



Canadian Institutes of Health Research Instituts de recherche en santé du Canada

Institute of Health Services and Policy Research

Annual Report of Activities April 2002 - March 2003



CIHR IRSC
Canadian Institutes of Health Research Institut de recherche en santé du Canada

Canada

Institute of Health Services and Policy Research
Canadian Institutes of Health Research
209-2150 Western Parkway
Vancouver, BC V6T 1V6
www.cihr-irsc.gc.ca

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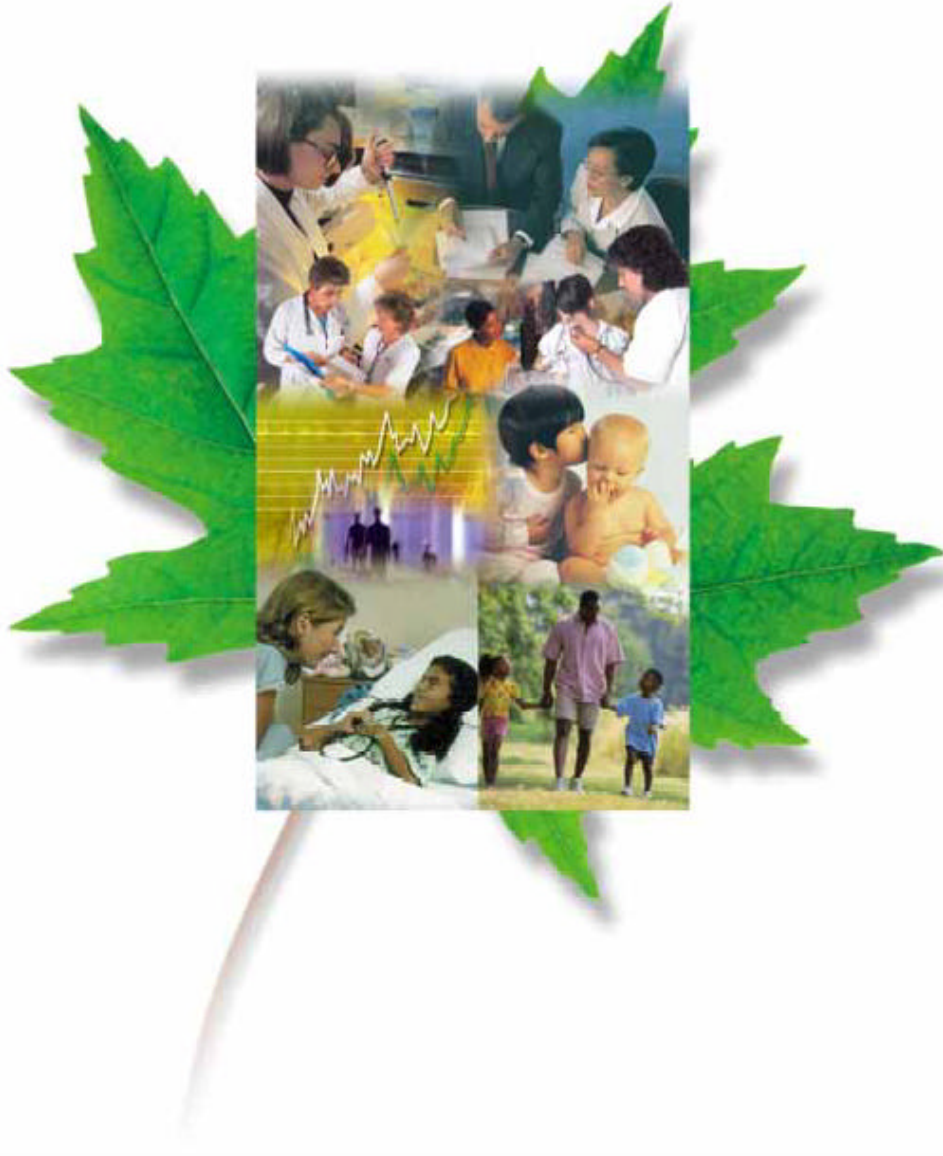


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Message from the Scientific Director and Assistant Director

During the 2002-2003 fiscal year, IHSPR completed and published its Strategic Plan, Health Services and Policy Research: Making the BEST of Canadian Health Care (http://www.cihrirsc.gc.ca/institutes/ihspr/publications/ihspr_strategic_plan_e.pdf). The Plan reflects extensive discussions at the Institute's Advisory Board meetings, and will guide Institute investments and activities for the next two to five years. It includes the following strategic goals:

Build a Community of Excellent Researchers

More individuals with the requisite skills and experience are needed to conduct outstanding health services and policy research, therefore IHSPR will:

- Increase the supply of excellent researchers
- Increase capacity for expert training and mentoring, in interdisciplinary environments
- Encourage new collaborations

Expand and Enhance Research Resources

In order to conduct outstanding research, investigators must work within robust, supportive research environments. IHSPR will:

- Develop and improve researchers' access to data regarding health and health services
- Support the development and use of new tools, frameworks and methods for health services, health policy, and knowledge translation research

Support Strategic Research

The best available research evidence should inform the decisions of health care policy makers, administrators and clinicians. IHSPR will:

- Identify and prioritize information needs of decision-makers and the public
- Support research in prioritized areas
- Support strategic initiatives of other funders, where there is potential to enhance research, or researcher capacity relating to health services, systems or policy

Translate Knowledge

Effective knowledge translation requires continuous interaction between researchers and users of research. IHSPR will:

- Enhance the supply of researchers in the area of knowledge translation
- Support the development of environments involving, and tools for, sustained interactions between researchers and research users
- Support effective approaches to translating knowledge

Organizational Excellence

IHSPR is committed to assuming a leadership and coordination role in the health services and policy research community. It will:

- Encourage innovation and effectiveness in IHSPR programs, initiatives and structures

This Annual Report summarizes IHSPR's progress on these strategic directions using a standardized reporting framework that has been implemented across all CIHR Institutes. The framework includes:

- Outstanding Research
- Excellent Researchers in a Robust Research Environment
- Translation and Use of Knowledge
- Partnerships and Public Engagement
- Organizational Excellence

Morris Barer,
Scientific Director



Diane Watson,
Assistant Director



Outstanding Research

Identify and prioritize information needs of decision-makers and the public

One important way in which IHSPR ensures research topics it financially supports remain current and focused is to fund workshops that further understanding of current and emerging research priorities. Eligible workshop applications have among their objectives: to reach consensus on priority policy issues and research questions in specific areas within the general ambit of health services and policy research; to develop innovative and relevant CIHR operating grant applications; and/or to develop proposals for future IHSPR strategic research initiatives.

Between April 2002 and March 2003, IHSPR funded 12 workshops or similar development events in partnership with other CIHR Institutes and organizations. Examples include “Precedent and Innovation: Health Law in the 21st Century” (September 2002); “International Workshop on Research Methods for the Investigation of Complementary and Alternative (CAM) Whole Systems” (October 2002); and “Technology Enabled Knowledge Translation” (TEKT) (March 2003). A full list of funded workshops can be found in Appendix I.


IHSPR also invests in background papers and participates in national consultations in order to better understand current and emerging health system issues and to design strategic funding initiatives for CIHR. For example, IHSPR’s Scientific and Assistant Directors played active leadership roles in a number of strategic research areas deemed important by all CIHR Institutes in 2002/03. These activities included developmental workshops and national consultations in areas such as injury prevention, rehabilitation and control; and ethical and privacy issues in health research.

Research on Issues related to Privacy, Access and Health Research

In November 2002, CIHR and six partners sponsored a workshop entitled “Privacy in Health Research: Sharing Perspectives and Paving the Way Forward”. Over a hundred participants engaged in constructive dialogue aimed at fostering new understandings, proposals, partnerships and collaborations. These participants included privacy guardians, policy-makers, data producers, health service providers, health researchers, public funders, health charities, consumers, research ethics boards, as well as experts in law, ethics and privacy implementation. IHSPR and the CIHR Ethics Office used feedback from this and other workshops regarding priority research issues to design and post a Request for Applications (RFA) in July 2003.

