“Return on Investment” Assessment Takes Flight

The Academy’s major assessment entitled Making an Impact: A Preferred Framework and Indicators to Measure Returns on Investment in Health Research (Créer un impact - Les indicateurs et approches à privilégier pour mesurer le rendement des investissements consentis en recherche en santé) has attracted substantial national and international attention. The report was crafted by an international panel of experts convened by the Academy over 16 months and chaired by Dr. Cyril Frank of the University of Calgary. A total of 26 leading Canadian organizations including key federal and provincial agencies and funders, health charities, professional organizations and the private sector sponsored the assessment. The final report sets out a series of key recommendations on how diverse organizations with differing missions can nonetheless consistently measure and report the return on their investments.

The report identifies five dimensions through which health research impacts should be measured: advancing knowledge; building research capacity; informing decision-making; improving health and the health system; and creating broad social and economic benefits.

Dr. Frank has been very active in responding to institutions, organizations and other groups by presenting this framework to interested audiences in a variety of locales. Since its release, presentations have been made to representatives of the Government of Ontario, Ministry of Research and Innovation; Ministry of Health and Long-Term Care (sponsored by Ontario Neurotrauma Foundation), CIHR’s Governing Council, Toronto’s Academic Health Science Network Research Committee, the Forum of Health Research Funders, the Association of Faculties of Medicine of Canada, Boeckh Foundation and soon to the Conference Board of Canada. Dr. Frank has been invited to Spain and Sweden to participate in key conferences focusing on this core issue. The report has been referenced on a variety of websites and a communication was disseminated by the Pan American Health Organization (PAHO/WHO) specifically about this assessment.

The Assessment (available in English and French) and related documents, including a PowerPoint slide set that can be used to further disseminate its findings, may be downloaded at no cost from http://www.cahs-acss.ca/e/assessments/completedprojects.php and we encourage you to share this link with your colleagues. An analysis of this Assessment was published in CMAJ in March (Can Med Assoc J 2009; 180: 528–34). Additional publications of note include a news article by Wayne Kondro (Can Med Assoc J 2009; 180: 502-3) and a featured article in the January 22nd edition of RE$EARCH MONEY entitled “Measuring tangible benefits: New tool can help countries measure return on investment from research”.

SEPTEMBER AGM AHEAD

The September AGM is set for September 21-22, 2009 at the Chateau Laurier hotel in Ottawa. Events begin with a full day forum on Sept. 21 discussing Canada’s Strategic Role in Global Health. Speakers include Peter Singer (Chair); Elizabeth Dowdeswell; Janet Hatcher-Roberts; Victor Neufeld; Allan Ronald; Prabhat Jha; Howard Alper; David Butler-Jones; Abdullah Daar; Nancy Edwards; Michael Hayden; Bartha Knoppers; Lorna Jean Edmonds; Stuart MacLeod; Alan Bernstein; Carol Dahl; Derek Yach; Hon. Peter Msolla, Minister of Science, Tanzania.

The Annual Induction Ceremony and Dinner are scheduled for the evening of September 21, 2009. The Honourable Michael Kirby will be Guest of Honour and will be inducted as the third Distinguished Fellow of the Academy. The newly elected Fellows in 2009 will be inducted at this time as well.

The following day, CAHS holds its annual business meetings. Afterward, the closing luncheon will feature a talk by Sir John Bell, Regius Professor of Medicine, Oxford University and winner of the 2009 Henry G. Friesen International Prize in Health Research. Prof. Bell is known for his research involving the characterization of genetic susceptibility to auto-immune diseases, particularly Type 1 Diabetes, Auto-immune Thyroid Disease, IBD and Rheumatoid Arthritis. That afternoon, Professor Bell will deliver the Friesen Lecture at the same venue.
Chronic Disease Assessment on Track

The CAHS Assessment entitled “Health System Transformation to Meet the Burden of Chronic Disease” is on track under the leadership of Drs. Louise Nasmith and Penny Ballem. Following the successful forum at last September’s AGM that launched the assessment, the Co-Chairs assembled a stellar international panel (as listed below) with an exceptional array of expertise and experience. The inaugural meeting of the Expert Panel was held on March 12 and 13th, 2009 in Toronto and a teleconference followed on May 11, 2009. The entire team will continue work over the summer and will convene again on September 24-25, 2009. The Academy and the Assessment Sponsors are looking forward to a bold set of recommendations for transforming our health care system to meet the challenge of chronic diseases in early 2010. An update on progress to date will be provided at the September 2009 AGM.

Chronic Disease Assessment Panel Members:
Louise Nasmith (Co-Chair)  Penny Ballem (Co-Chair)
Raymond Baxter    Pamela Ratner
Howard Bergman   Peter Rosenbaum
Carol Herbert    Robyn Tamblyn
Nora Keating   David Colin Thomé
Richard Lessard   Ed Wagner
Renee Lyons   Sheila Weatherill
Dale McMurchy   Brenda Zimmerman

The Honourable Monique Bégin: In Her Own Words

Last September, the Honourable Monique Bégin was inducted as the second Distinguished Fellow of the Academy. As Guest of Honour at the Induction Ceremony and Dinner, she captivated the audience with her personal reflections. Below are excerpts from her closing remarks:

"But where are reforms in clinical education and residency training? What changes are now aimed at learning how to work collaboratively and inter-professionally? At connecting deprivation and poverty cycles with illness and diseases? At understanding how women’s health and men’s health are affected differently by socio-economic factors? At discovering patients’ voices in various community-based residency placements, not just in so-called teaching hospitals (the vast majority of patients are not to be found in university teaching hospitals)! At preparing future physicians to advocate for social justice for their patients? At defining a mandate of social accountability for the powerful and respected medical profession? ...It does not have to be this way. Let me conclude with our three overarching principles of action and recommendations:

1. Improve the conditions of daily life – the circumstances in which people are born, grow, live, work, and age.
2. Tackle the inequitable distribution of power, money, and resources – the structural drivers of those conditions of daily life – globally, nationally, and locally.
3. Measure the problem, evaluate action, expand the knowledge base, develop a workforce that is trained in the social determinants of health, and raise public awareness about the social determinants of health.

Thank you again for having me as one of you. I am confident Canadians can count on you. The project is a longer-term one, but we must start now. And it is not for the faint-hearted."