2007 Annual Report on the Nursing Research Fund
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ACTIVITIES FOR THE YEAR 2007

BACKGROUND
The federal government created the Nursing Research Fund (NRF) in 1999 in response to the nursing community’s concerns around the need to develop nursing research and to support research on nursing health services and management resulting from health system restructuring. The fund provided an additional $25 million to the Canadian Health Services Research Foundation’s endowment, to be spent over 10 years at an average of $2.5 million per year. This fund has enabled the Foundation to focus more on nursing-related research within its existing competitions.

The Foundation does not just focus on developing research and researchers. It also builds capacity for research to be used, shared, and integrated into decision making in nursing care and management. Thus, capacity building for nursing-related research is supported through funding research and knowledge creation; developing and supporting individuals in their ability to create and use research; and promoting the sharing and use of research evidence to inform decision making in the management and delivery of health care.

This report identifies both specific expenditures of the NRF and activities related to the fund as part of the Nursing Leadership, Organization, and Policy Theme and integrated work across the Foundation.

ABOUT THE CANADIAN HEALTH SERVICES RESEARCH FOUNDATION
The Foundation was established in 1997 to strengthen the scientific basis for decisions made by people running Canada’s health services. To do this effectively, it builds bridges between applied health services researchers who generate new knowledge through research and decision makers in the health system who make decisions and run the system.

The Foundation helps build capacity for research and evidence use by health system managers and policy makers, by summarizing research results in a way decision makers can use; providing tools and access to experts to help them find the best available research; and training senior decision makers to use research effectively.

The Foundation develops capacity in the research community to meet the health system’s needs by supporting a network of training programs; providing tools and funding to facilitate the production of new, relevant research; and working with universities to improve the climate for applied research and the rewards for applied researchers.

NURSING COMMITTEE OF THE CANADIAN HEALTH SERVICES RESEARCH FOUNDATION
The Nursing Committee is a special committee of the board of trustees that provides a strategic forum to guide action surrounding the Foundation’s commitment to nursing research and capacity development. It was created in December 2001, replacing the previous NRF advisory committee, which met under the auspices of the Canadian Nurses Association (CNA) in 1999 and 2000.

The Nursing Committee is comprised of as many as three trustees and three external members with interest or expertise in nursing issues, as shown in Table 1. The three external members are selected from nominees provided by eight nursing organizations in Canada.

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1 The focus of the fund and related activities is research on nursing issues, not just research done by nurses. Thus, the term “nursing-related” research and activities will be used.
Table 1: CHSRF Nursing Committee Members 2007

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gail Tomblin Murphy (Chair)</td>
<td>Associate Professor, School of Nursing, Dalhousie University, Nova Scotia</td>
</tr>
<tr>
<td>Jeanne Besner (Vice Chair)</td>
<td>Director, Health Systems and Workforce Unit, Research Initiatives in Nursing and Health, Calgary Health Region, Alberta</td>
</tr>
<tr>
<td>Sheila Marie Gallagher*</td>
<td>Preschool Assessment Service, Glenrose Rehabilitation Hospital, Alberta</td>
</tr>
<tr>
<td>Sue Matthews*</td>
<td>National Executive Director Disease Management and Ontario Chief of Practice, VON Canada, Ontario</td>
</tr>
<tr>
<td>Malcolm Maxwell</td>
<td>Chief Executive Officer, Northern Health Authority, British Columbia</td>
</tr>
<tr>
<td>Marlene Smadu*</td>
<td>Associate Dean, Regina Site, College of Nursing, University of Saskatchewan, Saskatchewan</td>
</tr>
<tr>
<td>Board Chair (non-voting, officio)</td>
<td></td>
</tr>
<tr>
<td>Board Vice-Chair (non-voting, officio)</td>
<td></td>
</tr>
<tr>
<td>Chief Executive Officer, (non-voting, officio)</td>
<td></td>
</tr>
<tr>
<td>* external member</td>
<td></td>
</tr>
</tbody>
</table>

THE NURSING RESEARCH FUND AND THE FOUNDATION'S NURSING LEADERSHIP, ORGANIZATION AND POLICY THEME

Priority setting is an important planning element for the Foundation, as these initiatives drive theme activities. Starting in 2001, the Foundation, along with five national organizations, undertook the first such consultation to identify research themes for future applied health services and policy research, called Listening for Direction: A national consultation on health services and policy issues. Today these priority setting meetings are commonly referred to as LfD. The main objective of this consultation was to help design research themes that address the needs of policy makers and managers in the health system over the next two to five years. Nursing and nursing-related issues have appeared as key cross-cutting themes in LfD I, LfD II (conducted in 2004) and LfD III (conducted in 2007).

The Foundation reaffirmed its commitment to the Nursing Leadership, Organization and Policy theme following LfD II, as one of the four priority theme areas for 2004-07. The NRF continued to contribute to and support the activities of this theme by supporting nursing researchers, research on nursing issues, and the sharing and use of this research to contribute to evidence-informed decision making.

In addition to receiving guidance from the Nursing Committee and the LfD consultations for nursing-related activities, the Foundation held other priority setting activities specific to the NRF and nursing theme-related activities. On March 21, 2006, the Foundation hosted the Nursing Leadership, Organization and Policy Network Day in Vancouver, BC. More than 50 enthusiastic nursing stakeholders were brought together to set network and dissemination priorities within the Nursing Leadership, Organization, and Policy theme area, and to explore opportunities for knowledge exchange and collaboration. The discussion topics were based on a preparatory survey to identify the participants' specific concerns and priorities. The report Looking forward, working together: Priorities for nursing leadership in Canada summarizes the priority areas and key messages that came out of this network day.

In September 2006, the Foundation hosted the CHSRF Priorities for Nursing Leadership meeting in Charlottetown, Prince Edward Island. This event was intended as a follow-up to the network meeting held in March of 2006. The Foundation brought together key stakeholders from the nursing community in Canada to participate.
Primary objectives for this meeting were:

1. Review and discuss the background report on priorities – dissemination / integration of individual work plans;

2. Report from organizations on major activities / work plans for the next two years with the purpose of identifying:
   i) expected outcomes of current and upcoming initiatives;
   ii) opportunities for partnering and collaboration;
   iii) identify synergy and integration with other initiatives;
   iv) funding sources/resources – opportunities for informal / formal partnerships; and
   v) plan for integrated dissemination opportunities.

3. Provide opportunity for networking and greater understanding of each other’s portfolios.

The findings from this meeting provided guidance for the Nursing Leadership, Organization and Policy theme activities for 2007.

Evaluation of the Nursing Research Fund

As the Nursing Research Fund (NRF) is due to expire in 2009, the Foundation is committed to determining the lessons and consequences of the different investments made through the NRF since its inception in 1999 through to end-2007. The findings arising from this evaluation will be shared with the nursing and wider health services research and decision-making communities—in part, to identify successes and support the consideration of next steps and future approaches that could be adopted in response to any ongoing needs for capacity development in this area, and/or to address any areas where the original objectives of the NRF were not achieved.

The primary objectives for this evaluation are:

i) to provide a descriptive summary of the expenditures and activities supported by NRF funds as administered by CHSRF;

ii) to quantify the main outputs and “products” of the investments made through the NRF—including those funds and in-kind resources leveraged through CHSRF programs and those of the Nursing Care Partnership; this includes an assessment (implying the collection of concrete evidence where available and informed judgment where appropriate) of the short, medium and longer-term impacts of the NRF;

iii) to determine the perspectives of key stakeholders on the relative successes and failures of the NRF with respect to the original capacity building objectives and expectations of the nursing community, and with respect to CHSRF’s role in administering these funds; and

iv) to provide recommendations and options for CHSRF to consider in consultation with key stakeholders regarding wind down, renewal or alternate action as appropriate in response to the findings of this evaluation.

