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The 2020 Strategic Plan of the Rehabilitation Sciences Institute (RSI) is designed to achieve growth and impact through progressing a national and international strategy of collaboration, collegiality and cohesion – an approach that is well aligned with the strategic direction both of the University of Toronto (UofT) and of the Faculty of Medicine (FoM).

Building from an excellent academic track record, acknowledged in the 2015 External Review, as well as a new status and a new director, the strategic planning process was initiated in May, 2016. An advisory steering committee comprising department chairs, faculty, senior members of the FoM administration, students, alumni and external experts was assembled and met three times over the course of the eight-month project. To ensure a rigorous and inclusive process, secondary and primary data gathering was undertaken including benchmarking comparator organizations, interviewing internal and external subject matter experts and surveying students, faculty and alumni.

A set of assumptions underpinning the planning process was agreed upon, including the retention of the existing mission and vision statements, and documented in a project charter. Key issues to be addressed through the process were identified and included: addressing resource limitations; clarifying the relationship with the cognate departments of Occupational Science and Occupational Therapy (OS/OT), Physical Therapy (PT) and Speech Language Pathology (SLP); determining how best to engage faculty members, all of whom have primary appointments elsewhere; clarifying RSI’s role in research; and determining an appropriate approach to strengthening its international presence.

Five statements of strategic intent, listed on the next page, form the core of RSI’s strategy, the first two defining ‘what’ needs to be accomplished and the remaining three being more enabling. Strategies have been identified for each of the strategic intent statements, together with detailed examples of the kinds of activities that will be required over the next three years. The RSI will also be guided by a set of five values statements developed through the process.

Moving to implementation, the core academic committees will be engaged in developing and implementing priorities in the areas of their respective mandates as well as in ongoing review and course correction (as needed). A robust monitoring and evaluation process has been defined that includes the Director issuing regular updates to ensure that faculty and other stakeholders are informed as to progress. Annually, updated priorities and action plans for the upcoming year will be identified. An initial set of Year One priorities, has been developed and is in the process of being rolled out.
<table>
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<th>STRATEGIES</th>
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<td><strong>INTERNATIONAL REPUTATION</strong></td>
<td>1. Promote the Rehabilitation Sciences Institute as an academic institute of international rehabilitation sciences excellence</td>
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<td>1.2. Contribute to generating and disseminating new knowledge that results in local, national and international rehabilitation successes</td>
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<td><strong>WORLD CLASS STUDENT BODY</strong></td>
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<td>5.1 Enhance funding and pursue advancement opportunities strategically</td>
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<td>5.2 Continuously improve and make processes and practices more transparent, including funding processes, to foster trust and collegiality</td>
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I am thrilled to share our Strategic Plan 2017–2020 because there has never been a more important time for rehabilitation research and training.

Global life expectancy and survival from illness and injury is increasing. The population we serve is aging and worldwide will be afflicted increasingly by non-communicable chronic conditions. This emphasizes the importance of function and participation in society versus a death and disease focused paradigm. Our patient-centred orientation, a longstanding value in the rehabilitation professions, is being championed like never before. At the same time, there is a great need to strengthen the substantive and methodological knowledge base for rehabilitation science, training and practice.

Earlier this year, I had the privilege of attending WHO Rehabilitation 2030: Call for Action, the World Health Organization’s historic meeting with over 140 stakeholders. The passion for global collaboration was palpable and there is great interest in our increased involvement. I cannot think of a more talented concentration of dedicated faculty and students than here at RSI. Together we are positioned to address these national and international challenges in partnership with our stakeholders.

I wish to recognize the time and contributions of our steering committee members and for our consultant, Jane Cooke-Lauder of Bataleur Enterprises, who guided us through this multistage planning process. Further, I wish to thank all the faculty, students and staff, who contributed to the surveys and data collection associated with this endeavor.

I am very excited about our collective interdisciplinary potential to address the major health, social and economic challenges of our century and look forward to working with you.

Angela Colantonio, PhD, OT. Reg. (Ont.)
FACRM, FCAHS
Director and Professor, RSI
CIHR Research Chair in Gender Work and Health
University of Toronto
Senior Scientist and Team leader,
Toronto Rehabilitation Institute-
University Health Network
DEAN’S MESSAGE

“The work of the Rehabilitation Sciences Institute (RSI) has never been more needed or more exciting. We need to find innovative ways to care for an aging population with more complex health conditions than we have previously seen. We also need to integrate rehabilitation fully into the continuum of care within a health system with finite resources. And, we must consider how we can better care for the caregivers. Developing the next generation of leaders who will address these questions, is among the highest callings of the rehabilitation sector.

