An Evaluation of the Nursing Research Fund: Lessons to Date and Recommended Next Steps

Prepared for the Canadian Health Services Research Foundation

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Details on Evaluation Methodology
The evaluation process was divided into four main stages in order to achieve three tasks: data collection; data analysis; and data summation:

**Stages I-III: Data Collection**

*Stage I* involved the preliminary collection of documents (namely the original agreement between the Federal Government and CHSRF) that helped establish the key objectives and vision of the NRF. Once the main objectives were clearly defined, the relative activities/programs/processes/outputs established by the CHSRF in order to achieve the objectives of the NRF were identified. *Stage II* involved the collection of quantitative data related to the programs/activities of the NRF, and mainly included annual reports, financial reports, and the review reports from each nursing Chair. *Stage III* involved the solicitation of key stakeholders in the Canadian nursing community in order to determine their perspectives on the relative activities, successes and/or failures of the NRF. Stakeholders were recruited for interviews using a “purposive sampling” approach, whereby participants were selected based on their recognized affiliation with the NRF and/or nursing research community. A list of all individuals affiliated with the NRF was compiled based on the NRF-related documents provided by the CHSRF and the contact list of individuals informed about the “wind-down” of the NRF. The type of affiliation (i.e. applied for NRF funding, received NRF funding, Chair award holder, Training award holder, decision-maker partner, etc.) was listed beside each individual name, and the number and type of affiliations were then sorted. Individuals who had more than one affiliation (i.e. both a Training award holder and applied for NRF funding) were prioritized in order to maximize feedback about the various Program areas. Final sample sizes were dependent on financial resources and restricted by the time available for this evaluation. Thirty-six stakeholders were initially recruited for interviews, and 23 interviews were ultimately completed (response rate of 64%). The demographic breakdown of the type and numbers of stakeholders both recruited and interviewed is provided below.

<table>
<thead>
<tr>
<th>Type of Stakeholder</th>
<th>Number Recruited</th>
<th>Number Interviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic/Researcher</td>
<td>17</td>
<td>9</td>
</tr>
<tr>
<td>Trainee/Researcher</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Decision-maker</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td>Professional Association</td>
<td>4</td>
<td>2</td>
</tr>
</tbody>
</table>

*19/23 of the above interviewees are or were RNs*

**Stage IV: Data Analysis and Data Summation**

Following quantitative (Stage II) and qualitative (Stage III) data collection, we summarized the data and allocated each activity to the appropriate cell(s) within the evaluation matrix. The evaluation team then discussed the contents of each cell, and based on our comments, a rating of success for each cell was determined. Cells that contained an exceptional number of activities that targeted the particular Objective were considered “successful”; cells that contain 3-4 examples of activities that targeted the particular Objective were considered “some gaps remain”; and cells that contained 2 or fewer examples of activities that targeted the particular Objective were considered “significant gaps remain”. The evaluation team thoroughly discussed all final ratings and carefully reviewed ratings that generated different ratings among evaluation team members. Our last step was to make recommendations regarding the completion or renewal of the NRF.
Appendix B:

List of NRF-related Documents Received
3. Terms of Reference for Nursing Advisory Committee (2001)
4. Projected NRF Expenditures for 2001
5. NRF Expenditures for 2002
6. Expenditures and Summary of NRF Activities for 2003
7. Table of CHSRF Funded Awards (both CHSRF and NRF amount) within the Nursing Theme (1999-2003)
8. Teleconference Notes (Nursing Advisory Committee) on 2nd year Evaluation Process of Nursing Care Partnership (2004)
12. 2004 Annual Report on the Nursing Research Fund
13. 2005 Annual Report on the Nursing Research Fund
14. 2006 Annual Report on the Nursing Research Fund
16. (Majority of) Annual Reports and 4th Year Review Reports for Nursing Chairs (excluding Janice Lander), the FERASI Centre and the Ontario Training Centre
Appendix C:

Summary of Activities for each Nursing Chair*

* With the exception of Dr. Janice Lander
Sources: Various Annual Reports, 4th Year Evaluation Customized Review Reports, and Chair websites
NURSING SPECIFIC CHAIRS (4):

1. Lesley Degner, University of Manitoba
   Oncological Nursing

Objective 1: Creation of Research Capacity
- Helped to initiate a PhD program in Cancer Control, which is a joint program between Department of Community Health Sciences in the Faculty of Medicine and Faculty of Nursing
- Graduates currently play a major role in knowledge transfer in front-line care settings
- As a result of the Chair’s Program, the University of Manitoba has recruited 6 new scientists for the Faculty of Nursing, 5 of whom have a nursing background
  - Her research group teaches in the core course for the PORT Program (Psychosocial Oncology Research Training Program)
- Dr. Degner has created research capacity in the nursing environment as opposed to the more traditional academic environment
  - More Masters graduates move into advanced practice roles versus PhD studies (in a ratio of 3:1), which is addressing the shortage of advanced practice nurses who are trained in evidence-based practice

Objective 2: Expansion of Research Output
- Received Canadian Association of Nurses in Oncology Award for Excellence in Research, 2003
- Received Cancer Nursing’s article of the year award for the manuscript “A New Approach to eliciting meaning in the context of Breast Cancer” in 2003
- Working as part of a team led by Dr. Carole Estabrooks for a project called Translating Research in Elder Care (TREC), which was the largest operating grant awarded in the last CIHR competition, the largest single grant any nursing investigator has ever received in Canada and most likely the largest peer-reviewed knowledge translation grant
  - lead in one of three major projects, which focuses on how context influences knowledge uptake and use in long term care settings
- Participation in two newly funded projects related to health services and policy development in the cancer sector
  - 1) CHSRF-funded project being conducted in rural British Columbia to elucidate issues about continuity of care
  - 2) Health Canada project to study how policy documents related to nursing work life are (or are not) being used in settings providing cancer care in Canada
- Publication of 63 manuscripts in peer-reviewed journals by members of the group, with an additional 23 currently under review (4th year evaluation customized report)
- Attained 9 nationally funded operating grants (NCIC, CIHR), for a total of $535,511 in funding as Principal Investigator; Co-Principal in 2 national training grants valued at $4,300,000; plus a total of $5,057,363 in other grants on which she is a Co-Investigator
- Many of the Chair’s research group has received CIHR funding, including:
Robert Woodgate (PI) for 1-year project entitled *An ethnographic study of adolescents’ conceptualization of cancer and cancer prevention: Framing cancer and cancer prevention within the life-situations of adolescents*

Alan Katz (PI) for 5-year project entitled *Primary Care Oncology, New Emerging Team*

**Objective 3: Creation of Capacity to Use Research**
- Attends regular meetings at CancerCare Manitoba
- Has dedicated research space within a “front-line” nursing work environment (Health Sciences Centre in Winnipeg)
  - She works closely with senior health science centre decision makers to assess nursing work life, providing the opportunity for immediate transfer of research knowledge to inform management or clinical decision makers
- Holds regular discussions and network meetings with decision makers, such as:
  - Centre for Behavioural Research and Program Evaluation: formal decision-maker partner proposed at the onset of the program
  - Senior Management of the Health Sciences Centre in Winnipeg: working together on a project in evidence-based nursing practice
  - Senior Management of Cancer Care Manitoba
  - Advisory Committee of Nurse Managers of Cancer Agencies
  - Ester Green, current president of the Canadian Association of Psychosocial Oncology and past president of Canadian Association of Oncology Nurses (CANO)
  - Newest decision maker is Lori Lamont, director of the person care home program in Manitoba

**Objective 4: Expansion in the Actual Use of Research**
- In 2006, a national program was piloted, which was a webcast entitled “Bringing Evidence to Practice”
  - Over 100 nurses signed on from across the country
  - Webcast is now archived on the CANO website
- First Masters of Nursing graduate, Sarah Brown, is currently a clinical Nurse Specialist at Deer Lodge Centre in Winnipeg where she plans care for all residents with complex needs related to end-of-life, pain and symptom management
  - In this role, she applies research findings to improve the quality of care; provides education for health care providers; and participates in policy development
  - The results of her master’s thesis on predictors of delirium in patients with cancer are being used by a group of clinical nurse specialists city-wide to develop practice guidelines to enable nurses to better detect patients experiencing delirium

**Objective 5: Link Between Research Supply and Research Use**
- In the first year of the Chair’s Program, Dr. Degner visited every major cancer centre in Canada, presenting the plan outlined in the original proposal for the three knowledge transfer (KT) initiatives
Holds regular meetings with Dr. Margaret Fitch, past president of CANO and Head of Oncology Nursing at the Sunnybrook Regional Cancer Centre in Toronto
  - Dr. Fitch is also an active member of the Chair’s advisory committee
Decision makers from the long-term care sector and the Health Sciences Centre in Winnipeg have helped in the development of several research projects

