

Developing the Infrastructure for Behavioural Research in Rural Hospitals Throughout Northwestern Ontario

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All Hospitals in Northwestern Ontario

1. Atikokan
2. Dryden
3. Fort Frances
4. Geraldton
5. Hearst
6. Horne Payne
7. Kenora
8. Manitouwadge
9. Marathon
10. Nipigon
11. Red Lake
12. Sioux Lookout
13. Terrace Bay
14. Thunder Bay



Lay of the Land

- ◆ High prevalence of all lifestyle risk factors
- ◆ High prevalence of chronic diseases
- ◆ Rural, remote, northern, Aboriginal, Francophone
- ◆ Recruitment & retention of healthcare providers
- ◆ Limited providers & services
- ◆ 13 hospitals with cancer suites linked to Thunder Bay Regional Hospital
- ◆ ~25,000 annual admissions all 14 hospitals combined
- ◆ ~1,600 km west to east



Integrated Vision

- ◆ Need to think how it would look if a research program/service was put into all hospitals across NW Ontario—each hospital acting as a spoke in a wheel with a common center, the integrity of all spokes important for smooth operation



Parameters

- ◆ Chronic disease prevention & management
- ◆ Population too small for RCTs
- ◆ Region "too small" for RCTs
- ◆ Hospitals too small to hire full-time RAs
- ◆ Communities too small to find part-time RAs
- ◆ Programs & service delivery required
- ◆ Professional development needs
- ◆ New medical school
- ◆ New technological infrastructure in the north
- ◆ Ripe for "bench to bedside", "translational", "effectiveness", "applied" research

Applied Research: Bridge to Mass Delivery of Chronic Disease Prevention/Mgt

◆ Development of rigorous systems through research to create capacity for mass delivery

◆ Research rigor to ensure:

1. fidelity of mass adoption & implementation
2. fidelity of recruitment, delivery, evaluation
3. program sustainability
4. consistent success across hospitals
5. ability to meet clinical guidelines
6. ability to meet accreditation needs

Building a Service that Works Even After We Pack Up the Research Bags and Go Home

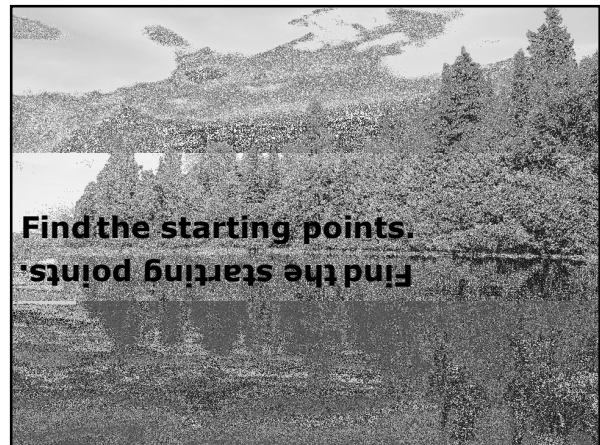
◆ Mass delivery is founded on a broader perspective than an individual program or research trial

◆ It requires building a service in which:

- multiple start-ups are efficient
- opportunity costs low
- focus is on seamless integration of the parts that create the whole
- it is a predictable success not because of us but without us

Rare Opportunity

- ◆ None of the hospitals had been directly involved in behavioural research
- ◆ Shape, design, collaborate, and contribute something that had never existed before
- ◆ Construct a solution to the frustrations that have plagued the implementation, buy-in, and sustainability of chronic disease prevention and management delivery



Starting Points

- ◆ Start with what you know
 - tobacco use/cessation
 - existing relationships
- ◆ Epidemiological "diagnosis"
- ◆ Stakeholders—hospital, community
- ◆ Credibility of researchers
- ◆ Acceptability of proposed research
 - clinical practice guidelines
- ◆ WIIFT
- ◆ WIIFUS (WIIFM)
- ◆ Funding possibilities and alignment
- ◆ Systems-related theory
- ◆ Phone calls
- ◆ Site visits

Site Visits: ~~Buy-In~~ Meaningfulness and Mindfulness

- ◆ Priorities of stakeholders
- ◆ Relationships
- ◆ Bring something to the table
- ◆ Ask for willingness to begin
- ◆ Align research with delivery and accreditation
- ◆ Identify rewards of research for participating hospitals

