

Course Guide for

SPH 566 Special Seminars: Fundamentals of Patient-Oriented Research (3 credits) [Spring 2023]

May 8-June 14, 2023

(ONLINE: A minimum of five hours of synchronous webinars, plus 30 hours of asynchronous online modules and other activities)

Instructors:

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The School of Public Health both acknowledges and pays tribute to the traditional territories of the peoples of Treaty 6, which includes the Cree, Blackfoot, Métis, Nakota Sioux, Iroquois, Dene, Ojibway, Saulteaux, Anishinaabe, Inuit, and many others whose histories, languages, and cultures continue to influence our vibrant community.

Course Description [U of A Calendar]	This course explores research design principles, concepts, and applications of patient-oriented research. Emphasis is on developing an understanding of research methodologies that bridge the gap between research and practice, and of the theoretical and practical implications of patient-oriented research. This area of research is an emerging trend in health research, and is being impelled by CIHR's national Strategy for Patient-Oriented Research (SPOR). CIHR has defined patient-oriented research as a continuum of research that engages patients as partners, focusses on patient-identified priorities and improves patient outcomes (CIHR, 2014). The course is aimed at new health sciences investigators who have an interest in conducting patient-oriented research, and provides a critical bridge between general research skills and the particular challenges and theoretical underpinnings of patient-oriented research.	
OVERALL PURPOSE	The goal of this course is to foster discussion and encourage students to explore the theoretical and practical implications of patient-oriented research. Students will develop a successful patient-oriented research plan on a research topic of their choice. As a result of this course, students will become contributing members to the advancement of patient-oriented research in Canada.	
Course Format	The Fundamentals of Patient-Oriented Research course will be offered online and includes weekly synchronous online classes (with guest speakers), eLearning modules, asynchronous webinars, and weekly opportunities for online discussions. There will also be required readings and assignments.	

Student Learning
Outcomes

(Competencies - knowledge, attitudes or skills)

The assigned readings, online asynchronous and synchronous sessions, guest speaker presentations, and assignments will help students:

- 1. (KNOWLEDGE) Explain the societal, theoretical and practical implications of patient-oriented research, including:
 - The value of patient-oriented research to society, health care and health research
 - The historical and philosophical underpinnings of patient-oriented research internationally and in Canada
 - Theories supporting the wider use of patient engagement in health care
 - The challenges and benefits to conducting patientoriented research
- 2. (SKILLS) Build skills and develop practical strategies for conducting patient-oriented research, including:
 - Design and implementation of a patient engagement plan
 - Team-building and communications within a research team
 - Knowledge translation, systematic review and meta-analysis and their application to patientoriented research and influencing health care policy
 - Strengths and weaknesses of different research paradigms and methodologies for patient-oriented research
 - Design and management of research projects
- 3. (ATTITUDES & SKILLS) Analyze and critically review real examples of patient-oriented research in Canada and other healthcare systems.

	4. (ATTITUDES & SKILLS) Use critical thinking to apply knowledge and skills gained in the course to their own patient-oriented research project.			
Learning Resources	All required materials are made available through E-class. Lecture notes, reading materials and links to online modules and webinars. will be provided.			
	There will not be a textbook assigned. However, it is expected that students will have read the assigned readings ahead of each module so that they are prepared to use them to inform discussions during class.			
Library	The University of Alberta library system's website www.library.ualberta.ca details the range of services offered to students on and off campus.			
Final Course Evaluation	Following completion of the course, you will receive a standardized summative evaluation. Course evaluations will be done online by Test Scoring and Questionnaire Services. An invitation to participate in the survey is emailed to each student. One email will be sent for each start date, i.e., if a student has surveys courses? with different start dates, they will receive multiple messages. Note that the message includes a login button.			

Student Evaluation & Grading

The final grade in SPH 566 will be credit or no credit. Evaluation will be both formative and summative.

- **Formative evaluation.** Feedback will be provided throughout the course through online discussions and comments on the various assignments/activities.
- **Summative evaluation**. Grades reflect the judgments of students' achievements made by the course facilitator(s). To obtain a grade of "credit" you must achieve a cumulative grade of no less than a B-. A grading guide is included in Appendix A.

	Assessment at a Glance			
Assessment Mechanism (e.g., Exam, Quiz, Paper, Presentation, Participation) (How the student learning outcomes will be assessed)	Weight (%)	Date of Assessment (i.e. grade will be provided to student by this date)	Student Learning Outcomes Assessed (Knowledge, Attitudes, Skills)	
Reflective journal with two entries every week	100%	Weekly (Due Friday of each week)	Analytical skills, knowledge of patient- oriented research.	

