



PHYSICIAN HEALTH *2019* SYMPOSIUM

Tuesday, June 11, 2019

Peter Gilgan Centre for Research and Learning

*Supporting
physician health
across the continuums
of time, places and cultures*



UNIVERSITY OF TORONTO
FACULTY OF MEDICINE

SickKids[®]

Physician Health Symposium:

Supporting physician health across the continuums of time, places and cultures

Program

Location Peter Gilgan Centre for Research and Learning | 2nd Floor, 686 Bay St, Toronto
Date and Time Tuesday, June 11th, 2019 | 8:30 am to 3:30 pm

Time	Agenda	Presenter(s)	Location
8:30 am 30 mins	Registration Breakfast Poster Viewing – See pages 6-9		Foyer Gallery
9:00 am 5 mins	Introduction	Dr. Julie Maggi Co-Chair, Planning Committee	Auditorium
9:05 am 10 mins	Opening Remarks	Vice Dean Salvatore Spadafora Post MD Education	Auditorium
9:15 am 15 mins	Welcome Address	Dean Trevor Young Faculty of Medicine	Auditorium
9:30 am 45 mins + 15 min	Being Valued and Supported: The key to sustaining our wellbeing Moderated Q&A by: Dr. Tony Pignatiello Co-Chair, Planning Committee	Dr. Jo Shapiro Surgeon, Brigham and Women's Hospital, Boston Associate Professor of Otolaryngology, Harvard Medical School	Auditorium
10:30 am 30 mins	Break Poster Viewing – See pages 6-9		Gallery
11:00 am 60 mins	Workshops – See pages 10-11		Multiple Locations
12:00 pm 75 mins	Lunch Poster Viewing – See pages 6-9		Gallery

Physician Health Symposium:

Supporting physician health across the continuums of time, places and cultures

Program

Location Peter Gilgan Centre for Research and Learning | 2nd Floor, 686 Bay St, Toronto
Date and Time Tuesday, June 11th, 2019 | 8:30 am to 3:30 pm

Time	Agenda	Presenter(s)	Location
1:15 pm 60 mins	Oral Presentations – See pages 12-20		Multiple Locations
2:15 pm 15 mins	Break		Foyer
2:30 pm 45 mins	Panel Discussion: Embracing wellness in our spaces Moderated by: Dr. Brian Hodges Executive Vice President Education & Chief Medical Officer, University Health Network	Ms. Karli Farrow Senior Vice President, Strategy, People and Corporate Affairs, Trillium Health Partners Dr. Joshua Tepper President and CEO, North York General Hospital Dr. Ari Zaretsky Vice President Education, Sunnybrook Health Sciences Centre	Auditorium
3:15 pm 10 mins	Closing Remarks	Vice Dean Patricia Houston MD Program	Auditorium
3:25 pm 5 mins	Farewell	Dr. Tony Pignatiello Co-Chair, Planning Committee	Auditorium
3:30 pm	Adjournment		

KEYNOTE SPEAKER



Jo Shapiro, MD, FACS

Surgeon, Department of Surgery, Brigham and Women's Hospital
Associate Professor of Otolaryngology, Harvard Medical School

Dr. Shapiro is a surgeon at the Brigham and Women's Hospital (BWH) in Boston and an associate professor of otolaryngology at Harvard Medical School. In 2008, she founded the BWH Center for Professionalism and Peer Support where she served as the director for over 10 years. During that time the Center became a model for institutions seeking methods to enhance trust and respect and helping improve clinician wellbeing. She serves on the Ethics and Professionalism Committee of the American Board of Medical Specialties and has held multiple educational leadership roles including: senior associate director of Graduate Medical Education for Partners HealthCare, founding scholar of the Academy at Harvard Medical School, and president of the Society of University Otolaryngologists. She was one of BWH's first woman division chiefs. She serves on the faculty of the Harvard Leadership Development for Physicians and Scientists. She has an active surgical practice treating adults with oropharyngeal dysphagia. She was named as a finalist for the Schwartz Center Compassionate Caregiver Award. She is involved in global health medical education and training. Dr. Shapiro received her BA from Cornell University and her MD from George Washington University Medical School. Her general surgery training was at UC San Diego and then UCLA. She did her otolaryngology training at Harvard, followed by a year of a National Institute of Health Training Grant Fellowship in swallowing physiology. She has been a faculty member in the Department of Surgery at BWH since 1987. She is married to an internist, and they have three children.

PANEL MODERATOR



Brian Hodges, MD, PhD, FRCPC

Executive Vice President Education & Chief Medical Officer, University Health Network

Brian D. Hodges, MD, PhD, FRCPC is Professor in the Faculty of Medicine and at the Ontario Institute for Studies in Education at the University of Toronto; the Richard and Elizabeth Currie Chair in Health Professions Education Research at the Wilson Centre and Executive-Vice President Education and Chief Medical Officer at the University Health Network (Toronto General, Toronto Western, Princess Margaret, Toronto Rehab Hospitals and the Michener Institute). He is a practicing psychiatrist and teacher. His research focuses on assessment, competence, compassion and the future of the health profession. His work has been recognized with the Association of American Medical Colleges Flexner Award (2015) and the Karolinska Institutet Prize for Research in Medical Education (2016).

PANELISTS



Karli Farrow

Senior Vice-President, Strategy, People and Corporate Affairs, Trillium Health Partners

Karli Farrow is a leader who has been a part of transformation designed to improve public services in Ontario for over fifteen years. She is the Senior Vice-President, Strategy, People and Corporate Affairs and is accountable for leading critical enabling functions including strategy and project management, human resources, organizational development, public affairs and corporate governance. Karli joined the previous Credit Valley Hospital and Trillium Health Centre in 2009 and in 2011 provided project leadership to support the merger of the two organizations. Since that time she has led innovative and highly engaged processes with people across the organization and in the community to achieve the strategic mission of delivering a new kind of health care for a healthier community.

