style="list-style-type: none"> • Develop programs to meet the needs of life-long learners and scholarly practitioners (e.g., improving reflective practice, online learning, centres for advanced practice). • More fully integrate CanMEDS roles into CE, with a focus on the roles of manager and communicator. • Provide educational curriculum on essentials of best practice in CE, with an emphasis on integrating the Mississauga Academy. • Examine what constitutes basic and advanced level curriculum and determine time frame for offering these courses. Develop a comprehensive feedback system to course directors in regards to best practice. • Work with CFD to build capacity to learn and teach about development and delivery of practice-based education programming. • Provide coaching and mentoring to faculty on acquiring best practice. • Target faculty development requirements specifically in continuing education and professional development for Mississauga Academy and address integrated medical education priorities. • Implement web-based “Foundations of Continuing Education and Professional Development” course. • Increase 24/7 virtual access to CE programming to make new and existing CE programs more accessible and to overcome challenges of time and distance. • Partner with local experts (e.g., Discovery Commons, BPER rounds, MARS innovations, OISE, Waterloo) to facilitate the development of e-learning platforms and greater use of social media networks. Partner with local simulation experts to develop specific simulation programs relevant to CE professionals. • Facilitate faculty development related to online education and newer technologies for learning. • Develop specific criteria for Creative Professional Achievement (CPA) and educational scholarship that relate to CE. • Improve mentoring for individuals pursuing an academic career focused on CE.

MEASURABLE OUTCOMES	ACHIEVEMENTS
<ul style="list-style-type: none"> • Integrate affiliated community hospital representatives into the Leaders and Directors committee. • Implement two faculty development workshops for CE planners in community affiliated hospitals. • Create online module on best practices in CPD including newer technologies. 	<p>CPD courses and conferences – growth over 5 years to accreditation of more than 380 events annually with a total of >57,000 unique learners; attract local, national and international learners</p> <p>Use CPD Best Practices to develop programs:</p> <ul style="list-style-type: none"> • Longitudinal programs • Online programs • Simulation-based CPD • Blended programs <p>Educational Outreach and portability Safe Opioid Webinar Course CPD web-based programs</p> <p>Link learning to CanMEDS roles through program evaluations and development of learning objectives</p> <p>Faculty Development</p> <ul style="list-style-type: none"> • CPD Webinar Series – 2012-2013 • International CPD Foundations program October 2015 – June 2016 • Continuing Education Leadership Program – 2013-2014 • Essential Skills in CPD at AMEE Conference (international) – 2013, 2014, 2015 <ul style="list-style-type: none"> ◦ New Master Class CPD 2016 <p>Educational Consultation 2 educational consultants 1:1 coaching/mentoring for best practices CPD to course directors/ CEDL group</p> <p>Collaboration across continuum of medical education</p> <ul style="list-style-type: none"> • UME Curriculum – development of milestones for lifelong learning • Collaboration with UME for faculty development • New Vice Dean Post MD – collaborative efforts with Associate Deans CPD and PGME <p>Promote advanced learning with longitudinal certificate programs and Royal College section 3 / CPFC MAINPRO C programs</p> <p>Partnerships</p> <ul style="list-style-type: none"> • Royal College – development of competency-based framework for CPD • CPD-Ontario • CPD- COFM • AFMC • Wilson Centre • CFD • Centre for IPE • CPSO – development of safe opioids and MRK courses; development of CFPR course – comprehensive family practice review course (last iteration in 2012-2013) <p>New – recruit academic director – promote faculty capacity building in CPD (academic career track)</p>