Assignments:

Reflective journal:

This is a weekly assignment that has two parts. Both PART A and PART B must be completed each week for this assignment:

- 1. PART A: Every week, choose one item/activity from the **asynchronous module** (<u>either</u> an online eLearning module, video recording, or podcast). Write a 200-word reflection on:
 - o how and why it inspired you to conduct patient-oriented research OR
 - how it did not align with your growing understanding of patient-oriented research and what you might have done differently.
- 2. PART B: Every week, choose one academic article from the required readings in the **synchronous module**. Write a 200-word summary of what you learned in this article to enhance your understanding of patient-oriented research. Explain how you might apply lessons learned to your own research. The reflection should include the following:
 - 2-3 sentence summary of the article
 - lessons you learned about patient-oriented research
 - how you will apply what you learned.

The reflections are due on the Friday of each week, to be submitted via eClass.

The University of Alberta Grading System

Grades reflect judgments of student achievement made by instructors. These judgments are based on a combination of absolute achievement and relative performance in a class. See Appendix A.

Academic Integrity	Plagiarism is a serious offence.		
(see Appendix B)			
	The University of Alberta is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the University of Alberta's Code of Student Behaviour and avoid any behaviour which could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.		
Student Accessibility Services	Students registered with <u>Student Accessibility Services (SAS</u>) who will be using accommodations in the classroom are required to provide a "Letter of Accommodation" to the course instructor as soon as possible. You are encouraged to make an appointment with the course instructor to discuss any required accommodations.		

PRE-COURSE

MODULE 1 (Asynchronous): Course Introduction

Video (Required):

1. Welcome video (link to be added)

WEEK 1

MODULE 2 (Asynchronous): Introduction to patient-oriented research & SPOR

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Define and describe patient-oriented research and patient engagement;
- Describe the value and evolution of patient roles in health research;
- Identify the purpose and types of health research and how patient-oriented research relates to each;
- Explain the influence of CIHR's Strategy for Patient-Oriented Research (SPOR) on Canadian health research;

Readings (Required):

- 1. Richards T, Montori VM, Godlee F, Lapsley P, Paul D. Let the patient revolution begin. BMJ. 2013:346:f2614.
- 2. CIHR website pages describing SPOR

Activities (Required):

- 1. [eLearning Module] Introduction to Patient-Oriented Research
- 2. [Podcast] PEP talks: Episode 5 Strategy for Patient-Oriented Research with Nancy Mason MacLellan

WEEK 1

MODULE 3 (Synchronous): Why patient-oriented research? Facilitator(s): Dr. Dean Eurich, Kelli Buckrues

Live Webinar: Monday, May 8th @ 1:00pm MT | Zoom link provided in eClass

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Analyze the theoretical underpinnings of patient-oriented research;
- Assess the ethical considerations of patient-oriented research;
- Assess the strengths, limitations and challenges of patient-oriented research;
- Review stages of research study and reflect upon patient engagement roles at each stage.

Readings (Required):

- 1. Frank L, Basch E, Selby JV, Patient-Centered Outcomes Research Institute. The PCORI perspective on patient-centered outcomes research. JAMA. 2014;312(15):1513-4.
- 2. <u>Madden M. Beware Zombies and Unicorns: Toward Critical Patient and Public Involvement</u> in Health Research in a Neoliberal Context. Frontiers in Sociology 2017;2(June):1-6.
- 3. <u>Ives J, Damery S, Redwood S. PPI, paradoxes and Plato: who's sailing the ship? J Med Ethics.</u> 2013;39(3):181-5.

Supplemental Resources/Activities (Optional):

- 1. [Video] Everyone Has a Story
- 2. Pauly, B., Urbanoski, K., Hartney, E., Shahram, S., Marcellus, L., Wallace, B., ... & Hancock, T. (2019). What is missing from "Patient-Oriented Research?" A view from public health systems and services. Healthcare Policy, 15(2), 10.

WEEK 2

MODULE 4 (Asynchronous) - Foundations of Patient Engagement

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Describe mechanisms for health system transformation stemming from the individual actions of and relationships among patients, family caregivers, clinicians, non-clinician health workers, etc.
- Identify examples of individual actions that can lead to ripples of change, both at point of care and with patient engagement.