Prior to joining Trillium Health Partners, Karli worked for a health care consulting company where she led critical projects focused on reducing wait times and improving chronic disease management. She has also served in senior advisory roles for the government of Ontario, including Director of Policy for the Premier of Ontario and Chief of Staff to the Minister of Health and Long-Term Care. In these roles she worked to develop and implement strategies to improve access to care and the long-term sustainability of the health care system in Ontario.

She is a member of the Board of Shared Services West, a health care shared services organization and serves as the Ontario Hospital Association's Pension Observer on the Health Care of Ontario Pension Plan (HOOPP) Board of Trustees.

Karli is a dedicated mentor to emerging leaders and young professionals and is passionate about helping people realize their potential.



Joshua Tepper, MD, FCFP, MPH, MBA

President and Chief Executive Officer, North York General Hospital

Dr. Tepper is a family physician and the President and Chief Executive Officer of North York General Hospital. Previously he was the President and CEO of Health Quality Ontario (HQO, an arm's length agency of the provincial government).

Prior to HQO, Dr. Tepper was the inaugural Vice President of Education at Sunnybrook Health Sciences Centre. As Vice President, he was responsible for Sunnybrook's educational strategy and programming for learners, physicians and staff, patients and their families and the community. Prior to joining Sunnybrook, Dr. Tepper was Assistant Deputy Minister (ADM) in the Health Human Resources Strategy Division of the Ministry of Health and Long-Term Care. As the ADM he led the HealthForceOntario health human resources strategy to ensure that Ontarians have access to the right number and mix of qualified health care providers, now and in the future.

In addition to his involvement in health policy and research at the provincial level, Dr. Tepper has also been active on a national scale as the senior medical officer for Health Canada, an adjunct scientist at the Institute for Clinical Evaluative Sciences (ICES), and a research consultant for the Canadian Institute of Health Information (CIHI). He has received several provincial and national awards for his leadership in these positions.

Dr. Tepper has always remained in active practice serving marginalized populations and taking on clinical leadership roles. He has served as the Medical Director for the Inner City Health Associates and President of the Inner City Family Health Team. He was also previously the Vice-President of the Society of Rural Physicians.

He completed Medical School at McMaster University and his residency in Family Medicine at the University of Toronto. Dr. Tepper holds a degree in Public Policy from Duke University, a Masters of Public Health from Harvard, and then completed his executive Master's of Business Administration at the Richard Ivey School of Business where he was the Valedictorian.



Ari Zaretsky, MD

Vice President of Education, Sunnybrook Health Science Centre
Full Professor, Department of Psychiatry, University of Toronto
Chief of Psychiatry, Sunnybrook Health Sciences Centre

Dr. Ari Zaretsky is Sunnybrook Health Science Centre's Vice President of Education, overseeing the training experience of 4,000 student learners from 30 health disciplines coming from over 50 different countries. He is a Full Professor in the Department of Psychiatry at the University of Toronto and Chief of Psychiatry at Sunnybrook Health Sciences Centre. He completed his fellowship training in cognitive-behavioural therapy at Harvard and from 2007-2012, Dr. Zaretsky served as the Director of Medical Education at the Centre for Addiction and Mental Health was also the Residency Program Director in the Department of Psychiatry at the University of Toronto (overseeing the largest psychiatry residency training program in North America). He contributed a great deal to psychiatric residency training throughout Canada and played an instrumental role in transforming and modernizing the U of T psychiatry residency training program, resulting in the program winning the Professional Association of Residents of Ontario Program Excellence Award in 2013.

Dr. Zaretsky is a Founding Fellow of the Academy of Cognitive Therapy and has a national reputation as a teacher and educator in CBT. He has won the 2010 Association of Chairs of Psychiatry of Canada (ACPC) Award for Excellence in Education. In 2012, Dr. Zaretsky won the Faculty of Medicine Sarita Verma Award for Advocacy and Mentorship in Postgraduate Education.

Dr. Zaretsky was recognized as one of the Best Doctors in Canada in 2002-2003 and again in 2007-2008. He has received peer-reviewed research funding from the Canadian Institute of Health Research (CIHR). His main areas of research and publications include CBT for bipolar disorder, CBT training and supervision, medical leadership and residency education.

POSTERS (unmoderated viewing)

8:30 am, 10:30 am, 12:00 pm | Gallery

Poster Title and Abstract	Author(s)
<p>Poster #1 – Wellness Themes Emerging from the 2018 National Resident Survey</p> <p>There is a lack of empirical data on concerns faced by Canada’s resident doctors. To aid in addressing issues of resident wellness, Resident Doctors of Canada (RDoC) administered a bilingual survey to its membership in April 2018. The survey was conducted online and distributed via email link by RDoC’s seven provincial partners. It contained 70 questions developed collaboratively by resident doctors training at 13 faculties of medicine across Canada. The wellness section included 20 questions assessing themes of work-life-balance, burnout, and harassment. All previously tested and validated question content is available in the public domain. Only 34.2% of residents report that their work schedule leaves them enough time for their personal and/or family life. Over 50% of residents experience definitive symptoms of burnout, despite having high resiliency scores. Astonishingly, more than 75% of residents have experienced at least one form of harassment in the preceding year, yet only 10% of those used their institutions’ resources for support. The results of the RDoC survey will be used to develop advocacy efforts with stakeholders in physician health and wellness.</p>	<p>Dr. Tehmina Ahmad, Dr. Michael Arget, Dr. Melanie Bechard, Dr. Adele Duimering, Dr. Alexandra Fottinger, Dr. Jordyn Lerner</p>
<p>Poster #2 – Perceptions of a wellness challenge in a family medicine residency program</p> <p>In recent years, physician and resident wellness has come into focus as an important aspect of both medical education and professional development. Qualitative analysis reflects residents’ desire for a learning environment that encourages camaraderie, mentorship by faculty, availability of mental health services, as well as a supportive culture (Daskivich et al., 2015). These values are reflected in the National Wellness Challenge hosted annually by The Canadian Federation of Medical Students (CFMS), which promotes healthy habit development and is well-evaluated by participants (Lip & Fitzpatrick, 2017). At North York General Hospital (a teaching site for the University of Toronto’s Family Medicine program), we chose to create a month-long “Winter Wellness Challenge” based on the CFMS concept. The month was divided into one-week challenges including nutrition, mental health, physical activity, and work-life balance. Residents participated within teams which included physician preceptors, allied health and office staff. Resident participants felt that the experience demonstrated faculty support for their wellness, and that they saw how their faculty mentors valued self-care.</p>	<p>Dr. Madelaine Baetz-Dougan, Dr. Alexandre Horobjowsky, Dr. Allyson Merbaum</p>