APPENDIX 6 - Strategic Directions, Actions and Accountability Measures

STRATEGIC DIRECTION	GOALS	ACTIONS
2. Advance Research, Innovation & Scholarship	<p>2-1 Establish strategic partnerships for collaborative and integrated research</p> <p>2-2 Enhance basic, applied, evaluative and action research in CPD</p> <p>2-3 Integrate CE research into strategic priorities</p>	<ul style="list-style-type: none"> • Establish partnerships and grow collaborative teams for integrated research which involve an interdisciplinary approach with partners such as, but not restricted to, quality improvement, patient safety, and knowledge translation. • Leverage the synergies of RICE to lead in multidisciplinary, team based CE research. • Collaborate with key groups including, but not restricted to, the Centre for Quality & Patient Safety, the Joint Program in Knowledge Translation, the Centre for Interprofessional Educational, SimONE, the Wilson Centre, the Centre for Faculty Development, Centre for Effective Practice, Sick Kids Learning Institute, and the Institute for Medical Sciences. • Expand research partnerships to include other universities, LHINs, hospitals, Family Health Teams (FHTs), consumers, insurance, health economists and regulatory bodies (e.g., CPSO). • Define and create new evaluation processes for integrated interdisciplinary research. • Heighten profile and awareness of CE educators, scholars and researchers through publishing, presenting and grant capture. • Build evaluation research capacity. • Introduce and implement the new R&D research criteria developed by R&D Task Force to support CE faculty researchers. • Facilitate and support research mentoring opportunities for faculty in the four types of research approaches in CPD. • Build skills in grant writing and tap into infrastructure where education scholars have been successful in achieving grants. • Collaborate with CE educators and scholars to advance all forms of research in QI in CE, Patient and Public Engagement as well as best practices in CE and the other strategic priorities. • Develop a research framework for QI. • Demonstrate the value of CE researchers/scholars on QI and KT projects by embedding CE researchers into QI and KT project teams.
3. Strengthen and Grow Practice-Based Education	<p>3-1 Extend successful large conference sessions into longitudinal practice-based programming aimed at both individuals and teams</p> <p>3-2 Build learning networks, and other communities of practice, in the community</p>	<ul style="list-style-type: none"> • Identify and initiate longitudinal initiatives from an existing accredited program. • Use educational events organized and accredited by CPD to perform individualized needs assessment to assess topics and barriers for practice-based education. Determine how to undertake similar needs assessment for teams. • Create new or adapt existing content that can be rolled into longitudinal experiences for learners, with a particular emphasis on content in areas such as QI and communication. Target these programs at both individuals and practice teams. • Collaborate around an environmental scan to better understand opportunities for communities of practice and their potential applicability to practice based education. • Tap into grassroots teams within LHINs to perform team learning needs assessments. • Use social networks to understand needs and practice, including marketing membership to healthcare communities. • Provide real time access to experts and peers through on lone learning community.

MEASURABLE OUTCOMES	ACHIEVEMENTS
<ul style="list-style-type: none"> • Create an online template for evaluation in CPD. • Increase the interdisciplinarity of membership on RICE. • Submit one large interdisciplinary CPD grant from an enlarged RICE group. 	<p>eRICE group (research in education) quarterly presentations of research topics</p> <p>CPD Research and publications</p> <p>Research and Development grants – with outputs (note suspended X 1.5 years due to fiscal constraints)</p> <p>Recruit researcher for Post MD Education with affiliation with Wilson Centre</p> <p>Recruit new academic director CPD to promote scholarship in CPD / academic career track in CPD for promotion</p> <p>Awards for contributions to CPD</p>
<ul style="list-style-type: none"> • A brief survey finalized within six months, delivery to a valid sample of learners within 1 year. • Two longitudinal learning initiatives aimed at individuals and one at teams planned and started by the end of the second year. • RICE consultation regarding evaluation of these longitudinal initiatives during development process. • Consultation with Faculty Development in CE group regarding parallel faculty development initiative in development and delivery of practice-based educational programming. • Working group on Communities of Practice established, with active contribution from Practice Based Education group established in first 6 months. • RICE consultation on scholarship opportunities and collaborators associated with all aspects of above (environmental scan, longitudinal initiative development, related faculty development, application of CoP) – ongoing thorough 2 years. 	<p>Development of ACPAC program New extension of program for management of chronic diseases</p>