Research into Genetic Testing Services and Related Matters

An environmental scan was commissioned by the CIHR Institute of Genetics and IHSPR to provide an overview of policy documents and reports and to identify past and current research on the subject of genetics and health services. It was designed to capture relevant policy and research activity regarding the social, legal, ethical, health service and health care policy implications surrounding the use of genetic technologies in health care (mainly genetic testing). To read the full report, please visit (http://www.cihrrisc.gc.ca/services/funding/opportunities/institutes/2002/enviro_scan_e.pdf). Subsequent to this report and a series of national consultations, the Institutes designed and posted an RFA in November 2002, in collaboration with the Federal/ Provincial/ Territorial Coordinating Committee on Genetics and Health, entitled *Staying Ahead of the Wave: Genetics, Health Services and Health Policy*. The purpose of this initiative is to provide development funds in support of initiatives likely to lead to longer term research proposals or programs



of inquiry to address the most important, emerging issues facing the Canadian health care system in response to new understandings about human genetics, and the burgeoning of genetic information, technologies, products and services.

International review of approaches to planning for health human resources (HHR)

The Canadian Health Services Research Foundation (CHSRF), in partnership with IHSPR, commissioned a background paper on international best practices in translating research into the HHR planning process. IHSPR helped define the original scope of the paper and arranged and covered the cost of peer review. IHSPR had a particular interest in the nature of the interaction between the overall models used for planning health services delivery and the approaches taken to HHR education, regulation, deployment and planning, and the role of research in the planning processes and policy implementation in all these areas. Five exemplar countries were studied, with a primary objective of identifying approaches that might be of use in Canada. To read the final report *Planning human resources in health care: Towards an economic approach*, by Karen Bloor and Alan Maynard (University of York, England), please visit: http://www.chsrf.ca/docs/finalrpts/bloor_report.pdf.

Canadian Tobacco Control Research Summit – April 19-21, 2002

IHSPR's Scientific Director served on the steering committee for the Canadian Tobacco Control Research Summit (CTCRS). Led by the Canadian Tobacco Control Research Initiative and the CIHR Institute of Neurosciences, Mental Health and Addiction, the purpose of the CTCRS was to develop a strategic research agenda that would help lead to a significant reduction in tobacco use and its associated harm in Canada from 2002-2012. Summit participants established themes for research topic areas and methodologies related to tobacco control, including foci on: Aboriginal Peoples; Determinants of Tobacco

Use; Economics of Tobacco Control; and, New Paradigm for Tobacco Control Intervention Research. The summit was seen as a preliminary step in a comprehensive and iterative process. It is anticipated that one outcome of the summit will be an RFA entitled *Advancing the Science to Reduce Tobacco Abuse and Nicotine Addiction*, funded by one or more CIHR Institutes. To read the full report from the CTCRS, entitled *Towards a Coordinated Research Agenda to Reduce Tobacco-Related Problems in Canada*, please visit <http://www.ctcri.ca/enpages/summitreport.htm>.

Support research in prioritized areas where there is potential to enhance research, or researcher capacity relating to health services, systems or policy

In line with goals in the Institute's Strategic Plan – to support strategic research identified as important to the current and emerging information needs of policy, administrative and clinical decision-makers and the public – IHSPR, in collaboration with its partners, awarded grants in 2002/03 to researchers through the following funding programs:

Improving Access to Appropriate Health Services for Marginalized Groups

Originally offered in 2001/02, the purpose of this RFA was to develop new approaches to identifying 'marginalized populations', to increase the understanding of negative impacts on health or quality of life of differential access to particular types of appropriate services, and to articulate key barriers to access to appropriate care. In 2002/03, a second competition resulted in IHSPR funding seven applications in collaboration with the CIHR Institutes of Aboriginal Peoples' Health; Gender and Health; Neurosciences, Mental Health and Addiction; and, Population and Public Health. See Appendix 2 for a list of titles and Principal Investigators.

Analysis of Canadian Community Health Survey on Mental Health and Well Being

The purpose of this initiative is to provide targeted opportunities for expert analysis of Canadian Community Health Survey data in the area of access to and use of health services among those with mental health conditions. The objective of this initiative is to improve the availability of evidence for decision-makers working in this priority area. This initiative was posted in collaboration with Statistics Canada and CIHR's Institutes of Neurosciences, Mental Health and Addiction, and Gender and Health.

Building Healthy Communities Through Rural and Northern Health Research

The goal of this strategic initiative is to foster research on three key themes focusing on small and remote communities:

(1) understanding and improving the health status of rural and northern populations, (2) designing health systems, services and policy that work for small and remote communities, and, (3) knowledge translation – making health research more accessible and useable by rural and northern practitioners, policy-makers and citizens. This RFA was structured to develop and strengthen interdisciplinary research teams that are interested in rural and northern health-related issues, including the keys to developing and supporting health communities. Four grants were funded by IHSPR in collaboration with a number of partners, including all CIHR Institutes. See Appendix 2 for a list of titles and Principal Investigators.

Reducing Health Disparities & Promoting Equity for Vulnerable Populations

The purpose of this RFA is to build research capacity that assesses and reduces health disparities and promotes equity for vulnerable populations. These development grants were intended to enable interdisciplinary groups of researchers in health and other sectors to develop programs of research that describe, investigate and ultimately inform policies to reduce health disparities. The grants are

seen as leading to subsequent proposals for building Canadian capacity and expanding research activity (including intervention studies) in this field. Four development grants were funded by IHSPR in collaboration with Health Canada and the Institutes of Aging; Gender and Health; Human Development, Child and Youth Health; Neurosciences, Mental Health and Addiction; and Population and Public Health. See Appendix 2 for a list of titles and Principal Investigators.

Global Health Research Program Development & Planning Grants

This RFA provided research program development and planning grants to build research capacity in Canada to investigate, design and evaluate interventions focused on ecological, technological, economic, political and socio-cultural forces that influence health, and/or major health and health systems problems globally. This funding initiative was designed specifically to build research capacity in low and middle-income, as well as to strengthen North-South collaboration in global health research. IHSPR funded five grants in this competition, in collaboration with the CIHR Institutes of Aboriginal People's Health; Infection and Immunity; and Population and Public Health. See Appendix 2 for a list of titles and Principal Investigators.

Financing Health Care in the Face of Changing Public Expectations

Originally offered in 2001/02, the purpose of this RFA was to support excellent, innovative, cross-disciplinary research projects to help inform policy and management decisions in Canada regarding: the extent and reach of public funding for health care as it affects accessibility, use, cost and quality; the role of public values and expectations in determining what is publicly funded; and the effects of changes in public financing on the largely hidden burden borne by families and other informal care givers. Unfortunately, there were no successful applications in the 2002/03 competition. IHSPR is planning a workshop early in 2003/04 to identify and

address factors related to research capacity and responsiveness in this important area. An RFA on this topic may be posted during 2003/04, dependent on the outcomes of that workshop.

Adverse Events in Canadian Hospitals

The research project Adverse Events In Canadian Hospitals, led by co-Principal Investigators Peter Norton and Ross Baker, was co-funded by CIHR and Canadian Institutes of Health Information (CIHI), in response to an RFA entitled Improving the Quality of Health Care in Canadian Hospitals: A Research Study. Alongside the decision to fund the research grant is a commitment to host three stakeholder meetings. The first national stakeholder forum was held in Alymer, Quebec in June 2002. The research methodology, the anticipated findings and international research results and reactions were shared with stakeholders including the Canadian Healthcare Association, the Canadian Medical Association, Canadian Nurses Association, and the Association of Canadian Academic Healthcare Organizations. Watch

for updates on this project in next year's annual report.

