



ANNUAL REPORT

December 2003-November 2004

NCLAHR: BACKGROUND AND MANDATE

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

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

HIGHLIGHTS OF THE YEAR

The Centre has now completed its fourth full year of operations. The 2003-4 year has been a very active and productive one for the Centre. We adopted our first Strategic Plan and took a number of important steps based on it: we reconfigured our governance structures, down-sizing the Board and upgrading its role; expanded the Research Council and renamed it as the Research Advisory Council; hired a new staff member to manage enhanced knowledge exchange and capacity development portfolios, each with its own strategic plan; and reconfigured our annual awards program to focus on the priority themes identified by our stakeholders. We conducted a number of commissioned research projects on behalf of our key stakeholders, the Department of Health and Community Services and the Newfoundland and Labrador Health Boards Association. We enhanced our linkages with partner organizations both within the province and elsewhere in Canada. In addition, we organized major research workshops bringing together researchers and research users to discuss two important health issues of concern to our stakeholders.

OUR NEW STRATEGIC PLAN

After considerable discussion and revision, the Centre's first Strategic Plan was adopted in its final form at a meeting of the Board on February 9, 2004. The plan, which is appended to this report, included recommendations for reconfiguring of the Centre's governance structures, refocusing of its funding programs, and expanding its activities in the areas of knowledge exchange with stakeholders and of development work to enhance the capacity of the province's researchers to perform high-quality applied health research. The Plan will be revisited periodically at a special forum of stakeholders along the lines of the Planning Day held in June 11, 2002.

GOVERNANCE

The Board

The Strategic Plan directed the Centre to reconfigure its Board, reducing it in size from sixteen members to six, enhancing its role from a largely advisory one to an executive one, and increasing the frequency of its meetings from twice a year to six times a year to reflect its changed responsibilities. Membership in the new Board was to be as follows (with the Dean of Medicine as Chair):

Organization	Position
Faculty of Medicine, MUN	Dean
Department of Health and Community Services	Deputy Minister
Health Care Corporation of St. John's	CEO
Newfoundland and Labrador Health Boards Association	Representative
Memorial University	Vice-President (Research and International Relations)
Newfoundland and Labrador Centre for Health Information	CEO
NLCAHR (member ex officio)	Director

The original Board of sixteen members met for the final time on February 9, 2004. It adopted the revised Strategic Plan and dissolved itself in favour of the new version of the Board which met for the first time on June 7, 2004. The new membership at the first meeting was as follows:

Organization	Position	Name
Faculty of Medicine, MUN	Dean	Dr. James Rourke
Department of Health and Community Services	Deputy Minister	Debbie Fry/John Abbott
Health Care Corporation of St. John's	CEO	George Tilley
Newfoundland and Labrador Health	Executive Director	John Peddle

Boards Association		
Memorial University	Vice-President (Research and International Relations)	Dr. Christopher Loomis
Newfoundland and Labrador Centre for Health Information	CEO	Steve O'Reilly
NLCAHR (member ex officio)	Director	Dr. Stephen Bornstein

The newly constituted Board met again on October 4, 2004.

The Research Advisory Council

In accordance with the Strategic Plan, the Research Council was renamed 'Research Advisory Council' and its membership was expanded, mainly in order to include representatives of the organizations dropped from the down-sized Board. The new membership (with the Director as Chair) is now as follows:

Organization	Representative	Title
NLCAHR	Dr. Stephen Bornstein	Director and Professor
Faculty of Medicine, Community Health, Health Research Unit	Dr. Doreen Neville	Assistant Professor
Dr. H. Bliss Murphy Cancer Centre	Dr. Gerard Farrell	Clinical Associate for Medical Oncology
School of Nursing, MUN	Dr. Alice Gaudine	Associate Director Graduate Program and Research
NF & Lab. Centre for Health Information	Mr. Don MacDonald	Director Product Development
Faculty of Medicine, MUN	Dr. Penny Moody-Corbett	Assistant Dean, Research and Graduate Studies
Faculty of Science, MUN	Dr. David Schneider	Associate Dean of Research
Patient Research Centre, Health Sciences Centre	Dr. Sean Murphy	Assistant Professor, Nephrology and Clinical Epidemiology
Faculty of Arts, MUN NLCAHR	Dr. Barbara Neis	Associate Professor, Sociology Co-Director, SafetyNet Research Program
School of Pharmacy, MUN	Dr. Debbie Kelly	Assistant Professor
TETRA	Dr. Carl Robbins	Chair
Discipline of Genetics, Faculty of Medicine, MUN	Dr. Ban Younghusband	Interim Chair
School of Social Work, MUN	Dr. Shelly Birnie-Lefcovitch	Director
Centre for Nursing Studies	Dr. Vicki Greenslade	Faculty, Coordinator of the Nursing Research Office

