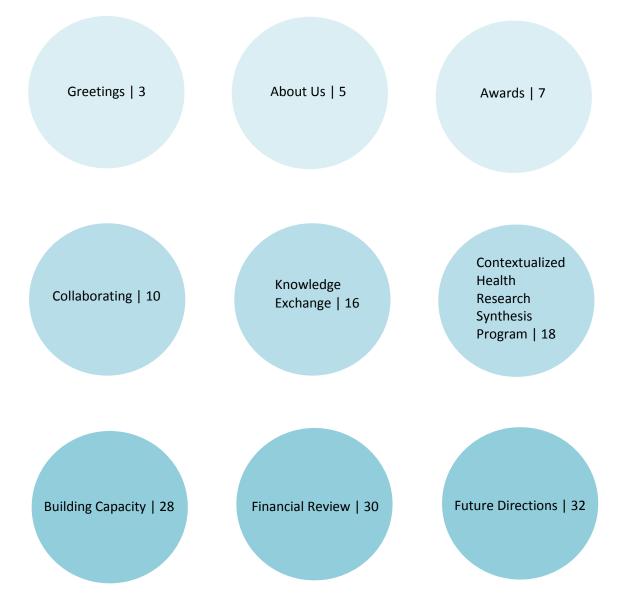
Newfoundland & Labrador Centre for APPLIED HEALTH RESEARCH www.nlcahr.mun.ca

2011-2012 annual report

2011-12





Greetings



Dr. James Rourke, Chair NLCAHR Board of Directors

From the Chair

The 12th year of operations for NLCAHR has certainly been productive. While the Board has been reviewing the Centre's accomplishments and considering its future, the Centre continues its role in addressing the province's priority health research needs. The annual NLCAHR Awards Program provided fellowships and grants to support important applied health research. The Newfoundland and Labrador Healthy Aging Research Program, administered through the Centre, also funded students and researchers working in an area of high priority for the province's healthcare system. Meanwhile, the Centre's Contextualized Health Research Synthesis Program continued its innovative efforts to provide research-based evidence that will assist the province's key health decision makers through a process of integrated knowledge translation. In addition, the many Research Exchange Groups organized through the Centre also encouraged collaboration and capacity building amongst health researchers throughout the province.

I wish to thank the employees of the Centre for their excellent work, to congratulate all the winners of fellowships and grants, and to thank the members of the Board for their diligent efforts.

From the Director

This year, while the Board of Directors continued its review of the Centre, NLCAHR focused on key pursuits: our Awards Programs, our capacity-building initiatives, and the Contextualized Health Research Synthesis Program (CHRSP). In managing its limited budget, the Centre has minimized conference hosting, travel and capacity-building expenditures while emphasizing its core activities.

Our Awards Programs, including the Healthy Aging Research Program that we manage on behalf of the provincial government, demand considerable staff resources; they also require important contributions from members of our stakeholder community. We appreciate the efforts of the academics and policy makers whose role in our peer review committees is essential to the fair and efficient allocation of funds under these programs.

Similarly, each study undertaken by our Contextualized Health Research Synthesis Program requires a substantial contribution of time and knowledge by local researchers and key health system decision makers as well as input and advice from a broader circle of health system officials and clinicians.

 I would like to express my sincere thanks to everyone who has helped make these programs a success during the 2011-2012 fiscal year.
 This year, 32 graduate students and 57 researchers applied to one or more of our awards competitions. I thank them for their interest in furthering applied health research knowledge in our province.
 I would also like to congratulate those applicants who received awards this year and to wish them all the best of luck in their studies and their research.



Dr. Stephen Bornstein, Director Newfoundland and Labrador Centre for Applied Health Research

About Us

Background

The Newfoundland and Labrador Centre for Applied Health Research was established in 1999 with initial core funding from the Department of Health and Community Services of Newfoundland and Labrador, Memorial University, and Eastern Health. NLCAHR is constituted as a Centre within Memorial University under the auspices of the Board of Regents and is led by a Director and a Board. The Centre is funded primarily through an annual grant from the Department of Health and Community Services of the Government of Newfoundland and Labrador. NLCAHR also receives project funding from various granting agencies and obtains financial and administrative support from the Faculty of Medicine at Memorial University.

NLCAHR has three principal goals:

Goals

- to help build human capacity and organizational resources to undertake and support high-quality applied health research in Newfoundland and Labrador;
- to increase the amount and impact of high-quality applied health research undertaken on priority research themes in the province; and
- to facilitate the more effective and efficient use of research evidence in the province's health and community services system.

These goals are achieved through our funding programs, collaborative activities, research and knowledge exchange activities (including the Contextualized Health Research Synthesis Program) and our capacity development activities.

Mission

NLCAHR's mission is to contribute to the effectiveness of the health and community services system of Newfoundland and Labrador and to the physical, social and psychological health and well-being of the province's population by supporting the development and use of applied health research in this province. NLCAHR works with an inclusive and flexible conception of the term 'applied health research' in a spirit of openness to the widest possible range of disciplinary and methodological approaches. It also seeks to collaborate fully with other local, provincial, regional and national organizations that have similar objectives.

Governance

The Centre's director, Dr. Stephen Bornstein, manages NLCAHR and reports to the Board of Directors. The NLCAHR Board of Directors is responsible for all key policy and strategic decisions. It approves the annual budget, endorses peer review committee recommendations, and determines the overall strategic direction of the Centre. The Board of Directors is chaired by the Dean of the Faculty of Medicine at Memorial University. Other board members include the Deputy Minister of the Department of Health and Community Services and representatives of the Newfoundland and Labrador Health Boards Association, Memorial University's Office of Research, the Newfoundland and Labrador Centre for Health Information, and Eastern Health. The Director sits on the Board ex officio.

