

Caritas Research

Innovation is a cornerstone of responsive, effective health care. As people's lives and the factors that play a role in their health become increasingly complex, providing compassionate and comprehensive care will require continued innovation and resourcefulness.

In looking to the future, Caritas is committed to promoting innovation, increasing collaboration and building the continuum of care. At Caritas Health Group, research is an essential component of the organization's efforts to be of greater service. The encouragement of research and learning supports a broader base of practice and improves quality of care outcomes.

Caritas Health Group's integrated, multidisciplinary approach to care offers an environment highly conducive to research teams and ground breaking inter-disciplinary research. Over the years, research has supported the pioneering of innovative programs and approaches. Caritas has many research-based programs, such as a world-renowned facial reconstruction program and an acute palliative care program, extensive cardiology and pulmonary services, and



numerous other areas aimed at serving the needs of the whole person and the community.

Clinical practice research is an important focus for Caritas, reflected in the goal to incorporate research into such professional practice areas as nursing, dietary and rehabilitation therapy programs. Student practicums, joint research initiatives, and education help to apply and integrate research at the bedside.

We will be seekers, restless in our determination to respond to needs and opportunities, relentless in our search for understanding, and driven to create and share knowledge.

- Caritas Corporate Vision, 2001

President's Note

Hospitals are challenged to foster environments where patient care, academics and education, and research are all sharply in focus, and Caritas readily responds to this challenge.

The Caritas combination of acute and continuing care facilities provides a dynamic environment for research. Our caregivers are invited and encouraged to champion cutting edge research in a myriad of interest areas. From our emergency department to outpatient clinics to continuing and palliative care areas, Caritas caregivers are at the front line of health care delivery. And it is here that issues and trends first come into view and critical questions are raised.

Critical inquiry is part of the Caritas tradition of caring and compassion. Much needed evidence and knowledge is gathered via clinical trials to enhance sound clinical practice. Through greater understanding of all the factors that affect human suffering and healing, we continually strive to improve the quality and effectiveness of our work with patients, residents and the community.

In research, as in our care, Caritas works as part of a larger community. We value the



relationships with various faculties at the University of Alberta, as well as Grant MacEwan Community College, NAIT and other educational institutions. We are proud of our educational partnerships in medicine, nursing and the allied health professions.

We are pleased to share with you a glimpse of the diverse and dynamic research taking place within Caritas.

*Bev Rachwalski,
President, Caritas Health Group*

The Caritas Hospitals Foundation

The Caritas Hospitals Foundation is pleased to provide financial support and, in turn, to advance the century-long tradition of innovation and compassion that typifies the Caritas approach to health care. Since its inception in 1992, the Foundation has financially sponsored a variety of world class research and education initiatives of the Caritas Health Group. A pioneering spirit, a drive for innovation, and a passion to continually improve health care services to individuals and communities forms the bedrock of such research initiatives. It is

Supporting Research and Education

this very link to the Caritas mission and pioneering tradition that invites and challenges us to continue to underscore research and education as funding allocation priorities. In partnership with the community we serve, we are proud to celebrate and to encourage the outstanding work of our Caritas research community.

*John Boucher,
Executive Director, Caritas Hospitals Foundation*

Dean of Medicine University of Alberta



The Faculty of Medicine and Dentistry is very pleased with the strong clinical research taking place at Caritas hospitals. Caritas has a unique environment for cross-disciplinary research. The Caritas Health Group has always strongly supported the educational initiatives of the Faculty, and more

recently has developed some very good programs in facial reconstructive surgery, pulmonary, cardiovascular, and palliative care research, to name a few. Throughout the country we have seen many of the major teaching hospitals develop strong research programs and it is very encouraging to see this commitment from Caritas.

