The Future of Simulation for the Applied Health Sciences
# Multidisciplinary Continuing Education Courses

## Winter/Spring 2008

### Introduction to Medical Research

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### Medical Terminology

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### Introduction to Project Management: Key Concepts

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### Project Design and Management - Online

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Only a selection of The Michener Institute’s many continuing education courses are listed above. To find out about other course offerings and for more detailed course information please visit:

[www.michener.ca/ce](http://www.michener.ca/ce)
Welcome to the inaugural edition of Michener Magazine (formerly Michener 222)

This simple and elegantly stated maxim represents the basic tenet of bioethics by which all healthcare practitioners must abide. Primum non nocere – because the patient’s safety must always be first and foremost in the practitioner’s mind.

We embrace this line of thinking at Michener, and teach it to our students as an integrated part of our curriculum. But at the same time, we also believe in another time-tested adage, one we’ve all heard from our parents, grandparents, and teachers: learn from your mistakes.

The question is, how do you give healthcare practitioners opportunities to learn from their mistakes without breaching the “first, do no harm” principle?

At Michener, we’ve answered this question by leading the way in simulation-based education in allied health sciences. Our goal is to become a simulation centre of excellence where every student in every discipline learns by doing, in authentic environments where they are truly immersed in the learning experience.

Today, Michener is investing in learning facilities of the future, namely a Simulation Centre located at Michener to provide state-of-the-art labs and multiple methods of simulating environments. The Simulation Centre will occupy two stories, and the plans are displayed in Michener’s Transformation Gallery, located in room 101.

Among many things, this unique facility will include state-of-the-art laboratories and theatres featuring advanced simulation technology, as well as debriefing rooms where instructors and students can replay and analyze videos of their in-class performances. We plan to start building the centres this year with construction scheduled for completion in 2009.

So far, so good. But how do we ensure that the students are truly immersed in the learning experience? Here, finally, is an environment where they can not only make mistakes without putting anyone at risk, but also be able to deconstruct the anatomy of their errors and learn from the analyses.

The benefits of simulation for our students are far reaching. By using simulation in the classroom, we’re able to expose all of our students to the same experience, including learning how to communicate with each other and other aspects of professional behavior. At the same time, we’re also using simulation to assess how well our students are learning what we’re teaching them.

Of course, Michener is by no means the first to use simulation in healthcare education; it has been used for decades in medical education in such areas as anesthesiology and surgical skills training. But in the allied health sciences, where the use of simulation in education has received less attention, Michener is undoubtedly a pioneer.

Then again, our goal is not so much to be the first but to be the best in our field – and ultimately, for our students to be the best in theirs.

We have incorporated student simulation into all of our programs. Here, finally, is an environment where they can not only make mistakes but also learn from them. We are able to deconstruct the anatomy of their errors and learn from the analyses.

THE IMPACT OF BROAD AND DEEP ROOTS

Through Michener Magazine, we aspired to reflect the people, ideas, trends and initiatives that impact applied healthcare sciences. Our goal was to become a simulation centre of excellence where every student in every discipline learns by doing, in authentic environments where they are truly immersed in the learning experience.

As the publication started to take shape throughout the fall of 2007, it became apparent that Michener’s existing reach, though already somewhat broad, was also fairly deep. And with our 50th anniversary in 2008 so immediately upon us, this became a pressing revelation. With renewed focus, we started “mining” the breadth and depth of Michener to develop a publication that would Foster Community, Strengthen Loyalty, Engender Michener Pride and Inspire Investment.

When this publication was being received, our goal was to further strengthen Michener’s connection to its alumni, but also to reach out to a much broader community of Michener supporters: academic partners, industry partners, healthcare providers, public investors and neighbours. As the publication started to take shape throughout the fall of 2007, it became apparent that Michener’s existing reach, though already somewhat broad, was also fairly deep. And with our 50th anniversary in 2008 so immediately upon us, this became a pressing revelation. With renewed focus, we started “mining” the breadth and depth of Michener to develop a publication that would Foster Community, Strengthen Loyalty, Engender Michener Pride and Inspire Investment.

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Dr. Kathryn Parker is the Director of Research at Michener and can be contacted via e-mail at kparker@michener.ca.

Proposed 3rd floor plan incorporating OSCE (Objective Structured Clinical Examination) rooms in the newly proposed infrastructure redesign of The Michener Institute.
Michener is celebrating 50 years of educational excellence and healthcare transformation in the applied health sciences! Join us for a year of celebrations and reunions, including our second homecoming weekend.


Do you have a Michener memory or story to share? Interested in donating old photos and memorabilia to the Archives Project? E-mail 50th@michener.ca with your submissions by March 31, 2008 and you will be entered in a draw to win the new 8GB iPod nano. This prize was generously donated by Canada Life, one of Michener’s Affinity Partners.
Long before her son, Paul Gamble, became president and CEO of Michener Institute, Dorothy Hubbs already had a personal connection with the school that now considers her part of its history.

Decades back, Mrs. Hubbs’s first husband, Dr. Warren Gamble, had received several awards for his work with St. John Ambulance. One of the awards was presented to him by Roland Michener, Canada’s 20th Governor General and the man for whom the Michener Institute is named.

“So that’s how I first knew about The Michener Institute,” recalls Mrs. Hubbs, who lives in Peterborough, Ontario, just north of Toronto. “From then on, whenever I heard or read anything about Michener, I was always very interested.”

Last year, it was Mrs. Hubbs who did the presenting to Michener – in the form of a $100,000 donation towards student scholarships. And in November 2006, the first Dorothy A. Hubbs & Family Scholarships were awarded to two students: Caitlin Gillan, Radiation Therapy, and Michelle Mummery, Chiropody.

Each student received a $5,000 scholarship.

While she’s aware that her gift has caused quite a bit of celebratory noise at Michener – it is, after all the largest donation in Michener’s history – Mrs. Hubbs prefers to keep things quiet.

“I was very hesitant to do this,” she says, referring to her interview for this article. “I’m not the kind of person who likes to get their name in the paper.”

This is not the first time Mrs. Hubbs has thrown her support behind education. She has spent many years as a volunteer for Imperial Order Daughters of the Empire (IODE) Canada, a charitable women’s organization which has, for more than a century, given thousands of dollars to schools across Canada. Beyond education-related causes, Mrs. Hubbs has also given generously to the Peterborough Regional Hospital and the Art Gallery of Peterborough.

