The University of Western Ontario
School of Health Studies

Health Sciences 4490A
Health Innovation and Leadership

September 2014

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Schedule

Tuesday- 6:00-9:00 pm (Sept. 9 - Dec. 2, 2014)

Prerequisite Checking

Unless you have either the requisites for this course or written special permission from your Dean to enroll in it, you may be removed from this course and it will be deleted from your record. This decision may not be appealed. You will receive no adjustment to your fees in the event that you are dropped from a course for failing to have the necessary prerequisites.

Antirequisite(s): HS 4090A Section 002 if taken in 2012 or 2013

Pre/Corequisite(s): Health Sciences 3400 A/B or 3042 A/B

For additional information regarding Antirequiste(s), Corequisite(s) and/or Prerequisite(s) please refer to the current Western Academic Calendar at www.westerncalendar.uwo.ca.

Course Overview & Objectives

This introductory course is designed to provide students with a broad understanding of leadership and innovation strategies within the health care system in Canada. The course will also provide students with "hands on" experience/exposure to health system issues through guest speakers, debates, assignments and demonstration projects. Upon completion of the course, students will be able to:

- Describe health system structure and organization including governance, organization of health services, and strategic management;
- Describe leadership concepts associated with the structure and function of the Canadian health care system;
- Describe leadership skills, principles and leadership styles associated with health innovation;
- Identify quality of health care outcomes, and accountability structures for health care delivery from a global context;
- Understand innovation opportunities and challenges in health information systems, medical devices, and the pharmaceutical sector;
- Develop and implement a project plan for an identified health system innovation.

Course Website

https://owl.uwo.ca/portal

This course is supported by OWL. All course information will be made available there. Please monitor the announcements menu on the course website for any changes, cancellations or updates pertaining to lectures or readings.

Learning Perspective

Student learning is the shared responsibility of both students and the faculty. Every attempt will be made to make classes stimulating and motivating using active learning principles. Active student involvement is expected. Students are expected to come to class prepared and ready to participate, work collaboratively with, and contribute to the learning of their classmates. Comments, suggestions and constructive feedback are always welcome and appreciated.

Student Responsibilities

Students are expected to attend ALL classes as a portion of the final grade is attributable to in-class participation. It is the students' responsibility to complete the required readings and come to class prepared to discuss the content outlined. Responsibility for note-taking is that of students. If you are having any problems or difficulties with any aspect of the course, please contact the course instructor.

Learning Environment

Courtesy and respect for the learning environment is expected. Students are expected to arrive at lectures on time. It is expected that students will be considerate of their colleagues and the instructor. Students are reminded to keep any noise and disruption to an absolute minimum in class, and to use email and social media judiciously and not frivolously.

Course Materials

Required Text: Richard Barker (2011). 2030 The Future of Medicine: Avoiding a Medical Meltdown, Oxford University Press (UK). ISBN 978-0-19-960066-3

Weekly Class Schedule

Date (2014)	Topic	Notes
Week 1 - Sept. 9	Introduction- Innovation takes Leadership	
September 12		Add Course - Deadline
Week 2 - Sept. 16	Strengthening Future Global Health Systems: Lessons Learned	Group Project: Stakeholder Introductions
Week 3 - Sept. 23	The Structure of Canadian Health Systems and Funding Models	Guest Speaker: Sherri Preszcator
Week 4 - Sept. 30	The Politics of Policy and Innovation	In-Class Exercise: Case Study - Narcotics Use in Canada
Week 5 - Oct. 7	Measuring What Matters: Costs vs. Values	Due Date: Assignment 1 (25%) In-Class Exercise: Case Study – Hospital Pharmacy Services
October 13		Thanksgiving Holiday
Week 6 - Oct. 14	Leading Quality in Health Systems	Guest Speaker: Phil Hassen
Week 7 - Oct. 21	*"Follow the Money"*: Private vs. Publicly Funded Health Care	Group Project: Conference Call with Partner Organizations and Dr. Snowdon In-Class Exercise: Chaoulli/Day Case and Public-Private Provision of Health Care
Week 8 - Oct. 28	Presentation and Discussion of Project Updates	Due Date: Group Project Update (5%)
October 30-31		Fall Semester Reading Break
Week 9 - Nov. 4	Consumer Engagement: How Consumers are Influencing Health System Innovation	In-Class Exercise: Designing a Consumer-Focused Health Service Strategy for Youth Experiencing Mental Health Challenges
November 5		Course Drop Deadline without Academic Penalty
Week 10 - Nov. 11	*"It's All About Me"*: Personalization of Health Systems	Due Date: Assignment 2 (20%)
Week 11 - Nov. 18	Medical Devices: Leveraging Technology to Transform the Health Sector	
Week 12 - Nov. 25	Reverse Innovation: Opportunities for Canada, Presentation of Final Projects (Part 1)	Group Project: Presentations (Part 1)
Week 13 - Dec. 2	Presentation of Final Projects (Part 2)	Due Date: Final Project (35% + 5%) Group Project: Presentations (Part 2)