The Alberta Heritage Foundation for Medical Research and the Canadian Institute for Health Research, two of our major funding organizations, have made significant changes

placing greater emphasis on clinical research as it relates to epidemiology, evaluation of healthcare outcomes, careful evaluation of healthcare costs, social issues involved in health status, etc. These changes have encouraged the emergence of multidisciplinary teams developing stronger research applications and have created an environment for outstanding research to be done beyond traditional biomedical research laboratories. This is an ideal time for a major commitment to clinical research, and I am most pleased that the Caritas Health Group is making this commitment. Within this publication you will see excellent examples of important clinical research that is being done at Caritas hospitals. The Faculty of Medicine and Dentistry is most pleased to continue to support and be a part of this research. Congratulations!

*D. Lorne Tyrrell, OC, AOE, MD, PhD, FRCP
Dean, Faculty of Medicine & Dentistry
University of Alberta*

Cardiology

The Division of Cardiology at the Grey Nuns Community Hospital has facilitated many original research projects and has consistently been among the top enrollers for clinical trials in Canada. Multi-centre trials include such areas as management of acute coronary syndromes, congestive cardiac failure, and atrial fibrillation, to name but a few. Individual research work that has taken place or is currently underway includes exercise testing for coronary artery disease, management of acute myocardial infarction, homocysteine as a risk factor for coronary artery disease, and management of dyslipidaemias. A number of articles on study results, as well as resource utilization and cost effectiveness, have

been published in various peer-reviewed journals—*Journal of the American College of Cardiology*, *American Heart Journal*, and *PACE*.

The Division of Cardiology has established prospectively managed data bases for the coronary unit, a pacemaker program, and a cardiac rehabilitation service which is a first for city hospitals.



*Dr. Manohara Senaratne,
Cardiologist*

Asthma Attack/Panic Attack

What is the difference between an asthma attack, a panic attack, or both occurring at once? The impact of recognizing the differences can improve patients' health. Supporting both the emotional and physical aspects of a person is critical. This is especially true when two disorders such as asthma and panic disorder co-exist in the person. By being aware of the differences and overlay in symptoms, and learning how to prevent and manage their asthma, panic, and asthma-panic attacks, patients can experience a greater sense of control over their health and well being.

Dr. Terry Davis and Dr. Carolyn Ross, both of the University of Alberta Faculty of Nursing, and pulmonary specialist, Dr. Fred MacDonald have conducted research in this area. The innovative team places emphasis on the integration of health care, education and research, with an overall focus on identifying and helping asthma patients with co-existing panic disorder.

"We know that people with asthma are more likely to experience panic disorder than the population at large," says Dr. Davis, who is also a certified cognitive therapist. "Our question is when we recognize and treat panic disorder in asthmatics, do we only solve the panic problem or can we also change the course of the asthma?"

In 1996-97, Drs. Davis, Ross and MacDonald conducted a study evaluating a new protocol they had developed to screen and assess asthma patients for anxiety disorder. Ninety-one adults with a confirmed asthma diagnosis were recruited from the Asthma Clinic at the Grey Nuns Hospital. The results of the study identified the scope of the problem 38% of the patients were found to have co-existing disorders and demonstrated that trained nurses, using the new protocol, could accurately identify asthma patients with co-existing anxiety disorders.

Having determined how to identify asthma patients with panic disorder, the next step was to learn how to treat them. To that end, Drs. Davis,



*Dr. Terry Davis, Dr. Fred MacDonald,
Dr. Carolyn Ross*

Ross and MacDonald undertook a clinical trial evaluating the impact of an 8-week treatment program which they developed for adult asthmatics suffering from panic disorder. This new treatment was offered to female patients who were recruited from emergency departments throughout the Capital Health region. "Women were selected for this trial because they have been shown to have about twice the incidence of panic disorder as men," says Davis. "Our positive findings demonstrate the treatment worked to reduce panic and significantly improved the quality of life of these patients."

In addition to educating patients and health care professionals about the co-existence of asthma and panic disorder, the fruits of the research team's efforts may also be seen in health care utilization. Dr. Ross, who is a certified asthma educator as well as a nurse, sums it up this way. "We suspect that asthmatics with unrecognized and untreated panic disorder over-medicate, visit doctors and emergency departments more often, and are hospitalized for longer periods of time. Costs might be reduced if we can help people make the distinction between asthma and panic. Patient health may also be improved."