Even as she tries to downplay her role as grand benefactor to Michener, Mrs. Hubbs acknowledges her hope that other people who learn about her generous gesture might be inspired to do the same.

As for the source of her own inspiration to donate to Michener, Mrs. Hubbs acknowledges her hope that other people who learn about her generous gesture might be inspired to do the same.

She certainly saw living proof of this last year, when she met Ms. Gillan and Ms. Mummery during the awards ceremony.

“I was just delighted with those two girls,” says Mrs. Hubbs. “They were so wonderful and I was very, very happy with the peer tutoring program, with The Canadian Federation of Podiatric Medicine and at Michener’s recent Chiropody launch held at the Bata Shoe Museum.

Michelle Mummery recently graduated from Michener’s Chiropody Program. She is recognized for her leadership, communication skills and commitment to learning as well as her many contributions to Michener and her chiropody community. Michelle has created rewarding relationships with many people and is known for her bright, enthusiastic and effervescent disposition.

Outside of her participation in her own academic program, Michelle worked with Michener’s Research Department where she presented one of her key research projects on the subject of simulation and allied health education at Michener for internal audiences. She also co-presented this same research nationally along with a faculty member in a round table format in Calgary in 2006.

In addition to her involvement with other departments within Michener, Michelle has participated in numerous committees such as Michener’s Resource Development Committee. She volunteered in Michener’s new peer tutoring program, with The Canadian Federation of Podiatric Medicine and at Michener’s recent Chiropody launch held at the Bata Shoe Museum.

Michelle is a recipient of the Dorothy A. Hubbs & Family Scholarship, which will continue to be granted annually to exemplary students who demonstrate exceptional achievement in the advancement of personal and professional learning and growth, and who embody the values of Michener.

It’s time to take advantage of your alumni benefits.

Whether starting your new career in healthcare, mid-career or even entering retirement - eat right and stay fit at Michener’s fitness facility in downtown Toronto. Our convenient location and discounted prices are only available as a benefit for Michener Alumni.

Your Alumni membership benefits are available at the following prices:

- 1 month - $25.00
- 6 month - $120.00
- 12 month - $180.00

Visit www.michener.ca/alumni to find out more about Michener Alumni benefits.
On November 28th, Michener hosted its 2007 Awards Recognition Ceremony. Thank you to all the donors whose generosity make these awards possible and to the Scholarships, Awards & Bursaries Committee (chaired by Michener’s Registrar, Bill Pitman) for promoting the awards, selecting the recipients and organizing the event. Congratulations to the following 2007 award winners:

Pavlo Ohordnyk  
AGFA Image Recording Award

Monica Leung  
A.W. Conn Respiratory Therapy Scholarship

Mahmudul Islam  
Alexandra Mitchell Prudenbio Memorial Scholarship

Yan Li  
BLJC Radiation Therapy Scholarship

Haijun Yang  
Cook of Canada Anatomy & Physiology Award

Timothy Yeung  
Dorothy A. Hubbs & Family Scholarship

Jennifer Kerkhof  
Dr. Allen Gardner Memorial Award in Genetics Technology

Jennifer Kerkhof  
Dr. Clarence Redekop Memorial Scholarship

Abdul Aziz  
Dr. Dan Wilmot Imaging Scholarship

Emile Kaus  
Dr. Diana Michener Schatz Scholarship

Scott Melcher  
Dr. Hugh Curry Diagnostic Cytology Scholarship

Joanne Killow  
Dr. Jim Sieniewicz Radiological Technology Scholarship

Timothy Yeung  
Dr. Renate Krakauer Research Award

Destiny Lichty  
Dr. Winston Isaac Scholarship in Respiratory Therapy

Alioska Escorca  
Enterance Scholarship

Kendra MacDonald  
Enterance Scholarship

Jennifer Roberts  
Enterance Scholarship

Edona Caku  
GE Healthcare Patient Care Award

Leslie Ingham  
GE Healthcare Patient Care Award

Pavlo Ohordnyk  
GE Healthcare Patient Care Award

Christopher Cruz  
GE Healthcare Radiopharmacy Award

Michael Wong  
GE Healthcare Radiopharmacy Award

Jane Bonnie Chen  
LifeLabs Medical Laboratory Science Scholarship

Mahmudul Islam  
LifeLabs Scholarship

Oleksandra Kikhard  
MacDonald Sutton Medical Laboratory Science Scholarship

Ryan Potter  
Margie Patterson Memorial Scholarship in Molecular Genetics

Melanie Schwartz  
Michener Alumni Association Scholarship

Timothy Yeung  
President’s Scholarship

Kristina Allyssa Campbell  
Pro Resp Respiratory Therapy Graduating Student Scholarship of Excellence

Saina  
Ron Bentley Memorial Faculty Scholarship

Krista Marquis  
Rossana Magnotta Scholarship in Medical Laboratory Science

Haijun Yang  
Siemens Canada Medical Radiographic Techniques Award

Tatiana Rabaglino  
TD Meloche Monnex Student Alumni Scholarship

Megan Grantham  
The Orthotic Group Scholarship in Chiropody

Daniel Liu  
The Orthotic Group Scholarship in Chiropody

Al Trong Luong  
The Orthotic Group Scholarship in Chiropody

Mehran Afsharkhamseh  
Tyco Healthcare Scholarship

Edona Caku  
Tyco Healthcare Scholarship

Ghada Chidiac  
Tyco Healthcare Scholarship

Kristie Holmberg  
Zonta Club of Toronto Diagnostic Cytology Scholarship

Melanie Volpe  
Zonta Club of Toronto Radiological Technology Mammography Scholarship

This year, one bursary was awarded under each of the Saul Ellis Memorial (Plan Electric) Bursary and the LifeLabs Nuclear Medicine Bursary, and six bursaries were awarded under the Dr. Fred Heagy Bursary.

Scholarships and awards play a vital role in Michener’s ability to attract and retain the best students and we are committed to expanding our available financial aid. If you are interested in establishing an award at Michener, please contact Sarah Eyton, Director of Development and Alumni Relations, seyton@michener.ca.
By the time this year’s batch of cardiovascular perfusion technology students advance to the hospital-based, clinical portion of their studies, they’ll be old hands on the heart-lung machine they’re expected to turn as part of the perfusionist’s job.

