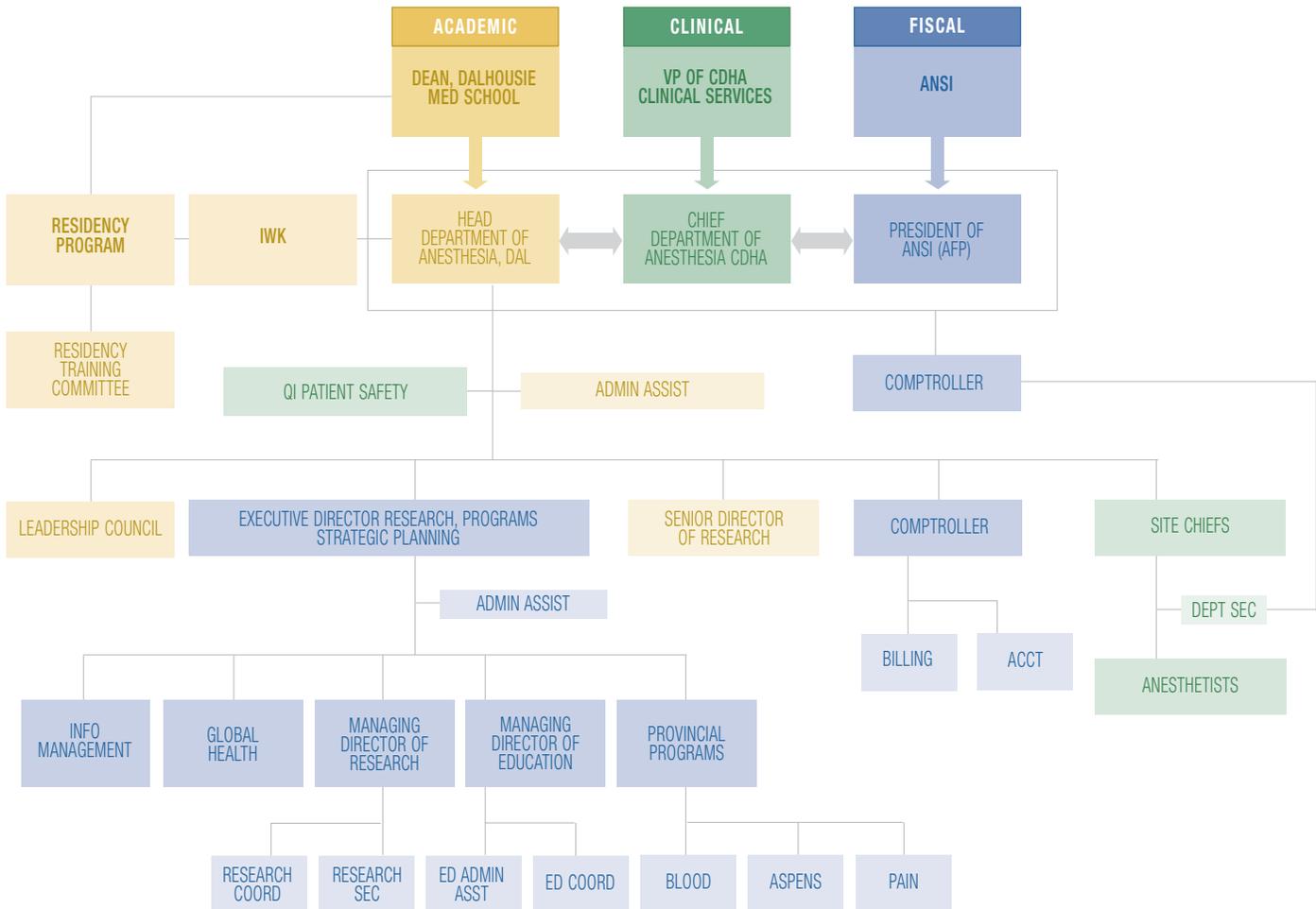




Department of Anesthesia
Annual Report
2009/2010

The Department of Anesthesia

GOVERNANCE STRUCTURE



COMPOSITION

102 anesthesiologists at the QEII Health Sciences Centre, the IWK Health Centre, Saint John Regional Hospital, Hants Community Hospital, the Dartmouth General

Residents	28
Anesthesia Assistants	13
Anesthesia Technologists	23
Administrative and Support Staff	16

Message from the Chair

Reflecting on individual triumphs and challenges, and team accomplishments and disappointments in 2009/2010, I was struck by the leadership that emerged within the Department of Anesthesia. This leadership was fuelled by issues, driven by fundamental concern for patients and their welfare and championed by determination, perseverance and courage.

The Department of Anesthesia is fortunate to have many types of leaders. They may not all occupy formal leadership positions, but each contributes to make Anesthesia better for patients and colleagues and a centre of anesthesia excellence.

Leadership is about results, and the department has achieved many, including:

- The QEII Pain Management Unit cut its wait times significantly, enabling the team to provide services to hundreds of patients much sooner.
- The regional block service performed more than 2000 blocks for a growing number and type of surgeries.
- The pediatric pain team had a banner year for publications, earned prestigious awards for their local and international work and were successful in gaining CIHR research funding for a number of new projects.
- The Department of Anesthesia produced its first clinical accountability framework. This innovative tool allows the department to measure, evaluate and report clinical activity against predetermined targets. It validates one of Anesthesia's primary accountabilities, the delivery of safe patient care.
- A new, customized anesthesia information system (AIMS) will support the department's efforts to better measure and evaluate clinical activity, resulting in patient care improvements.

- During the H1N1 response, Anesthesia expertise and leadership was put to the test in the CDHA perioperative portfolio. Department members fulfilled many different roles, often assuming the lead in resolving complex, never-before-encountered issues.

To me leadership is also about being able to juggle multiple priorities while remaining doggedly focused — as demonstrated by Anesthesia clinicians who contribute as educators and researchers while providing exemplary patient care.

The Department of Anesthesia's research grants more than doubled over the past five years and we've seen a significant increase in articles written and presentations delivered at the national and international levels.

However, Anesthesia's research accountability framework's definition of productivity extends beyond funding, publications and presentations. Anesthesia researchers also focus on collaborative endeavours, idea generation and knowledge translation. Textbooks by department members related to airway and pain are a testament to this.

Research received a further boost with the success of the **QEII Excellence in Research Gala** in November 2009. The theme was *Pain: A Global Experience*. The event created greater awareness of the daily challenges patients face and an understanding of Anesthesia's role in managing this intransigent medical issue.

In 2009, the offices of Education and Global Health established a Global Health Fellowship and, in 2010, Education and Pain Management Services added a Fellowship in Regional Anesthesia and Acute Pain Management, bringing the department's total clinical fellowships to seven. Anesthesia is now recruiting the highest quality candidates for these positions.

Recognizing the significance of personal and professional growth, Anesthesia established a mentorship program inclusive of all department members.