COMPRU

The Misericordia's Craniofacial Osseointegration and Maxillofacial Prosthetic Rehabilitation Unit (COMPRU) is a unique and highly specialized program that provides reconstructive and rehabilitative treatment for patients with defects of the head or neck due to disease, trauma or congenital conditions.

COMPRU's research program is comprised of an interdisciplinary group the Implantable Devices Research Group and focuses on aspects of head and neck reconstruction. Research in COMPRU involves both basic science and applied research. Research in basic science has been conducted in areas such as cell biology, biochemistry and engineering. Applied research investigations have included a wide range of studies in relation to head and neck reconstruction. These investigations have furthered knowledge of surgical technique, therapeutic treatment, behavioural and functional outcomes. In addition, several initiatives in advanced manufacturing and digital technologies have also been accomplished through research in areas of biomedical engineering.

COMPRU's research has many forms. The work of Dr. Jana Rieger, a Speech Language Pathologist, focuses on the delicate art of speaking, eating and swallowing basic functions we take for granted, and the loss of which can be devastating. "Toward the back of the mouth, the palate (or the roof of the mouth) is muscular. When part of this area is removed due to a cancerous tumor, for example, the ability to speak, chew and swallow can be compromised significantly, despite efforts to repair the defect with surgery," says Dr. Rieger. The resultant speech defect is often mistaken for mental illness or even drunkenness. Through her research, Dr. Rieger collaborates with COMPRU Co-Director, Dr. John Wolfaardt, to create a removable appliance that allows these patients to achieve a level of comfort with their eating and speaking skills, and opens the door to a social life once again. Dr. Rieger's research extends palatal surgery with Dr. Gordon Wilkes, COMPRU Co-



Director, and head and neck reconstruction with Dr. Hadi Seikaly and Dr. Jeff Harris, surgeons working with the COMPRU team.

An excellent example of the interdisciplinary nature of COMPRU's research activity is evident in the research work being conducted with University of Alberta Mechanical Engineering Professor, Dr. Gary Faulkner. Based on his research interest in biomechanics of the head and neck, Dr. Faulkner, together with his graduate students, is involved in assessing the stability of titanium implants in bone. "Titanium implants, when placed surgically in bone, will integrate with a patient's normal bone tissue, effectively forming a secure anchor for the attachment of a facial prosthesis," states Dr. Faulkner. "While the success rate of these implants is very high, there are still failures we cannot explain. The overall health of the implant is thought to be due to several factors, and high on this list is the history of loading on the implant." This research helps us to understand more precisely what load the implants are carrying and what is most appropriate for the long term success of the implant, all vital factors in understanding how to optimize quality of care and cost effective outcomes for the patient.

Research is a fundamental mandate for COMPRU and enables the program to continuously improve treatment alternatives and the quality of outcomes for patients. This is consistent with COMPRU's overall operational philosophy of quality management and its ISO 9001 Quality Management System. COMPRU has developed extensive national and international knowledge networks collaborating in clinical, research and teaching activity that benefit patients the world over. Perhaps most importantly, this research activity will ensure that Canadians have access to high quality, cost-effective treatment today and into the foreseeable future.

Orthopedics



*Dr. Robert Balyk,
Orthopedic Surgeon*

The Northern Alberta Centre for Shoulder Treatment and Research was established at the Grey Nuns Community Hospital in 1997. The development of this program was the initiative of Dr. Robert Balyk, an orthopedic surgeon whose primary interests are treatment of shoulder pain and dysfunction. The shoulder treatment and research program is comprised of three integral components: patient care, research and teaching. Patient care encompasses the surgical, non-surgical and rehabilitation management of patients who present with shoulder pain and limit of function. A multidisciplinary team of orthopedic surgeons, radiologists, nurses, physical therapists and occupational therapists work together to achieve patient health and satisfaction for these individuals.

