A Tale of Two Systems: From Research Capacity to Transformation

The Organizational Perspective

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Outline

- Why did we build research capacity?
  - What approach did we use?
- Where have we got to?
- The environment has changed.
  - Is the approach still valid?
- How might we need to change our approach?
What was our research role: why did we build research capacity?

- Improve patient care
- Improve recruitment & retention of high calibre physicians & staff
How did we build research capacity?

- “What’s special about us?”
  - Island partners
  - Moated, aging population
  - Single hospital provider with cradle-to-grave EHR

- Start small & build collaboratively
  - Student grants
  - Collaborative mechanisms to resolve problems
  - Range of other collaborative granting opportunities
Main challenges – all about funding!

- Sustainable funding
- Protecting time for researchers
- Charitable funding for research
Our current research endeavour

- Foundational work on systems & compliance
- New collaborations
- Priority areas for HA and in light of Ministry priorities
  - Elder care, mental health & addictions, First Nations health & wellness
- Creative opportunism
- Small scale - but quite high impact and growing
- Unanticipated benefits
Collaboration and partnerships increase
Research environment has been enhanced

Skills to conduct and use research increase
Sharing and use of evidence increase

Health and health services improve

Short term 2012 - 2014
- Increased island-wide research partnerships
- Increased clinician and decision maker involvement in research
- Infrastructure developed and improved
- Increase in high quality research personnel
- Increased funding to health research
- Increased research and KT skills of researchers and users

Medium term 2014 - 2016
- Increase in research relevance
- Increased funding to health research
- Increase in awareness and reputation as health research location
- Increase in research volume, quality and relevance
- Relevant evidence is transferred to users
- Evidence use to inform change in the health system
- Evidence use to inform practice change

Long term 2016 +
- Improved population health on Vancouver Island
- Enhanced health services on Vancouver Island
Evaluation Plan

Have we increased:
• Number of researchers
• Volume and quality of research
• Research in Seniors, Aboriginal and Mental Health/Substance Use

Have we:
• Strengthened dissemination and uptake of research evidence
• Made research opportunities more equitable across the Island
  • for patients and researchers
• Contributed to the self-sustainability of research

And:
• Have there been unanticipated benefits?
The new environment

- BC Strategy for Patient Orientated Research
- Academic Health Sciences Network (AHSN)
- Research and biomedical innovation as a major contributor to the BC economy
- Need to ensure that research funds are used to maximum benefit
What’s our role in the new world?

- Source of talent
- Source of data
- Source of patients
- Identification of research questions
- Translation of research evidence into practice
Possible Implications:
small fish, bigger pond

- No longer “our” research endeavour
  - Ministry priorities
  - HA priorities – only if funded by operations or charitable sources
- Migration of talent to bigger centres
- Loss of HA research autonomy

Need to adjust our model
Possible changes

- Environmental - scale, infrastructure, & data
- Reciprocity
  - Mutual interests reflected in specific agreements with partners
    - E.g. Our researchers remain local but contribute provincially
  - Trading environment
- Tight research-clinical coupling
  - Getting expert at bringing research into practice
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How We Got Here:
The IWK Research Services Office

Dr. Jill Hatchette, PhD
Consulting Scientist
Interdisciplinary Research
Research Services, IWK Health Centre
Creating A Culture of Research: A brief timeline

2008
- 2 fulltime/2 part-time research associates
- Nursing research

2012
- 2 Consulting Scientists
- Fundamentals of Research Design Course
- 1 residency program

2016
- Blended Instruction models
- creo
- 5 residency programs

How did we get from there………………………………………………………………….to here?
Bottom Up Strategies

- Research Road Shows:
  - What can we do for you?
- Advertising/Awareness campaigns
  - Research Services Open House
  - Screens in health centre
  - Banners at events
  - PULSE notices
  - Weekly updates
- Face-to-face meetings (formal and casual)
- Encouraging researchers, clinicians and administrators to engage
- Innovation Rounds
These strategies led to...

- Curiosity
- Inquiry
- People coming together
  - Journal clubs
  - Research groups
  - Collaborations
  - Partnerships
- New education and training opportunities
- Innovation

- All demonstrate a subtle shift in how we think about and engage in our areas of practice
These strategies led to

- Enthusiasm
- A sense of belonging and unity
- A desire to succeed
- A desire to be the best
- An organizational shift in attitudes toward research
Listening to the people we serve

- Annual satisfaction surveys
- Needs assessments
- Open door policies
- Town Halls
- Evaluations
Researcher Support via Internal Funding Programs

- Category A
- Category B
- Research Investigatorship
- Establishment/Recruitment Grant
- Research Associateship
- Post-Doctoral Fellowship
- Graduate Studentship
- Summer Studentship
- Bringing People Together
- TRIC (Translating Research Into Care) Funding Program
- Equipment Maintenance
Providing the necessary tools for success
DID YOU KNOW THAT

RESEARCH SERVICES OFFERS HELP WITH:

- SCIENTIFIC EDITING?
- QUESTIONNAIRE DEVELOPMENT?
- DATA ANALYSIS AND INTERPRETATION?
- GRANT WRITING AND REVIEW?