It expanded its continuing professional development (CPD) portfolio by staffing Medical Director of CPD and Education Coordinator positions. These are key investments in the success of the Department of Anesthesia and its members.

The residency program continues to attract the best and brightest. The five spots available garner over 200 applicants—a testament to the program's strength.

With the 2009/2010 academic year at a close, the challenge looking forward is to sustain the leadership and success of the past year. This will be done by continuing to recruit world-class clinicians, educators and researchers. The economic environment of the province and the Maritimes adds to the challenge, particularly as the compensation of anesthesiologists here at Dalhousie falls progressively behind the rest of Canada. Accountability, a commitment to excellence and relentless pursuit of what is in the best interest of patient care will be crucial to achieving the Department of Anesthesia's vision: *a culture of excellence in anesthesia clinical practice and pro-grams, research and education*.



Dr. Mike Murphy
Chair, Department of Anesthesia

Five-Year Strategic Plan

The Department of Anesthesia produced its first five-year strategic plan in 2007. The strategy is about moving forward. It marks the destination, the directions in which to travel, the roads to take and the essential pit stops.

Strategic Plan Review and Reporting Session

September 2009



The Department of Anesthesia held its annual strategic plan review and reporting session in September 2009, having held its inaugural strategic planning session in 2007. Department members reviewed the department's accomplishments in relation to the strategic plan and mapped out priorities for 2009/2010.

The aim of the session was to further develop and refine the department's '*road map*.' The Department of Anesthesia strategic plan is intended to be agile, enabling department members to make annual revisions thus better positioning it to seize opportunities, recognize successes and meet challenges while working toward its vision.

OUR VISION:

A culture of excellence in anesthesia clinical practice and programs, research and education

OUR MISSION:

To deliver anesthesia services through up-to-date clinical care based on the latest evidence (research) and knowledge (education).

STRATEGIC DIRECTIONS:

The Department of Anesthesia reviews its strategic plan annually. As a result of the review in 2009, the strategic directions were revised to reflect progress made to date and changes within the department.

- 1 A cadre of well-supported and renowned clinicians, backed by a clinical department, that continues to provide world-leading anesthesia services and programs in support of Capital Health's mission.
- 2 A cadre of well-supported and renowned researchers, backed by an Office of Research with an appropriate infrastructure that facilitates research endeavours, is transparent and is accountable.
- 3 A cadre of well-supported and renowned educators, backed by an Office of Education with appropriate infrastructure that facilitates educational endeavours, is transparent and is accountable.
- 4 A communications plan that keeps departmental staff and the broader community informed and up to date on anesthesia activities, accomplishments and initiatives.
- 5 Strategic partnerships that enable the aims and objectives of the department's academic agenda.
- 6 A departmental information management strategy with up to date, state of the art technology, processes and systems.
- 7 An efficient administrative structure that facilitates and supports a culture of excellence and the department's mission.
- 8 A global health program that educates and builds capacity in developing partner countries.

DEMONSTRATING INNOVATION & LEADERSHIP IN ACCOUNTABILITY

The Department of Anesthesia designed and subsequently operationalized its first accountability framework, the **Research Accountability Framework**, in 2009. As a result, a report based on the frameworks' indicators, targets and outcomes identified the departments' research productivity and its compliance to best research practises and standards. This data was then used to inform changes and modifications necessary to the improvement of current research practices within the department.

Subsequently, the department embarked on the creation of its second accountability framework in February 2010. This initiative saw, as its focus, clinical activities and outcomes. The resultant Clinical Accountability Framework formed the basis for the new anesthesia information management system (*Innovian*).

Also for release in 2010 is the **Education Accountability Framework**, which identifies education-specific indicators, targets and outcomes. The development of all three frameworks was a first for the Department of Anesthesia.

Accountability frameworks establish clear expectations against which performance can be identified, measured, reported and evaluated and are intended to be public documents.

The development of accountability frameworks for each of the research, clinical and education portfolios is a key component of identifying how we want to govern our work and how we will measure, report and evaluate our achievements.

Dr. Mike Murphy
Head & Chief
Department of Anesthesia.

BUILDING INFRASTRUCTURE: OFFICES OF EDUCATION, RESEARCH AND GLOBAL HEALTH

Research, education and global health were identified as target areas for growth and modernization in the Department of Anesthesia strategic plan. To accomplish this, the offices with concomitant infrastructure were created. The offices have as their mandate to support the efforts and revitalization of their respective areas. In addition, they are tasked to work collaboratively to meet collective departmental needs.

The **Office of Research**, building on the momentum created by the success of its accountability framework and the **QEII Excellence in Research Gala**, wherein Anesthesia's research efforts were the focus, continues to contribute to research excellence. While the **Office of Education** facilitates the delivery of premiere quality educational events and learning experiences to a diverse group of learners.

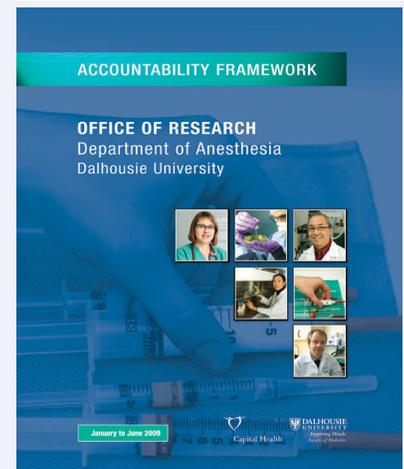
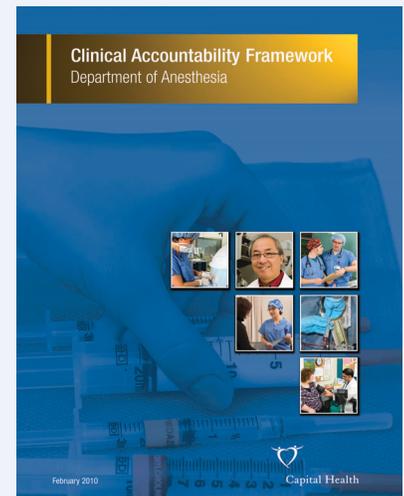
As stewards of a discipline which has as its hallmark safe patient care, the Department of Anesthesia aims to work with resource poor countries to build capacity and patient advocacy. By establishing the **Global Health Office of Anesthesia**, the department and its partners build shared knowledge, provide education and training and enhance service delivery in developing countries.

MAKING INFORMATION MANAGEMENT A PRIORITY

Following its information management strategic direction, the Department of Anesthesia released, and began implementing, an information management strategy in 2009. The strategy includes a five-year vision and a set of prioritized actions designed to achieve this vision.

As part of the action plan, the strategy outlines 25 specific recommendations that address three areas: **current IT issues**; **alignment with the department's strategic plan**; and **new system requirements**.

The strategy will take a minimum of two years to fully implement. That noted, implementation began in the last year on a number of fronts, including, the development of a public website, enhancements to the **Internal Information System (IIS)** and a replacement for **SATURN**, the department's current information system.