Poster Title and Abstract	Author(s)
<p>Poster #3 – Integration of Exercise Medicine as a Longitudinal Theme in Undergraduate Medical Education</p> <p>Purpose: Most Canadian medical schools do not adequately address the role of physical activity in preventing and treating disease as part of the formal curriculum. We sought to develop a longitudinal "Exercise Medicine" curriculum that could be integrated into the pre-clerkship Foundations Curriculum at the University of Toronto.</p> <p>Method: An informal review of the literature was used to establish preliminary proposed competencies for undergraduate medical students. These competencies were further reviewed by local content experts, with feedback incorporated. Each competency was then incorporated into weekly systems-based themes for longitudinal delivery over the two-year pre-clerkship curriculum. Content was developed using a variety of media (lectures, online modules, case-based discussions, interactive exercises, critical reflections, videos).</p> <p>Findings: Variety in content delivery methods allowed for seamless integration into twenty-three of seventy-two available weeks within the curriculum. Educating future physicians on the importance of physical activity in the prevention and treatment of disease and maintenance of personal well-being is a feasible addition to undergraduate medical education.</p>	<p>Dr. Ainsley Kempenaar, Dr. Kim Coros</p>
<p>Poster #4 – Investing in the Wellness of our Future Physicians: A Pilot Collaborative Process to Support Unmatched Students</p> <p>There has been a sharp rise in the rate of unmatched Canadian Medical Graduates (CMGs) during the first iteration of the Canadian Resident Matching Service (CaRMS), going from 133 in 2015 to 222 in 2018. Unmatched students face many challenges stemming from such an early identity-shattering "failure". These include stigma, uncertainty surrounding their career aspirations, and financial pressures. Many CMGs extend their clerkship and re-apply the following year, but they then find themselves on an isolated path without peer support or institutional guidance. A group of previously unmatched students collaborated with the Ontario Medical Association Physician Health Program and the Office of Health Professions Student Affairs at the Faculty of Medicine, University of Toronto to design and pilot a Wellness Program specifically designed to address the unique needs of unmatched CMGs. The pilot workshop focused on implementing evidenced based performance psychology to prepare for upcoming interviews. During the workshop, additional concerns emerged, and we incorporated this feedback to develop a more robust program for the incoming group.</p>	<p>Dr. Akanksha Kulshreshtha, Dr. Peter Farag, Dr. Jon Novick, Dr. Joy Albuquerque, Ted Bober, Dr. Antonio Pignatiello</p>

Poster Title and Abstract	Author(s)
<p>Poster #5 – Medical improv: an innovative approach to CanMED competencies, wellness and resiliency</p> <p>Improvistional theatre is an innovative tool for health profession education. It is collaborative storytelling, not comedy. The method is fun but the content is serious. This seminar will explore how medical improv through serious play can build resiliency, promote physician wellness and combat burnout while aligning with Royal College core CanMEDS competencies.</p>	<p>Dr. Rikin Patel, Dr. Jeremy Rezmovitz</p>
<p>Poster #6 – Exhaustion and Disengagement: Understanding the Resident Experience (EnDURE)</p> <p>Exploring burnout and wellness interventions using a qualitative survey and the Stanford Professional Fulfillment Index to evaluate professional fulfillment, workplace exhaustion, and interpersonal disengagement in family medicine residents across all teaching sites at the University of Toronto.</p>	<p>Dr. Laura Pellow, Dr. Alvin Szeto, Dr. Navsheer Toor</p>
<p>Poster #7 – I want a white doctor: Building Student Skills To Deal With Health Care Provider Discrimination</p> <p>Background: Health care providers frequently encounter challenging patient situations. Opportunities to enhance learning and encourage healthy discussions frequently arise but are rarely leveraged due to the unavailability of formal curriculum space. On June 2017 at a local family health clinic, a video capturing a difficult patient encounter shocked Canada. It illustrated re-emerging 'everyday racism', directed towards health care providers of diverse backgrounds.</p> <p>The Faculty of Medicine at Mississauga Academy of Medicine, University of Toronto delivered a non-curricular, interactive lunch'n'learn for first and second year medical students. Interprofessional facilitation of discussions on resiliency and deescalation techniques followed the video involving the difficult patient encounter.</p> <p>Based on evaluation questionnaires, the facilitators learned that the depiction of real-life scenarios and exploration of current topic were highly valued by the attendees. Many felt that the techniques learned could be applied to their future practice. Non-curricular sessions can be utilized for timely response to current issues and tangible learning space for medical trainees.</p>	<p>Hayeong Rho, Dr. Dhanjit Litt, Sonya Pak, Melissa Mann, Bryan Abankwah, Dr. Allison Freeland</p>