2. Alba DiCenso, McMaster University
   Nurse Practitioners/ Advanced Practice Nursing

Objective 1: Creation of Research Capacity
- Recruited students for the Advanced Practice Nurse (APN) Chair program through multiple avenues such as websites and publications in journals
- Supervised graduate students:
  - From 2001 to 2005, 70 interns; four MSc; and one PhD student completed the Program
  - In 2006, there were 10 PhD students, six MSc Students, and one DNP in the Program; four MSc and one PhD student graduated in that year
  - Has participated on the thesis committees of several PhD, MSc and BScN students
- Continued to build a critical mass of faculty-level positions through mentoring of junior faculty and postdoctoral fellows
- Provided students with support through a 2-hour biweekly seminar series (e.g., review the students’ progress in the program, provide students with opportunities to work with APN researchers in the real world, and address specific needs such as how to write papers for publication and how to prepare for research proposals)
- Teach and facilitate graduate courses such as Research issues in the introduction and evaluation of APN roles, with students from across the country
  - Develop capacity to conduct distance education courses internationally

Objective 2: Expansion of Research Output
- Established research platforms at regional, national, and international levels, based on the published Participatory, Evidence-Based, Patient-Focused Process for Guiding the Development, Implementation, and Evaluation of Advanced Practice Nursing Framework
- Held annual internationalized research internships
  - Nursing Chair Students are expected to complete a 90 – 120 hour research internship, where they establish direct connections with multidisciplinary research teams to promote the development of knowledge and skills related to the research process
  - 25 colleagues from six provinces and five postdoctoral fellows participated in the 2005 internship
- Initiated international research (i.e. research on HIV/AIDS in Jamaica)
- Involved with Evidence-Based Nursing journal, which provides a forum for nurses to view abstracted information about the latest evidence on APN-related research and to heighten audience awareness of the existence of the Chair
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- Assigned each APN Chair student to write a commentary for the *Evidence-Based Nursing* journal in order to have first-hand experience in critically appraising research, in summarizing research findings in a readable manner for clinical colleagues, and in using research findings to guide their own clinical practice
- Organized workshops such as a week-long Evidence-Based Nursing Practice workshop where participants advance their skills in the critical appraisal of research literature and further develop their evidence-based practice skills related to the development, implementation, and evaluation of APNs
- Both staff and students from the Program attended and presented research at local, national, and international conferences, such as the 5th Biennial ICN Nurse Practitioner/Advanced Practice Nursing Network Conference
- Published several peer reviewed and non-peer reviewed articles (i.e. 4 peer-reviewed publications in 2006)
- Published a book entitled *Evidence Based Nursing: a Guide to Clinical Practice*
- Students and staff involved in many existing projects and developed new projects on topics such as the APN role in oncology settings; the nurse practitioner (NP) role in preventive care in primary care networks and family health networks in Ontario; the examination of the facilitators and barriers to the full integration of primary health care NPs in Ontario; child development; and HIV/AIDS prevention

**Objective 3: Creation of Capacity to Use Research**

- Nursing Chair students are expected to complete a 90-120 hour policy internship which provides the students with opportunity to interact with policy analysts and/or decision makers in order to: 1) understand the policy process; 2) identify the factors that shape the policy-making environment; and 3) gain practical experience working with policy analysts and decision makers.
  - Learning plans are developed between the students and their internship supervisor to ensure that the learning needs of the students and the learning opportunities in the internship setting are met
  - Allowed decision makers to be involved in the development of students’ research so the decision makers are more likely to use the findings
- Involved with several research institutes and a number of training centers, such as Ontario Regional Training Centre, which provide students with opportunities to be directly involved with decision makers
  - Continue to create new partnerships
  - Ongoing and past research initiatives provide an immediate point of entry to research teams for both staff and students

**Objective 4: Expansion in the Actual Use of Research**

- In collaboration with the Ontario Training Centre, helped organize a Summer Institute (i.e. 2003 Summer Institute focused on issues such as research and policy implications of delivering mental health services in rural areas of Ontario)
- Helped develop survey for NPs used by Health Canada
- Conducted nursing research for several provincial governments (i.e. how to strengthen the use of NPs in Yukon; how to introduce primary care NPs into Saskatchewan’s emergency department)
Involved in the Canadian Association of Advanced Practice Nurses newsletters
Decision makers acknowledge how they regularly use the knowledge from the Chair and her students to inform policy issues (2003)
Provided recommendations on the formation of an NP Integration Task team and assistance to the Ministry of Health and associated departments
College of Nurses of Ontario approached the Chair to assist in understanding the APN role to better inform a licensing exam for the acute care NP
Regional Health Authority requested assistance from the Chair with both research and integration questions
One student was recruited by the Assistant Deputy of Ontario Ministry of Health and Long Term Care (MoHLTC) to help in the project on Local Health Integration Networks
Identified and appraised tools and/or instruments that are a valuable resource for students, government, health services and education management/administration. Examples are:
  - The APN toolkit which has been used in APN related research
  - The development of an advocacy kit for fall prevention coalition, in conjunction with decision makers from five organizations and research colleagues from five universities
Developed a framework to promote the sustained integration of the NP role in primary health care across Canada in Canadian Nurse Practitioner Initiative

Objective 5: Link Between Research Supply and Research Use
Maintained the Chair’s website to provide updated information on students, recent publications, and current research activities, including a ‘What’s New’ page for research dissemination, program admission, upcoming workshops, and course information
Organized an APN Chair Virtual Classroom, which enhances learning opportunities for students affiliated with the APN Chair Program and increases opportunities for linkage and exchange
Decision-maker partners provide and supervise policy internships, assist in the identification of thesis topics, and provide funding for APN Chair dissemination initiatives
Examples of decision-maker partners are Cancer Care Ontario, Canadian Nurses Association, and the MoHLTC
Worked with the First Nations and Inuit Health Branch (FNIHB) on the evaluation of the impact of a policy decision related to clinical nursing services during a bi-weekly seminar
  - Students and staff helped formulate the research question and research design
  - Provided an excellent learning opportunity for students regarding the conduct of research and the experience of working together with a decision-maker partner
Assembled and instituted a formal Advisory Board in 2005 to provide a forum to effectively guide current operations, future directions, and long-term sustainability of the Chair; the Board consisted of members from both the academic and practice communities
Established connections with the Ministry and decision makers across Canada – New Brunswick, Alberta, the Yukon, and Saskatchewan

3. Nancy Edwards, University of Ottawa
   Community Nursing
Objective 1: Creation of Research Capacity

- By mid-2007, the Chair Program participants included 101 interns, 5 Master’s students, 12 PhD students, and 13 postdoctoral/ master’s fellows
  - Also supervised 3 nursing PhD students supported by the Ontario RTC
- Very active with the Ontario RTC and the Ottawa Aboriginal Capacity and Development Research Environment (ACADRE) Center
- Holds annual 3-month summer research internship, where research interns and post-doctoral fellows visit host organizations and collaborate with several colleagues to develop multiple intervention research projects
  - 2006 interns include 5 from Montreal and 2 from Jamaica (25 total)
- 3 new faculty have been hired in association with the Chair’s Program
- 6/6 junior faculty and career scientists (Peterson, Smith, Medves, Blanchard, Riley, Leiper) have external funding
- Mentored Dr. Barb Riley, Dr. Chris Blanchard, and Dr. Jenny Medves, as well as several other interns, career scientists, visiting professors and EXTRA Fellows
- Received Ontario Council on Graduate Studies (OCGS) approval to implement the Population Health PhD Program at the University of Ottawa, which commenced in September 2001
- Career choices of postdoctoral fellows include academic and government positions; most of the interns are continuing in the positions they held at the time of the internship
- Five graduate courses have been developed; one required course and four elective courses
- Focused KT strategies are bringing research to the policy decision-making table for building code revisions and inclusion of social justice in core competencies of public health

Objective 2: Expansion of Research Output

- Senior Scientist with 2 Research Institutes: the Institute of Population Health and the Elisabeth Bruyere Research Institute
- Co-wrote a chapter for a Community Health Nursing Textbook that will be widely used in undergraduate nursing curricula in Canada
- Developed on-line Multiple Intervention Program (MIP) toolkit with funding from MOHLTC that is intended to support front-line staff and managers
  - Input on the toolkit was obtained from the public health community throughout the development process
- Organized the first invitational Multiple Intervention Symposium in Feb 2007: attended by 25 researchers and decision makers from 5 provinces
- Over 30 conference presentations on various multiple intervention topics by Chair and trainees in 2006 alone
- All Chair postdoctoral fellows published one or more articles in peer-reviewed journals and/or chapters in books in 2006
- Number of grants funded since 2000: 34 (from 4th year evaluation report)
- Chapters in books since 2000: 28 (from 4th year evaluation report)
- Technical Reports since 2000: 29 (from 4th year evaluation report)
- Selected awards received:
  - University of Ottawa Award of Excellence for Research 2006-2007
  - YMCA/YWCA Women of Distinction Award for the Research, Science and Technology Category
Objective 3: Creation of Capacity to Use Research
- First invitational multiple intervention symposium in February 2007 was attended by 25 researchers and decision makers from five provinces
- Hosted a Café MIP (Multiple Intervention Program) at the Canadian Public Health Association Conference (2007), which allowed colleagues in public health to explore MIP implementation issues
- On-line MIP toolkit is intended to support front-line staff and managers
- All post-doctoral fellows and careers scientists have maintained active links with decision makers
- Structures are established and operational for decision-maker involvement for the two regional partner organizations (nursing work group at SCO health services and the management committee of the Elisabeth Bruyère Research Institute)
- During internships, decision makers participate as speakers, panel members, advanced work in progress session discussants, hosts for site visits and challenge project leaders
- Annual summer research internship program is accessible to nurses and other colleagues from across the country

