



BACKGROUND/CONTEXT:

The University of Manitoba, Department of Family Medicine (DFM) has embraced the objectives of several initiatives that promote scholarship including the CanMedsFM roles, Patient Medical Home, Blueprint for Research 2018-2023 and the Practice Improvement Initiative¹. In order to achieve meaningful gains implementing and supporting these initiatives, the DFM must have strong infrastructure to utilize tools and methodologies that enable quality improvement (QI) and research in primary care.

In recognition that successful implementation requires strong engagement with those involved in the work, the DFM Office of Research and QI will include specific structures to facilitate this. This document lays out the structure of the DFM Research and Quality Improvement Steering Committee and two Advisory Committees - one for Research and one for QI. These committees will be led by the Director of Research and Quality Improvement, the Associate Director of Research and the Associate Director of Quality Improvement.

The overarching goal of this new structure is to nurture a culture of curiosity. The specific mission of the DFM Office of Research and QI is to support the following objectives:

- Increase research productivity and innovation in primary care settings by building capacity and engagement with relevant stakeholders and champions.
- Build capacity and engagement in QI and activities informed by implementation science in primary care settings.
- To support discovery, innovation and successful implementation of evidence in primary care settings.

DFM RESEARCH & QI STEERING COMMITTEE:

- 1. PURPOSE:** Provides leadership on scholarly activities² within the DFM and facilitates the coordination of DFM-led research and QI activities in Manitoba.
- 2. REPORTING:** The Chair reports to the DFM Executive Management Committee.

¹ http://umanitoba.ca/faculties/health_sciences/medicine/units/family_medicine/about/index.html

² See Appendix A for Definitions of Scholarly Work & Activity

3. FUNCTIONS: The Steering Committee shall:

- Work collaboratively to set objectives and make decisions to advance research and quality improvement within DFM affiliated sites and advance the strategic plan for research/QI in the DFM.
- Review, evaluate, and provide guidance on matters related to QI, research and scholarly activity in the DFM, and/or involving DFM members.
- Share resources, identify opportunities for cooperation and promote collaboration among existing and potential projects.
- Advise on financial resources available, including identifying and developing additional resources.
- Seek advice and input from the appropriate Advisory Committee (Research, Quality Improvement) on matters, as applicable.
- Establish and update research and QI policies for the DFM as required.
- Propose requirements for resident training in research and scholarly activity to the DFM Postgraduate Education Committee.
- Coordinate activities related to the delivery of the scholarly activity curriculum in coordination with the DFM Postgraduate Education Committee.
- Maintain meeting minutes to describe activities, deliberations and document decisions.

4. MEMBERSHIP:

- Director, Research & QI (Chair)
- Associate Director QI
- Associate Director Research
- QI Facilitator
- Research Facilitator
- DFM Research Office Assistant

** The Chair has discretion to extend membership to additional individuals as needed.*

5. TERM: Committee membership is continuous and based on positions/roles identified above in section 4. The Committee shall review membership every 5 years or as position/roles change to ensure effective representation and sustainability.

6. MEETINGS: The Committee shall meet quarterly. The Chair maintains discretion to call Ad Hoc meetings as needed. Meeting dates will be set at the outset of the academic year and a schedule provided to all members. The Family Medicine Office Assistant assigned to Research, will record meeting minutes. 3 days prior to all scheduled meetings, members will receive meeting packages including the Agenda for upcoming meeting and minutes of the previous meeting.

7. QUORUM: Quorum of 50% + 1 is required to make decisions. Whenever possible, the Committee will decide matters though reaching a consensus. If the Committee is unable to reach a consensus, a vote will decide the matter.

- 8. REVIEW:** Terms of reference are reviewed every 5 years, or as deemed necessary by the DFM Research & QI Steering Committee and approved by DFM Executive Management Committee.

DFM RESEARCH ADVISORY COMMITTEE:

- 1. PURPOSE:** Provides advice to the DFM Research & QI Steering Committee to support the mission of increasing research productivity and innovation in primary care settings by building capacity and engagement with relevant stakeholders and champions.
- 2. REPORTING:** The Chair reports to the DFM Research & QI Steering Committee
- 3. FUNCTIONS:** The Research Advisory Committee shall:
 - Inform, advise and assist on matters related to research and other scholarly activities in primary care and/or related areas of expertise.
 - Provide input on planning, implementation and/or other matters as requested by the Steering Committee.
 - Contribute to the development and sustainability of this Committee Advisory
- 4. MEMBERSHIP:** The DFM Research & QI Steering Committee will select members from among staff and faculty who express interest or have Research training or experience. At minimum membership should include:
 - Associate Director of Research (Chair)
 - Director, Research & QI
 - Associate Director QI or *Designate*
 - Research Facilitator
 - Two Family Physician Faculty with contracted research time
 - One Family Medicine Resident
 - Two Inter-professional Faculty from Rady Faculty of Health Sciences
 - DFM Research Office Assistant

**** The Chair has discretion to extend membership to additional individuals as needed.***

- 5. TERM:** Committee membership is continuous and based on positions/roles identified above in section 4. The Chair shall review membership every 5 years or as position/roles change to ensure effective representation and sustainability.
- 6. MEETINGS:** The Committee shall meet quarterly. The Chair of DFM Research & QI Steering Committee maintains discretion to call Ad Hoc meetings as needed. Meeting dates will be set at the outset of the academic year and a schedule provided to all members. The Family

Medicine Office Assistant assigned to Research, will record meeting minutes. 3 days prior to all scheduled meetings, members will receive meeting packages including the Agenda for upcoming meeting and minutes of the previous meeting. Additionally, members may be asked to form project-related working groups.