The Research Advisory Council met on September 20, 2004. It also advised the Director on a number of key funding and granting policy decisions through periodic e-mail consultations. In keeping with the recommendations of the Strategic Plan, members of the Council have now agreed to make themselves available as required to participate in the research mentorship and grant pre-review programs that are being designed as part of the Centre's enhanced activities in the area of capacity development (see below).

Particular thanks are due to those members of the Council, Dr. Gaudine, Dr. Schneider and Dr. Murphy who also served on the Peer Review Committee that adjudicated the 2003-4 fellowships and grants competitions. Two other people merit our special thanks. **Dr. Patricia Martens**, Acting Director of the Manitoba Centre for Health Policy, University of Manitoba and **Dr. Bruce Minore**, Co-Director of Centre for Rural and Northern Health Research, Lakehead University, served as external members on the Peer Review Committee this year.

ADMINISTRATIVE MATTERS

Personnel

The key figure in the Centre's administrative life is the Administrative Secretary. Until August, this position was filled by **Ms. Helen Oliver** who came to us on a three-year secondment from the Department of Political Science in the Faculty of Arts at Memorial. At that point, she was required by the University's Department of Human Resources to return to her original, permanent position and the Centre was fortunate to recruit **Ms. Annette McGrath** to replace her. Ms. McGrath had been working as an event co-ordinator in the Department of University Relations but had previous experience with NLCAHR, replacing Helen for two months during a medical leave-of-absence in the summer of 2002. Ms. McGrath has moved quickly to take over the existing duties of the position as well as additional duties as executive assistant to the Director.

During the course of 2003-4, the Centre has also added two new positions. We have augmented our research coordination and execution capacities by hiring **Ms. Janice Butler** on a half-time basis as Research Officer to work alongside Ms. Laurie Twells who also works half-time. Ms. Butler holds a Master's degree in Nursing and is currently completing the final stages of a Master's degree in Community Health at Memorial. In addition, in order to fulfill the enhanced mandates in knowledge exchange and in capacity development envisioned in the Strategic Plan, we have created a new full-time position with responsibility for these two portfolios. As of September, **Ms. Theresa Mackenzie**, previously the Program Co-ordinator of the *SafetyNet* research program, has assumed the position of Manager, Knowledge Exchange and Capacity Development. As documented below in the 'Activities' section of this report, she has generated strategic plans for each of her areas of responsibility, documents that were examined and endorsed by the Board, and has already developed and launched a number of innovative programs.

The Centre's current staff complement is now as follows:

- Director (Stephen Bornstein)
- Administrative Secretary and Assistant to the Director (Annette McGrath)
- Manager, Knowledge Exchange and Capacity Development (Theresa Mackenzie)
- half-time Research Coordinator (Laurie Twells)
- half-time Research Officer (Janice Butler)
- part-time technician for computing and networking support (Michael Delurey)
- one part-time graduate student from MUN's GRADSWEP program (Vanessa Gibbons)
- one part-time graduate Research Assistant (Luke Power)

The Centre's budget also includes half of the salary of Elizabeth Hatfield, that Clinical Epidemiology Research Unit's research coordinator who serves as liaison between that unit and the Centre and provides the Unit with capacity to administer its current portfolio of research grants and to coordinate applications for new grant funding.

Co-located Units

The *SafetyNet* research program in workplace health and safety continues to share the Centre's office space and facilities as agreed to by the Board and the University as part of the original application for funding to the Canadian Institutes for Health Research under its 'Community Alliances for Health Research' program. *SafetyNet*, with the Dr. Bornstein as its co-director and co-principal investigator (alongside Dr. Barbara Neis of Sociology), is now in the fourth year of its initial five-year CIHR grant but has acquired three subsequent CIHR grants each of which has increased its activities, permitted the hiring of additional coordinators and research assistants, and extended its lifetime as a funded research unit. *SafetyNet* is currently working with researchers at Dalhousie, St. Mary's, the University of New Brunswick, and the University of Prince Edward Island, to develop an Atlantic network of researchers in workplace health and safety. It is also involved in a multi-year collaborative effort with the country's largest workplace health and safety research organization, the Institute de recherche Robert-Sauvé en santé et en sécurité du travail (IRSST) to help Atlantic Canada benefit from research and program innovations developed in Quebec.