That’s because they would already have spent two semesters working with a fully functional heart-lung machine hooked up to a computer program that mimics real patients’ physiological responses during procedures such as a cardio pulmonary bypass.

“This set-up allows students to experience real-life situations and helps instructors monitor students’ ability to make the appropriate decision during critical situations,” says Stephen Murphy, director of marketing for Sorin Group Canada, the Markham, Ont. based company that makes the Stockert SIII heart-lung machine now in use at Michener.

Sorin donated the machine – which has a market value of about $175,000 – to Michener in January 2007. This very expensive gift – to which Sorin also added an auto-transfusion machine, two blood coagulation monitoring systems, and other necessary disposable components – has made it possible for Michener to build the province’s first cardiovascular perfusion simulation suite in applied health sciences.

“This simulation suite, combined with the excellent quality of instruction at Michener, will prepare students much better for what they’re going to see in an actual clinical setting and they’re going to be better equipped for what can go wrong,” says Murphy.

“It’s fine when you’re sitting behind a (heart) pump and everything is going well, but it’s when things go wrong that’s when you realize how well trained you really are.”

Sorin isn’t the only company that has chosen to contribute its technology and expertise toward simulation-based education at Michener. IMPAC Medical Systems Inc., headquartered in Sunnyvale, Calif., signed a three-year deal last January which would see it providing Michener with the latest versions of several hospital information management systems.

Similarly, GE Healthcare, based in the U.K., has agreed to give Michener a computed tomography (CT) unit, while Siemens Canada has already donated an MRI sham unit that works with six laptop simulators.

Other technology partners include The Orthotic Group, in Markham, Ont., which has provided its TOG Gaitscan system for assessing foot biomechanics in chirtopody, and Cryos Technologies Inc., located in Joliette, Que., which this year installed its BioVizion light-based medical imaging system.

The latter donation is a relatively new technology that can help analyze postural, structural and muscular problems based on a full-colour graphic mapping of the skin using fluorescent lighting. Variations in light reflections off the skin surface enable practitioners to pinpoint problem areas.

Using the same technology, practitioners can later use before and after images to monitor and validate a treatment course.

For Michener, the benefits of these technology partnerships are readily apparent: better education resulting in higher-calibre graduates, an enhanced reputation as a centre of education, and, ultimately, better patient outcomes.

“Through Michener, we also have access to people in academia who tend to be more up to date with what’s going on in the field,” says Murphy at the Sorin Group markets.

“BioVizion is a new technology that also represents new thinking from a functional and philosophical standpoint. The sooner we can get these changes in front of future practitioners, the sooner we can integrate them into healthcare practices,” he says.

Being associated with Michener also strengthens Cryos Technologies’ credibility, adds Stimpson.

“Through Michener, we also have access to people in academia who tend to be more up to date with what’s going on in the field,” he says. “And having access to a pool of practicing chiropodists is a valuable resource for us as well.”

And Murphy at the Sorin Group boils down the benefits of the company’s partnership with Michener to one simple thing, keeping the enlarged futures of perfusion in Canada and the Sorin Group alive and well.

“We are the perfusion company here in Canada and around the world, and over 50 per cent of our revenue comes from cardiac surgery,” he says. “So ensuring the future of perfusion in Canada and keeping the profession healthy contributes to our future as well.”

John Stimpson, president of Cryos Technologies, says his company’s partnership with Michener is, without a doubt, a mutually beneficial arrangement.

“Through Michener, we also have access to people in academia who tend to be more up to date with what’s going on in the field,” says Murphy at the Sorin Group.

“It’s really about being able to bring things alive in the classroom and laboratories in ways we were never able to do before,” he says. “And how do you put a value on that – it’s priceless.” — Mary Jo Johnne
In October 2007, Michener’s facility at 222 St. Patrick Street marked its 35th anniversary. Since the facility opened in 1972, it has been very well maintained, but has not undergone a significant infrastructure upgrade. In 2008, the organization’s 50th anniversary, Michener will begin the first phase of transforming its facility into a 21st century healthcare learning environment. The new facility is a direct response to the needs of Ontario’s healthcare community, and to the next generation of applied health science professionals. It will provide an exemplary learning environment for students that is modernized to support new teaching/learning methods.

This transformation involves a major $69 million redesign and infrastructure upgrade to 222 St. Patrick Street. This capital development project (the “Project”) will be executed in several phases over five years. Phase I is a $13 million undertaking, the focus of which will be the creation of a leading edge simulation and assessment centre on Levels 3 and 4 of Michener’s facilities. Further phases will involve a complete overhaul of the remainder of Michener’s physical space (learning facilities, classrooms and laboratories, communications systems, information technology infrastructure, and building services) and will build upon Phase I of the Project. Architectural plans for the Project are on display in the Transformational Gallery in Room 101 of the building. We encourage you to stop by and view them when you are next in the neighbourhood.

It is expected that the Province of Ontario, through the Ministry of Health and Long-Term Care (Michener’s primary funder) will provide the majority of the funding required for Phase I of the Project. We have also initiated the first stage of a Capital Project Request to the Ministry for the next phases and hope it will also support these further components of the Project in an equally significant manner.

Michener will be required to contribute a sizeable share of Project costs. In order to raise its portion of the costs, Michener is planning the most comprehensive capital fundraising campaign in its history. The total Campaign target will likely be between $15 – 18 million. Preparatory work for the Campaign is well under way and we are in the process of recruiting a high level Capital Campaign Cabinet to assist us in our fundraising. The Development and Alumni Relations department at Michener will also be expanded to effectively manage the Capital Campaign.

The Campaign target is an ambitious one for Michener, but we are confident we can achieve it with the support of the entire Michener community, all of our stakeholders, and those companies and individuals in the broader community interested in improving healthcare. The activities around Michener’s 50th anniversary will also be valuable in raising Michener’s profile to the benefit of the Campaign.

Michener is at a very exciting stage of its remarkable history. We look forward to updating you in the coming months on the Capital Development Project and the Capital Campaign.