Activities (Required):

1. [eLearning Module] Foundations of Patient Engagement

Videos/Podcast (Required: Choose one of the following):

- 1. <u>Two-Eyed Seeing: Considerations in the Health-care Setting</u>
- 2. Connect Care from the Patient's Perspective
- 3. Storytelling for Impact: Focusing on Moments of Care
- 4. PEP Talks Podcast: Episode 2 Patient Partners with Sandra Zelinski
- 5. N of 2: Transforming Health Systems Through Individual Action
- 6. Tokenism in Patient Engagement

Supplemental Resources/Activities (Optional):

1. [eLearning Module] Patient Partner Engagement in Health Research - (This module was created to provide basic skills and knowledge to patients who are interested in collaborating as patient partners on research teams. The module takes about 6-8 hours to complete, so we recommend that you simply scan through the module to become familiar with the typical background patient partners will have or may need.

WEEK 2

MODULE 5 (Synchronous): Patient Engagement: Value, Levels, Methods
Guest Speaker: TBD

Live Webinar: Monday, May 15th @ 1:00pm MT | Zoom link provided in eClass

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Evaluate the benefits and challenges of patient engagement;
- Describe and distinguish between the levels of patient engagement on the IAP2 spectrum of engagement and methods of engagement;
- Review and evaluate/assess an inclusive patient engagement plan;
- Compare various patient-oriented research methods, research techniques to effectively address patient priorities;
- Review how individualizing information and electronic health can be used to understand

the patient journey across the continuum of care.

Readings (Required):

- 1. CIHR website Strategy for Patient-Oriented Research Patient Engagement Framework
- 2. <u>Manafo E, Petermann L, Mason-Lai P, Vandall-Walker, V. Patient engagement in Canada: a scoping review of the 'how' and 'what' of patient engagement in health research. Health Res Policy Syst. 2018;16(1):24.</u>
- 3. <u>Hahn DL, Hoffmann AE, Felzien M, LeMaster JW, Xu J, Fagnan LJ. Tokenism in patient engagement. Fam Pract. 2017 Jun 1;34(3):290-295. doi: 10.1093/fampra/cmw097. PMID: 27660557.</u>
- 4. Patient Engagement Assessment Tools (choose one of the following): <u>IAP2 Spectrum</u>, <u>SCPOR Patient-Oriented Research Level of Engagement Tool (PORLET)</u>, and <u>Indigenous Research Level of Engagement (IRLET)</u>

Supplemental Resources/Activities (Optional):

- 1. <u>Hamilton CB, Hoens AM, Backman CL, McKinnon AM, McQuitty S, English K, et al. An empirically based conceptual framework for fostering meaningful patient engagement in research. Health Expect. 2018;21(1):396-406.</u>
- 2. Wicks P, Richards T, Denegri S, Godlee F. Patients' roles and rights in research. BMJ. 2018;362:k3193.
- 3. Frank L, Forsythe L, Ellis L, Schrandt S, Sheridan S, et al. Conceptual and practical foundations of patient engagement in research at the patient-centered outcomes research institute. Qual Life Res 2015 May;24(5):1033-41. doi: 10.1007/s11136-014-0893-3. Epub 2015 Jan 6.
- 4. <u>Manafo E, Petermann L, Mason-Lai P, Vandall-Walker V. Patient and public engagement in priority setting: A systematic rapid review of the literature. PLoS One.</u> 2018 Mar 2;13(3):e0193579. doi: 10.1371/journal.pone.0193579. eCollection 2018.
- Bensen T. Measure what we want: a taxonomy of short generic person-reported outcome and experience measures (PROMs and PREMs). BMJ Open Qual. 2020 Mar;9(1):e000789. doi: 10.1136/bmjoq-2019-000789.
- 6. Manary MP, Boulding W, Staelin R, Glickman SW The Patient Experience and Health Outcomes., N Engl J Med. 2013 Jan 17;368(3):201-3.doi: 10.1056/NEJMp1211775. Epub 2012 Dec 26.

- 7. <u>Kingsley C, Patel S, Patient-reported outcome measures and patient-reported experience measures. *BJA Education*, Volume 17, Issue 4, April 2017, Pages 137–144, https://doi.org/10.1093/bjaed/mkw060</u>
- 8. [Podcast] PEP Talks: Episode 4 Measuring Patient Experience with Kyle Kemp

WEEK 3

MODULE 6 (Asynchronous): Secondary data research

NOTE: No Reflective Journal Assignment is required this week.