Poster Title and Abstract	Author(s)
<p>Poster #8 – Evaluating Student Perceptions of the Resilience Curriculum within the University of Toronto's MD Program: A Mixed-Methods Study</p> <p>Medical students face unique challenges as they transition to physicians. In order to cultivate resilience, the University of Toronto launched the Resilience Curriculum (RC), consisting of workshops and modules delivered in each pre-clinical year. We sought to elucidate student perspectives of the RC for future program refinement. Workshop evaluations containing short-answer and 5-point Likert scale questions were distributed (n = 518 students). Two focus groups (FG) (n = 12) were conducted and transcribed. Workshop short-answer evaluations and FG transcripts were analyzed using thematic content analysis. Likert scales demonstrated high workshop satisfaction. Analysis showed heterogeneity in perceptions due to varying student backgrounds. Facilitators played a key role in perceived benefit from workshops. Students appreciated the RC, recognizing that resilience is a challenging construct/skill to teach. Data also offered feedback on the techniques imparted, the delivery methods, and ideas for new initiatives. Future work should study the RC's significance among other mental health services.</p>	<p>Samantha Yang, Arshia Javidan, Yujin Li, Travis Sutherland, Joanne Leo, Dr. David Rojas</p>

WORKSHOPS

11:00 am – 12:00 pm

When your Patient is a Physician: Caring for Residents and Clinical Fellows

EVENT ROOM 2B – 2nd Floor

Addressing one's own health needs as a medical trainee can sometimes be deprioritized amidst the demands of training. This will be a panel discussion between various health care professionals who have experience caring for residents and clinical fellows. We will discuss the rewards and challenges of working in the area of physician health and address issues that are important to consider when providing health care to medical trainees. The panel will include a family physician, psychiatrist, psychologist with specialty working with ADHD and Learning Disabilities, physiotherapist, and a psychologist who works as a wellness consultant at U of T's Postgraduate Wellness office.

Presenters: Dr. Anita Gupta, Wellness Consultant, Postgraduate Wellness Office (U of T), Dr. Michael Allan, Private Practice, Shannon Littlejohn-Burnes, Resilience Physiotherapy, Dr. Christopher Richards-Bentley, University of Toronto, Dr. Esther Rosenthal, University of Toronto

Enough About Burnout, Let's Talk Wellness: Strategies to fire up faculty and residents

AUDITORIUM – 2nd or 3rd Floor Access

While physicians and residents have been experiencing burnout for many years, physician burnout has been receiving increased attention in the literature and in the media as the evidence for its prevalence and concern regarding its potential for negative consequences builds. This session will define and discuss the prevalence of burnout as well as review common drivers of this phenomenon in general and in Medicine specifically. The relevance of Burnout related to physician wellness, clinical performance and career trajectory will be reviewed. Tools for evaluating and assessing levels of burnout will be introduced along with a review of their practical value and limitations. This session will describe strategies for promoting physician wellness. More specifically we will propose ways to integrate the concepts and interventions into a residency program and how our site has developed a resident wellness curriculum. We will share our challenges and successes in its development and implementation, and highlight the role of narrative and critical reflection within the wellness curriculum.

Presenters: Dr. Erin Bearss, Mount Sinai Hospital, Dr. Melina Forte, Mount Sinai Hospital, Dr. Lindsay Herzog, University of Toronto

Finding Meaning in Suffering: an experiential workshop on rediscovering your compassion

EVENT ROOM 2A – 2nd Floor

We physicians encounter physical, emotional, spiritual, and existential suffering in our practice that is often beyond our control to reverse completely. This may generate negative feelings within us. Our responses can range from distancing ourselves from the patient to over involvement with increased anger and frustration. Finding meaning in experience is a fundamental human desire. Recurrent failure to do so can lead to compassion fatigue, burn out, addiction and unprofessionalism. This facilitated workshop uses the art of story weaving (narrative and improvisation) to safely explore difficult and painful emotions we physicians might experience in our practice. The facilitators demonstrate the spirit of motivational interviewing namely compassion, acceptance, partnership and evocation to engage

participants in the process of story weaving. We will also evoke the participants' experience and wisdom to discuss how we can support ourselves to find meaning when we witness suffering. The session concludes with the co-creation of ways to be aware of these effects on ourselves and how we can be renewed by finding meaning in our practice.

Presenters: Dr. Peter Selby, CAMH, Rosa Dragonetti, CAMH

Improv Rx: On Structural Change, Medical Culture, and Countering the Resilience and Self-Care Narrative Through Improv

MULTIMEDIA ROOM – 3rd Floor

Canadian health professionals are struggling with increased workloads and decreased sense of self-efficacy. This stress is exacerbated by a pervasive culture of competitiveness, perfectionism, and certainty, contributing to a high degree of workplace burnout. This workshop proposes a structural/cultural diagnosis of “burnout” examining how exhaustion, ineffectiveness, and detachment are linked to processes of epistemic subordination, systemic hierarchies, and relations of power. Our analysis contrasts popular discourses on resilience and self-care, wrought with stereotyped remedies that personalize a systemic issue with deep structural and historical roots. Through immersive, experiential learning involving purposeful play, we highlight practices of improvisation that facilitate an understanding of burnout as relational, cultural, and structural. We demonstrate how the “rules” of improv can combat burnout through perspective taking, spontaneity, generosity, and collective action. We conclude with an invitation for participants to critically reflect on the role of purposeful play through improv as a strategy for culture change. Overview: 10min intro; 35min improv; 15min discussion

Presenters: Dr. Suze Berkhout, Department of Psychiatry, University of Toronto, Dr. Jeremy Rezmovitz, Sunnybrook Hospital, Elizabeth Wooster, Faculty of Medicine, University of Toronto, Dr. Judith Peranson, St. Michael's Hospital, Hartley Jafine, University of Toronto

We are in this together: exploring cultural change in Medicine

EVENT ROOM 1 – 2nd Floor

The quality of patient care and safety is at risk without a healthy medical community. It has been well-documented that physician burnout has its roots in medical training. In response to this growing concern, many medical schools have undertaken to provide wellness and resilience programming, including at the University of Toronto. However, learners have expressed frustration that the onus of resilience appears to be primarily on the individual while the role of cultural and systems issues remain unchallenged. We agree, and increasingly, faculty and practising physicians are sharing similar feelings of isolation and responsibility for managing distress. By enlisting all levels of the medical community, we can work together towards positive change. Nine organizational strategies developed by Shanafelt and Noseworthy to promote engagement and reduce burnout will be explored. A leadership model that can empower every level of the medical hierarchy to promote change will be introduced in this workshop. This workshop will be interactive bringing trainees and faculty together to generate ideas to enhance cultural change.

