## DEPARTMENT OF HEALTH POLICY, MANAGEMENT, AND EVALUATION - NEWSBYTES -

January 2002

#### Office of the Chair

In September 2001 a Communications Task Force chaired by Tina Smith was created to address the recommendations of the Governance Task Force for the Graduate Department of Health Policy, Management and Evaluation. The following report summarizes the progress of the Communications Task Force in addressing those recommendations pertaining to communications issues.

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# Update from the Communications Task Force

#### 1.0 Introduction and Terms of Reference

Governance Task Force Recommendations

- 1. Use the Newsletter to profile work of faculty and highlight seminars and special events.
- 2. Circulate in electronic form minutes of major departmental meetings.
- Encourage faculty to set up "virtual" nodes for activities such as student supervision, research projects and/or teaching techniques. A list of these nodes should be made available to all members of the Department.
- 4. Schedule faculty meetings to accommodate members of the Program in Clinical Epidemiology and Health Care Research.
- 5. Schedule a full Departmental meeting twice each year with a "social" component.

#### Additional Recommendations

- 6. Review and establish guidelines for all materials/activities related to the Departmental web site and bulletin board.
- 7. Develop an electronic research budget template.

#### 2.0 Task Force Membership

Task Force members include Tina Smith (Chair), Rhonda Cockerill, Anna Gagliardi, Robin Hurst, Kevin Leonard, Murray Krahn, Zita McWhinnie. The Task Force convenes on a monthly basis.

#### 3.0 Progress to Date

#### **Recommendation 1**

Faculty associated with the Department of Health Policy, Management and Evaluation (HPME) are involved in a broad range of research activities with a variety of organizations. To promote greater internal awareness of the knowledge developed through HPME, faculty research and teaching profiles are now included as a regular feature of the Department's newsletter. Special events, departmental seminars and faculty in the news are also highlighted for general interest. Seminars and special events will also be sent to members through e-mail, and where appropriate, will also be posted on the Department web site and bulletin board.

Action: Commenced October, 2001

#### **Recommendation 2**

It was agreed that minutes of the Department's Faculty, Curriculum and Clinical Epidemiology Executive Committee meetings will be posted on the Department server as well as on a password-protected area of the Department's web site. The minutes will be archived onto CD ROMs on an annual basis. It was also suggested that an electronic faculty and staff telephone directory be posted on these sites as well.

Action: Z. McWhinnie to set up sites on both servers. T. Smith to communicate to all faculty the location of posted minutes and the password for the web site when it is ready.

#### **Recommendation 3**

A faculty survey is currently underway to ascertain interest in developing virtual nodes of faculty activity, given the resources associated with their maintenance, as well as specific areas of interest e.g. faculty development, online learning, programmatic research thrusts such as decision sciences, randomized trials.

Action: Results of the survey to be discussed at the February 2002 Task Force meeting.

#### **Recommendation 4**

Departmental faculty meetings are now scheduled on Wednesday afternoons from 3:30 p.m. - 5:00 p.m. to accommodate members of the Program in Clinical Epidemiology and Health Care Research.

#### **Recommendation 5**

Two full Departmental meeting will be scheduled for December and June of each year with accompanying social events. First meeting to be scheduled for June 2002.

#### **Recommendation 6**

It was agreed that the bulletin board located by the Department's reception area will retrospectively feature the faculty profiles, newspaper clippings, honors and awards, and other notables recently featured in the Department's newsletter. The board will be changed every four months. Such an approach will require minimum resources to update and yet will keep the bulletin board relevant while reflecting the diversity of activities within the Department.

Action: A. Gagliardini, to take the lead on this project. Approximate start date - March 2002.

#### **Recommendation 7**

A draft e-budget template has been developed and circulated to Task Force members for comment. It was felt that the template provided a good starting point for budget development. Several features were added to the template list, and it was suggested that previously funded research budgets be examined for additional items of interest. The purpose of the e-budget is to give faculty easy access to information as well as provide suggestions and/or prompts when developing budgets for research proposals. Faculty will still need to access the Department's business manager around more complicated items, such as overhead, that often involve negotiation between the university and the funder.

#### Action: In progress

If you have any suggestions for the Communications Task Forces, please do not hesitate to contact me by e-mail at <u>tina.smith@utoronto.ca</u> or via phone at (416) 946-3023.