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Access Alberta SPOR SUPPORT Unit services
- Demonstrate an understanding of what secondary data is available to researchers and how to request it

Reading (Required):

1. Alberta Health Services Dataset Availability

Videos (Required):

- 1. Part 1: Where Does Health Data Come From?
- 2. Part 2: How and Where Do Health Researchers Access Data?
- 3. Part 3: How is Health Data Protected?

Videos (Optional):

- 1. Primary Uses of Secondary Use Health Care Data
- 2. Advancing the Use of Health Information in the COVID Era

WEEK 3

MODULE 7 (Synchronous): Primary data research and AbSPORU services

Guest speaker: NONE

NOTE: No Reflective Journal Assignment is required this week.

Statutory Holiday - No Live Webinar

In lieu of this week's live webinar, please watch the following video (Required):

1. Primary Data in Patient-Oriented Research and AbSPORU Services

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Understand what support services are available to researchers and research trainees (i.e., students) through the Alberta SPOR SUPPORT Unit;
- Explain different types of data and the key considerations in choosing the most appropriate data type to answer your research question;
- Explain what primary data collection is within the context of in patient-oriented research;
- Describe the advantages and disadvantages of doing primary data collection;
- Select appropriate qualitative, quantitative, and mixed-methods methods to answer your patient-oriented research question.

Readings (Required)

1. AbSPORU Research Services

Supplemental Readings (Optional):

- 1. Allemang, B., Sitter, K., & Dimitropoulos, G. (2022). Pragmatism as a paradigm for patient-oriented research. Health Expectations, 25(1), 38-47.
- 2. Rolfe, D. E., Ramsden, V. R., Banner, D., & Graham, I. D. (2018). Using qualitative health research methods to improve patient and public involvement and engagement in research. Research involvement and engagement, 4(1), 1-8.
- 3. <u>Incorporating Gender Variables into Clinical Research</u>

WEEK 4

MODULE 8 (Asynchronous): Knowledge Translation & Knowledge Synthesis (KT)

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

• Describe and define knowledge translation (KT).

- Explain the difference between integrated KT and end-of-grant KT.
- Explain the Knowledge-to-Action Cycle

Readings (Required):

- 1. Knowledge Translation. CIHR website. 2016.
- 2. Knowledge Synthesis. CIHR website. 2016.
- 3. <u>Graham ID, Logan J, Harrison MB, Straus SE, Tetroe J, Caswell W, et al. Lost in knowledge translation: time for a map? J Contin Educ Health Prof. 2006;26(1):13-24.</u>

Videos (Required):

1. Introduction to Knowledge Translation

Supplemental Resources/Activities (Optional):

- 1. Introduction to Patient Engagement & Integrated Knowledge Translation
- 2. Introduction to Knowledge Synthesis
- 3. Knowledge Synthesis as a Knowledge Translation Tool

WEEK 4

MODULE 9 (Synchronous): Learning Health Systems **Guest Speaker:** TBD

Live Webinar: Monday, May 29th @ 1:00pm MT | Zoom link provided in eClass

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Define what a learning health system is:
- Describe benefits of learning health systems for various stakeholders, including patients;
- Describe the role of patient-oriented research and knowledge translation within learning health systems;
- Describe advantageous contextual factors in Alberta that facilitate learning health systems.
- Explain the roles of patients, researchers, and health system staff in learning health systems.

Readings (Required):

1. Menear, M., Blanchette, MA., Demers-Payette, O. et al. A framework for value-creating learning

- health systems. Health Res Policy Sys 17, 79 (2019). https://doi.org/10.1186/s12961-019-0477-3
- 2. Noseworthy T. Innovation in the Canadian health system. Healthcare Management Forum. 2021;34(1):5-8. doi:10.1177/0840470420936709
- 3. <u>Kuluski, K., & Guilcher S. J. T. (2019)</u>. <u>Toward a Person-Centred Learning Health System:</u> <u>Understanding Value from the Perspectives of Patients and Caregivers. HealthcarePapers, 18(4), 36-46.doi:10.12927/hcpap.2019.26030</u>

Supplemental Resources/Activities (Optional):