Presenters: Shayna Kulman-Lipsey, Manager of Counselling Services, OHPSA (U of T), Dr. Andrea Levinson, Psychiatrist-in-Chief, Health and Wellness (U of T), Dr. Leslie Nickell, Medical Director, PA Program (U of T), Dr. Rikin Patel, Clinical Assistant Professor, University of Toronto, Sheza Qayyum, University of Toronto

ORAL PRESENTATIONS

1:15 pm – 2:15 pm | Room Assignments

Theme	Title	Presenter(s)	Location
Navigating personal health and learning needs throughout your medical life	Is there a connection between mindfulness-based interventions and medical student mental health? A systematic, meta-analytic review.	Dr. Paul Ritvo	EVENT ROOM 1 Moderated by: Dr. Peter Selby
	Evaluating a Novel Resident Wellness Program	Linor Berezin	
	Afterhours: An initiative in narrative medicine to build resilience in junior trainees	Dr. Jonah Himelfarb, Dr. Leah Kosyakovsky	
	Re-entry to Practice for a Surgeon after Illness	Dr. Hugh Scully	
Program development to support physician/trainee health	From where we've come and where we're going: An Update of a Longitudinal MD Resilience Curriculum	Joanne Leo	AUDITORIUM Moderated by: Dr. Heather Flett
	Teaching "Wellness in Medicine" to Medical Students: A Self-Learning Module	Dr. Marisa Leon-Carlyle, Dr. Lu Gao	
	Customizing your wellness program: Lessons learned from using an appreciative inquiry approach	Simone Lebeuf	
	Implementation of Balint Groups: Our Experience in Pediatrics	Dr. Dayae Jeong	
The culture of medicine and its intersection with physician/trainee health	"Going First": Combatting the Shame that Underlies the Hidden Curriculum	Dr. Hilary Offman	MULTIMEDIA ROOM Moderated by: Shayna Kulman-Lipsey
	A Trifecta of Teamwork: An Overview of Three Student-led Wellness Initiatives in the Faculty of Medicine, University of Toronto	Anna Chen, Fahad Qureshi, Linlei Ye	
	Distress in orthopaedic trainees and attending surgeons. A Canadian National Study	Dr. Tosan Okoro	
	A review of resilience in pediatric medicine.	Dr. Damien Noone	
The culture of medicine and its intersection with physician/trainee health	Supporting Medical Student Wellness through Reflection and Dialogue	Dr. Susanna Talarico, Dr. Nirit Bernhard	EVENT ROOM 2 Moderated by: Dr. Suze Berkhout
	Development of initiatives to promote physician engagement and wellness at CAMH	Dr. Treena Wilkie	
	An ethical analysis of the experience of International Medical Graduates (IMGs) in Ontario	Dr. Asma Fazal	
	Resident Experiences of Workplace Violence	Dr. Sarah Smith, Dr. Laeticia Eid	

ORAL PRESENTATIONS

1:15 pm – 2:15 pm | Abstracts

Theme	Titles and Abstracts	Author(s)
Navigating personal health and learning needs throughout your medical life	<p>Is there a connection between mindfulness-based interventions and medical student mental health? A systematic, meta-analytic review.</p> <p>This presentation reviews randomized controlled trials (RCTs) where mindfulness-based interventions were assessed in reducing depression in medical school students. An electronic search of 5 databases (MEDLINE, PsychINFO, CINAHL, Web of Science, PubMed) was conducted. RCTs published between January 2000-January 2019 were critically reviewed that assessed the effects of mindfulness-only or integrated mindfulness-based psychotherapy programs aimed at reducing depression and suicidal ideation. N = 24 studies with 2254 participants met inclusion criteria. Study quality and risk of bias were assessed using the Cochrane Collaboration Tool. The meta-analyses included a computation of mental health summary effects using a random effects statistical model summarizing the standard mean difference. Meta-regression analysis examined key intervention components (e.g., duration, delivery modality, therapist support) to quantify the proportion of variance explained by each component on mental health outcomes. Results suggest mindfulness interventions can be key in supporting medical student mental health in terms of reducing depression risks and depressive symptoms.</p>	<p>Dr. Paul Ritvo, Dr. Justine Giddens, Dr. Jeff Daskalakis, Megan Kirk Chang</p>
	<p>Evaluating a Novel Resident Wellness Program</p> <p>The University of Toronto Department of Obstetrics and Gynaecology developed a structured Resident Wellness Program (RWP) in 2011. The program includes components focused upon team support, personal relationships, and personal health with specific initiatives including workshops, lectures, 1:1 counselling, emergency support and social events.</p> <p>We evaluated this program in order to guide future directions. An anonymous 44-item questionnaire was developed and distributed to current and past residents. A total of 40 current and 17 past residents responded. 80% of current and 88% of past residents felt satisfied or very satisfied with the RWP, with the most useful components being wellness appointments, personal communication post-adverse event with a RWP team member, and referrals to counselling services, but barriers to accessing the program existed. Respondents listed several important ideas for improvement of the program. The survey results will enable us to build on the strengths of the program.</p> <p>Overall, the RWP was favourably received and can serve as a model for other residency programs seeking to develop initiatives that promote and support resident wellbeing.</p>	<p>Linor Berezin, Dr. Michele Farrugia, Dr. Janet Bodley</p>

