

NEWFOUNDLAND & LABRADOR CENTRE FOR  
APPLIED  
HEALTH  
RESEARCH

A stylized graphic of a flag, likely the Newfoundland and Labrador flag, is positioned behind the word 'HEALTH'. The flag features a blue field with a white saltire (St. Andrew's cross) and a red field with a white saltire. The flag is depicted with a wavy, flowing effect.

**ANNUAL REPORT**

April 2006-March 2007

## Background

The Newfoundland and Labrador Centre for Applied Health Research was created in the fall of 1999 as the product of a partnership among three organizations: Memorial University of Newfoundland, the Department of Health and Community Services of Newfoundland and Labrador, and the Health Care Corporation of St. John's. It is constituted as a centre within Memorial University under the auspices of the Board of Regents and is governed by a Director and a Board. The Centre is funded primarily by an annual grant from the Department of Health and Community Services of the Government of Newfoundland and Labrador as well as by infrastructural and administrative support from the University and, in particular, from the Faculty of Medicine. Its mission is to contribute to the effectiveness of the health and community service system of Newfoundland and Labrador and to the physical, social, psychological health and wellbeing of the province's population by supporting the development and the use of applied health research in this province. The Centre has three goals:

1. to help build capacity in the province for doing high-quality applied health research;
2. to increase the amount of high-quality applied health research undertaken on issues identified by its major partners and its stakeholders as having high priority for the province's health system and for the health and wellbeing of its population; and
3. to foster more effective use of research evidence in the province's health and community services system.

## Highlights of 2006-2007

The Centre has now completed its seventh full year of operations and the third under its current three-year Strategic Plan. Several of the new programs and activities introduced in the previous year have now had time to be fully developed and implemented. These include our enhanced website and our regular electronic newsletters and e-bulletins; our mentorship program; and our venture into the area of Health Technology Assessment, in collaboration with the Canadian Agency for Drugs and Technologies in Health (CADTH) and its Provincial Liaison Office, which is housed at the Centre. On March 8<sup>th</sup>, 2007, we held our third Stakeholder Forum to examine the Centre's performance in fulfilling the targets set in the 2004 Strategic Plan, to hear presentations by researchers associated with the Centre and by stakeholders in the health system who use our research, and to discuss the draft of a new Strategic Plan for the coming five-year period.

## Governance

### The Board

For the period under review, the membership of the Board was as follows:

Name	Position	Organization
Dr. James Rourke	Dean	Faculty of Medicine, Memorial University (Chair)
Mr. John Abbott	Deputy Minister	Department of Health and Community Services
Dr. Christopher Loomis	Vice-President (Research)	Memorial University
Dr. Penny Moody-Corbett	Assistant Dean of Research & Graduate Studies	Faculty of Medicine, Memorial University

	(Research Advisory Council Delegate)	
Mr. Mike Barron	CEO	Newfoundland and Labrador Centre for Health Information
Mr. John Peddle	Executive Director	Newfoundland and Labrador Health Boards Association
Mr. George Tilley	CEO	Eastern Health
Dr. Stephen Bornstein (ex officio)	Director	NLCAHR

During the period under review, the Board met 6 times.

### The Research Advisory Council

For the period under consideration, the membership (with the Centre's Director as Chair) was as follows:

Representative	Organization
Dr. Shelly Birnie-Lefcovitch	School of Social Work, Memorial University
Dr. Stephen Bornstein	NLCAHR
Dr. Gerard Farrell	Dr. H. Bliss Murphy Cancer Centre
Dr. Marshall Godwin	Faculty of Medicine, Memorial University
Dr. Patricia Grainger	Centre for Nursing Studies, Memorial University
Dr. Debbie Kelly	School of Pharmacy, Memorial University
Mr. Don MacDonald	Newfoundland & Labrador Centre for Health Information
Dr. Penny Moody-Corbett	Faculty of Medicine, Memorial University
Dr. Donna Moralejo	School of Nursing, Memorial University
Dr. Sean Murphy	Faculty of Medicine, Memorial University
Dr. Barbara Neis	Faculty of Arts, Memorial University
Dr. Ban Youngusband	Faculty of Medicine, Memorial University