The Department of Anesthesia creates and implements its first accountability frameworks.

Growing & Strengthening the Department

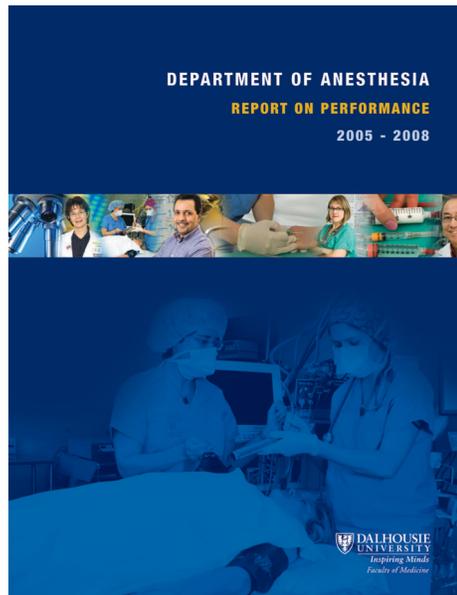
DEPARTMENT OF ANESTHESIA RELEASES REPORT ON PERFORMANCE, 2005-2008

CONGRATULATIONS TO DR. MARY LYNCH

Dr. Mary Lynch, Professor of Anesthesia and Director of the QEII Pain Management Unit, received the 2009 *Dr. Helen Hays Award for Excellence in Pain Management*. The annual award is given to a health care professional who is nominated by chronic pain sufferers and chosen by the board of directors of the Chronic Pain Association of Canada.



Also in 2009, Dr. Lynch was the first in the Department of Anesthesia to be recognized through the QEII Foundation's *Angel in Action* program. She was nominated by **Lynn Welsh** who, in her nomination letter, praised and thanked Dr. Lynch for her "outstanding care and treatment." Following a car accident, Lynn received treatment and support for chronic pain through the QEII Pain Management Unit.



It is 54 pages of Department of Anesthesia activity, representing its successes, opportunities and most importantly, its commitment to accountability. The *Department of Anesthesia Report on Performance, 2005-2008* was released in April 2009.

In short, the report shows there has been an increase in the total number of surgeries performed, improvements in recruitment, increases in research funding, and decreases in wait times for several types of procedures. It also points out key areas of future development.

The *Report on Performance* was submitted to Dalhousie Medical School, Capital Health, the IWK Health Centre and the Department of Health with a commitment to continue to outline the department's activities in annual reports beginning with the 09/10 fiscal year.

CRITICAL CARE JOINS ANESTHESIA

Approved by the *CDHA Board of Directors* and the Dean of Medicine, Dalhousie University, the **Division of Critical Care** joined the Department of Anesthesia in early 2010.

Critical care is a vital component of the clinical operations of the perioperative portfolio thus making the division a logical fit within Anesthesia. Nationally, critical care is emerging as a stand-alone specialty. The Department of Anesthesia intends to support the Division of Critical Care and its members to achieve departmental status.

NEW & IMPROVED WEBSITE

In keeping with Anesthesia's strategic goal to improve internal and external communications, the department unveiled its new and improved website in early 2010.



Improvements to the website include a new look and feel consistent with the Department of Anesthesia brand, a reorganization and update of the content and enhanced video and audio capabilities.

Visit: www.nsanesthesia.ca

ANESTHESIA INFORMATION SYSTEM ANNOUNCED

Following its strategic commitment to state of the art technology, processes and systems, the Department of Anesthesia moved toward a future where all medical documentation will be managed by an electronic information system.

The Department of Anesthesia, Capital Health and the IWK Health Centre signed a contract with **Draeger Medical Canada Inc.** to implement the much anticipated **Innovian Anesthesia Information Management System** for the department. The contract was the culmination of close to two years of detailed examination of the department's clinical needs; extensive collaboration between Capital Health and IWK Health Centre clinicians, biomedical engineering and IT services; and a thorough RFP process.

This acquisition translates into a shared server architecture for Capital Health and the IWK Health Centre and common elements and interfaces that facilitate data gathering.

Innovian will replace the **SATURN** system at Capital Health and the application currently in use at the IWK Health Centre. Work has begun to customize the new system so as to address specific Department of Anesthesia requirements.

NEW HIRES & RETIREES

RETIREES

Dr. Richard McLaren, IWK Health Centre

HIRES

Dr. Sally Bird, Assistant Professor and staff anesthesiologist (IWK Health Centre)

Darren Bishop, Senior Systems Analyst

Dr. David Bond, Assistant Professor, staff anesthesiologist (QEII Health Sciences Centre)

Dr. Carl Breckenridge, Senior Research Consultant

Megan Chipp, Education Coordinator

Dr. Jill Chorney, Assistant Professor and clinical psychologist (IWK Health Centre)

Dr. John Clark, Professor, Medical Director of Pain Management Services

Dr. Volker Eichhorn, Assistant Professor, staff anesthesiologist (QEII Health Sciences Centre)

Dr. Lou Fraser, Lecturer, staff anesthesiologist (Kentville and Hants Community Hospital)

Dr. Scott Furey (*locum*), Lecturer, staff anesthesiologist, (QEII Health Sciences Centre)

Dr. Yvette Grabowski (*locum*), Fellow

Laura Harris Buffett, Managing Director of Education

Dr. Voitek Ignaszewski (*locum*), Lecturer, staff anesthesiologist (QEII Health Sciences Centre)

Lynn Langille, acute pain nurse

Dr. Barry Nuechterlein (*locum*), Lecturer, staff anesthesiologist (QEII Health Sciences and Hants Community Hospital)

KUDOS TO DR. ALLEN FINLEY



Dr. Allen Finley, Professor of Anesthesia and Medical Director of the IWK Health Centre Pediatric Pain Service, received the 2009 *Dr. John Savage Memorial Award for Excellence in Global Health*. The award is presented by Dalhousie Medical School's International Health Office in recognition of outstanding humanitarian contributions to global health by a Dalhousie Medical School faculty member.

Patient Care Leads the Way

DEPARTMENT OF ANESTHESIA RELEASES CLINICAL ACCOUNTABILITY FRAMEWORK

The Department of Anesthesia released its **Clinical Accountability Framework** in February 2010, a first for clinical departments throughout Nova Scotia. The framework articulates the department's clinical activities and establishes clear standards and expectations against which achievements are to be measured and results evaluated.

Through development of the clinical accountability framework, a working group of department members produced a set of clinical targets designed to ensure clinical excellence – the foundation of the Department of Anesthesia's vision.

While a clinical framework with concrete, measurable standards is not a new concept among academic departments, its creation and implementation are. In the world of medicine where achieving agreement can be elusive, the Clinical Accountability Framework stands as an example of consensus building, teamwork and commitment to patient care.

