

SPOR Northern Centre 4-Year Roadmap Survey

Summary of Key Findings

Background

As part of strategic planning for the BC SUPPORT Unit Northern Centre for SPOR (Strategy for Patient-Oriented Research), Northern Health (NH) and the University of Northern BC (UNBC) contracted Delaney + Associates to help engage stakeholders in the planning process. Specifically, the process is to work with researchers, health administration and leaders, patients, community members, healthcare practitioners, and other stakeholders in developing a high-level, four-year Roadmap, or strategic plan, for the Northern Centre.

This report includes results and analysis of an online survey that was undertaken to gather feedback on the draft Roadmap, as part of this stakeholder engagement project.

Methodology

The online survey was open to anyone who was provided with the link, which was distributed via email through both NH and UNBC, along with the draft Roadmap document. Email recipients were also asked to share the draft Roadmap and survey link with their contacts and networks. Email recipients included stakeholders who previously participated in the Northern Centre planning and Roadmap engagement opportunities – which included telephone interviews, a separate online survey, and a workshop – as well as other stakeholders identified by the NH and UNBC Northern Centre co-leads. The email invitation to complete the survey was distributed twice during the survey period.

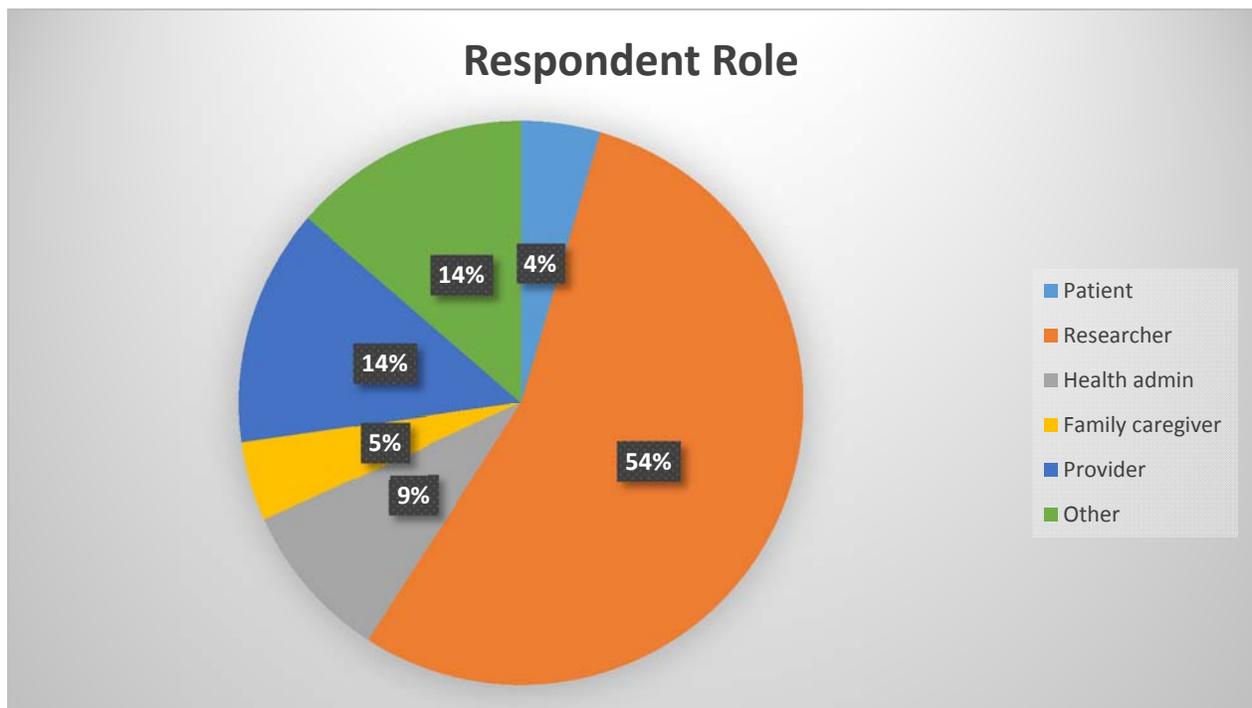
The survey was open between April 3 and April 12, 2017. A total of 22 respondents started the survey, with 18 completed responses.

About the Participants

More than half of survey respondents (12 people, or about 55%) identified their primary role as researchers. Three respondents identified themselves as healthcare practitioners, and another three selected “other” and provided the following responses:

- Instructor UNBC
- Patient engagement (leader)
- Municipal politician advocating for good health care facilities and healthy lifestyles

The remaining respondents were health system administrators or leaders (2), person with lived experience (i.e. patient) (1), and family caregiver (1).



The majority of respondents (77%) are located in the Northern Interior region, followed by Northwest (14%), Northeast and Other (“responsibility for all NH”) at one respondent each (4.5% each).