If you have any questions or suggestions for the Campaign please contact Sarah Eyton, Director of Development and Alumni Relations, seyton@michener.ca.
In 2008, Michener will achieve a half century milestone in its historic development, for it was circa 1958 when its educational embryo was first conceived in the basement halls of the Toronto General Hospital. It was at this time that a new approach to the training of Medical Laboratory Technologists (MLTs) was proposed, one which has stood the test of some five decades of an ever changing health and educational environment within Ontario. Prior to 1958, the traditional training for MLTs was on-the-job and supervised by more experienced members of the laboratory staff. Exposure to the theory and practice of the technology varied according to the knowledge of the trainer, the ebb and flow of clinical activities and the variability and volume of analyses performed. The proposed new approach involved having a dedicated time frame for the theoretical/practical components of the practice, followed by hands-on clinical experience. While the actual time frames and the content/process of these two components of training may have changed over the years, the fundamental principles behind the proposal have remained intact until the present day. The 1958 proposal for training was implemented on a pilot basis at The Toronto General Hospital under the tutelage of Dr. Diana Schatz and was a great success, so much so that other hospitals in the Toronto area also joined in the program. The need for increased training space plus the demand for more MLTs led to the development of a proposal to have a central educational institute for the training of Toronto area MLTs, approval for which was given by the Ontario government in the mid 1960’s provided that other professions were included. So, the Toronto Institute of Medical Technology (currently The Michener Institute) was born with Dr. Diana Schatz as its founding CEO.

The tie between these past events and current research is the ongoing need for accurate and relevant information to inform the level of human resources needed by the health care system. Medical Laboratory Science is no exception. While the labour market inquiry for this profession some 30 years ago may have been informal and covered a limited geographic area, the outcome, namely the need for more and better trained technologists, was instrumental in the development of a new educational model, and an institute that has now spread beyond the local scene to become provincial, national and international in scope.

In more recent times (2006), Michener completed a more exhaustive analysis of the labour market dynamics in the medical laboratory field which involved both Medical Laboratory Technologists and Medical Laboratory Technologist Assistants (MLTA). In terms of MLTs, the final report showed that on an overall basis there continues to be a need for a significant number of well trained MLTs in the immediate future. The figures show that over the two-year period from 2003 to 2005 there was a 13% growth in full-time positions, an 8% increase in part-time positions and a 20% rise in contract/casual positions. Despite this growth there continued to be vacancy levels which averaged 4.4% over the two years of the study in all employment categories, plus a need for new/additional positions over the next three years at the same level (2.2% per annum). Added to these two factors are losses due to attrition, the reasons for which are extensive, however, the major reason for loss of staff is due to retirements from the field. Retirees now constitute 44% of lost positions to the system at large and in addition, a total of 28.5% of the MLT workforce is expected to retire within the next five to ten years. When one takes into account the current vacancy rate, growth levels and net attrition, the study projects the need for a 37% replacement level of the overall MLT workforce for each of the next three years.

Other interesting features of the study showed that while the profession has an average of 4.4 females to every male, a greater percentage of females leave the profession after reaching fifty years of age. In terms of those leaving the field, our results show the loss of personnel due to cutbacks is less than 2%, migration to other provinces within the same field is at 3.6%, while losses due to immigration to another country are at less than 1%. Also within this same group, staff leaving the field to work in other unrelated positions is identified as being at 4.5%, while staff leaving because of health related issues is at a rate of 22.5%.

While the ongoing demand for MLTs is well identified and the need for support in terms of human resources is apparent within the laboratory system for the immediate future the growth of Medical Laboratory Technicians/Assistant is even more evident. On an overall basis there are 2.5 MLTs to every MLTA in the population group studied, however when you look at those facilities that reported on both the number of MLTs and MLTAs they possess the ratio drops to 1.6:1. The use of MLTAs within the laboratory system appears to be on the increase to the extent that hiring levels have gone up by 22.7% in all MLTA staff categories over the two-year period of the study. This growth would appear to be ongoing as the projected need for MLTAs over the next three years will see a one-third increase in the total MLTA population. Recognizing that this one-third increase does not include all the parameters (e.g. attrition) normally included in our studies, the results may well be understated. The apparent magnitude of this growth plus the limitations of the study indicate that a more in-depth review of the MLTA human resource dynamic would appear to be warranted. The results of such a study have the potential of identifying and perhaps confirming what many practitioners already know, that the MLTAs are here to stay and that their role within medical laboratory practice is growing both in numbers and the types of procedures they undertake. – Dr. Colin Stone

Dr. Colin Stone is a retired Michener employee from the Research Department. He can be contacted via e-mail at research@michener.ca.
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Surname at Graduation (if applicable) __________________
Year(s) of Graduation: __________________

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Alumni Happenings: Anything new with you?

Let us know what you are up to and we will publish it in the next issue of Michener Magazine.

Please include a photograph or two. Or send us an e-mail to alumni@michener.ca.

Do you know a graduate we should profile in Michener Magazine?

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Program and Year: __________________
Phone: __________________

Fax form to 416. 596.3156 or update your address online at www.michener.ca/alumni

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•  Hands-on workshops
•  Correspondence courses
•  On-line courses

The Next Step in Your Healthcare Career

HELP US UPDATE OUR ALUMNI RECORDS

Win an iPod nano

Missing links

We miss you! Has your address or phone number changed recently?
Send your current contact info to alumni@michener.ca
and you’ll be entered in a draw to win the new 8GB iPod nano. If you know someone who is a Missing Link tell them to send us their info for a chance to win the iPod nano. You can also go to www.michener.ca/alumni to update your details. The deadline for contest entries is March 31, 2008. This prize was generously donated by Canada Life, one of Michener’s Affinity Partners.

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Subhash Mohan arrived as an immigrant to Canada with a medical science degree from India, a microbiology certificate from Great Britain, and two years' experience as a medical technologist for a British local water authority.

So he was surprised to learn he couldn't work as a medical technologist unless he was certified by the Canadian Society for Medical Laboratory Science.

“It was very disappointing and surprising,” recalls Mohan, who landed in Toronto from London in 1976, “especially since I had already been working in England with the local authority doing chemical and bacteriology analysis of drinking water.”

To the thousands of foreign-trained healthcare professionals who come to Canada each year, Mohan's story will likely sound all too familiar. Like Mohan, many of these professionals find themselves unable to work in their fields because their education and work experience are not recognized in Canada.

This is where Michener's Access and Options program comes in.

Established in 2002, the Access and Options program helps internationally-trained students.

Through Access and Options, Michener instructors and staff also try to find clinical placements for foreign-trained students.