At the same time, the tools available to conduct research have expanded enormously. It’s transforming how we understand the nature of illness and identifying new ways to improve health. Aided by more interdisciplinary approaches that bring rehabilitation researchers together with healthcare professionals, engineers, computer scientists – among others – we’re able to solve complex challenges like never before. Technology has made possible things that were once considered science fiction.

These are difficult and multi-layered challenges and opportunities but RSI is uniquely positioned to respond. The range of activities undertaken in this Institute covers the full breadth of rehabilitation sciences. The more than 100 RSI faculty members are drawn from across the University of Toronto as well as our affiliated hospitals and research institutes. RSI’s energetic students are passionate about their research and committed to advancing care; its alumni are pillars of the profession and evidence of our impact in the world. Together, RSI will continue to improve the quality of life for patients in Toronto and around the globe.

Trevor Young
Dean, Faculty of Medicine
Vice Provost, Relations with Health Care Institutions
SETTING THE CONTEXT

OVERVIEW OF RSI

The Rehabilitation Sciences Institute (RSI) was established as an extra-departmental unit without appointed faculty (EDU-B) on January 1, 2015 in recognition of its interdisciplinary membership and programming, and to provide leadership through a dedicated part-time Director. It is situated within the University of Toronto’s Faculty of Medicine (UofT, FoM) and is one of four academic units in the Rehabilitation Sciences Sector, which also includes the Departments of Occupational Science and Occupational Therapy (OS/OT)\(^1\), Physical Therapy (PT) and Speech Language Pathology (SLP).

RSI has evolved significantly since it was first established as the Graduate Department of Rehabilitation Science (GDRS) in 1995 to create a combined doctoral stream (MSc initially and then PhD in 2004) program for the founding departments of OT and PT. While the initial students were physical and occupational therapists, RSI now attracts students from an increasingly wide range of disciplines including biology, biomedical engineering, epidemiology, health studies, kinesiology, neuroscience, psychology, and public health. Since September 2015, SLP doctoral stream students have been admitted into RSI following the administrative merger of SLP’s MSc and PhD programs with RSI.

Rehabilitation Science has been defined as “an integrated science dedicated to the study of human function and participation and their relationship to health and well-being”.\(^2\) RSI strives, not only to draw on but to integrate the knowledge and methods from multiple disciplines to understand fully human function and participation. Given the widening breadth of the rehabilitation sciences, faculty expertise and student interests, six fields of study have been defined: Movement Science, Occupational Science, Rehabilitation Health Services Studies, Rehabilitation Technology Sciences, Social and Cognitive Rehabilitation Sciences, and Communication and Swallowing Sciences.

To provide further interdisciplinary opportunities for students, RSI has become a member of twelve Collaborative Programs, including: Neuroscience, Global Health and the Institute of Biomaterials and Biomedical Engineering.

An External Review conducted in November 2015 concluded that RSI “is certainly one of the best training centers in Canada and in all likelihood, in the top 5 percent in North America”. Multiple strengths were identified including the quality of the students and faculty, the publication and funding record, the evidence of interdisciplinary collaboration and learning, the level of satisfaction of students with the quality of supervision, excellent time to completion, the morale of faculty, staff and students, and the warm support for the new Director. Opportunities for improvement were also identified including: redesigning parts of the curriculum, improving relations with the cognate departments, enhancing the student experience, building RSI’s profile and presence within the FoM, UofT, nationally and internationally, ensuring sustainability, and positioning itself more strongly to take advantage of the multiple opportunities available.

Much has been done to close some of the gaps identified by the external reviewers including: strengthening the knowledge translation components of the curriculum, ensuring admission to courses not offered by RSI (e.g., statistics), improving the website and strengthening communications to enhance RSI’s profile within UofT as well as with national and international audiences. In addition, training on the integration of sex and gender considerations in research, deemed necessary for better science, has been added to the curriculum. Faculty and staff awards have been introduced and student leadership has been encouraged, for example, through the provision of faculty support for the online magazine, rehab-INK, founded in 2015 by rehabilitation sciences students.

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\(^1\) Formerly the Department of Occupational Therapy (OT)

\(^2\) http://www.gdrs.utoronto.ca/About%20RSI Steering Committee received a number of comments referencing the limitation of this definition and the importance of extending the definition of rehabilitation science beyond healthcare. This is an important dialogue that should be undertaken by faculty to inform the development of the next strategic plan.
GROWTH IN STUDENT ENROLLMENT OVER LAST FOUR YEARS

106
STUDENTS
(41 MsC AND 65 PhD - AS OF FEBRUARY 2017)

90%
GROWTH IN STUDENT ENROLLMENT OVER LAST FOUR YEARS

>85%
OF STUDENTS IN THE LAST THREE YEARS RECEIVED COMPETITIVE EXTERNAL FUNDING DURING THE COURSE OF THEIR GRADUATE STUDIES

