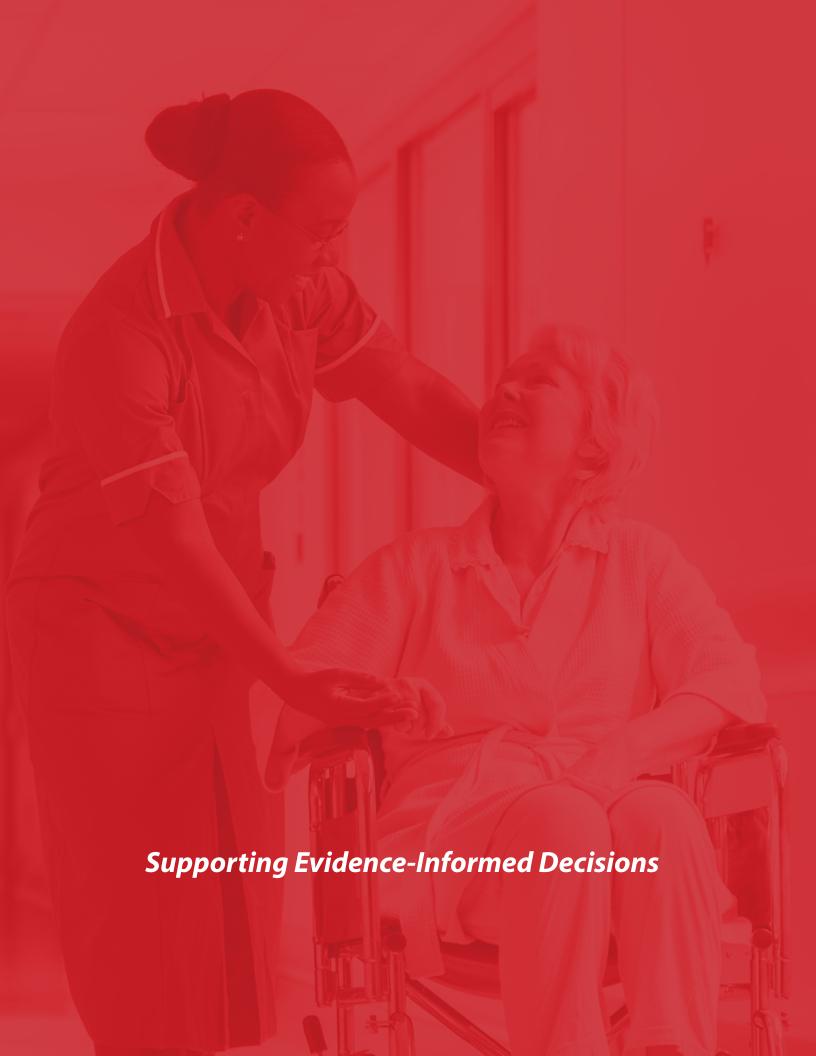


ANNUAL REPORT 2018-19









ACKNOWLEDGEMENTS

The SPOR Evidence Alliance is supported by the Canadian Institutes of Health Research (<u>CIHR</u>) under Canada's Strategy for Patient-Oriented Research (<u>SPOR</u>) initiative, and the generosity of partners from <u>41 public agencies and organizations</u> across Canada who have made cash or inkind contributions.

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ABOUT THE ALLIANCE

























Who we are

The Strategy for Patient-Oriented Research (SPOR) Evidence Alliance is a pan-Canadian research initiative located at the Li Ka Shing Knowledge Institute of St. Michael's Hospital, Unity Health Toronto.

The Alliance was founded in 2017, thanks to a five-year grant awarded by the Canadian Institutes of Health Research, and the generosity of 41 cash and in-kind sponsors from public and not-for-profit sectors.

The Alliance has been designed to promote health systems that are increasingly informed and improved using the best available scientific evidence. Grounded in the principles of equity, diversity, inclusion, transparency, and collaboration, the Alliance co-produces research with decision-makers to generate high quality information that is relevant and timely for decision-making needs.

This 250-member network of researchers, trainees, patient partners, and stakeholders is led by Dr. Andrea Tricco (nominated principal investigator) and Dr. Sharon Straus along with ten co-principal investigators from across Canada.





OUR INVESTMENTS:

\$1,479,986.00

Supporting decision-maker evidence needs

\$333,839.00

Training and Capacity Development

\$246,293.00

Governance and Administration

\$108,986.22

Indigenous Peoples Engagement

\$101,085.00

Advancing Science

EXECUTIVE SUMMARY

The 2018-2019 reporting period marks the second funding period of the SPOR Evidence Alliance and the first year we have been in full operation.

Query Services

We officially launched our online query submission system in April 2018. During this time, we also developed our standard operating procedures for intake and management of the queries with guidance from the Executive Committee. Our target for queries is to respond to 100 research queries to inform health policy, practice, and services over the 5-year funding period (2017-2023).

During the 2018-19 reporting period, we have received 33 queries, of which 30 proceeded to a research project. Most of the requests (n=28) have been for a knowledge synthesis, and to inform policy and/or practice (n=22). Twelve of the queries embedded trainees into the research team, which provided practice-based learning opportunities for 24 trainees across the projects. Our query service model has also been a catalyst for forming new partnerships, and helped to add a total of \$294,947.68 in cash commitment from 7 new partners.

