



# Institute of Health Services and Policy Research

# IHSPR

January 2006



## Message from the Scientific Director

With this, our first newsletter of the new year, we usher in what will be an exciting and challenging year for IHSPR but, at the same time, a passage for some of us. By the time this appears in print and on our website, CIHR will likely be closer to announcing, the Institute's second Scientific Director commencing in September of this year. Current and former Board members were involved in interviewing candidates for the Scientific Director position.

However, the Institute is already adjusting to the end of an era, as we say farewell to our dedicated, talented and amazingly energetic Associate Director, Diane Watson. Diane will be commencing a new position as Director, Research and Analysis, at the Health Council of Canada this month. There is no aspect of the Institute's activities and achievements during its formative years that have not benefited from her positive influence. Whether pushing forward our ethics or data access best practices activities, or applying her skilled pen to new RFAs, or managing our strategic funding, or any number of other initiatives, large and small, Diane's contributions will be sorely missed. We are sorry to lose her a bit before we would have liked, but at the same time offer our warmest congratulations on a wonderful new challenge, and wish her all the best with the Health Council of Canada. Diane will establish a Vancouver office for the Health Council, and will retain her academic appointment with the Centre for Health Services and Policy Research at the University of British Columbia. Given the limited time left before the Institute transitions to new leadership, existing staff will pick up as much of Diane's former responsibilities as possible.

But in the midst of the often-difficult adjustments that come with transition, there is plenty of "business as usual." In this newsletter we highlight three new funding opportunities, and report on the results of our first Partnerships for Health System Improvement competition, as well as our October 2005 Research Community Development Program.

In the last few months of 2005, CIHR and IHSPR were heavily involved in knowledge translation activities surrounding the release of a set of key research reports funded under our "Toward Canadian Benchmarks for Health Services Wait Times" RFA. We are pleased to be able to report that the research commissioned through this RFA played a central role in the deliberations of our funding partners, the Provincial/Territorial Ministries of Health, as they developed their first round of benchmarks. While the December 31 milestone for those benchmarks has now passed, research opportunities and activity in this area continue. This includes final reports forthcoming from the first round of funded teams, and a second RFA posted in December 2005 to fund initiatives in specified clinical areas not funded in the February RFA.

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## New Funding Opportunities

### Toward Canadian Benchmarks for Health Services Wait Times – Evidence, Application And Research Priorities II

The first round of this RFA was launched in February 2005 to fund initiatives designed to inform the work of Provincial and Territorial Ministries of Health in establishing evidence-based benchmarks for medically acceptable wait times in select clinical areas (see "Wait Times Research Released").

The second round of this RFA is designed to fund initiatives to support the work of decision makers tasked with establishing evidence-based benchmarks for medically acceptable wait times in specified clinical areas not funded in the February RFA – cardiac procedures, diagnostic imaging, and cancer treatments and conditions not addressed by the four cancer research teams funded under the February 2005 RFA. As with the first wait time benchmarks RFA, this RFA will be governed by an accelerated application, adjudication, and funding process due to the urgent nature of the work.

Registration deadline – February 15, 2006  
Full application deadline – March 15, 2006  
<http://www.cihr-irsc.gc.ca/e/30087.html>

### Strategic Training Modules: Building Capacity to Conduct Research Syntheses Regarding Health Services and Policy Research

The purpose of this RFA is to support a minimum of two training initiatives designed to

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We are also delighted to announce the forthcoming publication of our first KT casebook, *Evidence in action, acting on evidence: A casebook of health services and policy research knowledge translation stories*. Our Advisory Board views this as an extremely important document in an environment where knowledge translation is taking on ever-greater importance. In demonstrating some of the remarkable examples of knowledge translation playing out across the country, and in many different areas of health services and policy research, this document will, we hope, find uses both in communicating the benefits of such research, and in providing concrete KT examples for training purposes. Check the KT section of the CIHR website for more details.

The Institute will be preoccupied in the near term with a key milestone – the External Review of all CIHR's Institutes, and of the organization as a whole. A distinguished International Review Panel will be undertaking the review in mid-February in Ottawa. We expect to be able to make the mid-term evaluation of IHSPR, the case studies developed as part of that review process, and the report of the international review team, available later this year. Stay tuned.



Morris Barer  
Scientific Director

## Funding Decisions

### Partnerships for Health System Improvement

CIHR and its partners are pleased to announce the results of the inaugural Partnerships for Health System Improvement (PHSI) competition.

The purpose of this initiative is to support teams of researchers and decision makers interested in conducting applied health research useful to health system managers and/or policy makers over the next two to five years. Successful teams will conduct health services, systems and policy research projects of up to three years in length, in thematic areas identified as high priority in national consultations.

Following the letter of intent (LOI) stage, in which 69 LOIs were received and merit reviewed, 43 applicants were invited to submit full proposals. Twenty were approved for funding following a second merit review stage. The funding contributions for this initiative, including cash and in-kind contributions from CIHR and all partners, total an investment of CAD \$8,111,538 over the next three years. For a complete listing of funded proposals, please visit <http://www.cihr-irsc.gc.ca/e/28941.html>.