CONTACT US TO SET UP A MEETING SOON.
www.iwk.nshealth.ca/idr
RESEARCH EDUCATION
FOR NOVA SCOTIA HEALTH AUTHORITY & THE IWK HEALTH CENTRE.

DR. JILL HATCHETTE
I CAN HELP YOU WITH:
- Grant writing and review
- Design and methodology
- Survey Design
- Data analysis and interpretation

DR. AMY GRANT
I CAN HELP YOU WITH:
- Scientific editing
- Design and methodology
- Survey Design
- Data analysis and interpretation

SUPPORTING YOUR RESEARCH THROUGH EDUCATION
The Nova Scotia Health Authority (NSHA), IWK Health Centre (IWK) and Research Methods Unit (RMU) are committed to working together to strengthen research capacity and to build research excellence. A key element of this commitment is the research education program.

FOR MORE INFORMATION
IWK Health Centre Research Services
www.iwk.nshealth.ca/idr
Ph: 902-470-8717
Research Education

- Program Evaluation
- Qualitative Research Design
- Ethics Workshops

- Grantsmanship Prep
- Journal Club Critical appraisal

- Implementation Science
- Patient Engagement
- Engaging Administration

- Fundamentals of Research Design
- Intro to Stats
- Intro to SPSS
- Advanced Stats

- Literature Searching
- RefWorks
- EndNote
Supporting Researchers

- Team or Individual Consultations
  - Developing research questions
  - Design and methodology assistance
  - Data analysis planning
  - KT strategies
  - Grant review
Celebrating Research and Researchers

- Biannual Interdisciplinary Research Conference
- STARS Events (Special Time to Appreciate and Recognize Staff)
  - STARS Research Celebration Reception
  - STARS Research Award
  - Research Mentorship Award
- Research Celebration
- Nursing Week Research Recognition
Above and Beyond: Community Reach
Contact

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The mission of the community of the IWK Hospital for Children is to advocate, facilitate and deliver family centered health care to the children of the Maritime provinces. Patient care, research and education form the basis of our commitment to:

- Developing and delivering internationally recognized standards of child health care
- Achieving a leadership role in selected areas
- Preventing accidents, trauma and illness
- Maximizing the growth and development potential of children
- Ensuring geographic and social accessibility to our expertise

1991
Mission/Purpose

PURPOSE

To provide superior healthcare through innovation, teaching and research and a commitment to quality and safety, creating healthier, stronger communities and a better quality of life for those whose lives we touch.

2012
CARE PROVIDED - ANNUAL SNAPSHOT:

4,854 babies delivered
57,000 inpatient days
28,361 children’s emergency visits
253,961 ambulatory care visits
330 patient transports

Annual Budget: $260 million

Facilities: 11
Our Demographics

CARE PROVIDED – ANNUAL SNAPSHOT

Number of Babies Born: 5,922
Admissions to Hospital: 71,599
Unscheduled ER Visits: 370,971
Number of Residential Care Beds: 5,399
Hours of Home Support Service: 3.25 M

Annual Budget: 2.2 Billion

Number of Facilities: > 150
Priority Research Populations

- Women
- Children
- Youth
- Families
Priority Research Populations

- Seniors
- Aboriginal Health
- Mental Health and Substance Use
Institutional Strategic Planning

IZAAK WALTON KILLAM HOSPITAL FOR CHILDREN

1991 STRATEGIC PLAN

1991 - 2016

IWK Health Centre
Institutional Strategic Planning

2015/16 Annual Plan

7. Academics/Research

Operations and Support Services
Funding

Operational Support
- IWK Health Centre Foundation
- IWK Auxiliary
- Research Support Fund
- Overhead / Indirects
- Institutional Endowments

Infrastructure Support
- Canadian Foundation for Innovation
- Atlantic Canada Opportunities Agency
- Nova Scotia Research and Innovation Trust
Operational Funding
To date:
Island Health Operating Budget and MSFHR Award
Overhead (clinical trial contracts)

In 2016
SPOR - BC SUPPORT Unit Matched Partner Funding (2016
SPOR - BC SUPPORT Unit Regional Centre
Researchers

Research Centres: 5

Researchers: 100

Research Chairs: 10

Research staff: 400

Research Learners / Volunteers: 200

Number of Active Studies: 685
Researchers

# Research Centres and Chairs:  0

Direct Support to Research Chair at UVic:  1

Embedded Academic Researchers:  3

Researchers:  192
(One at Island Health has protected time)

Research Staff:  237

Learners and Volunteers: 70 (56 and 14)

Number of Active Studies:  353
Collaboration - IWK
Collaboration - Island Health

BC Academic Health Sciences Network
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Panel Discussion