> $1M
FUNDING TO STUDENTS MADE AVAILABLE ANNUALLY FOR LAST THREE YEARS

COLLABORATIVE PROGRAMS:
AGING, PALLIATIVE AND SUPPORTIVE CARE ACROSS THE LIFE COURSE
BIOETHICS
INSTITUTE OF BIOMATERIALS & BIOMEDICAL ENGINEERING
CARDIOVASCULAR SCIENCES
GLOBAL HEALTH
HEALTH SERVICES POLICY AND RESEARCH
NEUROSCIENCE
RESUSCITATION SCIENCES
WOMEN’S HEALTH
WORKPLACE LEARNING & SOCIAL CHANGE
WORK DISABILITY PREVENTION

116
RSI FACULTY MEMBERS WITH PRIMARY ACADEMIC APPOINTMENTS IN 18 DEPARTMENTS IN 9 FACULTIES

#1
IN REHABILITATION SCIENCE PUBLICATIONS AND CITATIONS AMONG NORTH AMERICAN UNIVERSITIES*

#1
PART OF CANADA’S #1 MEDICAL SCHOOL: #1 IN RESEARCH GRANTS AND RESEARCH-BASED START UPS

10
FACULTY OF MEDICINE GRADUATE FACULTY TEACHING AWARDS OVER PAST SIX YEARS

MAJOR RESEARCH INSTITUTE PARTNERS

SUNNYBROOK RESEARCH INSTITUTE
ROTMAN RESEARCH INSTITUTE (BAYCREST)
SICKKIDS RESEARCH INSTITUTE
ONTARIO SHORES CENTRE FOR MENTAL HEALTH SCIENCES
CAMPBELL FAMILY HEALTH RESEARCH INSTITUTE (CAMH)
WEST PARK HEALTHCARE CENTRE
BLOORVIEW RESEARCH INSTITUTE (HOLLAND BLOORVIEW KIDS REHABILITATION)
KEENAN RESEARCH CENTRE (SMH)
TORONTO GENERAL RESEARCH INSTITUTE
TORONTO REHABILITATION INSTITUTE
KREMBIL RESEARCH INSTITUTE (TORONTO WESTERN HOSPITAL)

*according to Thomson-Reuters Rankings, 2016
The strategy development and planning process was characterized by rigour, inclusivity and the use of evidence, qualities that are intrinsic to the values and culture of RSI. The process, informed by best practices in strategic planning as well as in rehabilitation science, was led by the Director, with the support of the RSI Executive Committee, and with significant input from an advisory Steering Committee (SC), comprised of Department Chairs, Research Institute leads, faculty, students and staff.

A four-phase process, as depicted below, took place over an eight-month period and included interviews with all members of the SC as well as a number of subject matter experts, benchmarking of comparative organizations both in Canada and abroad as well as input from faculty and staff, collected by means of an electronic survey. The input received was discussed and reviewed at three SC meetings and two mini (60 minute) faculty retreats. Interim deliverables included a project charter, work and communication plans, a survey and survey findings report, a data gathering report and pre-reading as well as post meeting notes from each of the SC meetings.

### PROCESS OVERVIEW

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### PLANNING PROCESS

#### PHASE 1

**GETTING STARTED**

May/June, 2016

- Work & communication plan; Terms of reference for Steering Committee (SC); recruited SC.

#### PHASE 2

**IDENTIFYING STRATEGIC ISSUES**

June/September, 2016

- SC kick-off meeting
- Data gathering and analysis (secondary research e.g., benchmarking comparator organizations, interviews, faculty and student survey)

#### PHASE 3

**TESTING PROPOSITIONS**

October/November, 2016

- SC Meetings 2 & 3: propositions discussed and prioritized
- 2 Faculty Mini-Retreats: engage, refined and clarified content and key messages

#### PHASE 4

**DEVELOPING STRATEGIC PLAN AND ACTION AGENDA**

November 2016–May 2017

- SC provide input to draft plan
- Develop Year 1 action agenda
- Finalize and disseminate strategic plan: May 2017

3 List of Steering Committee members in Appendix
Against this backdrop, a number of possible questions and issues were identified to be addressed through the strategic planning process, such as:

1. Strengthening the **collaborative relationship with the cognates** and other related Departments including clarifying roles, relationships and expectations

2. Strengthening the **relationship with the research institutes** and affiliated hospitals to enable growth

3. Increasing the number of world class **international students** in line with UofT and FoM strategic directions

4. **Adjusting the curriculum/program** to ensure graduates are equipped to add value to society in or outside of an academic role

5. **Strengthening the relationship with faculty** so that they are more engaged with RSI and with the students

6. Determining the **value that RSI could bring to faculty members’ research** given RSI’s structure does not permit funding or administering research

7. Thinking creatively about how RSI might **extend its resources** despite the internal and external challenges

8. Leveraging RSI’s current **international connections** to enhance the learning environment and strengthen the financial position of both RSI and the cognate departments