A team, led by Peter Coyte (University of Toronto) has been commissioned to conduct this evaluation. The evaluation application was merit reviewed in the fall of 2007 and the project began on November 15, 2007. The team will meet with the Nursing Advisory Committee in mid-February 2008 and the final report will be available at the end of March 2008.

Wind down of the Nursing Leadership, Organization and Policy Theme

Following the LfD III consultations and the Foundation’s consideration of priority theme areas for 2007-2010, it was decided that the Foundation would begin to wind down the Nursing, Leadership and Organization theme—in particular due to the wind down of the Nursing Research Fund in 2009. The Foundation remains, however, committed to addressing nursing and nursing-related issues as a cross-cutting theme for its new themes below. The four new themes were selected from the 11 themes identified through the LfD III exercise.
which included nine consultation workshops across Canada (one national workshop, five regional workshops in the south, and three workshops in each of the territories). At these meetings, leading decision makers, voluntary organizations, funders and researchers contributed to identifying the major short-term (one to two years) and longer-term (three to 10 years) health system issues in Canada. There were eight national partners for LfD III (two new partners in addition to those for LfD II); the process is led strategically by CHSRF and CIHR-IHSPR. The resultant themes are identified through a translation exercise with leading experts, who identify the priority themes and illustrative questions for synthesis and primary research. These themes help to guide the research and KE activities of the eight national partners for 2007-2010.

For the next three to five years, the Foundation’s work will focus on the following four themes. Two of these are content related; two are process related:

Content related:
- Workforce and the Work Environment
- Quality and Patient Safety

Process related:
- Values-Based Decision Making and Public Engagement
- Change Management For Improved Practice and Improved Health

The Foundation believes that the timing of the wind down of the NRF provides an opportunity to integrate nursing and nursing-related activities within our existing and future funding vehicles and initiatives, as is currently the case for considerations related to other healthcare professions. This is not to suggest that the job of building capacity for nursing-related research and its use is complete—there is much left to do to support ongoing and new work in this area and the Foundation will support the nursing community in its efforts to secure means to further address this gap. In 2008, a commitment to nursing and nursing-related issues will be maintained as a cross-cutting theme, to be considered alongside issues relevant to the four themes above. Existing work commitments that have already been initiated in past theme areas will be maintained and supported as per current agreements.

NURSING RESEARCH FUND-RELATED ACTIVITIES AND OUTCOMES FOR 2007

Six priority areas were identified in the operational work plan for the Nursing Leadership, Organization and Policy theme for 2007. These are:

1. Continued support for the national nursing leadership, organization, and policy nursing network of lead organizers and individuals (both decision makers and researchers) to respond with plans for developing specific knowledge networks on focused topics;

2. Continue the implementation to support structural development of the Nurse Staffing Patient Safety Knowledge Network;

3. Initiate a Decision Support Synthesis (DSS) synthesis in an area defined by nursing leaders (researchers and decision makers) for policy recommendations that support nurse staffing, patient safety and system outcomes (exploratory meeting on Staffing and Patient and System outcomes scheduled for June 2007);

4. Continue to disseminate materials released to key policy research initiatives on nursing issues;

5. Co-ordinate one meeting of the Nursing Committee of the Board;

6. Work with funded Research, Exchange, and Impact for System Support (REISS) investigative teams to identify appropriate dissemination and development opportunities.

The NRF was a major contributor to the Nursing Leadership, Organization and Policy theme in 2007.
NURSING RESEARCH FUND ACTIVITIES AND EXPENDITURES, 1999–2007

Between 1999 and 2007, the fund supported, in whole or in part, the following projects and awards:

- Three REISS competition programs and 10 development awards to support applications for full-scale proposals;
- Forty Open Grants Competition projects and programs;
- Six nursing-specific CHSRF/CIHR chairs and two nursing-related chairs (of the 12 chair awards);
- Twenty postdoctoral students;
- Four Career Reorientation Awards;
- Three CHSRF/CIHR Regional Training Centres (RTCs) (of the five awards);
- More than 29 special project grants or awards; and
- Research funded by both the Nursing Care Partnership and the Partnerships for Health System Improvement competition.

Not only has the Nursing Research Fund successfully supported research on nursing-related issues and capacity development, it has also encouraged partnerships that contribute funding to nursing-relevant research and training.

Appendix A provides a detailed overview of expenditures in addition to projects and activities funded by the Nursing Research Fund to date. The expenditures include all direct and indirect (overhead) costs. Appendix B identifies the activities and related costs of awards granted during 1999–2007.

Nursing Leadership, Organization and Policy Activities, 2007

The following are the 2007 activities and achievements supported by the Nursing Research Fund under each of the Foundation’s strategic objectives. A description of the 2007 nursing leadership, organization and policy activities can also be found in Appendix C.
OBJECTIVE 1: TO CREATE HIGH-QUALITY NEW KNOWLEDGE THAT IS USEFUL FOR HEALTH SERVICES MANAGERS AND POLICY MAKERS

The Nursing Research Fund and the Foundation have supported the creation of new knowledge through the following major activities and programs:

- Research funding:
  - Research, Exchange, and Impact for System Support (REISS);
  - Partnerships for Health System Improvement (PHSI); and
  - the Nursing Care Partnership (NCP);
- Additional awards and commissioned research and projects.

RESEARCH, EXCHANGE, AND IMPACT FOR SYSTEM SUPPORT (REISS)

In 2004, most Open Grants Competition projects were successfully transferred to the Canadian Institutes of Health Research. Following this, the Foundation launched its new flagship program-funding competition, Research, Exchange, and Impact for System Support (REISS). Developed in consultation with researchers, decision makers, and funders across Canada, REISS combines elements known to fuel collaborative, evidence-informed support for the organization, management, and policies of the Canadian healthcare system. The result is a unique funding model that goes beyond traditional research funding to promote high-potential-impact research and high-quality capacity-building initiatives, with effective dissemination and implementation of results.

The Foundation’s REISS competition is made possible with partnership funding from a number of organizations. These organizations not only leveraged REISS funding by providing cash and in-kind support, they are also at the heart of key linkages made between researchers and decision makers.

In its third year, the REISS competition received six nursing research letters of intent, (all of which were screened as being eligible for the competition), invited four teams to full-scale applications, and funded one program of research as shown below in Table 2.

Table 2: Theme-based results from the 2007 REISS competition

<table>
<thead>
<tr>
<th>Theme</th>
<th>Letters of Intent (Received)</th>
<th>Full-scale Applications Invited and Received</th>
<th>Full-scale Applications Recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management of the Healthcare Workplace</td>
<td>5 (8)</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Managing for Quality and Safety</td>
<td>7 (10)</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Nursing Leadership, Organization and Policy</td>
<td>6 (6)</td>
<td>4</td>
<td>2(^5)</td>
</tr>
<tr>
<td>Primary Healthcare</td>
<td>5 (6)</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>23 (30)</td>
<td>12</td>
<td>4</td>
</tr>
</tbody>
</table>

3 From 1998 to 2004, the Open Grants Competition served as the Foundation’s research funding program. The Foundation transferred the project portion of the Open Grants Competition to the Canadian Institutes of Health Research for the 2005 competition.