The Research Advisory Council did not meet during this academic year but has been consulted via e-mail by the Director on various policy issues. A meeting is being scheduled for late spring. Particular thanks are due to those members of the Council who have served on the Peer Review Committee that adjudicated the Centre's awards and fellowships competitions. For the 2006-7 cycle, this group consisted of Dr. Shelley Birnie-Lefcovitch, Dr. Sean Murphy, and Dr. Barbara Neis, who served as 'scientific officer' summarizing the committee's discussions and providing notes that were sent to each applicant. The other two members of the committee were Dr. Brian Curtis of the Faculty of Medicine and Dr. Thérèse Stuckel, Vice President of the Institute for Clinical Evaluative Sciences in Toronto.

## Administrative Issues

### Personnel

Several important changes in staffing have taken place during the past year. **Theresa Mackenzie** left her position as Manager of Capacity Development and Knowledge Exchange in early spring 2007. The Centre is especially grateful to Theresa for her outstanding contributions to the design and implementation of our researcher support programs, our capacity building workshops and our enhanced communications strategy. **Janice Butler** has assumed a new role as research officer for the Health Technology Assessment program. **Pablo Navarro** has taken over Janice's position as research officer with responsibility for the Centre's knowledge transfer interactions with the provincial health system. Janice has been ably supported on a part-time basis by Doreen MacNeil, a graduate student in Behavioural Neuroscience, while assistance on the Centre's knowledge transfer and funding programs has been provided by research assistant, **Luke Power**. In addition, **Annette McGrath** has now become the Centre's operations and events coordinator, while Tyrone White has become our receptionist and office clerk. As in previous years, the Centre's budget also supported half of the salary for **Elizabeth Hatfield**, Manager of the Clinical Research Program in the Faculty of Medicine. Ms. Hatfield facilitates and promotes interdisciplinary clinical and applied health research within the Faculty of Medicine and helps to develop linkages between the Faculty of Medicine and Eastern Health.

### Co-located Units

The *SafetyNet* research program in workplace health and safety, of which Stephen Bornstein is co-director, continued to share the Centre's office space and facilities. In late June of 2007, however, *SafetyNet* will be moving back onto the main MUN campus into space currently being renovated on the top floor of the Inco Innovation Centre. *SafetyNet* is in the process of becoming a self-sustaining, permanent research centre of the University with a stable funding commitment from the Office of the Vice-President (Research).

As noted above, the Centre has continued the relationship it started in 2004 with the Newfoundland and Labrador Liaison Office of CADTH (formerly known as CCOHTA, the Canadian Coordinating Office for Health Technology Assessment). The Provincial Liaison Officer, Cindy Mosher (replacing Sheila Tucker who is currently on maternity leave), rents an office in NLCAHR's space and has worked with the Centre to develop collaborative activities to enhance the use of evidence in the making of public policy and clinical decisions in the province's health system. During this period, the Centre has received two one-year grants from CADTH to develop activities in the area of education and research synthesis on the subject of health technology assessment as described below.

## Funding Programs

The Centre has been mandated by the government to support applied health research and graduate training in the province, both directly through the allocation of grants and fellowships and indirectly by helping attract funding from external granting agencies.

The Centre's funding activities are aimed at research initiated by investigators resident in Newfoundland and Labrador and currently take five forms: Project and Development Grants, Fellowships, Visiting Lecturer Grants, the Scholar-in-Residence Program and the Establishment Grants Program.