9. Determining the role that RSI should play in enhancing the **global fluency** of both faculty and students, helping marginalized communities/vulnerable populations and contributing to **improving health equity**.
INTRODUCTION
The strategic direction of RSI is expressed through statements of vision, mission, values and strategic intent. A set of assumptions supports the translation of the statements of strategic intent into more specific strategies and actions to be undertaken over the next four years.
**STRATEGY OVERVIEW**

**VISION**

International Leadership in Rehabilitation Sciences

**MISSION**

Prepare doctoral stream students to be leaders in promoting health and well-being by developing excellence in research innovation, knowledge translation and practice

**WHAT WE WANT TO ACCOMPLISH**

- International Reputation
- World Class Student Body

**HOW WE WILL GET IT DONE**

- Engaged Faculty
- Collaborative Relationships
- Efficient and Effective Operations

**VALUES**

- **Academic excellence**: demonstrating expertise and excellence, whether at the local, national or international level, whether working individually or collaboratively; continually fostering the success of trainees, staff and other faculty members using best practices

- **Interprofessional collaboration**: respect and openness to a broad range of disciplines; ability to form strong working relationships with others and to be an effective team player

- **Engagement and empathy**: personal drive, focus and commitment; a relentless pursuit of discovery and innovation while also demonstrating intellectual and emotional awareness and understanding of the thoughts, feelings, and behavior of others

- **Accountability and integrity**: owning the results of actions individually and collectively; moving things forward in an ethical manner; contributing to a positive learning culture and environment

- **Health equity**: valuing diversity and being concerned with creating equal opportunities for good health for all; reducing avoidable and unjust differences in health within and between population groups.
ASSUMPTIONS

The following assumptions underpinned the development of the strategic plan:

— The current definition of rehabilitation science - Rehabilitation Science is an integrated science dedicated to the study of human function and participation and its relationship to health and well-being - has guided the development of this plan and will continue to be used by RSI

— In accordance with its mandate, RSI will continue to provide doctoral stream education, i.e., graduating MSc and PhD Rehabilitation Scientists

— RSI recognizes that not all students wish to or can pursue an academic career and so will also provide support to prepare students for a wider range of career opportunities

— RSI will continue to be the primary doctoral stream for the cognates departments

— RSI will continue to be structured as an EDU-B within the Faculty of Medicine i.e., reporting to the Dean with a dedicated leader and the right to grant a degree; but not to offer faculty a primary appointment, nor to administer research grants

— RSI faculty will continue to reflect a range of different research approaches such as: basic, clinical, population health, health and educational services, policy and systems, and translational

— RSI will continue to offer a research-intensive approach, with limited course work

— RSI will offer courses unique to the different areas represented in Rehabilitation Sciences and their research methodologies. In terms of other more general methods and related courses, access will be sought for students to the many offerings available across UofT. For more specialized courses, the Collaborative Programs will continue to be an important resource

— In terms of research, RSI’s role is to support the development of collaborations to promote national and international grant applications

— RSI supports UofT’s strategic priority of increasing international connectivity and contribution.
Five linked statements of strategic intent outline the way forward for RSI, emphasizing the importance of RSI’s relationship with its faculty and other stakeholders. Top students are attracted to RSI because it is part of the University of Toronto with extensive linkages to successful research institutes and access to a heterogeneous community for research purposes; and also because of the national and international reputation of its faculty.

Two of these statements of strategic intent define ‘what’ needs to be done, and three explain ‘how’ this will be accomplished. Further detail is provided in terms of related key issues and opportunities, and the strategies and activities that will be used to address them. Measures of success and priorities for the first year will be identified early in 2017 with input from RSI’s core academic committees and faculty.
RSI is internationally known and respected as a top Rehabilitation Science academic institute, contributing to the resolution of societal and other rehabilitation specific challenges.

**KEY ISSUES AND OPPORTUNITIES:**

- The 2015 External Review report identified RSI as among the top rehabilitation science institutes of its kind internationally. However, as identified by the external review panel, there is work to be done in terms of building its public profile and clarifying its value proposition.

- Individual faculty members have international connections and are engaged in international initiatives. Both the UofT and the FoM’s strategic plans set the expectation of international outreach by all departments.

- The current RSI Director has forged strong international connections in a number of areas. Multiple opportunities for further international collaboration are being received by RSI on an ongoing basis, including supporting other international schools to develop an academic stream rehabilitation sciences program, developing more international research initiatives, encouraging visiting scholars, becoming a WHO Collaborating Centre and/or attracting more international students. However, the rationale for international engagement is not always clear to faculty given limited resources and funding available to support international graduate students in the current UofT context.