Capacity-building

The Alliance made some great strides in its capacity-building goals. By the end of the 5-year funding period, the Alliance hopes to provide training to more than 50 early career researchers and more than 300 graduate/post-graduate trainees. During the 2018-19 reporting period, the Alliance provided 34 training opportunities that reached 138 researchers 77 trainees, 50 policy makers, 47 health care professionals, and 38 patients.

The Alliance also provided mentorship opportunities to early career researchers

through meaningful opportunities to lead query projects in collaboration with senior investigators. The Alliance also began laying the foundation for its inaugural Seed Grant competition.

Patient Engagement

Patient engagement has been at the forefront of the Alliance's operation during this reporting period. We had a full year of engagement with patient partners through their involvement in the governance structure, and had patient partners co-chair four of the six standing committees. One of the biggest initiatives during this reporting period has been the development of the *Patient Partner* Appreciation Policy and Procedure that we believe is thoughtful, equitable, and in line with CIHR-SPOR guidance. Considering the various compensation models of the SPOR entities and compensation models that already exist within the domain of patient-oriented research, it was important to ensure that our policy was fair and consistent in recognizing patient partner contributions. The final policy is now published on our website, and it will be reviewed annually to make adjustments as needed.

Membership and Partnership

To expand the network and to further our collaborations, the Alliance opened its membership in February 2019, and welcomed 14 new members in the first 2 months (end of this reporting period). Additionally, collaborative relationships were built with international organizations, such as the World Health Organization and the Evidence Synthesis Ireland, to host multidisciplinary learners who gained knowledge and skills in conducting knowledge synthesis for decision-makers in a collaborative environment.

Guidelines Asset Map

We completed the first phase of developing a web-based searchable database of Canadian guideline developers. All 1,100 guidelines can now be found using key-word searching. This database has been accessed by 116 users during the reporting period. We received great feedback from our users that the key-word searching improved accessibility of the guidelines. The Asset Map is now in its final development phase to plot the inventory of Canadian guideline developers into an interactive asset map. To keep the map up-to-date, visitors will be able to contribute to the database by submitting new assets (i.e., guideline developers) to the tool.

Moving Ahead

The Alliance achieved many successes in 2018-19, thanks to our valued members and sponsors who helped make this possible. We hope to continue to collaborate and learn together, as we move ahead with our mission to promote health systems in Canada that are increasingly informed and improved using scientific evidence.

We hope you enjoy reading about the Alliance's journey during its second funding year, and the first full year of operation.



GOVERNANCE

An inclusive governance structure represented by researchers, trainees, patient partners and stakeholders across Canada to maintain strong leadership, efficient management, and transparent decisions.

The Alliance has six standing committees with specific mandates to assist the 12 principal investigators in governing the operations of the Alliance and to maximize cooperation and collaboration between researchers, trainees, patient partners and stakeholders across the initiative. Patient partners are embedded across all six committees.

Each committee has a unique role in advising the direction of the Alliance to reduce inefficiencies and redundancies in the decision-making chain. The Steering Committee is composed of representatives from the other committees to ensure cross-communication.



During the 2018-19 fiscal year, each of the committees helped to achieve the following administrative milestones of the Alliance:

Steering Committee

 Provided guidance in developing the Patient Partner Appreciation Policy (link to pdf).

International Advisory Committee

 Provided recommendations on refining the vision and goals of the Alliance (link to infographic).

Executive Committee

- Provided ongoing advice on the management of 33 research requests through the query services (<u>Appendix 1</u>).
- Guided the development of the Alliance COI Policy and Procedure (link to pdf).

Knowledge Translation Committee

 Helped to undertake a network-wide online survey and a small focus group using a convenience sample at the Annual General Meeting to identify dissemination priorities of the Alliance (Appendix 2).

Partnerships Committee

Guided the development of the Client
 Experience Survey for stakeholders who access our query services to evaluate how well the Alliance is able to respond to service demands of the stakeholders.

Training Committee

 Provided advice on the inaugural Seed Grant competition (link) of the Alliance.

Moving Ahead...

Our previously planned subcommittee for Indigenous Peoples Engagement will now be embedded into the Partnerships Committee, and will include two Indigenous health researchers, Dr. Jennifer Walker and Dr. Janet Jull, who have extensive partnership-based, community-initiated research experience.

RESEARCH QUERY SERVICES

We provide decision-makers with context-sensitive and demand-driven research to inform health system practice, service, and/or policy decisions.



In April 2018, the Alliance officially launched an open and inclusive <u>online platform</u> for stakeholders to submit their evidence needs that can be answered with a knowledge synthesis, guideline development, and/or knowledge translation as a mechanism to promote increased use of evidence in health systems decision-making.

If the research priority falls within the spectrum of health research and it is determined that the research will help inform an important health policy, practice or service decision, the Alliance nominates a research team to conduct the work from inception to completion.

During the 2018-19 reporting period, the Alliance received **33 query requests**, of which 30 proceeded to a research project, two were cancelled due to changing priorities of the stakeholders, and one was cancelled as it was a student project to inform their thesis.

Of the 30 active queries, **22 queries** are now complete. These queries helped address knowledge gaps for policy and practice decisions at provincial, national and international levels.

The Alliance's query services platform has been an excellent catalyst in promoting collaboration, mentorship, and building student capacity in research. In summary:

- 24 trainees have been involved across the queries
- 14 queries engaged patients in the research conduct
- 7 queries had cross-collaboration between research centres
- 3 queries were led by early career investigators with coaching from midcareer or senior investigators

All queries were performed in a collaborative environment, where stakeholders were engaged from inception to completion of the project.