Theme	Oral Presentation Titles and Abstracts	Presenter(s)
Navigating personal health and learning needs throughout your medical life	<p>Afterhours: An initiative in narrative medicine to build resilience in junior trainees</p> <p>Rising levels of burnout, and the recognition of its far-reaching effects, have generated an impetus for better support for health care providers. Junior residents represent a population at risk of struggling with their new roles within the healthcare system. To address this, we plan to launch a resident-moderated, peer-support group to promote reflection through narrative medicine.</p> <p>A cross between Balint groups and "Ice Cream Rounds"², Afterhours is designed to destigmatize challenges faced by trainees. During monthly sessions, residents will be encouraged to reflect on interactions that affected them involving patients, colleagues, friends/family, and the health care system as a whole. After each reflection, a resident-facilitator will guide a discussion about lessons that were learned. Each session will close with a statement highlighting the support services provided by the university.</p> <p>Through these meetings, residents will develop strategies to build resilience while establishing meaningful connections with other trainees. Future directions involve expanding participation across interdisciplinary medical education and measuring the impact of the sessions on trainee wellbeing.</p>	<p>Dr. Jonah Himelfarb, Dr. Leah Kosyakovsky, Dr. Mena Gewarges, Dr. Arnav Agarwal, Dr. Tarek Abdelhalim, Dr. Rebecca Stovel</p>
	<p>Re-entry to Practice for a Surgeon after Illness</p> <p>One afternoon I carried out a successful redo double heart valve operation. The next morning, I was unable to use my hands. The problem was sudden onset of Guillain Barré Syndrome selectively targeting the brachial plexus bilaterally {C-5,6&7}. Severe painful neuritis followed for 6-8 weeks. Motor nerve conduction velocity was reduced to < 10% of normal in both hands. Immune globulin did nothing to mitigate progression, but did produce significant uncomfortable complications. Disability and Office Overhead Insurance was not sufficient and was a confusing, complicated maze. At the time, no rehab program existed in Canada. Neurology predicted minimal neuronal regeneration and recovery. Developing a rehabilitation program from international sources, recovery of normal muscle strength and dexterity and motor nerve conduction to > 95% of normal took 18 months. Return to independent cardiac surgery took another 12 months. Prescription for success included great support from spouse and family, professional colleagues and friends, hospital officials and licensing authorities. The personal formula for success included patience, optimism, resilience, perseverance, courage, determination, faith and continued ability to pursue other police and leadership interests.</p>	<p>Dr. Hugh Scully</p>

Theme	Oral Presentation Titles and Abstracts	Presenter(s)
Program development to support physician/trainee health	<p>From where we've come and where we're going: An Update of a Longitudinal MD Resilience Curriculum</p> <p>In 2016, the initial phase of a resilience curriculum was developed and embedded into the core curriculum of the University of Toronto's MD program. In 2019-2020, the final phase of this curriculum will be introduced to fourth-year students. The Resilience Curriculum (RC) is composed of online modules, workshops, and a Monologues in Medicine series of medical trainee, resident and physician narratives of challenge and triumph. Building a medical community that supports student resilience has been a crucial component of the curriculum.</p> <p>Having been awarded the Medical Psychiatric Alliance grant, enhancements to the curriculum, as well as robust evaluations, have been made possible. Two theory-based evaluations are in progress with the Wilson Centre; one focuses on how the RC has unfolded from the perspectives of developers and implementers of the curriculum, and the other explores faculty's perceptions of wellness/resilience, which we hope will inform ongoing faculty development.</p> <p>Preliminary feedback from focus groups and satisfaction surveys indicate that students believe the RC to be valuable in building self-resilience and fostering a resilient medical community.</p>	<p>Joanne Leo, Shayna Kulman-Lipsey, Dr. Andrea Levinson, Dr. Leslie Nickell, Samantha Yang, Nellie Perret</p>
	<p>Teaching "Wellness in Medicine" to Medical Students: A Self-Learning Module</p> <p>The University of Toronto Medical School identified a need for education on burnout during medical training. In order to increase engagement, previously assigned readings were converted to an electronic self-learning module as part of the second year pre-clerkship Mood and Anxiety Disorders curriculum. Faculty and residents in the Department of Psychiatry determined relevant learning objectives for medical students. One resident reviewed medical student wellness literature, while another created a video interview with faculty discussing their personal experience with depression as a resident. The end product was an 18-slide interactive module defining burnout and depression, outlining how to differentiate between the two wellness disorders, and an overview of the epidemiology of burnout and depression in medical training. The module was implemented in November 2018 and received positive feedback that the module "resonated with students and was enjoyable to complete." Based on the positive feedback, the module will be fully integrated into the University of Toronto's wellness curriculum in other stages of medical school training.</p>	<p>Dr. Marisa Leon-Carlyle, Dr. Lu Gao, Dr. Nikolas Grujich, Dr. Michelle Marlborough, Dr. Matthew Boyle</p>

