



---

December 6, 2023

Prof. Susan McCahan  
Vice-Provost, Academic Programs  
Division of the Vice-President & Provost  
University of Toronto

Dear Susan,

## INTERIM MONITORING REPORT | Rehabilitation Sciences Institute

On behalf of the Temerty Faculty of Medicine at the University of Toronto, I am pleased to provide an interim monitoring report for the 2020-21 external review of the Rehabilitation Sciences Institute (RSI). This report was prepared in consultation with Dr. Angela Colantonio, RSI Director.

### Status of Implementation Plans in Dean's Response

1. *"Participation in RSI activities relies heavily on the goodwill of administrators and faculty participants. The mission of RSI could be strengthened by incentivizing at the sector level faculty participation in RSI. For example, new hires might be approved with the stipulation that some agreed-to effort level in RSI is protected. The Director's influence would be enhanced with the capacity to further incentivize participation by faculty."*

RSI has successfully expanded the number of Graduate Coordinator positions; Drs. Alison Novak and Sarah Munce have made exceptional contributions to the overall running of RSI. Dr. Luc De Nil, former Vice Dean, School of Graduate Studies, is serving as RSI's inaugural Associate Director and he has brought highly valued expertise to support the curriculum and student progress.

Improvements have been made in the recognition of RSI contributions in both PTR and workload assignments. RSI's primary research institute partners are listing RSI contributions in their activity reports.

The role of postdoctoral fellows (PDFs) has been expanded to include paid leadership roles in teaching courses with faculty supervision, thereby reducing the demands placed upon faculty. Dr. Munce leads a postdoctoral committee established in the Rehabilitation Sciences Sector (RSS) that has fostered greater PDF engagement in the RSI curriculum and other activities. To further support teaching, teaching assistantships have been generous and student financial support for faculty who contribute to the educational and administrative activities of RSI has been considered.

RSI has prioritized a culture of recognition for faculty, students, and staff. The Faculty & Staff Development Committee promotes and adjudicates awards for supervision/mentorship (early career and sustained excellence), teaching, peer mentorship and service. In addition to being widely appreciated, these awards have supported faculty award successes at both Temerty Medicine and UofT levels. RSI is leading faculty nominations for university-wide awards.

In its bi-monthly leadership meetings with RSS's three professional programs RSI is advocating for, and engaging the Department Chairs in, developing processes to encourage and incentivize faculty involvement at RSI.

RSI is currently considering initiating a proposal to transition to EDU:A status, which would enable RSI to directly hire faculty for the graduate program and cross-appoint status-only scientists directly.

- II. *“Participants consistently spoke of the high value they assign to the shared objectives and values of RSI in rehabilitation. Some even recognize RSI as their primary intellectual home. Greater focus on community building might provide immediate and substantial benefit.”*

Numerous community building activities have been undertaken. The RSS Chairs and RSI Director have been meeting on a weekly and, more recently, a bi-weekly basis since the start of the pandemic to discuss issues such as teaching and supervision in the RSI. The RSI Director and RSS Chairs collaborated on a successful \$1 million proposal facilitated by Dr. Lynn Wilson, Vice Dean, Clinical & Faculty Affairs and I, to the Temerty Advancement Fund for a major rehabilitation research and knowledge transfer initiative focused on Long COVID. The Rehabilitation Science Research Network for COVID is being funded for 5 years and has conducted its first international conference to disseminate innovations.

Recently the RSS launched a sector-wide internal grant review process to improve success rates and qualify for more centralized support for RSI student stipends and pathways grants.

The RSI is primarily responsible for Leadership Rehab Rounds, held bi-weekly from September through June, hosting presentations from sector faculty, trainees, and other rehabilitation leaders.

RSI is building upon its relationships with affiliated research institutes. For example, as a part of this endeavour, RSI's Director is serving on the Research Advisory Committee of the Tanenbaum Institute of Sport Science in the Faculty of Kinesiology & Physical Education. RSI's Associate Director participated in the Bloorview Research Institute's strategic planning process. The Director of St. John's Rehab Research Program at the Sunnybrook Research Institute, Dr. Sander Hitzig, has been serving on the RSI Executive Committee; his enthusiasm and support are highly valued. Likewise, the RSI appreciates the leaders of the rehabilitation hospitals and cognate RSS Department Chairs serving on its Academic Affairs Committee.

RSI was invited to partner with the KITE Research Institute at University Health Network, to hold the inaugural International Conference on Aging, Innovation & Rehabilitation in May 2023. This highly successful collaboration aims to be an annual event.

2023 marked the return to an in-person RSI Research Day after the COVID-19 pandemic necessitated the move to a virtual format. This annual student-led event continues to be sponsored by several research institutes and serves as a forum for bringing together interdisciplinary rehabilitation research.

- III. *“It remains unclear whether enhanced curricular offerings through RSI are a priority. One faculty member noted that teaching in RSI is ‘actively discouraged’ given the burgeoning needs of the clinical programs in the cognate departments. If a shared didactic experience among RSI students is a priority, department chairs require tangible incentives to support these course offerings. A vibrant student community is highly valued by MSc and PhD students, who depend on their peers for acculturation into the scientific community, for exchange of ideas, and for creating and sharing a productive learning milieu.”* Students commented that core program courses are not always useful or available.