- It is also noteworthy that there are few national rehabilitation sciences initiatives currently in place, such as a national rehabilitation policy. Opportunities exist for rehabilitation science to contribute on a greater scale to national challenges such as chronic disease management.

- Given the relative economic and intellectual wealth of Canada, many argue that RSI has a role to play, described by some as a ‘moral obligation’, to support developing countries grow their rehabilitation science’ research capacity.
IMPLEMENTING STRATEGIC INTENT 1

The following strategies will be pursued. Examples of the types of activities likely to be undertaken as part of each strategy are also listed below:

**STRATEGY 1.1.**
Promote the Rehabilitation Sciences Institute as an academic institute of international rehabilitation sciences excellence

### Examples of Activities

1.1.1 Develop a core value proposition statement, gathering input from faculty, students, staff and partners that differentiates RSI from comparator organizations

1.1.2 Develop and implement a strategic marketing plan that identifies key audiences, messages and mechanisms

1.1.3 Require faculty and students to identify their linkage to RSI when promoting their own work
STRATEGY 1.2
Contribute to generating and disseminating new knowledge that results in local, national and international rehabilitation successes

Examples of Activities

1.2.1 Develop a network of faculty interested in national and international initiatives
   — Build the infrastructure to enable the network to connect, develop a common language and share frameworks
   — Develop a detailed understanding of the national and international rehabilitation related initiatives currently underway within RSI, UofT and the FoM. In undertaking this review, take into consideration critical analyses of national and international rehabilitation initiatives
   — Identify a small number of suitable national and international initiatives
   — Share information (as and when available) about possible pro bono opportunities in developing countries
   — Identify partnership opportunities

1.2.2 Build awareness of national and international grant opportunities and foster the development of appropriate teams. Introduce catalyst type grants to support nascent teams to do the groundwork that will make them successful in larger competitions

1.2.3 Implement a visiting scholars’ program to support the development of ‘global fluency’ locally and to encourage the development of curiosity about the study of rehabilitation sciences internationally

1.2.4 Continue to conduct external environmental scanning to identify emerging rehabilitation issues and opportunities
WORLD CLASS STUDENT BODY

RSI is the first choice of prospective rehabilitation science doctoral stream students worldwide

KEY ISSUES AND OPPORTUNITIES:

— RSI has been successful over the years in attracting a strong student cohort, predominantly from Ontario. However, few international students have been recruited and some of the top Canadian students, those who have already received recognition for their academic leadership, have chosen to study elsewhere.

— Being successful in recruiting top students, particularly international students, requires providing financial support.

— Top students expect a world-class academic program including preparation for a range of possible future careers. RSI’s provides a strong doctoral stream education with limited course work requirements, tailored to meet student’s needs and research. However, more is required in terms of alternative career preparation. Students are also expecting a strong focus on the patient or the community at the core of what is taught and researched.

— Historically, GDRS did little proactive recruitment. In more recent years, RSI has implemented a number of well-regarded recruitment initiatives nationally and internationally. More could be done to engage faculty and the cognate departments in identifying their preferences with respect to students’ skills and expertise; and in mobilizing and utilizing faculty members in the recruitment process since survey data indicates that the major reason students choose RSI is the opportunity to study with a particular researcher.

4 Student survey, Fall 2016
IMPLEMENTING STRATEGIC INTENT 2

The following strategies will be pursued. Examples of the types of activities likely to be undertaken as part of each strategy are also listed below:

STRATEGY 2.2
Continuously improve the academic program

Examples of Activities

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<tr>
<td>2.2.1</td>
<td>Identify appropriate core competencies that reflect the diversity among RSI’s rehabilitation scientists as a guide to ongoing curriculum development and assessment</td>
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<td>2.2.2</td>
<td>Determine sustainable approaches to resourcing courses and to encourage faculty’s adoption of innovative teaching techniques</td>
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<td>2.2.3</td>
<td>Strengthen team-based learning that builds respect for all team members</td>
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<td>2.2.4</td>
<td>Continue to strengthen relationships strategically with Collaborative Programs to provide students with deep learning and additional leadership opportunities</td>
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<td>2.2.5</td>
<td>Enable opportunities for international exposure (e.g., by facilitating RSI faculty and student presentations at international conferences)</td>
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<td>2.2.6</td>
<td>Collaborate with the primary departments of faculty members to develop an appropriate faculty development strategy, including strengthening lab supervisory skills</td>
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**STRATEGY 2.3**
Prepare students for a range of career options

### Examples of Activities

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<tr>
<th>2.3.1</th>
<th>Develop a 3-year plan in conjunction with the Graduate Professional Skills Training Centre to provide students with additional skills and networking opportunities</th>
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<tr>
<td>2.3.2</td>
<td>Encourage faculty to increase their competence and confidence in supporting student preparation for non-academic careers (e.g., by attending the workshops being offered by the Office of the Vice Dean of Graduate Education)</td>
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<td>2.3.3</td>
<td>Recruit non-academic rehabilitation science leaders to act as mentors, offer internships and/or provide informal learning sessions on career-related topics</td>
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<td>2.3.4</td>
<td>Establish relationships with strategic partners that arrange and fund internships, locally and globally</td>
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<tr>
<td>2.3.5</td>
<td>Continue to encourage and support students to organize networking and content rich-events such as Research Day; and to attend presentations/speaker events hosted by Collaborative Programs</td>
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RSI faculty members are engaged increasingly with each other, with RSI students and with the Institute to create an environment that fosters learning, collegiality and leadership.