- [Video] <u>Learning Health Systems: Rapidly Improving Patient Care & Workplace Satisfaction at a Lower Cost</u>
- 2. [Podcast] PEP Talks: Episode 1 Learning Health Systems with Dr. Charles Friedman
- Gould, M.K., Sharp, A.L., Nguyen, H.Q. et al. Embedded Research in the Learning Healthcare System: Ongoing Challenges and Recommendations for Researchers, Clinicians, and Health System Leaders. J GEN INTERN MED 35, 3675–3680 (2020). https://doi.org/10.1007/s11606-020-05865-4
- 4. <u>Learning Health Systems in British Columbia: Focus & Finish An Action Plan</u>

WEEK 5

MODULE 10 (Asynchronous): Equity, Diversity, and Inclusion in Patient-Oriented Research Contexts

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Define equity, diversity, and inclusion (EDI);
- Describe how patient-oriented research aligns with the principles and practices of EDI;
- Describe how a diverse and inclusive team can influences research design, processes, and outputs, and can lead to improved patient experiences and outcomes;
- Explain sex- and gender-based analysis+ (SGBA+) within the context of EDI;
- Describe the relationship between research impact and social change.

Activities (Required):

- 1. [eLearning Module] Leadership in Patient-Oriented Research: Equity, Diversity and Inclusion Principles and Practices (link to be added)
- 2. Complete one of the Harvard Implicit Bias tests at each of the following links:

- a. https://implicit.harvard.edu/implicit/takeatest.html
- b. https://implicit.harvard.edu/implicit/canada/takeatest.html

Supplemental Resources/Activities (Optional):

- 1. [Video] EDI in Research: What You Should Know
- 2. [Video] Diversity in Research Teams
- 3. [Video] Shifting the Lens on Girls' and Women's Health: Interdisciplinary Approaches & New Opportunities for Researcher Capacity Development [link to be added]
- 4. [eLearning Modules] CIHR: SGBA+ & GBA+ (Status of Women, Govt of Canada)

WEEK 5

MODULE 11 (Asynchronous): Equity, Diversity, and inclusion in Patient-Oriented Research Contexts Guest Speaker: TBD

Live Webinar: Monday, June 5th @ 1:00pm MT | Zoom link provided in eClass

Learning Objectives:

• [See above]

Readings (Required):

- 1. Best Practices in Equity, Diversity and Inclusion in Research
- 2. <u>Manohar, N., Liamputtong, P., Bhole, S., & Arora, A. (2017). Researcher positionality in cross-cultural and sensitive research. *Handbook of research methods in health social sciences*, 1-15.</u>
- 3. Hankivsky, O., Reid, C., Cormier, R., Varcoe, C., Clark, N., Benoit, C., & Brotman, S. (2010). Exploring the promises of intersectionality for advancing women's health research. International journal for equity in health, 9(1), 1-15.

Supplemental Resources/Activities (Optional):

- 1. Equity, diversity and inclusion considerations at each stage of the research process
- 2. [Video] Intersectionality and health research
- 3. Abrams, J. A., Tabaac, A., Jung, S., & Else-Quest, N. M. (2020). Considerations for employing intersectionality in qualitative health research. Social Science & Medicine, 258, 113138.

- 4. Kahn, J. M., Gray, D. M., Oliveri, J. M., Washington, C. M., DeGraffinreid, C. R., & Paskett, E. D. (2022). Strategies to improve diversity, equity, and inclusion in clinical trials. *Cancer*, 128(2), 216-221.
- 5. Bolen, S., Tilburt, J., Baffi, C., Gary, T. L., Powe, N., Howerton, M., ... & Bass, E. (2006). Defining "success" in recruitment of underrepresented populations to cancer clinical trials: moving toward a more consistent approach. Cancer: Interdisciplinary International Journal of the American Cancer Society, 106(6), 1197-1204.
- 6. <u>Jacobson, D., & Mustafa, N. (2019)</u>. <u>Social identity map: A reflexivity tool for practicing explicit positionality in critical qualitative research. International Journal of Qualitative Methods, 18, 1609406919870075.</u>
- 7. Tannenbaum, C., Ellis, R.P., Eyssel, F. et al. Sex and gender analysis improves science and engineering. Nature 575, 137–146 (2019). https://doi.org/10.1038/s41586-019-1657-6

WEEK 6

MODULE 12 (Asynchronous): Pragmatic Clinical Trials

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Explain what pragmatic clinical trials are and their role in health research;
- Examine the role of patients in pragmatic clinical trials.

Activities/Readings (Required):

- 1. [eLearning Module] Introduction to Pragmatic Clinical Trials OR [Video] <u>Introduction to Pragmatic Clinical Trials</u>
- 2. Ford I, Norrie J. Pragmatic Trials. N Engl J Med. 2016;375(5):454-63.

