



# Centres for Leadership

## 2018-19 Centres for Leadership funded projects

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January 12, 2018

The following is a list of the 17 projects selected for 2018-19 funding by the four Centres for Leadership:

- The Centre for Leadership in Acquired Brain Injury (ABI)
- The Centre for Leadership in Child Development (CDP)
- The Centre for Leadership in Innovation (INV)
- The Centre for Leadership in Participation and Inclusion (P&I)

## Personalize Pathways:

### **1. A new treatment for chronic expressive aphasia in children post stroke: Personalized intensive speech-language therapy enhanced with magnetic resonance image guided brain stimulation**

**Year 1, Centres for Leadership in ABI and Innovation**

**Contributors:** Deryk Beal (Clinician Scientist, Bloorview Research Institute (BRI)), Katia Simic (SLP, Brain Injury Rehab Team (BIRT)), Shannon Scratch (Clinician Scientist, BIRT), Michel Belyk (Postdoctoral Fellow, BRI), Carly Cermak (PhD Student, BRI/UofT), Ruma Achrekar (Family Leader), Dr. Peter Rumney (MD, BIRT), Dr. Mahendra Moharir (MD Neurology, SickKids), Dr. Pradeep Krishnan (MD, Pediatric Neuroradiologist, SickKids)

**Programs/organizations:** Bloorview Research Institute, Brain Injury Rehab Team, University of Toronto, Sick Kids

**Client and family need:** “Expressive aphasia” is a devastating loss of language ability that dramatically impairs talking and writing, and results in lifelong learning, social, and daily function challenges for as many as 30% of childhood stroke survivors. Unfortunately, children with chronic expressive aphasia respond minimally to speech-language therapy beyond one year after the stroke despite having a lifelong need for treatment.

**Purpose:** The purpose of our study is to test transcranial magnetic brain stimulation (TMS) with enhanced language therapy for children with chronic aphasia post stroke and answer the question do children with chronic expressive aphasia post stroke improve after intensive speech-language therapy enhanced with TMS?

**Deliverables:** Treatment study of TMS, local and international presentations, submitted journal article

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Evolving client centred quality and safety

## 2. Integrating wellness goals into personalized care pathways for children and youth with disabilities

### Year 1, Centres for Leadership in CDP and P&I

**Contributors:** Yani Hamdani (PhD, OT), Amy McPherson (Scientist, BRI), Kristen English (Therapeutic Recreation Specialist (TRS), P&I), Julia Yael (Family Leader), Maricel Patricio (Family Leader), Abbas Syed (Youth Leader, HB Alumni), Anne Kawamura (MD, CDP), Darlene Hubley (Interprofessional Education Leader), Heidi Schwellnus (Collaborative Practice Leader), Caroline Kasse (Sibling perspective, CAMH), Yona Lunsky (Scientist, CAMH), James Noronha (Manager, Special Olympics Ontario)

**Programs/organizations:** Child Development Program, Participation and Inclusion, Teaching and Learning Institute, Collaborative Practice, The Centre for Addiction and Mental Health Hospital (CAMH), Special Olympics Ontario

**Client and family need:** Children and youth with disabilities are more likely to experience diminished wellness and decreased quality of health compared to their peers without disabilities. Yet, little is known about how wellness is promoted or addressed in the context of children's rehabilitation services.

**Purpose:** The purpose of this project is to inform the development of a toolkit for wellness promotion for Holland Bloorview and community clients and their families

**Deliverables:** Summary of key findings on wellness, future grant application, submitted journal article

**Funding:** \$16,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni

## 3. Long-term ventilation discharge pathway: Evaluating the perceptions of family caregivers on skill acquisition and competency

### Year 1, Centre for Leadership in P&I

**Contributors:** Jackie Chiang (MD, CCC), Reshma Amin (MD, Sick Kids), Sally Lindsay (Scientist, BRI), Tilak Dutta (Parent), Andrea Hoffman (Physician, CCC Unit HBKRH), Krista Keilty (Nurse Practitioner (NP), Transitions Holland Bloorview and SickKids), Maryanne Fellin (Registered Nurse (RN), CCC), Chitra Gnanasabesan (Respiratory Therapy Lead, CCC), Katie Elliott (TR, CCC), Sally McMackin (Director Community Programs, Toronto Central LHIN), Sandra McKay (Manager Research and Evaluation, VHA Home HealthCare), Karen Dryden-Palmer (Advanced Practice

