

RESEARCH CHALLENGE 2024



BC MENTAL HEALTH
& SUBSTANCE USE SERVICES
Provincial Health Services Authority

Guidelines and Process

Both clinical staff and patients have incredible insights into gaps and needs in their program areas. However, many clinical staff do not have the capacity, time, or resources to engage in conducting research to inform and improve practice and policy-making. Enabling clinical staff to conduct research in which they are the end users allows them to fully participate in the cycle of moving research into practice.



The Research Challenge presents a unique opportunity for clinical staff and patients at BCMHSUS to work with others to develop and complete a research project that is relevant to them and the work they do. Successful applicants will receive education and training in research methods and design, mentorship, and funding (e.g., to backfill their time). Through this process, participants are able to develop their knowledge of research and promote evidence-informed practice. The Research Challenge is primarily for clinical staff at BCMHSUS who do not normally conduct research and have minimal research experience. Other BCMHSUS staff or researchers connected to BCMHSUS through research in other programs may be involved through mentorship to research teams.

A. Research Teams and Eligibility

A Research Team must have at least 5 participants: a Team Leader, at least two other staff team members, a patient partner, and a team mentor.

- The Team Leader can be any BCMHSUS clinical staff who does not normally conduct research for their job.
- We encourage those with more research experience to participate as Mentors as part of the Research Team.
- Patient engagement will be with a person with lived/living experience (i.e. patient partner) of the research topic of interest. This connection should be formed by the team. Patient engagement is expected for all projects and is required for developing a funding proposal.
- If a group does not have a patient partner or mentor prior to NOI submission, we can assist in matching teams with the needed team members.

TEAM LEADER

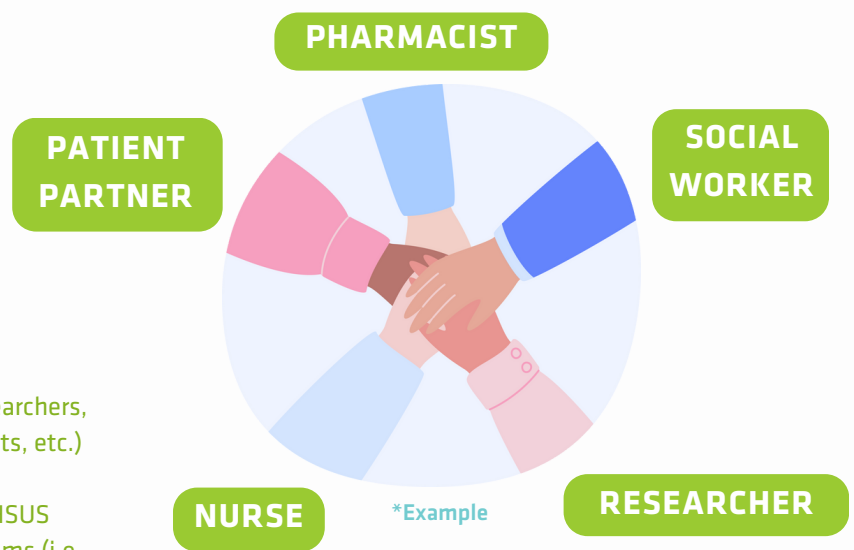
- BCMHSUS direct care provider
- 1.0 FTE, permanent
- Employed >1 year

TEAM MEMBER(S)

- BCMHSUS staff
 - 0.5+ FTE, permanent
- Patient partner

TEAM MENTOR

- BCMHSUS Researcher (e.g., researchers, trainees, physicians, psychologists, etc.) that regularly conduct research
- Researchers connected to BCMHSUS through research in other programs (i.e. UBC, SFU, BCCA, VCH, WHRI, etc.)