“All foreign-trained students are so demoralized by the time they get to us and they feel like they’ll never make it,” she says. “So it’s so gratifying to know that what we’re doing here is really making a difference in people’s lives.” – Marjo Johnne

The face of research at The Michener Institute for Applied Health Sciences is evolving. Aligned with a new institutional mission and vision, the definition of research has expanded from a focus on institutional effectiveness and health human resource measurement to include both educational and professional research.

Best practices in pedagogy, the effectiveness of a simulation-enhanced curriculum and the assessment of stakeholder needs for the purpose of new program development now reflect a more comprehensive research agenda that meets the needs of Ontarians as well as our own institutional growth and development.

A New Vision of Research

The Research Department provides leadership in the collection, analysis and interpretation, reporting and dissemination of comprehensive data that support The Michener’s Mission and Vision. Furthermore, the Research Department engages in all activities with full knowledge of the relevance of our work to the five Michener strategies:

- Academic Innovation
- People Plan
- Knowledge Transfer
- Resource Innovation
- Quality

The Research Department’s Core Activities

1. Quality Management Activities:
   - Stakeholder satisfaction studies
   - Enrolment Statistics, Conversion Rates
   - Program Evaluation

2. Knowledge of Healthcare Environment/Professions Activity:
   - Primary and secondary research to assess provincial needs for new programming (Anesthesia Assistant, 2005)

3. Pedagogical Research Activities:
   - Impact of simulation on teaching and learning
   - Digital Slide Technology and the impact on student learning
   - Time to clinical competency (MRI, Radiological Technology, 2005)
   - Assessing readiness for clinical education (validation of the Readiness to Practice model)
   - Practice pattern study for Genetic technologists, 2005

If you would like more information about Michener’s Research Department contact research@michener.ca

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Medical education has, since the time of Hippocrates, been based on the old “see one, do one, teach one” model of apprenticeship.

Even with the emergence of simulation technology – such as the Harvey mannequin, which mimics cardiac conditions – healthcare training has largely been a process of learning theory followed by supervised clinical practice. The result: practitioners are still learning on the job.

Thankfully, this less-than-ideal status quo appears to be finally changing as more educators, hospitals, and other healthcare stakeholders begin to recognize the critical role of simulation in improving healthcare education and, ultimately, patient outcomes.

“Simulation is quickly becoming an extremely important tool in medical education and in many respects a cultural change engine in health care at large,” says Dr. Amitai Ziv, founder and director of the Israel Centre for Medical Simulation. “The future is, finally, here and we’re seeing simulation being adopted rapidly in various sectors of healthcare, including applied health professions.”

Indeed the number of simulation centres in Canada and around the world has grown in the last decade from a scant handful to more than 100 in such countries as Canada, the United States, Australia, Germany, Israel and the United Kingdom.

A 2005 survey by the Canadian Patient Safety Institute (CPSI), a non-profit organization with offices in Ottawa and Edmonton, pegs the number of simulation centres in Canada at 17. Since that survey, at least one more simulation centre – the McGill Medical Simulation Centre at McGill University in Montreal – has been added to the total.

“We’re definitely seeing more and more simulation centres worldwide,” says Dr. Kathryn Parker, director of research at Michener. “What’s also interesting is how these simulation centres are being used today, even though they were initially driven by the need to acquire profession-specific skills, a growing number of these centres are also being used for inter-professional learning involving practitioners from multiple professions.”

Michener, which has been using simulation in education for years, is already on the CPSI list. But its presence on the list will take on a greater significance in 2009 when construction on the new Michener simulation centre is expected to be finished.

While educational institutions around the world have been busy building simulation centres, researchers have been prodigiously compiling evidence on the effectiveness of simulation, says Parker.

“Research in the area of simulation has also grown in recent years,” she says. “I think this speaks to the growing recognition that simulation is effective on so many levels.”

Experts agree that simulation-based education, which involves the use of tools and technology to simulate various patient conditions and responses to medical intervention, delivers far better results than the traditional apprenticeship model when it comes to teaching profession-specific skills.

Where anaesthesia residents used to make up the large majority of simulation users in Canada, many students from other healthcare disciplines are now seeing simulation integrated into their school’s curriculum. In fact, the CPSI found that 64 per cent of these centres offered training for programs such as practical nursing, respiratory therapy and technology, paramedic, EMT, ambulance, quality assurance.

But its value extends beyond the acquisition of hard skills. At Michener, for instance, simulation is also used to recreate real-life scenarios where students would be working with practitioners from other professions, thus arming them with collaborative skills within an inter-professional environment.

Michener also uses simulation to assess students’ competency and ensure a standardized learning experience for everyone.

While simulation has come a long way in medical education, it still has quite the journey ahead of it, says Dr. Ziv.

“For simulation to fully deliver on its value as an integral part of healthcare training, it needs to be fully embraced by all industry stakeholders, including health ministries and regulators.”

The latter group needs to start incorporating simulation-based learning as part of licensing exam requirements, says Dr. Ziv.

“The healthcare industry needs to fully embrace simulation as a must-have and must-use component, instead of seeing it as a nice-to-have experience,” he says. “That’s where we need to be with simulation, and we’re getting there.”

The payoff at the end of the journey will be more healthcare practitioners who will be more competent and, consequently, also more confident. But, ultimately, it is patients who stand to win the most, says Dr. Ziv.

“If by applying simulation-based training, we will be allowing students to make mistakes while they train without compromising patients’ safety,” he says. “When all is said and done, this really is the most important goal of all.” – Marjo Johne

Dr. Amitai Ziv

Amitai Ziv (C) accepting his Honourary Diploma from Paul Gamble, President & CEO (L), and Cathy Fooks, Chair, Board of Governors (R)

Dr. Ziv trained as a Pediatrician at Hebrew University – Hadassah Medical School in Jerusalem with sub-specialties in Adolescent Medicine (University of Pennsylvania) and Medical Management. Dr. Ziv has served as a consultant for the Educational Commission for Foreign Medical Graduates International Clinical Skills Assessment (ICSA) programs worldwide.