DEPARTMENT OF ANESTHESIA TAKES LEAD IN H1N1 RESPONSE

Drawing on **Dr. David Milne's** previous experience in disaster planning, the Department of Anesthesia guided Capital Health's peri-operative portfolio through its *H1N1* response. Dr. Milne, in collaboration with other team members, devised a plan to manage the flow of patients within Capital Health while allowing for the admission and care of those with the *H1N1* virus. This ensured the best possible use of resources and delivery of care.

Dr. Milne's belief in being responsive and flexible in the face of challenging situations such as the *H1N1 pandemic*, was evident as he helped create a four-day immunization schedule for health care providers within Capital Health – an initiative that was originally slated to take six weeks.



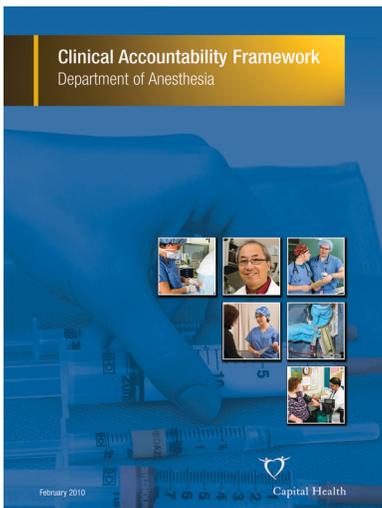
The result was a reduced impact of the *H1N1* virus on health care providers, thus enabling a greater capacity to respond to *H1N1* within the community at large.

During the fall of 2009, **9,521 H1N1 and 7,199 season flu** vaccines were administered to Capital Health staff and volunteers, physicians and learners. The immunizations were given in a matter of days.

NEW MODEL FOR PAIN MANAGEMENT SERVICES

In keeping with a business plan that recommends district-wide integration of pain management services, the Department of Anesthesia consolidated its pain management infrastructure and support services in 2009. This integration had as its primary focus the timely access to patient care.

The newly formed **Pain Management Services** encompasses both acute and chronic pain services and is co-lead by a managing director and medical director. **Darlene Davis Gunn** took on the role of Managing Director in early 2009 while **Dr. John Clark** returned to Halifax in early 2010 to assume the role of Medical Director. Both are mandated to lead a transition process through which the new model for pain management services can become a reality.



The Department of Anesthesia released its Clinical Accountability Framework in February 2010 – a first among clinical departments in Nova Scotia



Key components of the business plan:

- Continuum of pain management services
- Integration with primary care
- Standards of care
- Wait list management
- Working differently: a new model of care
- Research
- Involved, informed patients
- Information management
- Evaluation
- Consolidated infrastructure and support services

**PATIENT CARE BY THE NUMBERS
2009/2010**

In 2009/2010, anesthesiologists provided anesthesia care for more than **49,000 procedures** at the QEII Health Sciences Centre, the IWK Health Centre, the Saint John Regional Hospital, the Dartmouth General Hospital and the Hants Community Hospital.

Within the Anesthesia specialty, there exist subspecialties for which anesthesiologists receive advanced skills training. The Department of Anesthesia subspecialty areas include:

- Anesthesia for liver, kidney and kidney pancreas transplantation
- Blood management
- Cardiac anesthesia
- Neuroanesthesia
- Pain management
 - Chronic
 - Acute, including regional block
- Pediatric anesthesia
- Thoracic anesthesia
- Women's & obstetric anesthesia

A great majority of the anesthesia care provided for the 49,000+ annual procedures was performed at the QEII Health Sciences Centre and IWK Health Centre.

The following is a breakdown of OR procedures by anesthesia subspecialty area for the 2009/2010 fiscal year:

Anesthesia for liver, kidney & kidney pancreas transplantation	136
Cardiac anesthesia	2,301
Neuroanesthesia	1,159
Pediatric anesthesia	5,727
Thoracic anesthesia	932
Women's & obstetric anesthesia	3,369
General anesthesia*	35,882

**In addition to the surgical procedures represented above, thousands of others performed during the 2009/2010 fiscal year required general anesthesia support. Those include orthopaedic surgeries, ENT (ear, nose, throat) surgeries, ophthalmological (eye) surgeries, urological surgeries and others.*

Outside of the OR, two of the Department of Anesthesia's largest services are **Blood Management Services** and **Pain Management Services**. Here is a breakdown of their numbers:

Blood Management Services

- Patient consults at the QEII Health Sciences Centre **325**

**Pain Management Services
(adult services)**

- Acute inpatient consults at the QEII Health Sciences Centre **1,200**
- Chronic pain inpatient consults at the QEII Health Sciences Centre **68**
- Patients seen by the chronic pain team **7,015**
- New referrals to the chronic pain team **1,167**

Research

OFFICE OF RESEARCH

The Department of Anesthesia is committed to fostering a strong, dynamic research program.



To advance the research agenda, the organizational structure of the department was adapted to include the **Office of Research** in late 2008. New positions were developed to facilitate the strategic directions and tactics for research, including a senior director, a managing director and a research facilitator position. Twelve innovative researchers devote a portion of their time each week to the discovery of new knowledge through their respective research programs.

CORE AREAS OF RESEARCH

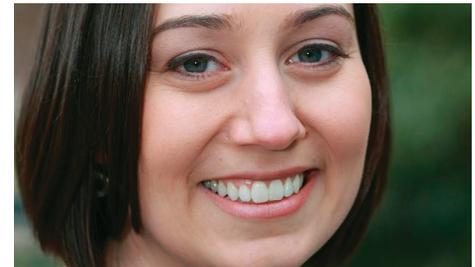
Core areas of research in the department include bench, translational and clinical research, with emphasis on the following areas:

- Pain
- Airway management
- Perioperative inflammation and organ protection
- Outcomes research and device development are also areas of concentration.

ADVISORY COMMITTEE

The **Anesthesia Research Advisory Committee**, formed in February 2009, is the advisory body to the Office of Research, offering guidance on research strategic directions, identification of emerging trends and opportunities to best position researchers for success. Its members include the directors of research from the IWK Health Centre, Capital Health and Dalhousie University, an external researcher, elected internal researchers and the medical and managing directors of research.

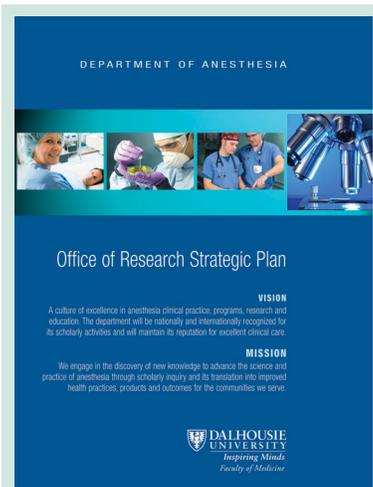
WELCOME DR. JILL CHORNEY



In 2009, the Department of Anesthesia was fortunate to recruit a new clinician to its team of pain researchers. **Dr. Jill Chorney** is a clinical psychologist with the Pediatric Complex Pain Team at the IWK Health Centre and Assistant Professor of Anesthesia. Prior to joining Dalhousie and the IWK, Dr. Chorney was an Associate Research Scientist at the University of California, Irvine.