Nurse, Intensive Care SickKids), Faiza Syed (Respiratory Therapist, LTV program SickKids), Joanna Polyviou (Nurse Practitioner, LTV program SickKids)

**Programs/organizations:** Complex Continuing Care, Bloorview Research Institute, Sick Kids, Toronto Central LHIN, VHA Home Healthcare

**Client and family need:** Medical and technological advances have resulted in a growing cohort of children using Long-term Ventilation (LTV) via tracheostomy at home. To date, client and family input into the development of the LTV discharge pathway has been largely anecdotal. It is thus unknown whether parents and caregivers transitioning to home feel competent in their knowledge and skills to lead their child's care and if the pathway is meeting their learning needs.

**Purpose:** The purpose of this project is to understand the experience of parents and caregivers that have gone through the LTV discharge pathway with respect to their perception of competency attainment. These learnings will be used to iteratively inform improvements in the LTV discharge pathway.

**Deliverables:** Improved LTV discharge pathway, improved the KidsVent Checklist, Print and video infographics, local, provincial and national level conference presentations, submitted journal application

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Evolve client-centred quality and safety

## 4. The SibKit 2.0: Tools for siblings of children with acquired brain injury

**Year: 1, Centre for Leadership in ABI**

**Contributors:** Kathy Gravel (Social Worker (SW), BIRT), Samia Abdi (Parent/Family Leader), Kailyn Dennis (Sibling Leader), Caron Gan (Family Therapist, Clinical Investigator); Laura Hughson (Child and Youth Worker, BIRT), Yael Diamond (SW, BIRT), Kylie Dennis (BIRT Client Leader), Ashleigh Townley (Knowledge Broker), Joanne Wincentak (Knowledge Broker), Lisa Kakonge (Speech Language Pathologist (SLP)), Kennes Lin (SW student), Melissa Ngo (Family Support Specialist), Daniel Scott (Playroom Coordinator)

**Programs/organizations:** Brain Injury Rehab Team (BIRT), Evidence to Care, Bloorview Research Institute, Client and Family Integrated Care

**Client and family need:** Brothers and sisters often deal with devastating loss and change after a sibling suffers an acquired brain injury. Siblings' needs and outcomes have largely been overlooked, they tend to feel isolated from their newly injured brother or sister, and cut off from access to information during acute hospitalization.

**Purpose:** This project aims to engage siblings, clients, parents and clinicians in the co-creation of the SibKit 2.0 an innovative educational product for siblings of children living with acquired brain injury.

**Deliverables:** SibKit 2.0 tool for BIRT inpatient siblings and families

**Funding:** \$8,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Mobilize people and teams

## 5. Project LEApp (Learning to Eat App): Will an iPad based video modeling intervention, LEApp, be helpful in changing feeding behaviours in children with autism spectrum disorder?

**Year 2, Centre for Leadership in CDP**

**Contributors:** Sharon Smile (MD, Clinical Investigator), Cecilia Lee (Physician Fellow), Adrienne Zarem (Family Leader), Christin Ferreira (Family Leader), Elaine Biddiss (Scientist, BRI), Rebecca Perlin (SLP, CDP), Christie Raffaele (Occupational Therapist (OT), CDP), Moira Pena (OT, CDP), Annie Dupuis (Biostatistician, Sick Kids), Justine Wiegelmann (Behaviour Consultant, Geneva Centre for Autism)

**Programs/organizations:** Child Development Program, Bloorview Research Institute, Sick Kids, Geneva Centre for Autism

**Client and family need:** Feeding difficulties are identified in up to 89% of children with autism and food selectivity is arguably the most difficult to manage and resistant to treatment. This feeding difficulty can have a significant impact on mealtime behaviours, parent-child interactions and nutrient intake and potential long-term consequences can include obesity and cardiovascular disease.

**Purpose:** Our objective is to develop an animated video modelling intervention built from evidence based practices to target feeding selectivity in preschoolers with autism.