Board

The following people served on the NLCAHR Board of Directors in 2011-2012: Dr. James Rourke (Chair) | Dean, Faculty of Medicine, Memorial University Mr. Bruce Cooper | Deputy Minister, Dept. of Health and Community Services Dr. Christopher Loomis | Vice-President (Research), Memorial University Mr. Mike Barron | CEO, NL Centre for Health Information Dr. Patricia Conrad | Executive Director, NL Health Boards Association Ms. Vickie Kaminski | President and CEO, Eastern Health Dr. Stephen Bornstein (ex officio) | Director, NLCAHR

Staff

Dr. Stephen Bornstein | Director Ms. Rochelle Baker | Communications and Partnerships Coordinator Ms. Janice Butler | CHRSP Program Coordinator Mr. Robert Kean | Research Assistant, CHRSP Ms. Amanda Kinsella | Administrative Staff Specialist Ms. Meagan MacKenzie | Research Assistant, CHRSP Mr. Pablo Navarro | Research Officer, CHRSP Ms. Jinelle Ramalackhansingh | Research Assistant, CHRSP Mr. Tyrone White | Finance Officer, Awards, Research Exchange Coordinator

After ten years of dedicated service, in August 2011, our Manager of Communication and Partnerships, Theresa MacKenzie, accepted a new position outside the Centre. We sincerely thank Theresa for her valuable contribution to the Centre and welcome Rochelle Baker as her replacement. We would also like to express gratitude to our GradSWEP students Christopher Duggan and Alison Greene, MUCEP students Braydi Rice and Angela Edwards, and ISWEP student Xiaoua Lan for contributing to our work at the Centre this year.

NLCAHR personnel in 2011-2012 were:

Awards

Funding Applied Health Research and Training

The Government of Newfoundland and Labrador has directed the Centre to support applied health research and graduate training in Newfoundland and Labrador, both directly, through the allocation of grants and fellowships, and indirectly, by helping attract and leverage funding from external granting agencies. The Centre's funding programs help build research capacity within the province while increasing the amount of high-quality applied health research undertaken on priority research themes.

NLCAHR administers a regular annual awards program as well as a special program that focuses on research into aging. The Centre's funding programs are aimed primarily at research initiated by investigators who reside in Newfoundland and Labrador.

NLCAHR would like to thank the volunteer peer review committees who contributed both their time and their valuable expertise in reviewing funding applications for both the regular NLCAHR Awards Program and competitions administered under the Newfoundland and Labrador Healthy Aging Research Program (NL-HARP) in 2011-2012.



The NLCAHR Annual Awards Program

The NLCAHR Awards Program offers Project Grants, Development Grants and Graduate Fellowships. For all awards (except Master's Fellowships) preference is given to applications with direct relevance to one or more of NLCAHR's priority themes. The following priority research themes were confirmed by the NLCAHR Board of Directors for 2011-2012:

- Population health and health services challenges of Newfoundland and Labrador,
- Health promotion and wellness,
- Efficiency and effectiveness of the provincial health system.

NLCAHR Development Grants

NLCAHR's Development Grants provide up to \$10,000 per project to assist in creating effective research teams in Newfoundland and Labrador that are capable of obtaining funding from national and international research granting agencies. These grants are intended to fund the development of new letters of intent and research proposals and/or to support the enhancement and re-submission of existing research proposals to external funding agencies. NLCAHR received a total of seven applications for the 2011-2012 competition of which two applications were funded.

NLCAHR Project Grants

NLCAHR awards project grants of up to \$40,000 which are designed to support small research projects of high scientific quality that may not be eligible for funding from external sources and that are of direct relevance to the mandate and priorities of the Centre. In this category, out of twelve applications received, NLCAHR awarded project grants to two applications in 2011-2012.

NLCAHR Fellowships

As part of the Centre's mandate to support the training and development of new health researchers in the province, the Fellowships Program is designed to facilitate applied health research through awards to students and post-doctoral fellows studying in Newfoundland and Labrador. Fellowships are typically awarded in three categories: Master's Fellowships, Doctoral Fellowships, and Post-Doctoral Fellowships. This year, however, only Master's and Doctoral Fellowships were available.

Competition was once again strong in the fellowship category. NLCAHR received twenty-one applications from graduate students, three of which were successful in securing funding. \$56,000 was awarded this cycle. In addition to new funding, \$20,000 was awarded for the second year of a three-year Doctoral Fellowship.

Development Grants 2011-2012

Dr. Wendy Young, School of Nursing \$10,000

Entertainment education for adults with type 2 diabetes and uncontrolled high blood pressure

Dr. Linda Rohr, Human Kinetics \$9,214 *Physiological and socio-psychological effects of exergaming*

Project Grants 2011-2012

Dr. Victor Maddelena, Community Health and Humanities

\$40,000

Palliative care needs of people with end-stage renal disease in Newfoundland and Labrador

Dr. Laurie Twells, Pharmacy

\$40,000 The Newfoundland and Labrador bariatric surgery cohort study

Fellowships 2011-2012

Justin Oake, Master's Fellowship Clinical Epidemiology \$18,000/year for up to two years Dyslipidemia and lipid profile in Newfoundland: comparison between laboratory data and electronic medical records

Yun Zhu, Master's Fellowship

Community Health and Humanities \$18,000/year for up to two years Investigating the effects of red/ pickled meat intake and dietary nitrites/nitrate /nitroso-dimethylamine on CRC risk in the NL adult population

Jennifer Woodrow, Doctoral Fellowship Community Health and Humanities \$20,000 / year for up to three years The aging population and its health impact in Newfoundland and Labrador: long-term projections and statistical simulations for selected chronic health conditions and disability

Pamela Button, Doctoral Fellowship 2010 \$20,000 for second year of three-year fellowship *Dysfunctional coping mechanisms in health professional students dealing with stress.*

NL-HARP Awards 2011

Dr. Jacqueline Hesson, Education

NL-HARP Project Grant of \$39,804 Cytomegalovirus immune risk phenotype and cognitive functioning in the oldest old

Dr. Jeannette Byrne, Human Kinetics and Recreation NL-HARP Project Grant of \$16,620

Fall prevention in seniors in the greater St. John's area: a qualitative and quantitative examination of a fall prevention program

Dr. Guangju Zhai, Genetics, Faculty of Medicine

NL-HARP Project Grant of \$40,000 Metabolomics of aging – identification of metabolic biomarkers of aging

Dr. Peter Wang, Community Health & Humanities, Faculty of Medicine

NL-HARP Seed Grant of \$20,000 Assessing dietary Intake and adequacy of elderly residents of Newfoundland- a pilot study

Ms. Roberta Didonato, Psychology, Faculty of Science

NL-HARP Doctoral Dissertation Award of \$30,000/year for two years How age-related hearing loss impacts memory for medical adherence in the older adult

Ms. Elizabeth Wallack, Community Health & Humanities, Faculty of Medicine

NL-HARP Master's Research Grant of \$5,000 The impact of a Skype-delivered dementia caregiver intervention on caregiver burden

Ms. Lin Liu, Community Health & Humanities, Faculty of Medicine

NL-HARP Master's Research Grant of \$5,000 Dietary intake and eating patterns of elderly people in Newfoundland and Labrador

Funding Healthy Aging Research in Newfoundland and Labrador

The Centre congratulates this year's successful applicants for funding under the Newfoundland and Labrador Healthy Aging Research Program (NL-HARP). NL-HARP facilitates focused research on aging and seniors in Newfoundland and Labrador. Originally designed as a three-year funding opportunity, the Program has now been renewed into its fifth year. This year, the province granted funding of approximately \$186,000 to support seven successful applicants under the program.