The second CIHR PHSI competition was launched in October 2005. Please visit <http://www.cihr-irsc.gc.ca/e/29228.html> for more information.

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educate health services and policy researchers in methods of conducting syntheses in order to build additional capacity within the Canadian health services and policy research community to: (a) conduct research syntheses, and (b) understand, and further develop, the state of science regarding research syntheses and the translation of results to inform health care decision making. Possible training initiatives could include a series of workshops, short courses, summer institutes, or purpose-built courses within existing training programs.

Registration deadline – April 1, 2006  
Full application deadline – May 1, 2006  
<http://www.cihr-irsc.gc.ca/e/29914.html>

### Priority Announcements

Priority Announcements fund highly rated research applications that are determined to be relevant to CIHR's research priority areas and do not receive funding through CIHR's regular competitions. CIHR and IHSPR will provide funding for applications for either operating grants or fellowships that are determined to be relevant to:

1. One of the national priority areas identified in the *Listening for Direction II* consultations
2. Advancing theories, conceptual models or frameworks, research methods or measurement approaches that have broad application to health services, systems or policy research, or to understanding the translation of research into a strengthened Canadian health care system

### Operating Grants

Registration deadline – February 1, 2006  
Full application deadline – March 1, 2006  
<http://www.cihr-irsc.gc.ca/e/29677.html>

### Fellowships

Full application deadline – February 1, 2006  
<http://www.cihr-irsc.gc.ca/e/29913.html>

## Research Community Development Funding Program

IHSPR is accepting applications for workshops or research community development initiatives. The application form and guidelines are now available on IHSPR's website at <http://www.cihr-irsc.gc.ca/e/4112.html>. The deadline for this round of applications is February 15, 2006.

IHSPR's Research Community Development Program is intended to support health services and policy research initiatives that

contribute to the goals and objectives outlined in our strategic plan. Thematic research areas identified for priority investment are highlighted in *Listening for Direction II*, which is available at [http://www.chsrf.ca/other\\_documents/listening/index2\\_e.php](http://www.chsrf.ca/other_documents/listening/index2_e.php)

We are pleased to announce the following successful applicants to the October 2005 round of the Research Community Development Program:

Project Title	Nominated Principal Investigator	Research Institution
Building a National Research Network for Primary Care Research: A Workshop and Research Community Building Exercise Toward a National Practice-based Research Network	Richard Birtwhistle	Queen's University
Strengthening the Translation of Evidence into Policies (STEPS): Collaborative Workshops and Working Groups Between Decision-makers and Researchers	Malcolm Doupe	Manitoba Centre for Health Policy, University of Manitoba
La vie après le cancer: Vers le développement et l'intégration des services et des systèmes pour répondre aux besoins de soutien/réadaptation des survivants	Lise Fillion	Centre de recherche du CHUQ-HDQ
4th International DNA Sampling Conference: Genomics and Public Health	Bartha Maria Knoppers	Université de Montréal
Syndromic Surveillance Research Community: 1st National Conference	Kieran Moore	Queen's University
Governance and patient safety: How to make healthcare a high-reliability service	Samuel Sheps	University of British Columbia

## Wait Times Research Released

In November 2005, CIHR announced the release of eight research reports from the "Toward Canadian Benchmarks for Health Services Wait Times – Evidence, Application and Research Priorities" Request for Applications (RFA). IHSPR launched the RFA in February 2005, in partnership with Canada's Provincial and Territorial Ministries of Health, and the CIHR Institutes of Cancer Research, and Musculoskeletal Health and Arthritis. The purpose of the RFA was to fund research designed to inform the establishment of evidence-based benchmarks for medically acceptable wait times in select clinical areas.

Eight Canadian teams reviewed research evidence of relevance to

the establishment of wait time benchmarks for three priority treatment areas: cancer, joint replacement and sight restoration. The research teams synthesized Canadian and international evidence from the available research studies to help answer two main questions:

1. What does existing research say about the relationship between clinical condition, wait times and health outcomes or quality of life for individuals waiting for treatment?
2. What are the national or international wait time benchmarks (proposed or in use) for treatment, and what research evidence (if any) are they based on?

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The research findings were reported to the Provincial and Territorial Ministries of Health to inform their decision-making ahead of the December 31, 2005 deadline for establishing evidence-based benchmarks. The eight research teams will continue to investigate priority questions for future research that could be used to further inform the development and refinement of wait time benchmarks. They will deliver their final reports in spring 2006.

While similar research in the areas of cardiac care and diagnostic imaging was also solicited in February, no projects focused on those areas were funded at that time. IHSPR issued a second call for research for specified clinical areas not funded in the February RFA in December 2005 (see details under “New Funding Opportunities”).

CIHR-prepared summaries, and links to the full reports from the February 2005 RFA, are available on the CIHR website at <http://www.cihr-irsc.gc.ca/e/29902.html>.