Theme	Oral Presentation Titles and Abstracts	Presenter(s)
Program development to support physician/trainee health	<p>Customizing your wellness program: Lessons learned from using an appreciative inquiry approach</p> <p>There are a number of physician wellness interventions that exist. However, it is unclear which populations may benefit from which specific strategies, so it can be difficult to apply evidence-based wellness activities to varied clinical environments.</p> <p>Appreciative inquiry is a qualitative method of organization development that is used to understand transformational change in a positive light. It is used to recognize areas that require improvement while also appreciating the successes of an organization. Appreciative inquiry can be a useful tool to conduct a needs assessment of specific learning environments to ascertain what wellness efforts would be most meaningful.</p> <p>Two programs at the University of Toronto, Adolescent Medicine and Paediatrics, have both used this method to inform their trainee wellness activities. Results and lessons learned from these two programs will be shared. Participants will learn how to apply this approach to their own environment as well as review some evidence-based interventions.</p>	<p>Dr. Simone Lebeuf, Dr. Justin Lam, Dr. Joanna Humphreys</p>
	<p>Implementation of Balint Groups: Our Experience in Pediatrics</p> <p><i>Our Rationale and Background</i></p> <p>Balint groups were implemented at the University of Toronto (UofT) Pediatric Residency program in the 2018-2019 academic year. The goal of these groups was to foster resiliency among incoming PGY-1s by helping them to develop strong counselling and debriefing skills and encouraging a strong culture of peer support within the residency group. This was inspired by existing groups in other fellowship and residency programs at UofT.</p> <p><i>The Process</i></p> <p>A proposal was brought to the Postgraduate Medical Education Committee for the UofT Pediatric Residency program and discussed. Session time, location, and frequency, group size, potential facilitators, and evaluation plan were determined through this process.</p> <p><i>Challenges</i></p> <p>Several challenges were faced in implementing Balint groups including finding protected time for residents, selection and capacity building for appropriate facilitators, the loss of a key facilitator, and planning for program expansion.</p> <p><i>Plans for Future</i></p> <p>Prospective benefits of the Balint groups and future plans, including program expansion to other residency years, facilitator capacity building, and program evaluation, will be reviewed.</p>	<p>Dr. Dayae Jeong, Dr. Joanna Humphreys, Dr. Natalie Jewitt, Dr. Justin Lam, Dr. Simone Lebeuf, Lisette Yorke</p>

Theme	Oral Presentation Titles and Abstracts	Presenter(s)
The culture of medicine and its intersection with physician/trainee health	<p>"Going First": Combatting the Shame that Underlies the Hidden Curriculum</p> <p>There exists an assumption that physicians are resilient and successful. Yet physicians also complete suicide to a disproportionate degree relative to the general population. Studies have confirmed this trend for decades and a multitude of recommendations have been proposed with little impact. Most recently, researchers have emphasized the role of the "hidden curriculum" whereby medical values counter to physician wellness are tacitly and powerfully communicated. This talk explores the concept of shame as it underlies the hidden curriculum. It is argued that physicians are particularly vulnerable to dissociating from the shameful parts of themselves that they associate with their distress, choosing to focus instead on their successful identity. The CanMeds Physician Health Guide supports "bottom up" strategies to counter the illusion of the always-resilient physician. It will be argued that in order to modify medical culture, we also need to consider "top down" strategies that recognize the power of those in positions of leadership and influence to combat entrenched shame by "going first" by sharing their own compelling and candid stories of struggle.</p>	Dr. Hilary Offman
	<p>A Trifecta of Teamwork: An Overview of Three Student-led Wellness Initiatives in the Faculty of Medicine, University of Toronto</p> <p>According to a 2017 poll of the University of Toronto (UoT) medical student body (N=43), 67% of students experienced burnout, but only 58% sought help when needed. The complex challenges to achieving wellness among medical trainees demand a call to action. Our presentation will describe an exciting partnership among 3 groups at UoT:</p> <p>1) Student Health Initiatives and Education (SHINE):</p> <p>SHINE is a student-run group that promotes wellness and resilience, academic skills development, and career exploration. In 2017-2018, SHINE engaged 342 students and 15 alumni in 14 unique events.</p> <p>2) ArtBeat</p> <p>ArtBeat is a humanities hub comprised of 14 portfolios that foster creativity, introspection, and expression. ArtBeat facilitates dialogues about the artistic side of medicine using various media, including writings, interviews, and an arts showcase.</p> <p>3) The Resilience Curriculum</p> <p>Resilience Research Coordinators lead a theory-based evaluation of the UoT MD Resilience Curriculum. By assessing its development and implementation, the group aims to build a more resilient medical community.</p> <p>Collectively, these groups aim to make mental health and wellness an ongoing priority for medical students.</p>	<p>Anna Chen, Linlei Ye, Fahad Qureshi, Jocelyn Jia, Lucia Lee, Hilary Pang, Shayna Kulman-Lipsey, Dr. Tony Pignatiello, Dr. Allan Peterkin</p>

Theme	Oral Presentation Titles and Abstracts	Presenter(s)
The culture of medicine and its intersection with physician/trainee health	<p>Distress in orthopaedic trainees and attending surgeons. A Canadian National Study</p> <p>Purpose: To evaluate distress in Canadian orthopedic attending surgeons and trainees.</p> <p>Methods: One hundred and twenty trainees (residents and fellows) and 355 attending orthopedic surgeons completed an online survey in November 2018 using validated instruments; Expanded Physician Well-Being Index (ePWBI) for attending surgeons, and the Resident/Fellow Well-Being Index (PWBI) for trainees. Parental status, gender, number of years in practice, and practice setting (academic vs. community) was also collated. ePWBI >3 and PWBI score >5 were the thresholds for being 'distressed'.</p> <p>Results: Response rate was 31.2% (335/1138) for attending surgeons and 24.3% (120/493) for trainees. 55.4% of attending surgeons and 40% of trainees screened positive for distress. In both groups, having dependents under age 18 was not a risk factor, nor was gender. Practice location was not a risk factor for attending surgeons. 'Distressed' attending surgeons had spent a significantly lower median number of years in practice (n=197; median value 11 years, vs. 'not distressed'; n=157; median value 16 years, p=0.004)</p> <p>Conclusion: A high rate of distress exists amongst Canadian attending orthopedic surgeons. Appropriate intervention strategies to address this are required.</p>	Dr. Tosan Okoro, Dr. Carrie Kollias, Dr. Ted Tufescu, Dr. Veronica Wadey
	<p>A review of resilience in pediatric medicine.</p> <p>Background. Burnout is common in healthcare; mitigating burnout is critical in paediatric training programs. Interventions to date have had limited success. Establishing protective factors early on is critical for developing adaptive behaviors in spite of adversity (resilience).</p> <p>Objective. To review pediatric literature on resilience, including associations and frameworks for its promotion.</p> <p>Methods. All studies examining resilience in healthcare were included. Exclusion criteria included studies of non-physicians or of disasters/war.</p> <p>Results. 31 studies were included. Burnout in pediatrics was high (40-60%) and associated with poor patient care, problem-based learning, and consistent exposure to stressors. Resilience was associated with decreased burnout. Personal strategies reported as helpful for mitigating burnout were not related to better outcomes. Factors contributing to physician well-being included efficiency of practice, culture of wellness, and personal resilience.</p> <p>Conclusion. Resilience is best observed through a child-development lens. Strategies to mitigate burnout should focus on promoting resilience throughout the career at both individual & institutional levels.</p>	Dr. Damien Noone, Natasha Jawa, Claire Gallibois, Blathnaid McCoy, Rabia Khan, Tina Martimianakis