#### Research

Faculty associated with the Department of Health Policy, Management and Evaluation (HPME) are involved in a broad range of research activities with a variety of organizations. Success of the HPME Knowledge Transfer initiative is dependent on presenting our stakeholders with a unified, clear image of the depth and breadth of Departmental expertise. To promote greater internal awareness of the knowledge developed through HPME, faculty research profiles will be included as a regular feature of this newsletter.

In this issue we feature research profiles from Upton D. Allen and Ahmed Bayoumi:

- <u>Upton D. Allen</u> is an Associate Professor with HPME. He is also a staff physician with the Hospital for Sick Children and an Associate Scientist with the Hospital for Sick Children Research Institute. His research focuses on infections in immunocompromised children.
- <u>Ahmed Bayoumi</u> is an Assistant Professor with HPME. He is also a staff physician with St. Michael's Hospital; Scientist with the St. Michael's Inner City Health Research Unit; and Director of Science for the HIV Information Infrastructure Project at the Ontario HIV Treatment Network. His research focuses on health and health care utilization of the homeless and those living with HIV.

#### + + PROFILES OF THE MONTH + +

# Upton D. Allen, MBBS, MSc, FAAP, FRCPC

My research activities have focussed mainly on infections in immunocompromised patients. In this regard, the populations targeted by my research are pediatric HIV-infected patients and transplant recipients. I have employed medical decision analyses and clinical trials to answer important questions in infectious diseases. I have been instrumental in establishing and leading national and international collaborative networks to conduct research.

#### **Education and Work Background**

In 1981, I obtained my medical degree from the University of the West Indies, Kingston, Jamaica. I completed Royal College certification in pediatrics in 1987 and pediatric infectious diseases in 1989 following training in these disciplines at the Hospital for Sick Children, Toronto. I received the MSc degree in Design, Measurement and Evaluation from McMaster University in 1989. Following completion of additional research training at the Hospital for Sick Children in 1991, I was appointed Assistant Professor of Pediatrics at the University of Ottawa. In 1995, I returned to the Hospital for Sick Children, where I have been an Associate Professor since 1998. I am cross-appointed to HPME as an Associate Professor.

#### **Research Activities**

One of the main areas of research focus has been infections in immunocompromised hosts. I am the immediate past chair of the Canadian Pediatric AIDS Research Group. I have utilized medical decision analyses to evaluate several aspects of HIV care including occupational exposure to HIV, pneumocystis prophylaxis and the role of erythropoietin therapy in zidovudine-related anemia.

I have spearheaded national studies on zidovudine resistance among HIV-infected children and in 1999 was the Canadian PI for the first drug trial among HIV-infected children in Canada. In 1995, I unveiled a study design that would enable HIV-infected pediatric patients to be entered into clinical trials using a two-step randomization process that allows for two or more conventional study arms and a parallel track arm in which patients are managed at the discretion of their treating physicians.

My research over the past 5 years has shifted towards transplant-related infections. I have led local and national collaborative networks to conduct such research. A major focus has been the herpesvirus family of viruses [Epstein-Barr virus (EBV), cytomegalovirus (CMV), human herpes virus-6 and varicella-zoster virus]. One of the areas that I am currently pursuing is post-transplant lymphoproliferative disease (PTLD) caused by EBV, including the role of EBV viral load testing in the evaluation of patients with PTLD.

Work on CMV is proceeding in parallel with the EBV-related studies due to similarities in the approach to these two viruses in transplant recipients. I have evaluated the role of polymerase chain reaction (PCR) in the diagnosis and evaluation of syndromes due to HHV-6 infection among transplant recipients and I have conducted studies on varicella-zoster infections in transplant recipients. Besides the herpesviruses, my research has also targeted other viruses affecting transplant recipients. These include respiratory viruses such as respiratory syncytial virus. Other studies have investigated fungal infections with an emphasis on drug trials involving novel approaches to therapy.

#### **Teaching and Supervisory Responsibilities**

In addition to teaching and supervision at undergraduate and post-graduate levels, I have taught and cosupervised graduate students. I have been a tutor for different sessions in the Introduction to Clinical Epidemiology and Health Care Research and the Controlled Clinical Trials Courses. I continue to function as an important resource and role model for junior clinician investigators, particularly those in infectious diseases and related disciplines. I am currently chair of the Nucleus Group, Specialty Committee on Infectious Diseases training, Royal College of Physicians and Surgeons of Canada.