Open Competition Grants

In addition to RFAs, IHSPR invested funds in 2002/03 to support investigator-initiated grant applications that aligned with topics identified as priorities in its Strategic Plan. IHSPR funded 9 such grants from the CIHR Open Grants Competition (March 2002) in areas such as measuring quality of services, cross-provincial comparison of health care policy reform, priority setting in hospitals, and access to care. IHSPR also funded 10 such grants that were highly rated in CHSRF's open grants competition, in areas such as continuity of care and health human resources. See Appendix 3 for a list of titles and Principal Investigators.



Michelle Gagnon, Senior Associate, Partnership and Knowledge Translation, IHSPR and Morris Barer, Scientific Director, IHSPR.

Excellent Researchers in a Robust Research Environment

Increase the supply of excellent researchers and capacity for expert training and mentoring in interdisciplinary environments

CIHR's Strategic Training Initiative in Health Research was established in 2001 to train and develop new researchers, and IHSPR-funded training programs were listed in its 2001/02 Annual Report. In 2002/03 IHSPR participated in a second, more focused training initiatives RFA, intended to support training programs in areas of need that were not funded in the 2001 competition. IHSPR identified training programs in mental health services and policy research, and training programs that straddle population and public health research and health services and policy research (building around common core curricula) as unmet priorities. As a result of this second competition, IHSPR supported four additional training programs, two in each of these priority areas. See Appendix 4 for a list of training programs that were approved for funding in 2002/03.

In addition to supporting training programs, IHSPR also, in 2002, made funding available to support a number of additional trainees (Ph.D. students and post-doctoral fellows) who were highly rated in the September 2001 competition, and whose research falls within the Institute's mandate. See Appendix 5 for a list of titles and successful applicants.

In January 2002, CIHR convened a meeting for Canadian trainees, at which issues for emerging researchers were identified and discussed. The final report summarizing this event, entitled *Visions of the future: Health researchers of tomorrow speak out* provides insight into the thoughts and concerns of the next generation of Canadian health researchers, and serves as a basis for further discussion and action. This report is available online at http://www.cihrrisc.gc.ca/services/initiatives/health_research_training_e.pdf.

As reported in our Annual Report of Activities: January 2001 – March 2002, CHSRF established the Capacity for Applied and Developmental Research and Evaluation in Health Services and Nursing (CADRE) program, in partnership with CIHR, to address short and long-term capacity building in the applied health services and policy research community. This multi-dimensional program is administered by CHSRF, and most elements of it are co-funded by CIHR. In the 2002 CADRE Post-Doctoral Award Competition, 14 post-doctoral candidates received awards. See Appendix 6 for a list of titles and successful applicants. For information about other CADRE initiatives, please refer to "Translation and Use of Knowledge" section later in this report.

IHSPR also provided CHSRF with funding to assist with the travel and meeting costs associated with bringing students working with each CADRE Chair and Training Centre to a workshop in October 2002 in Canmore, Alberta. The focus of the workshop was on education and mentoring issues, as defined by the students.

Encourage new collaborations

The *Interdisciplinary Capacity Enhancement (ICE) Teams RFA* was designed to address key strategic research themes through the creation of strong intra- and inter-institution mentoring arrangements to add expertise to core capabilities, and to develop team-embodied strategies for knowledge translation. ICE Team grants provide support for groups of researchers who build interdisciplinary research capacity, attract and mentor new health services and policy researchers, and make a strong commitment to knowledge translation. IHSPR and its partners awarded 13 ICE Team grants in the 2002/03 fiscal year, averaging \$1 million each over five years. Examples of research topics include complementary and alternative medicine, pharmaceutical drug policy, primary care, patient safety, and e-health. IHSPR is

particularly pleased to have been able to develop a number of innovative partnerships for this initiative.

Partners include organizations such as the Canadian Medical Association; Fonds de la recherche en santé du Québec (FRSQ); Health Canada's Natural Health Products Directorate; the Ontario Ministry of Health and Long Term Care; and, Safe Kids Canada, as well as CIHR's Partnerships & Knowledge Translation Portfolio and Institutes of Gender and Health; Genetics; Infection and Immunity; Musculoskeletal Health and Arthritis; Neurosciences, Mental Health and Addiction; and Population and Public Health. Information about funded teams can be found at [http://www.cihr-irsc.gc.ca/publications/funding/decisions/2003/200210ice_e.shtml], or see Appendix 2 for a list of titles and Principal Investigators.

New Emerging Team (NET) Grants

The NET grant is designed to provide five years of support for the creation or development of teams of independent investigators undertaking collaborative multidisciplinary research in Canadian research institutions. Successful teams will support multidisciplinary and cross-theme research in identified areas of focus and support the training and establishment of new investigators within these areas. In 2002/03, IHSPR had the opportunity to partner in supporting two teams, in collaboration with the Canadian Bacterial Diseases Network and the CIHR

Institutes of Aging and Infection and Immunity. See Appendix 2 for a list of titles and Principal Investigators.

Several of IHSPR's other initiatives reflect the continuing priority the Institute places on encouraging new and enhanced interdisciplinary collaborations and interactions with decision-makers. Following upon the progress made during 2001/02, IHSPR, in collaboration with CHSRF, continued to work with and support the Canadian Health Economics Research Association (CHERA) as it gathered additional information necessary to support a transition toward a more broadly-based membership association for health services and policy researchers and research users in Canada. As of time of writing, it appears likely that a new Association will emerge in the coming year.

Planning began in 2002/03 for IHSPR's inaugural national symposium, Strengthening the Foundations: Health Services and Policy Research—Canadian Health Care. This event will bring together leading Canadian researchers, young investigators, and health care policy-makers and managers, to discuss the important roles of health services and policy research in finding solutions to Canada's most pressing health care system and service delivery issues. Strengthening the Foundations will provide an opportunity for networking, community and collaborative development, and showcasing of some of the innovative teams and research that have been supported by CIHR. This event



Inaugural meeting of the Eastern Canadian Consortium of Workplace Health and Safety – ICE Team.

will be held in November 2003, and it is expected that the newly formed national association will host a similar event in 2004. Program and speaker information can be found at the symposium website: www.ellisriley.on.ca/IHSPR.

Develop and improve researchers' access to data regarding health and health services

The Scientific and Assistant Directors participated in the development and presentation of a CIHR Workshop entitled *Privacy in Health Research: Sharing Perspectives and Paving the Way Forward*. This November 2002 event was developed under the leadership of CIHR's Ethics Office, in partnership with a number of CIHR Institutes, and reflects CIHR's commitment to ensuring a research environment in Canada that supports the use of health and other information for research purposes. Topics covered included areas such as privacy legislation and data access policies; the development of best practices for health researchers; the roles and responsibilities of research ethics boards; and the identification of research priorities in this area. IHSPR committed additional staff resources to this area during fiscal 2002-03, by playing a lead role in the development of a workshop series entitled *Harmonizing Research Privacy: Standards for a Collaborative Future*. The goals of these events will be to identify and synthesize Canadian health services and policy researchers' needs and knowledge to develop recommendations for harmonized privacy standards, policies and best practices for the protection of personal health information collected, used and disclosed in the context of conducting health services and policy research. The workshops will take place in October 2003 and February 2004. These workshops are being developed under the leadership of Jack Williams, Andreas Laupacis and Noralou Roos and are being supported by IHSPR in collaboration with the Canadian Institute of Health Information's Canadian Population Health Initiative (CIHI-CPHI) and a number of other CIHR Institutes.

Following a national workshop in June 2000, and in collaboration with the CIHR Institute of Population and Public Health, IHSPR developed a Request for Proposals (RFP) entitled *Population-Based Health and Health Services Databases in Canada*. The purpose of this initiative is to describe the current status of population-based health and health services databases in Canada that are being used and show the potential for use in innovative and important health research. In light of a low response rate to the May 2002 launch of this RFP, this initiative was re-issued in December 2002 in collaboration with other CIHR Institutes, Health Canada, Statistics Canada and the CIHI-CPHI. Funding decisions will be made following peer review in 2003.