APPENDIX 6 - Strategic Directions, Actions and Accountability Measures

STRATEGIC DIRECTION	GOALS	ACTIONS
4. Foster and Embed Quality Improvement in Continuing Education	<p>4-1 Identify, train and support QI educators in CE</p> <p>4-2 Develop education plan and curriculum for QI in CE</p> <p>4-3 Apply QI principles and practices to CE program planning and implementation</p>	<ul style="list-style-type: none"> • Support CE program directors to include elements of QI thinking and facilitate integration of multiple disciplines, embedding in a clinical context in collaboration with The Centre for Quality & Patient Safety. • Promote and develop QI Program expert educators with QI expertise by supporting development of QI teams in each department (including at least one physician and one other health professional) and developing a co-learning model. • Identify and develop QI champions for all departments and nurture/coach to work effectively with practitioners (e.g., same QI language). • Create a CE version of QI skills for physician and specialist audiences (adapt 5 week residency curriculum to QI curriculum). • Build a “Train the Trainer” QI CE Curriculum. • Promote QI training across the education continuum from medical school through to postgraduate and CE training. • Apply QI principles and practice to CE program development and evaluation. • Design a clinically-based CE module that is aimed at teaching QI skills and tools, evaluate its impact and disseminate its finding as a model for delivering CE for QI training. • Assist program planning committees to work through PDSA cycles on issues that arise with their CE programs.
5. Promote Patient and Public Engagement	<p>5-1 Integrate patient and public engagement across the CPD portfolios and promote its importance throughout the Faculty</p> <p>5-2 Build capacity for PPE and develop a cadre of health practitioners to respond to patient needs</p>	<ul style="list-style-type: none"> • Conduct an environmental scan to better understand the models and partnerships that have been successful in PPE engagement. • Establish a PPE Committee with patient, public and provider representation. • Collaborate with patients and consumers to develop / adapt effective CE curriculum, programming and modalities for PPE engagement. • Engage and train providers to become teachers, in particular for teaching and supporting patient self-management. • Establish local PPE strategies that work that could be disseminated provincially. • Create better avenues for academic promotion through PPE. • Establish awards to promote PPE excellence. • Develop a working tool kit to enhance patient self-management education.
6. Promote Global and Indigenous Health	<p>6.1 Develop strategic plan for CE in Global Health, which is interdisciplinary, scholarly and focuses on vulnerable populations, with initial emphasis on Refugee, Indigenous and international populations</p> <p>6.2 Design, develop implementation of CE event in refugee health</p> <p>6.3 Design, develop implementation of CE event in Indigenous health</p> <p>6.4 Explore international scholarly activities</p>	<ul style="list-style-type: none"> • Develop goals and objectives for global health initiatives in CPD with emphasis on indigenous and refugee health. • Develop needs assessments for Indigenous Health and Refugee Health to identify learning priorities and identify stakeholders. • Explore networks with international organizations and other Canadian and International Universities. • Promote education in refugee and indigenous health through lectures, publications and social media.

MEASURABLE OUTCOMES	ACHIEVEMENTS
<ul style="list-style-type: none"> • Number of faculty trained to deliver QI curriculum in each department. • Number of programs addressing QI curriculum delivered and assessment of target audience. • Number of clinically based CE programs which specifically address and support QI approaches and tools. 	<p>IDEAS 2-day introductory program</p> <ul style="list-style-type: none"> • Collaboration of 6 Ontario Universities and IDEAS • Funded by MOHLTC • Lead in development and dissemination of Needs Assessment • U ofT CPD Delivery of 8 programs over 2 years - >360 participants; interprofessional audience <p>Application of QI principles to CPD</p> <ul style="list-style-type: none"> • Department of Medicine –new model for delivering continuing education – integration of QI and patient safety content into CPD initiatives e.g. divisional annual research and education days • Department of Psychiatry – e.g. integration of AAMC Ae4Q program • Adoption of Choosing Wisely Program in Medicine and Family Medicine <p>Faculty –Resident Co-Learning Curriculum in QI – Programs led by Department of Medicine and Department of Paediatrics</p>
<ul style="list-style-type: none"> • Development of a self-management tool kit. • Completion of the environmental scan. 	<p>CPD activities re: patients and public</p>
<ul style="list-style-type: none"> • Plan a biannual conferences for North American Refugee Health and Indigenous Health • Advocate for refugee and indigenous health through membership in national and international organizations, invited lectures, social media and scholarly publications 	<p>North American Refugee Health Conference held in 2015</p> <p>Indigenous Health Conferences held in 2014 and 2016 Job fairs health in conjunction with the conference</p> <p>Scholarly Grants: Winter 2014 CIHR Dissemination grant towards knowledge transfer and dissemination for the Indigenous Health Conference; 2015 Royal College Professional Development grant for book on Indigenous Health.</p> <p>Dr. Banerji is the Aboriginal Child Champion with the Canadian Paediatric Society since 2011, President and co-founder of the new North American Refugee Providers Society in 2015 and has authored peer-reviewed articles and presented nationally through lectures and media appearances on indigenous and refugee health.</p>