Objective 4: Expansion in the Actual Use of Research
- The Chair’s educational infrastructure (e.g. policy practica, site visits to decision makers for internship, seminar series) has helped to make substantial contributions to the development of strategic plans and the establishment of operational working committees for the Institute of Population Health and the Elizabeth Bruyère Research Institute
- Due to her research on falls prevention, Dr. Edwards was invited to join a National Research Council task group that is responsible for making recommendations on building codes of stairs, ramps, guards and handrails
- Holds Fireside Chats (i.e. 40 in 2006 alone), which is a knowledge translation initiative that allows several individuals from across the country to join on-line discussions (on topics such as core competencies in public health, falls and built environment, active transportation and physical activity)
- Significant links have been created with provincial and national partners including the Registered Nurses Association of Ontario, the Canadian Nurses Association, the Office of Nursing Policy (Health Canada), the Canadian Public Health Association and the Canadian Occupational Therapy Association
  - Links with the latter organizations have provided additional research opportunities and established a forum for dissemination of research findings

Objective 5: Link Between Research Supply and Research Use
- Several decision makers attended the first invitational multiple intervention symposium in February 2007, including National Research Council, Canada Mortgage and Housing, Canadian Standards Association, Ottawa Public Health and SCO Health Services
- During internships, decision makers participate as speakers, panel members, advanced work in progress session discussants, hosts for site visits, and challenge project leaders
- Notable decision-making partners include:
4. Linda O’Brien-Pallas, University of Toronto
Nursing Human Resources

Objective 1: Creation of Research Capacity
- In 2006 alone, mentored 12 individuals as they pursued doctoral studies, post-doctoral fellowships or research apprenticeships
- Hosts a 6-month applied research apprenticeship program, which is designed to build capacity for research and health human resource planning within health care organizations
  - In 2006 alone, 2 new decision-maker trainees benefited from apprenticeship
- Testimonials: “The Chair apprenticeship position has provided me with an opportunity to refresh my nursing research knowledge and to apply the concepts of ‘evidence-based’ and ‘knowledge transfer’ to my clinical practice. It has been invaluable experience which will underpin future endeavors.” – Lynda Hookham, Nursing Practice Leader in the Emergency Department at Toronto East General Hospital
- Participated in Nancy Edward’s 6th Annual Nursing Research Internship Dialogue and Debate session at the University of Ottawa (Presentation: Health Human Resources Research: Working with Decision-Makers)

Objective 2: Expansion of Research Output
- Data analysis for the research program Health Human Resource Modeling: Challenging the Past, Creating the Future is in progress with continued testing and validation of the Health Human Resource (HHR) conceptual framework
  - this research involves partnerships between decision makers, policy makers and researchers from Canadian Provinces
- Data collection completed for Understanding the costs and outcomes of nurses’ turnover in Canadian Hospitals
  - used to determine how the rate and intensity of nursing turnover impacts patient, nurse, system and cost outcomes
  - simulation models will be developed to estimate the effect of various policy and management interventions on unit and system outcomes
- Provided research consultations at the provincial, national, and international level
- The project “Workload Measurement & HHR Planning in Home Health Nursing: Advancing the Science” is designed to refine and validate an environmental complexity scale (ECS) and
other aspects of the work environment for visiting nursing, and to build a decision support simulation model based on the patient Care Delivery Model

- Chair research symposium was held in April 2006 on *Connecting the Dots across the Health Care System: From Structure to Workload*
  - Discussed were the themes of the influence of health care system structures on health human resources and issues associated with measurement and report of nursing workload
- In 2006 alone, gave 9 conference presentations and achieved 14 publications
- 2006 Recipient of the prestigious Jeanne Mance Award, Canada’s highest honor in Nursing
- Recently the first Canadian nurse to be inducted as an American Academy of Nursing International Fellow during the Academy’s 34th Annual Meeting and Conference

**Objective 3: Creation of Capacity to Use Research**

- The 6-month applied research apprenticeship program previously mentioned in Objective 1 is designed to build capacity for research and health human resource planning within health care organizations
- A regular media program of monthly TV news appearances has been established as well as additional radio and TV interviews for special events such as the release of Stepping to Success and Sustainability
- Reports are regularly distributed to provincial and federal decision makers and to international research colleagues
- Established a nursing HHR webpage that includes links to international websites, professional associations and government bodies (www.hrrchair.ca)
- Semi-annual newsletters, periodic fact sheets and research reports are available on the Chair’s website
- Co-wrote “*Commitment and Care: A Policy Synthesis*”, a document released by the CHSRF and the Canadian Nurses Association in order to emphasize healthy workplaces for nurses, which has been visible in research funding and best practice guideline development
- *The National Sector Study* is the largest study of nursing in Canadian history, covering each of the 3 nursing occupational groups (Registered nurses, Licensed Practical Nurses and Registered Psychiatric Nurses)
  - this study provides decision makers and nurses with insights for policy and planning to improve the working environments of all nurses in order to improve patient care

**Objective 4: Expansion in the Actual Use of Research**

- Met one-on-one with Minister George Smitherman to review the results of the evidence-based staffing study and Health Human Resource (HHR) implications
- Global application of the HHR conceptual framework to guide health services and resources planning activities in other countries is evident in *Monitoring Progress in Nursing and Midwifery- Global Survey*
  - the survey was designed to establish a global baseline and evaluate interventions to improve nursing and midwifery in the areas of human resources planning, management, education, practice and leadership
  - the HHR conceptual framework has been adopted by the Canadian Institute of Health Information to guide its activities, and has been used in simulation planning exercises undertaken for the Atlantic provinces and the Nurse Practitioners in Ontario
- Registered Nurses Association of Ontario (RNAO) has requested mentorship in leading the project *Developing and Sustaining Effective Staffing and Workload Practices*
- Involved in the Quality Worklife-Quality Healthcare Collaborative, which is a coalition of 11 national health partners assembled to develop a pan-Canadian strategy for translating evidence-based approaches to building and sustaining healthy work environments into practice at the direct care level

**Objective 5: Link Between Research Supply and Research Use**

- Principal decision maker: Ontario Ministry of Health and Long-Term Care
- Decision-making partners are established and regularly involved in the Chair activities
- Board of Directors member for the Registered Nurses Association of Ontario (RNAO, 2000-2002) and the Canadian Nurses Association (CNA, 2002 – 2004)
- Liaison with Provincial and National Policy Makers
  - Canadian Nursing Advisory Committee
  - Romanow Commission
  - World Health Organization
  - International Council of Nurses
  - Joint Provincial Nursing Committee (Ontario)
- Member of the Joint Provincial Nursing Committee (JPNC), which is a joint committee of key nursing stakeholder organizations
- Member of the Ontario Health Protection and Promotion Agency, Agency Implementation Task Force
- Member of the National Survey of the Work and Health of Nurses Advisory Committee
- Participated in the *Building the Future* Invitational Conference, where nursing leaders and stakeholders met to discuss strategies to address nursing human resources issues and linkages between nursing and physician human resource planning and the federal/provincial/territorial governments’ framework for Collaborative Pan-Canadian Health Human Resource Planning
- Corporate Director for Health Human Resources for the Canadian Nurses Association
- Awarded an Honorary Life Membership in the RNAO in recognition of the Chair’s contributions to research and policy linkages
5. Paula Goering, University of Toronto
   Best Practices in Mental Health

Objective 1: Creation of Research Capacity
- Increased the number of trainees to the Program at various levels and from various disciplines
- Involved in the design and delivery of training programs as a co-applicant on the Ontario Training Centre (OTC)
- Provided both undergraduate and graduate students from various backgrounds with opportunities to participate in workshops on writing and statistics as well as field visits to community agencies
- Provided students with opportunities to author or co-author several manuscripts and book chapters
- Facilitated or taught graduate courses such as a knowledge translation and exchange (KT&E) course for students from various disciplines
- Played a major role in planning and teaching for week-long summer institutes (i.e. in Thunder Bay 2004); received overwhelming amount of interest (i.e. 50 applicants, 2006)
- Three trainees were accepted as participants in a week-long CIHR training institute in summer of 2004
- Developed an educational series focusing on current health policies and research ethics
- Developed an international exchange program with the Department of Psychiatry in Ethiopia enhanced understanding of underserved areas and knowledge transfer
- Participated in the national consultation for University leaders
- Successfully competed for a grant to develop a research transfer training program for scientists in 2004