#### **Future Research**

My future research activities will build on the foundations established to date. The activities will focus mainly on infections in transplant and related immunocompromised patients. In this regard, I will continue efforts to maintain and expand national and international collaborative networks that will enable us to successfully conduct clinical trials in the above populations. One such study that is near completion is a multicentre trial on EBV prophylaxis among transplant patients. In early 2002, I will also be launching at least two vaccine trials involving transplant recipients. Overall, I expect that my research will continue to have a direct impact on patient care and will help to foster multidisciplinary research collaborations.

## Ahmed Bayoumi, MD, Msc

My professional interests revolve around health services research related to those living with HIV and individuals who are socioeconomically disadvantaged.

#### **Education and Work Background**

My education includes a medical degree from the University of Toronto in 1989. I then obtained an MSc in Clinical Epidemiology from the University of Toronto in 1997 and a Fellowship in Health Services Research at Stanford University in California.

I also received specific clinical training in HIV medicine at the Wellesley Hospital.

Since July 1998 I have been a Staff Physician at St. Michael's Hospital in the Department of Medicine, Division of General Internal Medicine, and a Scientist in the Inner City Health Research Unit at St. Michael's Hospital.

More recently I was hired as the Director of Science of the HIV Information Infrastructure Project at the Ontario HIV Treatment Network (www.ohtn.on.ca).

I also hold the academic positions of Assistant Professor in both HPME and the Department of Medicine at the University of Toronto.

I teach in the Introduction to Clinical Epidemiology and Decision Analysis courses, directly supervise two graduate students, and mentor three students/residents.

#### **Research Activities**

I was recently appointed the Director of Science for the HIV Information Infrastructure Project (HIIP), an initiative of the Ontario HIV Treatment Network. The HIIP, with an annual budget of \$3,000,000, aims to improve the care of individuals living with HIV in Ontario through information technology, including the implementation of a sophisticated electronic health record throughout the province. Consenting participants will have their data securely and confidentially downloaded in real time to a central database. As research director, I will set the research agenda for the project, spanning the research fields of health services research, observational database analysis, and health informatics.

The HIIP has also assumed responsibility for the HIV Ontario Observational Database, making it an extremely rich repository of research information. Current research projects include issues of access to care for viral load testing, genotypic resistance testing, and antiretroviral therapy as well as clinical questions relating to the effectiveness of genotypic resistance testing, the tolerability of antiretrovirals, and the discontinuation of prophylactic regimens by HIV-infected individuals.

With colleagues at St. Michael's Hospital's Inner City Health Research Unit, I am collaborating on several projects to examine barriers to care for individuals who are socioeconomically disadvantaged. This line of inquiry includes both studies of factors in office practice that influence decision making and innovative observational studies using databases from homeless shelters and food banks.

I have an interest in exploring the relationship between "psychometric" quality of life scales (which measure the psychological impact of several health domains) and "utility-based" measures (which measure individual preferences for health states). Current studies are extending this line of research in the setting of HIV infection.

I have developed a comprehensive natural history simulation model of HIV infection, which is currently being used to address several important questions relating to HIV care, including the cost effectiveness of HIV resistance testing, the optimal time to initiate therapy for asymptomatic HIV-positive adults, the most cost-effective method of improving adherence, and the cost-effectiveness of HIV screening. I am also collaborating in comprehensive meta-analyses, developed under the auspices of the <u>Cochrane Collaboration</u> to provide rich data for these models. Future research will examine the equity implications of using cost-effectiveness analyses in health policy decision-making.

#### Education

# Combined MHSc/MSW in Health Administration and Social Work Receives OCGS Approval

As its meeting of October 26, 2001 the Ontario Council of Graduate Studies officially approved the recommendation that the <u>Combined MHSc/MSW in Health Administration and Social Work</u> be approved. Plans to launch the program as of September 2002 are now underway.

The Combined Program has been developed to provide those students with a strong interest in both social work and health/social services management the opportunity to engage in an integrated and coherent program of study leading to concurrent receipt of the MHSc Health Administration and the MSW degrees. Admission to the Program will be conditional upon independent admission to each of the participating graduate departments. It is anticipated that approximately 3 students will enroll in the Program each year.

**Honours and Awards** 

# Michael Bliss Wins Royal Society of Canada's Medal

Michael Bliss, Professor, Department of History Medicine, Cross Appointed Department of HPME, is the winner of the Royal Society of Canada's second 2001 Jason A. Hannah Medal for his book William Osler: A Life in Medicine.