## IHSPR Knowledge Translation casebook

IHSPR’s first knowledge translation (KT) casebook—*Evidence in action, acting on evidence: A casebook of health services and policy research knowledge translation stories*—highlights original submissions from across Canada that focus on lessons learned from both successful, and less than successful, KT activities. Designed as a means for researchers and decision makers to share and recognize their experiences, the casebook also demonstrates the impact that such research can have in shaping policy, program and practice changes.

The casebook was initiated with an IHSPR call for brief descriptions of KT stories or cases in early 2005. Individuals, teams and organizations working in health care services and policy, particularly in the national priority areas for research and knowledge translation identified in *Listening for Direction II*, were invited to contribute. Cases for full submission were selected through a review of submitted abstracts, with the case authors then working with IHSPR to develop and refine their submissions for final publication.

The casebook represents a broad cross-section of experiences—from the preliminary development of partnerships for future KT in Aboriginal communities, to the use of established KT networks to rapidly respond to a community in crisis. Widely-acclaimed KT models, like SEARCH Canada and Manitoba’s *The Need to Know Team* are showcased, but the casebook also highlights efforts to

develop new kinds of partnerships: between researchers and community-based organizations, between researchers and advocacy groups, and between multiple partners and dedicated KT brokers and champions.



CIHR’s Institute of Population and Public Health, in partnership with the Canadian Population Health Initiative, has concurrently produced a KT casebook focusing on population and public health research—*Moving population and public health knowledge into action: A casebook of knowledge translation stories*.

Check the KT section of CIHR’s website at [www.cihr-irsc.gc.ca](http://www.cihr-irsc.gc.ca) for more details.

## New CIHR e-bulletin for researchers



CIHR has launched a new electronic newsletter for the research community. This e-bulletin, the "CIHR E-Alert: News for Researchers," is designed to provide regularly scheduled news updates from CIHR on funding opportunities, changes to application and funding policies, updates to peer review and Institute news.

The e-bulletin is offered as a free subscription. Please visit CIHR's website at <http://www.cihr-irsc.gc.ca/e/26626.html> to view the latest issue and to subscribe directly.

## Institute Transition

**2005** marked the fifth birthday of CIHR and its Institutes. In keeping with the original vision of CIHR, the leadership and location of the Institutes is to be periodically refreshed to ensure continual renewal of energy and ideas. Effective the end of summer 2006, Morris Barer, the Institute's inaugural Scientific Director, will pass the torch to a new Scientific Director of IHSPR.

The transition process will result in more than just new Scientific Directorship. It will likely mean some new staff, and possibly a new physical home for the Institute, since location will be determined by the next Scientific Director. IHSPR staff in Vancouver and Ottawa, the Institute's Advisory Board, and senior CIHR management in Ottawa will be working through a series of steps to ensure this transition proceeds smoothly and seamlessly, to be completed by August 31, 2006.

The staff at CIHR and IHSPR, as well as our Advisory Board, is fully committed to ensuring continuity and stability during this period of transition. Programs underway, as well as those currently in development, will continue to move forward without interruption. The role of the Institute Advisory Board (IAB) is particularly important in this respect, as many of its current members will continue on past the point of transition. IAB members have been central in the evolution of the Institute's strategic plan, and so are committed to ensuring that the important work we have begun together is sustained and enhanced.

The recruitment of the new Scientific Director is currently underway and it is anticipated that the incumbent will be announced in spring 2006. Please visit IHSPR's website over the coming months for additional news about IHSPR's transition at <http://www.cihr-irsc.gc.ca/ihspr.html>.

## CAHSPR Poster Competition

The September 2005 Canadian Association for Health Services and Policy Research (CAHSPR) conference included plenary speakers David Mowat, Gilles Paradis, Steven Lewis, Martha Jackman, Michael Wolfson, Ross Baker and Terry Sullivan. The Canadian Health Services Research Foundation hosted a health services and policy research advancement award reception, and IHSPR sponsored a poster forum, with three student awards and two non-student awards.

### Student Award Winners:

- First Prize: Truc Huynh – Collaboration in Wound Care
- Second Prize: Alice Chen – Utilization of Medical Specialists by Recent Immigrants in British Columbia

- Third Prize: Mylène Kosseim – The Montérégie Regional Health Project: Identifying targets for improving the health system's impact on population health

### Non-Student Award Winners:

- First Prize: Maria Mathews – Retention of the Memorial University of Newfoundland medical graduates from Newfoundland
- Second Prize: Sarah Hayward – Evaluation of the Swift Efficient Application of Research in Community Health (SEARCH) program

IHSPR and CAHSPR would like to extend our sincere thanks to the three poster competition judges, Pascale Lehoux, Paula Goering and Allan Best.

The next CAHSPR conference has been scheduled for September 18-21, 2006, in Vancouver, in conjunction with the CHSRF Symposium on Primary Care.

## IHSPR MANDATE

The CIHR Institute of Health Services and Policy Research is dedicated to supporting outstanding research, capacity-building and knowledge translation initiatives designed to improve the way health care services are organized, regulated, managed, financed, paid for, used and delivered, in the interest of improving the health and quality of life of all Canadians.



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