4 The successful team, led by Linda McGillis Hall, is titled “Moving to Action: Evidence-Based Retention and Recruitment Policy Initiatives for Nursing.” The program is co-sponsored by Health Canada – Office of Nursing Policy. Note: The team ultimately decided not to take up the award.

5 A second program submitted under the Nursing Leadership, Organization and Policy theme was recommended for funding under its secondary theme (primary healthcare) by the merit review panel, as it felt the program was a better fit under that theme.
PARTNERSHIPS FOR HEALTH SYSTEM IMPROVEMENT

The Partnerships for Health System Improvement (PHSI) competition is a research competition administered by the Canadian Institutes of Health Research (CIHR). The purpose of this initiative is to support teams of researchers and decision makers to conduct research that is useful to health system managers and/or policy makers. Successful teams conduct research projects of up to three years in length, in thematic areas identified as high priorities in LfDII.6

This funding opportunity to support research projects was developed and previously managed by the Canadian Health Services Research Foundation (CHSRF) as part of its “Open Grants Competition.”

The Nursing Research Fund provides up to $200,000 a year in matching funds for successful projects in this CIHR competition (maximum of $100,000 per project) submitted under the Nursing Leadership, Organization and Policy theme. NRF monies used to support the nursing theme within this competition are allocated according to the merit review panel’s ratings as funds are available.

2007 PHSI NRF co-sponsored projects

- Lise Fillion, “Vers l’amélioration des services et des soins de fin de vie : mieux comprendre l’impact du milieu de travail sur la satisfaction et le bien-être des infirmières” ($95,000 NRF)
- Walter Wodchis, “Examining the Determinants of Quality in Ontario Long-Term Care” ($99,951 NRF)

NURSING CARE PARTNERSHIP

The creation of clinical knowledge related to nursing care is supported by funding through the Nursing Care Partnership, a distinct program component of the Nursing Research Fund administered by the Canadian Nurses Foundation.

In 2007 the Canadian Nurses Foundation committed $391,838 of Nursing Care Partnership funding to projects meeting criteria agreed upon by both foundations in January 2003. A further $680,354 was leveraged through partnerships for a total investment of $1,072,192. Over five years, the Canadian Nurses Foundation has committed $2,222,057 to approved nursing care research projects and leveraged $4,649,443 for a total investment of $6,869,509.

In addition, in late 2007, the Canadian Nurses Foundation submitted an application for a five-year extension of the Nursing Care Partnership. This application was reviewed and a two-year extension to the program at the current annual funding level of $535,000 per year was approved to cover the period from January 1, 2008 to December 31, 2009, to coincide with the wind down of the NRF at the end of 2009.

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6 In 2001, Listening for Direction: A national consultation on health services and policy issues was conducted. It helped design research themes that address the needs of policy makers and managers in the health system over the next two to five years.
OBJECTIVE 2: TO INCREASE THE NUMBER AND NATURE OF APPLIED HEALTH SERVICES AND NURSING RESEARCHERS

CAPACITY FOR APPLIED AND DEVELOPMENTAL RESEARCH AND EVALUATION (CADRE) IN HEALTH SERVICES AND NURSING

The Nursing Research Fund provides support to the Capacity for Applied and Developmental Research and Evaluation (CADRE) in Health Services and Nursing program. This program is a partnership between the Foundation, the Canadian Institutes of Health Research, and others to increase capacity in applied health services and policy research, including nursing leadership, organization, and policy issues. This program not only increases research capacity but also creates sustainable partnerships and linkages. Partner contributions account for more than 50 percent of the monies to cover award costs for this program. The CADRE program is comprised of four initiatives:

- Postdoctoral Awards;
- Career Reorientation Awards (this award was suspended following a CHSRF Board of Trustees decision in August, 2007);
- CHSRF/CIHR Chair Awards; and
- CHSRF/CIHR Regional Training Centres.

POSTDOCTORAL AWARDS

The Postdoctoral Awards are designed to build capacity through focused development of new researchers with the aim of increasing high-quality research in future. Emphasis is placed on working with managers and policy makers, as well as on acquiring skills that maximize knowledge translation and use of their future research. Twenty nursing-related postdoctoral students have been sponsored to date.

Table 3: Nursing Research Fund postdoctoral students

<table>
<thead>
<tr>
<th>Year</th>
<th>Name</th>
<th>Supervisor(s)</th>
<th>Province (University)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999-2000</td>
<td>Postdoctoral program began in 2001</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2001</td>
<td>Maureen Dobbins</td>
<td>Donna Ciliska/ Réjean Landry</td>
<td>Ontario (McMaster University)</td>
</tr>
<tr>
<td></td>
<td>Judy Mill</td>
<td>Nancy Edwards</td>
<td>Ontario (University of Ottawa)</td>
</tr>
<tr>
<td>2002</td>
<td>Anita Kothari</td>
<td>Nancy Edwards</td>
<td>Ontario (University of Ottawa)</td>
</tr>
<tr>
<td></td>
<td>Melanie Lavoie-Tremblay</td>
<td>Linda O'Brien-Pallas</td>
<td>Ontario (University of Toronto)</td>
</tr>
<tr>
<td></td>
<td>Joanne Profetto-McGrath</td>
<td>Carol Estabrooks/ Réjean Landry</td>
<td>Alberta (University of Alberta)</td>
</tr>
<tr>
<td></td>
<td>Deborah Tregunno</td>
<td>Diane Irvine Doran</td>
<td>Ontario (University of Toronto)</td>
</tr>
<tr>
<td>2003</td>
<td>Karen Benzies</td>
<td>Suzanne Tough/ Nancy Edwards</td>
<td>Alberta (University of Calgary)</td>
</tr>
<tr>
<td></td>
<td>Denise Bryant-Lukosius</td>
<td>Alba DiCenso/ Lesley Degner</td>
<td>Ontario (McMaster University)</td>
</tr>
<tr>
<td>2004</td>
<td>Sonia Semenic</td>
<td>Nancy Edwards/ Jean-Louis Denis</td>
<td>Québec (McGill University)</td>
</tr>
<tr>
<td></td>
<td>Susan Jack</td>
<td>Harriet MacMillan/ Carole Estabrooks</td>
<td>Ontario (McMaster University)</td>
</tr>
<tr>
<td>2005</td>
<td>Anne Hofmeyer</td>
<td>Carole Estabrooks</td>
<td>Alberta (University of Alberta)</td>
</tr>
<tr>
<td></td>
<td>Sharon Kaasalainen</td>
<td>Kevin Brazil / Alba DiCenso</td>
<td>Ontario (McMaster University)</td>
</tr>
<tr>
<td></td>
<td>Amanda Newton</td>
<td>Carole Estabrooks</td>
<td>Alberta (University of Alberta)</td>
</tr>
<tr>
<td></td>
<td>Mike Patterson</td>
<td>Nancy Edwards/ Janet Smylie</td>
<td>Ontario (University of Ottawa)</td>
</tr>
<tr>
<td></td>
<td>Laureen Hayes</td>
<td>Linda O'Brien-Pallas</td>
<td>Ontario (University of Toronto)</td>
</tr>
<tr>
<td>2006</td>
<td>Josephine Etowa</td>
<td>Linda O'Brien-Pallas/ Nancy Edwards</td>
<td>Ontario (University of Toronto and University of Ottawa)</td>
</tr>
<tr>
<td></td>
<td>Phyllis Montgomery</td>
<td>Nancy Edwards/ Cheryl Forchuk</td>
<td>Ontario (University of Ottawa and London Health Sciences Centre)</td>
</tr>
<tr>
<td></td>
<td>Faith Donald</td>
<td>Kevin Brazil/Jenny Ploeg</td>
<td>Ontario (McMaster University)</td>
</tr>
<tr>
<td>2007*</td>
<td>Christine Kurtz Landy</td>
<td>Harriet MacMillan</td>
<td>Ontario (McMaster University)</td>
</tr>
<tr>
<td></td>
<td>Dominique Tremblay</td>
<td>Nancy Edwards</td>
<td>Ontario (University of Ottawa)</td>
</tr>
</tbody>
</table>

7 Laureen Hayes was funded by the Ontario Ministry of Health and Long-Term Care.
CAREER REORIENTATION AWARDS
The Career Reorientation Awards were designed to attract established, mid-career researchers from disciplines outside health services to apply their expertise and experience to applied health services and policy research issues. The Foundation decided to close this award in 2007 due to lack of uptake in recent years.

