

UVic Health Sciences Initiative

“Advancing Lifelong Health for All”

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Health Sciences Initiative (HSI)

Purpose: Enhance the quality and raise the profile of health research and academic programming at UVic

Process: Work being advanced by an advisory group, which will produce a concept paper in spring 2019

- Launched with two events for Deans and Associate Deans / Research Centre Directors
- Executive support
- Joint initiative by VPAC and VPR
- Alignment with Strategic Framework, Strategic Research Plan, and other institutional plans



HSI Advisory Group Members

- Lisa Kalynchuk, OVPR
- Tony Eder, VPAC
- Bruce Wright, DMS
- Chris Goto-Jones, HUMS
- Scott Hofer, IALH/SOSC
- Caroline Cameron, SCI
- Alex Brolo, CAMTEC/SCI
- Karen Urbanowski, CISUR/HSD
- Nick Dechev, ENG
- Francis Lau, HSD
- Ryan Rhodes, EDUC
- Charlotte Loppie, HSD
- Mike Masson, SOSC
- Robin Syme, CanAssist
- Jennifer Vornbrock, VPER

Andrea Knittig, OVPR
Kaitlyn Roland, OVPR
Ased Said, VPAC



HSI Pillars

Recommendations will be organized within 4 pillars:

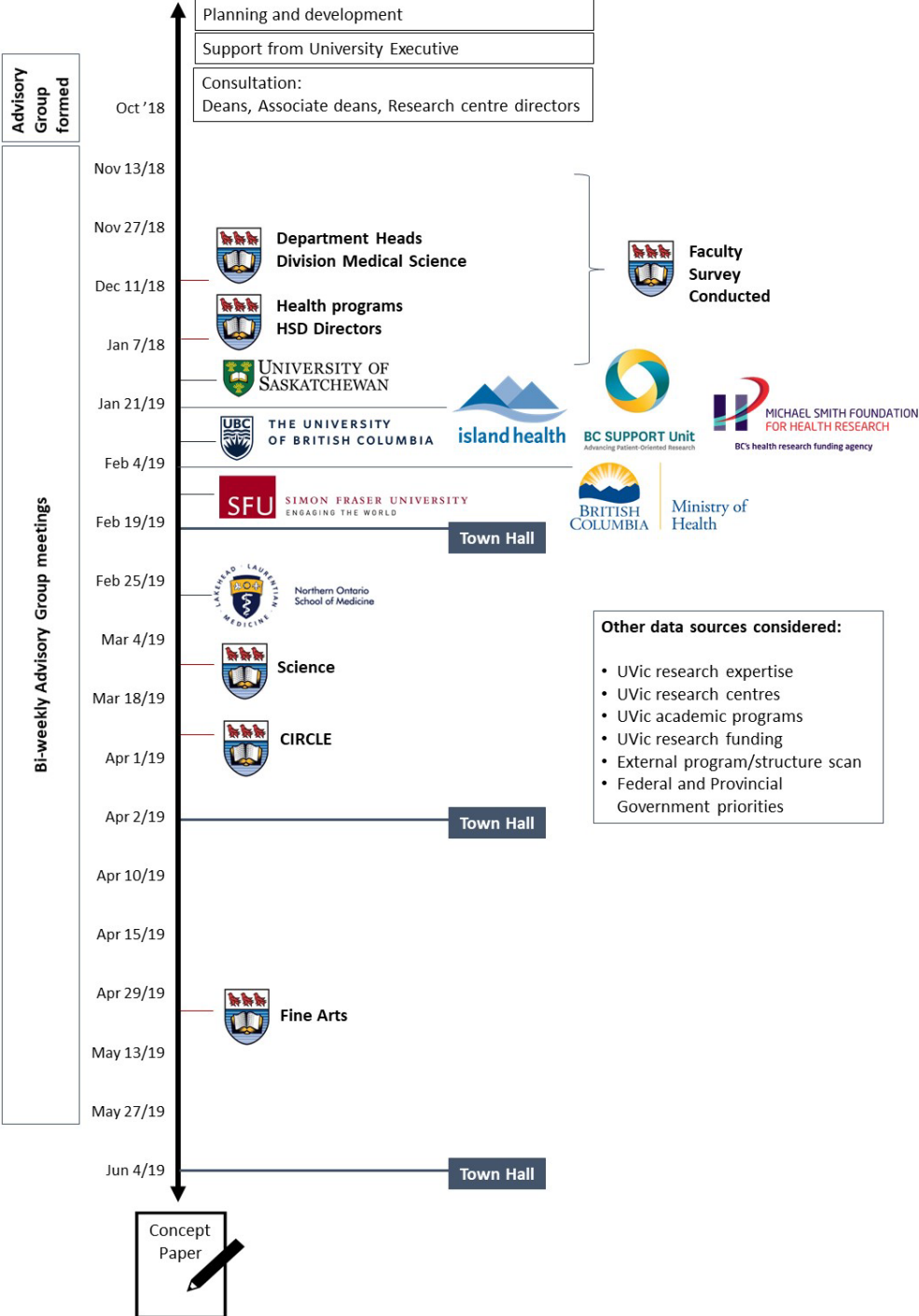
- Research Priorities
- **Academic Programs**
- **Structures**
- **Space / Infrastructure**

And three timelines:

- **Short term (1-2 years)**
- **Medium term (3-5 years)**
- **Long term (6-10 years)**