Detailed Weekly Class Schedule and Required Readings

Week 1- Sep. 9, 2014

Introduction and Course Overview, Innovation Takes Leadership

- Snowdon, A., Shell, J., Leitch, KK. Innovation Takes Leadership: Opportunities & Challenges for Canada's Health Care System. White Paper, Sept. 2010. Available at: http://sites.ivey.ca/healthinnovation/files/2010/09/White-Paper.pdf?file=2010/09/White-Paper.pdf

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Week 2 - Sep. 16, 2014

Strengthening Future Global Health Systems: Lessons Learned

Group Project: Stakeholder Introductions

- Snowdon A. Cohen J. Strengthening Health Systems Through Innovation: Lessons Learned. Ivey Publishing 2011. Available at: http://sites.ivey.ca/healthinnovation/files/2011/11/GlobalHealthSystemsWhitePaperFINAL.pdf
- Time for Transformative Change: A Review of the 2004 Health Accord, March 2012. Standing Committee on Social Affairs, Science and Technology. Honourable Kelvin K. Ogilvie, Chair. Available at: http://www.parl.gc.ca/content/sen/committee/411/soci/rep/rep07mar12-e.pdf (Note: please read the executive summary *only*)
- The Canadian Health Care Debate: A Survey and Assessment of Key Studies. The Conference Board of Canada, Report May 2012. Publication 12-305. Available at: http://www.conferenceboard.ca/e-library/abstract.aspx?did=4844 (If you do not wish to create an account with Conference Board of Canada, select "without creating an account")

Week 3 - Sep. 23, 2014

The Structure of Canadian Health Systems and Funding Models

Guest Speaker: Sherri Preszcator (Research Associate, International Centre for Health Innovation)

- Smith PC, Anell A, Busse R, Crivelli L, Healy J, Lindahl AK, Westert G, Kene T. Leadership and governance in seven developed health systems. Health Policy. 2012 Jun;106(1):37-49. Epub 2012 Jan 21. Available online through Western Libraries (lib.uwo.ca).

Week 4 - Sep. 30, 2014

The Politics of Policy and Innovation

In-Class Exercise: Case Study - Narcotics Use in Canada

- Snowdon A, Smith A, Bryson-Campbell M. Tackling Prescription Drug Abuse in Ontario [Case Study], 2014 [in press]. Available on Owl.
- Juurlink D. Canada slow to respond to prescription opioid crisis. Evidence Network 2014. Available at: http://umanitoba.ca/outreach/evidencenetwork/archives/19824

Background Readings:

- Mable AL, Marriott J. Canadian Primary Healthcare Policy: The Evolving Status of Reform. The Canadian Health Services Foundation, January 2012. Available at: http://www.cfhi-fcass.ca/sf-docs/default-source/commissioned-research-reports/MariottMable-Jan2012-E.pdf?sfvrsn=0
- Marchildon GP. Health Systems in Transition: Canada. Copenhagen, WHO Regional Office for Europe on behalf of the European Observatory on Health Systems and Policies, 2005. Available at: http://www.euro.who.int/__data/assets/pdf_file/0009/80568/E87954.pdf
- Public Health Agency of Canada. Crossing sectors – experiences in intersectorial action, public policy and health. 2007. Available at: http://www.phac-aspc.gc.ca/publicat/2007/cro-sec/index-eng.php
- From Innovation to Action. Health Care Innovation Working Group (HCIWG) of the Council of the Federation. 2012. Available at: http://www.councilofthefederation.ca/phocadownload/publications/health_innovation_report-e-web.pdf