**Deliverables:** Clinical VMI prototype, presentation at Sick Kids Research Day and Canadian Pediatric Society

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Mobilize people and teams

## 6. A feasibility randomized controlled trial comparing Lokomat® robotic gait trainer with the same dosage of PT alone in the early rehabilitation of children after an acquired brain injury

**Year 3, Centre for Leadership in ABI**

**Contributors:** Ryan Hung, (MD, Clinical Investigator), Virginia Wright (Senior Scientist, BRI), Jennifer Ryan (Physiotherapist (PT)), Barbara Gibson (Senior Scientist), Laura Ritchie (Family Leader), Kelly Brewer (PT, BIRT), Gail Kirkwood (PT, BIRT), Viola Cheng (PT, BIRT), Tracy Lee (PT, BIRT), Tricia Martin (PT Assistant, BIRT), Greg Stefler (PT Assistant, BIRT), Janet Bernstein (OT, BIRT), Janet Woodhouse (OT, BIRT)

**Programs/organizations:** Brain Injury Rehab Team, Bloorview Research Institute

**Client and family need:** Learning to walk again is a common priority goal after a pediatric acquired brain injury and there has been strong interest in using the Lokomat (robotic assisted gait training), but to date there are no Lokomat studies in pediatric acquired brain injury.

**Purpose:** This study will be the first-ever determination of feasibility and outcomes associated with a clinically practical physiotherapy and Lokomat protocol for children with acquired brain injury.

**Deliverables:** Lokomat intervention for 20 clients, practice manual for Lokomat use with children with ABI, conference, journal submission to Brain Injury.

**Funding:** \$11,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Mobilize people and teams

## 7. A feasibility and acceptability study of elevated protein dietary intake for children diagnosis with autism spectrum disorder while on psychotropic medication

**Year 1, Centre for Leadership in Innovation**

**Contributors:** Lorry Chen (Dietician, CCC), Evdokia Anagnostou (MD, Scientist, BRI, CDP), Cathy Petta (RN, CDP), Susan Cosgrove (Family Leader), Jessica Brian (Psych, Clinician Scientist, CDP) and Dr. Joseph Telch (MD, CDP)

**Programs/organizations:** Child Development, Bloorview Research Institute

**Client and family need:** For children and adults with autism spectrum disorder (ASD) weight gain can be a very harmful side effect of taking psychotropic medication. Approximately 30%-60% of children with ASD are prescribed at least one psychotropic medication, and 10% are prescribed more than three medications at the same time. Yet there are no established treatments or preventative measures to combat psychotropic-induced weight gain.

**Purpose:** This study will evaluate a controlled energy diet with elevated protein intake to combat weight gain in children with ASD who are currently taking psychotropic medication.

**Deliverables:** Completed intervention pilot with 10 children with ASD, application to international conference, submitted journal article.

**Funding:** \$17,000

**No Boundaries Empowering Impact:** Evolving Client Centred Quality and Safety

## Discover for Action:

### 8. Cycle to Fun – ‘Exergames’ for inpatient rehabilitation for children and youth with cerebral palsy

**Year 1, Centres for Leadership in CDP and P&I**

**Contributors:** Darcy Fehlings (Clinician Scientist, MD, CDP), Ka-Kei Yeung (OT, CDP), Cheryl Peters (Family Leader), Jillian Peters (Child Leader), Michelle Balkaran (RN), Michelle Champagne (TRS), Mark Camp (Orthopedic Surgeon, Sick Kids), Nicholas Graham (Scientist, Queens University), Unni Narayanan (Orthopedic Surgeon, Sick Kids)

**Programs/organizations:** Child Development Program, Specialized Orthopedic and Development Rehab Unit, Participation and Inclusion, Sick Kids, Queen’s University

**Client and family need:** Many children and youth with cerebral palsy develop contractures (shortening of muscles) and bony deformities (e.g. hip subluxation) that require lower limb orthopedic surgery, followed by intensive rehabilitation to regain motor function. However, these youth often engage in sedentary activities and have low motivation to actively participate in physiotherapy thereby limiting their mobility, fitness, and overall well-being.

**Purpose:** The project team plans to explore the role of the Liberi Exergames (an accessible, interactive and functional bicycling-based videogame system) for children and youth with cerebral palsy admitted for inpatient rehabilitation following lower extremity orthopedic surgery to reduce pain and enhance well-being.