**KEY ISSUES AND OPPORTUNITIES:**

- As an EDU-B, RSI has no dedicated faculty of its own. Some 70% of faculty have primary appointments within the cognate departments; the remaining 30% are spread among 14 departments. Hence, faculty members experience competing priorities, with RSI described frequently as being of secondary importance. Currently, a minority of faculty members are actively engaged in teaching or supervising students; or contribute to RSI’s governance and management by sitting on RSI committees.

- Faculty members indicate that they value RSI’s graduate students although RSI is not the only source of good graduate students.

- The current research funding environment in Canada has placed most researchers and labs under financial constraints and has created more uncertainty with respect to ongoing availability of funding for graduate students, especially international students.

- Faculty feedback indicates that funding support from RSI is valued together with the opportunity to develop global fluency through, for example, visiting scholar programs and developing international research collaborations.

- The opportunity exists for RSI to strengthen its relationship with faculty members by developing a more customized response to research goals, career stage and aspirations.

5 Faculty survey, Fall 2016
IMPLEMENTING STRATEGIC INTENT 3

The following strategies will be pursued. Examples of the types of activities likely to be undertaken as part of each strategy are also listed below:

STRATEGY 3.1
Strengthen current faculty recruitment and support processes; and implement an annual “report card”

Examples of Activities

3.1.1 Develop a clear statement of faculty benefits and expectations in an inclusive manner (e.g. by checking in with all faculty members as to what they are looking for and in what way they may be able to contribute to RSI at this time)

3.1.2 Support faculty in upgrading their skills (e.g. with respect to supervising students in a contemporary context)

3.1.3 Monitor faculty engagement on an ongoing basis and adjust the benefits and expectations accordingly

3.1.4 Develop a scorecard for rating faculty performance and share anonymized results with the Dean and faculty. Develop additional mechanisms for recognizing faculty achievements and contribution

STRATEGY 3.2
Expand support to faculty

Examples of Activities

3.2.1 Address identified support gaps e.g., provide additional statistical support; with the Dean's assistance, help reduce the cross-institutional barriers to collaboration working through TAHSN

3.2.2 Identify faculty willing to work with international students and provide support with student recruitment, screening and orientation

3.2.3 Develop innovative mechanisms to support funding for top Canadian and international students

3.2.4 Facilitate national and international relationship building (e.g., by helping fund conference-related travel; identifying national and international grant awards)
# STRATEGY 3.3

Provide faculty with enhanced learning and leadership opportunities

## Examples of Activities

### 3.3.1
Promote faculty careers by establishing an RSI Awards program and by supporting their nomination for other awards

### 3.3.2
Offer a major opportunity every other year (e.g., seeking funding for and hosting an international conference targeting, for example, issues related to health equity)

### 3.3.3
Provide opportunities to share knowledge and expertise (e.g., arrange more opportunities for faculty to get together and share ideas both on a social and professional basis; hold joint faculty/student social events on a periodic basis such as following the bi-weekly Presentations class)
RSI is regarded as the rehabilitation sciences partner of choice within the Faculty of Medicine, across UofT, locally with research institutes as well as nationally and internationally with individuals and organizations interested in building rehabilitation capabilities and capacity.

KEY ISSUES AND OPPORTUNITIES:

— RSI exists in a complex web of interconnected relationships. Three primary levels of relationship have been identified: i) with the cognate departments; ii) with FoM and UofT departments, research institutes and affiliated hospitals; and iii) with national and international organizations.

— There has been some tension with the cognate departments related to decision making processes and access to/allocation of faculty time.

— The strength of relationships across the University and with research institutes varies and is dependent, by and large, on individual researchers rather than being reflective of strategic opportunity and alignment.

— There are few rehabilitation science national initiatives (such as the development of a national rehabilitation strategy) currently in place in Canada. While individual faculty members have been involved, neither RSI nor its predecessor organization (GDRS) has, to-date, played a leadership role at the national level.