Summary of Main Findings

DRAFT Roadmap Section	Level of Agreement*	What Respondents Say...
Guiding Principles	20 completed responses: <ul style="list-style-type: none"> • 70% fully or somewhat agree • 25% disagree or somewhat disagree • 5% don't know 	<ul style="list-style-type: none"> • A focus on Indigenous health, and engaging Indigenous communities and people, is a major gap in this section and the Roadmap in general. • Role for healthcare practitioners is missing. • Measurement and evaluation are missing. • Existing expertise in north is missing. • Wording of 1.a. is negative (re: seniors' health). • Research focus in chronic pain and MHSU is missing. • The language is difficult to understand.
Patient & Stakeholder Engagement Function	16 completed responses: <ul style="list-style-type: none"> • 81% fully or somewhat agree; • 12.5% somewhat disagree; • 6.5% don't know 	<ul style="list-style-type: none"> • The language here focuses on physicians, but should be more inclusive of other providers such as RNs and NPs. • How will Indigenous communities and people (both on and off reserve) be involved? • Should working closely with partner organizations be an item on the 2017-18 workplan? • The descriptions in the Roadmap are brief; depends on implementation. • Too many activities to track; language is not clear. • 2017-18 objectives are ambitious and perhaps unrealistic in the current environment of change at NH and UNBC and available resources.
Research Navigation Function	17 completed responses: <ul style="list-style-type: none"> • 82% fully or somewhat agree; • 6% disagree; • 12% don't know 	<ul style="list-style-type: none"> • Again, healthcare providers should include more than just physicians – add nurse practitioners, others, etc.; more inclusive language. • Language is confusing and activities don't follow year-to-year. • Activities are very ambitious in the first two years; be realistic; good practice in POR is time-consuming.
Knowledge Translation Function	18 completed responses: <ul style="list-style-type: none"> • 89% fully or somewhat agree; • 5.5% disagree; • 5.5% don't know 	<ul style="list-style-type: none"> • Leverage best practices from academia to meet these goals; find out what works elsewhere and adapt to the northern context. • Ensure links with NH-UNBC Knowledge Mobilization Research Chair and NH Knowledge Synthesis Centre • How will KT be brought to more rural and isolated communities? • Engagement of knowledge users in a meaningful way is critical.

		<ul style="list-style-type: none"> • Difficult to know if these high-level goals are achievable; would need to see a fleshed-out workplan to comment accurately. • Language needs to be more direct and simply worded. Too much jargon, especially in columns 2-4.
Capacity Development & Training Function	<p>17 completed responses:</p> <ul style="list-style-type: none"> • 76.5% fully or somewhat agree; • 23.5% somewhat disagree 	<ul style="list-style-type: none"> • Some timelines may be unrealistic, as effectively involving stakeholders in developing resources takes time. • Imperative that materials and training be available to anyone/everyone from the very beginning. • Offer training in multiple formats – i.e. not all/only in-person, and provide technology/computers for patient volunteers. • Create opportunities for all stakeholders to learn – not just patients/communities, but providers and researchers too. • Important to address cultural safety / respect in training, and also inclusive of knowledge users. • Where will funding come from? Will there be research grants specific to researchers in the north? • Ideas are fine but not communicated clearly. Try 3-4 points and carry them through the years with action words.
Operations & Governance	<p>N/A (this question was not included for the Operations & Governance section)</p>	<ul style="list-style-type: none"> • The Roadmap is still too much of a mainstream medical approach to health research. Unique approaches are needed to engage Indigenous people and more isolated communities. • The activities do not feel innovative and rely largely on educational sessions. I am not convinced this will bring about the level of change or engagement sought. • Ideas for on-the-ground support: facilities available to support engagement activities, resources such as interview equipment, or professionals such as plain-language experts and translators. • I'm very concerned that Aboriginal people and communities are not mentioned at all. • Project-based groups are important, but a steering/advisory committee is also needed. • Attention should be paid to a rotation of members, so there is a mix of stability and infusion of new ideas.

		<ul style="list-style-type: none"> • I see establishing effective communications as the most important. • All should be action items.
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*Note: Incomplete responses with no answer were not included in the above percentage calculation.

Conclusions

Support for the draft Roadmap’s guiding principles was fairly high, at 70% of respondents. Agreement with the draft activities outlined in the Roadmap was also high – ranging from 76% to 89% among the various core function areas.

Several common themes emerged through the open-text field input that respondents provided throughout the survey:

- Indigenous communities and people should be explicitly named and included as partners / key stakeholders in the Northern Centre planning and implementation.
- The role for healthcare practitioners should be clearer, and inclusive of more than just GPs – i.e. nurses, etc.
- The Roadmap activities and/or timelines may be overly ambitious, given available resources and the time necessary to do POR well.
- The approach seems fairly mainstream/traditional, and there is room for innovation.
- The Roadmap language overall is not clear and includes jargon.

The Roadmap will be updated based on the survey input, and with these updates should be considered a broadly-supported strategic plan for the Northern Centre. The finalized Roadmap will be the basis for more detailed, annual workplanning in each of the core functions and centre operations/governance.