Between 2000 and 2006, four members of the nursing community received awards. These awards provided established researchers working in clinical nursing care with support to work with a mentor for one year to develop the knowledge base and necessary skills to reorient their research toward nursing management or health services research, thereby creating new knowledge. Each recipient received $50,000 in salary support for one year from the fund; the fund also provided $10,000 to the mentor. These costs are shared between the Canadian Institutes of Health Research and the Foundation through the Nursing Research Fund.

Table 4: Nursing-related Career Reorientation Award holders between 2000 and 2006

<table>
<thead>
<tr>
<th>Name</th>
<th>Year</th>
<th>Mentor</th>
<th>University</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michelle Giroux</td>
<td>2006</td>
<td>Nancy Edwards</td>
<td>University of Ottawa</td>
</tr>
<tr>
<td>Ann Rhéaume</td>
<td>2003</td>
<td>Andrea Baumann</td>
<td>Université de Moncton</td>
</tr>
<tr>
<td>Anne Dewar</td>
<td>2001</td>
<td>Janice Lander</td>
<td>University of British Columbia</td>
</tr>
<tr>
<td>Manon Lemonde</td>
<td>2000</td>
<td>Linda O’Brien-Pallas</td>
<td>Laurentian University</td>
</tr>
</tbody>
</table>

CHSRF/CIHR CHAIR AWARDS
The Chair Awards are funded for 10 years, renewable at five years following a successful fourth-year review. There were six nursing-specific and two nursing-related chairs. The awards provide a focal point for the education and mentoring of applied health services researchers who will conduct relevant research in nursing leadership, organization, and policy issues. Each funded chair receives a maximum of $196,000 from the fund per year, a cost shared by the Canadian Institutes of Health Research, the Foundation and regional co-sponsors (where applicable). Of this award, $57,647 must be dedicated to student support. The annual chair maximum funding amounts were reviewed and increased in 2007 to reflect cost-of-living increases. All chairs have achieved success within the program by increasing research productivity and education and mentoring opportunities with a focus on linkage and exchange.

Between 2004 and 2007, all the chairs underwent a fourth-year review. Seven of the nursing-specific and nursing-related chairs were recommended for renewal and one was not recommended for renewal. Of the contributions for the chairs from the Foundation, the NRF funds 100 percent of the six nursing-specific chairs, and 50 percent of the two nursing-related chairs. Details regarding the chair awards can be found in Table 5.
Table 5: Nursing-specific and nursing-related chairs

<table>
<thead>
<tr>
<th>Name</th>
<th>Focus</th>
<th>Province (University)</th>
<th>Funding Sources</th>
<th>Fourth-Year Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nancy Edwards</td>
<td>Community Nursing</td>
<td>Ontario (University of Ottawa)</td>
<td>50% NRF; 50% CHR</td>
<td>October 2004</td>
</tr>
<tr>
<td>Linda O’Brien-Pallas</td>
<td>Nursing Human Resources</td>
<td>Ontario (University of Toronto)</td>
<td>50% NRF; 50% CHR</td>
<td>October 2005</td>
</tr>
<tr>
<td>Lesley Degner</td>
<td>Oncological Nursing</td>
<td>Manitoba (University of Manitoba)</td>
<td>50% NRF; 50% CHR</td>
<td>April 2005</td>
</tr>
<tr>
<td>Alba DiCenso</td>
<td>Nurse Practitioners/Advanced Practice Nursing</td>
<td>Ontario (McMaster University)</td>
<td>50% NRF; 50% CHR</td>
<td>June 2005</td>
</tr>
<tr>
<td>Paula Goering</td>
<td>Best Practices in Mental Health</td>
<td>Ontario (University of Toronto)</td>
<td>50% NRF; 50% CHR</td>
<td>December 2004</td>
</tr>
<tr>
<td>Peter C. Coyte</td>
<td>Homecare</td>
<td>Ontario (University of Toronto)</td>
<td>25% CHSRF (core); 25% NRF; 50% CHR</td>
<td>October 2004</td>
</tr>
<tr>
<td>Pat Armstrong</td>
<td>Policy and Women’s Studies</td>
<td>Ontario (York University)</td>
<td>25% CHSRF (core); 25% NRF; 50% CHR</td>
<td>September 2006</td>
</tr>
<tr>
<td>Janice Lander*</td>
<td>Evaluating Nursing Care</td>
<td>Alberta (University of Alberta)</td>
<td>50% NRF; 50% CHR</td>
<td>April 2005</td>
</tr>
</tbody>
</table>

REGIONAL TRAINING CENTRES

Designed to complement the Chair Awards, five Regional Training Centres (RTCs) were initially funded for a 10-year period (renewable following fourth-year review), and three were supported through the NRF. These centres are designed to increase the number of qualified applied health services and nursing researchers at the master’s and PhD levels and complement the infrastructure established by the Chairs. Emphasis is placed on creating opportunities to share knowledge through student placements with decision-making organizations. Each funded RTC now receives up to $421,000 of which at least 70 percent must be allocated to student support. The annual funding amount was increased from $375,000 in 2007 as a result of a cost-of-living adjustment.

By 2006, all five RTCs completed their reviews, resulting in four renewals and one non-renewal. In 2007, two nursing-related training centres continue to receive 100 percent financial support from the NRF.*

Table 6: Nursing-related training centres

<table>
<thead>
<tr>
<th>Name of Centre</th>
<th>Partners (Universities)</th>
<th>Focus</th>
<th>Region</th>
<th>Fourth-Year Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>FERASI Centre</td>
<td>Université de Montréal, McGill University,</td>
<td>Nursing Administration</td>
<td>Quebec</td>
<td>November 2005</td>
</tr>
<tr>
<td></td>
<td>Université Laval</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ontario Training</td>
<td>McMaster University, York University,</td>
<td>Health Services and Policy Research</td>
<td>Ontario</td>
<td>October 2006</td>
</tr>
<tr>
<td>Centre</td>
<td>University of Ottawa, Laurentian University,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lakehead University, University of Toronto</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ADDITIONAL AWARDS

The NRF has supported the creation of new knowledge through a number of special training and award grants since 1999. A summary of these awards is presented in Appendix B.

---

* Janice Lander’s chair was not recommended for funding past the fourth-year point and was terminated as of December 31, 2006.

9 The Centre for Knowledge Transfer was not renewed; funding ended on July 1, 2006. A decision on how the remaining funds will be redeployed is currently under review.
EVALUATION OF CADRE
A mid-term review of the four components of the CADRE program (Chair Awards, RTCs, Postdoctoral Awards and Career Reorientation Awards) concluded in October 2006. Each chair and training centre was reviewed by an independent three-member panel that completed a document review, a site visit and, for the training centres, a survey of trainees’ perspectives. The Career Reorientation and Postdoctoral awards were internally evaluated by Foundation staff using a formative evaluation approach. The final report of the evaluation was completed in June 2007. The final report is expected to be published and posted to the Foundation website in mid-summer 2008.

