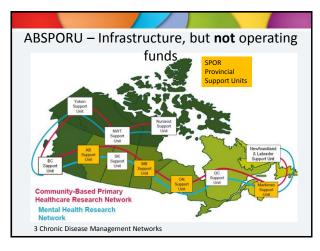


jill.byrne@ualberta.ca

I Do Clinical/Health Services Research, What Can ABSPORU Do For Me? Finlay A. McAlister, MD MSc On behalf of the ABSPORU Data Platform Ross T. Tsuyuki, PharmD MSc On behalf of the ABSPORU Consultation and Research Services Platform Lisa Hartling, PhD On behalf of the ABSPORU KT Platform

Alberta SPOR SUPPORT Unit





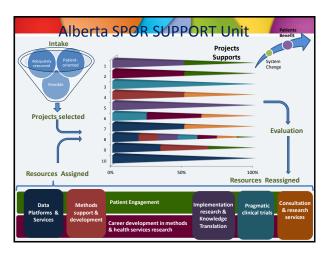
Our Vision and Goal

- Vision: Advance knowledge to improve patient health and health care.
- Goal: Increase the quantity and quality of patientoriented health research.



Our Partners • The Alberta SPOR SUPPORT Unit partners with: - Alberta Health - Alberta Innovates – Health Solutions - Alberta Health Services - Athabasca University - University of Alberta - University of Calgary - University of Lethbridge





What does the ABSPORU Data Platform offer?

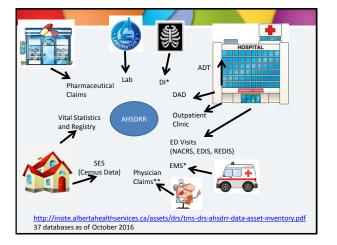
- · Support Services for Research Involving secondary analysis of existing Large Datasets (especially, but not limited to, administrative data):
 - <u>Research Design</u>: methods, sample size, biostatistical plan, support letters for grants, assistance with Researcher Agreements
 - Data Management: data extraction, linkage, and cleaning
 - Biostatistics: consultations and/or analyses (if necessary, and in conjunction with Methods Support platform)
 - <u>Training</u> (in conjunction with **Training and Methods Support platforms**): emphasis on practicums, theses.

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But Not

- Incubation/development of research questions and choice of study methods (primary vs. secondary data sources, RCT vs. cohort, etc)
- · Support for primary data collection studies
- Consultation and Research Services Platform

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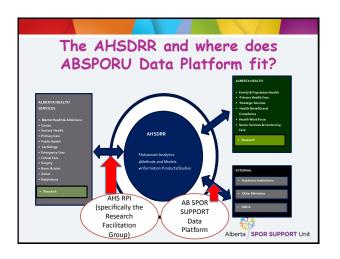
25 pages of info on datasets in the

- Inpatient Discharge Abstract Database (DAD)
- Available from: April 1, 2002 to current Data refresh occurrence: Monthly
- Laboratory (Lab R1 and R1.1)
 - Available from: LabFusion: Jan 1, 2009 to current. Meditech: Jan 1, 2009 to current. Millennium: Apr 1, 2012 to current. Sunquest: Apr 1, 2012 to current.

 Data refresh occurrence: Daily (with up to 8 days latency)
- Provincial Registry
 - Available from: Fiscal Year End 1994 March 31, 2014

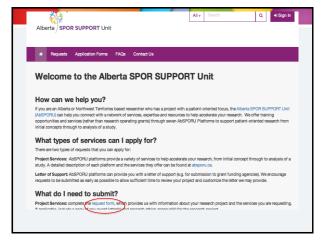
 Data refresh occurrence: Annually
- - Available from: Arnil 1, 2010, to current

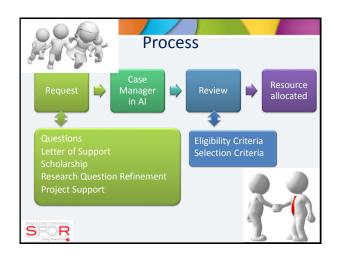














Data Platform Activities as of fall, 2016

- Research
- ER, card, pulm, nephro, family med, surgery
- Data Management: 66/75 requests for cohorts completed thus far (median time to completion 4 weeks)
 - ICU, pharmacy, CV surgery, community health, ER, geriatrics, pediatrics, surgery, card, GIM, bone and joint
- Data linkage: 20/24 external cohorts linked
- · Statistical Analysis: 27/30 cohorts analyzed
 - GIM, card, ICU, bone and joint, community health, surgery
 - one collaborative project with Ontario ICES data (HOMR score)