### I. Research Grants

The Centre's research funding activities support research that is initiated by investigators residing in Newfoundland and Labrador. We offer three research grants; Development Grants, Project Grants, and NLCAHR also co-funds the CIHR-sponsored "Partnership for Health System Improvement (PHSI) Grants." This past year's competition yielded 5 successful research projects total; two development grants, two project grants and one PHSI grant. The total amount of research funds granted in 2006-2007 was \$83,875.

## Development Grants

The Centre's Development Grants of up to \$10,000 are designed to assist in the development of effective research teams in Newfoundland and Labrador capable of obtaining funding from national and international granting agencies in the area of applied health research. These grants are intended to perform one or more of the following functions:

1. Fund the development of new letters of intent and research proposals for submission to national and international funding competitions
2. Support the enhancement and resubmission of research proposals to external funding agencies, including those that have received a high scientific merit score in external funding competitions but did not secure funding

NLCAHR received three applications for the 2006-2007 Development Grant competition. Two of these applications were awarded funding.

Investigators	Project Title	Funding
<b>Dr. Diana Gustafson</b> with Dr. Catherine Donovan and Dr. Frank Elgar	"Parenting and Outcomes: A proposal for development and evaluation"	\$ 9,998
<b>Dr. Fabian Bassett</b>	"Effects of intermittent normobaric hypoxia on weight loss in young, moderately obese people"	\$ 10,000

## Project Grants

Project grants of up to \$40,000 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. During the 2006-2007 funding cycle, there was seven applications received for this competition. The Review Committee recommended two of these applications for funding.

Investigators	Project Title	Funding
<b>Michelle Ploughman</b> with Dr. Jason McCarthy and Dr. Dale Corbett	"Does treadmill exercise enhance performance of cognitive and upper extremity tasks in patients with chronic stroke?"	\$ 17,700
<b>Dr. Andria Jones</b> with Dr. Shannon Majowicz, Dr. Maria Mathews and Dr. David Allison	"The public perception of drinking water in Newfoundland and Labrador"	\$ 39,990

## CIHR's Partnership for Health System Improvement (PHSI) Grant

NLCAHR has made a commitment to CIHR's Institute for Health Services and Policy Research to act as a co-funder for successful NL applications to the PHSI program. Dr. Maria Mathews, Division of Community Health and Humanities in the Faculty of Medicine, submitted a successful PHSI grant application in 2006, entitled "Retention of Locally Trained Medical Graduates in Saskatchewan and Newfoundland and Labrador." NLCAHR will co-fund this project for three years, committing \$17,554 in total to this project, including \$6,178 for 2006-2007.

Investigators	Project Title	Funding
<b>Dr. Maria Mathews</b> with Dr. Robert Truscott Card, Dr. James Rourke, and Dr. Jody Glacken	"Retention of locally trained medical graduates in Saskatchewan and Newfoundland and Labrador"	\$ 6,178 (\$17,554 over three years)

## Reports on Activities of Grant Recipients

In October 2005, the Centre began collecting and disseminating research reports for research projects funded through the Centre. During the 2006-2007 year, we intensified our effort to secure short reports from as many of

our grant recipients as possible concerning the results of the work funded by NLCAHR. These reports are now posted on our website with links to published articles where available.

## 2. Fellowships

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

In its 2006-2007 round, NLCAHR received ten applications for Master’s Fellowships and awarded two fellowships of \$18,000 per year each, renewable for up to two years. There were six applicants for Doctoral Fellowships and the Centre awarded two renewable fellowships of \$20,000 per year and one single-year fellowship to a student whose thesis was nearing completion. There was only one Post-Doctoral fellowship application received for the 2006-2007 funding cycle and it was not selected for funding. The Master’s and Doctoral Fellowships are funded on the basis of an arrangement for partial co-funding with Memorial University’s School of Graduate Studies.