Query Response Time

19 queries with 12-month timeline

queries with 6-month timeline

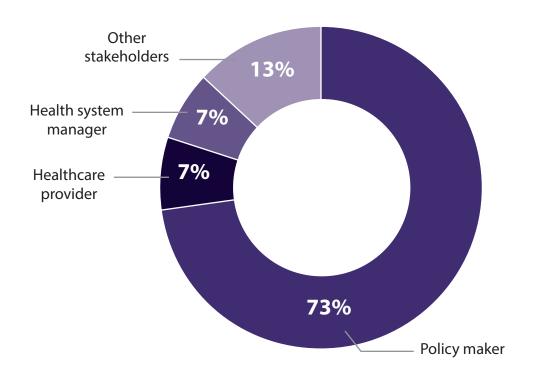


Figure 1. Distribution of different types of stakeholders who submitted queries in 2018-19.

Seventeen different organizations submitted queries in 2018-19. While the majority submitted a single query during this period, some of the organizations submitted multiple queries. Our query service model has been

a catalyst for forming new partnerships, and helped us add a total of \$294,947.68 in cash commitment from 7 new partners in this fiscal period.

TRAINING AND CAPACITY DEVELOPMENT

We promote a research environment that fosters a culture of learning, collaboration and innovation to grow, support, and sustain the capacity of researchers, trainees, patient partners and stakeholders.



The strategic goal of the Alliance is to create a research environment which fosters a culture of learning, collaboration and innovation that grows, supports and sustains the capacity of researchers and decision-makers in the science and application of knowledge synthesis, guidelines development and knowledge translation.

During 2018-19, the Alliance offered 34 learning opportunities delivered using a range of training techniques (Figure 2) to tailor to adult learning behaviours. These reached 367 learners, including 77 research trainees, 50 policy makers, 47 health care professionals, and 38 patients.

The training activities included the following:

- Placements of research trainees and fellows within the query research teams.
- Mentorship of early career investigators to respond to stakeholder research queries.
- Online courses and self-paced learning modules on knowledge synthesis, patient-oriented research, and knowledge translation.
- Support and train colleagues in low and middle-income countries to develop their capacity in conducting rapid reviews using an integrated knowledge translation approach.

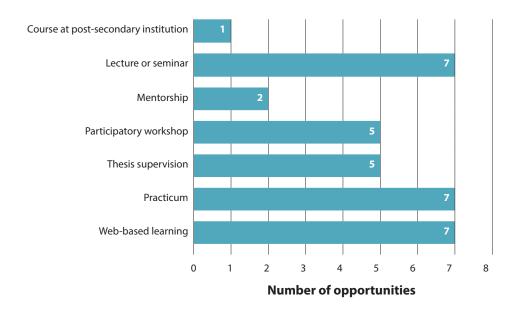


Figure 2. Types of learning opportunities provided by the Alliance

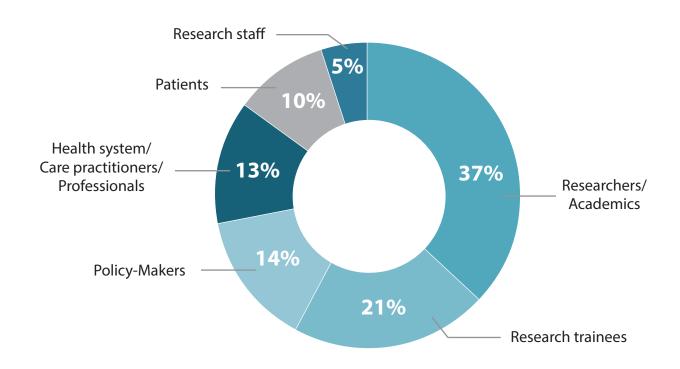


Figure 3. Types of learners who participated in training opportunities

International Collaboration

The World Health Organization Technical Assistance Center for the Embedding Rapid Reviews in Health Systems Decision-Making initiative

The World Health Organization has developed an initiative called the Embedding Rapid Reviews in Health Systems Decision-Making, to stimulate the production and use of demand-driven and policy-relevant knowledge within health decision-making bodies in low and middle-income countries. Under this initiative, four embedded rapid review platforms were created in India, Malaysia, Georgia, and Zimbabwe. To build the capacity of these platforms, a training curriculum was developed

and delivered through a collaboration between the Alliance (led by Dr. Andrea Tricco) and Makarere University (led by Dr. Rhona Mijumbi-Deve). The curriculum included seven webinars delivered monthly, a three-day in-country workshop for each platform, and three coaching and consultation sessions for each platform. The ultimate goal is for each of the platforms to complete 3-4 rapid reviews for their health system decision-makers by the end of 2019.