**Deliverables:** A pilot study of Liberi Exergaming system in inpatient children/youths with cerebral palsy

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Mobilize people and teams

## 9. Putting positive weight-related conversations into practice: The pilot implementation of a knowledge translation casebook

### Year 2, Centre for Leadership in CDP

**Contributors:** Amy McPherson (Scientist, BRI), Christine Providenza (KT Specialist, Evidence to Care), Laura Hartman (OT, PhD, BRI), Susan Cosgrove (Family Leader), Julia Kahyat (Family Leader), Darlene Hubley (Interprofessional Education Leader), Lorry Chen (Dietitian, CDP), Evdokia Anagnostou (MD, CDP), Jill Hamilton (MD, Sick Kids), Brenndon Goodman (Canadian Obesity Network Member)

**Programs/organizations:** Bloorview Research Institute, Evidence to Care, Child Development Program, Teaching and Learning, Sick Kids, Canadian Obesity Network

**Client and family need:** 1 in 3 Canadian children experience overweight or obese and children with disabilities have significantly higher obesity rates, reducing mobility and independence, and increasing risks of additional health conditions. Overweight and obesity are sensitive topics to discuss and healthcare professionals (HCPs) report many barriers to raising the topic, including lack of training, confidence and resources.

**Purpose:** The proposed study will create new curriculum and provide training to an interprofessional group of HCPs and healthcare students, explore how the Casebook is used in clinical practice to guide care and establish an 'implementation roadmap' to support the adoption of the Casebook in targeted areas of clinical practice.

**Deliverables:** Two training workshops, trained HCP and students, training package, an 'implementation roadmap' document, submitted journal article, summary for stakeholders

**Funding:** \$16,000

**No Boundaries Empowering Impact:** Evolve client-centres quality and safety, Mobilize people and teams, Lead and model social change

## 10. Evaluation of the reliability and validity of the new Challenge-III with children who have cerebral palsy and walk independently with the support of a gait device

### Year 1, Centre for Leadership in CDP

**Contributors:** Blythe Dalziel (PT, CDP), Virginia Wright (Senior Scientist, BRI), Leah Takeuchi (PTA, CDP), Darlene Espinosa (PTA, CDP), Temine Fedchak (PTA, CDP), Kelly Johnston (Youth Leader), Amber Gill (PT, CDP), Chun Kim (PT, CDP)

**Programs/organizations:** Child Development Program, Bloorview Research Institute

**Client and family need:** A child's ability to competently and confidently perform advanced gross motor skills can strongly influence their participation in sports-based activities. Physiotherapists (PTs) typically use the internationally accepted Gross Motor Function Measure (GMFM-66) to assess the foundational gross motor skills (barefoot and without gait aids) of children who have cerebral palsy. However, it does not evaluate the advanced motor skills that help support their participation in recess, gym, and sports.

**Purpose:** To establish a valid measure we will be looking at reliability, validity and children's experience with the Challenge III.

**Deliverables:** Challenge III outcome measure for clinical assessment, local/international presentations

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Mobilize people and teams

## 11. Pathways for progress: The impact of an interdisciplinary team-based assessment for youth with concussion and their families.

### Year 1, Centre for Leadership in Innovation

**Contributors:** Shannon Scratch (Clinician Scientist, BIRT, BRI), Andrea Hickling (OT, BIRT, BRI), Nick Joachimides (Manager, BRI), Christine Provvidenza (KT Specialist, Evidence to Care), Heidi SchwelInus (Collaborative Practice Leader), Katie Mah (PhD Student, BRI), Susan Stewart (Parent Advisor), Jessica Stewart (Youth Advisor) and Complex Concussion Team

**Programs/organizations:** Complex Concussion Team, Bloorview Research Institute, Brain Injury Rehab Program, Evidence to Care, Collaborative Practice

**Client and family need:** In youth, persistent post-concussion symptoms (PCS) can include physical, cognitive and mental health complications. It is essential for individuals with PCS to have access to appropriate and timely, coordinated, interdisciplinary and evidence-based care. However, there are currently no guidelines regarding how these interdisciplinary services should be organized to meet the needs of families and support client outcomes.

**Purpose:** The purpose of this project is to critically evaluate an innovative clinical pathway and ensure it is meeting the needs of clients and families and that concussion care at Holland Bloorview remains evidence-informed.