Grantee	Program	Project Title	Award
Kelly Butt	Master of Science, Community Health and Humanities	“Consumer opinions of municipal drinking water in Newfoundland and Labrador”	\$ 18,000 per year for up to 2 years
Duyen Nguyen	Master of Science, Psychology	“Peer victimization experiences of children and adolescents with cleft lip and/or palate”	\$ 18,000 per year for up to 2 years
Stacey Wareham	PhD, Psychology	“Factors influencing risk perception and safety behaviours in the fiberglass boat-building industry in rural Newfoundland and Labrador”	\$ 20,000 for one year
Roxana Vernescu	PhD, Psychology	“Attention process training in young children with fetal alcohol spectrum disorder”	\$ 20,000 per year renewable for up to 3 years
Kelly Warren	PhD, Psychology	“Injury prevention: what parents know and what they teach their children”	\$ 20,000 per year renewable for up to 3 years
<b>Total fellowships for the 2006-2007 funding cycle</b>			<b>\$ 96,000</b>

Funding is continuing for the following fellowship that was awarded last year:

Grantee	Program	Project Title	Award
Andrea Kitta	Masters of Arts, Folklore	“Lay Perceptions of Pediatric Inoculations and Anti-Vaccination Discourse.”	\$ 20,000
<b>Total fellowships for the 2006-2007 funding cycle</b>			<b>\$ 20,000</b>

## 3. Visiting Lecturer Program

In its program for assisting Newfoundland research and academic organizations to bring in scholars from out of the province, NLCAHR provided the following funding in 2006-2007:

Sponsoring Unit	Topic	NLCAHR Contribution
School of Nursing (for their Nursing Research Conference)	Dr. Barbara Paterson, University of New Brunswick, "All this and research too: Directions for the future development and support of faculty as nurse researchers" and "Things I know about research that I wish I had known all along"	\$1,000

#### 4. Scholar-in-Residence Program

This program, introduced in 2004, aims to bring to the province established scholars who are actively involved in research linked to the Centre's priority themes. The first holder of this position, Dr. Keith Cash, a retired Professor of Nursing from Leeds Metropolitan University in the United Kingdom, was at the Centre from January 2006 through April 2006. Dr. Cash served as a consultant for Memorial University's School of Nursing in the development of graduate programs, as well as giving several public lectures on his research relating to men's health.

Visiting Scholar	Sponsoring Unity	NLCAHR Contribution
Dr. Keith Cash	School of Nursing, Memorial University	\$ 7,500 (+\$ 2,000 travel expenses)

During the spring of 2007, an agreement was reached with Dr. Roger Pitblado, a health geographer recently retired from the Centre for Rural and Northern Health Research at Laurentian University who will be our Scholar-in-Residence for the semester beginning September 2007.

#### 5. Establishment Grants

The Establishment Grant program was created in 2005 to facilitate the recruitment of new applied health researchers to faculty positions in the province by providing research funding to help top up employment offers. The grants are not meant to replace existing research funding that would be provided as part of a start-up package but to make it possible for academic units to attract and retain the strongest candidates through enhanced employment offers. Grants of up to \$15,000 are available to academic units intending to hire full-time, tenure-track or tenured academic staff and are also open to appointments of clinical professors but only if their position includes at least 33.3% fully protected time for research (in addition to clinical and teaching responsibilities).

During its first two years of operation, this program has elicited only limited interest from departments and programs at Memorial University and the Centre's Board plans to re-evaluate its design during the coming year.

## Collaborative Activities

### 1. Collaboration with Other Newfoundland Research Organizations

The Centre has continued to cultivate active and synergetic relationships with other health research organizations working in the province. The relationships developed in past years with the Clinical Epidemiology research unit, with the Health Research Unit of the Division of Community Health of the Faculty of Medicine, have all been reinforced, as has cooperation with the Leslie Harris Centre for Policy Research. At the end of March, 2007, NLCAHR and the Harris Centre jointly sponsored an important event on Bell Island, the launch of Phase I of the Bell Island Community Health Needs Assessment Study. This study was designed and carried out by Dr. Verlé Harrop on behalf of the Eastern Regional Health Authority. This study is expected to lead to a second phase in which the community will work with experts and health providers to develop strategies to enhance the health status of the island's residents. It is also expected to be used as a template for the implementation of community-based health

needs assessments elsewhere. Dr. Harrop is currently working with NLCAHR to find funding to develop a toolkit based on the Bell Island methodology that can be used in other communities and regions with limited financial and academic resources.