The goal of a research group, headed by Dr. R. Balyk, is to validate the current surgical and non-surgical interventions being done at the Grey Nuns in relation to the treatment of shoulder dysfunction, including arthroscopic techniques. Post-operative outcomes involve determining the effectiveness and surgical impact on the patients' overall function. To understand this involves an appreciation of the fact that the tendons, which blend together to help stabilize and move the shoulder, also provide upper body strength and movement. Injury or defects can cause pain and/or difficulty raising an arm or rotating it out to the side. Simple tasks taken for granted, such as brushing our hair or sleeping, can be very difficult. Injuries and defects to these tendons affect people in a wide age group (40 - 85 years), many of whom are in the workforce.

"It is essential to determine post-operative measures, such as return to work time, level of return to work, and patient satisfaction," says Dr. Balyk. The study examined quality of life, ability to return to work, and overall shoulder function. Several outcomes such as pain relief, range of motion and shoulder strength and function were measured at preset time frames. The study began in 1997 and is ongoing and into a new phase. Is the surgery still holding? Are patient satisfaction levels maintained? Are work

level results at 5 years follow-up the same as at first year post-surgery? Research has shown so far that rotator cuff repair surgery has a 97% satisfaction rate.

"The information gathered from these patient-focus studies provides health practitioners with continuous learning across disciplines, improvement in practice, and confidence to provide the best advice to their patients," says Dr. Balyk. From the results of a number of shoulder studies, Dr. Balyk can discuss more thoroughly with patients the benefits of possible treatment methods that can help them to decide on the best course of action.

A key component of the shoulder treatment and research program is education. A multi-disciplinary approach gives many medicine and rehabilitation medicine students, and clinicians, the opportunity to observe as well as gain hands-on experience in the assessment and treatment of patients with shoulder pain and/or dysfunction. The Grey Nuns Community Hospital is a leading centre in Edmonton where arthroscopic shoulder techniques can be learned. Orthopedic residents working at the Grey Nuns have the unique opportunity to learn the most current techniques from experienced surgeons. Surgeons from other regions and health care centres come to the Grey Nuns to familiarize themselves with arthroscopy.

The Northern Alberta Centre for Shoulder Treatment and Research collaborates with shoulder surgeons across the country and has led to the formation of the Canadian Shoulder Study Group. The primary objective of this national group is to formulate multicentre trials that will impact patient care. Participation as a national group in the research community is an exciting prospect for orthopedic surgeons and researchers.

Eating Disorder Prevention



*Dianne Drummond and Suzanne Hare,
Dietitians*

Body image and eating disorder prevention has been a long-standing passion for Dianne Drummond and Suzanne Hare, dietitians at the Grey Nuns Community Hospital. Years of experience working in psychiatry have taught Dianne that she and fellow dietitians are often on the front-line when it comes to eating disorder treatment. Suzanne's passion is prevention and education and she applies her skills in cardiac rehabilitation and in the development and management of body image workshops offered by the Grey Nuns. The two have coordinated body image presentations to more than 12,000 students across Alberta over the past four and a half years. As well, they have authored two resources on body image, one for teachers and another for parents and families; both called *Liking the Me I See in the Mirror*.

Six years ago Dianne and Suzanne received funding from the Grey Nuns Women's Health Fund to develop a tool that would identify children at risk of developing eating disorders. The Risk of Eating Disorder Inventory or "REDI" is validated and now available for use. "It was just an idea," says Dianne. "But it took off and even people in Norway have done trials on it." Here in Alberta, REDI has been used in several schools, and has received interest from individual health clinicians and the provincial Eating Disorder Service.