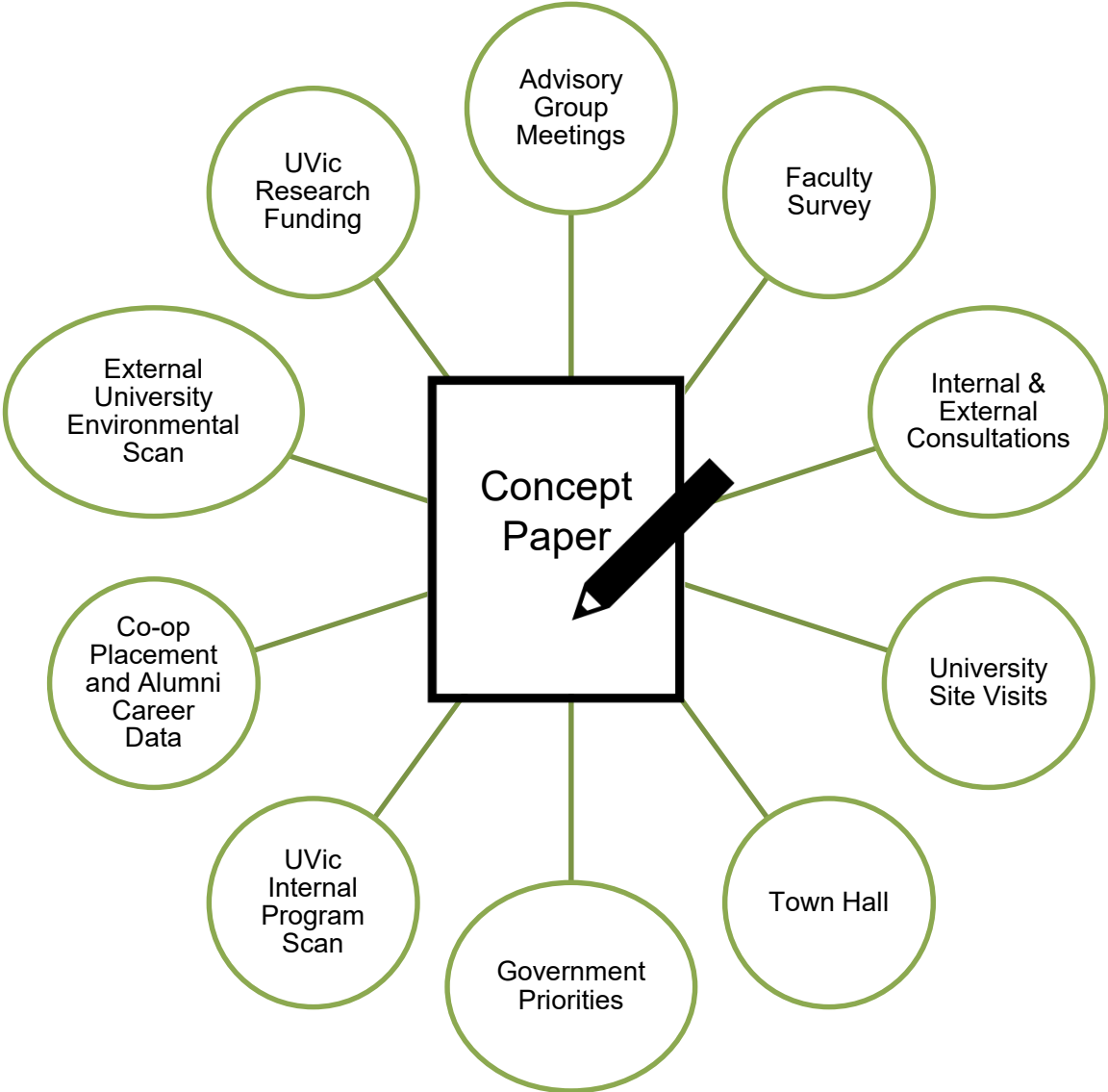


HSI Process

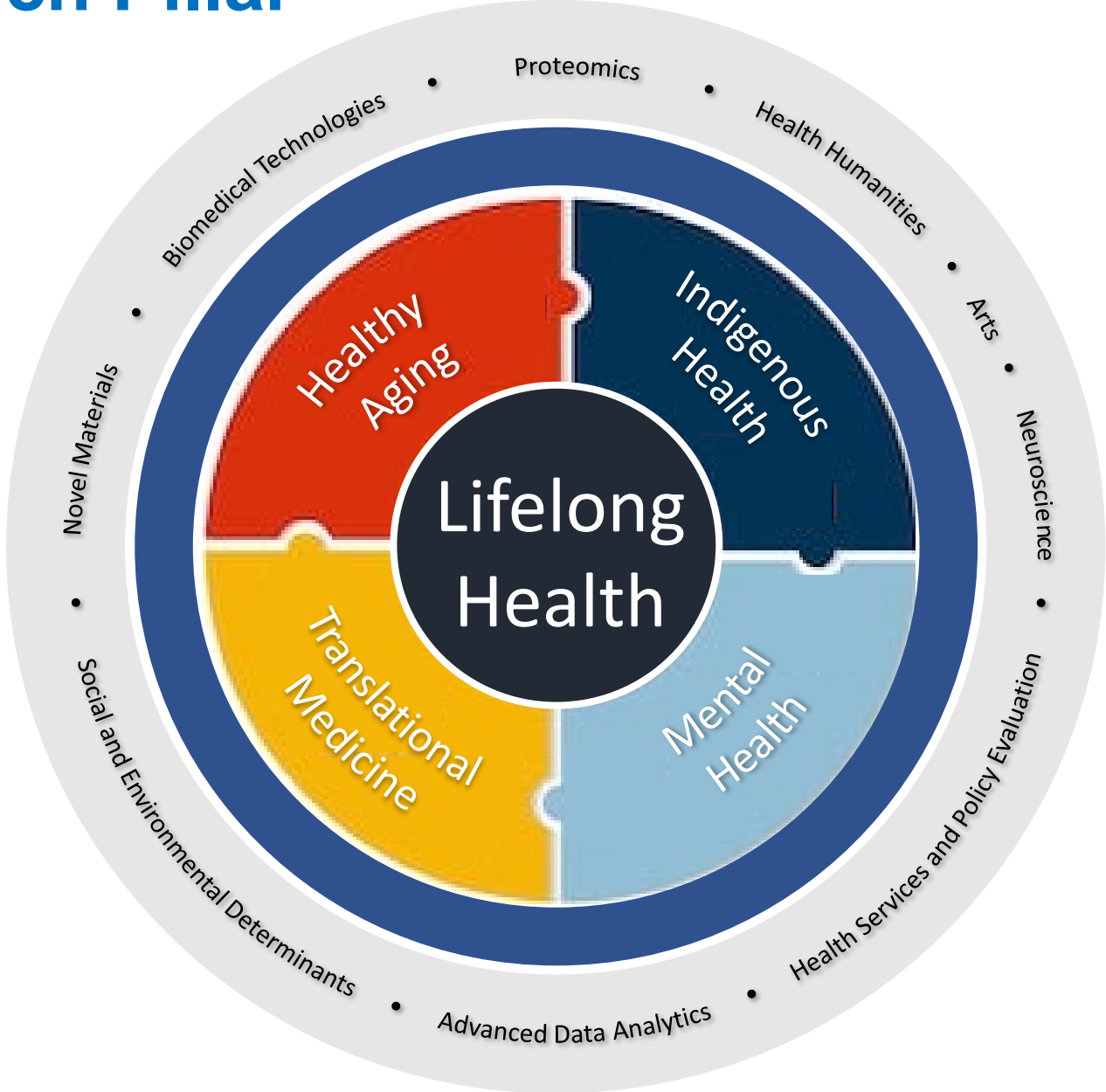


HSI Data Sources

The concept paper is the **intention** to move forward -- both a roadmap and the start of a conversation



The Research Pillar



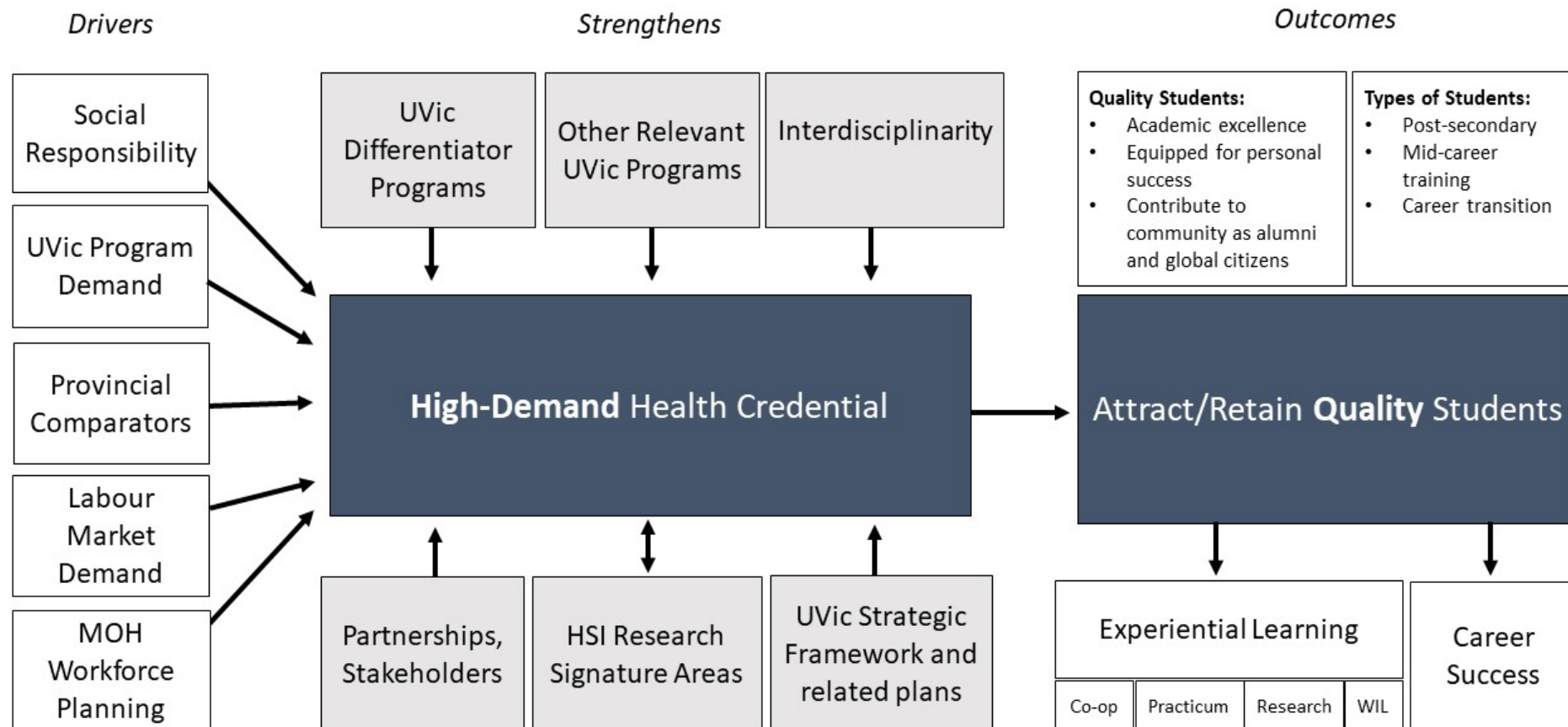
The Research Pillar: Measuring Success

- A primary measure of success will be an increase in CIHR **funding revenue**, from <1% to closer to 3% (within 5 years).
- This initiative will create a shift toward **valuing the collective**, in addition to traditional research metrics, including building relationship with community, building collaborative and interdisciplinary activities and research teams on campus, advocating for services and policy and implementing changes in practice. This will also build support for research outputs from publications to artistic contributions.
- Another important marker of success will be the establishment of our **“Health” brand**, as measured by external surveys and social media buzz.
- Growth in our health profile will contribute to an increased number of **first choice faculty hires** and **top trainees**.