NL-HARP was established to address the priority directions of Newfoundland and Labrador's Provincial Healthy Aging Policy Framework. These priority directions include: recognition of older persons, celebrating diversity, supportive communities, financial well-being, health and well-being, employment, education, and research.

In announcing this year's awards, the Honourable Susan Sullivan, Minister of Health and Community Services and Minister Responsible for Aging and Seniors, noted, "As the population ages, there is a greater need for education and research on potential impacts on society. The research projects funded this year focus on a variety of issues including hearing loss, fall prevention, and seniors' nutrition. The findings will help inform the development of effective policies and contribute to the health of our aging population."

In the past four years, the Centre has administered approximately \$730,000 in funding through the Newfoundland and Labrador Healthy Aging Research Program. Recipients of this year's awards qualified for funding in four categories: Project Grant, Seed Grant, Doctoral Dissertation Award, and Master's Research Grant.

NL-HARP Steering Committee 2011-2012:

Alice Kennedy, Eastern Health; Evan Simpson, Memorial University; Stephen Bornstein, NLCAHR; Henry Kieley, Government NL; Kelli O'Brien, Western Health; Sharon Buehler, Memorial University; Suzanne Brake, Government NL.

Collaborating

NLCAHR continues to collaborate on a wide variety of applied health research initiatives. These collaborative activities are described below:

Atlantic Regional Training Centre: Theresa MacKenzie and Janice Butler made a special presentation at the Atlantic Regional Training Centre's annual workshop to communicate the value of the Contextualized Health Research Synthesis Program, to encourage students to use high-level research evidence, and to build an understanding about the importance of context in understanding research evidence.

Deliberative Processes: In October 2011, the Centre collaborated with national and local research experts and policy makers for "Who Decides and How?" an invitational workshop on public engagement in decision making for high-cost pharmaceuticals. CIHR funded this event, which brought together senior decision makers in the provincial healthcare system with leading researchers in deliberative processes for a review of public engagement models that might benefit the province. The Centre also hosted a CIHR Café Scientifique during which the general public was invited to discuss ways we might increase citizen involvement in health policy decisions. **Provincial Centre for Aging:** In 2011- 2012, NLCAHR began collaborating with researchers at Memorial's Faculty of Medicine in St. John's and at Grenfell Campus in Corner Brook towards the organization of a conference to examine the possible establishment of a new provincial Centre for Aging that would be situated in Corner Brook, Newfoundland. This initiative stems from a study that was funded by NLCAHR through an NL-HARP Seed Grant to Memorial's Dr. Leslie Cake in 2010. The conference is scheduled to take place in Fall 2012 in Corner Brook.

Community-University Engagement: The Centre's Director is involved in two programs involving the

engagement of Memorial University 's re-

Collaborating with researchers searchers with the local community. The first is the Advisory Committee working with the Office of Engagement to develop Memorial's new engagement strategy. The second is a multi- university team chaired by Associate Vice-President Doreen Neville on 'community engaged scholarship.' The

Centre is also involved at the committee level for planning CUExpo 2013, a conference devoted to university- community engagement.

Collaborative Research: The Centre's Director is currently collaborating with fellow researchers on several team projects: he is a co-investigator in *'Kungatsiajuk': Supporting the Healthy Smiles of NunatuKavut Children*, an Atlantic Health Promotion Research Centre study in Labrador that will make a unique contribution to our understanding of the oral health of aboriginal children; a CIHR-funded study *Increasing Capacity for Oral Health*; an interdisciplinary study by Memorial's School of Nursing: *Working Late: Strategies to Enhance Productive and Healthy Environments for the Older Workforce*; the International Methods Network project, *Sustaining IT Use By Older People to Promote Autonomy and Independence (Sus-IT)*; *The Health Effects of Asbestos*, funded through the Research and Development Corporation Industrial Research and Innovation Fund; and a WorkSafe BC study, *Tracking Occupational Diseases: an analysis of approaches for the Canadian context*. Dr. Bornstein is also a co-investigator on the successful SSHRC Partnership Research Project: *On the Move: Employment-Related Geographical Mobility in the Canadian Context*.

The Canadian Association on Gerontology In October 2011, Robert Kean of NLCAHR was invited to make a presentation to the 40th Annual Scientific and Educational Meeting of the Canadian Association on Gerontology in Ottawa. Mr. Kean provided an overview of the Contextualized Health Research Synthesis Program (CHRSP) and current research projects that focus on issues of aging and seniors. At the conference, he also collaborated with fellow researchers about issues of relevance to a current CHRSP project that examines how we can develop more age-friendly acute care services in Newfoundland and Labrador.

Evidenceinformed Healthcare Renewal In October 2011, the Canadian Institutes for Health Research asked Stephen Bornstein to participate in a national roundtable discussion about the future of Canada's healthcare system. In particular, this forum examined how research evidence might be used to help inform what was then foreseen as the re-negotiation of the 2004 health accords in Canada. One direct spin-off of the roundtable has been the creation of a special web portal located on the McMaster University server that will contain a selection of carefully selected, scientifically reliable articles that can provide evidence to help provincial and federal policy makers in their discussions of the issues around the renewal of our healthcare system.

Studying Rural Health

Rural health research is a key component of the Centre's mandate; as such, NLCAHR addresses rural health issues in a variety of ways. As in previous years, we host a Research Exchange Group that is devoted exclusively to rural health. The Centre is also a strong supporter of the Canadian Rural Health Research Society (CRHRS). The Director continued his role as a member of the Executive of the CRHRS in 2011-2012. The Centre also collaborates regularly with the Government of Newfoundland and Labrador's Rural Secretariat to explore research initiatives of mutual interest, as well as discussing potential funding and partnering opportunities between our organizations.

National Networks of Health Funders The Centre remains an active member of two national networks that bring together organizations that fund health research across the country. The first is the National Alliance of Provincial Health Research Organizations (NAPHRO) which links nine provincial health research funding agencies. The second is the National Health Funders' Forum, which includes all the members of NAPHRO plus the key national-level health funding agencies (CIHR and CHSRF) and the country's largest health charities.