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Week 5 – Oct. 7, 2014

Measuring What Matters: Cost vs. Value

Due Date: Assignment 1 (25%)

In-Class Exercise: Case Study – Hospital Pharmacy Services

- Snowdon A, Standing Rasmussen H. Riverside Hospital's Pharmacy Services [Case Study]. Ivey Publishing, 2012. Available on Owl.
- Snowdon A, Schnarr K, Hussein A, Alessi C. Measuring What Matters: The Cost vs. Values of Health Care. Ivey Publishing, November 2012. Available at: http://sites.ivey.ca/healthinnovation/files/2012/11/White-Paper-Measuring-What-Matters.pdf

Background Readings:

- Macfarlane F, Greenhalgh T, Humphrey C, Hughes J, Butler C, Pawson R. A new workforce in the making? A case study of strategic human resource management in a whole-system change effort in healthcare. J Health Organ Manag. 2011;25(1):55-72. Available online through Western Libraries (lib.uwo.ca).
- VanVactor, JD. Collaborative leadership model in the management of health care. Journal of Business Research, 2012, vol. 65, issue 4, pages 555-561. Available online through Western Libraries (lib.uwo.ca).
- Charbonnier-Voirin A, El Akremi A, Vandenberghe A. A Multilevel Model of Transformational Leadership and Adaptive Performance and the Moderating Role of Climate for Innovation. Group & Organization Management [1059-6011] 2010: 35(6). 699. Available online through Western Libraries (lib.uwo.ca).

Week 6 – Oct. 14, 2014

Leading Quality in Health Systems

Guest Speaker: Phil Hassen (Past President, International Society for Quality in Health Care)

- Schmit C, d'Hoore W, Lejeune C, Vas A. Predictors of successful organizational change: the alignment of goals, logics of action and leaders' roles to initiate clinical pathways. Intl J Care PathwMarch 2011 vol. 15 no. 1 4-14. Available online through Western Libraries (lib.uwo.ca).
- Veillard JH, Brown AD, Barış E, Permanand G, Klazinga NS. Health system stewardship of National Health Ministries in the WHO European region: concepts, functions and assessment framework. Health Policy. 2011 Dec;103(2-3):191-9. Epub 2011 Sep 29. Available online through Western Libraries (lib.uwo.ca).
- Booske BC, Athens JK, Kindig DA, Park H, Remington PL. Different Perspectives for Assigning Weights to Determinants of Health 6 (Univ. of Wisc. Population Health Inst., County Health Rankings Working Paper, 2010). Available at: http://uwphi.pophealth.wisc.edu/publications/other/different-perspectives-for-assigning-weights-to-determinants-of-health.pdf

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Week 7 - Oct. 21, 2014

"Follow the Money": Private vs. Publicly Funded Health Care

Group Project: Conference Call with Partner Organizations and Dr. Snowdon

In-Class Exercise: Chaoulli/Day Case and Public-Private Provision of Health Care

- Manitoba Centre for Health Policy. Backgrounder: The Chaoulli/Day Cases and Public-Private Provision of Health Care. 2014 (draft). Available on Owl.
- Supreme Court of Canada. Chaoulli v. Quebec. 2005. Available at: http://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2237/index.do

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Week 8 - Oct. 28, 2014

Presentation and Discussion of Project Updates

Due Date: Group Project Update (5%)

This class will require each team to present their progress on innovation projects, discuss challenges, and seek input from classmates.