A year ago Dianne and Suzanne received a \$97,000 grant from the Alberta Heritage Foundation for Medical Research to develop, deliver, and evaluate an innovative, wellness-based education program to grade 5 and 7 students for eating disorder prevention. The Caritas Research Steering Committee contributed an additional \$5,000 to the project, and Children's Mental Health contributed \$28,000 for resource development. Suzanne and Dianne are co-principal investigators for the study, Suzanne in her capacity with the Grey Nuns and Dianne in her new role as Eating Disorder Prevention & Promotion Specialist with the Alberta Mental Health Board. This project, called *Making the Most of ME*, has just completed year one, including

focus groups, program and resource development, and a pilot study.

According to most recent literature, going into schools to talk specifically about eating disorders may trigger copycat behaviors and that is why Dianne and Suzanne's program focuses on wellness and self-acceptance. The program targets developing self-worth, fostering self-esteem, and striving for excellence. "There are many tips to help nurture people through this process. One suggestion we give people is to say something nice about themselves while they are brushing their teeth," says Suzanne. "We all need to do a bit of positive self-talk."

The response, support and cooperation for all of their work has been encouraging. With possibly more than 700 students for their full study in the fall of 2002, recruitment response has been favorable and spots have quickly filled up.

Psychiatry

The Department of Psychiatry at the Grey Nuns Community Hospital has been enthusiastically involved in research at various levels for a decade. This work has ranged from case reports published on innovative treatments to investigative research on the physiological mechanisms that underlie many psychiatric disorders.

Individual research has focused on brain flow studies which can help to reveal information on metabolic activity in the brain in disorders such as obsessive compulsive disorder, panic disorder, major depression and social anxiety disorder. Most of this work has been done in collaboration with the Department of Radiology at the WW Cross Hospital. Some of this work has been recognized in medical journals, local and national prize-winning competitions, and in successful PhD candidacies in neuroscience. Other collaborative work has involved the Departments of Psychiatry, the Neurochemical Research Unit, and Internal Medicine (Genetics) at the University of Alberta, as well as the Research Department at Alberta Hospital Edmonton. Collaboration with other departments has gone as far afield as Baylor University in Texas and Columbia University in New York.

The department attracts graduate students from various disciplines to do research. As well, the department received a significant endowment in 2002 to establish an annual prize for research in the area of OCD and related disorders.

The 'Clinical Research Group' in the Department of Psychiatry is made up of a significant number of individuals who are involved in research directly or supervising house staff who are doing research projects.

Several multi-centre clinical pharmaceutical trials have taken place both nationally and internationally. The department has grown from having only one part-time research assistant to one



*Dr. Lorne Warneke and
Dr. Pratap Chokka,
Psychiatrists*

full-time and two half-time research coordinators, and has a strong record of being a top recruiter in various studies.

Current research interests cover a number of clinical areas in psychiatry, including:

- brain flow studies and treatment trials in obsessive compulsive disorder, panic disorder and social anxiety disorder
- clinical trials in the area of female sexual dysfunction, premenstrual dysphoria, and pregnancy and psychiatric illnesses
- first break psychosis, schizophrenia and bipolar disorder-resistant depression and novel treatment approaches such as intravenous clomipramine infusions, addition of testosterone in both male and female patients, augmentation with novel antipsychotics
- brain electrical activity, demographic and outcome studies in individuals with gender identity disorder

Palliative Care

Current analgesic therapies for severe cancer pain are often inadequate, particularly for patients with neuropathic pain. Novel medications are needed for pain management for this patient population.

What might a puffer fish have to do with the management of cancer pain? A study being conducted collaboratively at the Grey Nuns Community Hospital Tertiary Palliative Care Unit by Dr. D. Oneschuk and at Calgary's Foot Hills Hospital by Dr. N. Hagen provides some intriguing possibilities. Tetrodin, extracted from the puffer fish, is a potent sodium channel blocker and may be effective in managing various difficult pain conditions. Results from a pilot study indicate that intramuscular Tetrodin is effective in relieving cancer-related pain and is well tolerated. A controlled clinical trial is being conducted to assess the safety and efficacy of this compound.