Begin

- ◆ Identify existing systems and providers
- ◆ Identify champions
- ◆ Identify possibilities for centralizing and streamlining
- ◆ Make it easy for participating hospitals
- ◆ Keep in contact
- ◆ Visit often

- # Centralize Data Collection
-
- Emergency Room Outpatient Registration Edit**
- | | | | |
|-------------|----------|---------|-----------|
| Reg Summary | Census | In/out | Guw/In |
| Occurrences | How/Loch | PL Info | Allergies |
- Patient: REG000005-06 DARON, TEST LARRY
- Have you smoked/used tobacco products in the last 30 days? ☐
- Have you smoked/used tobacco products in the last 7 days? ☐ REFUSED
- New mandatory smoking status fields in inpatient and ER admission records in all 13 hospitals in NW Ontario due to this study.**
- Smoking status asked & documented by admitting staff.**

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Emergency Room Outpatient Registration Edit				
Reg Summary		Census	Instr/Int	Quar/Ins
Encounters	Dow/Loch	PLInfo	Allergies	
Patient	REG000005-06 ORGANO TEST LABRV			
Have you smoked/used tobacco products in the last 30 days? YES				
Have you smoked/used tobacco products in the last 7 days? REFUSED				

Marketing & Promotion

- ◆ Let everyone know what's happening & why
- ◆ Maintain consistent "look"
- ◆ Create a sense of familiarity



Research Study



Our hospital has entered into a regional research study on **Clinical Practice Guidelines for Tobacco Use and Cessation** with Dr. Patricia Smith, Northern Ontario School of Medicine, and Dr. Scott Sellick, Thunder Bay Regional Health Sciences Centre.



The study involves 13 Northwestern Ontario hospitals:

- Atkinson
- Dryden
- Fort Frances
- Geraldton
- Horseyburg
- Kenora
- Manitowadge
- Marathon
- Nipigon
- Red Lake
- Sioux Lookout
- Terrace Bay
- Thunder Bay

There are five components to Phase 1 of the research beginning in August 2006:

1. An organizational assessment regarding tobacco cessation practices and policies.
2. An assessment of tobacco use prevalence among all inpatients and 12 patients.
3. Healthcare provider survey in relation to Clinical Practice Guidelines.
4. A patient tobacco history survey to inform patient-centred tobacco cessation initiatives.
5. Post-discharge follow-up of patients at 1, 3, and 12 months to determine tobacco use.

This is the largest behavioural research study ever conducted in Northwestern Ontario hospitals. The research will help us align with Clinical Practice Guidelines and build the infrastructure for future research studies in the north, for the north.

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 **Research Study** 

Our hospital has entered into a regional research study on Clinical Practice Guidelines for Tobacco Use and Cessation with Dr. Patricia Smith, Northern Ontario School of Medicine, and Dr. Scott Sellick, Thunder Bay Regional Health Sciences Centre.

The study involves 13 Northwestern Ontario hospitals:

- Athabasca
- Dryden
- Fort Frances
- Graveland
- Hearst
- Kenora
- Marathon
- Nipigon
- Rain Lake
- St. Mary's
- Terrace Bay
- Thunder Bay

There are five components to Phase I of the research beginning in August 2006:

1. *An organizational assessment regarding tobacco cessation practices and policies.*
2. *An assessment of tobacco use prevalence among all inpatients and ED patients.*
3. *A healthcare provider survey in relation to Clinical Practice Guidelines.*
4. *A patient tobacco history survey to inform patient-centred tobacco cessation initiatives.*
5. *A prospective follow-up of patients at 1, 6, and 12 months to determine*

This is the largest hospital based research study ever conducted in Northwestern Ontario hospitals. The research will help us align with Clinical Practice Guidelines and build the infrastructure for future research studies in the north, for the north.

Good People, Exquisite Results

- ◆ Develop prototypes to provide a uniformly predictable service to hospitals & patients.
- ◆ Prototypes provide the means to:
 - monitor research across hospitals
 - identify implementation, inhibiting, & facilitating factors
 - collect data, track success, report to administration
 - compare across hospitals and region
 - quality assurance checks

- 
- Questions?**

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