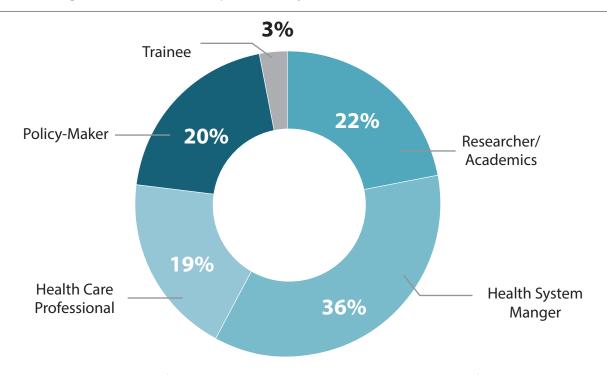


Figure 4. Types of learners who participated in the WHO rapid review platform

Evidence Synthesis Ireland Fellowship Scheme

The Alliance established a partnership with the Evidence Synthesis Ireland, National University of Ireland - Galway to host fellows through their Evidence Synthesis Ireland Fellowship Scheme.

The fellowship scheme involves placing fellows in a virtual learning environment with experienced research centres and review teams. Fellows can be clinicians or clinician-academic trainees, researchers and/or postgraduate students working in health and/or social care.

During 2018-19, the Alliance helped pilot the fellowship scheme by hosting the first two clinical research fellows under the mentorship of Dr. Andrea Tricco. The fellows received access to our online Systematic Review learning module and were embedded in research teams responding to stakeholder requests for evidence, and supported the team from inception to completion of the review.¹²

¹ https://sporevidencealliance.ca/research-2/projects/cannabis-use-in-people-with-diabetes/

² https://sporevidencealliance.ca/organizational-level-knowledge-uptake/



ADVANCING KNOWLEDGE

We are committed to increasing the profile of Canadian research by advancing research methods, and improving accessibility and dissemination of high quality knowledge produced within the initiative.



To disseminate knowledge uncovered through research, the Alliance produces a range of products for end users including scientific reports of research findings, presentations at conferences and symposia, publications in peer-reviewed journals, network level reports on the Alliance, and user-friendly online tools. Our monthly newsletter is one of the ways we have raised awareness about new publications and

research activities of Alliance members. Each month our newsletter features publications of interest to our audience, as well as advertises various opportunities including research funding, jobs and research engagement.

During the 2018-19 reporting period, a total of 51 dissemination products and outreach activities were completed. Our newsletters reached 260 subscribers.

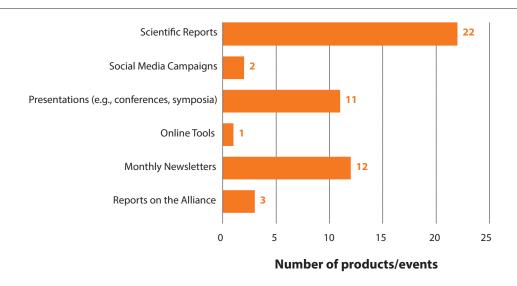


Figure 5. Number of dissemination products/events completed during 2018-19

Additionally, the Alliance hosted 14 knowledge translation related rounds and webinars, which were attended by more than 500 multidisciplinary participants. The topics covered provided basic application and understanding of knowledge translation approaches. The target audience for the various knowledge products and webinars included health care providers, patients and consumers of health care, health system managers, government decision-makers, local health organizations, health charities and groups, researchers, and research funding organizations.

Facilitating Innovation

The Alliance began preparing for its first seed grant opportunity for doctoral students, post-doctoral fellows, and early career investigators during this reporting period. The aim is to foster a culture of learning and innovation in the areas of knowledge synthesis, clinical practice guidelines, and knowledge translation in a patient-oriented research environment. The theme of the 2019 competition was *Advancing the Science of Patient Engagement in Research*.

Two grants valued at \$10,000 each have been earmarked for successful candidates. Awardees are expected to present their progress and learning from the project funds at the 2020 Annual General Meeting as a way to facilitate dissemination and collaborative learning.

Additionally, Alliance researchers are working on developing an evaluation framework for patient engagement in various research and health system settings. For example, one of our active queries, co-led by Dr. Linda Li and Dr. Clayon Hamilton, is aiming to develop a conceptual evaluation framework to measure quality of patient and family caregiver engagement in decision-making across all levels of engagement within British Columbia's Ministry of Health.³

Asset Map of Canadian Clinical Practice Guidelines

The CPG Asset Map development has been an ongoing initiative at the Alliance. Originally published as a massive **236-page report** (read here) with an inventory of 1,100 openaccess guidelines, it was later developed into a **searchable online database** (browse here). The report was circulated to 14 guideline developer organizations and 188 Alliance members. One-hundred and sixteen users accessed the database during this reporting period.

The Asset Map is now in its final development phase. The final phase will involve mapping all Canadian guideline developers, their capacity and publications into an interactive map. This phase is projected to be completed by the end of 2019 and will have a feature for visitors to add new assets (i.e. guideline developers) to the database to keep the map up to date.

³ Hamilton C, Snow ME, Clark N, Gibson S, Dehnadi M, Lui M, Koster A, McLean J, Li LC. Quality of patient, family, caregiver and public engagement in decision-making in healthcare systems: a scoping review protocol. BMJ Open. 2019 Nov 6; 9(11):e032788.

PATIENT ENGAGEMENT

The Alliance recognizes the importance of patient involvement in shaping the health research landscape and integrates patient partners in all aspects of the research initiative from governance, identifying research priorities, to research conduct and dissemination.

18

11

9

38

Available seats in the governance structure Query projects with patient partner involvement

Patient partners co-developed the appreciation policy Patients participated in capacity-building activities

Governance

Each of the six standing committees includes up to three reserved seats for patient partners with a total of 18 available seats. During the 2018-19 fiscal year, four of the six committees were co-chaired by patient partners. Nine patient partners from the governance structure co-developed and helped pilot the Patient Partner Appreciation Policy (link to pdf) for the Alliance.