7. **QUORUM:** N/A – The Advisory Committee provides information, advice and assistance to the DFM Research & QI Steering Committee, as required.
8. **REVIEW:** Terms of reference shall be reviewed every 5 years, or as deemed necessary by the DFM Research & QI Steering Committee.

DFM QI ADVISORY COMMITTEE:

1. **PURPOSE:** Provides advice to the DFM Research & QI Steering Committee and supports the ongoing success and coordination of the post-graduate Quality Improvement curriculum. Supports the mission to build capacity and engagement in QI and activities informed by implementation science in primary care settings.
2. **REPORTING:** The Chair reports to the DFM Research & QI Steering Committee
3. **FUNCTIONS:** The QI Advisory Committee shall:
 - Inform, advise and assist on matters related to QI and other scholarly activities in primary care and/or related areas of expertise.
 - Supports the Associate Director of QI's responsibility to ensure consistency and success of the resident QI curriculum at all DFM training clinics.
 - Provide input on planning, implementation and/or other matters as requested by the Steering Committee.
 - Contribute to the development and sustainability of this Committee
4. **MEMBERSHIP:** The DFM QI Advisory Committee will select members from among staff and faculty who express interest or have QI training or experience. At minimum membership should include:
 - Associate Director QI (Chair)
 - Director, Research & QI
 - Associate Director Research or Designate
 - QI Facilitator
 - DFM training site QI leads (one per site)
 - One Family Medicine Resident
 - Two Inter-professional Faculty
 - DFM Research Office Assistant

**** The Chair has discretion to extend membership to additional individuals.***

5. **TERM:** Committee membership is continuous and based on positions/roles identified above in section 4. The Chair shall review membership every 5 years or as position/roles change to ensure effective representation and sustainability.
6. **MEETINGS:** The Committee shall meet quarterly. The Chair maintains discretion to call Ad Hoc meetings as needed. Meeting dates will be set at the outset of the academic year and a schedule provided to all members. The Family Medicine Research and QI Office Assistant, will record meeting minutes. 3 days prior to all scheduled meetings, members will receive meeting packages including the Agenda for upcoming meeting and minutes of the previous meeting.
7. **QUORUM:** N/A – The Advisory Committee provides information, advice and assistance to the DFM Research & QI Steering Committee, as required.
8. **REVIEW:** Terms of reference are reviewed every 5 years, or as deemed necessary by the DFM QI Advisory Committee and approved by DFM Research & QI Committee.

Appendix A: Definitions of Key Terminology³

Research, Scholarly Work and Creative Activities include:

- 1. Publications:** Include original articles, reviews, case reports, books, book chapters, monographs, technical reports, published abstracts. Consideration should be given to the quality and impact of publications. Recognizing that publications may be multi-authored, it is important that each researcher describe their actual contribution to the research and its publication.
- 2. Research grants and contracts:** Include international, national and regional granting bodies, industrial and local sources. All grants submitted, whether funded or not, should be recorded. In cases where there is more than one applicant, the role of the individual on the project should be indicated. While all sources of funding are valued, consideration should be given to research grants and research contracts.
- 3. Peer-reviewed salary awards:** Include national, provincial, local salary awards. These awards will constitute strong recognition of the faculty member's research, scholarly work and creative activities.
- 4. Patents and licenses:** As with publications, these are recognized as valuable outcomes of research, scholarly work and creative activities.
- 5. Scholarly awards and recognition:** Depending on the criteria, these may provide evidence of the faculty member's research, scholarly work and creative activities.
- 6. Presentations and meetings:** Visiting professorships and contributing to meetings, which may include lectures, presented abstracts, chairing sessions and organization, will be considered recognition of the faculty member's research, scholarly work and creative activities.
- 7. Service on research evaluation or advisory committees:** These committees may include research grant panels, site visits, editorial boards, academic meeting program committees and advisory committees on research matters. Although this overlaps into the area of service, being asked to serve on review bodies is generally recognition of one's research, scholarly work and creative activities.
- 8. Supervision of research trainees:** Faculty members are expected to be involved in the supervision of undergraduate, graduate or postgraduate trainees. Trainee awards reflect the quality of the supervisor's program of research, scholarly work and creative activities.
- 9. Knowledge synthesis:** Includes formal scholarly review of existing knowledge leading to reports, policy change, the development of clinical practice guidelines, or advancement in education scholarship. This requires an intensity of work and hours of commitment not reflected in the publication or grants categories.
- 10. The design, implementation and evaluation of educational innovation:** Includes activity enhancing pedagogical advances such as leading or participating in the design, implementation and evaluation of innovative teaching methods, and creation of tools or programs to further student and faculty development efforts. The activities will have been publicly shared, critiqued, and reviewed according to accepted standards. It also may include the development of educational workshops, web-based courses, curricular enhancements or standards for application and participation on educational accreditation committees.
- 11. Dissemination and engagement with community and other stakeholders:** Includes knowledge translation and exchange outside academia.

³ Developed for the Dean's office by a working group with representation from all Rady Faculty of Health Sciences Colleges. Reviewed/approved at RFHS Faculty Executive Council – June 18, 2019