Objective 2: Expansion of Research Output
- Students in the summer institute training program were awarded a number of prizes associated with their research (i.e. Best Paper at the Canadian Psychiatric Association Annual Meeting for paper entitled “Cost-effectiveness for assertive community treatment teams” in 2000)
- Participated as scientific expert in several provincial taskforces which involved multiple meetings and review of materials with decisions
- Both staff and students from the Program attended and presented research at local, national, and international conferences such as the Canadian Association for Health Services and Policy Research and the Translating Research Into Practice Meeting (summer 2005)
- Won a number of departmental and national research awards
- Excellent research productivity including 18 research projects in 2006
- Publications:
  - Acted as co-editor for a widely circulated Highlights newsletter
  - Published several peer-reviewed and non-peer reviewed articles and reports
Objective 3: Creation of Capacity to Use Research

- Was a co-applicant (e.g., attended monthly executive meetings and admissions committee) for decision makers, such as the Research in Addictions and Mental Health Policy and Services (2006)
- Aimed to involve stakeholders in the research knowledge interpretation and dissemination processes and to involve decision-making partners in KT&E activities
- Maintained an advisory board which is made up of members from each partner organization and the research community, including government, providers, consumers, and family representatives
  - Held quarterly meetings with subcommittees to discuss various issues including specific knowledge translation goals
  - Annual evaluation provided positive feedback on the functioning of the group
- Was a member of health policy committees such as at the Centre for Addiction & Mental Health (CAMH)
- Placed research trainees in policy environments such as the Ministry of Health and Long Term Care (MoHLTC), thereby increasing the sensitivity and awareness of health services researchers to the policy environment (four placements in 2006)
- Invited decision makers to join several projects such as the Knowledge Broker Demonstration Project
- Organized policy forum which brought a range of senior bureaucrats and researchers together to learn more about knowledge transfer and to discuss their ideas for improving their relationships with one another
- Was called to share knowledge and experience in the KT&E area by partnering with the national coalition in the planning and delivery of a research priority-setting workshop
- Involved decision makers (e.g., MoHLTC) in the Program’s development and implementation
- Developed and delivered educational sessions on different aspects of research (e.g., critical appraisal and administrative databases) for MoHLTC staff
  - Increased staff knowledge of health economics, evaluation research, and epidemiology
  - Overall satisfaction with these sessions was rated very highly

Objective 4: Expansion in the Actual Use of Research

- Involved in a number of knowledge exchange-related special projects and research-based consulting projects
- Involved in consulting projects which required extensive participation from decision makers, ranging from general hospital psychiatrists to managers
  - Each project includes formal mechanisms for input and feedback from relevant stakeholder groups
  - Evaluation of these projects documented the successful uptake and application of the Chair’s research findings
- Engaged in a Service Enhancement Evaluation Initiative, a major multi-year, multi-million dollar provincial research project with MoHLTC
  - Provided opportunities to maintain relationship with decision-making partners and created a very diverse advisory group
Activities included the building of a provincial knowledge exchange network and website, bimonthly meetings of an Executive Advisory Committee, quarterly reports to MoHLTC, monthly co-ordinating centre meetings, and twice-a-year forums for investigators
- Consulted and planned projects with Ontario HIV Treatment Network (OHTN) regarding housing for persons living with HIV-AIDS, and helped to create a community of practice for Ontario knowledge brokers
- Participated in a Senate Committee hearing on knowledge translation and has provided informal consultation to Senator Kirby and his staff
- With decision makers’ collaboration, produced the knowledge transfer checklist and the User Group Planning Guide in 2004
- Worked in the Health Quality Council task force (2006)
  - Invited to present at the retreat of its board on upcoming strategic directions
- Provided impact on the conceptualization of the issues and has helped in setting priorities about the selection of health indicators for the Local Health Integration Networks, CAMH partners, Ontario Hospital Association, and the Ontario Quality Council

Objective 5: Link Between Research Supply and Research Use
- Included decision makers as lecturers in graduate courses (e.g., knowledge transfer and exchange course)
- Maintained regular contact with decision makers such as the MoHLTC through monthly meetings with the Executive Advisory group, bi-monthly meetings with knowledge brokers, and intermittent phone conversations
- Program Steering Committee included both decision makers (e.g., government representatives) and researchers
- Used knowledge broker to link activities of policy unit with the Chair’s program

6. Pat Armstrong, York University  
   Policy and Women’s Studies

Objective 1: Creation of Research Capacity
- Supervised and mentored a number of students (i.e. six graduate students from the Ontario Training Centre and three post-doctoral fellows in 2007 alone)
- Participated in bi-monthly teleconferences, student selection and supervision, and planning for the Ontario Training Centre
- Offered diploma program in co-operation with several faculties in the university, which later evolved to become an Ontario Training Centre diploma
- Mentored several junior faculty each year
- Organized annual public lectures with support from decision makers and students
- Facilitated or taught a number of graduate courses, such as a health policy course, for students from various disciplines
  - Provided post-doctoral fellows with opportunities to teach or co-teach courses
- Offered an intensive course on Canadian health policy issues that was jointly taught with decision makers and was open to policy makers such as registered nurses and federal government employees
- Worked with students from other disciplines such as Faculty of Law and Political Science
- Served on a number of tenure and promotion committees in 2006

**Objective 2: Expansion of Research Output**
- Recipient of Dean’s Research Award 2007
- Most research projects were collaborative and interdisciplinary involving a variety of community and academic partners
- Both staff and students from the Chair’s Program have attended and presented research at local, national, and international conferences such as the CAUT Biennial Women’s Conference (February 2007) and the King’s Fund in London
- Was keynote speaker and in panel discussion at a number of meetings such as the International Sociology Association Meeting (May 2007), the United Nations Population Fund, and the Canadian Federal of Nurses Unions’ Annual Researchers’ meeting (January 2007)
- Participated in 2006 CHSRF/CIHR Chair Review
- Was a board member for several academic journals and institutes such as the Canadian Health Coalition and the Canadian Centre for Policy Alternatives
- Participated in a variety of international consultations
- Assisted in and/or organized workshops on health services research such as CHSRF’s *Listening for Direction III* in April 2007

**Publications:**
- Published several book manuscripts (i.e. 3 in 2007 alone)
- Wrote several book chapters (i.e. 5 in 2007 alone) and book reviews
- Published a number of books such as *Wasting Away: The Undermining of Canadian Health care in 2002*
- Published several peer-reviewed and non-peer reviewed articles
- Published a number of technical reports for decision makers such as *There are not enough hands: Conditions in Ontario’s Long-Term Care Facilities*, prepared for the Canadian Union of Public Employees in 2004
- Provided students and post-doctoral fellows with opportunities to present, author, and/or co-author manuscripts

**Objective 3: Creation of Capacity to Use Research**
- Organized internships for students to work with decision makers (i.e. Health Canada)
  - Several students were offered employment after graduation as a result of their internships
- Included decision makers in meetings with students and post-doctoral fellows
- Decision makers also involved in graduate courses as presenters or on a panel
- Maintained an advisory board; included members from each partner organization (i.e. Canadian Federation of Nurses’ Union) and from the research community
- Involved in decision makers’ executive meetings (i.e. the Canadian Federation of Nurses’ Union (CFNU))
- Regularly discussed research on nursing issues with decision makers
Established connections with senior government officials in several countries such as New Zealand, Sweden, and Australia
Organized the summer institute which involved both policy and research communities (2006)
The CFNU welcomed interns and provided opportunities to learn about the CFNU processes as well as to conduct work associated with the Union
Presented in several non-academic settings, such as the community, union, government, and health activist organizations

Objective 4: Expansion in the Actual Use of Research
- Appeared before the Romanow Commission and the Kirby Committee
- Provided materials on homecare which led to an invitation from the federal Minister to meet on the issue; also received an invitation from policy analysts in New Zealand to discuss research on “the right to care”
- Provided assistance to decision makers such as the CFNU on major projects, such as the assessment of conditions in long-term care (2005)
- Worked with the CFNU on a research proposal entitled “Keeping nurses in nursing”

Objective 5: Link Between Research Supply and Research Use
- Examples of decision makers include Health Canada, Ontario Nurses’ Association, the Canadian Federation of Nurses’ Union, First Nations branch in Saskatchewan, and Toronto East General Hospital
- Decision makers such as the CFNU assisted in the distribution of research findings
- Maintained website to provide information on the Chair’s program, current and past research, and publications

7. Peter Coyte, University of Toronto
   Health Care Settings

Objective 1: Creation of Research Capacity
- Has taught several health services research graduate courses, such as:
  - Home and Community Care Knowledge Translation; a knowledge translation exercise that selects policy and program relevant research and translates into accessible format for decision makers
  - Technologies, People and Places in the New Health Care; explores how health technologies impact the stakeholders of the healthcare system, patients, professionals, and society-at-large, from an interdisciplinary perspective that includes field such as philosophy, nursing, clinical medicine, health economics, psychology
- Supervised and mentored a number of students and junior faculty
- Nursing-specific trainees include:
  - McGillion, M. “Psychoeducation as an Intervention for Individuals Living with Chronic Stable Angina in Ischemic Heart Disease” PhD Candidate, Faculty of Nursing, U of T (Member 2000-2006)
An Evaluation of the Nursing Research Fund: Lessons to Date and Recommended Next Steps

- Denise Guerriere, PhD, Assistant Professor (status-only), Faculty of Nursing, University of Toronto