Query Services

During the 2018-19 fiscal year, 11 of the 30 active research projects engaged patient partners in the research conduct. One patient partner, Ms. Priscille-Nice Sanon, reviewed all work plan and budget for patient engagement considerations. Patient partners also reviewed and provided feedback on the client experience survey to assess the performance of our query services. Additionally, the Alliance accepts research requests from patients and is committed to fully funding two to three patient-submitted research topics each year. The prioritization of research topics that patients have submitted will begin in 2020.

Capacity-building

The Alliance is committed to multiway capacitybuilding and collaborative learning, where patients and researchers learn together. The inaugural Seed Grant of the Alliance included patients in the development of the reviewer guide, peer-reviewing of applications, and making final recommendations on successful candidates.

Indigenous Peoples Engagement

Two experienced researchers (Dr. Jennifer Walker and Dr. Janet Jull), with significant community partnership experience, are being funded to engage Indigenous communities to identify their health and research priorities. They are hiring two part-time research coordinators and two PhD students who will focus on outreach in Indigenous populations on behalf of the Alliance. The goal is to conduct queries in close collaboration with Indigenous community decision-makers.

During the 2018-19 fiscal year, two query projects specifically included indigenous health, culture and practice considerations in the research conduct. A total of \$108,986.22 cash and in-kind contributions were made to support these research projects.

Moving Ahead...

The Alliance central coordinating staff is a part of a Patient Engagement Working Group at the St. Michael's Hospital. This group is working alongside the Patient Experience & Community Engagement Team at Unity Health Toronto to gain training in engaging patients and public from diverse population groups. Two patient partners will be added to this group for ongoing advice and recommendations for patient engagement.

THE STRATEGIC GOAL

Creating a rapid-learning health system with a strong culture of patient partner and stakeholder engagement in health research **THE GUIDING PRINCIPLES Inclusiveness Mutual Respect Co-building Support ACROSS THESE ACTIVITIES Governance and Training and capacity-**Research prioritybuilding setting and conduct strategic direction **ACROSS A SPECTRUM OF ENGAGEMENT APPROACHES** Consult Inform Involve Collaborate **Empower** Share easy to Obtain Actively engage Final decision-making Include in key understand feedback, opinions in all tasks decision-making power information and advice **ENABLED BY Equity, Diversity and Inclusion Considerations** A Collaborative and Respectful Environment **Multi-Way Capacity Building** Patient-Informed and Directed Research **A Shared Sense of Purpose**

STAKEHOLDER ENGAGEMENT

The Alliance was founded on the principles of partnership, shared decision-making, and cross-communication between researchers, trainees, patient partners and stakeholders to close the gap between health research findings and the health system.

As such, stakeholder engagement is at the core of all activities within the Alliance. During the 2018-19 fiscal year, the Alliance engaged a range of stakeholders in the following capacity.

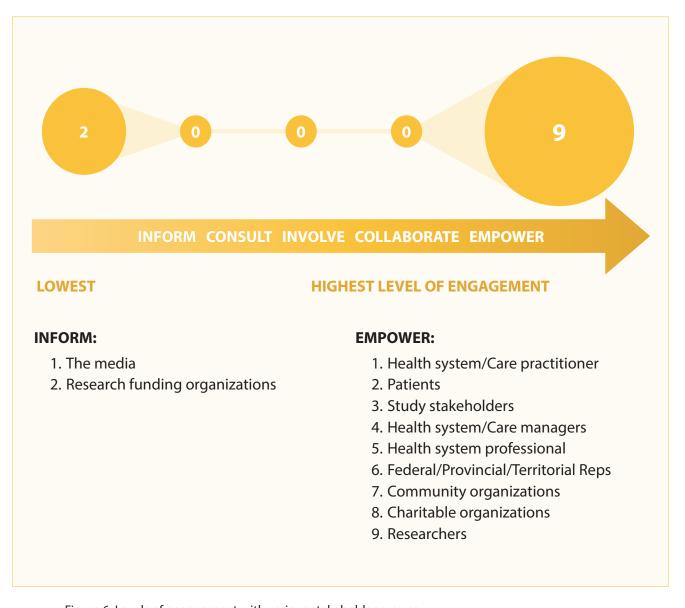


Figure 6. Levels of engagement with various stakeholder groups
Figure adapted from International Association for Public Participation's IAP2 Spectrum of Engagement

Governance

Our governance structure has up to two reserved seats in each of the six committees for stakeholders with voting rights for a total of 16 seats. The International Advisory Committee, Steering Committee, and the Partnerships Committee are also co-chaired by stakeholders at the international, provincial and federal levels, respectively.

Capacity-Building

Our capacity-building initiatives also have stakeholder engagement either as participants or co-creators. As described above, many of our capacity-building opportunities were attended by stakeholders.

Query Services

The operation and management of the query services is closely advised by the Executive Committee, which is composed of an interdisciplinary group of researchers, trainees, patient partners, and stakeholders. This committee reviews the work plan of each research query, which provides another opportunity to have stakeholder input on whether relevant outcomes are being captured and involves appropriate end-user engagement.