OBJECTIVE 3: TO GET NEEDED RESEARCH INTO THE HANDS OF HEALTH SYSTEM MANAGERS AND POLICY MAKERS IN THE RIGHT FORMAT, AT THE RIGHT TIME, THROUGH THE RIGHT CHANNELS

THE NURSE STAFFING AND PATIENT SAFETY KNOWLEDGE NETWORK
The Nurse Staffing and Patient Safety Knowledge Network (NSPS KN) is supported by four key partners, Canadian Health Services Research Foundation (CHSRF), Canadian Patient Safety Institute (CPSI), Canadian Nurses Association (CNA) and the Canadian Federation of Nurses Unions (CFNU). It provides a forum for experts to bring pertinent evidence, expertise, and best-practice strategies on nurse staffing and patient safety to the forefront to support evidence-informed decision making.

The goal of this network is to support evidence-informed nursing staffing decisions to improve patient care. This network has three major activities:

- Creation of the NurseONE “Staffing for Safety” community;
- Creation of evidence-based products for use by decision makers; and
- Promotion and sharing of these resources through face-to-face meetings with employers.

The Network provides its members with:

- Access to the latest research and reports on nurse staffing and patient safety;
- Assistance to find staffing tools and products;
- Shared information about staffing and safety initiatives; and,
- Learning about what others are doing to improve nurse staffing and patient safety in their organizations.

In 2007, the NSPS KN finished the caravan started in 2006 in Charlottetown PEI in the third of three exchanges hosted to disseminate and support uptake action on the five recommendations in the Synthesis Report Staffing for Safety: A Synthesis of the Evidence on Nurse Staffing and Patient Safety.

The NSPS KN also hosted a teleconference in November to provide a tour of the Knowledge Network Online features for the members. This teleconference was held to find ways to increase utilization of the network. A PowerPoint presentation was designed to “walk” participants through the many features of the KN, and participants were asked to take note of the features that were most useful. Based on feedback received on the call, the KN would enhance those features believed to be most beneficial for sharing information and building connections or networks among members.

Finally, the NSPS KN signed a one-year brokerage contract with Dr. Maura MacPhee in August 2007 for moderation and evaluation of the Knowledge Network activities.
DEVELOPMENT OF USEABLE RESEARCH-BASED PRODUCTS FOR DECISION MAKERS

Decision makers need information presented in a form that is useable. A 2004 nursing consultation identified the need for user-friendly, action-oriented information on relevant health services issues; this need was confirmed by later consultations. Some of the forms identified included fact sheets, summary products, and discussion articles.

SUMMARIES OF ARTICLES AND REPORTS

Nurse Staffing and Patient Safety eVD

*Stories for Safety: Sharing the evidence about nursing and patient safety*, an Electronic video documentary (eVD) on nurse staffing and patient safety, was the final product of the 2006 Nursing Dissemination Campaign. The eVD was published and available to the public for dissemination in January 2007.

Insight and Action

In 2007, the Foundation launched a new digest series aimed at linking those who practise knowledge transfer and exchange with evidence-informed resources. This series, *Insight and Action*, provides insights into important concepts of knowledge transfer and exchange, including networks, brokering, dissemination and research use.

Promising Practices in Research Use

In October 2007, *Promising Practices in Research Use*, a publication that highlights organizations that have invested their time, energy and resources to try to improve their ability to use research, featured “If you build it, they will stay: How a hospital network is using evidence to guide a professional development-based approach to nurse retention and patient care.”

SHARING INFORMATION THROUGH THE “RIGHT CHANNELS”: NETWORKS AND FACE-TO-FACE MEETINGS

Nurse Staffing and Patient Safety Knowledge Exchange

In collaboration with CFNU, the Foundation held the third and final Nurse Staffing and Patient Safety Knowledge Exchange in Charlottetown, PEI. This exchange combined presentations of the results of the Foundation’s *Staffing for Safety: A Synthesis of the Evidence on Nurse Staffing and Patient Safety*, as well as a panel discussion on continuing education and retention led by Evelyn Schaller. Following this, there was a consultation with the participants to discuss opportunities and challenges of progressive staffing initiatives to better understand what resources are needed in that region to improve nursing leadership and build a better healthcare system in PEI.

Canadian Federation of Nurses Unions Annual Researcher’s Meeting

Each year CFNU brings together the provincial research associates to discuss ongoing research, upcoming projects and issues facing front-line nurses across the country. This meeting also promotes leadership and knowledge sharing through an extended networking lunch, where national nursing stakeholders are invited to present their current initiatives. On January 11, 2007, the Foundation presented the work of the Nursing Leadership, Organization and Policy theme, as well as updating the participants on what was happening with the Nursing Research Fund.

2007 Nursing Leadership Conference

The 2007 Nursing Leadership Conference was held on February 4-6, 2007, at the Ottawa Congress Centre. To support this event, CHSRF contributed $5,000 and sponsored conference bags containing reports of the Staffing for Safety Synthesis. Janet Helmer, representing the Foundation, and Norma Freeman of the Canadian Nurses Association also presented *The Nurse Staffing and Patient Safety Knowledge Network: A Vehicle to Drive Evidence-Informed Staffing Decisions.*
Advancing Nursing Leadership for Safer Health Care Systems

The Foundation also presented *Staffing for Safety: A Synthesis of the Evidence on Nurse Staffing and Patient Safety* to a group of nurse executives, managers, professional practice leaders, educators, researchers, policy makers and clinical nurses at St. Michaels Hospital in Toronto on February 26, 2007. This group met to discuss advancing nursing leadership in patient safety and this provided an opportunity to hear from researchers, dialogue with various leaders, and contribute to strategies for the future. The symposium was an interactive dialogue on discoveries that Ontario nurses are leading in healthcare safety research, to gather like-minded people together in facilitated discussions around implications of current research (design and findings) of the studies for nursing practice, education, management and research.

The Work of Nurses and Impact on Patient Safety, Provider and System Outcomes Workshop

In collaboration with the Canadian Nurses Association, the Foundation hosted a workshop in Winnipeg, on June 19, 2007, to consider issues and future projects related to nursing workload. This workshop was an opportunity for health system leaders to clarify and enhance the understanding of relationships between nursing work and patients, staff and health system outcomes, as well as an opportunity to identify strategies to work toward staffing practices that enhance outcomes. A total of 31 international and national nursing leaders from both academic and health-system organizations attended the exchange, including those whose roles focused exclusively on nursing and those whose roles had a broader focus, from regional, provincial and national perspectives. No follow up on this issue is planned at the current time.

CAHSPR Conference

The Foundation had a major presence at the 2007 Canadian Association for Health Services and Policy Research (CAHSPR) Annual Conference, sending presenters and delegates. In addition, 29 students received funding from the Foundation and CIHR-IHSPR, 12 of whom received funding directly from the Nursing Research Fund amounting to approximately $6,000.

International Society for Quality in Health Care (ISQua) Conference

With the theme “Transforming Healthcare in the Electronic Age”, ISQua’s annual international conference invited those interested in improving the quality and safety of healthcare, including policy makers, economists and regulators, accreditors, external evaluation, peer review and quality improvement organizations, planners, researchers, educators, professionals, managers, practitioners, providers and patients. The Foundation’s presence was illustrated in a poster presentation in the Nurse Staffing and Patient Safety Knowledge Network, and through the participation of delegates.