Videos (Required: Choose one of the following):

- 1. <u>CHANGE (Canadian Health Advanced by Nutrition and Graded Exercise) Trial</u> (Presenters: Dr. Doug Klein and Dr. Amanda Radil)
- 2. <u>Cirrhosis Care Alberta: Finding Real-World Solutions for Complex Chronic Disease</u>
 <u>Management</u> (Presenter: Dr. Puneeta Tandon)
- 3. <u>Integrated Supportive Care Initiative Creating "One: CarePath" to integrate supportive care for patients with complex chronic care needs</u> (Presenter: Dr. Sara Davison)

Supplemental Resources/Activities (Optional):

1. <u>Loudon K, Treweek S, Sullivan F, Donnan P, Thorpe KE, Zwarenstein M. The PRECIS-2 tool:</u> designing trials that are fit for purpose. BMJ. 2015;350:h2147.

WEEK 6

MODULE 13 (Synchronous): Impacts of Patient-Oriented Research & Course Wrap-up Guest Speaker: TBD

Live Webinar: Monday, June 12th @ 1:00pm MT | Zoom link provided in eClass

Learning Outcomes:

Upon successful completion of this learning unit, the student will have demonstrated the ability to:

- Explain some of the challenges of measuring the impact of patient engagement of the quality of the research on health outcomes.
- Distinguish the concepts of value, effectiveness and impact
- Explore their own views as to the merit & need for patient-oriented research

Readings (Required):

- 1. <u>Aubin, D, Hebert, M, Eurich, D. The importance of measuring the impact of patient-oriented research.</u> CMAJ 2019;191(3):E860-E864.
- 2. Esmail L, Moore E, Rein A. Evaluating patient and stakeholder engagement in research: moving from theory to practice. J Comp Eff Res. 2015;4(2):133-45.
- 3. <u>Staniszewska S, Brett J, Simera I, Seers K, Mockford C, Goodlad S, et al. GRIPP2 reporting checklists: tools to improve reporting of patient and public involvement in research. Res Involv Engagem. 2017;3:13.</u>

Supplemental Resources/Activities (Optional):

- 1. [Video] Sustaining Long-term Impact in Patient-oriented Research
- 2. Allemang, B, Sitter, K, Dimitropoulos, G. Pragmatism as a paradigm for patient-oriented research. Health Expect. 2021; 1- 10. doi:10.1111/hex.13384

- 3. Hamilton CB, Hoens AM, Backman CL, et al. An empirically based conceptual framework for fostering meaningful patient engagement in research. Health Expect 2018;21:396–406.
- 4. Carroll SL, Embuldeniya G, Abelson J, McGillion M, Berkesse A, Healey JS. Questioning patient engagement: research scientists' perceptions of the challenges of patient engagement in a cardiovascular research network. Patient Prefer Adherence. 2017;11:1573-83.

Course Planner¹: Schedule at a Glance

NOTE: All scheduled webinars take place on Mondays @ 1:00pm MT

Week	Format	Content
Pre-course	Asynchronous Module	Introduction to the course
Week 1	Asynchronous Module	Introduction to patient-oriented research & SPOR
Week 1	Synchronous Module - Webinar: May 8	Why patient-oriented research?
Week 2	Asynchronous Module	Foundations of Patient Engagement
Week 2	Synchronous Module - Webinar: May 15	Patient Engagement: Value, Levels, Methods
Week 3	Asynchronous Module	Secondary data
Week 3	STAT HOLIDAY - NO WEBINAR	Primary data & AbSPORU services
Week 4	Asynchronous Module	Knowledge Translation & Knowledge Synthesis
Week 4	Synchronous Module Webinar: May 29	Learning Health Systems
Week 5	Asynchronous Module	Equity, Diversity, and inclusion in Patient-Oriented Research Contexts
Week 5	Synchronous Module Webinar: June 5	Equity, Diversity, and inclusion in Patient-Oriented Research Contexts
Week 6	Asynchronous Module	Pragmatic Clinical Trials
Week 6	Synchronous Module Webinar: June 12	Course summary: Impacts of Patient-Oriented Research & Course Wrap-up

Course design support and resources are available from the Centre for Teaching and Learning (CTL): https://www.ualberta.ca/centre-for-teaching-and-learning/teaching-and-support-services