NAPHRO Impact Assessment Group Pablo Navarro sits on the NAPHRO Impact Assessment Group. This group includes representatives from each of the provincial health research funding organizations and CIHR and has been developing and implementing tools that assess the bibliometric and econometric impacts of provincial health research funding. These tools are intended to inform decision makers and research communities about the returns on research funding investments at the academic level and in terms of benefits for Canadian society at large.

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In 2011, Stephen Bornstein completed his second term as chair of the Network of Centre Directors in Health Services and Policy Research. He now serves as co-chair of this group. The Centre Directors' Network brings together the leaders of twelve research centres from across Canada that specialize in health services and policy issues. This group meets six times a year (in person or by teleconference) to discuss common challenges and opportunities and to undertake collaborative projects. Funding for the Network is provided by grants from the Institute of Health Services and Policy Research of CIHR and from the Canadian Health Services Research Foundation.

The Centre has developed a productive partnership with the Canadian Agency for Drugs and Technologies in Health (CADTH), both at the local level, through consultation with CADTH's Provincial Liaison Officer and nationally, through participation of NLCAHR staff in CADTH's annual conferences. In addition, NLCAHR is a member of the National Health Technology Assessment Synthesis Exchange, a CADTH- sponsored group of sixteen research units involved in the production and use of health technology assessments. Stephen Bornstein was elected chair of the Exchange in February 2010 and served for a two-year term.

The Director is in his second term as a member of the Science Advisory Board to Health Canada and the Public Health Agency of Canada. This body meets regularly to provide advice to the Deputy Minister of Health Canada and the Chief Public Health Officer of the Public Health Agency of Canada on the relevance and quality of their organizations' internal scientific activities and on the science involved in the specific issues being confronted by the two organizations.

The Centre continues to participate in Eastern Health's Evidence-Informed Practice Council. The EIPC is a committee established to support and encourage the development, implementation and evaluation of evidence-informed practice at Eastern Health. It brings together clinical and administrative committees from within Eastern Health to foster research initiatives, knowledge translation and uptake, as well as to develop a working model for EIP within the organization. In September, 2011, the Centre's CHRSP Program Coordinator, Janice Butler, made formal presentation to the group's Clinical Issues Committee about our CHRSP methodology and research results.

As it has in previous years, NLCAHR has worked with the Leslie Harris Centre for Regional Policy and Development in various capacities, including Stephen Bornstein's involvement with the Steering Committee for the Harris Centre's 'Yaffle' research registry. This year, the Centre was also involved with a *Memorial Presents* public forum on how the media presents mental health. At the event, we publicized the creation of NLCAHR's new Mental Health Research Exchange Group. Networking: Other Applied Health Research Centres

> CADTH Partnerships

Advising Health Canada / Public Health Agency of Canada

> Promoting Evidenceinformed Practice

Working with the Harris Centre

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Partnering with the Provincial Wellness Advisory Council The Provincial Wellness Advisory Council (PWAC) includes members from a range of government departments, professional associations and community groups. PWAC provides recommendations for implementing the Provincial Wellness Plan to the Minister of Health and Community Services and consults with provincial groups involved in wellness. PWAC also seeks to create and strengthen opportunities for partnerships that support wellness in the province. PWAC invited NLCAHR to participate in Council meetings and to explore opportunities for further collaboration through CHRSP and other NLCAHR programs. This year, the Centre collaborated with PWAC and others in the organization of a provincial conference, "Building Healthy Communities: Bringing Health and Wellness to the Community Planning Table." (More details on Page 17)

Developing a provincial plan for healthy child and adolescent body weights

Increasing Oral Health Capacity in Atlantic Canada

Helping develop our province's plan for vision health The Obesity Expert Advisory Committee was established by the provincial Department of Health and Community Services. The Committee was formed to bring together a broad range of research experts on child and adolescent obesity to help inform the Department on policy development and program design. Pablo Navarro represented NLCAHR on this Committee to share research insights from a CHRSP project on the same topic.

'Increasing Capacity for Oral Health' (ICOH) is a research project funded by the Canadian Institutes of Health Research. ICOH is intended to inform policy in Atlantic Canada pertaining to the oral health of vulnerable populations. It is one of four pilot projects funded by a Seed Grant for research on disparities in oral health that was awarded by CIHR's Institute of Musculoskeletal Health and Arthritis. The project is a collaboration of clinician-researchers at Dalhousie University, researchers at Memorial University (led by NLCAHR), and a diverse group of stakeholders in Newfoundland and Labrador who share an interest in developing necessary links between the assessment of oral health needs and the delivery of services. This research aims to develop methods for evaluating, measuring and monitoring the oral health status of vulnerable populations in Atlantic Canada, beginning with seniors. The research can then be applied to inform policy directed towards improving their oral health. The project has generated a number of concrete projects for enhancing oral health policy and practice in Newfoundland and Labrador, including a proposed evaluation of the province's new *Adult Dental Health Plan*, an enhanced dental insurance program for low-income adults.

The Newfoundland and Labrador Division of the Canadian National Institute for the Blind has completed its work towards the development of a Vision Health Plan for the province which has been presented to the Department of Health and Community Services. The CNIB Provincial Vision Health & Rehabilitation Steering Committee is both an advisory and a working group. NLCAHR participates in an advisory capacity.

Meetings and Conferences

Representatives from the Centre attended a number of lectures, meetings, conferences and symposia in 2011-2012 as the following calendar demonstrates:

Event	Date/Location	NLCAHR Participant(s)	
CADTH Symposium 2012	April 15-16 2012 Ottawa	Pablo Navarro: poster and presentation Stephen Bornstein: participant	
CADTH Exchange Meeting	April 14 2012 Ottawa	Stephen Bornstein	
Memorial University Faculty of Medicine, Master's of Public Health Program	February 23 2012 St. John's	Pablo Navarro, guest lecturer for class on addictions. Presented process and outcomes of the CHRSP Youth Residential Treatment report, NLCAHR research and funding	
CIHR Peer Review : Banting Selection Committee	February 6-7 2012 Ottawa	Stephen Bornstein	
Health Canada Science Advisory Board	February 1-2 Ottawa	Stephen Bornstein	
Canadian Mesothelioma Symposium sponsored by the BC Cancer Agency	January 28-29 2012 Vancouver	Stephen Bornstein, presenter	
PriFor 2011: The Primary Healthcare Partnership Forum	December 1-2 2011 St. John's	Stephen Bornstein	
Memorial University School of Nursing Margaret McLean Lecture: Knowledge Translation	November 30 2011 St. John's	Rochelle Baker	
Building Healthy Communities: Bringing Health and Wellness to the Community Planning Table	November 29-30 2011 St. John's	Pablo Navarro, Stephen Bornstein, Rochelle Baker	
National Association of Provincial Health Research Organizations (NAPHRO) Members' Meeting	November 15 2011 Ottawa	Stephen Bornstein	
Forum of Health Research Funders Meeting	November 14-15 2011 Ottawa	Stephen Bornstein	
Memorial Presents: <i>How the Media Deal with Mental Illness</i>	November 8 2011 St. John's	Stephen Bornstein	
National Centre Directors' Network Meeting	November 1 2011 Ottawa	Stephen Bornstein	