Support the development and use of new tools, frameworks and methods for health services, health policy, and knowledge translation research

In 2002/03 IHSPR, in partnership with the CIHR Institute of Population and Public Health, undertook consultations in order to develop the RFA *Advancing Theories, Frameworks, Methods and Measurement in Health Services & Policy, Population and Public Health Research and Knowledge Translation*. This RFA is intended to support research likely to lead to new theoretical, conceptual, methodological or measurement breakthroughs with broad application to health services and population and public health, or to better understand the translation of research into a strengthened Canadian health care system and improved health for Canadians. Adjudication and funding will occur in 2003/04.

Translation and Use of Knowledge

IHSPR is committed to enhancing the supply of researchers who engage in, or teach others how to engage in, best practices in the area of knowledge translation. In line with the goals outlined in our strategic plan, we continue to work with our partners to develop and sustain continuous, long-term interactions between health services and policy researchers and research users.

All of the Institute's strategic research initiatives, including those that are in partnership, emphasize the importance of translating evidence and new knowledge so that they are reflected in the decision-making of health care professionals, managers, and policy-makers. This emphasis takes a variety of forms, from requiring that applicants responding to RFAs provide detailed descriptions of decision-making partners and how they will be engaged in the research process, to requiring that funded workshops involve individuals and organizations likely to be affected by the outcomes of strategic priorities identified in those workshops, to supporting a training centre dedicated to knowledge translation.

Knowledge translation, for example, is an integral requirement of the ICE Teams that the Institute is now supporting. This program aims to address a growing number of important health research questions in the

face of critical deficits in research capacity, by extending capacity among teams of investigators who are poised to conduct research and translate knowledge in strategically important research areas.


Each successful team articulated a clear and achievable knowledge translation strategy, including the integration of knowledge translation into the routine activities of their ICE teams.

Enhance the supply of researchers in the area of knowledge translation

The Institute's key partner in the area of knowledge translation is CHSRF. As noted earlier, CHSRF administers the multi-dimensional CADRE program. One component of the CADRE program is the development of regional and national training centres, each of which consists of a consortium of universities. There are currently five training centres operating across Canada. One of these is the Centre for Knowledge Transfer, a national training centre dedicated to knowledge utilization and policy implementation, led by scholars at the University of Alberta, in partnership with the University of Manitoba, University of Saskatchewan and Laval University. The mandate of the Centre for Knowledge Transfer is to: provide training to



*Morris Barer —
Scientific Director
IHSPR (fourth from
the right) at a meeting
of the CADRE Ontario
Training Centre.*



researchers and to students to do knowledge transfer in the health sector; train scholars in the field of knowledge transfer with the aim of building capacity; engage decision makers to maximize policy relevance of knowledge transfer training and scholarship; and increase knowledge transfer skills among health care managers and professionals to promote research/evidence based decision-making. For more information about the Centre for Knowledge Transfer, please go to www.nursing.ualberta.ca/knowledgetransfer/.

Support the development of environments involving, and tools for, sustained interactions between researchers and research users

IHSPR's IAB working group on knowledge translation was established to provide strategic guidance and continues to review IHSPR's knowledge translation priorities. IHSPR is committed to working closely with the knowledge translation portfolio at CIHR to support the development of tools and mechanisms that will help create a supportive knowledge translation environment for health services and policy researchers.

Support effective approaches to translating knowledge

Building on the work of the previous year, IHSPR continues to explore the interest and potential for developing a new peer-reviewed publication outlet for Canadian health services and policy research. Early in 2003, IHSPR retained a consultant to conduct a survey to refresh our understanding of the level of perceived need for, and interest in, additional capacity for communicating Canadian-relevant health services and policy research to interested researchers and clinical and policy decision-makers. As of time of writing, planning for the survey and key informant interviews are well under way. A second phase of this developmental work will involve discussions with potential publishers and editors regarding the feasibility of, and their interest in, expanding publication capacity in this area.

The Institute anticipates continuing to move forward on this important knowledge translation initiative within the next fiscal year, assuming results from the survey and subsequent discussions are supportive of doing so.

IHSPR, along with all other CIHR Institutes, contributed funds to a workshop entitled Technology Enabled Knowledge Translation (TEKT): Current Best Practices in Innovation, Evaluation, and Future Directions. The purpose of the workshop was to explore the specific issues surrounding research in, and evaluation of, knowledge and policy translation strategies, using information and communication technologies as enabling tools. The workshop focused on issues such as:

- The importance of knowledge translation research in facilitating the incorporation of knowledge into clinical practice and policy
- The creation of a network of technology-enabled knowledge translation health researchers for mutual exchange of ideas and future collaboration
- Examples of technology-enabled strategies in non-health related domains and how they can be applied to knowledge translation in health
- The issues and directions in technology-enabled knowledge translation research in Canada, and the need for stimulation of knowledge translation research to address these issues

For more information about the workshop and its outcomes, please go to http://www.cme.med.ubc.ca/scripts/index.asp?action=31&P_ID=271&U_ID=0&N_IDI.

A number of workshops funded in part by IHSPR in 2002/03 addressed knowledge translation in their objectives:

The workshop titled Germany – Canada Cooperation in Health Telematics: Trustworthy Personal Health Information aimed to share experiences between Canada and Germany to facilitate continuing research collaboration on health information systems, the use of information and communications technologies, and knowledge transfer to support the public, patients and health care providers to make informed choices and decisions through trustworthy health information.

The First Canadian National Undergraduate Bioethics Conference stressed as one of its goals to contribute to health research and the exchange of knowledge between professionals and students from across Canada, within the context of the Canadian legal and healthcare systems.

The IPPH-led workshop Towards a Healthier Global Village: Consolidating Canadian Capacity for Global Health Policy and Systems Research addressed the need to consolidate, co-ordinate and promote existing Canadian expertise in health systems and policy evaluation as well as population and

public health research. It underlined the necessity of an integrated approach to ensure that research findings are readily translatable from either domain to policy-makers in order to effectively tackle the complexities of improving the health of populations.

RFA – Knowledge Translation Strategies for Health Research

The CIHR approach to knowledge translation is based on the belief that the flow of health knowledge into beneficial actions can be accelerated by ensuring that the translation of knowledge is an integral part of the entire research cycle. The goals of this RFA are (1) to strengthen the foundations of research that underpin knowledge translation; (2) to encourage researchers in knowledge translation to focus their work increasingly on the thirteen CIHR Institutes and their health research priorities; and (3) to promote research on how best to integrate knowledge translation and practice into the training and continuing education of health professionals. IHSPR collaborated on the funding of fifteen grants in this initiative, with the CIHR Institutes of Aging; Gender and Health; Genetics; Musculoskeletal Health and Arthritis; Neurosciences, Mental Health and Addiction; and Nutrition, Metabolism and Diabetes. CIHR's Knowledge Translation portfolio was the lead on this initiative. See Appendix 7 for a list of titles and Principal Investigators.

Partnerships and Public Engagement

Partnering with key national, provincial and territorial partners to identify, focus and support research and knowledge translation priorities

In 2001 IHSPR partnered with four national organizational partners to engage health care managers and policy makers in a national consultation process to define the most pressing current and emerging issues for health care services and policy attention. The final report, *Listening for Direction: A National Consultation on Health Services and Policy Issues* (www.chsrf.ca/docs/pconsult/frpt_e.shtml) enabled IHSPR's Advisory Board and Scientific Director to move forward with confidence in setting strategic goals and priorities. Planning is underway for another round of national consultation on issues and research priorities, to take place in early 2004.

The partners established for the Listening for Direction initiative have continued to address common issues by way of the Coordinating Committee for Health Services Research (CCHSR) that meets regularly. Among the issues that have been addressed by this committee are the common need for a researcher and research user database for communication and planning purposes; and developing more structured and effective forms of knowledge translation, particularly with senior national and provincial policy-makers involved in the various Federal, Provincial and Territorial Advisory Committees.