**Deliverables:** Co-created and evaluated clinical pathway for youth with concussion, submitted journal application

**Funding:** \$13,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Mobilize people and teams

## 12. Co-creating summaries for making research publications accessible to all clients and families

### Year 1, Centres for Leadership in P&I, CDP, ABI and Innovation

**Contributors:** Nadia Lise Tanel (Manger, BRI), Christine Provvidenza (KT Specialist, Evidence to Care), Amy McPherson (Scientist, BRI), Shannon Scratch (Clinician Scientist, BIRT, BRI), Shauna Kingsnorth (Manger, Evidence to Care), Michelle Stegnar (Manager, Research Communications and Media), Kyoko Davis (Family Leader), Suzanne Jorisch (Family Leader), Rebecca Nesdale-Tucker (Family Leader), Lori Beesley (Family Centered Care Specialist), Amir Karmali (Family Centered Care Specialist)

**Programs/organizations:** Bloorview Research Institute, Teaching and Learning Institute, Client and Family Integrated Care

**Client and family need:** Currently, clients and families face many barriers to accessing results in academic journals and making use of the research findings.

**Purpose:** Our proposed project addresses these barriers by aiming to develop a sustainable process for translating research into summaries for clients and families.

**Deliverables:** Process and templates to support creation of summaries for families, creation of eight summaries for families

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Mobilize people and teams

### 13. Knowledge Translation Facilitator Network: Phase 3

**Year 3, Centre for Leadership in P&I, CDP, ABI and Innovation**

**Contributors:** Christine Provvidenza (Knowledge Translation Specialist), Ashleigh Townley (Knowledge Broker), Joanne Wincentak (Knowledge Broker), Shauna Kingsnorth (Evidence to Care Lead, Clinical Study Investigator (CSI)), Sean Peacocke (Manager, CfL)

**Programs/organizations:** Centres for Leadership, Evidence to Care

**Client and family need:** At Holland Bloorview there is an opportunity to build development in knowledge translation (KT) competencies to foster integrated work and produce quality implementation and evaluation plans to better impact the lives of clients and families at Holland Bloorview.

**Purpose:** In year two, we aim to grow the impact of the KTFN program by extending the program to include leaders of No Boundaries strategic initiatives, Family Advisory Committee and Research Family Engagement Committee as well as Centres for Leadership.

**Deliverables:** 12 new trained facilitators across Holland Bloorview

**Funding:** \$4,000

**No Boundaries Empowering Impact:** Mobilize people and teams,

## Connect the System:

### 14. ReSourced: Co-Creating an Online Platform to Help Families Navigate the Services System

**Year: 1, Centre for Leadership in Innovation**

**Contributors:** Azadeh Kushki (Scientist, BRI), Melanie Penner (MD, Clinician Scientist, CDP), Salina Eldon (research coordinator, BRI), Cathy Petta (RN, CDP), Pam Green (NP, CDP), Gideon Sheps (Family Leader), Michelle Stegnar (Communications Manager), Melissa Ngo (Family Support Specialist), Amir Karmali (Family-centred Care Specialist), Lori Beesley (Family-Centred care specialist), Eric Wan (Software Developer), Ben Kinsella (trainee, BRI and UofT)

**Programs/organizations:** Bloorview Research Institute, Child Development Program, Communications, Client and Family Integrated Care, University of Toronto

**Client and family need:** Our health care system is fragmented, highly complex, and challenging to navigate for families, making it difficult to find timely and quality services that meet their unique needs. Although the need for information on services is consistently identified by many families as a critical need, very limited resources are available to guide families. A key barrier to developing such a resource is tracking and maintaining a list of hundreds of public and private services that change rapidly over time.

**Purpose:** We propose to address this gap through developing a highly innovative software system called ReSourced which uses crowdsourcing to harness the power and knowledge of families and the community to co-

create a “crowd-sourced” directory of services and a recommendation system to personalize services for individuals and families to meet their unique needs.