The Program Pillar

Recommending principles to define health programming at the University of Victoria: interdisciplinarity and opportunities for collaboration; high quality students and programming; alignment with research strengths; and, a focus on experiential learning that supports students' academic and personal success.



The Program Pillar: Current Programs

Students at UVic already enrol in a range of high quality undergraduate and graduate health programs in the Faculties of Science, Social Sciences, Education, and Human and Social Development and the Division of Medical Sciences.

These programs provide direct pathways to a wide range of outcomes including post-graduate studies, medical education, professional education and post-graduation employment in health fields.

Biology	Psychology	Chemistry	Nursing	Biochemistry
Exercise Science	Kinesiology	Health Info Science		Public Health
Biomedical Engr	CYC	Social Work		Microbiology
Physics	Neuroscience	Soc. Dims Health		Medical Physics
Chem for Medical Sci	Others			

The Program Pillar: Current “Differentiators”

- Differentiators provide an **opportunity to build on our strengths**.
- Current programs that **differentiate** the University of Victoria from local comparators are:
 - Unique to UVic
 - In high demand
 - Build partnerships
 - Meet labour market needs

Current Differentiator programs include:

- Biomedical Engineering (BEng)
- Chemistry for Medical Science (BSc)
- Health Information Science (BSc, MSc, PhD)
- Medical Physics (MSc, PhD)
- Social Dimensions of Health (MA, MSc, PhD)
- Others

Differentiator content and attributes include:

- Indigenous-focused program streams
- Experiential Learning
 - Co-op and practicum
 - Work-integrated learning (WIL)
 - Honours research



The Program Pillar

Some of the questions that the Advisory Group considered

- How do we satisfy the strong demand for health programs?
 - Currently that demand is largely met through self-designed programs (biology, psychology, chemistry)
 - Are we successfully advertising and communicating our health programs? Can we do better?
- How do we build on existing program strengths and ensure alignment with research strengths? What differentiates UVic?
- How do we demonstrate positive outcomes for all students – as one example: those who gain acceptance to medical school and those who do not.
 - What are the pathways?
 - How do we communicate those outcomes? (Student stories?)
 - How do we guide students?
- What advantages do experiential education and WIL bring to our programs?

The Program Pillar

Existing opportunities underway

Current expansions:

- Health Information Science (funded UVic/BCGov)
- Nurse Practitioner and Advanced Nurse Leadership (funded BCGov)
- Biomedical Engineering (funded BCGov)
- direct-entry EPHE Kinesiology (BSc) and RHE (BA)

Fill in gaps that draw on **labour market and program demand** and **social responsibility**