Meetings and Conferences ...continued

Event	Date/Location	NLCAHR Participant(s)	
<i>Catching the Jellyfish</i> : Extracting and Applying Lessons to Advance Youth Health	October 25-26, 2011 Toronto	Pablo Navarro	
40 th Annual Scientific and Educational Meeting of the Canadian Association on Gerontology	October 21-23 2011 Ottawa	Robert Kean	
CIHR's Evidence-Informed Healthcare Renewal Roundtable	October 11-17 2011 Ottawa	Stephen Bornstein	
Evidence-Informed Practice Council Meeting of Clinical Issues Committee	September 16 2011 St. John's	Janice Butler, presenter	
CADTH Board Retreat and Planning Meeting	September 18-22 2011 Ottawa	Stephen Bornstein	
2011 Canadian Association for Health Services and Policy Research (CAHSPR) Conference	May 9-12 2011 Halifax	Stephen Bornstein, Theresa MacKenzie, Janice Butler	
Forum of Health Research Funders Meeting	May 6 2011 Ottawa	Stephen Bornstein	
Health Canada Science Advisory Board	May 3-5 2011 Ottawa	Stephen Bornstein	
National Association of Provincial Health Research Organizations (NAPHRO) Members' Meeting	April 13-15 2011 Fredericton	Stephen Bornstein	
2011 Atlantic Regional Training Centre Spring Workshop	April 12 2011 St. John's	Theresa MacKenzie and Janice Butler	
2011 CADTH Symposium	April 3-5 2011 Vancouver	Stephen Bornstein, presenter and pre- conference workshop chair (Health Technology Assessment Analysis Exchange)	

Knowledge Exchange

Engaging the public in healthcare decisions In 2011, officials from Eastern Health asked NLCAHR to organize a workshop that would explore the latest research on deliberative processes and public engagement in healthcare decision making. In response, the Centre, along with officials from Eastern Health, the province's Department of Health and Community Services and faculty from Memorial University developed "Who Decides & How?" an event held in St. John's on October 19, 2011. This interactive workshop examined the issue of public engagement in decisions around funding for high-cost pharmaceuticals, and, more generally, participants explored models of citizen engagement from other jurisdictions to determine potential methods that might effectively generate wider public participation in Newfoundland and Labrador's healthcare system. When workshop organizers Stephen Bornstein and Roger Chafe obtained funding from CIHR for the event, the Centre was able to bring together experts from across Canada. At the workshop, research experts shared their findings with policy makers from across the province. To generate a more wide-ranging public discussion around citizen engagement, the Centre also hosted a CIHR Café Scientifique, during which a citizen's debate took place between our expert panelists and the community at large on the issue of public engagement in healthcare policy. Both of these events were wellattended and the Centre continues to collaborate with decision-makers on outcomes from the workshop.

> "Who Decides and How?" A CIHR Café Scientifique held October 18 2011 Rocket Bakery, St. John's

Building Healthy Communities

In 2011, NLCAHR helped organize a major provincial conference. "Building Healthy Communities: Bringing Health & Wellness to the Community Planning Table." This twoday conference, held in November 2011, was a joint effort of the Provincial Wellness Advisory Council, the Newfoundland & Labrador Public Health Association), and the Canadian Institute of Public Health Inspectors- Newfoundland & Labrador Chapter. These three organizations, with support from NLCAHR, the Department of Health and Community Services, and the Rural Secretariat, recruited partners from key stakeholder groups and successfully generated widespread community engagement in the two-day event. NLCAHR's CHRSP Research Officer, Pablo Navarro, was central in organizing what proved to be a highly successful, interactive forum for professionals and advocates from across a range of disciplines to exchange knowledge about how the province can build health and wellness into the very infrastructure of its communities. Delegates included community leaders, urban planners, engineers, transportation planners, community health workers, rural consultants, educators, architects and recreation managers. As a postscript, the conference's organizing committee has recently received funding from the Department of Health and Community Services to continue building on the many positive outcomes of the conference. As such, the Centre is currently contributing to plans for future projects and province-wide collaboration on how to build more supportive environments in Newfoundland and Labrador.



Sheraton Hotel, St. John's

Newsletter and Electronic **Bulletins**

NLCAHR distributes a guarterly newsletter to communicate health research of relevance to decision-makers and researchers in Newfoundland and Labrador. The Centre also distributes a monthly electronic bulletin to draw attention to special events, funding opportunities, and other items of interest to the research community. More than 700 people are now on the mailing list for these publications.

The Contextualized Health Research Synthesis Program

Overview

The Department of Health and Community Services and the Regional Health Authorities of Newfoundland and Labrador regularly seek research-based evidence to support their decision-making. To address this challenge, the Centre has developed the Contextualized Health Research Synthesis Program (CHRSP), a flagship activity of NLCAHR. We work with key decision makers in the provincial health system to provide them with evidence that is up-to-date, locally relevant, that is attuned to the characteristics of the province's population and to the capacities and limitations of its healthcare system.

CHRSP offers an innovative approach to knowledge transfer that is carried out in a timely manner making efficient use of limited human and financial resources. CHRSP works with decision-makers to identify high-priority researchable topics, and to build for each selected topic, a research team that refines the research question, synthesizes the evidence, and determines the implications for the local context.

OVERVIEW CONTINUED...

The reports generated by CHRSP permit health decision-makers to apply the evidence from synthesized systematic reviews while taking into account the capacities and challenges of the provincial health system.

CHRSP has been nationally recognized as offering an innovative approach for supporting evidence-informed decision making; from the outset, our CHRSP team adopts a collaborative approach with top-level health decision makers throughout Newfoundland and Labrador. These decision makers work in partnership with the CHRSP team and maintain involvement in all aspects of the research process, from the identification of issues of importance to the uptake and application of results, an approach that the Canadian Institutes for Health Research call 'integrated knowledge translation.'