IHSPR has also funded numerous developmental workshops and other events that have been collaborative ventures with key national, provincial and territorial partners. For example, in September 2002 the Institute partnered with the Alberta Law Foundation and other sponsors such as Genome Prairie and the University of Alberta Conference Fund, to support the conference *Precedent & Innovation: Health Law in the 21st Century*.

As well, IHSPR was the lead sponsor of the International Workshop on Research Methods for the Investigation of CAM Whole Systems, in collaboration with international organizations such as the National Center for Complementary and Alternative Medicine (NCCAM) in the National Institutes of Health (USA); national organizations such as the National Health Products Directorate, Health Canada; and other organizations such as the Hospital for Sick Children Foundation.

As detailed throughout this Annual Report, IHSPR has developed several new collaborations to support and expand its investments in strategic research. Among the new linkages are partnerships between CIHR and organizations such as the Canadian Medical Association and Ontario Ministry of Health and Long Term Care.



The Precedent and Innovation Conference, 2002. From left to right are Timothy Caulfield of the Health Law Institute (University of Alberta), David Percy, Dean (University of Alberta), Conrad Brunk (University of Victoria), and Madam Justice Ellen Picard.

Public Engagement

Research suggests that Canadians care passionately about their health care system and that their top priority includes universal access to affordable health care on the basis of need. IHSPR has responded to these views through the selection and focus of its strategic investments. RFAs such as Improving Access to Appropriate Health Services for Marginalized Groups, Reducing Health Disparities & Promoting Equity for Vulnerable Populations and Financing Health Care in the Face of Changing Public Expectations reflect IHSPR's ongoing commitment to supporting important research in areas of concern to the Canadian public.



Diane Watson, Assistant Director, IHSPR

Through Institute staff and IAB member interactions with the media and federal and provincial commissions and committees, IHSPR has worked to engage and communicate with the public by striving to increase public understanding of health services, systems and policy. During the deliberations of the Commission on the Future of Health Care in Canada, IHSPR partnered with the Romanow Commission to arrange for arm's-length peer reviews of background papers being prepared for the Commission that would subsequently be made available to the public. Following the release of the Commission's and the Standing Senate Committee on Social Affairs, Science and Technology's reports, IHSPR's advisory board and directorship were actively engaged

with the public through the media regarding health systems and policy issues. For example, a CIHR media analysis report found that comments by IHSPR's Assistant Director about Commissioner Romanow's recommendations on centralizing waiting lists, picked up in the media, reached an audience of over 1.5 million Canadians.

In December 2002, an article by the Scientific Director and colleagues Steve Morgan and Robert Evans (from the University of British Columbia (UBC) Centre for Health Services and Policy Research), titled 'Medicare watch: Claims of unsustainability unsustainable', appeared in the Winnipeg Free Press and was republished in the Toronto Star in an article titled 'Of Course We Can Afford It'. This article addresses the frequently promulgated claim that current levels of Canadian public spending on health care are unsustainable, in a manner designed to communicate with an audience unfamiliar with the nuances of health care financing and policy.

Early in 2003 IHSPR's Scientific Director was featured in the UBC Research publication Leap: Diversity in Discovery, University of British Columbia Journal of Research in an article titled 'Taking the pulse of our health care system'. The article provided an important opportunity for IHSPR to raise its profile throughout the UBC community, and to highlight the importance and timeliness of health services and policy research.

ORGANIZATIONAL EXCELLENCE

Assume a leadership and coordination role in Canadian health services and policy research and knowledge translation

Early in 2002/03 IHSPR completed its strategic plan, entitled Health Services and Policy Research: Making the BEST of Canadian Health Care. The plan is a foundational document that will provide ongoing guidance to the Institute's staff and Advisory Board as they make new strategic decisions and investments. As well, the strategic plan allowed the Institute to share its vision, mandate, and goals with all stakeholders.

In September 2002, IHSPR held a joint Advisory Board meeting with the CIHR Institute of Population and Public Health (IPPH). Discussions highlighted the progress, opportunities and challenges related to CIHR encompassing and supporting research respecting health systems and services, as well as the health of populations, societal and cultural dimensions of health and environmental influences on health (i.e., pillars 3 and 4). IHSPR and IPPH are unique among CIHR Institutes in that they carry the dual roles of contributing to pillar 3 and 4 issues and priorities of other Institutes, as well as health services, system and policy issues that transcend other Institutes' mandates. In January 2003, IHSPR convened a special Advisory Board meeting involving its

own members as well as Pillar 3 board members from other CIHR Institutes. The meeting was invaluable for achieving a shared sense of awareness regarding the issues, opportunities and general state of development of health services, systems and policy research within the entire organization.

The production of the Annual Report of Activities: January 2001 – March 2002 marked an important milestone in the Institute's reporting and accountability processes. The report documents IHSPR's evolution, its many activities and early accomplishments; and highlights the accomplishments of many individuals, groups and communities that conduct work in domains encompassed within the Institute's mandate.

Encourage innovation and effectiveness in IHSPR programs, initiatives and structures

Due to the rapid development of new and different CIHR programs, initiatives and opportunities, IHSPR's staff are completing a strategy document that will be used to guide current and future communications with our key stakeholders. In the meantime, IHSPR began publication of a quarterly newsletter in 2002 to reflect the Institute's commitment to keeping the health services and policy



Joint Institute Advisory Board Pillar 3 meeting, January 2003 in Vancouver

research community abreast of relevant CIHR activities and issues. While the Institute was developing its own database, broad circulation of the newsletters was made possible through the kind assistance of CHSRF, which agreed to include the early issues of the Institute's newsletter with its regular mail-outs.

The IHSPR directorship and staff served on several CIHR committees and working groups throughout 2002-2003, with involvements such as:

- Governing Council's Standing Committee on Performance Measurement, Evaluation and Audit
- CIHR task force to develop and evaluate programs that facilitate commercialization of health service and products
- Development of CIHR's parliamentary strategy
- Preparation of CIHR's submission to the Commission on the Future of Health Care in Canada
- Committees to develop an evaluation framework for scientific directors and a common evaluation framework for Institutes
- Collaborative Agreement Working Group to develop collaborative agreement templates and implementation processes, as well as an information system to track and monitor CIHR partnerships
- CIHR Communications Team to share information and to develop and implement marketing and communication strategies for the organization
- Web Content Management Working Group to provide leadership, advice and recommendations regarding CIHR's Web Service Activities
- Study Committee on the Privacy, Confidentiality and Conflict of Interest Issues of Peer and Relevance Review at CIHR

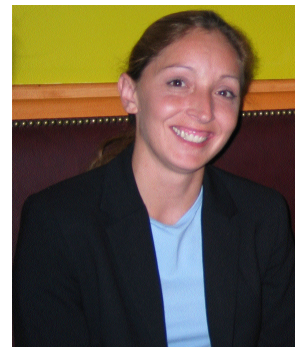
- A CIHR committee established to a strategy for ensuring that agreements between faculty, Universities, and funding agencies, particularly in clinical research, protect patients and researchers and are of the highest ethical standards

IHSPR continued to develop its staff complement in both Vancouver, its administrative base, and in Ottawa. Through the course of the year, the Institute added a full-time Institute Manager, an Assistant Information Technology Administrator, and a new Administrative Assistant to the Vancouver-based part of the team. In Ottawa, it welcomed a Senior Associate - Partnerships and Knowledge Translation, an Associate - Strategic Initiatives, and a Project Officer. All Ottawa positions are shared with other Institutes. See Appendix 8 for the IHSPR staff directory as of March 2003.

IHSPR held its first staff retreat in January 2003, in part jointly with the Institute of Population and Public Health. Pre-planning sessions were held with both Institutes' Scientific and Assistant Directors to identify possible joint initiatives for carrying out the Institutes' respective Strategic Plans. With the help of a facilitator, the Institute identified the individual and collective initiatives, roles, responsibilities, timelines and infrastructure needed to help IHSPR achieve its BEST strategy—and a high performance and healthy workplace.