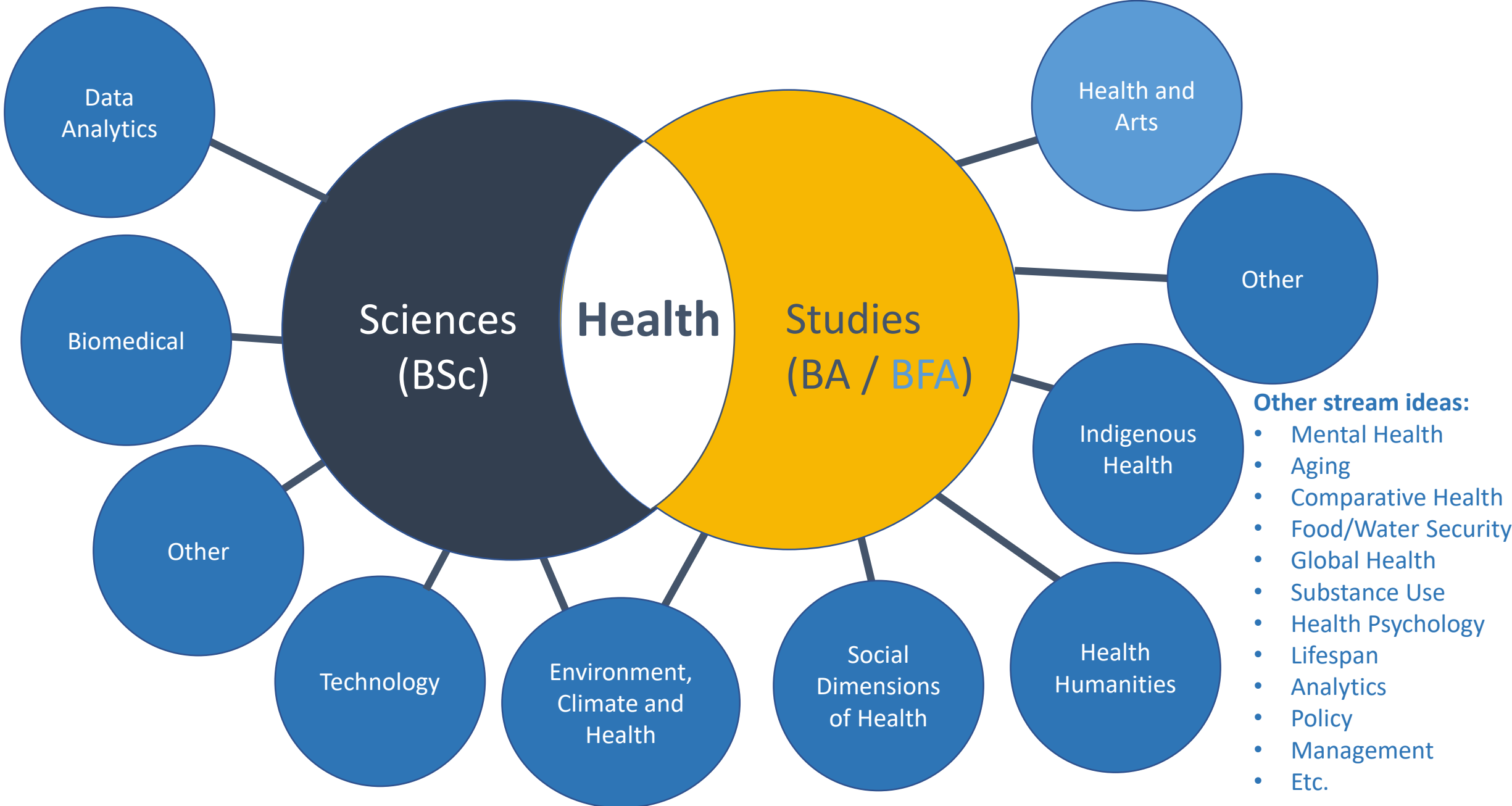
Possible **new** opportunities

- Health Humanities – minor
- Health and Society – expand to major
- Health and Community Services – re-focus
- Biomedical Engineering graduate programs (MEng, then MASc, PhD)
- Others?

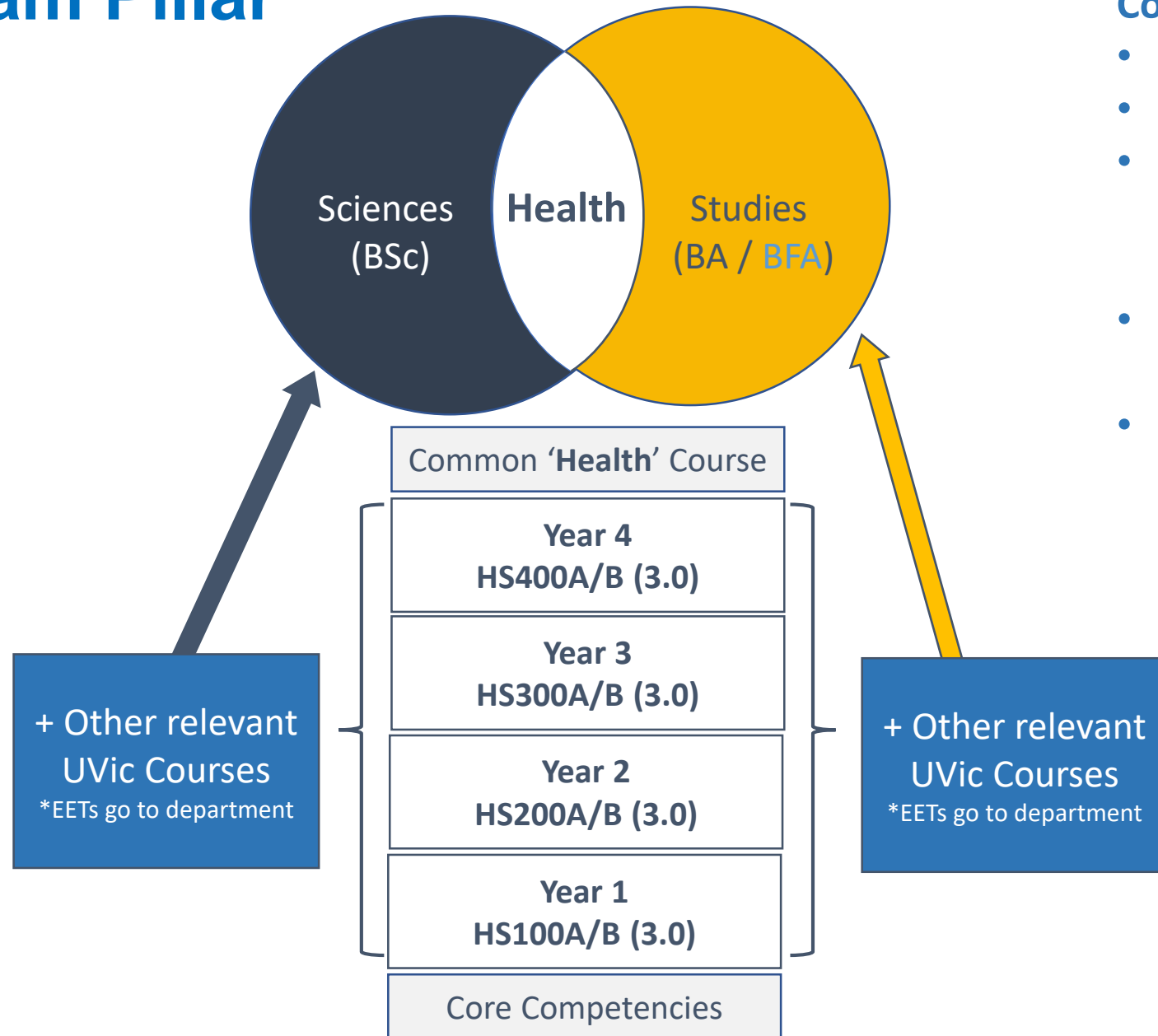
Is there an opportunity for a **new interdisciplinary program?**

- BSc in Health Sciences, BA/BFA in Health Studies
- Streams informed by signature research areas
- Capitalize on existing courses with a new health sciences course each year as the “glue”
- EETs stay with departments offering courses

The Program Pillar



The Program Pillar



Common Courses:

- Year 1: Survey course
- Year 2: Methods
- Year 3: Research Themes Topics
- Year 4: Honours
- Co-op work-terms



