Each edition of the newsletter highlights the initiatives of one of the three trauma centres in the GTA that make up the U of T Trauma Program. This newsletter focuses on Sunnybrook Health Sciences Centre.

Wait… there was a pandemic going on?

While of course that is a facetious-click-bait heading, we are proud to share updates from a few non-COVID initiatives from the past year, all done in the face of the ongoing pandemic challenges.

Smile for the camera!

In January 2020, representatives from Sunnybrook visited Penn Presbyterian Medical Center to learn about their trauma team video review program. Penn Presbyterian was so experienced with video review, that at one point, its program was run on VHS! With Sunnybrook preparing for its own program launch, the opportunity afforded an open dialogue with their team, and of most value, participation in one of their trauma video rounds.

Since that trip (which included a few Philly cheesesteaks), Sunnybrook has held monthly trauma video rounds, and we are very enthusiastic with the results and outlook moving forward.

Recordings are initiated by the trauma team, and selected cases are reviewed at quality rounds to improve trauma team performance. These rounds do not address individual practice issues, and instead focus on team performance improvement (the good, the bad, and the ugly).

At the beginning there was hesitancy. From legal. From privacy. From the trauma team. But through engagement (and more engagement), things settled in, and consistently for over a year, trauma video rounds attract more participants than any other trauma learning forum. Each rounds have a theme - examples include: team composition; anchoring bias; the arc of performance; patient experience; and more!

Although mostly held via Zoom, we have now excited transitioned to a hybrid in-person/online experience!

What does it mean to be BRAVE?

"I would say mentally, physically, emotionally, there was always something within those means that [my case worker] could assist me with. So, I’m really grateful for that." – BRAVE Participant

Violence is an epidemic that disproportionately affects young males of colour. The current standard of care includes acute treatment for physical injuries, but fails to address the underlying causes as would be typical in other disease processes (e.g. aspirin for patients following heart attacks). This approach ultimately perpetuates re-traumatization and recidivism of this already marginalized patient population.

Breaking the Cycle of Violence with Empathy (BRAVE) is Sunnybrook’s hospital-based violence intervention program (HVIP). HVIPs redefine the relationship between patient and hospital in order to reduce participant risk factors and increase protective factors for violence. HVIPs recognize the symptoms of trauma and provide culturally-competent and trauma-informed care throughout hospital admission and post-discharge.

BRAVE launched in September 2020 through a one-year financial grant from the City of Toronto as part of a broader effort to increase community safety.

Through BRAVE’s first year, the case manager has served over 50 participants, identifying over 300 risk factors, and making over 150 service referrals. Early evaluation demonstrates a reduction in risk factors of 37% at the time of program discharge (6-12 months post injury).

BRAVE leverages the expertise of community agencies to address underlying conditions that perpetuate violence but begins this work earlier when patients are in a state open to change following a traumatic violent experience. Program costs are minimal compared to broader healthcare impacts due to violent injury and recidivism, and participants and the community alike have demonstrated high interest, excitement, and commitment to working with BRAVE.

Our care doesn’t end at discharge

Opened in spring of 2021, the Jennifer Tory Trauma Recovery Clinic (TRC) provides an innovative model of care with a focus on improving patients’ functional and psychological outcomes after traumatic injury. The TRC aims to provide one year of post-discharge medical follow-up, with a view towards transition to the community for ongoing support, and is predicated on a similar theme to that of BRAVE: that we cannot put a bandage on the patient and expect them to thrive after discharge. As such, the TRC provides coordinated post-discharge services to patients that include the relevant surgical follow-ups, but also care from occupational therapy, physiotherapy, psychology and psychiatry, social work, pain services, and more.
In early patient visit surveys, 100% of respondents strongly agreed or agreed with the following statements: “I felt that my care was well coordinated between services.”; “Staff made me feel as though I was an important member of the healthcare team.”; “I was able to receive care at the Trauma Clinic that would have been otherwise difficult for me to access in the community.” and “The team addressed the concerns that were most important to me.”

The Trauma Recovery Clinic is a novel environment, and we have quickly realized that no amount of planning could anticipate the nuances in actual go-live. We have remained steadfast in pivoting through an iterative approach, to ensure the patients remain at the centre of operations!

As we move forward with the clinic, we are focusing on patient empowerment and quality improvement, through Patient Reported Outcome Measures, patient advisors, expansion of services available under ‘one roof’, and more!

First Royal College Area of Focused Competence in Trauma General Surgery at U of T

The University of Toronto Trauma Program is pleased to announce that we have had our first successful Royal College accreditation. The trauma general surgery AFC program is the only one its kind in Canada. Our team, led by fellowship director Dr. Ahmed, surgeons across St. Michael’s Hospital and Sunnybrook, our fellows, and administrative staff, and with the guidance of the PGME office at the UoT, passed a rigorous Royal College accreditation process in October 2020.