Michele O'Rourke, Associate-Strategic Initiates, IHSPR.



Kim Gaudreau, Project Officer, IHSPR.

Institute of Health Services and Policy Research

Financial Statements

Institute of Health Services and Policy Research Institute Support Grant For the year ended March 31, 2003		
Available Funds		\$1,796,852
Expenses		
Institute Development		
Conference, symposia and workshops	\$119,572	
Institute Advisory Board	\$72,727	
Professional services	\$32,165	
Travel expenditures	\$20,108	
Other costs	\$18,525	\$263,097
Institute Operations		
Salaries and benefits	\$447,857	
Office accommodations	\$19,291	
Telephone and communication services	\$18,914	
Supplies, material and other services	\$18,650	
Office furniture and fixtures	\$44,802	
Computer equipment and IT support	\$11,323	
Professional services	\$49,660	
Travel expenditures	\$44,782	
Other expenditures	\$49	\$655,328
Total Expenses		\$918,425
Unspent Balance*		\$878,427

*Note: The unspent balance as of March 31, 2003 is carried forward to the subsequent fiscal year

Institute of Health Services and Policy Research

Financial Statements

Institute of Health Services and Policy Research Investments in Strategic Initiatives For the year ended March 31, 2003						
Strategic Initiatives	Number	Investments through Grants and Awards				Total
		2002-03	2003-4	2004-05	2005 and beyond	
Reducing Health Disparities & Promoting the Health of Vulnerable Populations	2	\$50,000	\$-	\$-	\$-	\$50,000
Interdisciplinary Capacity Enhancement Teams (ICE)	10	\$403,444	\$1,585,615	\$1,730,959	\$4,737,637	\$8,457,655
Global Health Research	3	\$35,660	\$0	\$0	\$0	\$35,660
Operating Grants to Open Competition	9	\$524,543	\$16,711	\$0	\$0	\$541,254
Knowledge Translations Applications	10	\$43,390	\$35,948	\$46,662	\$0	\$126,000
Changing Public Expectations	2	\$281,339	\$235,920	\$196,908	\$0	\$704,167
Access for Marginalized Groups	10	\$379,385	\$295,157	\$207,213	\$94,353	\$976,108
Training Awards to Open Competition	19	\$426,793	\$345,500	\$202,833	\$61,666	\$1,036,792
CIHI	1	\$100,000	\$19,989	\$0	\$0	\$119,989
CADRE	10	\$233,237	\$0	\$0	\$0	\$233,237
Health Research Partnership Program	1	\$7,688	\$25,500	\$17,812	\$0	\$51,000
CIHR Training Program Grants	14	\$913,921	\$958,079	\$971,187	\$2,979,433	\$5,822,620
	91	\$3,399,400	\$3,518,419	\$3,373,574	\$7,873,089	\$18,164,428

*Note: Grants and awards in respect to these programs are approved for 1 to 6 years. Figures displayed represent CIHR financial commitments for these programs in 2001-02 and subsequent years. Availability of these funds in future years is subject to funding appropriations by Parliament. For some initiatives, partners also contributed to the funding of the grants and awards.

Institute of Health Services and Policy Research

Appendices

Appendix I

IHSPR Funded Workshops 2002-2003

Workshop Title	Date
Genomics and Public Policy	June 2002
Germany-Canada Cooperation in Health Telematics: Trustworthy Personal Health Information	June 2002
3rd International DNA Sampling Conference: Ethical, Legal and Social Issues	June 2002
Precedent & Innovation: Health Law in the 21st Century	June 2002
International Workshop on Research Methods for the Investigation of Complementary and Alternative (CAM) Whole Systems	June 2002
CADRE Chairs/Training Centre/Student Workshop	June 2002
First International Conference on Inner City Health	June 2002
Towards a Healthier Global Village: Consolidating Canadian Capacity for Health Services and Policy Research	June 2002
Genetic Testing: Help, Hope or Hype?	June 2002
First Canadian National Undergraduate Bioethics Conference	June 2002
International ThinkTank: Integrating Sex and Gender in Health Research	June 2002
Technology Enabled Knowledge Translation (TEKT)	June 2002

For more information on each of the workshops funded in 2002 please visit
<http://www.cihr-irsc.gc.ca/e/institutes/ihspr/16670.shtml>

For more information on each of the workshops funded in 2003 please visit
<http://www.cihr-irsc.gc.ca/e/institutes/ihspr/11979.shtml>

Appendix 2

IHSPR Strategic Research Initiatives Grants Awarded in 2002/2003

Improving Access to Appropriate Health Services for Marginalized Groups Competition—March 2002

Principal Investigator	Institution	Research Project Title
HAMPTON, Mary	University of Regina	Strengthening and building sexual health of aboriginal youth and young adults
HILLS, Marcia	University of Victoria	In from the margins: Collaborative action to improve access to appropriate health services
JAMES, Susan	University of British Columbia	Investigating the discrepancy between immigrant and medical conceptualizations of symptoms: The case of Portuguese immigrant men
KEDDY, Barbara	Dalhousie University	On the margins: Understanding and improving black women's health in rural and remote Nova Scotia communities
LIX, Lisa	University of Manitoba	Mental health service utilization and population mobility in Manitoba: A longitudinal analysis
McGRATH, Patrick	IWK Health Centre (Halifax)	Distance intervention for rural depressed mothers: Development and feasibility
MILL, Judith	University of Alberta	The influence of stigma on access to health services by persons with HIV illness

Building Healthy Communities Through Rural and Northern Health Research—July 2002

Principal Investigator	Institution	Research Project Title
GUERNSEY, Judith R.	Dalhousie University	Evaluation of the Utility of National Information Sources for Developing a Baseline Data Set on the Health of Rural Canadians—Stage II
PONG, Raymond W.	Laurentian University of Sudbury	Strengthening the Medical Workforce in Rural Canada: The Role of Rural/Northern Medical Education
KORNELSEN, Judith Ann	B.C. Women's Hospital	Rural Women's Experiences of Maternity Care
TSUYUKI, Ross T.	University of Alberta	Better Respiratory Education and Asthma Therapy in Hinton (BREATH)

Reducing Health Disparities & Promoting Equity for Vulnerable Populations—May 2002

Principal Investigator	Institution	Research Project Title
CAULFORD, Paul G.	University of Toronto	Family and community medicine for patients without health insurance: Epidemiology, socio-cultural determinants and outcomes
HOLDEN, Jeanette	Queen's University (Kingston)	HEIDI: Healthcare Equity for Intellectually Disabled Individuals
JANCZUR, Axelle	Access Alliance Multicultural Community Health Centre (MCHC)	Racialised groups and health status: Exploring poverty, housing, race-based discrimination and access to health care in Toronto
McCOLL, Mary Ann	Queen's University (Kingston)	Reducing inequities in access to primary care and preventive services

Global Health Research Program Development and Planning Grants—May 2002

Principal Investigator	Institution	Research Project Title
DAAR, Abdallah	University of Toronto	Genomics and global health: Developing a global CIHR network to address ethical, policy and regulatory issues
JOHRi, Mira	Université de Montréal	Caring for HIV/AIDS in Latin America in the era of HAART: Meeting the challenge
LABONTE, Ronald	University of Saskatchewan	Health, globalization, Africa and the G8: Promises kept, broken, right or wrong
YOUNG, Kue	University of Toronto	Under four flags: Development of an international research consortium for Inuit health
ZWARENTEIN, Merrick	Sunnybrook and Women's College Health Sciences Centre	PRACTiCH: Pragmatic Trials in Health Care systems—international network to facilitate RCT's for priority health problems

New Emerging Team (NET) Program—May 2002

Principal Investigator	Institution	Research Project Title
ALLARD, Pierre	University of Ottawa	Optimizing end of life care for seniors
LOEB, Mark	McMaster University	Anti-microbial use and resistance in seniors