- The Chair offers annual Genesis Fellowships that are designed to build discipline-based research capacity related to dynamic interplay between and among people (e.g. care providers and recipients), technologies (e.g. electronic biomedical services and pharmaceutical interventions) and health care settings

**Objective 2: Expansion of Research Output**

- Dr. Coyte’s current grants (Co-PI) include:
  - Cost and Quality of Variations in Ambulatory and Home-Based Palliative Care (CIHR)
  - Determinants and Outcomes of Privately and Publicly Financed Home-Based Nursing (CHSRF)
  - Health Care, Technology and Place: A Transdisciplinary Research Training Program (CIHR Strategic Training Programs)

- Publications pertaining to nursing since 2000: 18+
- Presentations pertaining to nursing since 2000: 21+

**Objective 3: Creation of Capacity to Use Research**

- The Change Foundation has evaluated applications for the Chair’s Genesis Fellowship Awards to ensure that the research projects of new trainees are sufficiently oriented to linkage and exchange priorities of decision makers in the health services sector

- Nancy Cooper, Director of Policy and Professional Development at the Ontario Long-Term Care Association (OLTCA), is currently a co-instructor for the Chair’s *Home and Community Care Knowledge Translation* course

**Objective 4: Expansion in the Actual Use of Research**

- Trainees are offered opportunities for direct contact with health care executives at the Change Foundation, which enhances cross-fertilization of knowledge translation expertise between the university and non-governmental sector

**Objective 5: Link Between Research Supply and Research Use**

- The Change Foundation is the principal decision-maker partner for the Chair’s program and has been instrumental in facilitating the knowledge transfer programs for the Chair

- Other decision-maker partners have included:
  - St. Elizabeth Health Care: 2002–2004
  - Ministry of Health & Long-Term Care: Tita Ang-Angco, Director of Strategy & Planning for the Long-Term Care Redevelopment Project: 2000-2006

- Maintained website to provide information on the Chair’s program, current and past research, and publications
Appendix D:

Details on Training Award Holders (Program Area 2)
### Table D1: Joint Training Awards (1999 – 2000)

<table>
<thead>
<tr>
<th>Name</th>
<th>Type of Award</th>
<th>Year Award Held</th>
<th>Province Award Held</th>
<th>Current Position (as of 2008)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pamela Baxter</td>
<td>Master’s</td>
<td>1999</td>
<td>ON</td>
<td>Assistant Professor, School of Nursing, McMaster University</td>
</tr>
<tr>
<td>Linda Bell</td>
<td>Doctoral</td>
<td>1999</td>
<td>QC</td>
<td>Development Officer, Arts and Science, Concordia University</td>
</tr>
<tr>
<td>Barbara Brady-Fryer</td>
<td>Doctoral</td>
<td>1999</td>
<td>AB</td>
<td>Assistant Clinical Professor, Patient Care Director, Faculty of Nursing, University of Alberta</td>
</tr>
<tr>
<td>Genevieve Currie</td>
<td>Doctoral</td>
<td>1999</td>
<td>AB</td>
<td>Nursing Instructor, School of Nursing, Mount Royal College</td>
</tr>
<tr>
<td>Karen Eisler</td>
<td>Master’s</td>
<td>1999</td>
<td>SK</td>
<td>Director of Nursing Practice, Saskatchewan Registered Nurses’ Association</td>
</tr>
<tr>
<td>Lona Heinzig</td>
<td>Master’s</td>
<td>1999</td>
<td>NT</td>
<td>Sessional Instructor, School of Nursing, University of Victoria</td>
</tr>
<tr>
<td>Stephanie Hlohovsky</td>
<td>Master’s</td>
<td>1999</td>
<td>BC</td>
<td>Charge Nurse, Starship Children's Hospital</td>
</tr>
<tr>
<td>Sandra Kluka</td>
<td>Doctoral</td>
<td>1999</td>
<td>MB</td>
<td>Senior Instructor, Faculty of Nursing, University of Manitoba</td>
</tr>
<tr>
<td>Norma Jean Murphy</td>
<td>Doctoral</td>
<td>1999</td>
<td>NS</td>
<td>Assistant Professor, School of Nursing, Dalhousie University</td>
</tr>
<tr>
<td>Mary Ann Murray</td>
<td>Master’s</td>
<td>1999</td>
<td>ON</td>
<td>President, College of Nurses of Ontario</td>
</tr>
<tr>
<td>Annett Susan Schultz</td>
<td>Doctoral</td>
<td>1999</td>
<td>BC</td>
<td>Assistant Professor, Faculty of Nursing, University of Manitoba</td>
</tr>
<tr>
<td>Gail Tomblin Murphy</td>
<td>Doctoral</td>
<td>1999</td>
<td>NS</td>
<td>Associate Professor, School of Nursing, Dalhousie University</td>
</tr>
<tr>
<td>Beverly Sieker</td>
<td>Doctoral</td>
<td>1999</td>
<td>BC</td>
<td>Manager of Women’s and Children’s Services, Kelowna General Hospital</td>
</tr>
<tr>
<td>Ann Tourangeau</td>
<td>Doctoral</td>
<td>1999</td>
<td>AB</td>
<td>Associate Professor, Faculty of Nursing, University of Toronto</td>
</tr>
<tr>
<td>Phillipe Voyer</td>
<td>Doctoral</td>
<td>1999</td>
<td>QC</td>
<td>Associate Professor, Faculty of Nursing, Universite Laval</td>
</tr>
<tr>
<td>Judith Lynam</td>
<td>Doctoral</td>
<td>2000</td>
<td>BC</td>
<td>Associate Professor; School of Nursing, University of British Columbia</td>
</tr>
<tr>
<td>Elizabeth McGibbon</td>
<td>Doctoral</td>
<td>2000</td>
<td>NS</td>
<td>Associate Professor, School of Nursing, St. Francis Xavier</td>
</tr>
<tr>
<td>Bernadette Pauly</td>
<td>Doctoral</td>
<td>2000</td>
<td>BC</td>
<td>School of Nursing, University of Victoria</td>
</tr>
<tr>
<td>Rani Srivastava</td>
<td>Doctoral</td>
<td>2000</td>
<td>ON</td>
<td>Deputy Chief, Nursing Practice, Center for Addiction and Mental Health and Lecturer, Faculty of Nursing, University of Toronto</td>
</tr>
</tbody>
</table>

### Table D2: Career Reorientation Awards (1999–present)

<table>
<thead>
<tr>
<th>Name</th>
<th>Year Award Held</th>
<th>Mentor &amp; University</th>
<th>Decision-Maker Link</th>
<th>Current Position (as of 2008)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manon Lemonde</td>
<td>2000</td>
<td>Linda O’Brien-Pallas; Laurentian University</td>
<td>Ontario Ministry of Health and Long-Term Care</td>
<td>Associate Professor, Faculty of Health Sciences, University of Ontario Institute of Technology</td>
</tr>
<tr>
<td>Anne Dewar</td>
<td>2001</td>
<td>Janice Lander; University of British Columbia</td>
<td>Canadian Institute for the Relief of Pain and Disability</td>
<td>Associate Professor, School of Nursing, University of British Columbia</td>
</tr>
<tr>
<td>Ann Rheaume</td>
<td>2003</td>
<td>Andrea Baumann; University of Moncton</td>
<td>Soins Infirmiers et Soins au Patient, Hôpital Georges Domont</td>
<td>Assistant Professor at the École de Science Infirmière, Université de Moncton</td>
</tr>
<tr>
<td>Michelle Giroux</td>
<td>2007</td>
<td>Nancy Edwards; University of Ottawa</td>
<td>VON Canada</td>
<td>Associate Professor, Faculty of Law, University of Ottawa</td>
</tr>
</tbody>
</table>
### Table D3: Post-Doctoral Awards (1999 – present)