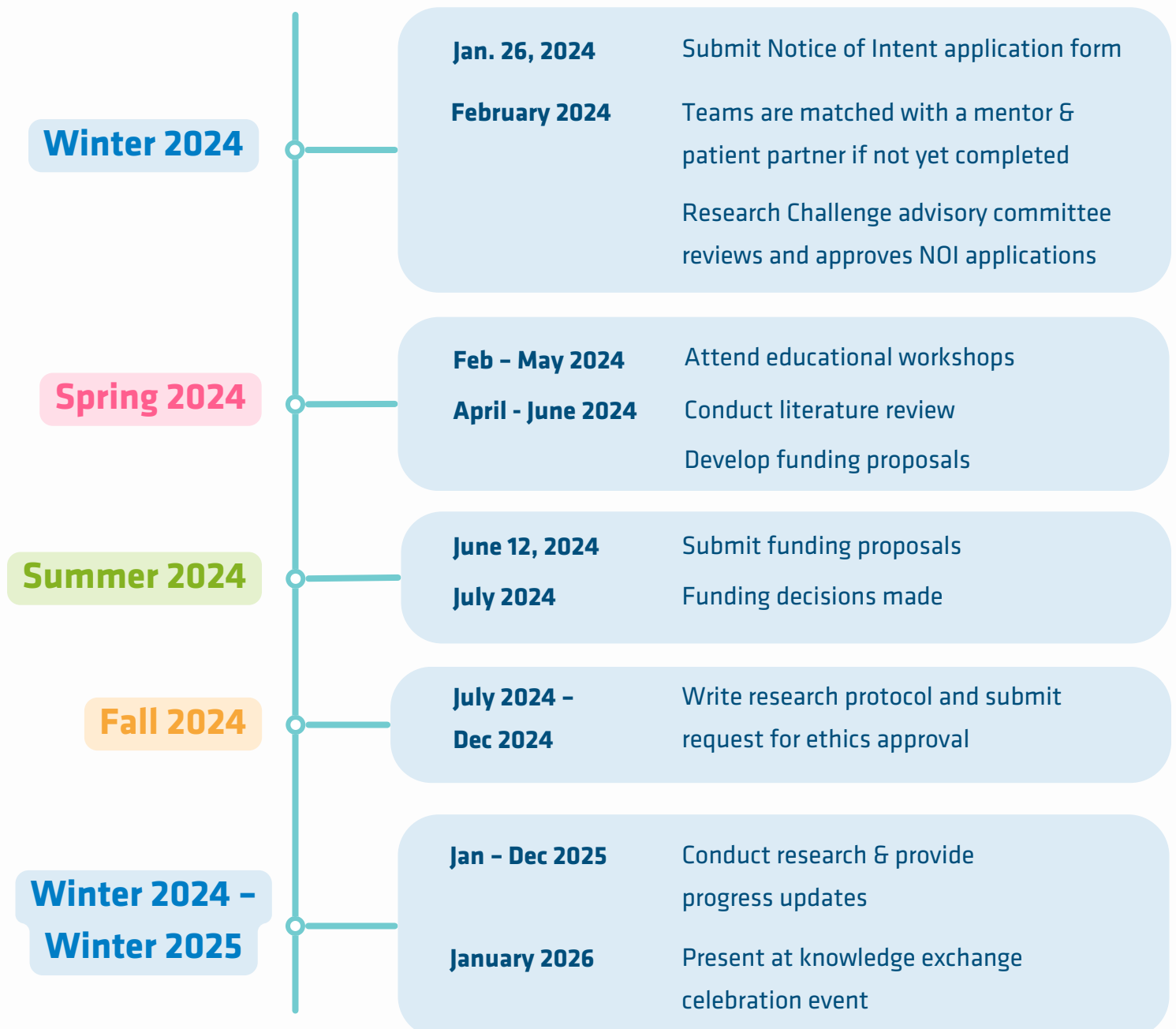


B. Timeline

The process begins with individual clinical staff forming teams of three or more to submit a Notice of Intent (application) that outlines their research question of interest, as well as the Team Leader and Manager's approval. The Research Challenge Advisory Committee will then evaluate the Notice of Intent based on criteria such as relevance to BCMHSUS directional priorities, innovation, and potential for positive impacts on our policies, practices and patient care.

Successful applicants to the Research Challenge will be required to participate in workshops, conduct a literature review, and develop a funding proposal. Workshop lengths & dates will be arranged in collaboration with the research teams once teams are formed.

Funded Research Teams will have approximately 12 months to complete their research. Below are important dates:



C. Patient Partnership & Engagement

- Engagement with patients, and their families and/or caregivers as partners throughout the research process enables the production of research findings that are relevant, accessible, and catered to the target patient population.
- Also known as patient & family partners, people with lived/living experience of mental health and substance use challenges, forensic services, and/or incarceration are able to be directly involved in the research process, from planning the research question to presenting findings, rather than as study “subjects.”
- Through a patient-oriented research approach, research is being conducted ‘with’ or ‘by’ patients rather than ‘for’ them.

Substance use research, similar to other forms of research, has typically been conducted without the involvement of people who use(d) substances. Failure to include people with lived/living experience can intensify stigma as well as fail to address the key issues that are important to the population or a specific community.



D. Learning Outcomes & Evaluation

To sustain and improve the Research Challenge, we need the help of all participants to complete self-assessments of their knowledge, attitudes and ability to conduct and apply research. We will conduct interviews and/or focus groups after participants complete the research challenge.

Evaluation Time Points

Knowledge, Attitudes, & Practices Survey

Baseline

Following acceptance into the Research Challenge

Midpoint

After participation in workshops and submission of funding proposals

Endpoint

When funded research projects are completed

Interviews or Focus Groups

Post-Research Challenge

Conducted with participants in funded teams and their managers & mentors

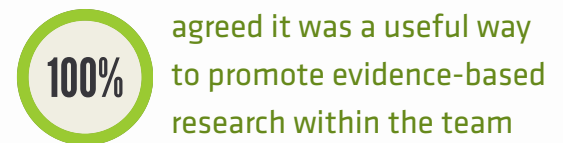
E. Examples & Impacts of Research Challenge Projects

The Research Challenge has been implemented in other health authorities, including those in British Columbia and elsewhere. Organizational champions of the Research Challenge have evaluated the program and published key findings on clinical and professional impacts.

Clinical & Professional Impacts of the Research Challenge

(Black et al., 2019)

"I really encourage anybody who is thinking about it to give it a try because I think it is a great experience and an excellent opportunity to really change practice in a way that is meaningful for staff and for patients and families."



The Research Challenge at Providence Health Care has led to a better understanding of many practice gaps as well as improvements in care. These have resulted in, for example, new procedures, treatment regimens or improved quality of life in patients.

Examples of Past Research Challenge Projects at



Understanding impacts of patient engagement on recovery

Understanding the impact of patient engagement on personal recovery for youth with lived experience of mental illness.

Impact of clinician training workshops for nurses

Discerning the impact of a Serious Illness Conversation Guide training workshop for nurses in the Intensive Care Unit: A randomized control trial feasibility study.

Leisure in Seclusion at Forensic Psychiatric Hospital

Understanding the benefits of leisure for people living in seclusion at a forensic psychiatric hospital.

Can you hear what I hear?

Exploring patient perception on the use of a sound device to help people living with auditory hallucinations share their experience with health care providers tasked with assessing mental status.

Relationship Attachment Styles as a Prediction of Burnout in Forensic Psychiatric Inpatient Staff

Exploring trauma and attachment patterns in direct care providers in a tertiary mental health setting, & implications for trauma informed practice.