Interdisciplinary Capacity Enhancement (ICE) Teams Grant Program—May 2002

Principal Investigator	Institution	Research Project Title
BATTISTA, Renaldo	McGill University	Programme de recherche en appui aux politiques de santé en génétique dans un souci de qualité, d'efficience et de bien-être social
BOON, Heather	University of Toronto	Complimentary and alternative health care (CAHC) research team
COYTE, Peter	University of Toronto	Health care, technology, and place: An interdisciplinary capacity enhancement team
GRIMSHAW, Jeremy	University of Ottawa	Building Capacity: Development of a Transdisciplinary team for Improving the Quality of Health Care
LEE, Shoo	University of British Columbia	Quality of care ICE (QC-ICE) team in neonatal-perinatal care
MACLURE, Malcolm	University of Victoria (BC)	Drug policy futures: Forecasting, financing, governance, public values and evidence
MARTIN, Douglas	University of Toronto	Priority setting research team: Interdisciplinary capacity enhancement in priority setting and health policy
NEIS, Barbara	Memorial University of Newfoundland	Eastern Canada consortium on workplace health and safety
RAINA, Parminder	McMaster University	From knowledge generation to translation: A systems approach to reducing the burden of injury in Canada
STRAUS, Sharon	University of Toronto	Innovations in patient safety and knowledge translation
TOUSIGNANT, Pierre	Université de Montréal	L'influence des modes d'organisation des services de première ligne sur l'accès aux services et la santé des groupes défavorisés
VINGILIS, Evelyn	University of Western Ontario	Marrying knowledge generation with knowledge diffusion and utilization: the consortium for applied research and evaluation in mental health
WILSON, Brenda	University of Ottawa	Translating genetics discoveries into appropriate health policy and services: Enhancing research capacity and developing an interdisciplinary approach

Appendix 3

Other IHSPR Strategic Research Investments

CIHR Open Competition—March 2002

Researcher	Institution	Research Title
BEZJAK, Andrea	Princess Margaret Hospital (Toronto)	Provision of quality of life information to physicians and nurses: Development & evaluation of touch screen technology in palliative oncology practice
BOYLE, Michael	McMaster University	Screening for psychopathology in child mental health outpatient settings: Evaluation of the brief child and family phone interview (BCFPI)
DALLAIRE, Clémence	Hôtel-Dieu de Lévis	L'organisation des soins et services préhospitaliers d'urgence en milieu rural et semi-rural
FELDMAN, Debbie	Université de Montréal	Access to rehabilitation services for physically disabled children
FRANCO, Eduardo	McGill University	PAP cytology screening failure: Influences of the patient, physician, and laboratory
JACKEVICIUS, Cynthia	University Health Network (Toronto)	Multi-drug adherence in older persons
LAZAR, Harvey	Queen's University (Kingston)	A cross-provincial comparison of health care policy reform in Canada
LEVY, Adrian	St. Paul's Hospital, Vancouver	Effectiveness of beta blockers in preventing death for persons with heart failure
MARTIN, Douglas	University of Toronto	Priority setting in hospitals
MATHEWS, Maria	Memorial University of Newfoundland	Rural/urban differences in access to cancer treatment in Newfoundland and Labrador
MORGAN, Pamela	University of Toronto	The effects of a simulator educational experience on the incidence and nature of human error during the anesthetic management of routine and critical events in a high fidelity patient simulator
REID, Robert	University of British Columbia	The impact of socioeconomic status on hospital length of stay in an era of decreasing availability of acute care hospital beds
SWAINE, Bonnie	Université de Montréal	Development and validation of a questionnaire to measure clients' perception of the quality of rehabilitation services following head injury

CHSRF Open Grants Competition 2002/03

Within the CADRE program, IHSPR contributed \$233,237 as a one-time investment with the Open Grants Competition program

Researcher	Research Title
ANDERSON, Malcolm	The team approach to hospice/palliative care: integration of formal care at end of life
DAVIES, Barbara	Determinants of the sustained use of research evidence in nursing
DORAN, Diane Irvine	The impact of the manager's span on control on nursing management leadership and performance
KERR, Michael	Adopting a common nursing practice model across a recently merged multi-site hospital
LAVOIE, André	Continuité des soins aux traumatisés majeurs dans un système intégré et régionalisé
McGILTON, Katherine	Identification and testing of factors that influence supervisors' ability to develop supportive relationships with their staff
MINORE, Bruce	Managing continuity of care for children with special needs in rural and remote parts of northern Ontario
SAMPALIS, John	Canadian major trauma cohort research program
TEDFORD, Sara	Examining Midwifery-Based Options to Improve Continuity of Maternity Care Services in Remote Nunavut Communities
WHELAN, Timothy	An evaluation of continuity of cancer care through regional supportive care networks

Appendix 4

CIHR Strategic Training Initiatives supported by IHSPR 2002/03

Principal Investigator	Institution	Research Project Title
GOLDNER, Elliot	University of British Columbia	Building capacity in mental health and addictions services and policy research
KIRMAYER, Laurence	McGill University	Culture and mental health services
LEVINSON, Wendy	St. Michael's Hospital (Toronto)	An integrated training program in health and social science research to improve the health of marginalized populations
PARADIS, Gilles	McGill University	Programme de formation transdisciplinaire en recherche en santé publique et en santé des populations: accroître la capacité de recherche et d'action dans le système de santé publique au Canada

Appendix 5

CIHR IHSPR Research Awards 2002

CIHR IHSPR Doctoral Research Award Recipients

Principal Investigator	Institution	Research Project Title
AGGARWAL, Monica	University of Toronto	Policy implications of implementing primary care reform: Barriers and best practices
CHEN, Alice	University of British Columbia	Patterns of health and health services utilization among Canadian immigrants: Identifying determinants of mental health service utilization among ethnic Chinese and Chinese immigrants in British Columbia using linked databases and survey
CORTINOIS, Andrea	University Health Network – Toronto	Digital ethics: Exploring the potential contribution of information and communication technologies to improve equity in health, reducing disparities in access to health care, reaching out to marginalized population groups and empowering patients in their relationship with health providers
HADLEY, Dianne	University of Western Ontario	What parents experience when seeking help for their child from a children's mental health center
HEBERT, Yann	Université du Québec à Montréal	Le rôle de l'identité organisationnelle dans la fusion d'unités opérationnelles d'un centre hospitalier universitaire
HILLMER, Michael	Baycrest Centre for Geriatric Care (Toronto)	Institutional characteristics of long-term care facilities in Ontario and their association with clinical outcomes
HIRSCHKORN, Kristine	University of Western Ontario	Regulating natural health products: the practice of herbal medicine and its challenges to Canadian health care
KRAETSCHMER, Nancy	University of Toronto	Policy implications of geography and scope of services for telehealth
LINDSTROM, Ronald	University of British Columbia	Praxis to paragon: A systems approach to planning child health services in British Columbia
LINN, Gilat	University of British Columbia	Evaluation of internet-based cardiac rehabilitation program
MITCHELL, Lori	University of Manitoba	Patterns of home care in Winnipeg, Manitoba
SCHRAA, Eleanor	University of Toronto	The application of accounting research theory in understanding the use of accounting information in health care decision-making
TRAN, Chau	Sunnybrook and Women's College Health Science Centre	A retrospective, cohort analysis of mortality following acute myocardial infarction amongst the elderly: A comparison between the "real-world" and randomized, controlled, clinical trials