Additionally, all 30 active query projects are carried out using an integrated knowledge translation approach, whereby the query requester is engaged from inception to completion of the project. This helps to ensure the final products are fit for purpose and tailored to their needs. The extent of engagement can range from inform to empower depending on the stakeholder's preference and availability. Regardless, ongoing engagement is maintained at each step of the research process and invitation to participate fully is extended at each step along the way.

A Canada-wide alliance of researchers, trainees, patients, and stakeholders who are committed to contributing to a rapid-learning health system by supporting decision-maker priorities in...





Clinical Practice Guidelines



Knowledge Translation

 Decision-makers can submit their priorities and needs in knowledge synthesis, guidelines development, and knowledge translation using a web-based form on the Alliance website







Decision-makers

Evidence Alliance website

- The Alliance then works closely with the decision-maker(s) to define and refine the scope of their needs
- To ensure research efforts are not duplicated, we also check to see if similar work is already in existence or underway



Multiple teleconferences or in-person meetings are held



Search of registries, databases and check-in with research teams

- A research team (when possible a local team) with relevant expertise is nominated to carry out the work
- The research team then works with the decision-maker(s) to develop the work plan and timelines

Research Team

Ongoing collaboration to ensure the work plan is tailored to decision-maker needs



Decision-makers

- Decision-makers and relevant subject matter experts are integrated throughout the research process and are invited to provide input at each phase
- Research team sends regular progress updates to the decision-maker(s) and seeks feedback and guidance as needed



Ongoing engagement throughout the research process



Decision-makers

- Knowledge products and tools are tailored to decision-maker needs
- Knowledge dissemination and exchange activities are tailored to decision-maker needs







Translation Research Conduct

COLLABORATION ACROSS SPOR ENTITIES

We benefitted from various collaborations with different SPOR entities in contributing to the health research landscape.

The Alliance has been collaborating closely with other SPOR-funded entities. There are 31 member representatives from other SPOR entities on the Alliance, and 13 served within the Alliance governance structure.



Ontario SPOR SUPPORT Unit (OSSU)

OSSU has reached out to us for support and partnership on the end-ofgrant activity of the 17 demonstration projects that they have funded across Ontario. We have matched them with the Knowledge Translation Program at St. Michael's Hospital, Unity Health Toronto to support their knowledge translation activities using shared resources and funds from the OSSU and the Alliance.



Northwest Territories SPOR SUPPORT Unit (Hotiì ts'eeda)

We have been in collaboration with Hotiì ts'eeda to collaborate on their capacity-building initiative based on the Partners in Research course that the Knowledge Translation Program co-developed with patients and researchers.



Quebec SUPPORT Unit (Unité de Soutien SRAP du Québec)

We have been working very closely with the Quebec SRAP from the start, where many of our queries from Quebec are addressed by SRAP-affiliated research teams. Dr. Sophie Desroches, who serves as the co-chair of the Alliance Training Committee, and also sits on the Quebec chapter the of SPOR Capacity-Building Working Group to ensure cross-communication and collaboration.



Diabetes Action Canada

We have been working in partnership with Diabetes Action Canada to build the evidence base for the National Diabetes Strategy the network is working on.

FINANCES

During the 2018-19 fiscal year, the Alliance underspent by approximately 10%. There was also a 1% (\$18,741.00) difference between the total partner funds committed and the total partner funds received. A breakdown of expenses by core functions is provided in the figure below.