Nurses’ Breakfast

To capitalize on the opportunity presented by the gathering of nursing stakeholders for the Canadian Institute of Health Information’s Health Human Resources Conference, members of the Nurse Staffing and Patient Safety Knowledge Network were invited to attend a breakfast at the Crowne Plaza on December 6, 2007. The purpose of the breakfast was to serve as an informal meet and greet, to give the members of the NSPS KN the opportunity to meet and discuss new knowledge and strategies in Nurse staffing and Patient Safety.
OBJECTIVE 4: TO HELP HEALTH SYSTEM MANAGERS, POLICY MAKERS, AND THEIR ORGANIZATIONS ROUTINELY ACQUIRE, APPRAISE, ADAPT, AND APPLY RELEVANT RESEARCH IN THEIR WORK

The Executive Training for Research Application (EXTRA) program builds the capacity of decision makers to use research in their work. This is consistent with the Foundation’s strategic objectives and the Nursing Research Fund’s mandate to fund and build capacity of nursing researchers and research on nursing issues. Although the EXTRA program is not funded by the Nursing Research Fund, the activities of the program and its fellows are integrated into activities supported by the Foundation and the Nursing Research Fund. There also exist synergies between programs, fellows, and participants of other Foundation activities.

EXECUTIVE TRAINING FOR RESEARCH APPLICATION (EXTRA)

The EXTRA program is managed by the Canadian Health Services Research Foundation on behalf of its five partners, which include the Canadian College of Health Service Executives, Canadian Nurses Association, Canadian Medical Association, and a consortium of 12 Quebec partners represented by the Agence des technologies et des modes d’intervention en santé (AETMIS). The EXTRA program profiles Canadian nurse leaders and their intervention projects and emphasizes evidence-informed decision making.

In 2007, eight nurse executives were recommended for fellowships from a total of 15 applications. When added to the 28 nurse executives in the 2004, 2005 and 2006 cohorts, 36 of the first 100 EXTRA fellows have a nursing background. Funding was also obtained from the Ontario Ministry of Health and Long-Term Care’s Nursing Secretariat for four additional nursing fellows in 2005-2006, which allowed the program to offer two additional fellowships to Ontario nurse leaders in each of 2005 and 2006.

One of the critical components of the EXTRA program is its mentoring platform, which is supported by four regional mentoring centres. One of these is based at the nursing-related regional training centre, FERASI. EXTRA provides $45,000 annually to FERASI to provide mentoring support and create linkages and synergies with its other capacity-building activities.

The EXTRA program has had a considerable impact on building capacity for and leadership in evidence-informed decision making within the nursing community, as described in an article in the journal *Nursing Leadership*.\(^\text{10}\)

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NRF-RELATED PLANNED ACTIVITIES AND EXPECTED OUTCOMES FOR 2008

Through the NRF, the Canadian Health Services Research Foundation has been able to direct and lead initiatives aimed at building capacity for evidence-informed decision making relative to the profession, care delivery, and management of nursing. Integration of the fund across Foundation activities and programs through the priority theme area has generated a greater return on investment than merely managing these resources as a separate research and training fund.

Over the past decade, significant funds have been used to build capacity in nursing through the NRF. In 2009, this fund will come to an end. In the last year of committed funding, the Foundation will continue to support awards and activities related to nursing leadership with continued funding for:

- 2007 Research, Exchange, and Impact for System Support (REISS) program funding;
- Capacity for Applied and Developmental Research and Evaluation (CADRE) in Health Services and Nursing awards, including:
  - Postdoctoral Awards; and
  - Regional Training Centres;
- Overall report on the fifth-year evaluation activities of the CADRE program;
- Nursing Care Partnership renewal, in particular provide support and monitor the strategic plan of the next five-year period of the renewed partnership agreement;
- Comprehensive analysis and evaluation of the impact of the Nursing Research Fund.
APPENDIX A
SUMMARY OF NURSING RESEARCH FUND EXPENDITURES AND ACTIVITIES, 1999-2007

NURSING RESEARCH FUND EXPENDITURES:

Total Nursing Research Fund Expenditures and uncommitted funds at December 31, 2007

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Investment</td>
<td>$25,000,000</td>
</tr>
<tr>
<td>Grants and other direct costs paid from Jan. 1, 1999 to Dec. 31, 2007</td>
<td>($18,648,350)</td>
</tr>
<tr>
<td>Overhead costs allocated from Jan. 1, 1999 to Dec. 31, 2007</td>
<td>($5,231,599)</td>
</tr>
<tr>
<td>Investment management fees from Jan. 1, 1999 to Dec. 31, 2007</td>
<td>($410,739)</td>
</tr>
<tr>
<td>Transfer of Open Grants Competition to the Canadian Institutes for Health Research</td>
<td>($591,455)</td>
</tr>
<tr>
<td>2007 Adjustment to Market Value (note 1)</td>
<td>$910,911</td>
</tr>
<tr>
<td>Investment income from Jan. 1, 1999 to Dec. 31, 2007</td>
<td>$5,420,956</td>
</tr>
<tr>
<td>Balance in fund as at Dec. 31, 2007 before commitments</td>
<td>$6,449,724</td>
</tr>
</tbody>
</table>

Commitments made under existing programs for 2008-2009:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overhead (note 2)</td>
<td>($872,190)</td>
</tr>
<tr>
<td>Investment income (note 3)</td>
<td>$554,963</td>
</tr>
<tr>
<td>Chairs (note 4)</td>
<td>($1,453,708)</td>
</tr>
<tr>
<td>Investment management fees</td>
<td>($15,000)</td>
</tr>
<tr>
<td>Salaries &amp; other direct costs (note 5)</td>
<td>($200,000)</td>
</tr>
<tr>
<td>Grant Commitments (note 6)</td>
<td>($4,160,891)</td>
</tr>
<tr>
<td>Nursing Research Fund remaining balance after commitments</td>
<td>$302,898</td>
</tr>
</tbody>
</table>

Current Nursing Research Fund Grant Commitments 2010 and beyond $2,191,927

Assumptions:

1. Investments are now valued at market value rather than book value, this represents the increase in market value due to this policy change.

2. The overhead rate will continue to be approximately 15 percent of grant costs. Overhead is charged to the Nursing Research Fund to cover infrastructure costs such as rent, telephone, postage, etc. that are not directly allocated to the Nursing Research Fund. This overhead allocation methodology was developed by CHSRF’s auditors.

3. Investment income will be approximately six percent on yearly average Nursing Research Fund balance.

4. The six chairs fully charged to the Nursing Research Fund, and the two chairs charged to the Nursing Research Fund at a rate of 50 percent, will be funded for the full 10 years. The figure only includes commitments up to 2009, although the full commitment payments will be beyond 2009.

5. The salaries and benefits and other operating costs assumption includes a three-percent increase year over year up to 2009 to cover costs directly attributable to the Nursing Research Fund.