The other organization sharing our space and facilities began doing so this past summer. It is the Newfoundland and Labrador Liaison Office of the Canadian Coordinating Office for Health Technology Assessment (CCOHTA). This national organization, based in Ottawa and funded jointly by Health Canada and the provinces, has now hired liaison officers in three provinces (with plans to add others soon) to enhance its ability to get its health technology assessment reports distributed and used more broadly among health decision makers, policy makers and practitioners. NLCAHR was asked by the current chair of CCOHTA's national board, Dr. Edgar Hunt of our Department of Health and Community Services, to try to find space to accommodate the new local office of CCOHTA and its liaison officer, Ms. Sheila Tucker. Fortunately, we were able to find the space and to arrange a contract with CCOHTA which allows us to provide the space in a manner that is financially neutral for us.

Space

As noted in last year's *Annual Report*, the enhanced activity and staffing at the Centre and the expanded activities of *SafetyNet* required additional space, which was found one floor down in our building at 95 Bonaventure Avenue and renovated and leased thanks to a generous allocation of supplementary funds from the University's Vice-President (Research and International Relations). The new additional lease was configured so that its duration is identical to the lease on the original space. By a fortunate coincidence, the request from CCOHTA occurred just as the negotiations with the landlord were undertaken and we were able to make an arrangement with CCOHTA and the landlord that works well for all three parties.

The Centre's lease for its two spaces at 95 Bonaventure Avenue expires at the end of May 2005). Sometime in 2005 or perhaps in 2006, the third floor of the new Inco Innovation Centre on the Memorial campus is slated to open. Some, but possibly not enough, space will be available for *SafetyNet* in this building. It has also now been determined that NLCAHR will be offered some space in this location. What remains to be determined is whether the space will be sufficient to accommodate the newly expanded requirements of the Centre (as well as those of *SafetyNet* and of the CCOHTA office). Various options will then have to be considered:

- moving all three units to the IIC
- having *SafetyNet* move but keeping the Centre, and possibly CCOHTA, at 95 Bonaventure or in some other space (on or off the MUN campus)
- having all three units stay housed elsewhere, either on campus or off.

The second and third options will all require that the University supply or fund space and, if what is involved is commercial space, that it continue to cover the rental costs.

A further element of uncertainty involves the timing of any potential move. Funding to complete the development of the third floor of the IIC has yet to be found and it is thus impossible to know when the space might become available. This will, in any case, happen well after the expiry of the Centre's current lease extension at 95 Bonaventure Avenue. It will thus be necessary to try to extend that lease again or to secure a new one. In order to do so, we will need to the University to give us answers to two questions:

- how much space will be available for us in the IIC?
- what is the likely opening date?

Discussions with MUN's senior executives are currently underway to resolve these matters.

FUNDING PROGRAMS

Awards Programs, 2003-2004

The Centre has been mandated by the government to support applied health research and graduate training in the province, both directly through the allocation of grants and fellowships and indirectly by helping attract funding from external granting agencies. The Centre's funding activities are aimed at research activity initiated by investigators resident in Newfoundland and Labrador and currently take three forms: research grants, graduate student fellowships and visiting scholars' grants.

1. Research Grants

▪ Development Grants (January 2004)

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

1. Fund the development of new letters of intent and research proposals for submission to national and international funding competitions
2. Support the enhancement of research proposals that have received a high scientific merit score in external funding competitions but did not secure funding
3. Support the enhancement of existing research proposals in order to improve their chances of success on resubmission to external funding competitions

The NLCAHR received three applications for the January, 2004 Development Grant competition. One of these applications was awarded funding.