Week 9 - Nov. 4, 2014

Consumer Engagement: An Opportunity to Lead Innovation? Health Information Technologies in Health Systems

In-Class Exercise: Designing a Consumer-Focused Health Service Strategy for Youth Experiencing Mental Health Challenges

- Snowdon A, Shell J, Leitch K. Transforming Canadian Health Care through Consumer Engagement: The Key to Quality and System Innovation. Ivey Publishing 2011. Available at: http://sites.ivey.ca/healthinnovation/files/2011/02/Consumer-Engagement-White-Paper-Final.pdf

- Purdy L, Keckley P. 2011 Survey of Health Care Consumers in Canada – Key Findings, Strategic Implications. Deloitte, 2011. Available at: http://www.deloitte.com/assets/Dcom-Canada/Local%20Assets/Documents/ca_en_ps_consumer_health_survey_081611.pdf
- Buntin MB, Burke MF, Hoaglin MC, Blumenthal D. The Benefits of Health Information Technology: A Review Of The Recent Literature Shows Predominantly Positive Results. Health Aff March 2011 30:3464-471. Available online through Western Libraries (lib.uwo.ca).
- Karsh B-T, Weinger MB, Abbott PA, Wears RL. Health information technology: fallacies and sober realities. J Am Med Inform Assoc 2010;17:617e623. Available online through Western Libraries (lib.uwo.ca).

Week 10 - Nov. 11, 2014

"*It's All About Me":* The Personalization of Health Systems

Due Date: Assignment 2 (20%)

- Snowdon A, Schnarr K, Alessi C. "It's All About Me": The Personalization of Health Systems. Ivey Publishing 2014. Available at: http://sites.ivey.ca/healthinnovation/files/2014/02/Its-All-About-Me-The-Personalization-of-Health-Systems.pdf

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Week 11 - Nov. 18, 2014

Medical Devices: Leveraging Technology to Transform the Health Sector

- Snowdon A, Zur R, Shell J. Transforming Canada into a Global Centre for Medical Device Innovation and Adoption. Ivey Publishing 2011. Available at: http://sites.ivey.ca/healthinnovation/files/2011/06/ICHIL_Medical_Devices_White_Paper_FINAL2.pdf
- Book: Richard Barker (2011). 2030 The Future of Medicine: Avoiding a Medical Meltdown, Oxford University Press (UK). ISBN 978-0-19-960066-3 (Please read and be ready to discuss)
- Ackerly DC, Valverde AM, Diener LW, Dossary KL, Schulman KA. Fueling Innovation In Medical Devices (And Beyond): Venture Capital In Health Care. Health Affairs, suppl 28(1-2) (2009): W68-W75. Available online through Western Libraries (lib.uwo.ca).
- Romanow R. Building on Values: The Future of Healthcare in Canada. Commission on the Future of Health Care in Canada. 2002. Available at: http://www.cbc.ca/healthcare/final_report.pdf

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Week 12 - Nov. 25, 2014

Reverse Innovation: Opportunities for Canada

Presentation of Final Projects (part 1)

Week 13 - Dec. 2, 2014

Presentation of Final Projects (part 2)

Due Date: Final Project (35% + 5%)

Evaluation

	Percentage of Final Grade	Due Date
In-Class Participation	10%	N/A
Assignment #1: Bright Ideas Health Blog	25%	Oct. 7, 2014*
Assignment #2: Reverse Innovation Analysis	20%	Nov. 11, 2014*
Final Innovation Project	45% (5% Mid-Semester Presentation + 5% Final Presentation + 35% Written Submission)	Mid-Semester Presentations: Oct. 28, 2014 Final Presentations: Nov. 25 & Dec. 2, 2014 Written Submission: Dec. 2, 2014*

*Please bring a printed copy of your assignment to be collected at the start of class (i.e. 6:00 pm). All assignments must also be submitted through the OWL course site and Turnitin.

In-Class Participation (10%)

Students will be expected to prepare for class by doing the readings in advance and then participate constructively to classroom discussion; attendance will be taken. Marks will be awarded to individuals who positively contribute to and enhance classroom discussions.

Assignment #1: "Bright Ideas Health Blog" (25%)

Social media is increasingly playing a role in informing consumers about health systems and innovations for healthcare. According to a report posted by Statistics Canada ("Individual Internet use and E-Commerce, 2010"), 64% of Canadian internet users search for medical or health-related information. Social media is also an important tool for engaging a wide audience in dialogue on health innovation, to share ideas, explore solutions, and debate issues to strengthen health systems. See NationalHealthWatch.ca for examples.

The objective of this assignment is to engage students in creating the dialogue for health innovation and leading the debate on specific solutions or ideas for health system innovation.