6. Two regional training centres are charged 100 percent to the Nursing Research Fund and this assumes a renewal period of five years. The figure includes three postdoctoral awards at $50,000 per year. The Partnership for Health System Improvement amount includes the current commitment of $200,000. One nursing related project will be tagged to the Research, Exchange and Impact for System Support competition every year. The commitment for most of these competitions will extend beyond 2009. The figure presented here only includes commitments up to 2009.
**Total Nursing Research Fund expenditures and uncommitted funds at December 31, 2005**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial investment</td>
<td>$25,000,000</td>
</tr>
<tr>
<td>Grants and other direct costs paid from Jan. 1, 1999 to Dec. 31, 2005</td>
<td>($14,283,418)</td>
</tr>
<tr>
<td>Overhead costs allocated from Jan. 1, 1999 to Dec. 31, 2005</td>
<td>($4,519,459)</td>
</tr>
<tr>
<td>Investment management fees from Jan. 1, 1999 to Dec. 31, 2005</td>
<td>($374,847)</td>
</tr>
<tr>
<td>Transfer of Open Grants Competition to the Canadian Institutes for Health Research</td>
<td>($591,455)</td>
</tr>
<tr>
<td>Investment income from Jan. 1, 1999 to Dec. 31, 2005</td>
<td>$4,354,683</td>
</tr>
<tr>
<td>Balance in fund as at Dec. 31, 2005 before commitments</td>
<td>$9,585,504</td>
</tr>
<tr>
<td>Commitments made under existing programs for 2006-2009:</td>
<td></td>
</tr>
<tr>
<td>Overhead (note 1)</td>
<td>($1,294,891)</td>
</tr>
<tr>
<td>Investment income (note 2)</td>
<td>$1,563,490</td>
</tr>
<tr>
<td>Nursing Care Partnership (note 3)</td>
<td>($2,100,000)</td>
</tr>
<tr>
<td>Chairs (note 4)</td>
<td>($2,327,970)</td>
</tr>
<tr>
<td>Investment management fees</td>
<td>($140,000)</td>
</tr>
<tr>
<td>Salaries and benefits (note 5)</td>
<td>($509,147)</td>
</tr>
<tr>
<td>Other operating costs (note 5)</td>
<td>($288,670)</td>
</tr>
<tr>
<td>Grant commitments (note 6)</td>
<td>($4,204,634)</td>
</tr>
<tr>
<td>Nursing Research Fund remaining balance after commitments</td>
<td>$283,682</td>
</tr>
</tbody>
</table>

Notes:

7. The overhead rate will continue to be approximately 15 percent of grant costs. Overhead is charged to the Nursing Research Fund to cover infrastructure costs such as rent, telephone, postage, etc. that are not directly allocated to the Nursing Research Fund. This overhead allocation methodology was developed by the foundation’s auditors.

8. Investment income will be approximately eight percent on yearly average Nursing Research Fund balance.

9. The Nursing Care Partnership will be funded for the full 10 years at $525,000.

10. The six chairs that are fully charged to the Nursing Research Fund, and the two chairs that are charged to the Nursing Research Fund at a rate of 50 percent, will be funded for the full 10 years. It also assumes that the amount spent per chair per year is the full $85,000. The figure only includes commitments up to 2009, although the full commitment payments will extend beyond 2009.

11. The salaries and benefits and other operating costs assumption includes a three-percent increase year over year up to 2009 to cover costs directly attributable to the Nursing Research Fund.

12. Two regional training centres are charged 100 percent to the Nursing Research Fund and assume a renewal period of five years. Amount spent per regional training centre per year is $187,500. The figure includes three postdoctoral awards at $50,000 per year. The Partnerships for Health System Improvement amount includes the current commitment plus two more competition years. One nursing-related project will be tagged to the Research, Exchange, and Impact for System Support competition every year. The commitment for most of these competitions will extend beyond 2009. The figure presented here only includes commitments up to 2009.
APPENDIX B
ADDITIONAL AWARDS 1999-2007

SPECIAL TRAINING, RESEARCH, AND AWARD GRANTS

- Training Program Development Grant (TPDG): 1999/2000, awards to develop principles and outlines for training ($24,300 + $3,000)
- LOI Preparation Grants: 1999/2000, to assist decision makers and junior researchers to develop grant proposals ($54,000 + $6,534)
- Joint Training Awards (JTA): 2000/01, two-year partnership with other funders to increase funding opportunities to master’s, PhD, and postdoctoral students ($231,640)
- Regional Training Centre Development Grants: 2000/01, grants to assist regional training centres to get up and running ($60,000 + $10,000)
- Translation Grant: 2004, granted to translate a monograph on nursing human resources for decision makers by Chantal Viens ($2,250)
- Research extension grant: 2005, OGC extension grant for team lead by Mae Gallant ($4,500 + $500)
- Analysis of the Current State of Nursing Research in Canada through development of a Framework for Building Nursing Research Capacity – project funded (Pat Griffin PI, Canadian Association of Schools of Nursing) November 2006-October 2007 ($50,000 CHSRF)
- The Role of Work Environments in the Migration of Nurses: A Scoping Exercise – project funded (Linda McGillis-Hall PI, University of Toronto) June 2006-February 2007 ($50,000 CHSRF)
- An Evaluation of the Nursing Research Fund: Lessons to Date and Recommended Next Steps – project funded (Peter Coyte, team lead, University of Toronto ($74,986)

NETWORK, SYNTHESIS, AND DISSEMINATION AWARDS

- Health Institute Design Grant (HIDG): 1999, joint competition with SSHRC to design the CIHR institute ($40,000)
- Knowledge Network Conference: 1999/2000, grant to CNA and partners for a conference at Université Laval to develop a nursing knowledge network ($75,000 + $25,000)
- Nursing Care Partnership: 2000/02/03, agreement officially reached and then committed $500,000 each year ($300,000 + $500,000 + $500,000)
- Nursing Policy Synthesis: 2000/01, Commitment and Care: 2000 ($72,000 + $8,000)
- Nursing Research Advisory Committee (NRAC): 2000/01, grants to CNA to support NRAC ($40,558)
- CASN Database Project: 2000 and 2003, to support CASN in redeveloping and populating a database of funded nursing research in Canada ($50,000 + $46,100)
- Networking costs: 2001/02/03, costs for chairs and RTC meetings ($18,717, $26,128, $57,265)
- CPRN Health Workplace Meeting: 2001 ($29, 851)
- Single Voice for Nursing Research (CNA): 2002, contract to develop a framework toward establishing a consortium single voice for nursing research in Canada ($10,000)
• Nursing Leadership Conference: 2002, Building the Future (CNA)—support of one keynote speaker—Wendy Nicklin ($2,000)

• Translation: Quality of Nursing Work Life book: 2002, to facilitate translation and production of a book that compiled research relevant to decision makers to improve the quality of nursing work life; Melanie Lavoie-Tremblay ($2,500)


• Academy Health: 2004 one-time grant of $10,000 for the “International Nurse Migration Study and Conference” ($10,000)

• Academy of Canadian Executive Nurses 2006 Annual Conference (CHSRF co-sponsorship of $10,000)

• Canadian Nurses Association 2007 Nursing Leadership Conference (CHSRF co-sponsorship of $5,000)

• Colloque L’exercice de la profession infirmière : Une évolution nécessaire (Esther Leclerc, Centre hospitalier de l’Université de Montréal – CHSRF co-sponsorship of $10,000)

• Conférence FERASI : L’administration éclairée des services infirmiers sauve des vies (Danielle D’Amour, Université de Montréal – CHSRF co-sponsorship of $5,000)

• Patient Safety and Medication in Home Care: A Learning Event (Sylvia Ralphs-Thibodeau, Canadian Nurses Association – CHSRF co-sponsorship of $1,000)

• Nursing Leadership Summit: “Healthy Workplaces... Within Our Grasp” (Patricia O’Connor, McGill University Health Centre – CHSRF co-sponsorship of $10,000)
### APPENDIX C
#### 2007 NURSING LEADERSHIP, POLICY AND ORGANIZATION 2007 ACTIVITIES