In May 2007, Dr. Ziv was awarded the 2007 Charles Bronfman Humanitarian Award. The award celebrates the vision and talent of an individual or team under 50 years of age, whose humanitarian work has contributed significantly to the betterment of the world.
On the evening of October 30, 2007, the Chiropody Program Wine and Cheese Social Event was held in Schatz Hall Lounge. This annual event provides a venue for the Chiropody students from all three years to come out and meet their colleagues from other years as well as members of the Chiropody faculty. It also allows for networking with some of the suppliers in the industry on a more personal level. This year's social was well timed as it also allowed the students to de-stress following their midterm exams. The event was sponsored entirely by many of the suppliers that are involved in the day-to-day practice of chiropody. Over $2,500 was donated to cover the cost of food, beverages and door prizes.

Prizes including gift cards, running shoes, laptop bags and gift baskets were donated by the following organizations and individuals: Elsevier Canada, Langer/Bi-Op Canada, McGraw-Hill Ryerson, Medical Mart, New Balance Toronto, The Orthotic Group, Vittoria Phoenix (Cadillac Fairview Mall), and Stride Rite Canada. – Deborah Loundes

showing off their prizes: L to R: Marina Stanusich (2nd year student), Megan Grantham (3rd year student), and Meghan Hoult (2nd year student)

Celebrating National Respiratory Therapy Week at Michener

Respiratory Therapy Week takes place annually in October to celebrate, educate and build awareness about the profession of respiratory therapy (RT), and to spotlight Respiratory Therapists (RTs) as members of the health care team and as contributors to patient care and the health community. This year, RT week was held from October 22-26, 2007.

Led by Lindsay Thompson, a second year student, the RT Volunteer Committee planned a week of fundraising, team-building and fun. Throughout the week, tickets were sold for a $50/50 raffle that raised $269.00 for the Ontario Lung Association. The First Annual RT Olympics had four teams competing for prizes which were generously donated by suppliers and professional organizations. Each team comprised a first year and a second year RT student and one RT faculty member. The first year students were each required to perform a number of RT skills, never before done by them, while being coached by the second year students with words only—no demos allowed. The second year students could ask yes/no questions of the faculty members if they got stuck. Everyone performed beautifully in this truly collaborative learning opportunity.

Following the Olympics, students and faculty adjourned to O’Grady’s pub where they had the chance to drink “blood-tinged sputum,” “Pseudomonas aeruginosa” and “pulmonary edema.” Gentle readers, this may not appear to be a fun thing to do, in fact it may sound rather disgusting, but those in attendance will gain for their academic and professional communities of practice and the community at large. Perhaps they have started a new RT Week tradition!

As part of Respiratory Therapy Week, Michener’s second year Respiratory Therapy students officially received their stethoscopes at the 4th Annual Stethoscope Ceremony that took place at Michener on October 24. The students marked the occasion by reciting the Respiratory Therapy Student Oath, led by Kathleen, and then placing their stethoscopes around their necks in a moving ceremony. The oath is based on the Canadian Society of Respiratory Therapy Code of Ethics and A Yale Physician’s Oath. Students pledge a dedication to the profession, to the promotion of health as well as to the treatment of disease and to their patients. Also in attendance at the event were Michener faculty, representatives from Michener’s Executive Leadership Team, the Council on Accreditation for Respiratory Therapy Education, The College of Respiratory Therapists of Ontario and over 60 excited students who will become future RTs. The event was organized by faculty members Martha Williams and Andrea White Markham.

Congratulations to all those who helped to make Respiratory Therapy Week at Michener a success! – Kathleen Olden-Powell and Lissa Manganaro

Michener’s Respiratory Therapy students are prepared for clinical placements at over 20 hospital and clinical sites throughout Ontario.

Kathleen Olden-Powell is a member of the Respiratory Therapy faculty. Lissa Manganaro is the manager of Corporate Support at Michener
making students feel at home

The Michener Institute’s strategic intent, Best Experience, Best Education, is seen and heard often throughout our hallways, classrooms, boardrooms and offices. It has become our brand, our slogan—we want people to know that this is what Michener is striving to achieve and provide. But we can only be the best if we truly believe it and, if our actions exemplify this belief. It is no surprise that one of our core values centres around relationships—where would we be without each other? The Student Success Network’s functions and purpose would not exist without solid relationships with our students, faculty and staff. As a new department and service within Michener, we have spent our first months building relationships with both internal and external partners that will undoubtedly grow into inseparable components of Best Experience, Best Education.

Our most important relationship is with our students—we exist to serve them. Slowly but surely, we are getting to know them and are learning about their needs. The students are also learning more about us and what services we can provide. We know that if we provide exceptional service to one student, he or she will tell others who will come to us when they are in need. Good relationships create good word of mouth. Relationships are further strengthened and maintained via the support we receive from faculty, staff and external partners. The faculty and chairs are instrumental in allowing us to build relationships with our students. They are the ones who will recommend our services to a struggling student, promote our events in class or refer capable students to us for our Peer Tutoring program. We feel fortunate in knowing that our goal is their goal, that student success is the central driving force behind all of our exchanges and actions. We are also extremely pleased to be working closely with LCRI Consulting to develop the Michener English Language Assessment (MELA), facilitate workshops for our students and provide support in the form of Chat Cafe and English language improvement classes. The lines of communication are always open, and we are grateful that this relationship has developed and created such positive supports and services for our students.

We would like to take this opportunity to recognize how important our relationships are with all of you! Each bond that we have formed and maintained strengthens our commitment to our students and inspires us that they truly do receive the Best Experience, Best Education. —Christine Ovcaric

Christine Ovcaric is a former member of the Student Success Network at Michener. Feedback can be forwarded to success@michener.ca.

CHRISTINE OVCARIC

Making students feel at home

“Our most important relationship is with our students—we exist to serve them.”

MICHERNER’S global reach

My volunteer work with Global Youth Network started in 2005. Even though volunteering in other countries had been part of my to-do list ever since high school, I was skeptical about the impact that foreign volunteers had on local residents. I was also uncertain about the level of safety a group of backpacking foreign volunteers would have while travelling through different regions of the world. However, after careful research via the Internet and personal testimonials, I decided to volunteer with the Global Youth Network.

Global Youth Network (www.globalyouthnetwork.ca) is based in Kitchener, Ontario and sends university teams to all parts of the world to participate in community development projects. Every year in September, the recruitment process starts at most universities in Ontario. In 2005, the University of Toronto team was bound for Guatemala and El Salvador. After a year of fundraising, we were ready to embark on an unforgettable journey to Central America.