Students will complete the following:

1. Identify a specific health system challenge or issue that is important in leading the dialogue on health system innovation. When choosing an issue to write about, try to find a subject that has not been written about or try to provide a new perspective on an old theme.

2. Research the issue to understand the current state of the science or thinking related to the selected health issue. Examine the evidence describing the magnitude, prevalence or impact of the health system issue.

3. In 800 words, write a blog on the topic. Take a position (propose a solution or innovation to address the challenge) on the issue, use evidence to justify your position, and then offer recommendations for solutions to address the selected health system challenge. Be clear in identifying the link to recent research or media coverage of the topic, maintain a conversational style and use specific examples. Consider counter arguments.

Students who achieve a grade of 85% or higher may have the opportunity to have their blog published on National Health Watch. Several students have published blogs which have been highly successful in gaining attention.

Grading Scheme:

i. Health system issue selected is relevant to Canadian health system context and is clearly described; position taken by the author is stated clearly and effectively. (5 marks)

ii. Health system issue selected is well referenced or supported by empirical evidence, and linked to current evidence and/or media coverage of the selected topic. (5 marks)

iii. Focus of recommendations or solution is creative, innovative and clearly stated. (5 marks)

iv. Writing style clear, conversational, inspires thinking, creativity and encourages dialogue. (5 marks)

Total length: Maximum 800 words.

Submit the assignment in hard copy in class and electronically though the OWL course site and Turnitin.

Assignment 1 Due Date: Oct. 7, 2014 – 6:00pm

Assignment #2: Reverse Innovation Analysis (20%)

In order to drive innovation in health systems from both a national and global perspective, we need to start by learning about the types of innovations in other countries. It is important that we identify how these innovations have achieved impact and success, and how leadership plays an important role in innovation outcomes. Reverse innovations have the potential to significantly improve on our ability to deliver high quality care at an affordable price. The idea of "doing more with less" is a concept that is affluently practiced in under developed nations and makes it possible to deliver effective patient care even in the most remote and underprivileged corners of the world. For example, the popular sports drink, Gatorade, was originally created to replenish electrolytes for patients suffering from malaria in Africa; now it's used widely for everything from nutritional supplements for professional sports teams to showering coaches and players alike after major sports victories!

For this assignment, identify a Canadian health system issue or challenge and then identify one or more innovative solutions from an emerging or developing country from around the world that could be implemented to address the issue or challenge. For example, a recent Reverse Innovation Challenge competition in Canada awarded a student team from Toronto for implementing a simple device used to screen for changes in vision in India. The device is now being tested as a way to screen people in Canada to identify risk for loss of vision due to diabetes.

Write an analysis on how the proposed "reverse innovation" (from an emerging market and/or developing country) could be a solution for a Canadian health system challenge. Describe how this innovation could be implemented within Canadian health systems to achieve value, and describe how you would measure the success of the reverse innovation to evaluate its impact – consider how you measure impact for consumers/patients, impact for health professionals, and impact for health system.

To complete this assignment, students will complete the following:

1. Select a general area of health innovation of interest to you and justify your choice (e.g. community-based care, children's health, and emergency department wait times) as to why this is an important opportunity for health innovation. (5 marks)

2. Conduct a global search for innovative approaches to achieving health system innovation within the selected area of interest (reference all websites identifying the innovation selected). Consider that to address any particular health system problem there are several different types of innovations (e.g. product, process, system redesign or policy) that can be leveraged as potential solutions. Also consider and identify where on the continuum of care the innovation has impact (e.g. health and wellness, primary care, community care, long-term care, mental health, palliative and/or chronic care etc.).

3. Select the most impressive reverse innovations you can find, from an emerging market and/or developing country. Identify the organizations leading the innovation, and how the innovation impact was measured or evaluated. (5 marks)

4. Analyze the innovation selected and identify the following: (10 marks)

    I. What has innovation achieved and how these achievements could inform Canadian health systems?

    II. What are the lessons Canada can learn from these innovations and how could they be applied to Canadian health systems? What value would/could they achieve?

    III. What leadership strategies (policy, health professionals, system leaders) might be required to successfully adopt the innovation in Canada?