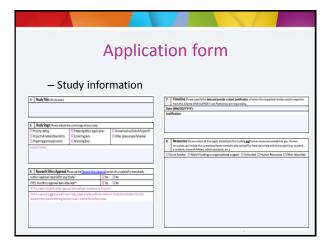
Who has requested assistance?

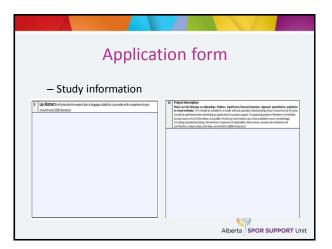
- 47 uni researchers
- 14 students (masters, doctoral)
- 5 post-docs
- 47 health system practitioners (includes SCNs)
- Overall: 45% UofA, 44% UofC, 11% AHS

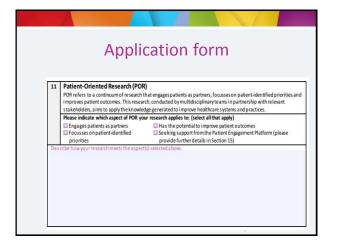


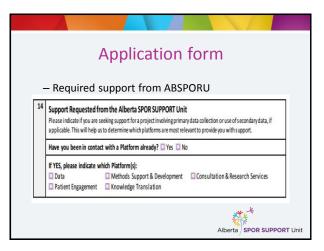




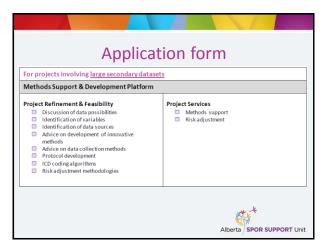


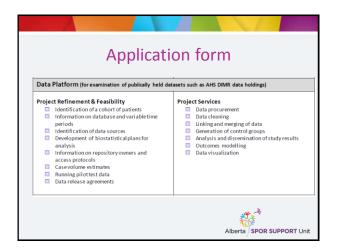


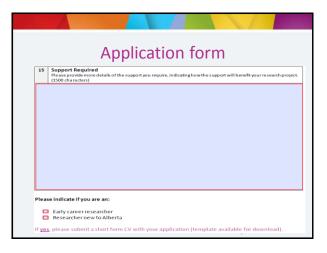


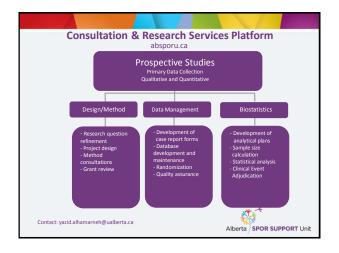


Application form	
- Platform services	
For assistance with patient engagement	
Patient Engagement Platform	
Project Refinement & Feasibility Reading list about Patient Engagement in research Advice re: general plan for Patient Engagement Advice de about Patient Partners in: Oovernance Preparatory/Planning Design/Execution Translation/Dissemination Advice regarding evaluating Patient Engagement efforts Grant review	Project Services Priority setting advice Publicizing mobilizing / matching Mentoring Facilitation Education/raining Governance PE tools







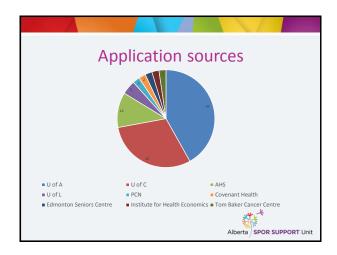


CRS activities to date • Launched November 2015 • 24 pre-consults - 10 led to portal applications - 14 active pre-consults • Services requested - 93 % Design/Methods - 21% Analytical plan preparation - 7% Sample size calculation

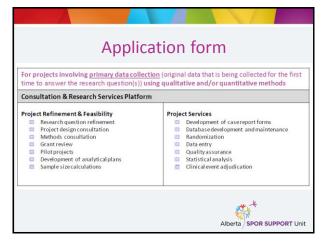
Portal applications • Applicants are students, residents, postdocs, nurses, clinicians, professors • 33% were early career researchers

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• 7% were new to Alberta







Knowledge Translation (KT) Platform

Our long-term vision for Alberta SPOR KT Platform is increased capacity in the Alberta health care research environment for effective, evidence-based work in KT and integration of KT into patient-oriented research (POR) activities.