## **2. Collaboration with External Funding Programs**

NLCAHR has continued to cultivate its working relationship with the Canadian Health Services Research Foundation (CHSRF) by participating in a variety of its national and regional meetings and, in particular, its work in the area of knowledge translation and exchange. The Centre also works with the Canadian Institutes of Health Research, in particular by acting as the provincial partner of the annual 'Partnerships for Health System Improvement' program run by the Institute for Health Services and Policy Research. NLCAHR manages the awarding of matching funds for grants awarded to applicants from this province and it does so in collaboration with the province's Industrial Research and Innovation Fund which provides the money.

## **3. Rural Health Research**

The Centre continues to play an active role in the development of rural health research in this country. The Director continues to serve on the executive of the Canadian Society for Rural Health Research. In addition, in May, 2006, NLCAHR joined with CIHR's Atlantic Aboriginal Health Research Program (AAHRP) in organizing a conference in Happy Valley-Goose Bay on 'Collaboration in Health Research for Labrador'. This conference brought approximately 100 university-based researchers community participants together for two days of meetings to discuss ways of developing partnerships to identify community needs for research, to secure funding, to carry out research, and to apply research results in ways that bring about positive change. NLCAHR provided offered a special \$5,000 Development Grant for the best team-based research project to emerge from the conference (more details available in "Research Workshops" below).

## **4. National Alliance of Provincial Health Research Organizations**

The Centre has continued to participate in this alliance, which brings together the directors of the country's principal provincial health research funding organizations. The Alliance is currently chaired by the CEO of the Michael Smith Foundation for Health Research (British Columbia) and co-chaired by the Director of the Nova Scotia Foundation for Health Research. The group meets two-to-three times a year to share best practices in the management and allocation of health research grants and to discuss mutual concerns. During the past year, topics addressed included research ethics, confidentiality, and the challenge of evaluating the impact of health research funding.

## **5. Canadian Network of Centre Directors in Health Services and Policy Research**

The Director continues to serve as co-chair of this network that is funded partly by the member organizations and partly by contributions from the Canadian Health Services Research Foundation (CHSRF) and CIHR's Institute for Health Services and Policy Research (IHSPR). The network brings together, both through telephone conferences and through bi-annual face-to-face meetings, the directors of eleven applied health research units from various parts of the country to share ideas on administrative approaches, knowledge exchange and capacity development; to facilitate data sharing and collaborative research activities; and to coordinate efforts to enhance national funding of applied health researchers and centres. The Alliance has recently been awarded enhanced multi-year funding and administrative support from CHSRF and IHSPR. Its next face-to-face meeting will be held in Toronto during the June annual conference of the Canadian Association of Health Services and Policy Research (CAHSPR).

## **6. Research Canada**

The Centre has also maintained its membership, initiated in 2002, of Research Canada (formerly, the Canadian Coalition for Health Research)), an organization of health research centres and teaching hospitals across the country working to publicize the achievements and needs of health research organizations and to lobby for increased research funding.



## Research and Knowledge Exchange Activities

### 1. Knowledge Exchange with the Department of Health and Community Services

During the period under consideration, the Centre organized two Knowledge Exchange Seminars with the Department. The first, held in September, 2006 focused on the province's 'Community Accounts' web-based data platform. Alton Hollett of the Newfoundland and Labrador Statistics Agency and Dr. Doug May of MUN's Department of Economics, the creators of the Community Accounts, made a presentation on the platform and the ways it can facilitate policy analysis and decision making in the area of health. At the end of November, a seminar was held using video-conferencing technology to make possible a presentation to members of DHCS staff by Dr. Patricia Martens, Director of the Manitoba Centre for Health Policy in Winnipeg. Dr. Martens explained how her organization uses the province's administrative health data bases, which it manages, to develop and execute research studies on behalf of the province's health department and regional health authorities. She focused, in particular, on the 'Need to Know Program' that involved the Manitoba Centre and the province's rural health regions in a five-year process of collaborative planning, execution and dissemination of research focused on the policy challenges identified by senior regional officials.