<table>
<thead>
<tr>
<th>Name</th>
<th>Year Award Held</th>
<th>Supervisor &amp; University</th>
<th>Decision-Maker Link</th>
<th>Current Position (as of 2008)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maureen Dobbins</td>
<td>2001</td>
<td>Donna Ciliska/ Rejean Landry; McMaster University</td>
<td>Mel Sweetnam, Research Transfer Associate, MoHTLC</td>
<td>Associate Professor, School of Nursing, McMaster University</td>
</tr>
<tr>
<td>Judy Mill</td>
<td>2001</td>
<td>Nancy Edwards; University of Ottawa</td>
<td>Dr. Donald Sutherland in the Bureau of HIV/AIDS and STDs at Health Canada</td>
<td>Associate Dean, Global Health; Associate Professor, Faculty of Nursing, University of Alberta</td>
</tr>
<tr>
<td>Anita Kothari</td>
<td>2002</td>
<td>Nancy Edwards; University of Ottawa</td>
<td>Dr. Geoffrey Gurd form the Applied Research and Analysis Directorate, Health Canada</td>
<td>Assistant Professor, Bachelor of Health Sciences Program, University of Western Ontario</td>
</tr>
<tr>
<td>Melanie Lavoie-Tremblay</td>
<td>2002</td>
<td>Linda O'Brien-Pallas; University of Toronto</td>
<td>Kathleen MacMillan, Provincial Chief Nursing Officer, the Nursing Secretariat, MoHTLC</td>
<td>Assistant Professor, School of Nursing, McGill University</td>
</tr>
<tr>
<td>Joanne-Profetto-McGrath</td>
<td>2002</td>
<td>Carol Estabooks/ Rejean Landry; University of Alberta</td>
<td>Sheila Weatherill, RN, President and CEO, Capital Health Authority (Edmonton)</td>
<td>Interim Dean; Associate Professor, Faculty of Nursing, University of Alberta</td>
</tr>
<tr>
<td>Deborah Tregunno</td>
<td>2002</td>
<td>Diane Irvine Doran; University of Toronto</td>
<td>Dr. William Sibbald, Physician-in-Chief, Dept of Medicine, Sunnybrook and Women's College Health Sciences Centre</td>
<td>Assistant Professor, Master of Science in Nursing, York University</td>
</tr>
<tr>
<td>Karen Benzies</td>
<td>2003</td>
<td>Suzanne Tough/ Nancy Edwards; University of Calgary</td>
<td>Carlene Donnelly, ED of Calgary Urban Project Society</td>
<td>Associate Professor, Faculty of Nursing, University of Calgary</td>
</tr>
<tr>
<td>Denise Bryant-Lukosius</td>
<td>2003</td>
<td>Alba DiCenso/ Lesley Degner; McMaster University</td>
<td>Esther Green, Chief Nursing Officer of Cancer Care Ontario</td>
<td>Assistant Professor, Faculty of Nursing, McMaster University</td>
</tr>
<tr>
<td>Sonia Semenic</td>
<td>2004</td>
<td>Nancy Edwards /Jean-Louis Denis; McGill University</td>
<td>France Lavergniere in the Ministère de la santé et des services sociaux du Québec.</td>
<td>Assistant Professor, School of Nursing, McGill University</td>
</tr>
<tr>
<td>Susan Jack</td>
<td>2004</td>
<td>Harriet MacMillan/ Carole Estabrooks</td>
<td>Lil Tonmyr at Health Canada</td>
<td>Assistant Professor, School of Nursing, McMaster University</td>
</tr>
<tr>
<td>Anne Hofmeyer</td>
<td>2005</td>
<td>Carole Estabrooks</td>
<td>Joanna Pawlyshyn and Glenda Coleman-Miller at the Royal Alexandra Hospital in Edmonton</td>
<td>Assistant Professor, Faculty of Nursing, University of Alberta</td>
</tr>
<tr>
<td>Sharon Kaasalainen</td>
<td>2005</td>
<td>Kevin Brazil/ Alba DiCenso</td>
<td>Tim Burns from the Ontario Ministry of Health and Long-Term Care and Krista Robinson from the Ontario Long Term Care Association</td>
<td>Assistant Professor, School of Nursing, McMaster University</td>
</tr>
<tr>
<td>Amanda Newton</td>
<td>2005</td>
<td>Carole Estabrooks</td>
<td>Marguerite Rowe in the Capital Health Authority and Tom Mill from Alberta Health and Wellness</td>
<td>Assistant Professor, Faculty of Health Sciences at McMaster University</td>
</tr>
<tr>
<td>Mike Patterson</td>
<td>2005</td>
<td>Nancy Edwards/ Janet Smylie</td>
<td>Simon Brascoué in the primary health care — e-health solutions unit at Health Canada</td>
<td>Research Associate, Community Health Research Unit, University of Ottawa</td>
</tr>
</tbody>
</table>
**Table D3: Post Doctoral Awards (1999 – present) Continued**

<table>
<thead>
<tr>
<th>Name</th>
<th>Year Award Held</th>
<th>Supervisor &amp; University</th>
<th>Decision-Maker Link</th>
<th>Current Position (as of 2008)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laureen Hayes</td>
<td>2005</td>
<td>Linda O’Brien-Pallas</td>
<td>Ontario Ministry of Health and Long-Term Care</td>
<td>Research Associate, Nursing Health Services Research Unit (Collaborative project with U of T and McMaster University)</td>
</tr>
<tr>
<td>Josephine Etowa</td>
<td>2006</td>
<td>Linda O’Brien-Pallas/ Nancy Edwards</td>
<td>Sandra MacDonald-Rencz in the Office of Nursing Policy, Health Canada.</td>
<td>Assistant Professor, School of Nursing, Dalhousie University</td>
</tr>
<tr>
<td>Phyllis Montgomery</td>
<td>2006</td>
<td>Nancy Edwards/ Cheryl Forchuk</td>
<td>Marion Quigley of the Sudbury Branch of the Canadian Mental Health Association.</td>
<td>Associate Professor, Department of Nursing, Laurentian University</td>
</tr>
<tr>
<td>Faith Donald</td>
<td>2006</td>
<td>Nancy Edwards/ Cheryl Forchuk</td>
<td>Tim Burns from the Long-Term Care Homes Branch of the Ontario Ministry of Health and Long-Term Care and Rosanne Jabbour of the nursing secretariat of the Ontario Ministry of Health and Long-Term Care</td>
<td>Assistant Professor, School of Nursing, Ryerson University</td>
</tr>
<tr>
<td>Christine Kurtz Landy</td>
<td>2007</td>
<td>Harriet MacMillan/ Nancy Edwards</td>
<td>Debbie Sheehan from Public Health Services, City of Hamilton, and Vasanthi Srinivasan from the Ontario Ministry of Health and Long-Term Care</td>
<td>Assistant Professor, School of Nursing, McMaster University</td>
</tr>
<tr>
<td>Genevieve Roch</td>
<td>2007</td>
<td>Pat Armstrong</td>
<td>Linda Silas from the Canadian Federation of Nurses Unions</td>
<td>PhD Candidate, Nursing Services Administration, University of Montreal</td>
</tr>
<tr>
<td>Dominique Tremblay</td>
<td>2007</td>
<td>Nancy Edwards</td>
<td>Antoine Loutfi and Jean Latreille in the Cancer Directorate of the Quebec Ministry of Health.</td>
<td>PhD Candidate, Faculty of Nursing, University of Montreal</td>
</tr>
</tbody>
</table>
Appendix E:

Highlight on Dr. Manon Lemonde, Career Reorientation Award Holder
Dr. Manon Lemonde received a Career Reorientation Award in 2000 and was mentored by Dr. Linda O’Brien-Pallas from the University of Toronto. Dr. Lemonde is a nurse by profession who holds a PhD in biomedical sciences from the University of Montreal. At the time of the Award, Dr. Lemonde was an Associate Professor with the School of Nursing at Laurentian University. Her research focused on healthy workplaces for nurses and residents in long-term care settings.

In her interview, Dr. Lemonde commented that establishing a research program in northern Ontario was challenging due to the lack of available resources [16]. As such, the Career Reorientation Award provided her with the unique opportunity of establishing contacts and resources within southwestern Ontario. Without the experience gained from the Award, Dr. Lemonde claims that she may not have been successful in her grant application to Health Canada for research focusing on whether evidence-based research is being utilized by decision-makers and front-line workers. She has since stimulated awareness of evidence-based reports (i.e. Romanow report) in real working environments, which indicates that her research is indeed being used and applied.

The main challenge faced by Dr. Lemonde during her Award was difficulty in securing dedicated research time from her institution. Due to faculty shortage, it was difficult to relieve Dr. Lemonde of some of her teaching duties so that she could concentrate on her research program. Moreover, after the completion of the Award duration, it was counter-productive to return to a full teaching load and limit her research. This was one of the main reasons that Dr. Lemonde subsequently changed universities.

Dr. Lemonde is currently an Associate Professor with the Faculty of Health Sciences at the University of Ontario Institute of Technology (UOIT). This relatively new university (founded in 2002) is just starting to establish its research program. Because of the Award, Dr. Lemonde values the importance and necessity of developing links with decision makers and front-line workers, which will be carried through in the development of her research at the UOIT. Her current research interests include: work environment in the geriatric field; development and evaluation of a practicum experience in oncology for 2nd and 3rd year nursing students; quality of life and symptoms management; and development of simulations for the undergraduate nursing program.
Appendix F:

Highlight on Dr. Susan Jack, Post-Doctoral Award Holder
Susan Jack’s first involvement with the CHSRF was through a Joint Training Award for her doctoral research (McMaster University) in 1999. Prior to that, her educational background was a Bachelor of Science in Nursing from the University of Alberta. Dr. Jack then held a Post-Doctoral Award from 2004 to 2006 at the School of Nursing at McMaster University, where she worked as an Assistant Professor. Her mentors were Harriet MacMillan (McMaster University) and Carole Estabrooks (University of Alberta), and her main decision-maker partner was Lil Tonmyr at Health Canada. Dr. Jack’s research examined the issue of violence against women, with a focus on knowledge transfer and research dissemination.

During an interview, Dr. Jack commented on the importance and necessity of bringing the nursing perspective to interdisciplinary teams. During her fellowship, she joined a research team outside of the Faculty of Nursing (psychiatry through the Faculty of Medicine), which helped to increase her interdisciplinary skills. She also commented that if CHSRF’s Post-Doctoral Award had not existed, she likely would not have pursued a post-doctoral fellowship.

