

# Universal Lessons for Academic Health Science Centers— Recognizing the Value of Integration

*Author Commentary*

## CHAPTER ABSTRACT:

The concept of an academic health science center (AHSC) embraces a spectrum of relationships among universities, hospitals, and, increasingly, community-based healthcare sites. Defining common elements that drive successful performance, this chapter lays out the universal lessons for academic health centers to: facilitate integration and innovation; develop a seamless flow of knowledge among research, education, and healthcare systems; and acquire robust affiliation agreements between university and hospitals.

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In Canada, academic health science centers have emerged as multi-institutional partnerships between research-intensive universities, Faculties of Medicine, and regional quaternary and tertiary academic hospitals. One of the largest and most complex of these entities is the Toronto Academic Health Science Network (TAHSN), which encompasses the University of Toronto Health Science Faculties and 13 hospitals, along with 18 affiliations with community healthcare institutions in the Toronto area. Although we bring together distinct entities, we share the goals of providing world-class patient care, educating highly-skilled practitioners, and conducting state-of-the-art research. We have learned a great deal about self-evaluation, iterative change, and sharing lessons across institutions in the federated model.

An academic health science network focuses collaboratively on improving health. In this model, the University of Toronto provides very clear value. The University facilitates integration across and among the institution and network. Articulating this value has enabled us to build our partnerships, and it has also helped our faculty understand their role and the importance of the larger collective. Our faculty members, students, and trainees fill the academic affiliated hospital, and only the university is in the position to assist the understanding of what can be accomplished. In the larger collective, we seek to integrate education and research and to facilitate integrated care.

It's important for the academic leadership to understand the value they bring to the collective, as well as to the partnerships among the various institutions that create the academic health science network. It's not just about the centers anymore, as we're networking more broadly among the partners. TAHSN is one of the largest health science networks in North America. We are the only medical school serving the population of the greater Toronto area, where there is a population of six million people. Academic leaders must envision what can be accomplished through strategic collaboration, integrating themes that no one single institution in the network can accomplish alone. This does not mean surrendering your identity or compromising your strategic focus, but rather seeking the value that can be added through integration and partnership. We fulfill our social responsibility by preparing leaders in health, and we take that role very seriously.

Healthcare transformation will emerge out of academic health science centers and their networks. It's our responsibility to imagine the future because it won't come out of the government. We have to enable private and public sector partners to enable healthcare transformation. This can only occur by bringing evidence to bear on how we do our business. That evidence has to support new models of care that are truly better, faster, and more cost effective.