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REPORT ON THE OCTOBER 19, 2005 STAKEHOLDER FORUM

The NLCAHR Stakeholder Forum, held on October 19, featured reports from the Centre, its research staff and its affiliated researchers about recent activities as well as planning discussions for future priorities and tasks. The day's discussions were moderated by Ms. Joan Dawe, a former founding member of the Centre's Board and currently Chair of the Board of Eastern Health. The day began with a brief overview report on the past year of the Centre's programs including our funding activities, our research undertakings and our role in various regional and national organizations.

The next part of the day focused on research done at the Centre or funded by it. Two researchers on the Centre's staff presented reports on their recent projects: Laurie Twells discussed her work on obesity and overweight in Newfoundland and Labrador, and Janice Butler presented the results of a survey of the province's dental practitioners. We also heard a report by Dr. Maria Mathews, of the Division of Community Medicine at MUN, about her research on the out-of-pocket costs of cancer care to patients and their families in Newfoundland and Labrador.

The final presentation of the initial part of the day was from John Abbott, Deputy Minister of Health and Community Services. He outlined the Department's new draft Strategic Plan, setting out the key objectives that the Department hoped to set for the province's health system over the coming years.

The rest of the day was devoted to a planning session in which stakeholders were given the opportunity to advise the Board on the challenges facing the Centre in the coming period. Participants had received a Discussion Paper that served as the starting point for the day's sessions and they were also given a brief introduction to the paper and to the planning process. What followed were break-out sessions and a follow-up plenary session dealing with three questions:

1. NLCAHR's priority themes: The Centre is currently operating with three priority themes to focus its funding and research activities. These were developed at the first stakeholder forum, held in June, 2002. In light of changes since that time and the strategic priorities outlined by the Deputy Minister for the Department and the provincial health system, what changes do we need to make, if any, in the Centre's priority themes?
2. The Centre's current programs: What changes should be made to optimize the effectiveness and impact of our current programs?
3. Possible new programs: If additional funding becomes available, what new programs should the Centre introduce? (A set of possible innovations was included in the Discussion Paper, based on deliberations by the Board and by the Research Advisory Council).

Each break-out group addressed all three questions, attempting to reach a consensus where possible. At the concluding plenary session, a reporter from each group presented the group's ideas, highlighting both agreements and divergences of opinion. What follows are the key points that emerged at the concluding session, both from the reports and from the ensuing discussions. For each of the three questions, I will summarize the key suggestions that were made and the steps that we intend to take to follow up on these suggestions.

I. NLCAHR's Priority Themes

The Discussion

The participants felt that the current themes remain pertinent and fit well with the Department's proposed new strategic emphases. They can continue as an effective basis for the Centre's funding, research and knowledge exchange activities. A few minor changes were suggested. It was felt that the first of our themes should be reworded so that the focus is not on disease but on population health issues and challenges. Similarly, the suggestion was made that the third theme ('efficiency and effectiveness of the province's health system') should be reworded to include the goals of transparency and accountability, as well as to make clear that the Centre is concerned not only with the institutional health system but also with the province's community services. Concern was expressed by some participants that the three themes were all too broad and inclusive and that something should be done to provide for a tighter focus on issues of the highest priority.

Planned Action

The wording of the two themes in question will be revised as suggested. Increased focus will be provided by targeting the funding of some of each year's Development Grants (see below) to specific aspects of our priority themes that correspond simultaneously to top provincial priorities and to priority themes announced by national funding agencies in special Requests for Applications. This will allow the Centre to maintain its broad and inclusive priority themes while assisting local research teams to capitalize on announced national funding opportunities.

2. The Centre's Current Program

The Discussion

Participants felt that our fellowships program should be maintained as is. The solution to our low success rates (many applications for a small number of awards) is not to eliminate the Master's fellowships (an option proposed in the Discussion Paper) but rather to seek additional funding, including from private donors. Similarly, the remedy for the seeming low level of interest in our postdoctoral fellowships is to seek to make the award more financially attractive by seeking increased funding.

With regard to our grants programs for researchers, there was a strong consensus that the lack of interest in our Development Grants was largely the result of insufficient communications and, above all, of the excessively cumbersome application requirements. It was felt that the problem could be remedied by simplifying the process to make it more appropriate for the small size of the awards (\$10,000 maximum) and by speeding up the turnaround time. There was strong support for the idea of using some of the Development Grants to support local applications to high priority national RFA's (as noted above). It was also suggested that we should increase the flexibility of our grants program making it possible to shift the distribution of funding each year in accordance with the quality of the applications to our various programs. A final suggestion concerned improving the feedback provided to applicants after the funding decisions have been made.

Strong support was heard for the Centre's recently developed support programs for new researchers, including the mentorship program and the grant writing seminars.