The Program Pillar: Resources

- How can we strengthen and scale existing programs?
 - Advertising, communications, recruitment, web resources
 - Demonstrable outcomes
- What resources and supports are needed?
 - Preserving existing EETs, even grow
 - Resources to strengthen existing programs, planned expansions, and new programming opportunities



The Program Pillar: Support Strategies

Short term
1-2 years

- Work with existing programs to explore health branding and marketing opportunities
- Develop and implement health programs communications plans
- Consider alignments with HSI Research Pillars
- Implement planned expansions (HIS, BME, Kine, NP)
- Form BSc/BA/BFA health programming planning group
- New BSc/BA/BFA health program to senate
- Look at leadership, advising, teaching and research capacity for new programs
- Develop community partnerships through co-op (i.e., FNHA, VIHA, PHSA, BC Cancer)
- Work with government on PT/OT academic and clinical opportunities at UVic
- Work with Ministries on supporting health human resourcing needs through program expansions (eg NP)
- Explore UVic graduate program opportunities for IMP MD students



The Program Pillar: Support Strategies

Medium term 3-5 years	<ul style="list-style-type: none">• Develop BSc/BA/BFA program proposal(s); seek approvals• Launch BSc/BA/BFA Health programs• Develop community partnerships through co-op (i.e., FNHA, VIHA, PHSA, BC Cancer)• Launch new grad programs aligned with research pillars• Seek donor funds for graduate student fellowships in health sciences
Long term 5-10 years	<ul style="list-style-type: none">• Scale BSc/BA/BFA and graduate health programs



The Structures Pillar: Research Centres and Clusters

- A conduit to **raise the profile** of health research at UVic
- Encourage **collaboration** between faculty members and research centres
- Effective way to support interdisciplinary research

Cluster

- Focuses on one topic
- No policies
- Easily formed, adaptable
- Few resources
- May not contribute to reputation
- Can make quick progress
- No student support
- People want to work together
collaboration

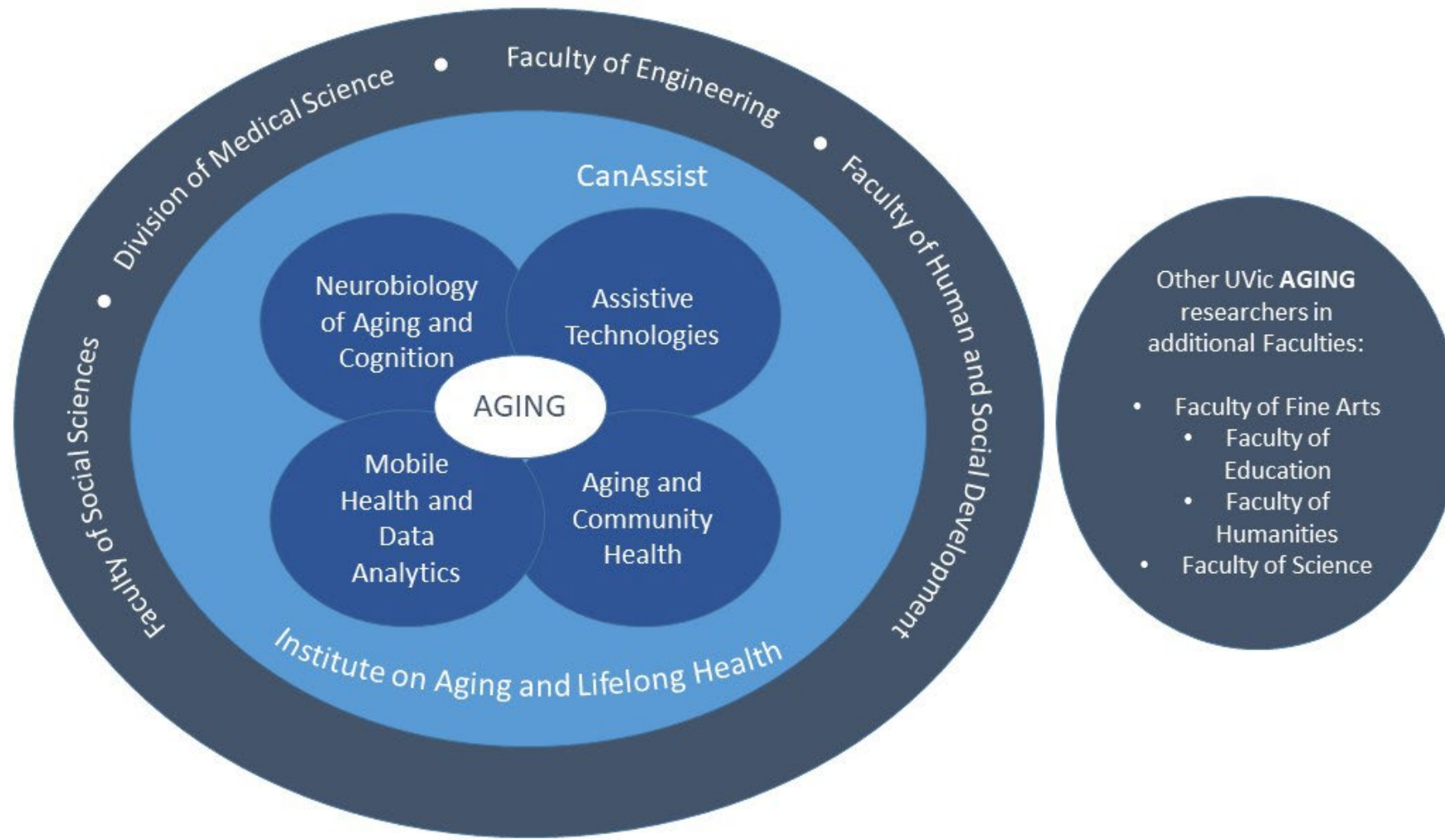
Centre

- Broad mandate
- Senate approved
- Long standing
- Existing funding and easier to protect time
 - Should enhance brand
- Variable progress
- Student affiliates
- Often gaps in expertise that impede