Clinically, Dr. Chorney works with the pediatric complex pain team to provide assessment and cognitive behavioral treatment (CBT) for children with recurrent or chronic pain. Dr. Chorney incorporates research into her clinical work and is currently conducting a program evaluation of a group-based CBT intervention for chronic pain in children.

Dr. Chorney's research interests are in perioperative care and psychological management of acute pain. She has authored numerous empirical and review articles in these areas and holds funding from the Canadian Institutes of Health Research and the National Institutes of Health.



STRATEGIC PLAN

Developed by Department of Anesthesia researchers, managers and staff, the research strategic plan outlines the mission, goals and objectives of the department's research endeavours and informs the priorities for each year.

CELEBRATING EXCELLENCE 2009 QEII EXCELLENCE IN RESEARCH GALA

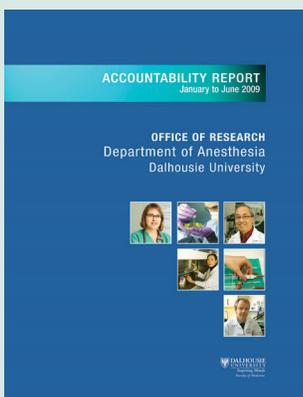
More than 900 guests and sponsors joined the Department of Anesthesia at the Cunard Centre in Halifax for the **QEII Excellence in Research Gala** in November 2009. Many hands and hearts put in countless hours of effort to make this event a spectacular success. All that hard work paid off—literally! The event raised more than **\$168,000**, half of which went directly to Anesthesia to support pain research within the department.



While raising funds is the gala's primary goal, the event also presented an ideal opportunity to raise the department's profile. Throughout the gala and during the months of preparation, organizers and hosts spread the message about the significant contribution the Department of Anesthesia makes toward the health of people in the Maritimes and beyond. Focusing on pain treatment and research also brought specific attention to this important area of anesthesia practice and to the renowned work of our research and clinical pain teams.

Whether measuring money or messages, the Department of Anesthesia exceeded the very high standards it had set for the event and for itself as the host department.

ACCOUNTABILITY FRAMEWORK & REPORT



Identified in the Department of Anesthesia strategic plan as a priority, a research accountability framework was developed in 2008. It articulates the Department of Anesthesia's research activities and establishes clear standards and expectations against which achievements can be measured and results evaluated. The **Research Accountability Report (2009)** is the product of the *Framework's Measurement and Reporting Plan* in which key indicators and targets were identified for subsequent measurement and reporting. Three of the commonly reported measures of research productivity include research funding, publications and presentations. Taken from the **Accountability Report (2009)**, the tables on the following page summarize the Department of Anesthesia's track record in these three areas.

DALHOUSIE LEADS PROPOSAL TO CREATE A NATIONAL ANESTHESIA CLINICAL TRIALS NETWORK

Dr. Richard Hall, Professor of Anesthesia and Critical Care, is the leader of an emerging initiative to create a perioperative anesthesia clinical trials (**PACT**) network in Canada. At scientific meetings with colleagues, the idea was born and Dr. Hall launched an initial expression of interest through a call for research proposals in 2009. Canadian researchers responded and now Dalhousie University has developed a business plan for endorsement by the anesthesia research community.

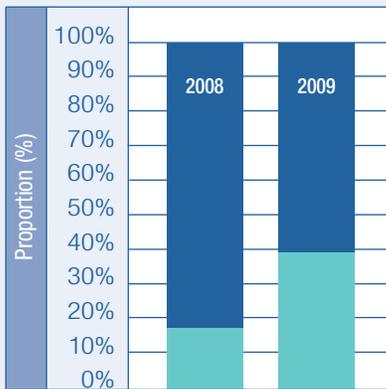
As its primary focus, **PACT** will advance perioperative anesthesia research by providing a forum for the development and implementation of multi-centre clinical trials. It will be designed to answer research questions that have a fundamental impact on the practice of anesthesia. The milestones for success by year five include a vibrant, representative membership and national funding for a multi-centre randomized control trial. The Department of Anesthesia is proud to support Dr. Hall and the **PACT** group and intends to serve as the **PACT** secretariat during the critical start-up years.

The Department of Anesthesia also tracks collaborative efforts:

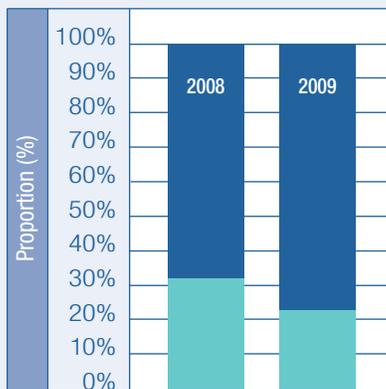
COLLABORATIVE PUBLICATIONS



COLLABORATIVE RESEARCH PROJECTS

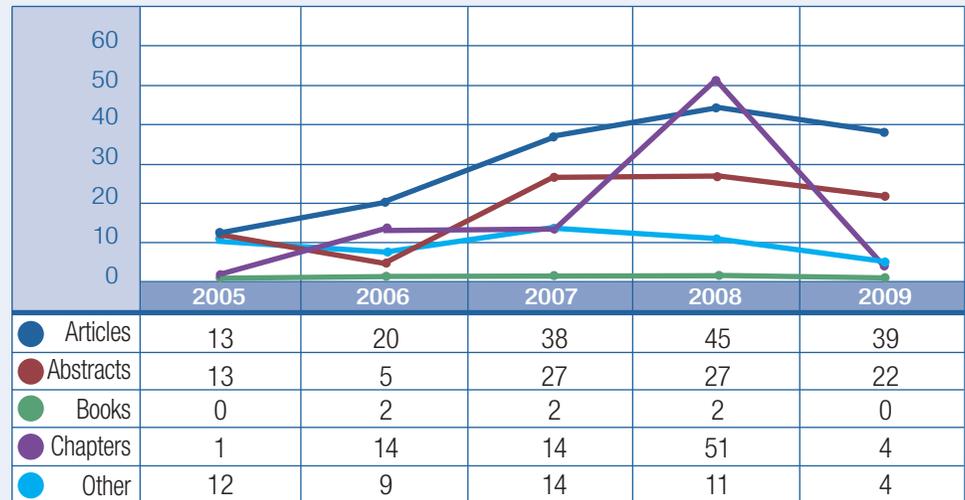


COLLABORATIVE PUBLICATIONS & PROJECTS

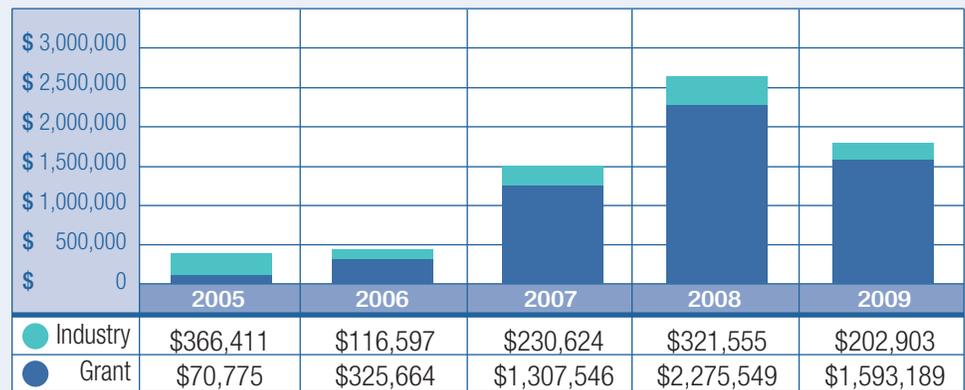


A SNAPSHOT OF RESEARCH EXCELLENCE

PUBLICATIONS



RESEARCH FUNDING



PRESENTATIONS (NATIONAL & INTERNATIONAL)