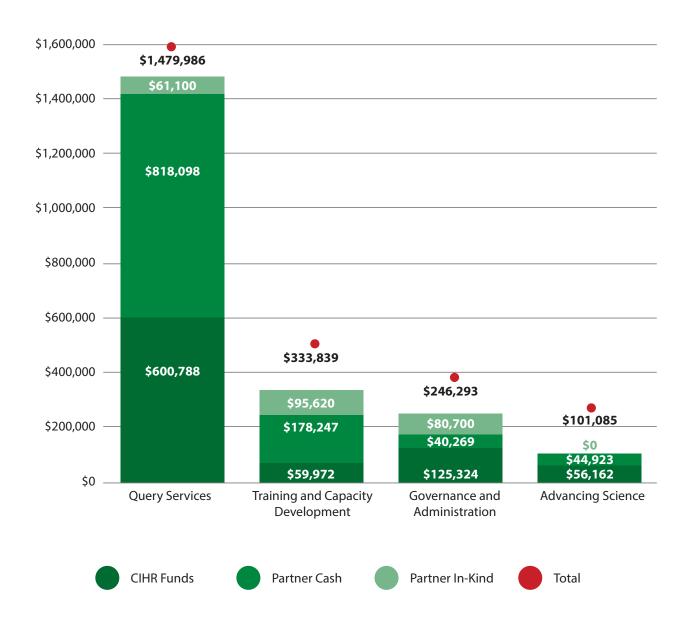


Figure 7. The 2018-19 fiscal year expenditures by core function





APPENDIX 1: QUERY LIST FROM 2018-19

Organization Name of Query Submitter	Type of Query Submitter	Jurisdiction of Query Submitter	Query Request Type	Query Research Topic	Query Purpose	Response Type	Current Status	Patient Engagement	Trainee Involvement
Society of Obstetricians and Gynecologists of Canada	Healthcare Provider	National	Knowledge Synthesis	Management of Chronic Pain in Pregnancy	Evidence base for guideline on chronic pain in pregnancy	Standard (12 months)	Completed	No	Yes
Health Canada	Policy Maker	National	Knowledge Synthesis	Knowledge Uptake and Use at the Organizational Level	Evidence base to inform program design, program implementation, performance measurement and evaluation	Standard (12 months)	In progress	No	Yes
Quebec Ministry of Health and Social Services	Policy Maker	Provincial	Knowledge Synthesis	Family Medicine Scope of Practice	Evidence base to inform a tool to encourage the adoption of extended scope of practice among family medicine clinicians	Rapid (3-6 months)	Completed	No	Yes
Quebec Pain Research Network	Health System Manager	Provincial	Knowledge Synthesis	Self-Management of Chronic Pain	To inform the development of improved self-management programs for chronic pain	Standard (12 months)	In progress	No	Yes
Diabetes Action Canada	Other Knowledge User	National	Knowledge Synthesis	Detection and Management of Diabetes Complications	To inform the implementation plan of the National Diabetes Strategy being presented to the federal government	Standard (12 months)	Completed	Yes	No
AlterGo	Health System Manager	Provincial	Knowledge Synthesis	Physical Activities for Children with Disabilities	To inform a policy brief to be presented to policy makers in Quebec (at municipal, regional and provincial levels) to lobby for inclusion of leisure activities for children with disabilities in Quebec policy	Rapid (3-6 months)	Completed	Yes	Yes

Organization Name of Query Submitter	Type of Query Submitter	Jurisdiction of Query Submitter	Query Request Type	Query Research Topic	Query Purpose	Response Type	Current Status	Patient Engagement	Trainee Involvement
Government of the Northwest Territories	Policy Maker	Provincial	Knowledge Synthesis	Family Violence in Northern Communities	To advance the work of GNWT towards prevention and reduction of, as well as healing from family violence in the NWT	Standard (12 months)	In progress	Yes	Yes
Canadian Armed Forces	Policy Maker	National	Knowledge Synthesis	Military Training- Related Injuries in Females	To inform development of mitigation strategies that aim to reduce vulnerability to injury while upholding gender-free fitness standards	Rapid (3-6 months)	In progress	No	No
World Health Organization	Other Knowledge User	International	Knowledge Synthesis	Gaming and Internet Gaming Disorder	To inform inclusion of gaming disorder in the 11th Revision of the International Classification of Diseases (ICD-11)	Rapid (3-6 months)	Completed	No	No
Diabetes Canada	Healthcare Provider	National	Knowledge Synthesis	Recreational Cannabis Use in People with Diabetes	To educate healthcare providers and patients on potential effect of cannabis use	Rapid (3-6 months)	Completed	No	Yes
Ontario Ministry of Community Safety and Correctional Services	Policy Maker	Provincial	Knowledge Synthesis	Occupational Stress Injury in First Responders	To address the evidence needs of the Ontario Ministry of Community Safety and Correctional Services (MCSCS) in developing an evidence-based strategy to tackle occupational stress illness or injury (including post-traumatic stress disorder) in first responders	Rapid (3-6 months)	Completed	No	No
Heart and Stroke Foundation	Other Knowledge User	National	Knowledge Translation	Developing an Organizational KT Strategy	To provide coaching support to the Heart and Stroke Foundation in the development of an evidence- based organizational KTE framework	Standard (12 months)	In progress	No	No
Ontario SPOR SUPPORT Unit	Other Knowledge User	Provincial	Knowledge Translation	Ontario SPOR SUPPORT Unit Research Round Tables	To facilitate the end-of- grant activities of the OSSU demonstration projects	Standard (12 months)	In progress	Yes	No

Organization Name of Query Submitter	Type of Query Submitter	Jurisdiction of Query Submitter	Query Request Type	Query Research Topic	Query Purpose	Response Type	Current Status	Patient Engagement	Trainee Involvement
BC Ministry of Health	Policy Maker	Provincial	Knowledge Synthesis	Quality of Patient and Family Caregiver Engagement in Decision-Making in Health Systems	To create an evidence base to inform the development of a conceptual evaluation framework for the Patients as Partners Initiative implemented by the Ministry of Health in British Columbia	Standard (12 months)	In progress	Yes	Yes
Alberta Health	Policy Maker	Provincial	Knowledge Synthesis	Peritoneal dialysis for treatment of end-stage kidney disease	Recommendations on implementation and policy options of assisted peritoneal dialysis.	Standard (12 months)	Completed	Yes	No
Alberta Health, BC Ministry of Health	Policy Maker	Provincial	Knowledge Synthesis	Glucose monitoring and insulin delivering technologies for management of insulin treated diabetes	Review will support the delivery of more effective and appropriate care to sub-groups of insulin-treated diabetic patients based on resource allocation provincially	Standard (12 months)	Completed	Yes	No
BC Ministry of Health	Policy Maker	Provincial	Knowledge Synthesis	Management and treatment of symptomatic varicose veins	Synthesize clinical effectiveness, provider and patient perspectives, cost effectiveness and budget impact of intervention compared to alternatives	Standard (12 months)	Completed	Yes	No
BC Ministry of Health	Policy Maker	Provincial	Knowledge Synthesis	Chronic pain mitigation	Synthesize clinical effectiveness, clinical and patient perspectives, cost effectiveness and budget impact of intervention compared to alternatives	Standard (12 months)	Completed	Yes	No
BC Ministry of Health	Policy Maker	Provincial	Knowledge Synthesis	Polypropylene mesh for pelvic organ prolapse, hernias, and stress urinary incontinence	Synthesize information to inform health ministry policy decisions regarding burden, clinical and patient perspectives, and alternatives to polypropylene mesh	Standard (12 months)	Completed	Yes	No