The Royal College of Canada website defines and describes an AFC program in the following excerpt:

“Areas of Focused Competence are areas of specialty medicine that address a legitimate societal and patient population need that was unmet by the system of primary and subspecialty disciplines. Akin to current clinical fellowship or post-residency training in that they are equivalent to one to two years of additional training, the AFC category is intended to:

- Establish national standards for training and specialist competence, designed to improve quality of care and patient safety,
- Prevent unnecessary fragmentation of specialty training, care and practice by providing credentials in highly focused areas of practice that may otherwise be considered for recognition as a subspecialty,
- Provide Fellows with additional opportunities to acquire nationally and internationally portable credentials — the Diploma of the Royal College of Physicians and Surgeons of Canada (DRCPSC), and
- Offer universities opportunities to enhance the academic environment.

An AFC is a category of discipline that builds upon a physician’s certification (either specialty or subspecialty) through supplemental or advanced training/practice as defined by the Royal College national standards.”

The journey to establish the U of T Program as an AFC began nearly a decade ago by the now Surgeon-in-Chief of St. Michael’s Hospital, Dr. Najma Ahmed. “I am delighted to see trauma general surgery as a recognized surgical discipline. The expertise that rigorously trained trauma specialists bring includes developing inclusive trauma systems, optimizing pre-hospital care, developing novel innovations in resuscitation, surgical approaches, ICU care, and post injury rehabilitation. In addition, trauma physicians and surgeons are engaged in advocacy on behalf of the communities we serve, injury prevention and community engagement efforts. The University of Toronto trauma AFC program will partner with other leaders in the country to elevate the care of trauma patients nationally and to create the best trained trauma general surgeons to care of the populations we serve.” This accreditation adds strength to the already rich experience the UoT Trauma Program already offers to trauma fellows at the busiest trauma centres in the country.

The University of Toronto Trauma Visiting Professor & Tile Lecturer 2021

The U of T Trauma Program was honored to host the renowned trauma surgeon, public health researcher, gun violence prevention advocate and activist – Dr. Joseph Sakran.

When Dr. Sakran was just 17 years old he almost died from a gunshot to the throat. His first hand experience of the health care system and the damage of gun violence inspired him to pursue a career in medicine and advocacy. Dr. Sakran is currently an assistant professor of surgery at the Johns Hopkins University, Director of Emergency General Surgery and the Associate Chief of Acute Care Surgery at Johns Hopkins Hospital in Baltimore, Maryland.

For the second year in a row the U of T Department of Surgery Tile (named after the renowned orthopedic surgeon Dr. Marvin Tile) was held virtually. At 7:30 am on June 4th, 2021 Dr. Sakran spoke on the topic ‘Turning Public Narrative into Action: Gun Violence in America’ live on Zoom. He spoke about the burden of firearm injuries in the United States and identified strategies to address gun violence.

As in 2020, the annual City-Wide Journal Club and Trauma Research Symposium held in conjunction with the Visiting Professor in Trauma were canceled in line with Covid restrictions at the time. It was a privilege to have Dr. Sakran as our 2021 Visiting Professor in Trauma.
2021-2022 Trauma Fellows

Mathieu Hylands

Stephanie LeClerc

Marika Sevigny

Mathieu trained in general surgery and clinical research at the University of Sherbrooke. He previously completed his MD at McGill University. After the TACS fellowship, Mathieu will return to the Adult Critical Care Medicine program here in Toronto to complete his final year of training. He plans on returning to Sherbrooke as a surgeon-intensivist in July 2023. Most of his research has focused on the hemodynamic management of critically ill or injured patients.

Dr. Leclerc graduated from Laval University General Surgery Residency in Quebec City in 2019 and went on to complete a two year Critical Care Medicine Fellowship. Dr. Leclerc worked on the evaluation of the new provincial field trauma triage protocol in Quebec and was involved in the creation of a curriculum in critical care medicine for surrogate intensivists during the first wave of the SARS-CoV-2 pandemic. After the completion of the University of Toronto Trauma and Acute Care Surgery Fellowship, she will return to the University Hospital of Quebec (CHU) in Quebec City in the role of intensivist and trauma and acute care surgeon.

Marika is beyond thrilled to be joining the Trauma and Acute Care Surgery program. She’ll be completing her Masters in Quality Improvement and Patient Safety through the University of Toronto, while training this year. She hopes to also continue exploring her passion for teaching and mentorship throughout her fellowship. Her interests include tennis, fitness, reading, singing loudly in the car, and eating as much as possible-whenever possible.