Investigators	Project Title	Funding
Dr. Richard Audas , Don MacDonald, Phil Murphy, Lorraine Burrage, Sharon Alexander	Development of a Longitudinal Birth Weight Database	\$ 10,000
Total Funding Awarded		\$ 10,000

- **Project Grants (January 2004)**

Project grants are designed to support small research projects of high scientific quality that may not be eligible for funding from external sources and that are of direct relevance to the mandate and priorities of the Centre. During the 2003-2004 funding cycle, there was one call for Project Grants to which we received nine applications. The Review Committee recommended two projects for funding.

Principal Investigators	Project Title	Funding
Dr. Guang Sun , Ying wei Peng, Edward Randell	Discover the Genetic Culprits of Obesity in the Newfoundland Population	\$ 40,000
Dr. Terry-Lynn Young , Susan Moore, David Buckley, Mohammed Alam, Sharon Penney, Proton Rahman	The Clinical and Genetic Epidemiology of Pediatric Epilepsy in Newfoundland and Labrador	\$ 40,000
Total Project Grants Awarded		\$ 80,000

2. Fellowships

As part of the Centre's mandate to support the training and development of new health researchers in the province, the Fellowship programme is designed to facilitate applied health research programs through awards to students and fellows studying in Newfoundland. Fellowships are divided into three types: Master's Fellowships, Doctoral Fellowships, and Post-Doctoral Fellowships.

NLCAHR received 15 applications for Master's Fellowships and two fellowships of \$18,000 each for two years renewable. There were eight applicants for Doctoral Fellowships and the Centre awarded one Fellowship of \$20,000 renewable. The NLCAHR also awarded one Post-doctoral Fellowship for \$43,000. The master's and doctoral fellowships are funded on the basis of an arrangement for co-funding with Memorial University's School of Graduate Studies. In addition to these new awards, we are continuing to fund a number of multi-year fellowships that were initially awarded in previous years.

The successful applicants for 2003 – 2004 were:

Grantee	Program	Project Title	Award
Melanie Noel	Master of Science, Developmental Psychology		\$18,000 per year for up to 2 years (matched 1:1 by School of Graduate Studies)
Sylvia Reitmanova	Master of Science, Community Health		\$18,000 per year for up to 2 years (matched 1:1 by School of Graduate Studies)
James Drover	PhD Developmental Psychology	Modification of the Infant Contrast Sensitivity Card Procedure	\$20,000 per year renewable for up to 2 years
Dr. Nicole Power	Post-doctoral fellowship	Being a 'real fisherman': how masculinity mediates workplace safety practices and perceptions of risk, safety and health among Newfoundland fish harvesters in changing times	\$43,000 for 1 year
TOTAL FOR 2003 - 2004			\$99,000

Funding is continuing for the following fellowships awarded last year:

Grantee	Program	Project Title	Award
Alison Haynes	Master of Physical Education, Exercise Physiology		\$18,000 for Year 2 of 2 years
Holly Etchegary	PhD Psychology	Living with Genetic Risk: Meanings and Implications	\$20,000 for Year 2 of 3 years
TOTAL FOR 2003-2004			\$38,000

3. Visiting Scholars Grants

In its program for assisting Newfoundland research and academic organizations to bring in scholars from out of the province, NLCAHR provided the following funding in 2003-2004:

Grantee	Sponsoring Unit	Topic	NLCAHR Contribution
Nigel Rusted Lecture in Humanities and Medicine	Organizing Committee (Margaret Miller, Faculty of Medicine)	Dr. Jock Murray, Dalhousie University, Illness in National Leaders: A Troubling Issue in an Unstable World, Nov. 30, 2004	\$1,000
Dr. Darryl Pullman	Medical Ethics, Faculty of Medicine	5 participants in the Human Dignity and Quality of Life Conference, June 28, 2004	\$4,000
TOTAL FOR 2003 - 2004			\$5,000

Awards Program for 2004-5

Announcements have now been circulated about the 2004-5 Awards Program which will take basically the same form as the 2003-4 competition with similar deadlines and criteria and at dollar levels that will be increased slightly to keep pace with increases in fellowship rates elsewhere at MUN as well as at CIHR and CHSRF. One significant change has been introduced on the basis of a decision of the Board embodying a key provision of the Strategic Plan: the awarding of funding, in all programs except the Master's fellowships, will henceforth give priority to applications focusing on the three priority research areas identified by the 2002 Planning Day (the specific health challenges and burdens of Newfoundland and Labrador populations; wellness and health promotion; efficiency and effectiveness in the province's health system).