RSI's core courses have been redesigned and include the development and implementation of new evaluation criteria. As recommended by the external reviewers, required courses that were previously offered to both MSc and PhD students have been separated. REH 1100H/3100H “Theory & Research in Rehabilitation Science,” which introduced students to the wide range of theories, methodological approaches, and conceptual frameworks used in rehabilitation research, has been renamed to “Introduction to Rehabilitation Research” and has been expanded to provide students with a foundational overview of the rehabilitation science research field, including its role and evolution within the Canadian health care system. REH 2001/3001 “Rehabilitation Presentations & Proceedings” has now been reformulated to provide a broader professional development focus and has been split into two seminar courses: REH 2001H “RSI MSc Seminar - Foundations of Professional Practice” and REH 3001H “RSI PhD Seminar - Foundations of Professional Development”. Evaluation criteria for the overall curriculum changes were developed and implemented showing positive results. Course evaluations, which themselves have been revised, demonstrate that the changes have been positively received. The 2021-22 RSI Graduate Supervisory Experience Survey indicated that 86% of students rated their overall training experience as exceptional, compared with 60% for Temerty Medicine students overall. 97% of RSI

students expressed overall satisfaction with their experience, speaking to the dedication of RSI's faculty and staff.

Led by the Programs & Curriculum Committee (PCC), the RSI consulted with faculty and students to identify learners' advanced research methods needs. Considering the last 5 years, 77% of faculty participants reported that their students did not access support from paid biostatistical consultants and 36% reported that few or no students had the necessary access to available supports for quantitative analyses. As a result, the RSI is working to improve student access to statisticians and biostatistical courses and is taking a proactive approach in helping students prepare for and access advanced courses. Students have guaranteed access to four qualitative research courses through RSI's partnership with the Critical Qualitative Health Research Collective. In addition, they have access to mixed methods, introductory as well as advanced biostatistics courses provided by the Dalla Lana School of Public Health. RSI is also considering offering an advanced methods course. RSI is grateful to the instructors who provide access and research-related support to its students.

As part of its innovative curriculum, RSI has joined the Collaborative Specialization in Robotics and has introduced new course material on assistive technology in rehabilitation.

The PCC's report recommended limited support for the continuation of the Practice Science field; to be successful the program requires more resourcing. The Executive Committee will consider its options for this field in the 2023-24 academic year in the context of a potential submission to transition RSI to an EDU:A, which would provide the opportunity to hire faculty dedicated to the success of this field.

RSI has better integrated EDIIA into its curriculum; course materials have been reviewed with a diversity and equity focus and an EDIIA Toolkit has been developed and is to be shared with faculty, staff, and students. Work on the toolkit led to the recommendation for a student-led EDIIA committee that will convene in late 2023 or early 2024.

RSI has funded San'yas Indigenous Cultural Safety Training Program for all students and staff who are interested in pursuing this 10-hour training program. A debriefing session was also held at the conclusion of the course led by Nadia McClaren from the Centre for Wise Practices in Indigenous Health and Lindsey Fechtig from the Office of Indigenous Health. This initiative was positively received and the training and debriefing are again being offered this year.

IV. Recommendation to explore alternative approaches to the current requirement for "*up-front*" funding for applicants entering RSI programs; an alternative approach could have several possible benefits including increased diversity and international composition of the student body, and opportunities for junior faculty members to begin mentoring students earlier in their careers.

Devoting more funding to recruitment efforts has resulted in greater attendance at information sessions. Additional entrance scholarships have been introduced and RSI has been successful in attracting broader Temerty Medicine entrance scholarships. RSI has dedicated OGS awards for students from underrepresented groups.

Funding for students is a top priority for RSI. Due to the cost of living in Toronto, RSI has topped up students' funding by up to \$4,100. This fall RSI aspires to increase funding to the levels of Temerty Medicine's harmonized agreement. A CIHR grant focused on training was submitted by an RSI faculty member but was unsuccessful. Further the Institutional Strategic Initiative grant was considered an option for increasing funding; however this program has been paused for 2 years. The RSI Director would like to dedicate more time to advancement and other grant opportunities to support students.

RSI continues to support junior faculty by shouldering most of the student stipend costs if needed.

## Status of AP&P Reading Group's Comments

### I. Time-to-Completion Data

Time-to-completion for RSI's PhDs was 4.73 years for 22-23 compared to 6.01 years across Temerty Medicine, demonstrating the impact of RSI's dedicated monitoring of students. The MSc thesis defence process has been simplified to include one external examiner (who may have a UofT appointment); this is consistent with other university programs and is aiding students' time-to-completion.

## Expansion of Student Affairs Committee Mandate

The Student Affairs Committee has expanded its mandate to include EDIIA and postdoctoral support and has submitted revised terms of reference for approval. One Graduate Coordinator is specifically focused on these important issues.

## II. Enhancement of PDF Role

The role of PDFs at RSI has been discussed in faculty town halls and executive meetings with the aim of developing a structured plan to capture their contributions. RSI's Graduate Coordinator has created a PDF Committee—with one PDF serving as co-chair—to encourage teaching, support grant and award applications, and pursue other mutually beneficial opportunities.

Temerty Medicine will continue to monitor the implementation of the review recommendations through annual meetings with the Director of RSI. I would be pleased to respond to any further questions you may have related to RSI or this report.

Sincerely,



Patricia Houston, MD, MEd, FRCPC  
Interim Dean and Vice Dean, Medical Education, Temerty Faculty of Medicine  
Interim Vice Provost, Relations with Health Care Institutions, University of Toronto  
Professor, Dept. of Anesthesiology & Pain Medicine

cc: Dr. Angela Colantonio – Director, RSI  
Dr. Lisa Robinson – Vice Dean, Strategy & Operations  
Dr. Lynn Wilson – Vice Dean, Clinical & Faculty Affairs  
Ms. Anastasia Meletopoulos – Academic Affairs Manager, Office of the Dean