During the two years of her Post-Doctoral fellowship, Dr. Jack wrote several joint publications and is now either the principal investigator or a co-investigator on several major grants. Through her decision-maker partnership, she developed a Knowledge Transfer and Exchange plan for the Health Surveillance Branch, with Child Welfare as her key audience. She presented findings both at workshops with Child Welfare representatives in attendance and at international conferences. Dr. Jack commented that her internship gave her insight into the workings of the government and public health policy, and a realistic view of their limitations.

Dr. Jack was recently acknowledged for her contributions to research through the receipt of a CIHR New Investigator Award in Human Development, Child and Youth Health, Reproduction and Child Health (2007-2012). She currently teaches in both the undergraduate and graduate programs at McMaster, including a mixed-methods course at the Ontario Training Centre, where she is also a faculty member. She is also a Core Member of the Offord Centre for Child Studies. Some of her current research includes: investigation of risk and resiliency in mothers who experienced childhood maltreatment; use of research evidence by child welfare decision makers; and the evaluation of an intervention for intimate partner violence during nurse home visitations.
Appendix G:

Selected Research Conducted by Post-Doctoral Awardees
- An Evaluation of the Nursing Research Fund: Lessons to Date and Recommended Next Steps -

- Development of strategies to disseminate the findings of systematic reviews to public health decision-makers (Maureen Dobbins, 2001);
- Determinants of disadvantaged women’s vulnerability to HIV infection (Judy Mill, 2001);
- Knowledge utilization and policy implementation within an organizational setting (Joanne Profetto-McGrath, 2002);
- Leadership to promote patient safety culture and learning in critical care (Deborah Tregunno, 2002);
- Relationship of parent training, home visitation, and early childhood education to cognitive, language, and behavioral outcomes for preschool children at high risk for developmental delays (Karen Benzies, 2003);
- Defining the purpose and outcomes for a new advanced practice nursing role in ambulatory settings in Ontario Cancer Programs (Denise Bryant-Lukosius, 2003);
- Multiple intervention program evaluation in community perinatal health (Sonia Semenic, 2004);
- Evaluating the link between public health services and the prevention of family violence (Susan Jack, 2004);
- Organizational context and its relationship to research utilization in health care (Amanda Newton, 2005);
- Diversity in Canadian nursing: the quality of worklife of minority nurses (Josephine Etowa, 2006);
- Women living with mental illnesses in Northern Ontario: how women’s mental health policies are developed and on exploring gaps in services between policy and need (Phyllis Montgomery, 2006).
 Appendix H: 

Selected NRF-funded OGC Projects and REISS Programs
### Table H1: Selected NRF-funded OGC Projects

<table>
<thead>
<tr>
<th>Principal Investigator(s)</th>
<th>Research Topic</th>
<th>Competition Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Linda McGillis Hall and Diane Irvine Doran</td>
<td>A Study of the Impact of Nursing Staff Mix Models and Organizational Change Strategies on Patient, System and Nurse Outcomes</td>
<td>1998</td>
</tr>
<tr>
<td>Lise Fillion and Diane Morin</td>
<td>A Description of the Sources of Stress for Palliative-care Nurses Caring for Cancer Patients Outside the Hospital Environment</td>
<td>2000</td>
</tr>
<tr>
<td>Annalee Yassi and Aleck Ostry</td>
<td>Caring for the Caregivers of “Alternative Level of Care” Patients: The Impact of Healthcare Organization on Nurse Health, Well-being, Recruitment and Retention in the South Fraser Health Region of British Columbia</td>
<td>2000</td>
</tr>
<tr>
<td>Diane Irvine Doran and Jennie Pickard</td>
<td>Management and Delivery of Community Services in Ontario: Impact on the Quality of Care and Quality of Work Life of Community-based Nurses</td>
<td>2000</td>
</tr>
<tr>
<td>Renee Bourbonnais</td>
<td>Evaluative Research Intervention to Optimize the Psychosocial and Organizational Work Environment for Caregiving Staff</td>
<td>2000</td>
</tr>
<tr>
<td>Susan A VanDeVelde-Coke</td>
<td>The Effectiveness and Efficiency of Providing Homecare Visits in Nursing Clinics Versus the Traditional Home Setting</td>
<td>2000</td>
</tr>
<tr>
<td>Heather Davidson and Rita Schreiber</td>
<td>Advanced Nursing Practice: Opportunities and Challenges in British Columbia</td>
<td>2000</td>
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<tr>
<td>Maureen Markle-Reid</td>
<td>Frail Elderly Homecare Clients: The Costs and Effects of Adding Nursing Health Promotion and Preventive Care to Personal Support Services</td>
<td>2000</td>
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<tr>
<td>Michael Kerr</td>
<td>Monitoring the Health of Nurses in Canada</td>
<td>2000</td>
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<tr>
<td>Martha MacLeod, Judith Kulig, Norma Stewart and Roger Pithlado</td>
<td>The Nature of Nursing Practice in Rural and Remote Canada</td>
<td>2000</td>
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<tr>
<td>Judith Ritchie</td>
<td>Using Individual Patients’ Needs for Nursing Human Resources Planning</td>
<td>2000</td>
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<tr>
<td>Diane Doran and Amy Sanchez McCutcheon</td>
<td>Impact of the Manager’s Span of Control on Leadership and Performance</td>
<td>2001</td>
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<tr>
<td>Barbara Davies</td>
<td>Sustaining the Use of Best Practices in Nursing</td>
<td>2002</td>
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<tr>
<td>Peter C Coyte and Denise Guerriere</td>
<td>Determinants and Outcomes of Privately and Publicly Financed Home-Based Nursing</td>
<td>2002</td>
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<tr>
<td>Katherine McGilton</td>
<td>Identifying and Testing Factors that Influence Supervisors’ Abilities to Develop Supportive Relationships with Their Staff</td>
<td>2002</td>
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<tr>
<td>Ann Tourangeau</td>
<td>Nurse Staffing and Work Environments: Relationships with Hospital-Level Outcomes</td>
<td>2002</td>
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<tr>
<td>Heather K Spence Laschinger and Carol Wong</td>
<td>A Profile of the Structure and Impact of Nursing Management in Canadian Hospitals</td>
<td>2003</td>
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</table>
Table H1: Selected NRF-funded OGC Projects (continued)

<table>
<thead>
<tr>
<th>Principal Investigator(s)</th>
<th>Research Topic</th>
<th>Competition Year</th>
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<tbody>
<tr>
<td>Lorna Guse</td>
<td>Integrating New Nursing Graduates into the Workplace: Strategies for Retention and Career Development</td>
<td>2003</td>
</tr>
<tr>
<td>Lise Fillion and Diane Morin</td>
<td>Optimize the Quality of Nursing Practice in Palliative Care in a Context of Shifting to Ambulatory Care</td>
<td>2003</td>
</tr>
<tr>
<td>Linda O’Brien-Pallas, Gail Tomblin Murphy and Judith Shamian</td>
<td>Understanding the Costs and Outcomes of Nurses’ Turnover in Canadian Hospitals</td>
<td>2003</td>
</tr>
<tr>
<td>Debra Bakker and Margaret Fitch</td>
<td>Understanding the Factors that Influence Recruitment and Retention in Oncology Nurses</td>
<td>2003</td>
</tr>
<tr>
<td>Jeanne Besner and Diane Doran</td>
<td>A Systematic Approach to Maximizing Nursing Scopes of Practice</td>
<td>2003</td>
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</tbody>
</table>

Table H2: NRF-funded REISS Programs

<table>
<thead>
<tr>
<th>Principal Investigator(s)</th>
<th>Research Topic</th>
<th>Competition Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nancy Edwards and Doris Grinspun</td>
<td>Evidence-Informed Nursing Service Delivery Models</td>
<td>2005</td>
</tr>
<tr>
<td>Jane Underwood and David Mowat</td>
<td>Building Community and Public Health Nursing Capacity</td>
<td>2006</td>
</tr>
<tr>
<td>Linda McGillis-Hall and Sandra MacDonald-Rencz</td>
<td>Moving to Action: Evidence-Based Retention and Recruitment Policy Initiatives in Nursing</td>
<td>2007</td>
</tr>
<tr>
<td>Ruta Valaitis and Penny Nelligan</td>
<td>Primary Healthcare Nursing Leadership: Enhancing Collaboration Between Primary Care and Public Health*</td>
<td>2007</td>
</tr>
</tbody>
</table>

* funded under its secondary theme (primary healthcare) rather than the nursing theme
Appendix I:

Highlight on Kathryn Hayward
Recipient of Funding through
Nursing Care Partnership (NCP) Program
Kathryn Hayward, RN, provides an excellent example of how a new nurse researcher has received funds from the NRF and created research that is currently being used in practice. Ms. Hayward is an Assistant Professor and Masters student at Dalhousie University School of Nursing. She is also a Staff Nurse at the IWK Health Centre in Halifax.