In addition, the Board has endorsed the creation of two new funding programs:

- an Establishment Grants program to help academic units at Memorial attract new faculty members in applied health research by providing funds to help top-up the initial package offered to them for such items as research assistance, computing, equipment or research travel;
- a Scholar-in-Residence program to bring interesting applied health researchers from other universities to the Centre and to the province for an academic year or semester

OTHER ACTIVITIES

Collaboration with Other Newfoundland Research Organizations

The Centre has continued to cultivate active and synergetic relationships with other health research organizations working in the province. The relationships developed in past years with the Clinical Epidemiology research unit, with the Health Research Unit of the Division of Community Health of the Faculty of Medicine, and with the Newfoundland and Labrador Centre for Health Information have all been reinforced, as has cooperation with Memorial's recently renamed Leslie Harris Centre for Policy Research.

Collaboration with External Research Organizations And Associations

The Centre continued to cultivate its working relationship with the Canadian Health Services Research Foundation (CHSRF) by participating in a variety of its national and regional meetings and by continuing to act as a Third-Party Co-Sponsor of CHSRF's annual Open Grants Competition. In the current year, we have been co-funding the following CHSRF grants involving Newfoundland and Labrador researchers.

Principal Investigators	Project Title	Funding
Linda O'Brien-Pallas, Gail Tomblin Murphy, Judith Shamian	Understanding the Costs and Outcomes of Nurses' Turnover in Canadian Hospitals	\$ 20,000 per year renewable for 3 years
Total Funding Awarded in 2003-4		\$ 20,000

As of September, 2004, CHSRF has transferred its Open Grants competition to the CIHR's Institute for Health Services and Policy Research (IHSPR) which will administer it as a Partnership for Health System Improvement Grant. The Centre has agreed to continue to co-fund this award with the same level of financial commitment (up to \$30,000 per project per year for up to 3 years per project). We have, however, tightened up the criteria for co-funding so that, to qualify, a research project must normally have as one its principal investigators a researcher based in this province.

The Centre continues to play an active role in the development of rural health research in this country. The Director continues to serve on the executive of the Canadian Society for Rural Health Research and on the Scientific Advisory Committee of CIHR's Rural and Northern Strategic Research Initiative. He collaborated with other researchers from Memorial as well as from the Centre for Rural and Northern Health Research at Laurentian University in a one-year research project funded by CIHR studying the approach taken by medical schools in Canada and elsewhere to the recruitment and training of medical students for practice in rural areas. He has also completed and submitted to CIHR's Rural and Northern Strategic Research Initiative the final report on health indicators for rural Canada that was the follow-up of a workshop organized by NLCAHR and held at Memorial in October, 2003.

The Centre has also been a participant in two recently formed national networks linking health research organizations. The first is the "Network of Directors of Health Services and Policy Research Centres." This organization was brought into existence in April, 2003 as a joint initiative of the Canadian Health Services Research Foundation (CHSRF) and CIHR's Institute for Health Services and Policy Research (IHSPR). The network brings together, on a regular basis, the directors of twelve research units in various parts of the country to share ideas on administrative, knowledge exchange and capacity development programs, to facilitate data sharing and collaborative research activities, and to coordinate efforts to promote national funding opportunities for applied health researchers and centres. The chair of this network is Dr. Charlyn Black of the Centre for Health Services and Policy Research at the University of British Columbia; NLCAHR's Director is the co-chair. The network is currently funded mainly by grants from CHSRF and IHSPR with some contribution for travel expenses coming from the individual centres.

The second network is the National Alliance of Provincial Health Research Organizations which brings together, on a bi-annual basis and through periodic electronic meetings, nine provincial organizations involved in providing funds for health research. The Alliance is currently led by the Michael Smith Foundation for Health Research (British Columbia) and co-chaired by the Nova Scotia Foundation for Health Research. NLCAHR's position within this organization is unusual in two ways: we are the only member that also undertakes research as well as providing funding for researchers, and we are the only organization that provides funds for only one component of health research (applied) rather than for the entire range of components. Membership in this association does not, however, cost the Centre very much and provides a variety of benefits, including enhanced national and international contacts, the sharing of ideas about the design and management of funding programs, and opportunities for participation in joint planning and projects.