Knowledge Translation

- A dynamic and iterative process that includes the synthesis, dissemination, exchange and ethically-sound application of knowledge to improve the health of Canadians, provide more effective health services and products and strengthen the healthcare system.
- This process takes place within a complex system of interactions between researchers and knowledge users which may vary in intensity, complexity and level of engagement depending on the nature of the research and the findings as well as the needs of the particular knowledge user (Graham, 2010).

CIHR definition (www.cihr-irsc.gc.ca/e/29418.html)



KT Platform: Scope

- We offer consultation, support and training in:
 - Knowledge synthesis (KS)
 - Knowledge translation (KT)
 - Implementation science (IS)
- We work with researchers across Alberta who require assistance with their patient-oriented research projects.

KT Platform: Rationale

 Our plan was developed based on an extensive needs assessment with members of the community we serve, across the province and all stakeholder organizations

KT Platform: Rationale

- Needs:
 - Training and professional development
 - Consultations
 - KT expertise and technical support
 - Means to develop and implement KT interventions
 - Community of practice
 - Timely and targeted knowledge syntheses
 - Common language and understanding

KT Platform: Critical activities

- 3C Model:
 - Consultation services
 - Community of practice
 - Capacity Building

KT Platform: Critical activities

- Consultation services
 - Responding to applications submitted through the Research Alberta portal that are:
 - Focused on work in KS/KT/IS
 - POR projects where support is needed to develop integrated or end-of-project KT plans

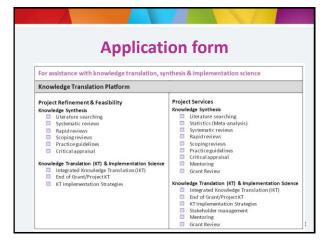
KT Platform: Critical activities

- · Community of practice
 - A community of practice model being used to build linkages and networks among Alberta researchers interested in KS/KT/IS research or integrating these concepts into their POR.

KT Platform: Critical activities

- · Capacity building
 - Training and professional development activities, including dedicated working groups, to:
 - Increase researchers' awareness of KS/KT/IS science
 - Develop researchers' abilities and capacity to move KS/KT/IS science forward
 - Embed KS/KT/IS considerations in POR







Patient-Oriented Research

Patient-oriented research refers to a continuum of research that engages patients as partners, focusses on patient-identified priorities and improves patient outcomes. This research, conducted by multidisciplinary teams in partnership with relevant stakeholders, aims to apply the knowledge generated to improve healthcare systems and practices (CIHR, 2014).



Patient-Oriented Research

Patient-oriented research includes at least one of the following:

- · Focuses on patient-identified priorities
- Meaningfully engages patients as partners
- Has the potential to improve patient outcomes

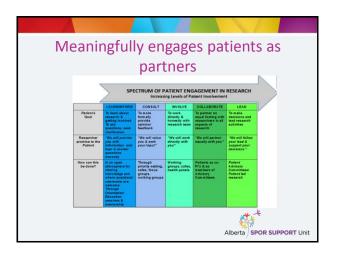


Focuses on patient-identified priorities

Priorities maybe identified through

- Core Outcome Sets (the minimum that should be measured and reported in in all clinical trials of a specific condition) that have been developed with stakeholder involvement
- · Focus groups
- James Lind Alliance association top 10 uncertainties or un answered questions about a condition (priorities set by patients, carers and clinicians)
- Online priority setting activities





Has the potential to improve patient outcomes

Examples include

- Patient Reported Outcome Measures (PROMS)
- Patient Reported Experience Measures (PREMS)
- Patient satisfaction
- · Quality of life
- Management of symptoms and pain
- Potential clinical improvements
- Length of stay
- Cost effectiveness