Both seminars were well attended and received positive evaluation reviews from the participants. Since the end of 2006, however, it has not proved possible to organize any further seminars. To fill the gap, the decision has been reached to shift the focus of the Centre's knowledge exchange activities in two ways. More attention will be paid to the newly consolidated regional health authorities as potential partners alongside the Department. In addition, it was decided that, henceforth, the subjects chosen for discussion at upcoming seminars will focus on the work of the Centre's new program in Contextualized Research Synthesis described in the next section of this report.

### 2. Research and Research Synthesis

In previous years, NLCAHR has been asked by DHCS to provide research on a number of topics of immediate concern to provincial policy makers. Topics have included oral health policy reform, physicians' strikes and the epidemiology of obesity. In the period covered by this report, at the request of the Department, we have provided rapid reviews on two topics: Electronic decision-support tools for diagnostic imaging and the proposed Newfoundland and Labrador Longitudinal Health Survey. Since Fall 2006, we have shifted our emphasis toward a different way of providing research support for the provincial health system. Rather than using our limited human and financial resources to perform small pieces of original research, we have decided to focus on synthesizing important research done elsewhere.

The idea is to work with the Department and the regional health authorities to pinpoint a list of questions on which they feel that research-based evidence would be helpful; to search out the best available research on each question, preferably in the form of systematic reviews of multiple high-quality studies; to synthesize the findings of these reviews; and, most importantly, to present the evidence in such a way as to make it most relevant and useful to provincial decision makers. Our approach to doing this is called 'contextualization', that is, focusing our analysis of the findings to the aspects of the issue prevalent in Newfoundland and Labrador and to proposed approaches and solutions that fit our capacities and resources. We are currently preparing a contextualized synthesis on the question of what non-clinical interventions can be effective for the treatment and prevention of obesity in children and adolescents. Reports will be ready for presentation and discussion early in the autumn of 2007.

### 3. Research Workshops

In 2007, NLCAHR organized and funded two important research workshops. The first of these events saw NLCAHR partnering with the Atlantic Aboriginal Health Research Program (AAHRP) at Dalhousie University to coordinate a three-day workshop entitled "Community Health Research in Labrador: Listening, Learning and Working Together," held in Happy Valley-Goose Bay in May. The purpose of this workshop was to explore and develop community-university partnerships for research on the health and wellness of the people of Labrador. To encourage the creation of these research partnerships, NLCAHR contributed \$5,000 to a seed grant to be awarded

to a research proposal initiated at the Workshop. This grant, adjudicated by AAHRP’s peer-review committee was awarded to:

Investigators	Project Title	Award
<b>Dr. Donald Cunningham</b> with Monica Hunter, Michelle Snow, Kathleen Benuen, Darlene Wall and Theresa O’Keefe	“To identify community characteristics relative to oral health care and investigate models of oral health care delivery systems for aboriginal peoples in Newfoundland and Labrador”	\$ 5,000

In October, NLCAHR organized a research forum, “Innovations in Genetics and Genomics Research: Implications for Health Services and Policy,” in St. John’s. This forum provided an opportunity for local genetics and genomics researchers to profile their research alongside some of Canada’s leading researchers in the field. This forum attracted over 100 registrants. The forum also provided an opportunity for visiting researchers to meet with local graduate students with interest in genetics and genomics, as well as to conduct medical ground rounds at Memorial University’s Faculty of Medicine. Presentations from the event, as well as a webcast, are available on the NLCAHR website.