Described as "a book that masterfully shows the changing face of medicine, from a compassionate profession to a profession based on science" it depicts the life of a person whose practice was changed by these developments and who initiated and furthered them at the same time.

Established in 1976, the prize recognizes an important Canadian publication in the history of medicine, published in the two years preceding its nomination.

# Students The Department of HPME proudly presents the Class of 2002 - March Convocation PhD Health Administration Liane Soberman MSc Health Administration MSc Health Administration MSc Health Administration MSc Health Administration Matalie Milkovich Michelle Wrobel MSc Clinical Epidemiology and Health Care Research Hani Akoury Victoria Allen Louise Bordeleau

**Other Notables** 

# Long Distance House Calls: David Zakus and the Centre for International Health

The Faculty of Medicine's <u>Centre for International Health</u> puts U of T on the global map says a December 17, 2001 Bulletin article featuring Dr. David Zakus in his role as Director of the new centre.

A graduate from the Department of Health Policy, Management and Evaluation David left the university after graduation to pursue his interests in international health including a teaching stint at Addis Abba University and Ethiopia and a job as head of the Canadian Physicians for Aid and Relief.

He returned to the Department in the 1990's to teach part-time, and began to lay the groundwork for an international center within the Faculty of Medicine. With strong support from Dean David Naylor the center was launched in October 2001. In addition to recruiting researchers and developing educational programs, the center will coordinate, connect and build on the dozens of already existing international health research projects at U of T and its nine affiliated teaching hospitals. Putting this wealth of research expertise to work in neglected parts of the world is David's goal (M. Easton, 2001).

#### + + IN THE NEWS + +

## Patients get Little Say in Hospital Care: Report Toronto Star, Thursday, December 20, 2001

A lack of input by patients into their treatments and care is one of the main problems identified in the Complex Continuing Care Report: Hospital Report 2001. While almost all facilities are functioning within their budget, three in four patients in complex-care facilities rated the quality of their care as good or excellent, half complained that staff failed to respond promptly when called, almost half felt cut out of the loop when it came to treatment decisions and 41% said they felt ignored by staff altogether. Researcher Gary Teare, Adjunct Scientist with the Institute for Clinical Evaluative Sciences and Assistant Professor in HPME noted that the report "gives an important message...for hospitals in considering how they can strengthen their patient focus".

## ER Care Rated Lower in Toronto Globe and Mail, Friday December 21, 2001

Patients are less satisfied with emergency care in Toronto than in any other part of the province, according to the Emergency Department Care, Hospital Report: 2001. Lead researcher Adalsteinn Brown, Assistant professor in HPME, suggested that patient opinion may be influenced by media stories about hospital delays but noted that "if they're saying they're not satisfied, we have to look into it".

# Insulin Predicts Breast Cancer Survival National Post, December 28, 2001

A prospective cohort study involving 512 women with early stage breast cancer demonstrated that blood insulin levels appear to be a reliable predictor of whether a woman with breast cancer will survive over the long term. Therefore, weight loss and exercise, both contributing to lower blood insulin levels, might have a significant impact on outcome. Pamela Goodwin, lead author and Associate Professor in HPME, noted that diet and exercise "will never replace chemotherapy or hormone therapy or radiation or surgery, but it might provide an added benefit to all of those treatments". The study was published in Journal of Clinical Oncology 2002; 20(1): 42-51.

# Study Finds Money A Factor In Surviving Stroke Toronto Star, January 5, 2002

A study led by Moira Kapral, Assistant Professor in HPME, has found that for every \$10,000 increase in median neighbourhood income, there was a 9% decrease in mortality rates 30 days after a stroke and a 5% drop in deaths after one year. The study, published in Stroke 2002 Jan 1;33(1):268-275, also found that lower-income patients were less likely to have access to certain types of medical care such as rehabilitation, occupational therapy, speech therapy and neurological care. Dr. Kapral indicated that variables other than income affect mortality, suggesting that "elimination or reduction of poverty would probably have a far greater impact than anything that physicians could do".

# Longevity: When Oscar Losers Become Winners New York Times, January 8, 2002

Dr. Donald Redelmeier, Director, Clinical Epidemiology Unit at Sunnybrook and Women's College Health Sciences Centre made the New York Times this month with his recent study (with S. Singh, BMJ 2001; 323: 1491-6) that retrospectively examined the link between high success and longevity of screen writers. Apparently, there is some consolation for Oscar nominees for best screenplay who don't get the prize: odds are they will live much longer than the winner.