Education

KUDOS TO OUR FACULTY

Clinical Teacher of the Year



Dr. Adam Law
2008



Dr. Ben Schelew
2009

Undergraduate Teacher of the Year



Dr. Tobias Witter
2008



Dr. Gordon Launcelott,
2009

ANESTHESIA POSTGRADUATE PROGRAM COMPLETES INTERNAL REVIEW

In preparation for the *Royal College of Physicians and Surgeons of Canada* accreditation survey planned for 2012, the *Anesthesia Postgraduate Program* completed an internal review in February 2010, with no major concerns identified.

PROPOSAL FOR SUSTAINABLE PRESENCE IN UNDERGRADUATE MEDICAL CURRICULUM

The Department of Anesthesia has developed a proposal that would see anesthesia become a core part of the undergraduate medical curriculum at Dalhousie University. The proposal will be presented to Dalhousie Medical School's *Undergraduate Medical Education Office* in 2010.

Acceptance of the proposal to add anesthesia to the core curriculum will ensure mandatory anesthesia teaching at the undergraduate level. As a result, medical students will have a greater understanding of the discipline's science and practice.

INTEGRATION OF THE RWANDA ELECTIVE PROGRAM IN HALIFAX



In collaboration with the Global Health Office of Anesthesia, the Office of Education has developed a program to accept visiting elective residents from Rwanda for a six-month educational experience. The residents complete rotations in critical care, chronic pain, acute pain, obstetric anesthesia and general anesthesia.

NEW EDUCATION COORDINATOR



Megan Chipp was recruited in 2010 to coordinate, implement and manage the department's continuing professional development activities, including, grand rounds, journal clubs, and conferences. In addition, she oversees the department's mentorship program and provides event management support to Blood Management Services.

ASSOCIATE PROGRAM DIRECTOR APPOINTED



Dr. Janice Chisholm was appointed *Associate Program Director, Residency Training* in January 2009. Within this role, Dr. Chisholm offers assistance in the overall organization, implementation, and management of the residency training program.

Dr. Chisholm will assume the role of Program Director in 2010.



RENEWED COMMITMENT TO CONTINUING PROFESSIONAL DEVELOPMENT

With the creation of its strategic plan, the Department of Anesthesia renewed its commitment to continuing professional development. In 2009, the department established a continuing professional development advisory committee under the leadership of **Dr. Peter MacDougall**, Medical Director of Continuing Professional Development. The committee oversees *Journal Club*, *Grand Rounds* and *ACLS* training.

A COORDINATED EFFORT TO OFFER CONTINUING PROFESSIONAL DEVELOPMENT OPPORTUNITIES



Through 2009 and into 2010, the Office of Education supported a number of continuing professional development events, many of which were offered to healthcare professionals outside of the department. They include:

- Ultrasound for Basic Anesthesia Practice

- 2009 Global Outreach Course

- Blood and Beyond

- Feedback and Evaluation, and the Challenging Learner

- Various *lunch & learn* sessions

ESTABLISHMENT OF THE CRITICAL INCIDENT DEBRIEFING PROGRAM

The **Critical Incident Debriefing Program**, established in 2009, provides residents with a safe and supportive forum to discuss traumatic experiences that have affected them in the course of delivering anesthesia care.

FEASIBILITY STUDY OF NEW BRUNSWICK-BASED RESIDENCY PROGRAM

In consideration of future recruitment needs in New Brunswick, several senior clinical and administrative staff from the Department of Anesthesia visited various centres throughout the province in 2009. Their purpose was to gauge interest in establishing a New Brunswick-based residency training program. Subsequent to the visit, Anesthesia engaged a consulting firm, Deloitte, to conduct a feasibility study.



Establishing a New Brunswick-based residency training program may help to supply the long-term need for anesthesiologists in the province. The approach has helped to meet this goal in Family Medicine and is being implemented in Internal Medicine.

The results of the feasibility study are expected in the summer of 2010.

CONGRATULATIONS TO OUR GRADUATES



Drs. Grayson Lloyd and **Ashley O'Brien** completed the requirement of the residency program in 2009. Dr. Lloyd is practicing at Valley Regional Hospital in Kentville, Nova Scotia. Dr. O'Brien is continuing his training at St. Michael's Hospital in Toronto where he is pursuing a fellowship in echocardiography and cardiac anesthesia.

GROWING THE ANESTHESIA FELLOWSHIP PROGRAM

The Department of Anesthesia added a global health fellowship to its roster of programs in 2009, which includes fellowships in airway, cardiac anesthesia, chronic pain, regional and acute pain, and women's and obstetric anesthesia. The fellowship program is administered by the **Office of Education** and **Dalhousie University**. Each program accepts one fellow for a one-year period.

NEW MEDICAL DIRECTOR AND FELLOWSHIP ADVISORY COMMITTEE

In 2009, the Department of Anesthesia established a *Fellowship Advisory Committee* and created a Medical Director of Fellowships position. As medical director, **Dr. Ian Beauprie** oversees the expansion and day-to-day operations of the department's fellowship programs.



The advisory committee is chaired by Dr. Beauprie and consists of the fellowship coordinators and administrators. The committee oversees the development of the Department of Anesthesia fellowship programs and advises on issues related to the training of academic fellows.

ATLANTIC HEALTH TRAINING AND SIMULATION CENTRE 10TH ANNIVERSARY



February 1, 2009, marked 10 years of providing innovative learning opportunities at the **Atlantic Health Training & Simulation Centre**. The Department of Anesthesia is one of the centre's founding partners, having recognized early the importance of experiential learning for its residents and staff. The simulation centre was one of the first of its kind in Canada and continues to boast a reputation for innovation and leadership in training.

At the simulation centre, learners – residents, staff physicians, nurses, allied health professionals and paramedics – practise techniques and enhance their critical thinking and interventional skills. The centre's simulators and innovative scenarios are its strength as a learning facility.