Theme	Oral Presentation Titles and Abstracts	Presenter(s)
The culture of medicine and its intersection with physician/trainee health	<p>Resident Experiences of Workplace Violence</p> <p>Workplace violence against physicians, including residents, is common. The prevalence of resident experiences of patient assault is specialty-dependent, ranging from 5% in pediatrics to 64% in psychiatry. These events can have serious effects on resident well-being and academic performance. However, little information exists on best practices in educating and supporting residents at risk of workplace violence. Despite often having to manage violent incidents, residents also receive little to no training on how to approach decision-making around whether or not to pursue legal prosecution in the event of violence against themselves or other clinical staff. This presentation will review prior research on the topic of resident experiences of patient assault with a focus on best practice recommendations for resident education, prevention, and program response. The University of Toronto Department of Psychiatry guidelines on responding to adverse events in residency training will also be discussed.</p>	<p>Dr. Sarah Smith, Dr. Laetitia Eid, Dr. Alvin Keng</p>
	<p>Development of initiatives to promote physician engagement and wellness at CAMH</p> <p>The Centre for Addiction and Mental Health (CAMH), an academic mental health hospital, formed a Physician Engagement, Wellness and Excellence Committee in 2017 and undertook a number of initiatives to encourage a culture that values and promotes personal wellness and resilience, mutual respect, trust and teamwork through organizational change.</p> <p>The initiatives detailed in this presentation include a peer support program, promoting professionalism, mentorship opportunities, the development of communities of practice, training to enhance professional advancement, and promoting the use of technology to enhance efficiency of practice.</p>	<p>Dr. Treena Wilkie, Dr. Sumeeta Chatterjee, Dr. Sarah Colman, Dr. Jason Joannou, Dr. Susan Quesnel, Dr. Ivan Silver, Dr. Vicky Stergiopoulos, Dr. Tania Tajirian</p>

Theme	Oral Presentation Titles and Abstracts	Presenter(s)
The culture of medicine and its intersection with physician/trainee health	<p>An ethical analysis of the experience of International Medical Graduates (IMGs) in Ontario</p> <p>In the past ten years, a large number of internationally educated health professionals, including medical doctors, also referred to as IMGs, immigrated to Canada. Despite receiving special treatment through the point system in the skilled worker category, and getting fast track immigration, thousands of IMGs are unable to qualify as a physician in Canada and practice their profession for which they have spent many years in studying. Even though there is an ongoing crisis of physician shortage, these IMGs are continuously experiencing difficulties with the licensing system and remain unemployed for their education and professional background. This situation is ethically problematic on multiple fronts. IMGs may face isolation, career dissatisfaction, and even discrimination, usually as a result of their immigrant status. These issues are violating the principles of societal hospitality and non-discrimination. It is vital for Canada to ensure qualified IMGs are able to practice their profession. It is important not only for addressing labor shortages, but also in demonstrating Canada's commitment to fairness, equity, and transparency for all individuals.</p>	Dr. Asma Fazal
	<p>Supporting Medical Student Wellness through Reflection and Dialogue</p> <p>The Royal College challenges educators to prepare physicians to balance personal and professional priorities, incorporate self-care, and develop personal and professional awareness and insight. A longitudinal curriculum was developed as part of the Portfolio component of the Foundations and Clerkship programs, focusing on wellness and resiliency. Students engage with residents and faculty and the formal curriculum during small group meetings. They are provided with a description of the session and come prepared to describe an experience related to the theme, and share their reflection on it.</p> <p>Sessions include:</p> <p>Year 1: Physician as Person</p> <p>Year 2: Mental and Physical Health and Letter to my Future Self</p> <p>Year 3: Resilience and Wellness</p> <p>Year 4: Opportunity to meet with Year 2 colleagues for peer mentoring</p> <p>The informal curriculum brings the same group of students together six times a year, allowing them to form relationships, share difficult experiences, and support each other. Students also meet with faculty twice yearly for progress review meetings, where the topic of wellness often emerges as part of the dialogue.</p>	Dr. Susanna Talarico, Dr. Nirit Bernhard

PLANNING COMMITTEE

Dr. Julie Maggi	Helen Genis
Dr. Tony Pignatiello	Anita Gupta
Dr. Samah Al Khawashki	Elenor Henry
Lisa Bevacqua	Diana Nuss
Brittany Chow	Gabrielle Phua
Dr. Heather Flett	Samantha Yang

SPONSORSHIP



Post MD Education
UNIVERSITY OF TORONTO



MD Program
UNIVERSITY OF TORONTO

SickKids®

ACCREDITATION

Royal College of Physicians and Surgeons of Canada – Section 1

This event is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada, approved by Continuing Professional Development, Faculty of Medicine, University of Toronto. You may claim a maximum of 4.0 hours (credits are automatically calculated).



UNIVERSITY OF TORONTO
FACULTY OF MEDICINE