Staff Welcomes & Farewells

Welcome - Dr. Reto Baertschiger as interim co-medical director of the SickKids Trauma Program. Dr. Baertschiger joined the Division of General and Thoracic Surgery at SickKids on August 1, 2019 with a special interest in trauma, paediatric surgical oncology and liver tumours.

Reto was born and raised in Switzerland and went to medical school in Lausanne. He trained in Indianapolis for general and pediatric surgery and is board certified in Surgery and Pediatric Surgery from the American Board of Surgery. His experience in trauma includes paediatric medical trauma director (2015-2019) at Dartmouth Hitchcock in New Hampshire. Dr. Baertschiger will work alongside Dr. Suzanne Beno, to lead the SickKids Trauma Program.

Farewell - Dr. Paul Wales has left SickKids to join Cincinnati Children’s Hospital as the Surgical Director of Intestinal Rehabilitation where he will lead and build their equivalent of the GIFT (Group for Improvement of Intestinal Function and Treatment) Program. He is the recipient of a newly endowed Chair in Intestinal Rehabilitation and will continue his translational research model of short bowel syndrome in neonatal piglets focusing on intestinal adaptation and intestinal failure associated liver disease.

Paul was the co-medical director of the SickKids Trauma Program since 2005. We thank Paul for his work with the Trauma Program over the years and wish him very well in his new position.

Bridging the Gap Interdisciplinary Trauma Conference

The theme of this year’s interdisciplinary trauma conference was “Traumatic Injury: Bridging the Gap between Injury, Acute Care & Recovery”. This theme, originally selected for the pandemic-cancelled 2020 event, was particularly auspicious as we were also literally bridging a gap in conference delivery.

Presented jointly by St. Michael’s Hospital, SickKids, and Sunnybrook Health Sciences Centre, the conference promotes concepts and learnings in trauma care to our community. The conference was delivered through a virtual platform on October 28, 2021; although the benefits of an in-person meeting were certainly missed, having the conference virtual allowed us to reach participants who otherwise would have had geographical barriers. Attendees included nurses from Muskoka-Algonquin, PAs from Ottawa, paramedics from non-GTA services, and more! There were great collaborative chats, games and prizes!

Speakers from across the continuum of care addressed concepts ranging from paramedic-trauma team handover and feedback, pain management in adult and paediatric populations, TBI and concussion considerations, and post-discharge care, and also included an emphasis on older adults and PTSD in care providers.

The event was tied together with a keynote address from Dr. Todd Maxson, Chief of the Trauma Program at Arkansas Children’s Hospital and a Professor of Surgery at UAMS, entitled: “A funny thing happened on the way home from the OR”. Dr. Maxson shared his experience going from trauma surgeon, to trauma patient, to trauma survivor, and the importance of physical, mental and emotional supports.

Conference registration maxed out within weeks of opening, and the event was exceptionally well attended. There were even group viewings by staff at the trauma centres. Presentations remain available through the platform until the end of December.
Feedback from participants was overwhelmingly positive, with many complimenting the range of speaker professions, as well as the conference’s acknowledgement of mental health concepts.

In the words of one nurse participant: “We have such amazing knowledge and experience across our Toronto and GTA partners... I love learning here! Thank you to those who have presented.”

2021 GRANTS, AWARDS & ACCOMPLISHMENTS

GRANTS:

Dr. Luis T. Da Luz
Principal Investigator, “Prospective, multicentre, randomized, parallel-control, superiority study comparing administration of clotting factor concentrates with a standard massive hemorrhage protocol in severely bleeding trauma patients” 3 years; $1,021,276 2021

Dr. David Gomez


AWARDS:

Dr. David Gomez
Ed Brentall Award – Best paper in public health or disaster medicine (Trauma centre preparedness for mass casualty incidents in Australia, Canada, England, and New Zealand. Lancet eClinical Medicine. 2020 Apr 2; 21:100322 - collaborator), Australasian College of Medicine, October 19, 2021

Ilanna Perlman, Social Worker
2021 Arbor Award recipient - Recognizes the outstanding volunteer service to the University of Toronto. This represents U of T’s most prestigious volunteer award, recognizing alumni and friends for their significant contributions to the university.

PUBLICATIONS:

Dr. Reto Baertschiger

Dr. Adrienne Davis


Dr. David Gomez


THE U OF T TRAUMA PROGRAM AIMS TO PROVIDE LEADERSHIP IN THE DELIVERY OF SPECIALIZED CARE TO SEVERELY INJURED PATIENTS, INJURY RELATED RESEARCH, AND EDUCATION AND INJURY PREVENTION. PROVIDE COORDINATED PATIENT-FOCUSED CARE RECOMMENDATIONS IN CLOSE COLLABORATION WITH EMS, REFERRING INSTITUTIONS, AND FACILITIES PROVIDING PRE AND POST-ACUTE CARE.