APPENDIX A - GRADING GUIDELINES

Letter	Descriptors	Percentag	Grade Pt	Criteria
Grade	2 cscriptors	e Guide	Value	Q1244124
Sinac		(assigned	(assigned	
		by	by U of A)	
		instructor)		
A +	Excellent	95-100	4.0	An exemplar and could be publicly presented by a leader in the field. Key health promotion values and issues are considered, and the complexity of the field is reflected as appropriate. Critical thinking is evident throughout. Literature review is appropriately thorough. Clear evidence of thoughtful analysis and synthesis (i.e., not just summary) of concepts and strategies. Theoretical concepts are integrated and applied effectively and creatively to generate implications/applications for practice and/or research. The submission is organized, clear and concise – a good read/listen - and is free of errors in composition, formatting and referencing.
A	Excellent	89-94	4.0	Evidence of the above, but not as strong in one of the essential elements (e.g., synthesis and/or critical thinking)
A-	Excellent	82-88	3.7	Evidence of the above, but not as strong in two of the essential elements (e.g., synthesis, critical thinking, implications)
B+	Good	78-81	3.3	A leader in the field could publicly present the piece after revision according to comments and further thought in some areas. The majority of the elements described above are addressed well, but further development would be required in at least one of the essential elements (e.g., values/issues, critical thinking, integration, application). The submission is organized, clear and concise – a good read/listen - and is free of errors in composition, formatting and referencing.
В	Good	74-77	3.0	Many elements are done well, but further development would be required in at least two major areas (e.g., HP values/issues, thorough

				treatment, critical thinking, integration, application).
В-	Satisfactory	70-73	2.7	Considerable revision would be required before this piece could be publicly presented by a leader in the field. Some elements are addressed thoughtfully and appropriately, but several require further attention and development (e.g., values/issues, critical thinking, integration, application, organization/presentation).
C +	Satisfactory	66-69	2.3	Demonstrates graduate level thoughtfulness and organization, but requires further attention and development in several areas.
С	Failure		2.0	The piece could not be publicly presented by a leader in the field without major rethinking and reconstruction. Does not reflect a graduate level standard of research, thought and organization/presentation.

mendments to the Code of Student Behaviour occur throughout the year. For the most recent version of the Code, visit http://www.governance.ualberta.ca/

NOTICE TO INSTRUCTORS REGARDING PLAGIARISM, CHEATING, MISREPRESENTATION OF FACTS AND PARTICIPATION IN AN OFFENCE

The U of A considers plagiarism, cheating, misrepresentation of facts and participation in an offence to be serious academic offences. Plagiarism, cheating, misrepresentation of facts and participation in an offence can be avoided if students are told what these offences are and if possible sanctions are made clear at the outset. Instructors should understand that the principles

can be avoided if students are told what these offences are and if possible sanctions are made clear at the outset Instructors should understand that the principles embodied in the *Code* are essential to our academic purpose. For this reason, instructors will be fully supported by Departments, Faculties and the University in their endeavours to rightfully discover and pursue cases of academic dishonesty in accordance with the *Code*.

At the beginning of each term, we ask you to review with your students the definitions of plagiarism and cheating. We are now also asking you to review with your students the definition of Misrepresentation of Facts and Participation in an Offence. Your co- operation and assistance in this matter are much appreciated.

30.3.2(1) Plagiarism

No Student shall submit the words, ideas, images or data of another person as the Student's own in any academic writing, essay, thesis, project, assignment, presentation or poster in a course or program of study.

30.3.2(2) Cheating

- 30.3.2(2)a No Student shall in the course of an examination or other similar activity, obtain or attempt to obtain information from another Student or other unauthorized source, give or attempt to give information to another Student, or use, attempt to use or possess for the purposes of use any unauthorized material.
- 30.3.2(2)b No Student shall represent or attempt to represent him or herself as another or have or attempt to have himself or herself represented by another in the taking of an examination, preparation of a paper or other similar activity. See also misrepresentation in 30.3.6(4).

Cheating (Continued)

- 30.3.2(2)c No Student shall represent another's substantial editorial or compositional assistance on an assignment as the Student's own work.
- 30.3.2(2)d No Student shall submit in any course or program of study, without the written approval of the course Instructor, all or a substantial portion of any academic writing, essay, thesis, research report, project, assignment, presentation or poster for which credit has previously been obtained by the Student or which has been or is being submitted by the Student in another course or program of study in the University or elsewhere.
- 30.3.2(2)e No Student shall submit in any course or program of study any academic writing, essay, thesis, report, project, assignment, presentation or poster containing a statement of fact known by the Student to be false or a reference to a source the Student knows to contain fabricated claims (unless acknowledged by the Student), or a fabricated reference to a source.