— Both the University and the FoM have indicated their intent to be more involved and influential internationally. To that end, the FoM has established strong relationships in a number of countries, including China. However, there is no overarching international or graduate student strategy and there are no current memoranda of agreement for student exchanges involving RSI. Given University policies, international students are particularly expensive to fund.
IMPLEMENTING STRATEGIC INTENT 4

The following strategies will be pursued. Examples of the types of activities likely to be undertaken as part of each strategy are also listed below:

STRATEGY 4.1
Create the conditions for successful collaboration

Examples of Activities

4.1.1 Analyse current relationships and determine those strategic to RSI’s future success

4.1.2 Establish partnership principles that will guide the selection and management of collaborative relationships

4.1.3 Develop an action plan, outlining priorities and accountabilities; as well as a regular evaluation process

STRATEGY 4.2
Strengthen relationships to enable ongoing delivery of RSI’s mission as well as growth in student numbers

Examples of Activities

4.2.1 Meet with cognate department chairs on a regular basis to discuss expectations and benefits and to agree upon roles and commitments, including a decision-making framework within the current governance model

4.2.2 Meet regularly with Research Institute leads to build alignment and ensure support for students working in labs within the respective institutes

4.2.3 Pursue opportunities for interdisciplinary research within Collaborative Programs

4.2.4 Strengthen relationships with University Partnership in Academic Rehabilitation (UPAR) members to increase the number of hosting research institutes, as well as the number of faculty and students within current research sites

4.2.5 Support faculty champions tackling critical health equity issues by helping seek out national and international partners
RSI is known to be both highly student, faculty and alumni-centred as well as fiscally sound, efficient and effective.

KEY ISSUES AND OPPORTUNITIES:

— RSI has been well managed historically and is in a sound financial position. However, the academic sector as a whole is stretched and the FoM has found itself in strained financial circumstances.

— Feedback from students and alumni indicate high regard for staff and the support provided by them. However, there are multiple duplications in information requests that are time consuming for both students and staff.

— Concerns have been expressed by Cognate Departmental chairs that there is an absence of transparency and accountability in some of RSI’s processes and decision making.

— RSI is early in its advancement efforts, including organizing the alumni and building their support.
IMPLEMENTING STRATEGIC INTENT 5

The following strategies will be pursued. Examples of the types of activities likely to be undertaken as part of each strategy are also listed below:

**STRATEGY 5.1**
Enhance funding and pursue advancement opportunities strategically

**Examples of Activities**

5.1.1 Advocate for increases in funding for rehabilitation research that also supports training

5.1.2 Develop an inventory of what RSI has to offer a potential donor including the ‘products’ such as support for students’ international endeavors

5.1.3 Strengthen relationships with alumni and faculty

5.1.4 Develop rehabilitation sector-wide opportunities, working with Advancement

5.1.5 Develop business cases to support the implementation of revenue generating opportunities

**STRATEGY 5.2**
Continuously improve and make processes and practices more transparent, including funding processes, to foster trust and collegiality

**Examples of Activities**

5.2.1 Ensure all processes are documented in a way that clarifies roles and responsibilities. Make such documentation is readily accessible

5.2.2 Revisit decision making protocols to ensure that all funding decisions are made with the appropriate information and oversight

5.2.3 Simplify and streamline processes whenever possible.
OVERVIEW
Having a good strategy and strategic plan is not enough. Value is derived typically only once action is taken, the implications of taking that action are understood with that information being used to fine tune the selection of further actions. A disciplined implementation process, inclusive of a robust project management framework and sound monitoring and evaluation process, is essential to achieving results.

This section outlines the roles and responsibilities of the various parties associated with implementing the strategic plan, identifies some of the high-level risks and contingencies, suggests an initial set of Year One actions and finally, outlines a monitoring approach.

ROLES AND RESPONSIBILITIES

— Executive Committee\(^6\) – provides oversight to the overall implementation of the plan, monitoring progress against targets and identifying necessary course corrections on a regular basis

— Academic Affairs Committee (AAC) – monitors progress against achievement of the Vision and Mission, sets the necessary policies and procedures, and monitors the implementation thereof. Progress updates with respect to the strategic plan are discussed bi-annually, including an annual discussion of priorities for the upcoming year

— Director – leads implementation of the plan; informally and formally provides support and monitors progress on a regular basis; performs (or delegates) any required modeling of financial implications of proposed changes and tracks funding against priorities; determines deployment of resources; issues annual priorities and reports back to faculty at least twice a year with respect to progress against plan

— Strategic Planning Leads (committees and individuals) – accountable for achieving the targets and deliverables as outlined each year. The Director, supported by the Executive Committee, identifies Leads for each of the annual priorities. That committee or individual develops a more detailed work plan that is tabled with the Executive Committee, outlining key deliverables, timelines and any resource requests. Progress against plan is reported to the Executive Committee on a regular basis

— Faculty, Student Leaders and Staff – utilize concepts and directions set out in this plan to prioritize work.