Rather than conducting original research, our CHRSP research teams analyze the findings of high-level research (systematic reviews, metaanalyses and health technology assessments) that have already been completed on the issue in question.

In 2011, CHRSP was featured as an example of innovative knowledge translation in the Saskatchewan Population Health and Evaluation Research Unit's *"Innovations in Knowledge Translation: The SPHERU KT Casebook"* (June 2011, Juanita Bascu and Fleur Macqueen Smith, editors).

CHRSP is also innovative in the way it contextualizes research evidence, both in shaping the research question and in drawing conclusions from synthesized evidence to support local decision making. This contextual analysis includes assessment of the specific forms that the issue takes in Newfoundland and Labrador and examines the applicability of proposed solutions and methods to locally available physical and human resources, cultural conditions and financial capacities. CHRSP uses a combination of external experts and local networks to carry out and contextualize the research synthesis and to facilitate the uptake of results by research users.

CHRSP Champions

CHRSP Champions are senior members of health organizations who act as liaisons between the CHRSP team and its health system partners. Since 2009, these Champions have strengthened the linkages between CHRSP and provincial health organizations, playing a critical role in the annual iterative process for identifying high-priority research questions for CHRSP. The resulting 'pull' from the health system, combined with increased requests for evidence and knowledge exchange, elevates the value of the program for health decision makers and policy makers in Newfoundland and Labrador.

CHRSP Partners

CHRSP has partnered with the Canadian Agency for Drugs and Technologies in Health (CADTH) for two projects that will be completed in 2012: hyperbaric oxygen therapy for problem wounds and telehealth for patient-specialist consultations. In these projects, the Health Technology Information Services (HTIS) branch of CADTH has systematically reviewed the relevant research literature, synthesized the research evidence and their findings have been independently peer-reviewed. The results are then contextualized by a research team coordinated by CHRSP that includes decision makers, health service providers, administrators and other local experts.

CHRSP Champions 2011-2012			
Department of Health and Community Services			
Wanda Legge	Director, Policy Development		
Bev Griffiths	Director, Board Services		
Eleanor Swanson	Director, Health Promotion and Wellness		
Dr. Larry Alteen	Director, Physician Services, Medical		
	Services Branch		
Eastern Health			
Dr. Mike Doyle	Director of Research		
Janet Templeton	Program Director, Medicine		
Elaine Warren	Program Director, Surgery		
Krista Butt	Research Analyst		
Central Health			
Vanessa Mercer	Regional Director, Corporate Improvement		
Oldford			
Western Health			
Lisa Hoddinott	VP, Quality Management & Research		
Anne Lynch	Regional Director, Planning & Research		
Labrador-Grenfell Health			
Carol Brice-Bennett	Director, Aboriginal Health Programs &		
	Research		

CHRSP Projects in 2011-2012

Hyperbaric Oxygen Therapy for Difficult Wound Healing

In 2008, responsibility for the Hyperbaric Oxygen Treatment (HBOT) facilities was transferred from Memorial University's Centre for Offshore and Remote Medicine (MEDICOR) to the Eastern Health Regional Health Authority. The transfer of services reflects an on-going shift in the uses of HBOT from mainly an emergency treatment and research tool towards an adjunctive treatment for wound healing. Subsequently, Eastern Health partnered with the Contextualized Health Research Synthesis Program to investigate what the scientific literature tells us about the evidence for the clinical and cost effectiveness of adjunctive HBOT for a series of difficult wounds. In the context of this project, difficult wounds include diabetic foot ulcers, pressure ulcers, delayed radiation-induced injuries, thermal burns, skin grafts and flaps, and revascularization after organ transplantation. As noted above, CHRSP has partnered with the Canadian Agency for Drugs and Technology in Health (CADTH) to identify and synthesize the recent high-level research literature, including systematic reviews, meta-analyses and health technology assessments. The synthesis also includes any high quality primary research that had been conducted recently enough so as not to have been captured by the review literature.

Research Question

"What does the scientific literature tell us about the clinical and economic effectiveness of hyperbaric oxygen treatment for problem wound healing (i.e., diabetic foot ulcers, pressure ulcers, delayed radiation-induced injuries, thermal burns, skin grafts and flaps, and revascularization after organ transplantation), considering the expected patient populations and given the social, geographic, economic and political contexts of Newfoundland & Labrador?"

This report is now complete. A dissemination event will take place in October 2012.



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Interprofessional Teams for Chronic Disease Management in Newfoundland and Labrador

In view of the mounting health and economic burdens associated with chronic disease in this province, our decision-making partners in the provincial health system asked the CHRSP team to synthesize and contextualize the evidence on interprofessional teams for the management of chronic disease. The research team focused its study on the management of individuals with diabetes and chronic obstructive pulmonary disease (COPD).

NLCAHR recruited an expert researcher, Dr. Anne Sales, Deputy Chief, VA Inpatient Evaluation Center (IPEC) and Canadian Research Chair in Interdisciplinary Healthcare Teams, as our CHRSP Team Leader. Dr. Daria O'Reilly of the PATH program at McMaster University was our health economist for the project. Dr. Susan Gillam, CEO of Western Health, was our local health system partner, and we also consulted with Linda Carter of the Department of Health and Community Services, amongst others. Local academic and clinical experts included Dr. Brendan Barrett, Dr. Nigel Duguid, Sandra Small, and Dr. Anne Kearney.

Research Question

"Is there reliable scientific evidence to support team-based management of chronic disease and, if so, given the NL context (in terms of geography, demography, fiscal resources and health system capacities) what is the most effective and efficient way to organize, implement, and sustain team-based care for individuals with diabetes and chronic obstructive pulmonary disease (COPD) so as to derive the best possible outcomes for patients, providers, and the health system?"

As we worked through the many challenges of synthesizing the evidence on team-based chronic disease management, the project team concluded, in consultation with our subject experts, that we are unable to answer this CHRSP question as formulated. As our report will show, the high-level research evidence on both the clinical and cost-effectiveness of team-based Chronic Disease Management is simply not available at this time. In short, the question itself is ahead of the published literature. We are hopeful that, as research in this subject area advances, we may be in a better position to provide some guidance on this question in future.

Telehealth for Specialist-Patient Consultations

A continuing challenge for the healthcare system arises from the demand for patient-specialist consultations for residents living throughout Newfoundland and Labrador and the concentration of those specialists in a few population centres in the province. With an internationally recognized telemedicine technology infrastructure, the province has been developing its telehealth capacities in several disciplines, including oncology, nephrology and mental health. As the Regional Health Authorities seek to increase access to specialist care, they have been exploring the potential to expand telehealth consultations into other disciplines. As a result, Labrador Grenfell Health has partnered with CHRSP to investigate what the scientific literature tells us about the benefits to patients, clinicians and the healthcare system of telehealth patient-specialist consultations in dermatology and cardiology.

