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CONFERENCE ABSTRACT

Advancing Integrated Care through Embedded Research: Early Lessons from Two Canadian Training Programs

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Patrick Feng[1,2], Ross Baker[1], Meghan McMahon[1,3]

1: University Of Toronto, Canada
2: OCAD University
3: Canadian Institutes of Health Research

Introduction: Research plays an important role in supporting integrated care (IC). However, IC networks may lack the capacity to leverage research. Moreover, many health system organizations (HSOs) struggle to identify and implement relevant research in a timely fashion.

Embedded research is a promising strategy to align data with system priorities, increase the relevance and timeliness of evidence, and build capacity to conduct and use research. This study reviews two Canadian postdoctoral training programs that embed researchers in HSOs. We describe the programs, report on early lessons learned, and discuss implications for IC.

Background:

•IC is a priority in many Canadian jurisdictions. For example, Ontario Health Teams (OHTs) were introduced in 2019 to organize care in a more integrated way.

•Embedded research requires different skills than traditional research. In response, new training programs have developed such as the Health System Impact Fellowship (HSIF) and the OHT Impact Fellows (OHTIF) programs.

Aims: This paper describes the HSIF and OHTIF models and presents early lessons learned. Through surveys, program data, and interviews with participants, we identify key challenges and opportunities. Combined with insights from program leads, we provide an in-depth look at the design and implementation of these programs and how embedded research can support IC initiatives.

Highlights: The HSIF program was launched in 2017 and has embedded more than 200 fellows in over 100 HSOs across Canada. Host organizations determine research priorities and are matched with fellows. Distinctive features include a focus on impact-oriented research, co-supervision with health system and academic leaders, professional development, protected time for academic research, and a national cohort that fosters networking and collaboration. Promising outcomes include advancement of HSO goals, increased system capacity for research, and enhanced leadership skills and early career success among fellows.

The OHTIF program is modeled on HSIF and places researchers directly in OHTs where they support local projects and learning across organizations. Launched in 2021, the program saw strong demand from OHTs and trainees interested in IC research. Distinctive features include its focus on IC, intensive training activities, and ongoing mentorship for fellows. Early feedback is promising but

also suggests areas for attention, including the unique needs of rural and remote regions and the multiple, often competing demands that fellows encounter.

Both programs involve patients and caregivers on their advisory panels and offer training in patient engagement.

Conclusions: Embedded research is a promising strategy to support IC and health system research. Data from two Canadian training programs show strong interest from HSOs keen to embed research talent within their teams, and from applicants interested in using their research skills to address real-world challenges. Early evidence also highlights the importance of matching, onboarding, and ongoing training for fellows, mentors, and host organizations to build a high-performing embedded research workforce.

Implications: Our experience suggests embedded research programs provide important benefits both in augmenting the research and evidence translation capabilities of HSOs and in providing valuable training experiences for fellows, augmenting the research and evaluation skills gained in their graduate education.