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

Work with Key Stakeholders

1. Knowledge Transfer Health Policy Seminars with DHCS

Enhancing the research culture within the provincial Ministry is one important step in moving toward better evidence-based decision-making. In September 2003, discussions took place between the Department of Health and Community Services and the Centre about exploring opportunities to improve the use of research in the making of policy decisions. It was agreed that regular discussions of recent research work and its potential relevance to current Department issues would help improve policy makers' skills in using research and in formulating researchable questions.

Therefore, in collaboration with the Centre, a series of lunchtime research seminars was developed, to allow employees of the Department and Centre-affiliated staff and researchers to address the scientific underpinnings of current health and social policy issues. These seminars took place on a regular basis throughout the year and are on-going.

The purpose of the series of seminars is fourfold:

- to introduce important new health and social policy research, particularly in the area of health services research;
- to establish a process for identifying the research-related needs and priorities of the Department and its staff for special NLCAHR attention;
- to improve the skills of government participants in developing researchable projects, assimilating research evidence and integrating it into their decision-making activities;

- to enhance the capacity of university-based researchers to work with policy makers in formulating research questions, carrying out research, and communicating the results

Between November 2003 and November 2004, four seminars took place. The sessions highlighted the relevance of up-to-date research, both at MUN and elsewhere, to the priority policy issues confronting the Department and the province. The sessions were:

- **Why Bother with Research?** Laurie Twells, MSc, NLCAHR, Memorial University
- **Privacy and Confidentiality** Dr. Daryl Pullman, Faculty of Medicine, Memorial University
- **The Provincial Mental Health Strategy** Joy Maddigan, Director of Policy and Planning, DHCS
- **Critical Appraisal of Research** Dr. Abe Ross, Department of Psychology, MUN

The program of seminars is set to continue for the second year. Seminar dates and topics have now been determined.

2. Interaction with Health Boards and with the NLHBA

The Centre's staff has worked with the NLHBA and NLCHI to develop and disseminate a web-based compendium of ongoing research and quality improvement initiatives in the province's health boards. It has continued to discuss with NLHBA and with the Health Care Corporation of St. John's possible knowledge exchange and priority sharing opportunities.

3. Commissioned Research

• The Doctors' strike

On September 30, 2002 the physicians of Newfoundland and Labrador commenced a twenty-day work stoppage. Following the conclusion of the strike, at the request of the then Deputy Minister of Health and Community Services (Robert Thompson), a Steering Committee was organized to study the impact of the strike on the provincial health system. Over a series of meetings, it was agreed that the evaluation of the impact of the strike would be carried out in two parts: first, an examination of public perceptions of the strike and, second, an evaluation of the utilization of both physicians' services and the provincial drug plan during this period. Bristol Group was contracted to carry out Part 1 of the evaluation and it conducted focus group sessions and a telephone survey in order to determine the public's perceptions of the strike. NLCAHR carried out Part 2 of the study with guidance from the Steering Committee. Data was collected from the Department of Health and Community Services and the Institutional and Integrated Health Boards in order to determine the impact of the strike on utilization of health services.

After waiting in vain for almost a year for the arrival at the Newfoundland and Labrador Centre for Health Information of updated data on health services utilization, we decided to submit a preliminary report of the study to the Department of Health and Community

Services for review. Once the final utilization data has arrived and has been processed, we will provide the Department with a revised draft incorporating the new information.

- **Adverse Events / Patient Safety Survey**

In March, 2004 the Centre was asked by the co-chairs of the province's Adverse Events/Patient Safety Committee (Ms. Loretta Chard of the Department and Ms. Jeannie House of the NLHBA) to help design a short survey on patient safety and to administer it to the province's institutional and integrated boards as well as to the St. John's Nursing Home Board and the Newfoundland Cancer Treatment and Research Foundation. The questionnaire consisted of two parts. Part A concerned the use of terminology in the area of adverse events/patient safety. Three of the most commonly used terms in the Canadian Patient Safety Dictionary were included, along with their definitions, for consideration by the Health Boards. Part B contained three questions, adapted from a major national survey by Baker and Norton, on patient safety practices current in each organization. After discussion with several of the province's health and community services boards, the decision was taken to include these four boards in the survey as well.

A report on the results of the survey was submitted to the Adverse Events/Patient Safety Committee and a presentation was prepared for presentation by Loretta Chard at the NLHBA annual conference in October.