In 2005, Ms. Hayward received funding from the CNF’s Nursing Care Partnership (NCP) Program, matched by the Nova Scotia Health Research Fund, for her study on *co-bedding twins: a multi-site trial*. In 2006, she received funding for a second related study (*co-bedding twins: the stress response*) from the NCP Program, matched by Dalhousie University School of Nursing, Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN) Canada, and McGill University. This research is multi-centered and involves representation from community, four disciplines, two universities, two health centres, and three provinces.

In an interview, Ms. Hayward commented about the difficulty in securing partners to match funding through the NCP program. In particular, her first proposal was denied, leading her to include Dr. Celeste Johnson as a co-principal investigator in order to enhance her application.

Ms. Hayward has collaborated with the Parents of Multiple Births Association (POMBA) on her research, namely through advertising the study in the POMBA member newsletter. As well, POMBA members have been actively involved in developing the research study, and Ms. Hayward plans on disseminating her findings to this group. Ms. Hayward also has several peer-reviewed publications, and contributes to the POMBA website in a monthly parenting-advice feature called “Ask Kathryn”. Further, Ms. Hayward has been recognized for her excellence in research through the IWK Health Centre Ruby Blois Master’s scholarship (2004) and the AWHONN Canada Rising Star Award (2003), which is awarded to a nurse who reflects and promotes evidence-based care.

*When questioned about the priorities for a second phase of the NRF, Ms. Hayward commented that a significant gap remains between front-line nurses and researchers. While the CHSRF focuses on bridging the gap between decision makers and researchers, she feels that there should be emphasis on clinical researchers working with bedside nurses, directly immersed in the nursing workplace.*
Appendix J:

List of Knowledge Dissemination Activities
An Evaluation of the Nursing Research Fund: Lessons to Date and Recommended Next Steps

Note: years and expenditures were taken solely from CHSRF 2006 Annual Report [2]

* Details could not be found regarding the specifics of the funding applications; assumptions have been made

** This final amount does not match amount in Appendix I because of inconsistencies between Annual Reports [2], Summary of Expenditures and Activities [10], and various lists of activities that have been considered “knowledge dissemination” activities

<table>
<thead>
<tr>
<th>Funding Application</th>
<th>Details</th>
<th>Year(s)</th>
<th>Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Networking (Chairs/RTC meetings)</td>
<td>Documented for 2000-2003 only</td>
<td>2000-03</td>
<td>$102,110</td>
</tr>
<tr>
<td>Knowledge Network Conference</td>
<td>Grant to CNA and partners to develop nursing knowledge network</td>
<td>1999,2001</td>
<td>$100,000</td>
</tr>
<tr>
<td>Nursing Policy Syntheses</td>
<td>Commitment and Care (2001); Staffing for Safety (2006)*</td>
<td>2001,2006</td>
<td>$80,000</td>
</tr>
<tr>
<td>Commissioned Research</td>
<td>Analysis of the Current State of Nursing Research in Canada (Mary Ellen Jeans, 2006-07)*</td>
<td>2006-07</td>
<td>$95,000</td>
</tr>
<tr>
<td>Canadian Policy Research Networks (CPRN) Healthy Workplace Meeting</td>
<td>-</td>
<td>2001</td>
<td>$29,851</td>
</tr>
<tr>
<td>Canadian Association of Schools of Nursing (CASN) Database</td>
<td>Online database of funded nursing research in Canada</td>
<td>2000,2003</td>
<td>$96,100</td>
</tr>
<tr>
<td>Nursing Research Advisory Committee of CNA</td>
<td>-</td>
<td>2000-01</td>
<td>$40,558</td>
</tr>
<tr>
<td>Student conference support</td>
<td>CAHSPR and ICSBHS conference (2005); CAHSPR conference (2006)</td>
<td>2005-06</td>
<td>$18,500</td>
</tr>
<tr>
<td>Conference support</td>
<td>International Nurse Migration Study and Conference (Academy Health, United States), Academy of Canadian Executive Nurses, CNA Nursing Leadership Conference</td>
<td>2004,2006, 2007</td>
<td>$25,000</td>
</tr>
<tr>
<td>Single Voice for Nursing Research contract</td>
<td>To CNA; to develop framework toward establishing a single voice for Canadian nursing research</td>
<td>2002</td>
<td>$10,000</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>N/A</strong></td>
<td><strong>$757,024</strong></td>
<td></td>
</tr>
</tbody>
</table>
Appendix K:

Summary of NRF Expenditures from 1999 to 2007
Table K1: Breakdown of NRF Expenditures by Program Area and Year [10]

<table>
<thead>
<tr>
<th>Year</th>
<th>Program Area 1: Nursing Research Chairs ($500,000 allocated)</th>
<th>Program Area 2: Training Awards ($750,000 allocated)</th>
<th>Program Area 3a: Research Funding – Nursing Policy &amp; Management ($500,000 allocated)</th>
<th>Program Area 3b: Research Funding – Nursing Care (NCP) ($500,000 allocated)</th>
<th>Program Area 4: Knowledge Dissemination ($250,000 allocated)</th>
<th>Total Expenditures ($2,500,000 allocated)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>0</td>
<td>184,000</td>
<td>479,404</td>
<td>N/A</td>
<td>168,132</td>
<td>831,536</td>
</tr>
<tr>
<td>2000</td>
<td>282,746</td>
<td>321,640</td>
<td>561,748</td>
<td>300,000</td>
<td>158,275</td>
<td>1,624,409</td>
</tr>
<tr>
<td>2001</td>
<td>517,524</td>
<td>136,875</td>
<td>1,048,038</td>
<td>N/A</td>
<td>128,627</td>
<td>1,831,064</td>
</tr>
<tr>
<td>2002</td>
<td>479,037</td>
<td>456,796</td>
<td>929,509</td>
<td>500,000</td>
<td>58,379</td>
<td>2,423,721</td>
</tr>
<tr>
<td>2003</td>
<td>445,093</td>
<td>586,667</td>
<td>1,176,200</td>
<td>500,000</td>
<td>107,430</td>
<td>2,815,390</td>
</tr>
<tr>
<td>2004</td>
<td>537,750</td>
<td>528,585</td>
<td>1,441,471</td>
<td>520,000</td>
<td>10,000</td>
<td>3,038,035</td>
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<tr>
<td>2005</td>
<td>456,875</td>
<td>299,779</td>
<td>393,627</td>
<td>525,000</td>
<td>-7,648</td>
<td>1,667,633</td>
</tr>
<tr>
<td>2006</td>
<td>803,054</td>
<td>452,503</td>
<td>318,718</td>
<td>525,000</td>
<td>86,477</td>
<td>2,185,752</td>
</tr>
<tr>
<td>2007</td>
<td>317,290</td>
<td>524,028</td>
<td>562,978</td>
<td>535,250</td>
<td>36,465</td>
<td>1,976,011</td>
</tr>
</tbody>
</table>

* Using a 10% tolerance (see ranges below), individual cells are shaded either blue (over allocated funds) or green (under allocated funds); no shading depicts that expenditures were in the expected range.

Table K2: Breakdown of Other NRF Expenses and Investment Income by Year [10]

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Expenditures (A) ($2,500,000 allocated)</th>
<th>Miscellaneous Expenses* (B)</th>
<th>Total NRF Expenses (A+B)</th>
<th>Investment Income (C)</th>
<th>Remaining Amount in NRF Endowment (25,000,000-A+B+C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>831,536</td>
<td>396,536</td>
<td>1,228,072</td>
<td>1,101,190</td>
<td>24,873,118</td>
</tr>
<tr>
<td>2000</td>
<td>1,624,409</td>
<td>912,319</td>
<td>2,536,728</td>
<td>2,084,471</td>
<td>24,420,861</td>
</tr>
<tr>
<td>2001</td>
<td>1,831,064</td>
<td>1,086,117</td>
<td>2,917,181</td>
<td>763,938</td>
<td>22,267,618</td>
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<tr>
<td>2002</td>
<td>2,423,721</td>
<td>1,127,763</td>
<td>3,551,484</td>
<td>-1,939,334</td>
<td>16,776,800</td>
</tr>
<tr>
<td>2003</td>
<td>2,815,390</td>
<td>838,586</td>
<td>3,653,976</td>
<td>511,174</td>
<td>13,633,998</td>
</tr>
<tr>
<td>2004</td>
<td>3,037,806</td>
<td>714,383</td>
<td>3,752,189</td>
<td>1,292,688</td>
<td>11,174,497</td>
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<tr>
<td>2005</td>
<td>1,667,633</td>
<td>461,915</td>
<td>2,129,548</td>
<td>540,556</td>
<td>9,585,505</td>
</tr>
<tr>
<td>2006</td>
<td>2,185,752</td>
<td>627,939</td>
<td>2,813,691</td>
<td>791,075</td>
<td>7,562,889</td>
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<tr>
<td>2007</td>
<td>1,976,011</td>
<td>663,369</td>
<td>2,639,380</td>
<td>437,024</td>
<td>5,360,533</td>
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</table>

* Miscellaneous expenses include salaries, other direct costs, overhead allocation, and fees for investments