For this project, CHRSP partnered with the Canadian Agency for Drugs and Technology in Health (CADTH) to identify and synthesize the recent high-level research literature, including systematic reviews, meta-analyses and health technology assessments. The synthesis also included any high quality primary research that had been conducted recently enough so as not to have been captured by the review literature. Our project team also included Boyd Rowe, CEO of Labrador Grenfell Health.

Research Question

"Considering the demographic, geographic, economic context, as well as the health system capacities, in Newfoundland & Labrador, what does the scientific literature tell us about the clinical and economic effectiveness of telehealth patient-specialist consultations compared to face-to-face standard care, in the fields of non-emergency dermatology and cardiology?"

Expected completion date: Fall 2012

Following up on the impact of previous CHRSP Projects

To ensure that our CHRSP research evidence is being considered in health policy decisions in Newfoundland and Labrador, in 2011 and 2012, NLCAHR surveyed stakeholders and decision-makers about two previously published reports.

Feedback on CHRSP Report issued October 2010: Youth Residential Treatment Options in Newfoundland and Labrador J.S. Lyons, S. Bornstein, P. Navarro, R. Kean, B. Rowe, H.M. Vasiliadis

> "This report was very useful and relevant because we are developing two new youth treatment centres for the province. The document was circulated to the provincial advisory committee (overseeing youth centres) in its draft version prior to October 2010 and in its final format after that. The report has informed decision making on model of care as well as target populations of youth who would most benefit from residential treatment." -Senior Representative, Department of Health and Community Services, Government of NL

"Although this report was not used in any policy decisions at the RNC, it did increase awareness for officers regarding the youth clientele that we deal with. A number of officers attended the release of the report and this increased knowledge and added to their awareness. I believe that the researchers did a good job and that any information with respect to the clientele that police deal with increases understanding and awareness, which in turn, aids first responders in their approach." -Royal Newfoundland Constabulary Officer "We circulated this report through all senior managers to staff of the organization. It was relevant for a small group of organizational staff. We anticipated its use was likely at provincial committees of senior managers and directors for community based services. The implications of the recommendations are still being discussed." -Senior Representative, Western Health

"The report has been an integral part of the planning and development phase for the Youth Treatment Centres that are being developed in this province – particularly in leading us to best practice material on programming and raising key questions and considerations. It continues to be referred to and referenced at both our provincial steering committee and local advisory committee levels, but most especially by myself and the manager of the centre being developed by Central Health, as we are the leads in terms of the nuts and bolts of planning and developing staffing, training, treatment modalities / programming and evaluation /outcome measures at the centres."

- Senior Representative, Eastern Health

"I attended the launch of the report and as a result of seeing the report, invited Pablo Navarro to speak to our students in a course for the session on Addictions. Although I am not involved with policy-making, I found the report to be comprehensive and a very useful teaching tool. The systematic review also served as a model for the MPH students on how to develop research strategies." -Faculty/Researcher -Community Health, Memorial University "The research was well done and I hope that it does inform future directions." -Representative of Eastern Health

Feedback on the CHRSP Report issued October 2010: The Reprocessing and Reuse of Single-Use Medical Devices in Newfoundland and Labrador S. Bornstein, J. Butler and R. Kean

"This report was discussed at a number of committee meetings and many other informal meetings regarding single-use medical devices. This report also was used for the development of our Regional Policy. A very useful and valuable report!" Senior Representative, Western Health

> "This document, well-researched and well written, was referenced in the policy on Reuse of Single Use Devices that was written by the Infection Control Department. The document was also referenced at meetings during discussions on this topics, so, from that viewpoint, it was very useful. I believe that given the small amount of research done in this area, synthesizing that information was important. The document will support any programming that Infection Control will endeavour in this area and will provide evidence to support practice decisions in the future." -Representative, Eastern Health

"The report is useful to the organization. I have used it in preparing for internal and external discussions." -Senior Representative, Eastern Health

"This report was very useful to us. The discussion to help prepare the report actually helped us to revise regional policy, in keeping with the best evidence. The report was shared with all senior management but was particularly useful to our infection prevention and control staff. I liked the involvement of the provincial infection prevention and control committee since this group has responsibility for setting provincial policy direction." -Senior Representative, Western Health

"We appreciate having had the opportunity to review and provide input into this report. Labrador-Grenfell Health approved a Single Use Devices policy in 2008. This document supports the policy and practices we have put in place in our region and will aid in evidence-based decision making in the future." -Senior Representative, Labrador-Grenfell Health

CHRSP Projects for 2012

Community-based Service Models for Seniors

"Aging in place" is a practice receiving renewed interest in Newfoundland & Labrador, among our seniors, their caregivers and their families, as well as the provincial government and Regional Health Authorities (RHAs). For most seniors, remaining in their homes and communities is intrinsic to their independence and quality of life. From the perspective of government and the RHAs, helping seniors stay in the community is a sign of successfully and sustainably meeting their needs and supporting their choices. However, the province's population continues to age while seniors are living longer lives than ever before. Medical and technological advances have made it possible for seniors with a range of disease complexities and disabilities to remain in their homes when before they might have been moved to an institution. Simultaneously, the effects of migration continue to be felt. As a result, the traditional support and care networks for seniors are being stretched and eroded. The Newfoundland & Labrador healthcare system has acknowledged that it will need new and creative strategies for seniors living at home. The Department of Health & Community Services proposed a CHRSP project to address this issue, with a study on how communitybased primary health teams could best support community-dwelling seniors and their caregivers. Such an approach could, possibly, make better use of existing services, as well as re-allocating resources more efficiently and effectively.

Research Question

"What does the scientific literature tell us about the characteristics and the effectiveness of models of coordinated primary medical and community care, including health and social services, to support community-dwelling older persons with ADL/IADL disabilities and mild to complex chronic health conditions, including dementia, and their caregivers, in terms of health and economic outcomes for the clients, care givers and health system, in the context of Newfoundland & Labrador?"