Dr. Vickie Baracos, Director of the Alberta Cancer Board Palliative Care Research Initiative,

notes that "Since our primary objective is state of the art quality health care for palliative patients, then that simply needs to be supported by innovative research right within the acute care setting [and certainly within the Tertiary Palliative Care Unit]. That's what we have ...a place where researchers and clinical caregivers can and do interact each and every day. "



*Dr. Doreen Oneschuk,
Physician*

The Capital Health Regional Palliative Care Program in Edmonton is recognized worldwide as a leader in research, education and clinical care. The Tertiary Palliative Care Unit at the Grey Nuns Community Hospital and the Mel Miller Hospice Unit at the Edmonton General are considered important components of the Regional Palliative Care Program.

Pulmonary

The Pulmonary Research Unit at Grey Nuns Community Hospital has been in existence since 1969 when it was initiated at the Edmonton General Hospital. The research unit is comprised of one full-time clinical research assistant as well as two part-time research assistants. Four pulmonary physicians work in the unit and have participated in the development of new asthma therapies from bronchodilator treatment to anti-inflammatory therapy. As well, new dispensing systems have been studied, refined and brought to market. Collaboration with other centers in multi-site trials, together with specific projects, has resulted in many international presentations and scientific publications in peer reviewed journals.

Currently, the research unit has supported and participated in a study conducted by Dr. Eric

Wong of the University of Alberta in partnership with the Centre for Lung Health at the Edmonton General Continuing Care Centre. Dr. Wong's research surrounds the use of oxygen during exercise in patients with chronic lung disease, a study that was spurred on by the release of new guidelines being developed by the Alberta Aids to Daily Living.

From the literature, Dr. Wong knew that patients with chronic lung disease whose oxygen level is low at rest live longer if they go on oxygen continuously. There were no definitive studies in literature showing long-term benefits if oxygen is provided to patients whose oxygen level is adequate at rest and only drops down during exercise. Furthermore, different provinces have different guidelines as to whether the [very high]

cost of oxygen should be covered and at what level. So, when new guidelines were first proposed in Alberta, Dr. Wong took the opportunity to launch an ambitious research project and observational study that will involve up to 200 research participants. Are the Alberta guidelines set at appropriate or, more importantly, optimal levels? This is the primary research question that Dr. Wong is currently studying. If they are, then Dr. Wong expects to see, in less than one year,

patients who receive an optimal level of oxygen during exercise to experience a measurable improvement in their health-related quality of life (HRQL).

More than half a million Canadians suffer from some type of respiratory disease. This research is sure to have a beneficial impact on countless numbers of people, improving their quality of life as a result.

Geriatrics

Discharge planning for elderly patients in hospitals has been a complicated but necessary activity. Shannon Daly, Clinical Nurse Specialist at the Grey Nuns Hospital, and Peggy Sawchuk, Research Nurse, have been involved in a series of research studies since 1992 to validate a discharge planning risk-screening tool. This odyssey began with an article published in the *Journal of Gerontological Nursing* by a nurse specialist, Ann Blaylock, who had developed a simple screen to determine if elderly patients were at varying degrees of risk in being discharged back to their homes following hospitalization. The tool looked simple and quick to use. In order to ensure that the tool could be used with different patient populations, validation and reliability studies were set up, such as with geriatric assessment/rehabilitation patients, elderly patients on medicine, and interdisciplinary team members as data collectors.

Highlights of the various phases of the research work:

- modifications to the original Blaylock Discharge Planning Risk Assessment Screen (BRASS) instrument
- guidelines designed and refined to accompany the modified BRASS tool
- modifications to remain a valid and reliable tool for patients admitted to a geriatric psychiatry inpatient unit
- an update to the guidelines and review of the tool's reliability and validity over time

• use in other settings such as a rural hospital



*Shannon Daly,
Clinical Nurse Specialist*

- in northern Alberta and phone instruction for tool use
- current development of a manual to accompany the tool and guidelines for ease of implementation

Statistical support was provided by Donald Shopflocher, Ph.D., a statistician with Alberta Health. Researchers were able to conduct the series of studies through the support of the Caritas Research Steering Committee and the Northern Alberta Regional Geriatric (NARG) program.