In Guatemala City, we slept on the floor of a classroom in a church. Every day after school, the children would come to the church for their after-school program. During this time, we would teach them English and they would teach us Spanish. Our host and sole translator, Gerson, was a great guide and friend who was studying to be a translator. He would bring us painting and renovation supplies that we used to paint the exterior and interior walls of the church as well as desks and chairs.

After a week with Gerson, we packed our bags and hitchhiked to La Mora, a small farming village that was trying to start a Spanish school for foreigners. We stayed with the Montoya family who had chickens, cows and horses in the backyard and an all-purpose washing sink in the front yard where we not only did the dishes and laundry, but also took our (cold) showers. In La Mora, our goal was to help the community create an English language brochure and website for their organization.

“...we relied on our students to keep us up to date with what is or isn’t working at Michener. It is our goal to foster strong and enduring relationships to help each other achieve our organizational goals. Relationships are further strengthened and maintained via the support we receive from faculty, staff and external partners. The faculty and chairs are instrumental in allowing us to build relationships with our students. They are the ones who will recommend our services to a struggling student, promote our events in class or refer capable students to us for our Peer Tutoring program. We feel fortunate in knowing that our goal is their goal, that student success is the central driving force behind all of our exchanges and actions. We are also extremely pleased to be working closely with LCRI Consulting to develop the Michener English Language Assessment (MELA), facilitate workshops for our students and provide support in the form of Chat Cafe and English language improvement classes. The lines of communication are always open, and we are grateful that this relationship has developed and created such positive supports and services for our students...”

In the summer of 2006, I decided to lead my own volunteer outreach team. This time, we were bound for Peru. We stayed in Lima with Ela and Coco who were the directors of a fair trade coffee plant. We visited the Working Children’s Home, which is so difficult to access that patients have died before reaching the hospital, even via ambulance.

We also visited one of the few local hospitals in Lima, which is so difficult to access that patients have died before reaching the hospital, even via ambulance.

Spanish school. In addition, we helped distribute malaria pills to local residents while promoting personal hygiene.

After a month, I left Guatemala and El Salvador, returning home to Canada. Since then, I have had the global reach of the Global Youth Network, and the impact of my work has become increasingly evident.

Yan Li is a 2nd year Radiation Therapy student at Michener.
In Memoriam
Kate Greenaway, Respiratory Therapy ’90

The Respiratory Therapy Department of St. Michael’s Hospital, Toronto, mourns the loss of their former colleague and friend, Kathleen (Kate) Greenaway. Kate graduated from the Michener Institute in 1990, and worked as a Respiratory Therapist at St. Michael’s Hospital from 1990-2006. She left an indelible mark on all who knew and worked with her. Kate’s dedication and professionalism helped set new standards in the evolving role of the Respiratory Therapists at St. Michael’s. A natural mentor early in her career, she provided contemporaries and new generations of clinicians with invaluable examples of skill and compassion in caring for their patients. Kate’s jovial manner and contagious laugh could easily lighten spirits and ease tensions. She provided this simple relief in great quantity to patients, families and colleagues when they needed it most. You will not be forgotten Kate. We miss you dearly.

Monique von Wiedner, Medical Laboratory Science ’89

Monique passed away at the Milton District Hospital, Sunday, May 7, 2006. A tree was planted in memory of Monique von Wiedner in the Wall-Custance Memorial Forest, University of Guelph, Arboretum.

Leonardo Faundez, Nuclear Medicine ’96, Ultrasound ’97
Leonardo married Genoveva Vazquez in May 2006. Leonardo has been working at Michener as an Ultrasound Professor since 2005. He is working towards his Masters in Education at Central Michigan University.

Amitra Rana
Congratulations to Amitra (formerly Kullar) & Harjeet Rana who were married on August 6, 2006 in Woodbridge, ON and now reside in Halifax, Nova Scotia. Amitra Kullar came to Michener in 2003 to study Respiratory Therapy and joined The Michener Institute’s inaugural “Telefundraising campaign for Student Scholarships” in 2004. During the course of the 2004 campaign, Amitra successfully developed both her interpersonal and communication skills through her interaction with The Michener Institute alumni membership and with her team members. Because of the excellent job that Amitra performed in her Supervisor/Team Leader role in 2004, Michener’s Development and Alumni Relations Department asked Amitra to join Michener’s telefundraising campaign again in 2006.

Amrita & Harjeet

John Tzountzouris, Molecular Genetics ’96
John and his wife Viki Pearce had their second child on June 4th, 2007. Barrett Tzountzouris is welcomed by his big brother, Nicolas Tzountzouris who is thrilled to have a little sister.

Rossana Di Zio Magnotta, Medical Laboratory Science ’73
Rossana, Co-Founder and President of Magnotta Winery Corporation, was inducted into Canada’s Most Powerful Women: Top 100 Hall of Fame by Women’s Executive Network (WXN) on November 20, 2007. WXN is Canada’s leading organization dedicated to the advancement and recognition of executive-minded women in the workplace. Rosanna was named Michener Alumna of Distinction in 2004.

Amitra & Harjeet

Amrita Harjeet

Births

Tania Toffner
Tania has been elected by her peers to be the Ontario representative on the CSMLS Board of Directors and is excited to begin her new adventure in January 2008.

Bessie Carrydod, Diagnostic Cytology ’77
Bessie, a Clinical Coordinator at Mount Sinai Hospital, received The Hugh Curry award in Cytology at the International Academy of Cytology conference held in Vancouver this year. The paper, published in Acta Cytologica in October of 2007, fulfilled Bessie’s requirements for completion of her Master of Medical Science (Cytology) from Charles Sturt University. On September 24, 2007, Bessie also received Michener’s Clinical Teaching Award of Excellence. The nominations for this award are submitted by students in the clinical year of their respective programs at Michener.

Edward Sun, Nuclear Medicine ’98
Edward, a Clinical Coordinator in Nuclear Medicine Technology at the University Health Network, received the Crystal Apple Award this year.

The Alumni Association is pleased to announce the call for nominations for the Alumni of Distinction Award for 2008. For our 50th Anniversary year, we would like to honour up to five outstanding alumni (ideally one from each decade).