The Structures Pillar: Research Centres and Clusters

- **Opportunities** for clusters have been identified in the area of aging, proteomics, neuroscience, material science and global health.
- For example, current CRC Tier 2 recruitment into aging cluster:



The Structures Pillar: Institutional Partnerships

Some examples of future opportunities;

- Island Health Clinical Research Institute Partnership
 - Housed at DMS (resourcing, funding, structure, governance to be discussed)
- BC Cancer Agency
- Proteomics (UBC)
- Healthy Aging (UBC)
- Stem Cell (SFU)
- Health Authorities (FNHA, PHSA)
- Build relationships in our own backyard (data commons, civic hub, digital supercluster)



The Structures Pillar: Health at UVic

Health research and programming are spread across the university

Are there advantages to creating something more visible for health?

For example, where to situate BSc/BA/BFA Health programming?

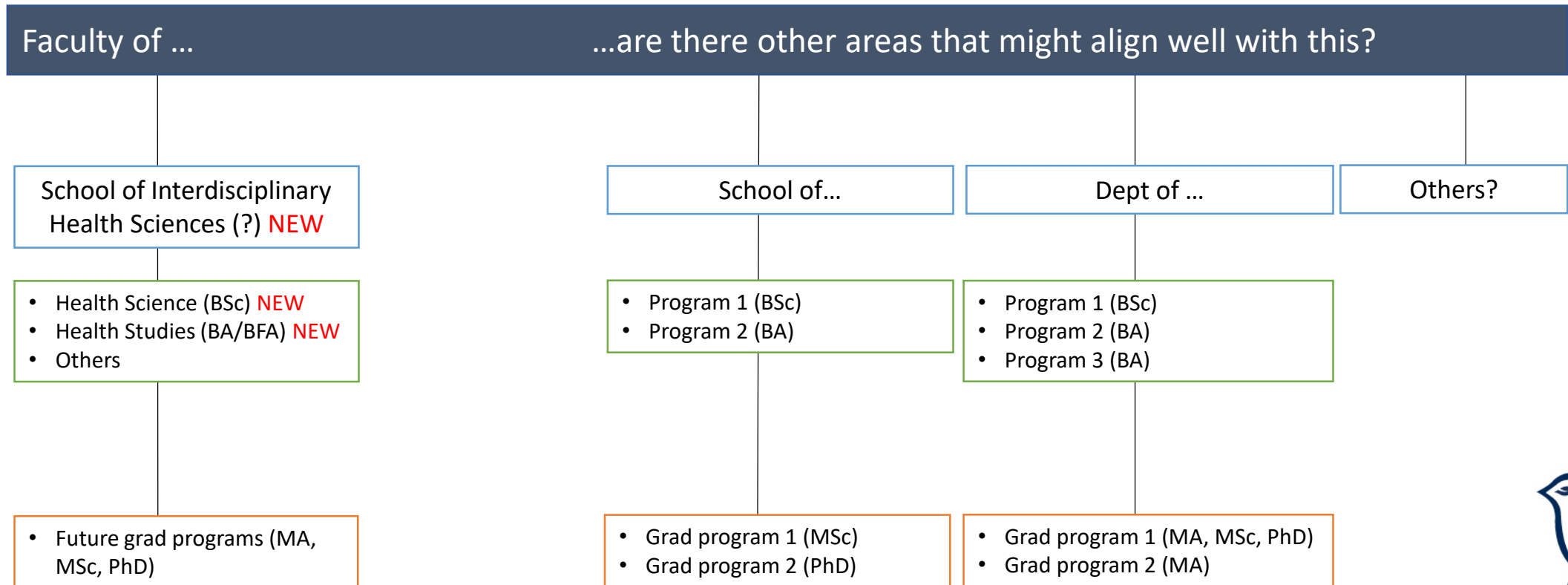
We have not unlocked the secret to being successful in INTD – what should we do?

Would we consider opportunities to align other departments and/or programs across campus?

Would we consider opportunities to better align with research centres/clusters?

The Structures Pillar: Health at UVic

- What should we do?



The Structures Pillar: Support Strategies

Short term 1-2 years	<ul style="list-style-type: none">• Expand research mandate for IALH• Consider proposal to merge CAMTEC and CFBR• New leadership for CISUR• Develop new financial sustainability model for centres and incentivize engagement• Support aging cluster and pursue opportunities for other clusters• Pursue opportunities within digital supercluster• Advance institutional partnerships
Medium term 3-5 years	<ul style="list-style-type: none">• Continue to invest in research clusters• Advance institutional partnerships
Long term 5-10 years	<ul style="list-style-type: none">• Align changes within structures pillar with outcomes from infrastructure pillar (capital)



The Infrastructure Pillar

Research space

BME research labs
Level 2 Labs
Proteomics, 'omics
Shared labs
Centres
Public Health

Research platforms

Meta data repository, data commons, biobank
Mobile health

Academic space

PT/OT
NP
HIS
KIN
Classrooms
Faculty offices
Grad student space

Infrastructure partnerships

Pop data BC
Health data coalition
Industry collaboration (i.e., CAMTEC model)



The Infrastructure Pillar: Capital Planning

- Is there a need for **multidisciplinary spaces** to align activities across Faculties and units, promote collaboration, promote sharing of resources (such as labs) and shared platforms for research.
- Could this include **expanding/extending current spaces** for research centres, lab space, programming or **building new** interdisciplinary research building.
- Can government priorities help with space? (i.e. PT/OT expansion)
- Some possibilities for creating appropriate space