The tool has been taken through years of research and now is a reliable and valid discharge risk screen for use with elderly patients admitted to a variety of hospital settings.

Caritas Health Group FACTS

Caritas Health Group is Alberta's largest faith-based provider of health care. The organization was formed in 1992 from the merger of what are now the Misericordia and Grey Nuns Community Hospitals and the Edmonton General Continuing Care Centre. Together these facilities have served Edmonton and area for more than 100 years.

Caritas Health Group is funded by the Provincial Government through the Capital Health Authority and is a valued partner within the integrated regional health system serving Edmonton, northern Alberta and beyond. The Grey Nuns and Misericordia Community Hospitals are dynamic acute care sites and the Edmonton General Continuing Care Centre houses one of the largest continuing care programs in the region.

2001-2002 at a glance

Together, the Misericordia and Grey Nuns handled more than 105,000 emergency visits, 6,400 births, and 29,300 surgical cases
488 acute care beds; 20 enhanced subacute care beds; 22-bed palliative care hospice; 480 continuing care beds
Staff: 4,700 employees
1200 community volunteers; Caritas Volunteer Association raises funds through volunteer operations and on-site activities
Annual Budget: \$207 million

*- Annual Report to the Community 2001
For more information on Caritas Health Group, please contact us for a copy of the 2002 Annual Report to the Community.*

Caritas Research Steering Committee

Caritas Research Steering Committee (CRSC) plays a key role in facilitating ethical, innovative research within Caritas. The CRSC, chaired by Dr. G.F. MacDonald, is responsible to the Caritas Senior Executive Team, and ensures a relationship with the Hospital Foundation. The Steering Committee is comprised of representatives from medicine, nursing, pharmacy, health records, ethics, law, finance, hospital administration and the community, and has liaison representation on the University of Alberta Health Research Ethics Board (HREB). Working subcommittees are organized from time to time as necessary and may include members from outside the CRSC.

The Caritas Health Group, through the Research Steering Committee, works collaboratively with the Capital Health Authority, the University of Alberta and the Northern Alberta Clinical Trials and Research Centre to advance education and research.

'To actively work as part of community; break new ground; teach and support research for greater service; embrace change with hope, courage, creativity and a commitment to service.'

- Caritas Vision presentation 2001

Caritas Research Centre

Works with the research network to encourage and facilitate implementation of research findings related to evidence based research and best practice

Facilitates a research network within Caritas of established and potential researchers (e.g., clinical nurse specialists) and beyond Caritas in the broader regional community

Promotes regular forums (discussion groups, workshops) to encourage the development of research ideas

Provides methodological consultations in study design

Works closely with health information analysts over issues of privacy and confidentiality of patient information

Ensures efficient processes for study reviews and approvals

Facilitates follow up with, and assistance to, researchers in the community on behalf of the Caritas Research Steering Committee

Receives requests for funding and other resource support according to established criteria

Maintains a data log of ongoing research in and associated with Caritas sites

Helpful websites...

Capital Health:

<http://www.cha.ab.ca>

Health Canada:

<http://www.hc-sc.gc.ca>

Health Ethics Guide:

<http://www.chac.ca>

Health Information Act:

<http://www.health.gov.ab.ca/key/keyhipa.htm>

Health Research Ethics Board:

<http://www.HREB.ualberta.ca>

Did you know?

- Caritas has members on both panels of the Health Research Ethics Board (along with Capital Health, University of Alberta and the community)
- Ethics approval is required for all research studies occurring on our sites
- The Finance Office, Treasury & Risk Management division [Edmonton General site] conducts a 'research contracts and legal review' on behalf of Caritas
- The Research Office [Misericordia site] is a central repository for all approved research and grant applications with Caritas.



For more information, contact the Research Centre at:
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