5. Provide recommendations for how Canadian health systems can learn from this innovation, and strengthen the Canadian health system. (5 marks)

Total length: Maximum of 6 pages, double-spaced, 12 font

Submit the assignment in hard copy in class and electronically though the OWL course site and Turnitin.

Assignment 2 Due Date: Nov. 11, 2014 – 6:00pm

Final Innovation Project (45% = 5% Mid-Semester Presentation + 5% Final Presentation+ 35% Written Submission)

This is a group project that will partner student groups with a local health care agency and will work on a project specifically designed by the agency for the student team. Each group will be expected to work closely with the health agency, and may be required to spend time on-sight at the agency to interact with staff, assess and evaluate the structure of the agency, examine the mission and vision of the agency relative to the health services they deliver.

Students bring a unique perspective to health care systems, and this project is an opportunity to bring innovative ideas and creativity to the challenges of health care delivery. Marks will be allocated for innovation and creativity for the project overall conducted in the health agency.

The project guidelines and criteria for evaluation for the project are as follows:

a) Project objectives are clearly described. Scope of the project is defined, what will be achieved, what deliverables will arise as outcomes and what timelines each objective and deliverable will be achieved. (15 marks)

b) Project outcomes and deliverables are clearly described as well as strategies for evaluating the project outcomes and deliverables. Recommendations for implementation of the project outcomes for the agency are clearly communicated, including leadership strategies and communication plan. (20 marks)

c) Success of the project is defined in terms of the indicators used to measure quality of the project. The measures of success include operational outcomes that are measurable and link directly to the project objectives. (15 marks)

d) Communication with the agency staff and lead facilitator is described (schedule of visits, interactions, outcomes are clearly described). Project leadership is described and role of each group member is described including the deliverables for each student on the team. Communication of project processes, outcomes, and deliverables to agency staff is clearly stated. (15 marks)

e) Project is innovative and creative. Health care system projects will be awarded 20 marks for creativity and innovation by the agency representative. These marks will be awarded for enthusiasm, the uniqueness of what the student team brings to the project and the agency, the novel ideas and innovation evident in the project outcomes. (20 marks)

f) Project organization will be awarded 5 marks based on clarity of presentation, organization of project, and engagement of team with the partner organization (5 marks).

g) Final project presentation is clear, involves all students on the project team, presentation uses visual aids, student presenters engage the audience in the presentation and the discussion to generate interest and appeal to the audience. (10 marks).

Students bring a unique perspective to health care systems, and this project is an opportunity to bring innovative ideas and creativity to the challenges of health care delivery. Marks will be allocated for innovation and creativity for the project overall conducted in the health agency.

Submit the assignment in hard copy in class and electronically though the OWL course site and Turnitin.

Group Project Due Date: Mid-Semester Presentation: Oct. 28, 2014 – 6:00pm
Final Presentation: Nov. Dec. 2, 2014 – 6:00pm
Final Written Submission: Dec. 2, 2014 – 6:00pm

Late Assignments/ Attendance

Because class participation is a component of the final grade, class attendance is expected and will be recorded. Attendance is not the sole measure in which class participation will be measured. The content and insight shared in class dialogue will also be a contributing factor to the final mark. If you are unable to attend a lecture please notify the Teaching Assistant (Alex Smith – asmith@ivey.ca) via email prior to the start of class.

Late written submissions for assignments will be penalized **10% for each part or full day** past the due date (including weekends) except where there are valid extenuating circumstances. Students who wish to request an extension for assignments must do so through the Academic counselling office at the Faculty of Health Sciences, and must have a valid medical or non-medical justification in accordance with the University's policy on Accommodation for Medical Illness or Non-Medical Absences (below).

Assignments will be **accepted up until 7 days after the posted due date**. Assignments that are submitted after this time will receive a grade of **zero**. Further details of the process required for seeking accommodation for late assignments can be found in the section 'Accommodation for Medical Illness or Non-Medical Absences' below**.**

Please note that, whenever possible, students who require academic accommodation should provide notification and documentation ***in advance*** of due dates, examinations, etc. Students must follow up with their professors and their Academic Counselling office in a timely manner. The student shall submit documentation for any request for accommodation as soon as possible, to the appropriate Academic Counselling Office of the student's Faculty of registration. For BHSc students, you may go to the School of Health Studies Office in HSB room 222. It will be the Dean's office that will make the determination whether accommodation is warranted. Given the University's Official Student Record Information Privacy Policy, instructors may not collect medical documentation. Should accommodation be denied, the student may appeal to the Academic Counselling Office of their Faculty for consideration.