\(^6\) See list of members in Appendix
RISKS AND CONTINGENCIES

All strategic plans should be realistic. This section provides the opportunity for major risks to be identified upfront with some thought given to possible mitigation strategies.

Key risks would appear to centre around resourcing, i.e., the time availability of critical resources, funding to support the proposed changes as well as the resources to manage the plan’s implementation. Contingency plans might include:

- Establishing a small number of priorities carefully in the first year that will strengthen RSI while signaling its intent to grow further.

- Assigning clear responsibility for ongoing project management of the implementation to a staff member with regular check points integrated into Executive Committee and AAC agendas; and

- Ensure adequate resourcing to set up the implementation structure initially, to review progress at the end of Year One and to support setting Year Two priorities. This will help the implementation process acquire momentum and traction.
The implementation of the plan will commence in spring, 2017. It is recommended that the core academic committees are consulted regarding the priorities in their mandate areas.

From a project management standpoint, in Year One it is important to establish the key metrics by which the success of each element of the plan can be assessed. Other project management activities include: defining the process by which the accountable Committees and individual leads will be confirmed; outlining the expectations of them (for example: with respect to developing work plans and reporting); finalizing the monitoring process; and aligning the monitoring process with AAC and faculty meeting dates.

Based on discussions to date, the following list of Year One initiatives has been developed:

<table>
<thead>
<tr>
<th>Strategic Intent</th>
<th>Year One Initiative</th>
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<tbody>
<tr>
<td></td>
<td>1. Finalize RSI’s value proposition and develop related marketing plan</td>
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<td>1.1</td>
<td>2. Develop proposal for RSI to become a WHO Collaborating Centre</td>
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<tr>
<td>1.1</td>
<td>3. Initiate planning for international conference to be held within three years</td>
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<tr>
<td>1.2 &amp; 3.3</td>
<td>4. Develop and implement an international recruitment strategy</td>
</tr>
<tr>
<td>2.1</td>
<td>5. Establish process to review and refresh curriculum including alternative methods of delivery</td>
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<td>2.2</td>
<td>6. Develop a plan with the Graduate Professional Skills Training Centre to prepare students for a range of career options</td>
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<tr>
<td>2.3</td>
<td>7. Initiate a student mentorship program</td>
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<tr>
<td>2.3</td>
<td>8. Finalize roles and responsibilities with respect to the various Departments whose faculty are cross appointed to RSI</td>
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<tr>
<td>4.2</td>
<td>9. Develop more collaborative opportunities with research institutes/partners</td>
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<tr>
<td>5.1</td>
<td>10. Develop and start implementing an advancement plan</td>
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With the understanding that change is the only constant, course corrections may be made over the life of this plan with appropriate input from and consultation with faculty, students and committees.

Monitoring the implementation of the strategic plan will take place at regularly scheduled AAC meetings, with three major annual milestones:

1. Each year following the initiation of the implementation, on or about the beginning of December, the Director will issue a retrospective report, outlining achievements, performance against key metrics, and identifying the priorities for the upcoming year.

2. In the late spring, the Director will issue a progress update.
3. In the fall, the AAC will hold a longer meeting at which it reviews progress to-date, resource deployment, underpinning assumptions and the emergence of other internal or external factors. A proposed set of priorities for the upcoming year is developed and accountable leads identified. These individuals or Committees are asked to develop work plans and resource requests, which then inform the development of the final set of priorities for the upcoming year, announced prior to the end of the year [as outlined in 1 above]

This annual review is particularly important given the general pace of change in the area of rehabilitation sciences. Should the assumptions underpinning the strategy no longer hold, consideration should be given to initiating a new strategic conversation about RSI’s focus and priorities.
MEMBERSHIP OF THE STEERING COMMITTEE

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>Dr Angela Colantonio</td>
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<td>Dr Dina Brooks</td>
<td>Professor, Dept. of Physical Therapy; and Graduate Student Coordinator, RSI</td>
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<td>Diane Wiltshire</td>
<td>Business Manager of RSI and the Rehabilitation Sector</td>
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Dr Jane Cooke-Lauder: Strategic Planning Consultant

MEMBERSHIP OF THE EXECUTIVE COMMITTEE

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Dr Dina Brooks, Graduate Student Coordinator, RSI
Diane Wiltshire, Business Manager, RSI
Jessica Boafo, Communications Coordinator, RSI

INTERNATIONAL GUESTS

Our thanks to the two presenters at the mini-retreats: Dr. Kathryn McPherson - Chief Executive, Health Research Council of New Zealand (November 11, 2016) and Dr. Armando J. Vásquez Barrios - Regional Advisor, Pan American Health Organization (PAHO/WHO) (December 1, 2016).
FACULTY OF MEDICINE
Rehabilitation Sciences Institute
Strategic Plan
2017–2020

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