**TABLE 1 APPENDIX C: 2007 PLANNED ACTIVITIES AND MET DELIVERABLES.**

<table>
<thead>
<tr>
<th>Objective:</th>
<th>Activities:</th>
<th>Deliverables Met:</th>
</tr>
</thead>
</table>
| New Knowledge | Research, Exchange and Impact for System Support (REISS) program funding | • One REISS nursing program funded within the nursing theme (Linda McGillis-Hall/Sandra MacDonald Renz)  
• Three full-scale application development fund awards provided to nursing applicants |
| | Nursing Care Partnership (Maximum contribution $535K/year) | • Ongoing support for the Nursing Care Partnership, managed by the Canadian Nurses Foundation  
• $391,838 funded for Nursing Care Partnership projects; an additional $680,354 leveraged through partnerships to sponsor these projects |
| Commissioned Research | Evaluation of the Nursing Research Fund | A team led by Peter Coyte has been commissioned to complete a summative evaluation of the NRF.  
Final report expected in summer 2008 |
| Capacity Building | Nursing Consortium | • In 2005, CHSRF funded the Canadian Consortium for Nursing Research and Innovation to explore nursing research capacity building in Canada.  
• Final report is due March 31, 2008 |
<p>| | Capacity for Applied and Developmental Research and Evaluation (CADRE) in Health Services and Nursing program awards, including: | |
| | Postdoctoral Awards | • Three nursing-related postdoctoral awards were recommended for funding in the 2007 Postdoctoral Awards Competition. |
| | CHSRF/CIHR Chair Awards | • Ongoing support for five nursing-specific chairs and two nursing-related chairs |
| | Regional Training Centres | • Ongoing support for one nursing-specific and one nursing-related Regional Training Centres |
| | Evaluation of the Canadian Health Services Research Foundation/Canadian Institutes of Health Research Chair Awards and Regional Training Centres (CADRE) | • Mid-point Evaluation Report of the CADRE program completed in summer 2007 and expected to be posted to the CHSRF Web site in mid-summer 2008 |</p>
<table>
<thead>
<tr>
<th>Knowledge Transfer</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse Staffing Patient Safety Knowledge Network (NSPS KN)</td>
<td>- NSPS KN Caravan in Charlottetown, PEI, third of three exchanges hosted to disseminate and support uptake action on the five recommendations in the Synthesis Report <em>Staffing for Safety: A Synthesis of the Evidence on Nurse Staffing and Patient Safety</em>&lt;br&gt;- Nurse Staffing and Patient Safety Knowledge Network Teleconference hosted November 21, 2007 to provide a tour of the Knowledge Network Online features for the members&lt;br&gt;- One-year NSPS KN Brokerage Contract with Dr. Maura MacPhee August 2007 in the amount of $20,000 for moderation and evaluation of the Knowledge Network activities&lt;br&gt;- $6,000 paid out in 2007, remaining $14,000 to be paid in 2008</td>
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<tr>
<td>Communication</td>
<td>- Nurse Staffing and Patient Safety eVD published and available to the public for dissemination in January 2007</td>
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<tr>
<td>Communication</td>
<td><em>Insight and Action</em> (new digest series)</td>
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<tr>
<td>Communication</td>
<td><em>Promising Practices in Research Use</em></td>
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<tr>
<td>Nurse Staffing and Patient Safety Knowledge Network Teleconference</td>
<td>- Activity held on November 21, 2007 with the Knowledge Networks members, to increase utilization of the network&lt;br&gt;- Based on feedback received on the call, the four partners of the NSPS KN will enhance those features believed to be most beneficial for sharing information and building connections or networks among members.</td>
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<td>Staffing for Safety Consultations: Prince Edward Island</td>
<td>- Third of three exchanges in collaboration with the Canadian Federation of Nurses Unions hosted to disseminate the &quot;Staffing for Safety&quot; Synthesis - held on January 23, 2007</td>
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<td>2007 Nursing Leadership Conference</td>
<td>- 2007 Nursing Leadership Conference, held on February 4-6, 2007 at the Ottawa Congress Centre&lt;br&gt;- CHSRF contributed $5,000.00 and sponsored conference bags for this event.&lt;br&gt;- Janet Helmer and Norma Freeman of Canadian Nurses Association presented <em>The Nurse Staffing and Patient Safety Knowledge Network: A Vehicle to Drive Evidence-Informed Staffing Decisions.</em></td>
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<td>Event</td>
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<td>The Work of Nurses and Impact on Patient Safety, Provider and System</td>
<td>This workshop was an opportunity for health system leaders to clarify and enhance the understanding of relationships between nursing work and patients, staff and health system outcomes, as well as an opportunity to identify strategies to work toward staffing practices that enhance outcomes.</td>
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<td>Outcomes Workshop: Winnipeg, Manitoba</td>
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| 2007 CAHSPR Conference                                               | - The Foundation had a major presence at the 2007 Canadian Association for Health Services and Policy Research Annual Conference, sending presenters and delegates.  
- Twenty-nine students received funding from the Foundation, 12 of whom received funding directly from the Nursing Research Fund amounting to approximately $6,000. |
| Nurses’ Breakfast                                                    | - Originally planned to be a meet and greet for the Nurse Staffing and Patient Safety Knowledge Network  
- Meeting turned into a small, informal breakfast gathering for nurses attending CIHI’s Health Human Resources Conference on December 6, 2007 |
| Canadian Federation of Nurses Unions Annual Researchers’ Meeting     | - January 2007: At the extended networking lunch, Janet Helmer presented the work of the Nursing Leadership, Organization and Policy theme and the Foundation, as well as updating participants on the state of the NRF. |
| Advancing Nursing Leadership for Safer Healthcare Systems            | - Held on February 26, 2007 at the Westin Prince Hotel, Toronto, Ontario  
- A poster presentation on *Staffing for Safety: A Synthesis of the Evidence on Nurse Staffing and Patient Safety* was presented by Janet Helmer from CHSRF at the conference |
| International Society for Quality in Health Care (ISQua) Conference   | - October 2007: The work of the NRF was illustrated in a poster presentation on the Nurse Staffing and Patient Safety Knowledge Network.  
- The Foundation also sent delegates to represent our interest in the theme of the conference. |
ENDNOTES

1. The focus of the fund and related activities is research on nursing issues, not just research done by nurses. Thus, the term “nursing-related” research and activities will be used.


3. From 1998 to 2004, the Open Grants Competition served as the Foundation’s research funding program. The Foundation transferred the project portion of the Open Grants Competition to the Canadian Institutes of Health Research for the 2005 competition.

4. The successful team, led by Linda McGillis Hall, is titled “Moving to Action: Evidence-Based Retention and Recruitment Policy Initiatives for Nursing.” The program is co-sponsored by Health Canada – Office of Nursing Policy. Note: The team ultimately decided not to take up the award.

5. A second program submitted under the Nursing Leadership, Organization and Policy theme was recommended for funding under its secondary theme (primary healthcare) by the merit review panel, as it felt the program was a better fit under that theme.

6. In 2001, Listening for Direction: A national consultation on health services and policy issues was conducted. It helped design research themes that address the needs of policy makers and managers in the health system over the next two to five years.

7. Laureen Hayes was funded by the Ontario Ministry of Health and Long-Term Care.

8. Janice Lander’s chair was not recommended for funding past the fourth-year point and was terminated as of December 31, 2006.

9. The Centre for Knowledge Transfer was not renewed; funding ended on July 1, 2006. A decision on how the remaining funds will be redeployed is currently under review.