CIHR IHSPR Fellowship Award Recipients

Principal Investigator	Institution	Research Project Title
AGHAJAFARI, Fariba	University of Toronto	The effects of health care system changes and hospital restructuring on health care utilization for women in the inner-city of Toronto
BROUSSELLE, Astrid	Douglas Hospital Research Center	Analyse d'implantation des projets d'intégration des services pour les personnes souffrant de troubles mentaux et de problèmes complexes multiples
CONTANDRIOPOULOS, Damien	Université Laval	Analyse de l'influence et des stratégies des groupes d'intérêts (lobbies) dans l'élaboration des politiques publiques de santé au Québec
ETMINAN, Mahyar	Baycrest Hospital (North York)	Exploring the association between atypical neuroleptics and diabetes
GURU, Veena	University of Toronto	Quality control in cardiac surgery: How do clinical outcomes relate to quality of care?
KOSSEIM, Mylène	McGill University	Hospital performance evaluations: A methodological study of the impact of admission and transfer profiles
LANDRY, Michel	University of Toronto	Is publicly funded health care under the influence of globalization and privatization? A case study of rehabilitation service delivery and financing in Ontario
MANDAL, Saumendranath	University of Alberta	Small area variation methods in health services research
MAZER, Barbara	Montreal Children's Hospital	Rehabilitation services for children with disabilities
PLUYE, Pierre	McGill University	Implantation des aides électroniques à la prise de décision en médecine familiale
POITRAS, Stéphane	Université de Montréal	Pratique des physiothérapeutes dans la réadaptation de travailleurs souffrant de maux de dos subaigus
SALBACH, Nancy	McGill University	Enhancing competence in walking post-stroke: A randomized controlled trial
SIROIS, Marie-Josée	Université Laval	Rehabilitation needs and general health status of trauma victims in urban and rural areas
TAYLOR, Laurel	McGill University	A multi-level approach to health management of chronic disease: Computer-assisted support to physician practice and patient self-management and their impact on care and outcomes for asthma and diabetes
VAN DER VELDE, Gabrielle	University of Toronto	Decision analytic and cost-effectiveness analyses of non-surgical conservative neck pain treatments (non-steroidal anti-inflammatory drugs and cervical spinal manipulation)

Appendix 6

2002 CADRE Post-Doctoral Award Recipients

Researcher	Institution	Research Focus
BROEMELING, Anne-Marie	University of British Columbia and Vancouver/Richmond Health Region	Chronic disease co-morbidity among Vancouver/Richmond Health Region residents
BROUSELLE, Astrid	Centre de recherche de l'hôpital Douglas	Implementation of a service integration program for people suffering from mental health problems and substance abuse
CARSON, Arlene	University of Victoria	Community-based health services and access, and how people in mid-life use these services
CAZALE, Linda	Hôpital Charles LeMoyné	A synthesis of evidence, documenting the facilitators and barriers to integrated health systems, and evaluating the effects of integrated health systems.
DALY, Tamara	York University	Ability of voluntary nonprofit organizations to deliver health and social care services to at-risk elderly populations
DUBOIS, Carl Ardy	London School of Hygiene and Tropical Medicine (London, England)	Performance of health care systems during changes in health policy and organization structure
HOWELL, Doris	McMaster University	Development of indicators and measurement tools that identify specific care processes that can be modified to improve the quality of end-of-life care.
KOEHN, Sharon	Simon Fraser University	Cultural and social dimensions of perceived barriers to use of long-term care facilities among Indo-Canadian senior population of Greater Vancouver
KOTHARI, Anita	University of Ottawa	Health policy development and implementation
LAVOIE-TREMBLAY, Mélanie	University of Toronto	Needs of aging healthcare workers
MRAZEK, Monique	European Observatory on Health Care Systems	Regulation of pharmaceutical prices and profits
PROFETTO-McGRATH, Joanne	University of Alberta	Process and practice of knowledge use in organizations
TAIT, Caroline	Aboriginal Mental Health Research Team National Research Network Initiative	Policy-making by Aboriginal organizations
TREGUNNO, Deborah	University of Toronto	Data regarding patient safety outcomes

Appendix 7

CIHR Knowledge Translation Strategies for Health Research (RFA) October 2002
Successful projects co-funded by IHSPR

Principal Investigator	Institution	Research Project Title
BERTA, Whitney	University of Toronto	Learning Capacity in Ontario's Long-Term Care Facilities: A Study of Factors that Affect the Adoption, Transfer, Adaptation and Retention of Clinical Practice Guidelines
CARROLL, June	Mount Sinai Hospital (Toronto)	Evaluation of the Impact of a Multi-Faceted Intervention to Enhance the Delivery of Genetics Services by Family Physicians
CLARK, Heather	Ottawa Health Research Institute	Mailing Recommendations to the Individual or Physician to Increase Screening for Type 2 Diabetes in Women with Previous Gestational Diabetes: Clinical Trial
CUNNINGHAM, Charles Elden	McMaster University	Modeling Parent Preferences for Translating Scientific Knowledge Regarding Children with Internalizing and Externalizing Mental Health Problems
EYSENBACH, Gunther	University Health Network (Toronto)	How Should Evidence Be Presented? Electronic Guideline Usability and Information Design Evaluation Study (eGUIDES)
FORCHUK, Cheryl	University of Western Ontario	Integrating an Evidence-Based Intervention in Clinical Practice
GRAD, Roland	McGill University	Putting Evidence into Practice: An Observational Study of Knowledge Translation in Postgraduate Medical Trainees
HAYNES, Robert	McMaster University	McMaster PLUS: A Cluster Randomized Clinical Trial of an Intervention to Accelerate Use of Evidence-Based Information From Digital Libraries in Clinical Practice
LAVIS, John	McMaster University	How Do CIHR-Affiliated Research Organizations Transfer Research Knowledge to Decision-Makers?
MACLURE, Malcolm	University of Victoria (British Columbia)	Knowledge Translation for Chronic Disease Management in Primary Health Care Renewal in British Columbia
RAINA, Parminder	McMaster University	Diffusion and Dissemination of Evidence-Based Interventions for Prevention and Screening of Diseases in the Elderly
TIMMONS, Vianne	University of Prince Edward Island (Charlottetown)	Knowledge Translation of Children's Research in Rural Communities of Atlantic Canada
TUGWELL, Peter	University of Ottawa	How Do You Measure an Effective Musculoskeletal and Arthritis Health Consumer?



Principal Investigator	Institution	Research Project Title
VARNHAGEN, Connie	University of Alberta	Strategies for Critically Appraising Children's Health Web Resources
WILSON, Brenda	University of Ottawa	The Public and Genetics: Understanding, Expectations and Priorities

Appendix 8

Institute of Health Services and Policy Research
Staff Directory as of March 31, 2003

Institute-based Staff (Vancouver)	Ottawa-based Institute Staff
<p>Morris Barer Scientific Director Tel: 604-222-6872 Fax: 604-224-8635 Email: mbarer@ihspr.ubc.ca</p>	<p>Michelle Gagnon Senior Associate, Partnerships and Knowledge Translation IHSPR/IPPH Tel: 613-952-4538 Fax: 613-941-1040 Email: mgagnon@cihr-irsc.gc.ca</p>
<p>Diane Watson Assistant Director Tel: 604-222-6871 Fax: 604-224-8635 Email: dwatson@ihspr.ubc.ca</p>	<p>Michèle O'Rourke Associate, Strategic Initiatives IHSPR/IPPH Tel: 613-952-4539 Fax: 613-941-1040 Email: morourke@cihr-irsc.gc.ca</p>
<p>Craig Larsen Institute Manager Tel: 604-222-6874 Fax: 604-222-8635 Email: clarsen@ihspr.ubc.ca</p>	<p>Kim Gaudreau Project Officer Tel: 613-957-6128 Fax: 613-941-1040 Email: kgaudrea@cihr-irsc.gc.ca</p>
<p>Frederick Garrow Administrative Assistant Tel: 604-222-6870 Fax: 604-224-8635 Email: fgarrow@ihspr.ubc.ca</p>	
<p>David Gehrman Assistant Information Technology Administrator Tel: 604-222-6873 Fax: 604-224-8635 Email: dgehrmann@ihspr.ubc.ca</p>	
<p>Melissa Stephens Project Assistant (Part-time) Tel: 604-222-6875 Fax: 604-224-8635 Email: mstephens@ihspr.ubc.ca</p>	