Both of these events provided opportunities for collaboration not only among researchers but also among policy makers, community members and graduate students. Reports from both events are available on the NLCAHR website.

## Health Technology Assessment Programs

In 2005, Memorial University and The Newfoundland and Labrador Centre for Applied Health Research (NLCAHR) received a Health Technology Assessment (HTA) Capacity-building Grant from CCOHTA, recently renamed as the Canadian Agency for Drugs and Technologies in Health (CADTH). The funding received from CADTH was used to develop and launch a two-step approach to enhancing the understanding and application of HTA among health decision makers in the province of Newfoundland and Labrador.

The first step in this approach involves two educational programs to support capacity building in HTA: An HTA Executive Training Seminar and a Master’s level course in HTA. The objective of the Executive Training Seminar is to enhance the capacity of Newfoundland and Labrador health decision makers to understand the principles of HTA and effectively use HTA products to inform decision making in health and community services in this province. The inaugural introductory level seminar was held in 2005 and it targeted senior health system administrators and policy makers. This year, a follow-up two-day seminar was designed by a team of local researchers (Richard Audas, Brendan Barrett, Stephen Bornstein, Mike Doyle and Roy West) working with one of the previous year’s external experts, Dr. Don Juzwishin of Edmonton. On the first day, the team combined to provide an introductory HTA seminar for decision makers in the Department of Health and Community Services and the Regional Integrated Health Authorities in the province who have had no prior HTA training. The second day provided an intermediate-level seminar for policy makers with previous HTA training. The seminar was offered in May, 2007, and attracted a total of 14 participants. In addition to this training program, the local team, led by Drs. Audas and Doyle, designed and delivered a Master’s-level graduate course, Special Topics in Health Technology Assessment, offered through the Faculty of Medicine at Memorial University. The objective of the course is to prepare students to understand, assess and apply concepts in HTA and health economics in order to analyze and inform health policy decisions. This course was first offered in September, 2006, and there are plans to explore the additional possibility of distance delivery of the course via the Internet for the coming academic year.

The second step to enhance the local application of HTA in health decision making is a one-year pilot program entitled ‘The Contextualized HTA Synthesis Program.’ Beginning in January, 2007, in partnership with key health decision makers in the province, HTA topics of relevance to the health care system were identified and prioritized. For the first year of this project, three high priority topics were chosen. For each topic, a team is put together,

including external advisers, an expert or experts in the health technology involved and a senior representative of the provincial health system. Each topic is then formulated as a research question susceptible to HTA methodologies. The team then finds the best HTA reviews on the question, synthesizes their findings, and contextualizes the results and recommendations so that they are as closely attuned as possible to the characteristics and capacities of the local populations and health organizations. A research team, under the leadership of Brendan Barrett of the Faculty of Medicine and Janice Butler of NLCAHR, has been constituted for the first synthesis project on the provision of dialysis services in rural and remote populations in Newfoundland and Labrador. A report is planned for the fall.

The overall goal of these combined programs is to fill the gaps in the capacity of the province to develop and use HTA as part of decision-making processes in health and community services.

## Capacity Development Activities

The Centre has produced a Capacity Development Strategy to help us meet some of our primary objectives as an organization. The strategy was produced in consultation with several stakeholders, including the Office of Research and the Office of Research and Graduate Studies in the Faculty of Medicine. Some of the activities arising from the strategy include:

- **Affinity Groups:** One of the most successful initiatives of this past year for NLCAHR has been our Research Affinity Group series, which brings together, on a regular basis, researchers who share a common interest in key areas under the domain of applied health research. Building on our initial research affinity group on Rural, Northern and Aboriginal Health formed in 2005, the Centre has now formed four additional research affinity groups; Women’s Health/Gender and Health; Aging; Applied Genetics; and Quantitative Analysis in Health Research. These groups have produced very positive feedback from participants and provide valuable networking opportunities.
- **Grant-writing workshops for researchers and graduate students:** In November of 2006, NLCAHR coordinated its second ‘Grant Writing Workshop,’ targeted at those with limited experience in applying for external research funding. Over 35 people attended this day-and-a-half workshop. Feedback from this workshop, collected through an online survey, was very positive, with nearly all respondents rating the session as “excellent.” NLCAHR will coordinate a third workshop of this kind in the fall of 2007.
- **Applied Health Researcher Support Program:** To provide increased support for new applied health researchers in Newfoundland and Labrador, NLCAHR began the ‘Applied Health Researcher Program’ in early 2007. As part of this program, researchers are able to obtain access to research advising/mentorship, proposal pre-review, research roundtable luncheons and grantsmanship training activities.
- **Other Resources and Activities:** In addition to the capacity-building activities described above, NLCAHR has continued to use its website to provide news on new and recurring funding opportunities, upcoming conferences, and other information of use to our stakeholders. Over the past year, staff at the Centre has also facilitated the formation of a research team interested in studying the impact of massage therapy on mental health.

## Financial Overview

**For the fiscal year April 2006- March 2007**

<b>Income for Fiscal Year 2006-2007</b>	
Balance as of March 31, 2006	444,000
Health and Community Services	500,000
<b>Total Income</b>	<b>944,000</b>

<b>Expenditures April 2006 – March 2007</b>	
Salaries and benefits	350,500
Operations	70,000
Awards Programs	187,000
Research Workshops	26,500
<b>Total Expenditures</b>	<b>634,000</b>
<b>Balance as of March 31, 2007</b>	<b>310,000</b>

Please note that the Health Technology Assessment program has been budgeted separately and managed through a separate research grant account since it is funded entirely through grants from the Canadian Agency for Drugs and Technologies in Health.

For **fiscal year 2007-2008**, we project a moderate increase in overall costs in order to continue our activities at the same level as last year, allow for ongoing fellowship commitments, upgrading of staff and inflation as well as costs to continue the executive training component of the HTA program for a third cycle after the grant from CADTH has run out.

## **Future directions**

In the coming year, NLCAHR will work to begin implementing its new five-year strategic plan as amended following suggestions made at the Stakeholder Forum in March. We will seek to enhance our presence ‘beyond the overpass’ by increasing the frequency and the quality of our collaboration with the regional health authorities managing services outside the immediate St. John’s region. We will concentrate on our ‘contextualized research synthesis’ programs, both in health technology assessment and in health services and health policy matters, as the best approach for getting the most impact out of our limited resources. We will also continue to emphasize collaborative activities with other research organizations such as the Harris Centre and the Newfoundland and Labrador Centre for Health Information, and we will continue to cultivate our relationships at the Atlantic and the national levels as a way of sharing best practices with organizations outside the province and of building linkages that can be used by our stakeholders both in the research community and in the world of policy makers. We will also continue to develop and support ‘affinity groups’ on new subjects of significance to this province as a way of multiplying synergies among researchers and research users and of supporting the development and the utilization of research in the province’s health system.

In addition, during the coming months, the Centre will be developing a new set of activities related to what has been called out “umbrella function,” that is, our role to facilitate and coordinate research and knowledge exchange activities in applied health research across the university and the province. At its first meeting following the Stakeholder Forum, the Centre’s Board responded to a request from the Deputy Minister of Health and Community Services that the Centre expand its umbrella activities. This will involve three tasks:

- Implementing an inventory, to be updated on a regular basis, of the applied health research being done in Newfoundland and Labrador by individual researchers, teams and centres;
- Monitoring and managing requests for partnerships and funding of research proposals made to the Department of Health and Community Services by Researchers at Memorial; and
- Coordinating the Department’s requests for external research work on applied health issues.

Over the summer of 2007, the Centre will be consulting with stakeholders and with leaders of other research centres about the design and implementation of these new activities.