Organization Name of Query Submitter	Type of Query Submitter	Jurisdiction of Query Submitter	Query Request Type	Query Research Topic	Query Purpose	Response Type	Current Status	Patient Engagement	Trainee Involvement
BC Ministry of Health	Policy Maker	Provincial	Knowledge Synthesis	Single compared to multiple occupancy rooms and outcomes	Knowledge synthesis and review comparing all outcomes between single and multiple occupancy rooms	Standard (12 months)	Completed	No	No
BC Ministry of Health	Policy Maker	Provincial	Knowledge Synthesis	PET-CT for myocardial viability and myocarditis	Synthesize clinical effectiveness, clinical and patient perspectives, cost effectiveness and budget impact of intervention compared to alternatives	Standard (12 months)	Completed	No	No
Newfoundland and Labrador Health System	Policy Maker	Provincial	Knowledge Synthesis	Hyperbaric Oxygen for Difficult Wounds	To provide decision-makers with information on clinical and economic effectiveness of hyperbaric oxygen therapy for difficult wound healing in the Newfoundland and Labrador context	Standard (12 months)	Completed	No	Yes
Newfoundland and Labrador Health System	Policy Maker	Provincial	Knowledge Synthesis	Preschool Screening	To provide decision-makers with information on effectiveness of population based, universal screening programs in Newfoundland and Labrador	Rapid (3-6 months)	Completed	No	No
Newfoundland and Labrador Health System	Policy Maker	Provincial	Knowledge Synthesis	Remote Patient Monitoring	To provide decision-makers with information on remote patient monitoring initiatives and programs across Canada and select international jurisdictions used to monitor patients with chronic conditions in home settings	Rapid (3-6 months)	Completed	No	Yes
Newfoundland and Labrador Health System	Policy Maker	Provincial	Knowledge Synthesis	Home Dialysis Snapshot	To provide decision-makers with information on strategies and practices to increase uptake of home dialysis across Canada and in select international jurisdictions	Rapid (3-6 months)	Completed	No	No

Organization Name of Query Submitter	Type of Query Submitter	Jurisdiction of Query Submitter	Query Request Type	Query Research Topic	Query Purpose	Response Type	Current Status	Patient Engagement	Trainee Involvemen
Newfoundland and Labrador Health System	Policy Maker	Provincial	Knowledge Synthesis	Chronic Disease & Palliative Care	To provide decision-makers with information on effectiveness of approaches and models that integrate palliative care earlier than end-of-life in adults with serious or advanced chronic disease	Rapid (3-6 months)	Completed	No	No
Newfoundland and Labrador Health System	Policy Maker	Provincial	Knowledge Synthesis	Rural Psychiatry Snapshot	To provide decision-makers with information on models and best practices for rural and remote mental health services that include psychiatry as a key component in rural and remote communities across Canada and in select international jurisdictions	Rapid (3-6 months)	Completed	No	No
Mental Health Commission of Canada	Policy Maker	National	Knowledge Synthesis	Cannabis use and mental health outcomes	Knowledge synthesis and scoping review of literature addressing the use of cannabis and mental health outcomes	Standard (12 months)	Completed	No	No
Newfoundland and Labrador Health System	Policy Maker	Provincial	Knowledge Synthesis	Agitation and Aggression in LTC Residents with Dementia	To provide decision-makers with information on interventions, strategies and practices that are effective in prevention and management of aggression and agitation in long term care residents with dementia	Standard (12 months)	Completed	No	Yes
Newfoundland and Labrador Health System	Policy Maker	Provincial	Knowledge Synthesis	Barriers and Facilitators to Care Transitions	To provide decision-makers with information on barriers and facilitators to effective handover/handoff during transition of care	Standard (12 months)	In progress	Yes	Yes

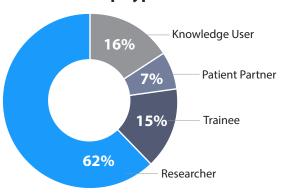
APPENDIX 2: UNDERSTANDING KT PRIORITIES OF THE ALLIANCE

Objective: To understand the Alliance's dissemination and knowledge translations related capacity-building priorities.

Approach: A brief ranking survey was administered to all 188 Alliance members at the time. A representative sample of 82 participants have completed the survey (44% response rate).

SURVEY RESPONDENT CHARACTERISTICS

Respondent Membership Type



Respondent's work closely aligns with...

- Research 43%
- Education 19%
- Clinical practice 14%
- Policy-making 9%
- Community health and promotion 6%

Ranking of dissemination priorities

Top ranked...

- Inform practice change
- Raise awareness
- Inform policy change

Top ranked...

- Policy-makers
- Health service providers
- Patient and public

Top ranked...

- · Tailored infographics
- Journal publications
- Plain language summaries



Top ranked...

- Increase knowledge of KT practice
- Increase knowledge of patient and stakeholder engagement
- Promote use of KT approaches

TARGET AUDIENCE

Top ranked...

- Alliance researchers
- Alliance knowledge users
- Alliance patient partners
- Alliance trainees

PRIORITY STRATEGIES

Top ranked...

- Inventory of KT resources
- 1-on-1 coaching on KT practice
- Manual on KT practice

Ranking of KT capacity building priorities