ANESTHESIA ESTABLISHES MENTORSHIP PROGRAM



The Department of Anesthesia developed a mentorship program in 2009 designed to be inclusive of all department members. Through the design phase, Anesthesia members provided input and feedback to the program, which was approved in 2009 and will launch in 2010.

The mentorship program includes three main elements: *orientation for all new staff*, *workshop/skills development* and a *mentor/mentee arrangement*. Over time, the combination of these elements will help the Department of Anesthesia to achieve its vision. The program is designed to provide an avenue for knowledge transfer, aid in retention and recruitment and contribute to the department's desired work culture.

Education by the Numbers

2008/2009 & 2009/2010

2008/2009		2009/2010	
Undergraduate Learners	127	Undergraduate Learners	98
Eighty-eight medical students in six cities and towns: Halifax, Charlottetown, Kentville, Moncton, Saint John and Sydney		Sixty-six medical students in six cities and towns: Halifax, Charlottetown, Kentville, Moncton, Saint John and Sydney	
Halifax	74	Halifax	52
Charlottetown	5	Charlottetown	1
Kentville	1	Kentville	6
Moncton	-	Moncton	1
Saint John	1	Saint John	1
Sydney	7	Sydney	5
Thirty-nine learners from disciplines other than medicine, including nursing, paramedicine, respiratory therapy, etc.		Thirty two learners from disciplines other than medicine, including nursing, paramedicine, respiratory therapy, etc.	
Respiratory Therapy	6	Respiratory therapy	7
Lifeflight	6	Lifeflight	10
Perioperative nurses	4	Perioperative nurses	3
Anesthesia assistant students	3	Anesthesia assistant students	3
Primary care paramedics	8	Primary care paramedics	-
Anesthesia technicians	8	Anesthesia technologists	9
Other	4	Other	-
Anesthesia Elective Course Participation		Undergraduate Anesthesia Elective Course Participation	
Medical student participants, Year 1	6	Medical student participants, Year 1	14
Medical student participants, Year 2	7	Medical student participants, Year 2	6
Number of Department Member Undergraduate Tutors at Dalhousie Medical School		Number of Department Member Undergraduate Tutors at Dalhousie Medical School	
25 tutors, total of 790 hours		19 tutors, total of 792 hours	
Number of Residents		Number of Residents	
PGY 1	5	PGY 1	5
PGY 2	8	PGY 2	5
PGY 3	5	PGY 3	7
PGY 4	6	PGY 4	5
PGY 5	3	PGY 5	7



2008/2009		2009/2010	
Postgraduate off-service/elective rotations		Postgraduate off-service/elective rotations	
Kentville: 1 resident	4 wks.	Kentville: 0 residents	-
Halifax (QEII Health Sciences Centre): 25 residents	92 wks.	Halifax (QEII Health Sciences Centre): 14 residents	52 wks.
Halifax (IWK Health Centre): 5 residents	16 wks.	Halifax (IWK Health Centre): 0 residents	-
Saint John: 6 residents	24 wks.	Saint John: 9 residents	40 wks.
Number of Applicants to Residency Program	182	Number of Applicants to Residency Program	190
International Medical Graduates	82	International Medical Graduates	106
Canadian Resident Matching System (CaRMS)	100	Canadian Resident Matching System (CaRMS)	84
Continuing Professional Development		Continuing Professional Development	
Number of Grand Rounds	31	Number of Grand Rounds	29
Faculty speakers	14	Faculty speakers	6
Resident speakers	13	Resident speakers	14
Fellow speakers	-	Fellow speakers	2
Visiting professors	4	Visiting professors	7
Number of Journal Club	2	Number of Journal Club	6
Number of other CME and/or events	5	Number of other CME and/or events	9

GLOBAL HEALTH FELLOWSHIP PROGRAM LAUNCH

In February 2009, the GHOA officially announced the creation of the **Global Health Fellowship**. This fellowship opportunity includes practicing and teaching at the QEII Health Sciences Centre, as well as in hospitals affiliated with the National University of Rwanda. The goal of the fellowship is to prepare anesthesiologists for careers in global health work. It also aims to equip fellows with what is needed to establish a program of anesthesia training in developing countries.

PAIN RESOURCE NURSE PROGRAM

The collaborative work continues among the Department of Anesthesia, Dalhousie University and pain management physicians and nurses at McGill University and in Perth, Australia to create a sustainable program for teaching pain management to health care professionals in resource poor settings. In February 2009, **Darlene Davis Gunn**, Managing Director of the Department of Anesthesia's Pain Management Services, presented the *Pain Resource Nurse Program* to a group of nurses, nurse anesthesiologists and pharmacists in Rwanda. The program was presented again in March 2010.

GLOBAL HEALTH OFFICE OF ANESTHESIA (GHOA) PRODUCES STRATEGIC PLAN

As an extension of the Department of Anesthesia strategic plan, the GHOA created its strategic plan in February 2009. The strategic plan was developed through an inclusive and collaborative process with faculty, residents and administration, and will set the GHOA's agenda for the next three to five years

The office's strategic direction, "*A global health program that educates and builds capacity of (local, national and global) partnering agencies and countries*", will guide the office in its various activities: curriculum development; building capacity in peri-operative patient care; creation of collaborative research projects; and development of communication plans and partnerships.

SECOND YEAR OF SUCCESS: GLOBAL HEALTH OUTREACH COURSE 2009



The Canadian Anesthesiologists' Society International Education Foundation (CASIEF) and the Dalhousie Department of Anesthesia hosted the second annual *Global Health Outreach Course* in Halifax in 2009. The course is the first of its kind in North America. The main goal of the Global Health Outreach Course is to prepare anesthesiologists for work in resource poor settings. It focuses on issues such as different types of equipment and the art of draw-over technology, the prevention of infectious disease, the promotion of safe travel, the study of ethical issues and the psychology of adaptation.

A FIRST FOR THE RWANDA PROGRAM



In February 2010 the Department of Anesthesia brought two Rwandan residents, **Drs. Paulin Banguti Ruhato** and **Jean Bonaventure Uwineza**, to Halifax for six months of training in anesthesia, critical care and pain management – a first for the department. The training opportunity is part of the department's Rwanda Program, a partnership with the National University of Rwanda, Department of Anesthesia. Two other Rwandan residents will come to Halifax for training in 2011.

