

NSHRF Priority Setting Monthly Update for November 2009

This document provides a summary of documents and background material produced as well as the consultations held in September and October 2009. For more details on the documents and background materials please refer to the NSHRF website: www.nshrf.ca.

Background Documents and Other Materials

As part of the priority setting process a number of background documents were prepared. These documents were "living documents" and were posted on the NSHRF website as they were completed for your information, feedback, input and suggestions. If readers felt that information was missing, incorrect or misrepresented from any of the background documents, or the process, they were asked to submit that information to the NSHRF up to and including **November 9, 2009** for consideration as priorities are established. These documents are now complete.

Posted in October

Measuring Nova Scotia's Results in Health Research: 2009 Update Report

The report presents the findings of an analysis of health research spending over the eight fiscal years from 2001-02 to 2008-09 using a variety of published data sources and related indicators of health research funding success.

The major conclusions from this report include:

- Nova Scotia is producing world class research but is losing ground in the amount of funding received when compared to the other provinces.
- While NSHRF research funding has remained constant over the last number of years, in real dollars (adjusted for inflation) the amount of funds available has decreased by 1.2 million dollars.
- Health research is an important economic driver to the Nova Scotia economy, contributing 920 person years of employment annually and 321.2 million dollars to the GDP over the study period.

Please see the full report at:

<http://www.nshrf.ca/Acctabil/HRSI%20Report%202009%20Final.pdf>

Current Research Priorities in Nova Scotia

A review of the research priorities of research institutions and selected government departments (Health, Health Promotion and Protection and Community Services) in Nova Scotia was conducted using the six major health issues as a lens, to identify where gaps and capacities may exist in the Nova Scotia research community with respect to the six identified health issues.

The report concludes that:

- Amongst research institutions there is interest in research related to health disparities and chronic disease and injury prevention.
- Few research institutions have priorities related to re-alignment of the health system to emphasize primary health care, sustainable continuing care, chronic disease management, and health human resources.
- All of the major health issues are of interest to at least one of the selected government departments.

Please see the full report at:

<http://www.nshrf.ca/ResearPriorities/Environmental%20Scan%20-%20Research%20Priorities%20and%20Capacities.pdf>

Analysis of Strategic Research Plans

This report considers the alignment, overlap and/or duplication of the research plans of Nova Scotia's universities, Capital Health and the IWK Health Centre. The relationship of these areas of alignment to Nova Scotia government priorities as articulated in the Social Prosperity Framework and the business plans of the Departments of Health, Health Promotion and Protection (HPP), and Community Services in also examined, Finally the report explores the alignment of the research plans of the Canadian Institutes of Health Research (CIHR) and its member institutes, and compares and contrasts these findings to those of the above noted Nova Scotia analysis.

Findings from this report include:

- There is no systems level approach to (health) research priority planning in Nova Scotia or in Canada.
- NS research institution's priorities do not address research needs of the provincial government.

Please see the full report at:

<http://www.nshrf.ca/ResearPriorities/Analysis%20of%20Strategic%20Research%20Plans.pdf>

Posted in September

Major Health Issues in Nova Scotia: An Environmental Scan

This scan considered high level morbidity and mortality data in order to identify six major health issues for the province of Nova Scotia. For full details and a listing of systematic reviews and other research reviews related to the major health issues please see the full report at:

<http://www.nshrf.ca/ResearPriorities/Environmental%20Scan%20Current%20Major%20Health%20Issues.pdf>

Omnibus Survey

An omnibus survey was conducted on behalf of the NSHRF to gauge public opinion on health research in Nova Scotia. The purpose of the survey was to determine areas of concern to the public regarding health system issues, health behaviour issues and diseases that affect Nova Scotians. Not surprisingly, the public's major areas of concern mirror what was found in the scan mentioned above. Please see the full report at:

http://www.nshrf.ca/ResearPriorities/09-3%20NS%20Health%20Research%20Report_Appendices.pdf

Consultations

In **October 2009**, consultations were held with the following groups/organizations:

- Annapolis Valley District Health Authority
- Arthritis Society
- Capital District Health Authority
- Cumberland District Health Authority
- Faculty of Graduate Studies, Dalhousie University
- Greater Halifax Partnership
- Guysborough Antigonish Strait Health Authority
- In-house Consultation Sessions (two sessions with invited stakeholders)
- Mount Saint Vincent University
- NS Department of Education
- NS Department of Health
- NS Department of Health Promotion and Protection
- NSHRF Board
- Pictou County District Health Authority
- Saint Francis Xavier University
- Saint Mary's University

In **November 2009**, consultations were held or are planned with the following groups/organizations:

- Canadian Cancer Society, Nova Scotia Division
- Public Health Services, Capital District Health Authority
- NS Department of Community Services

In **September 2009**, consultation sessions were held with the following groups/organizations:

- Acadia University
- Advisory Council of CEOs, NS Department of Health
- Alzheimer's Society of Nova Scotia, Board of Directors
- Cape Breton University
- Heart and Stroke Foundation of Nova Scotia, Board of Directors
- Faculty of Health Professions, Dalhousie University, Research Advisory Committee
- Faculty of Medicine, Dalhousie University, Research Advisory Committee
- NSHRF Research Advisory Committee
- NSHRF Staff

Feedback from Consultations to Date

Listed below are major themes and key points related to the themes that have been raised in discussion during consultation sessions. In some cases suggestions for priorities were made, these are indicated by *italics*.

Overall Themes

The following themes are common amongst all groups consulted.

- Data/data infrastructure
 - There are significant challenges in data use, quality and access across the health/health research system.
 - Health system data is not available in real time (how can we evaluate if we don't know)
 - Quality and quantity of information available varies making decisions more complicated
- Evidence and the decision-making process
 - The research continuum, quality improvement, evaluation and research are linked, but not in the current systems
- Protected time to participate in and utilize health research is needed
- Research is needed to provide long-term solutions but access to relevant evidence in the short-term is needed

Academic Community

- Ensure priorities do not exclude the basic sciences
- Address issues that are cross-institutional for both small and large universities (i.e. teaching loads)

- Maintain and emphasize support for collaborative research
- Concerns raised over the possibility of being too focused and losing sight of the need for a solid base of health research activity to sustain:
 - Emerging world class research
 - Faculty recruitment and retention
 - Health care practitioner recruitment and retention
 - Ability to capitalize on opportunistic national funding programs
- *Provide incentives for researchers who are exploring cost savings for the health system*
- *Use limited dollars to leverage national opportunities*

District Health Authorities

- Access to and limited infrastructure to utilize research
- Contextualizing research results for changes in practice
- Knowledge transfer and exchange support is required to :
 - Address gaps in practice (what we know versus what we do)
 - Support applying research where it exists (i.e. quality improvement)
 - Addressing economic challenges of health care under current models raises question of knowledge generation versus mobilization debate

Government Staff

- Anecdotal and personal opinion are sometimes the basis of system decisions
- Increased accessibility of evidence could de-politicize the decision making process*
- Unsure if research supports their work on population health
- How to conduct the best evaluations and whether research can or should help with this
- *By 2014 the Canada Health Transfer will be re-negotiated; could we collaborate to address critical questions for this negotiation (systematic reviews etc.)*

*Feedback received by District Health Authorities as well.

Business Community

- Pragmatism of the business community:
 - De-politicize decision making
 - Prevention as opposed to disease focus
 - Use data for better decision making information
- NSHRF accountability is a strength
- Commercialization
- Chasing matching funding will be never-ending

Health Charities/Non-Governmental Organizations

- Should be disease based
- Should be broad based

- Focus on prevention
- With NSHRF's independence we are uniquely positioned to have a catalyst role to broker changes within the health system

Final Update

In December another update will be circulated which will include a final summary of consultation feedback, and a synthesis of the electronic surveys conducted with the health research and health system communities and the general public.