4. Research Workshops

- **Primary Care Reform**

On June 4 2004, NLCAHR hosted a symposium with more than sixty researchers, health care professionals and policy makers to explore potential research topics stemming from Newfoundland and Labrador's primary health care (PHC) renewal initiative. The objective of the event was to identify research questions and fundable research projects and to foster the formation of one or more locally-based research teams that would begin designing research proposals for submission to federal or international funding agencies. The symposium was organized by NLCAHR in conjunction with the Office of Primary Health, the Faculty of Medicine's Division of Community Health, and the Clinical Epidemiology Research Unit, also of the Faculty of Medicine.

During the day-long workshop, participants generated six potential research projects on primary health care renewal in three main areas: Governance and Process, Clients and Communities, and Health Outcomes. After the forum, the Centre provided staff support and meeting space to allow the teams to further develop their research plans.

At the Symposium, NLCAHR announced that it would provide up to \$15,000 in seed grants to the most promising groups to help them develop their ideas into full-scale funding proposals. Five Letters of Intent were submitted by the deadline and these were reviewed by a small evaluation committee. Three teams were awarded \$5000 each:

Project Team	Project Name
Dennis Sharpe, Vernon Curran	An Inter-professional Education Strategy for Enhancing Collaborative Primary Health Care

	Practice in Newfoundland and Labrador
Doreen Neville, Nandita Chadhuri, Juanita Barrett, Gill White, Veeresh Gadag, Max House, Carl Robbins, Michael Jong, Kayla Gates, John Knight, Glenda Reid, Janice Cooper, Patricia Dwyer, Derek Flemming	Evaluating the Impact of Health Information Systems Capacity on Team Functioning and Health Services Delivery in Primary Health Care Initiatives
Brendan Barrett, Juanita Barrett, Gill White, Marlene Chapellaz, Nandita Chadhuri, Canadian Diabetes Association, Saskatchewan CDM Working Group; NLCAHI	Chronic Disease Management and Primary Health Care Renewal

▪ **Research Forum on Obesity and Healthy Body Weight**

NLCAHR's Planning Day in June 2002 identified obesity as a high-priority research area among our stakeholders. In response to these discussions and to the increasing research interest and public focus on the topic, the Centre organized a research forum on obesity and healthy body weight in St. John's on October 27, 2004.

More than 100 people participated in the one-day event, including a slate of 12 presenters, seven being leading researchers on a range of obesity-related issues from outside the province. Dr. Diane Finegood, Scientific Director of CIHR's Institute of Nutrition, Metabolism and Diabetes was the keynote speaker. The day-long event provided a valuable opportunity for local researchers and research users to interact with experts from around the country, to learn about cutting-edge research initiatives and ideas and to raise awareness and interest in the national research community about our local research activities and capacities.

The forum received considerable media coverage, including four separate pieces on provincial CBC radio, one national CBC radio report, and coverage by Memorial University media. A full report on the event has been posted on the NLCAHR website.

▪ **Future Research Meetings**

As outlined in the Centre's Strategic Plan, we will continue to address our goals of building research capacity, supporting quality research and facilitating the exchange of knowledge among researchers and between researchers and decision makers by organizing events of this kind once or twice every year.

5. New Plans and Initiatives in Knowledge Transfer and Communications

We have generated a Communications Plan that will be used to guide the development and implementation of communication and knowledge exchange activities at the Centre. Several aspects of the plan have already been implemented or are in progress. These include:

- Survey of stakeholders: a web-based survey has been launched and advertised through the Centre's electronic bulletin. The objective of the survey is to clarify the communication needs and interests of researchers, decision makers and other stakeholders in the province so that we can focus our communication efforts on them.

- Newsletter: a quarterly newsletter has been developed, and the first issue was produced in October 2004. The newsletter will profile the work of the Centre and of Centre-affiliated researchers, will offer summaries of relevant applied health research done in the province and elsewhere, and will provide information on upcoming grant competitions and funding opportunities. In addition to a paper format, the newsletter is available on the NLCAHR website. A subscription form is available on the website. Two hundred copies of the first edition of the newsletter were printed, and approximately 250 were distributed electronically.
- E-bulletin: an electronic bulletin has been developed and two issues have been distributed to date. The bulletin will contain time-sensitive information such as new funding programs or NLCAHR event announcements, and will be distributed on an as-needed basis in the intervals between regularly scheduled issues of the Newsletter. The e-bulletins are also archived on the NLCAHR website.
- Upgrade of the website: we are in the process of re-developing the NLCAHR website to accommodate the increasing amount of information it has come to include and the new functions we hope it will perform. The re-development will result in clearer navigation, a focus on researcher profiles and news, and easier up-dating and site management.
- Summaries of funded research: we are in the process of collecting and editing reports on research funded by NLCAHR with a view to raising the profile of affiliated researchers and highlighting the applied health research being conducted in Newfoundland and Labrador.