Also as part of the Rwanda Program, a number of department members travelled to the developing country to train members of the Department of Anesthesia at the University of Rwanda. They include:

Dr. Tom Coonan and **Dale Morrison**
February 2009

Dr. Julie Williams
July 2009

Drs. Jennifer Szerb and **Kwesi Kwofie**
August 2009

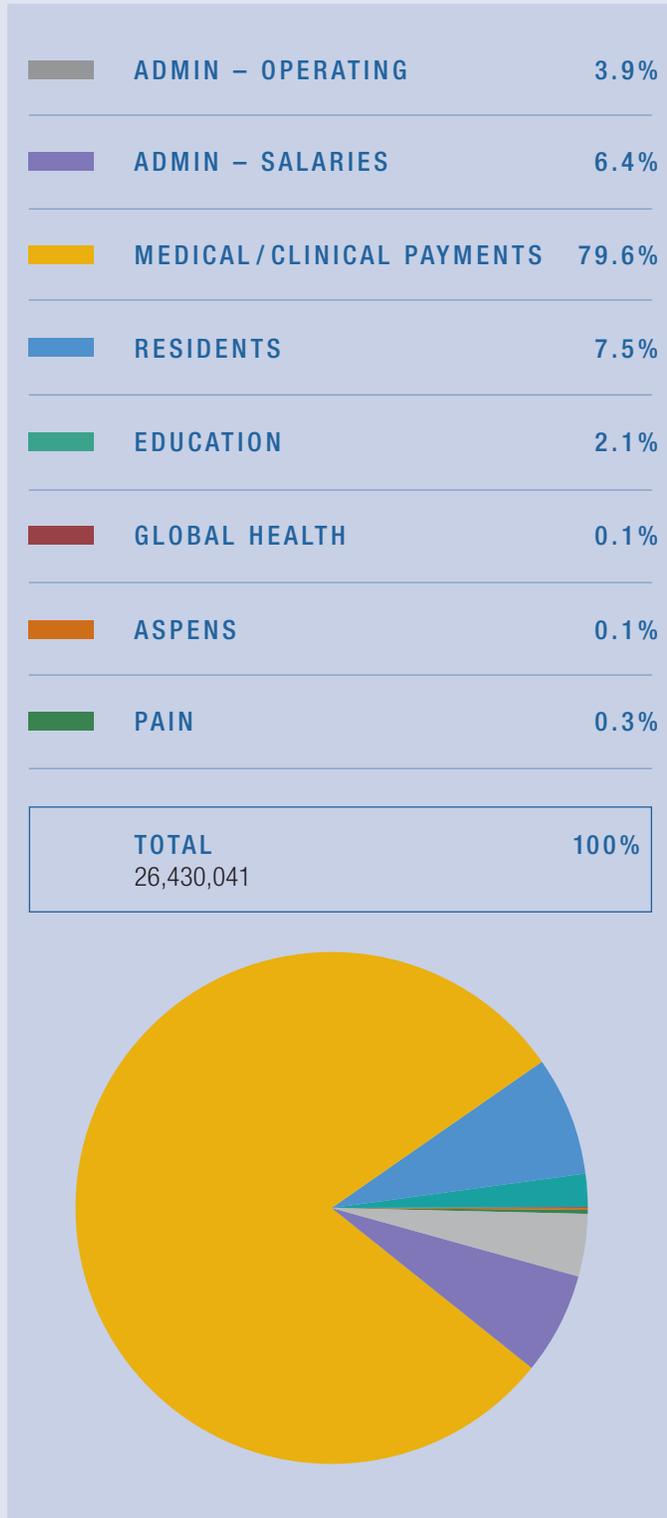
Dr. Janice Chisholm, **Dr. Anita Cave** and **Steven Williams**
November 2009

Darlene Davis Gunn
February 2010

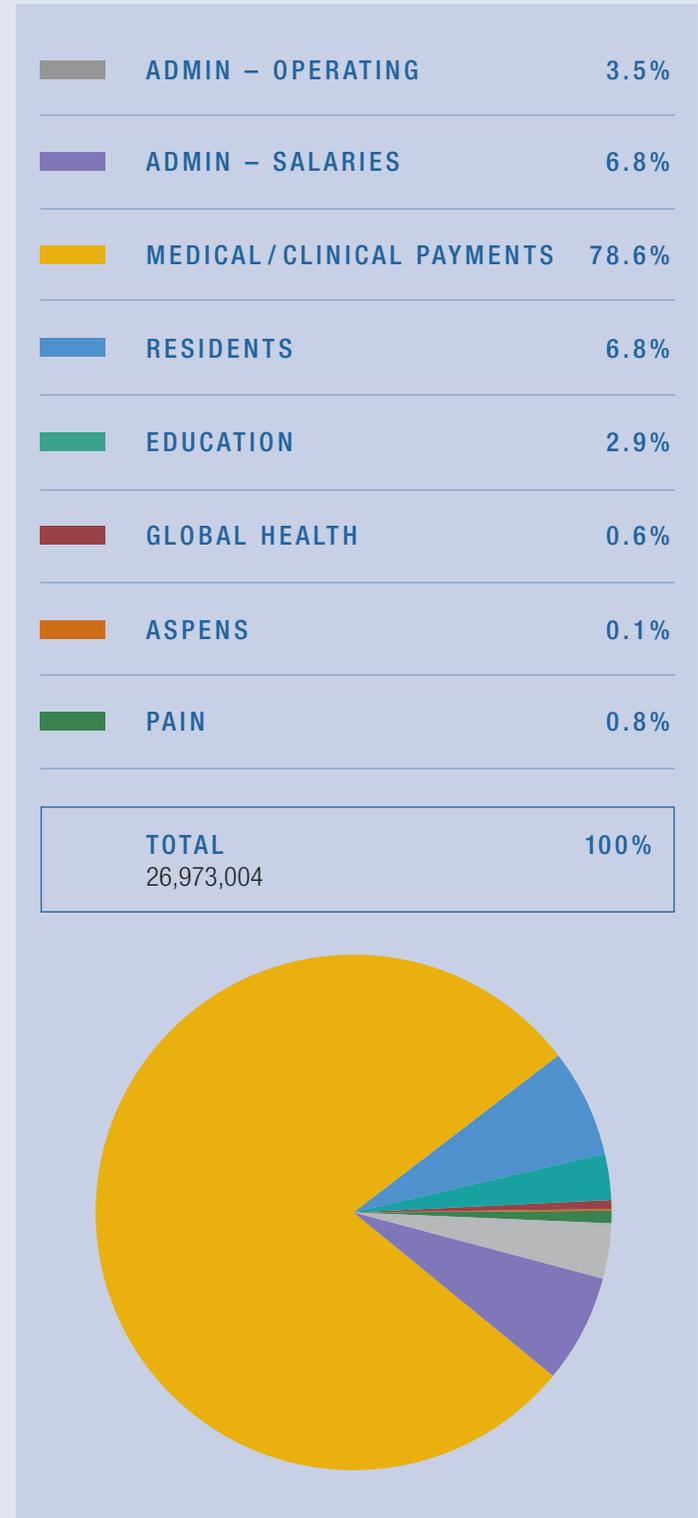
Drs. Patty Livingston and **Ariane Fielding**
March 2010

Financial Overview at a Glance

2008-2009



2009-2010



Department of Anesthesia

QEII Health Sciences Centre
10 West Victoria Building, 1278 South Park Street
Halifax, Nova Scotia B3H 2Y9



Capital Health



DALHOUSIE
UNIVERSITY

Inspiring Minds
Faculty of Medicine



IWK Health Centre



Atlantic Health Sciences Corporation
Corporation des sciences de la santé de l'Atlantique