Example #1: Expanding Space

- Allows inter-professional education opportunities across professional programs
 - “Train together, work together” reflects implementation
 - IMP, HINF, Nursing, PH, Others?
- Considers animal care, biosafety and equipment needs and space

Example #2: Interdisciplinary Space

- Flexible and shared spaces
- Facilitates the collision of research ideas and opportunities
- Enables engagement
- Spaces for Centres



The Infrastructure Pillar: Support Strategies

Short term 1-2 years	<ul style="list-style-type: none">• Open conversation about creating shared “platforms” for research• Conversations at Deans’ Council on the “types” of spaces required in the future (rather than ownership)
Medium term 3-5 years	<ul style="list-style-type: none">• Consider a Clinical Innovation Hub to bolster research links with Island Health• Start a funding campaign for capital and research support
Long term 5-10 years	<ul style="list-style-type: none">• Continue to implement a capital plan to increase research and meeting space



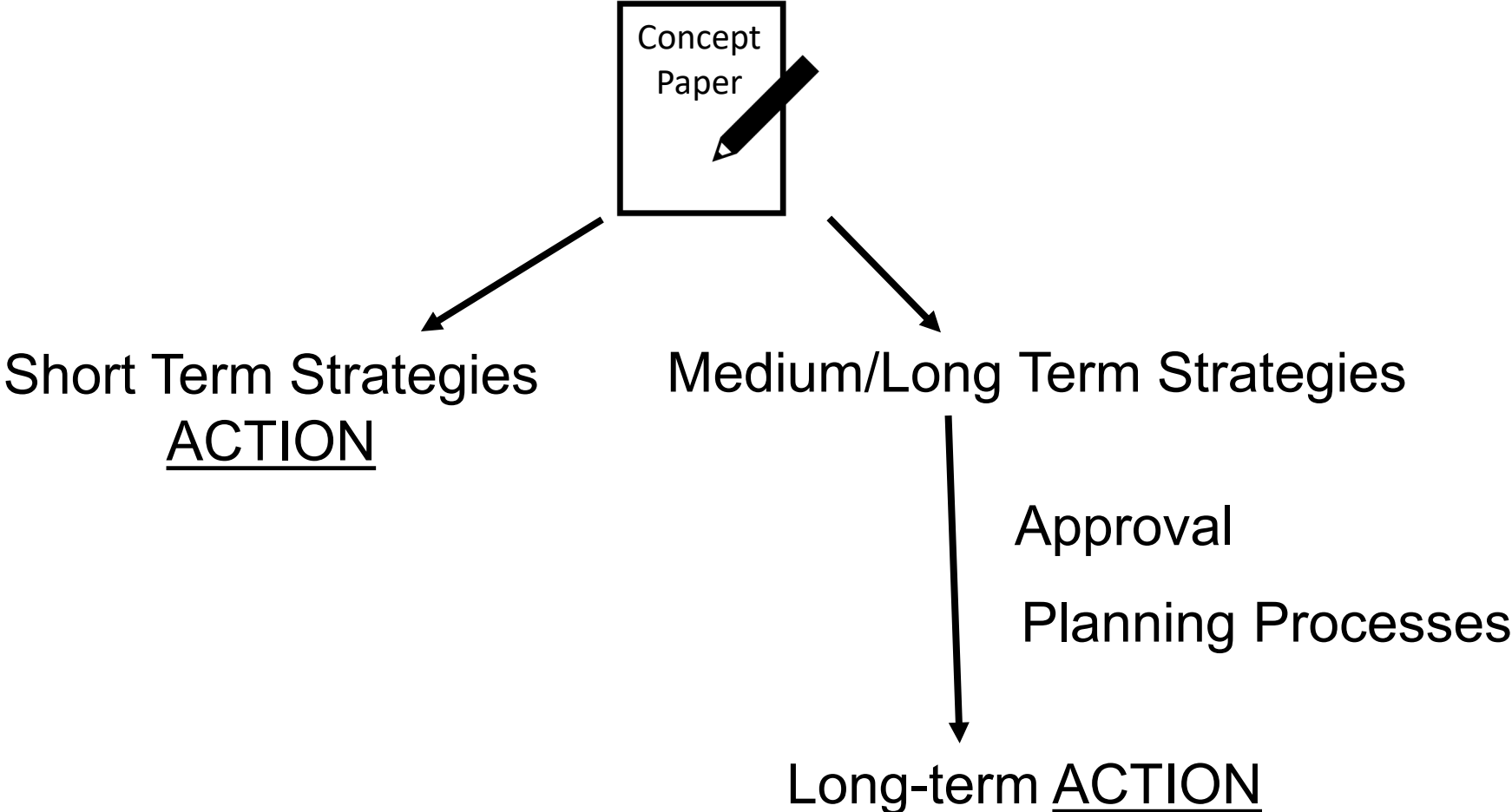
Leadership and Governance

- Academic and administrative leadership over HSI as a whole
- See this at the level of the university (institutional initiative)
- Joint with VPAC and OVPR – Special Advisors?

- Recommend a series of working groups for individual pillar-specific activities
- For example,
 - Research
 - Programs and curriculum
 - Capital planning



HSI Next Steps...



Concept paper and next steps

- Concept paper to Executive in June / July
- Endorse direction with Senate and Board of Governors
- Extensive consultations on recommendations throughout fall 2019
 - Deans' Council, Faculty councils, RAC, COCD, Senate, BoG, Centres
- Set up working groups in early 2020
- Advance short term recommendations and plan for medium and long term recommendations
- Budget for some activities – would need to identify resources for others



Questions?

Feedback?

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