30.3.6(4) Misrepresentation of Facts

No Student shall misrepresent pertinent facts to any member of the University community for the purpose of obtaining academic or other advantage. This includes such acts as the failure to provide pertinent information on an application for admission or the altering of an educational document/transcript.

30.3.6(5) Participation in an Offence

No Student shall counsel or encourage or knowingly aid or assist, directly or indirectly, another person in the commission of any offence under this Code.

EXCERPTS FROM THE CODE OF STUDENT BEHAVIOUR UPDATED AUGUST 26, 2014 FOR REVIEW WITH EACH CLASS AT THE BEGINNING OF EVERY TERM

Procedures for Instructors Regarding Plagiarism, Cheating, Misrepresentation of Facts and Participation in an Offence

The following procedures are drawn from the *Code of Student Behaviour* as approved by GFC and the Board of Governors. The guidelines summarize what instructors must do when they have reason to believe that a student has plagiarized, cheated, misrepresented facts or participated in an offence. If you have questions about these guidelines, or about the policies, please talk with the senior administrator in your Faculty responsible for dealing with student discipline—usually an Associate Dean – or the Appeals and Compliance Officer (Appeals Coordinator), University Governance (2-2655).

30.5.4 Procedures for Instructors in Cases Respecting Inappropriate Academic Behaviour

30.5.4(1) When an Instructor believes that a Student may have committed an Inappropriate Academic Behaviour Offence [30.3.2] or that there has been Misrepresentation of Facts [30.3.6(4)] or Participation in an Offence [30.3.6(5)] in cases respecting Inappropriate Academic Behaviour in the course that he or she instructs, the Instructor will meet with the Student.

Before such a meeting, the Instructor shall inform the Student of the purpose of the meeting. In the event that the Student refuses or fails to meet with the Instructor within a reasonable period of time specified by the Instructor, the Instructor shall, taking into account the available information, decide whether a report to the Dean is warranted.

30.5.4(2) If the Instructor believes there has been a violation of the Code, the Instructor shall, as soon as possible after the event occurred, report that violation to the Dean and provide a written statement of the details of the case. The instructor may also include a recommendation for sanction.

Possible Sanctions

One or more of the following sanctions given in 30.4.3 (2) and (3) of the Code are commonly used for plagiarism, cheating, participation in an offence, and misrepresentation of facts:

30.4.3(2) a.i a mark reduction or a mark of 0 on any term work or examination for reason of Inappropriate Academic Behaviour

30.4.3(2) a.ii Reduction of a grade in a course 30.4.3(2) a.iii a grade of F for a course

30.4.3(2) a.iv a remark on a transcript of 8 (or 9 for failing graduate student grades), indicating Inappropriate Academic Behaviour, in addition to 30.4.3(2)a.i, 30.4.3(2)a.ii or 30.4.3(2)a.iii

30.4.3(3) b Expulsion 30.4.3(3) c Suspension

The following sanctions may be used in rare cases: 30.4.3(3) e Suspension of a Degree already awarded 30.4.3(3) f Rescission of a Degree already awarded

30.6.1 Initiation of an Appeal

30.6.1(1) When a Student has been found to have committed an offence under the Code of Student Behaviour or an Applicant is found to have committed an offence under the Code of Applicant Behaviour, whether or not that Student or Applicant has been given a sanction, the Student or Applicant may appeal that decision, except in the case of a decision of the Discipline Officer under 30.5.6(2)e.ii, which remains final and is not subject to appeal. In cases where a severe sanction has been recommended to the Discipline Officer, once the student receives the final decision of the Discipline Officer, the student can appeal the decisions of both Dean and the Discipline Officer at the same time. The written appeal must be presented to the Appeals Coordinator in University Governance within 15 Working Days of the deemed receipt of the decision by the Student or Applicant. The finding that an offence has been committed, the sanction imposed or both may form the basis of appeal. The written appeal must also state the full grounds of appeal and be signed by the Appellant. The appeal shall be heard by the UAB.

^{*} The Campus Law Review Committee is a standing committee of General Faculties Council (GFC) responsible for the review of the *Code of Student Behaviour* and of student disciplinary procedures.