Expected completion date: Fall 2012

Age-friendly Acute Care

In March 2011, officials from Central Health in Newfoundland and Labrador asked CHRSP to identify and evaluate the best available research-based evidence on age-friendly approaches to acute care. Central Health recognized the necessity to uncover the barriers faced by the aging population in acute care settings and to determine best practices for ensuring age-friendly acute care in the province. Given Newfoundland and Labrador's aging population, Central Health asked CHRSP to help them identify applicable tools and guiding principles that will promote age-friendliness in acute care facilities with a view to developing strategies that will reduce barriers faced by our aging population. Central Health suggested that the research evidence CHRSP could gather on this topic would help support decision making on enhancements/changes required in acute care environments as well as helping the health authority establish priorities in this area.

Though this research topic was initially suggested by Central Health, consultations with the province's other regional health authorities (RHAs) and with the Department of Health and Community Services (DHCS) revealed that the issue of caring for older adults in hospital was a high-priority across the province. CHRSP therefore assembled a project team that included senior officials from each of the four RHAs (Eastern Health, Central Health, Western Health and Labrador Grenfell Health), a consultant from DHCS, faculty members from Memorial's School of Nursing and Faculty of Medicine with a background in acute care, and a project coordinator internal to the CHRSP program. Dr. Belinda Parke of the University of Alberta agreed to serve as Academic Team Leader.

Research Question

"What programs and/or services are associated with improved outcomes for seniors admitted as inpatients to acute care hospitals?"

Expected completion date: Fall 2012

Building Capacity

As noted in our strategic plan, one of the Centre's goals is to help build human capacity for undertaking and supporting high-quality applied health research in Newfoundland and Labrador. As such, NLCAHR has adopted a capacity development strategy that includes activities and programs to address training, networking and other support needs in the province.



In 2012, our former Research Affinity Groups were re-branded as Research Exchange Groups; the new name better reflects the multi-directional collaboration and knowledge exchange that takes place at the meetings. The Research Exchange Group program, introduced in 2005 with the group on Rural, Northern and Aboriginal Health, has continued to be a very successful initiative which facilitates the connection and collaboration between university students and professors, professionals in the health system and other members of the community who share interests in a specific area of health research. The groups meet on a regular basis to share information on current research, to collaborate on possible future research work and to discuss the potential issues in their respective domains. The groups have also been instrumental in providing links to funding for possible individual and group research projects.

NLCAHR now hosts Research Exchange Groups with specific interests in:

- Aging
- Rural and Northern Health
- Autism
- Quantitative Research
- Eating Issues, Disordered Eating and Body Image
- Women's Health/Gender and Health
- Oral Health
- Mental Health (starts September 2012)
- Chronic Disease (starts November 2012)
- Interprofessional Education and Collaborative Practice (starts January 2013)

Launching Research Talks: Our New Speakers' Series

Research Talks is being planned as a series of free public lectures hosted by NLCAHR that will feature research on topics selected by our Research Exchange Groups. For the inaugural lecture in the series, in April 2012, **Dr. Ivy Lynn Bourgeault**, Professor, Interdisciplinary School of Health Sciences, University of Ottawa and CIHR Research Chair in Health Human Resource Policy, will visit St. John's to deliver a lecture about the migration of healthcare workers and their integration into the Canadian workforce. Dr. Bourgeault is being invited by our Research Exchange Group on Women's Health/ Gender and Health to share her research and discuss the perspectives of health policy researchers and decision makers who have an interest in the migration of health professionals. Her talk will address the need for a pan-Canadian Health Workforce Observatory.

Registered Dietitian and leading national expert on dietetics theory, education and practice, **Dr. Jacqui Gingras** of Ryerson University's School of Nutrition is the lecturer selected by our Research Exchange Group on Eating Disorders, Disordered Eating, and Body Image. Her *Research Talk* will take place at Memorial on October 9, 2012.



(www.facebook.com/nlcahr) to publicize our activities, share information with our stakeholders and engage in a more interactive dialogue with our community. We are also now on Twitter: www.twitter.com/nlcahr

Other Resources and Capacity Building Activities

In addition to the capacity-building activities described above, NLCAHR continues to use its website to share details on new and recurring funding opportunities, upcoming conferences, and other information of use to our stakeholders. We have hosted a variety of webinars including CHSRF's "Researcher on Call" series and CIHR's grant-writing webinars. Additionally, in 2011-2012 our staff attended a variety of educational workshops, including learning more about effective grant application writing, knowledge translation and evaluation techniques.

Financial Review

For the fiscal year April 1 2011- March 31 2012

NLCAHR Income	
Balance as of April 1, 2011	\$135,004
Grant from Department of Health & Community Services	\$513,500
NL-HARP Administration Fee (payable to NLCAHR)	\$18,000
External Funding	\$85,321
Total Income for 2011-2012	\$751,825
NLCAHR Expenditures	
Salaries and benefits	\$363,058
Operations/travel/conferences	\$43,286
CHRSP External Reviewers	\$30,000
NLCAHR Awards Program	\$161,727
Total Expenditures for 2011-2012	\$598,071
NLCAHR Balance as of March 31, 2012	\$153,754

NLCAHR Multi-Year Funding Commitments

	2012	2013 and beyond	Total
Master's Fellowships	\$36,000	\$15,000	\$51,000
Doctoral Fellowships	\$28,333	\$28,333	\$56,666
Research Grants	N/A	N/A	N/A

NL-HARP Income	
Balance of NL-HARP as of April 1, 2011	\$259,504
Grant from Department of Health & Community Services	\$200,000
Total Income for 2011-2012	\$459,504
NL-HARP Expenditures	
NL-HARP Awards	\$177,635
NL-HARP Administration Fee (payable to NLCAHR)	\$18,000
Total Expenditures for 2011-2012	\$195,635
NL-HARP Balance as of March 31, 2012	\$263,868

NL-HARP Multi-Year Funding Commitments			
	2012	2013 and beyond	Total
Fellowships	\$65,000 ¹	\$30,000	\$95,000
Research Grants	\$116,424 ¹	N/A	\$116,424

Future Directions

In 2012, the Centre plans to prepare and distribute a volume to showcase its recent activities. This publication will include three components:

- The research produced by the winners of recent NLCAHR and NL-HARP fellowships and grants;
- Research published and sponsored by members of our Research Exchange Groups;
- 3. The reports of our various CHRSP projects.

We plan to disseminate this publication widely both throughout Memorial University and to all relevant stakeholders in government and in the Regional Health Authorities as well as to the Centre's counterpart organizations in other provinces.

We hope to produce volumes of this kind on a regular basis to highlight the important research being undertaken under the auspices of NLCAHR.

Newfoundland and Labrador Centre for Applied Health Research | Annual Report 2011-2012



Newfoundland and Labrador Centre for Applied Health Research

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