**Deliverables:** Public launch of ReSourced software, infographic, demonstration video

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni

## 15. Supporting students by enhancing educator knowledge about acquired brain injury

**Year 2, Centre for Leadership in ABI**

**Contributors:** Shannon Scratch (Clinician Scientist, BIRT, BRI), Christine Provvidenza (Knowledge Translation Specialist), Naomi Smith (Research Coordinator, BIRT, BRI), Sara Stevens (Clinical Psychologist/Investigator), Alicia Brown (Family Advisor), Anne Hunt (Manager, Concussion), Lisa Kakonge (SLP), Boey Ho (Youth Leader, SLP), Linda Ward (Principal, Bloorview School), Ruth Wilcock (Exec. Director, OBIA), Sheila Bennett (Educator, Brock University), Rhonda Martinussen (Educator, Ontario Institute for Studies in Education)

**Programs/organizations:** Brain Injury Rehab Team, Evidence to Care, Concussion Clinic, Bloorview School Authority, Brock University, Ontario Brain Injury Association (OBIA), Ontario Institute for Studies in Education

**Client and family need:** There is an opportunity to improve school reintegration of children with acquired brain injury to address observed cognitive, physical, behavioural, and emotional difficulties.

**Purpose:** The goal is to develop an education curriculum based on children and teachers’ current needs to increase the understanding of supporting children with acquired brain injury in the classroom.

**Deliverables:** Guided needs assessment workshop

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Lead and model social change

## 16. Improving healthcare professionals’ capacity for facilitating self-determination among children with neuromuscular conditions:

### Addressing the need

**Year 1, Centre for Leadership in P&I**

**Contributors:** Laura McAdam (MD, CDP), Shauna Kingsnorth (Manager, EtC), Amy McPherson (Scientist, BRI), Kadey Schultz (Family Leader), Khalid Mahdi (Alumni Advisor), Kelsey Bell (Life Skills Coach), Penny Sparling (SW, CDP), Craig Campbell (MD, Children’s Hospital London), Anne Hunt (Manager, Concussion, BRI)

**Client and family need:** Due to advancement in the treatment of pediatric neuromuscular (NM) conditions, clients are now living longer and have opportunities that were never considered previously. It is essential that they have the skills to choose their future to ensure that it is as meaningful, healthy and productive as possible. While there has been significant emphasis on preparation for medical transition, there has been little focus in medical clinics on developing self-determination skills which are essential for successful transition to adulthood.

**Purpose:** Completion of a needs assessment to identify what opportunities currently exist for focusing on, incorporating and optimizing the development of self-determination (the ability to make choices and have control over one’s life) in clinics from the perspectives of children, parents/guardians, and health care professionals.

**Deliverables:** Individual Interviews/Focus Group Study, project summary, infographic, future grant

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni

## 17. Getting the Community Mobility Assessment-2 out into the big world: Creation and pilot evaluation of a simulation based clinician training program

### Year 2, Centre for Leadership in ABI

**Contributors:** Trish Geisler (OT, BIRT), Virginia Wright (Senior Scientist, BRI), Kelly Brewer (PT, BIRT), Janet Woodhouse (OT, BIRT), Kathryn Parker (Director, Teaching and Learning), Olga Brankovan (Youth Leader), Matthew Synowicki (Youth Leader), Roselle Adler (OT, CHEO), Salma Kassam (OT, BIRT), Janet Bernstein (OT, BIRT), Jamie Chik (OT, BIRT), Tracy Lee (PT, BIRT), Viola Cheng (PT, BIRT), Gail Kirkwood (PT, BIRT), Jennifer Ryan (PT, BIRT), Christine Chow (E-Learning Developer, Org Development)

**Programs/organizations:** Brain Injury Rehab Team, Teaching and Learning, Bloorview Research Institute, Organization Development and Learning, Children's Hospital of Eastern Ontario

**Client and family need:** Supporting youth with acquired brain injury accessing communities safely and independently is a challenge and goal area that links with their optimization of youth and family quality of life.

**Purpose:** To develop and pilot test a leading edge training program for the CMA-2, and assuming psychometric adequacy, support its transfer to clinical care and research internationally.

**Deliverables:** Create CMA-2 training program (SIM-based and e-WISE), training of the first group of 8 external pediatric OTs/PTs, new knowledge on SIM teaching, formal partnership with CHEO for future research

**Funding:** \$20,000

**No Boundaries Empowering Impact:** Co-create with children, youth, families and alumni, Mobilize people and teams