6. New Plans and Initiatives in Capacity Development

A planning document has been developed to address the capacity development goals of the Centre's. Some aspects of the plan have now been implemented or are in process, including:

- consultations with the Research Advisory Council of NLCAHR, the Office of Research and Graduate Studies in Medicine, and Memorial's Office of Research to discuss the optimal use of our resources in this regard and ideas for collaborative work;
- posting the best "grantsmanship" links (with brief summaries) as well as other useful grant-writing information on the NLCAHR website;
- generating a list of researchers at MUN who have been members of peer-review committee at CIHR, CHSRF and SSHRC and a list of researchers who have received health research funding from these agencies as well as from other external agencies such as Health Canada. These lists will be used to recruit volunteers for a planned pre-review and mentorship program for new applied health researchers;
- publicizing research funding opportunities of particular interest to our stakeholders;
- coordinating a funding application to CCOHTA to improve provincial capacity in the production and use of health technology assessments
- producing a preliminary plan for two grant-writing workshops: one targeted at new researchers, the other at persons who have an interest in working as grant writers on a contractual basis

FINANCIAL SITUATION

As of the end of November, 2004, the Centre had a cash balance of \$649,138 (taking into account financial commitments to the end of the current Fiscal Year). Income for the period beginning December 1, 2004 and ending on November 30, 2005 will be \$500,000 (our annual allocation from the Department of Health and Community Services). Expenditures for the same period (not including amounts already committed) are expected to be \$699,059 as itemized in the following table:

Item	Amount
Salaries and benefits	224,029
Operations	52,750
Research Grants	95,000
Establishment Grant Program	15,000
Scholar-in-Residence Program	10,000
Fellowships (new)	84,700
Fellowships (ongoing)	103,300
Directed research	70,000
Support for Patient Research Centre	24,280
Special Grant to Teleoncology Program	20,000
Total	\$699,059

Accordingly, our financial situation at the end of November, 2005 will be as follows.

Starting Cash Balance	\$649,138
Income	\$500,000
Expenditures	\$-699,059
Expected Ending Cash Balance	\$450,079

The Centre is now spending more to run its operations and programs than it takes in and has been doing so consistently for the past three years. What has permitted us to do so is an accumulated surplus from our first two years of existence. This surplus resulted from the interaction of two factors. Our initial year of existence overlapped with two fiscal years and so we were given two allocations of funding in short succession. We received this generous initial funding at a time, moreover, when we were still very much in start-up mode and our level of expenditures was relatively low. Now, however, our activities and expenditures have reached 'cruising speed.' After several years of full activity and expanded obligations--including responsibility for the Director's salary which, from Year 2 onward, has had to be assumed by the Centre rather than by the University--the accumulated surplus has begun to be used up. We can continue to live on our accumulated surplus in this manner for another few years. After that, the surplus will be gone and we need either to increase our revenues to a

level that can support our programs or to cut our costs and our programs in order to make ends meet.

FUTURE DIRECTIONS

In the coming year, the Centre intends to continue to implement the recommendations of the Strategic Plan. We will reinforce and, if possible, expand our funding programs in order to provide better support for the training of a new generation of health researchers and to assist active researchers in examining issues that are of strategic priority to our province's health system and to the health and wellbeing of the population. We will continue to expand our knowledge exchange activities in conjunction with key stakeholders on priority health issues as identified by them and we will employ a variety of improved methods including an upgraded website, improved newsletters and bulletins, and regular research workshops. We will also begin to explore with our partners and stakeholders the possibility of developing for this province the type of comprehensive health research fund operating in most other Canadian provinces to support research and knowledge exchange in the full spectrum of health fields (rather than just in applied areas) and to consider a possible role for the Centre in designing and managing such a fund.