On the Centre's recently enhanced communications activities, the suggestion was made that an evaluation of the newsletter and bulletin be undertaken in order to assess stakeholder utilization of the electronic, as compared to the paper, versions. There was also an interesting discussion of a suggestion that the Centre seek to communicate more effectively with the general public by using the media, and especially the electronic media. One suggestion that aroused considerable interest was the development of a regular radio call-in show in which the Centre would provide the public with up-to-date, scientifically-based information about key health policy, health services and public health issues.

Planned Action

The fellowship program will be left unchanged in the 2006 round and additional funding will be sought for next year to make it possible to offer more awards at the master's and doctoral levels, and to enhance the package offered at the postdoctoral level.

The Development Grants program will be changed as suggested. The application requirements and procedures will be simplified and the process streamlined. Some of the grants will, as appropriate, be targeted to special CIHR, CHSRF and SSHRC competitions. It is worth noting that this is something we have already experimented with, through the creation and awarding of two special Development Grants on primary health care reform last year.

As for the suggestion of increased flexibility in the awarding of funding among the various grants programs, it should be pointed out that this is already our practice, although the suggestion from one of the break-out groups that we might award our entire grants envelope to a single, especially impressive project did not receive the endorsement of the plenary (which felt that this idea ran counter to the Centre's mandate to emphasize support for new researchers and the development of provincial research capacity).

Additional efforts will be dedicated in this year's grants competition to provide better and more timely feedback to applicants, both successful and unsuccessful. We will adopt the CIHR practice of appointing one member of each peer review committee as 'scientific officer' with the responsibility of taking notes that reflect the consensus of the discussion of each application and using these notes as part of the confidential feedback to each applicant.

Concerning our communications tools, we will organize an evaluation of our newsletter and bulletin during the coming year and adjust our approach (electronic vs. paper documents) according to the results. We will also pursue the idea of media outreach by initiating discussions with appropriate officials in local radio, television and press and with researchers who might work with the Centre on such programs.

3. Possible New Programs

The Discussion

Research Synthesis: The break-out groups and the concluding plenary were strongly supportive of a possible new program through which the Centre would synthesize and contextualize up-to-date research knowledge on key health policy and health services issues selected in consultation with the Department and the Regional Integrated Health Authorities. The Centre would provide an agreed-upon number of such research synthesis reports per year to the provincial health system in order to contribute to evidence-based decision making. There was strong support for the Centre's retaining and enhancing its internal research capacity in order to make this and other commissioned research activities possible, but it was also felt that the Centre should continue to play its mandated role as a facilitator of the research activities of other units at Memorial and in other provincial organizations.

Research Coordination: A firm consensus emerged that the Centre should work to enhance its role as a clearing house for local research capacity and activities by developing a publicly available data base of our province's applied health researchers, their expertise, and their recent, ongoing, and planned projects. The idea that the Centre could enhance its research coordination role by offering a range of administrative services to other provincial research units did not receive much attention or support beyond a general feeling that enhanced collaboration among units and centres was worth pursuing. There was considerable support for the idea that NLCAHR should seek to link active researchers to itself as 'affiliated researchers' or 'research associates'; no agreement was reached, however, on the kinds of incentives that could be provided to researchers in order to make this affiliation attractive to them.

Capacity Development: There was some interest, but not a broad consensus, in the suggestion that NLCAHR could, if new funds became available, copy a program recently developed by the Saskatchewan Quality Council

to fund and manage an annual bursary competition that entertains proposals from health system employees who wish to undertake internships or study periods to help them upgrade their skills and bring new techniques and ideas into their organizations.

Planned Action

New funding will be sought for a Research Synthesis pilot program, either from the Department or from external sources. We will move to enhance our 'clearing house' role by updating and improving our existing Researcher Database and by using it as the basis of an appropriate outreach and communications program to help inform our stakeholders about who is doing what in this province in the various areas of applied health research. We will seek discussions with other applied health research units in the province to explore ways in which collaboration could be enhanced. We will also, as described in the 'Current Programs' section above, continue to work to improve our communications programs, including an exploration of radio, television and newspaper activities. We will also continue to explore the idea of a 'bursary' program for health system employee skills development.

CONCLUDING REMARKS

From the perspective of the Centre's leadership, the Stakeholder Forum was an important and successful event. A wide range of helpful and creative suggestions emerged from the planning discussions about what programs and approaches to retain and what changes ought to be made. As noted above, we have already begun moving to adopting these recommendations.

As set out in our Strategic Plan, the Stakeholder Forum is now an annual event. On behalf of the Board and the Research Advisory Council, as well as in my own name, I want to thank all of this year's participants for their very helpful contributions. I urge you to keep your eye on our website, on our newsletters and our e-bulletins for updates about the implementation of this year's Forum suggestions. I look forward to seeing you at next year's Forum.

Stephen Bornstein, Director
November 27, 2005