Tania Toffner, BSc MLT ’01
To “lead by example,” this permeates through every aspect of Tania’s approach to her chosen profession of Medical Laboratory Technology. This work ethic is evident in her commitment to participate in the promotion and enhancement of the profession. Tania is an active volunteer for the CSMLS examination panel since May 2004, a committee involved in the development of the national certification examination and are accountable to the Council on National Certification. Since January 2005, Tania became the CSMLS examination panel representative on the Council on National Certification, accountable to the CSMLS Board of Directors for issues of national certification. Recently, Tania has been elected by her peers to be the Ontario representative on the CSMLS Board of Directors and is excited to begin her new adventure in January 2008.

Tania applies this same level of commitment and determination in her daily activities. Currently employed at Sunnybrook Health Science Centre in Toronto, Tania began her career in the Blood and Tissue Bank and recently obtained a position in Flow Cytometry.

Tania is a certified Medical Laboratory Technologist (CLT), graduated in 2001 from the general medical laboratory science program at the Michener Institute for Applied Health Sciences. She holds a general BSc from the University of Guelph.

Susan O’Neil, Respiratory Therapy ’81
On Tuesday, October 23, 2007, Susan was invited to the United Nations Association in Canada’s 2007 Special Dinner on Disarmament “A World Without Weapons” to honour Dr. Hans Blix (painted between Susan and her husband, Keith). As well as being an UNA-Canada member, Susan has recently completed her Masters in Applied Science (Respiratory Science). She currently is enjoying working as the Inside Respiratory Therapist at VitalAire Healthcare in the corporate office in Mississauga.

Susan (L), Dr. Hans Blix (C) and Susan’s husband Keith (R)

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Amrita Harjeet

Amrita Harjeet

This is the end of the text.
upcoming events

- Winter Cabinet Meeting - March 5, 2008
- Career Fair - April 2, 2008
- Spring Cabinet Meeting - April 9, 2008
- Guidance Counsellor Day - April 10, 2008
- Celebrating our Educators: Faculty Event - May 2008
- Street Party - September 13, 2008
- Annual General Meeting - September 16, 2008
- Scholarships & Awards Ceremony - October 8, 2008
- Graduation - November 1, 2008
- Homecoming - November 20 - 22, 2008
- Open House - November 20 - 22, 2008
- Gala Dinner for All Alumni & Friends - November 21, 2008

Email us if you would like to get involved.

The Michener Senate
senate@michener.ca

Orientation
orientation@michener.ca

Open House
openhouse@michener.ca

50th Anniversary Events
50th@michener.ca

2007 HIGHLIGHTS

- 50s Themed Staff Holiday Party, Dec 2007
- First Michener Senate Cabinet Meeting, June 2007
- Orientation, Sept 2007
- Street Party, Nov 2007

Michener welcomes
A SPECIAL VISITOR

On December 13, 2007, George Smitherman, the Ontario Minister of Health and Long-term Care, made his first visit to The Michener Institute and was given a tour of Michener’s facilities by Dr. Paul Gamble, President & CEO.

The Minister’s tour provided an opportunity to communicate the significance of Michener’s Capital Development Project and the positive impact Michener’s structural transformation will have on Ontario’s healthcare system.

Dr. Paul Gamble shows Minister George Smitherman Michener’s Picture Archiving and Communication Systems (PACS) Laboratory

Minister George Smitherman takes a break from his tour at Michener to talk to a few of Michener’s respiratory therapy students about their studies.
MICHENER ACHIEVES
Top 50 in 50th Year

Michener employees are holding their heads just a little bit higher these days, and for good reason. In addition to celebrating its 50th anniversary in 2008, Michener can now proudly boast about being one of the Top 50 Employers in the GTA!

The Top 50 Employers list is compiled annually by MediaCorp Canada, Inc. Organizations are selected on the basis of workplace atmosphere and environment; vacation and time off; employee communications; performance management; training and skills development; and overall family-friendly policies.

Michener was profiled in the October 13 issue of The Toronto Star along with a half page ad thanking the staff and faculty for their contributions to the education of applied health care providers in the province of Ontario.

“IT is an absolute honour for Michener to be chosen as one of the best organizations to work in Toronto,” said Joanne Milligan, Vice President, Human Resources and Organizational Effectiveness. “Michener people are dedicated, values-driven, and are our greatest asset.”

Michener’s application emphasized a unique working environment. There is an organizational commitment to optimizing work-life balance, and Michener provides employees with the support and on-site resources to optimize this balance. The program includes complimentary access to an on-site fitness facility, comprehensive employee-paid health benefits, financial support for lifelong learning and educational pursuits, as well as generous vacation and maternity leave packages.

Opportunities for employees to contribute to strategic conversations and to decision-making are provided through Michener’s Senate. Employer successes are recognized through the Recognition Program, which encourages employees to acknowledge the contributions of peers and management through “life saver” postcards, monthly values-in-action awards and annual awards of achievement and excellence.

“We’re genuinely pleased to be recognized as a Top 50 GTA Employer,” said Dr. Paul Gamble, President and Chief Executive Officer. “Our faculty and staff enthusiastically contribute to life and learning at Michener and the honour is very special for us this year as we’ll be celebrating our 50th anniversary in 2008.” – Shereen Khan and Lissa Manganaro

Shereen Khan is a member of Human Resources and Organizational Effectiveness Department. Lissa Manganaro is the Manager of Corporate Support at Michener.

We’re honoured to be recognized as one of Greater Toronto’s Top 50 Employers. We value the dedication and outstanding service of our employees. Michener’s faculty and staff proudly educate Ontario’s medical technologists, therapists and other applied health providers who serve a vital role in healthcare today.
“This is my SOLUTION.”

As a partner of The Michener Institute for Applied Health Sciences, TD Meloche Monnex offers you high-quality home and auto insurance products, preferred group rates and exceptional service.

**NEW** Identity Plus Solution™, our latest innovation in home insurance, reflects our commitment to superior coverage. The most advanced product of its kind in Canada, it provides a complete identity restoration service in the event of identity theft. Call us today to learn more.

Enjoy savings through **PREFERRED GROUP RATES**:

TDMelocheMonnex.com/michener

1 866 352 6187

Due to provincial legislation, our auto insurance program is not offered in British Columbia, Manitoba or Saskatchewan. The TD Meloche Monnex home and auto insurance program is underwritten by Security National Insurance Company and distributed by Meloche Monnex Insurance and Financial Services Inc. in Quebec and by Meloche Monnex Financial Services Inc. in other provinces and territories. Identity Plus Solution is a trademark of Meloche Monnex Inc.