Statement on Use of Electronic Devices

Laptops are permitted in the classroom for course-related use only (e.g. note-taking, Owl, viewing PPT, etc.). It is asked as a courtesy to both the instructor and your peers that you limit your use of social media and that you turn all electronic devices, such as cellular phones and pagers, to silent during class, as they can be an unwanted classroom distractions.

Further, unauthorised webcam, video, photographic or voice recordings of the instructor, teaching assistants or guest speakers is strictly prohibited. Discovery of such occurrences may

lead to dismissal from the class or course and confiscation of the cellular phone, pager, video, webcam, laptop, photographic or voice recording equipment.

Additional Statements

Student Code of Conduct

The purpose of the Code of Student Conduct is to define the general standard of conduct expected of students registered at The University of Western Ontario, provide examples of behaviour that constitutes a breach of this standard of conduct, provide examples of sanctions that may be imposed, and set out the disciplinary procedures that the University will follow. For more information, visit http://www.uwo.ca/univsec/board/code.pdf.

English Proficiency for the Assignment of Grades

Visit the website http://www.uwo.ca/univsec/handbook/exam/english.pdf.

Accommodation for Medical Illness or Non-Medical Absences

http://www.uwo.ca/univsec/pdf/academic_policies/appeals/accommodation_medical.pdf
The University recognizes that a student's ability to meet his/her academic responsibilities may, on occasion, be impaired by medical illness. Illness may be acute (short term), or it may be chronic (long term), or chronic with acute episodes. The University further recognizes that medical situations are deeply personal and respects the need for privacy and confidentiality in these matters. However, in order to ensure fairness and consistency for all students, academic accommodation for work representing 10% or more of the student's overall grade in the course shall be granted only in those cases where there is documentation indicating that the student was seriously affected by illness and could not reasonably be expected to meet his/her academic responsibilities.

A UWO Student Medical Certificate (SMC) is required where a student is seeking academic accommodation. This documentation should be obtained at the time of the initial consultation with the physician or walk-in clinic. An SMC can be downloaded under the Medical Documentation heading of the following website:
https://studentservices.uwo.ca/secure/index.cfm.

Documentation is required for non-medical absences where the course work missed is more than 10% of the overall grade. Students may contact their Faculty Academic Counselling Office for what documentation is needed.

Whenever possible, students who require academic accommodation should provide notification and documentation in advance of due dates, examinations, etc. Students must follow up with

their professors and their Academic Counselling office in a timely manner. Documentation for any request for accommodation shall be submitted, as soon as possible, to the appropriate Academic Counselling Office of the student's Faculty of registration. For BHSc students, you may go to the School of Health Studies Office in HSB room 222.

Scholastic Offences

Scholastic offences are taken seriously and students are directed to read the appropriate policy, specifically, the definition of what constitutes a Scholastic Offence, at the following website: http://www.uwo.ca/univsec/handbook/appeals/scholastic_discipline_undergrad.pdf .

Additionally,

1. All required papers may be subject to submission for textual similarity review to the commercial plagiarism detection software under license to the University for the detection of plagiarism. All papers submitted for such checking will be included as source documents in the reference database for the purpose of detecting plagiarism of papers subsequently submitted to the system. Use of the service is subject to the licensing agreement, currently between The University of Western Ontario and Turnitin.com (http://www.turnitin.com).
2. Computer-marked multiple-choice tests and/or exams may be subject to submission for similarity review by software that will check for unusual coincidences in answer patterns that may indicate cheating.

Support Services

There are various support services around campus and these include, but are not limited to:

1. Student Development Centre - http://www.sdc.uwo.ca/ssd/
2. Student Health - http://www.shs.uwo.ca/student/studenthealthservices.html
3. Registrar's Office - http://www.registrar.uwo.ca/
4. Ombudsperson Office - http://www.uwo.ca/ombuds/