

OFFICE OF THE VICE-PRESIDENT, ACADEMIC AND PROVOST

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MEMORANDUM				
ATTENTION	Senate	DATE	April 29, 2013	
FROM	Gordon Myers, Acting, Vice-President,	PAGES	1/1	
RE:	Academic and Provost, and Chair, SCUP Establishment of the Chronic Pain Research	Institute	(SCUP 13-24)	Berg Where is

At its April 17, 2013 meeting, SCUP reviewed and approved the proposal for establishment of the Chronic Pain Research Institute for a five year term.

### Motion:

That Senate approve the proposal for the establishment of the Chronic Pain Research Institute as an Institute for a five year term.

encl.

c: D. Gromala

# **SCUP 13-24**



OFFICE OF THE VICE-PRESIDENT, RESEARCH

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#### MEMORANDUM

ATTENTION	Susan Rhodes, Secretary Senate Committee on University Planning	DATE	November 20, 2012
FROM RE:	(SCUP) Norbert H. Haunerland Chronic Pain Research Institute	PAGES	1/1

Attached is a proposal from Dr. Diane Gromala, Canada Research Chair, School of Interactive Arts & Technology for the establishment of the "Chronic Pain Research Institute".

I recommend approval as a research Institute according to Policy 40.01. Once approved by SCUP the proposal should be sent to Senate and the Board of Governors for information.

Motion: That SCUP approves the "Chronic Pain Research Institute" as an Institute for a 5-year term.

Dr. Norbert Haunerland

Associate Vice-President, Research

Attachment

C: Dr. Diane Gromala, Canada Research Chair, School of Interactive Arts & Technology

# Chronic Pain Research Institute

# **Statement of Purpose**

As a long-term, degenerative syndrome that has come to be recognized as a disease in its own right, chronic pain is a complex phenomenon that affects at least 7 million Canadians, by conservative estimates. Chronic pain costs society, governments and families more than cancer, heart disease and HIV combined. It is a leading reason for doctor, hospital and emergency room visits, and has high rates of disability.

Chronic pain must be controlled and managed by attending to the sufferer's biological, psychological and social needs. The need for this complexity of care was recognized when chronic pain was first described following World War II in a method now termed the biopsychosocial approach. Thus, expertise from a number of disciplines is needed to address these aspects. To this end, the Chronic Pain Research Institute proposed in this document aims to bring together researchers, practitioners, sufferers (CIHR-designated "knowledge users") and caregivers in a dynamic environment that enables the exploration of multiple avenues of research, management and control of chronic pain. These avenues include technology and media development to address the psychological, social and biological aspects of chronic pain, as well as research methods and practices from evidence-based medicine, as well as methods from the humanistic and artistic domains to address the cultural aspects. Training and analyses of clinical practice are promising ways that may help create capacity for our health care system that is currently overwhelmed by the sheer demand. With our non-profit partners, advocacy will help educate the public and reduce the stigma often experienced by those who live with chronic pain.

To this end, a number of desirable outcomes can be provided by the institute:

- An environment for research in chronic pain, including, for example, the development and evaluation of new technologies for pain research, pain management and pain self-management. This can be initially built by deploying SFU SIAT's Pain Research Lab.
- A multidisciplinary community of researchers: British Columbia's progressive and vibrant community of researchers, clinicians, patients and advocates is well known by Canadian pain researchers. Indeed, the contributions of the prominent pain physicians included in the institute have been recognized by BC and Canadian pain organizations. SFU faculty (Gromala, Shaw, Bartram, Riecke, Neustaedter) have noted experience with interdisciplinary collaborations and are already engaged in research initiatives with pain experts. Their research is supported by the CRC, NCE GRAND, CIHR, NSERC, SSHRC and provincial health research grants. The proposed institute will build upon this network.
- **Expand capacity.** Currently, chronic pain overtaxes our health care system. Further, multidisciplinary approaches prove difficult to sustain. Yet our vibrant pain experts have already identified efficiencies of post-surgical care, funded by the province. By examining in- and outpatient needs, as well as ways to mobilize caregivers in allied areas, the capacity for care may be expanded in ways that benefit all Canadians.
- **Build knowledge-to-action** for the pain management community practitioners, patients, researchers. Gromala, Shaw, Lau, Negraeff, Squire, Williamson, as well as Nursing researchers at

UBC and patients in PainBC are already engaged in research initiatives that have already increased knowledge sharing capacity. The proposed institute will enable sustained research that focuses on putting research into action.

- Accelerate transfer of clinical observations to researchers, and researchers to clinicians. SFU has capacity for developing and evaluating pain management systems, as well as technical expertise that may accelerate the rates of research-to-clinical practice, and clinical observationsto-researchers. A currently funded research project is serving as an exemplar.
- **Create a research and training environment of excellence.** Gromala's Pain Research Studies Lab is accommodating much of our initial work, and will be the home of the institute. Developed and built alongside Surrey's new Gerontology Lab, it serves the needs of researchers, clinicians and knowledge users, who frequent it for Focus Groups and research meetings.
- Create training opportunities for health professionals as well as professionals whose work is closely allied with health research, such as health informaticists, health economists and medical anthropologists.

Chronic pain is a disease and complex phenomenon that affects at least 7 million Canadians, by conservative estimates. It differs from other chronic conditions such as diabetes because it is difficult to diagnose, and because treatment strategies are highly specific for each individual. In addition, less is known about why the pain response system becomes dysfunctional. Although a few biomarkers have recently been identified, chronic pain is typified by tight couplings among its physical, psychological, social and emotional aspects. Research and treatment of chronic pain therefore often uses biopsychosocial methods. Finally, chronic pain is not a well-recognized disease, resulting in frequent misunderstandings that stigmatize its sufferers. One reason for this lack of familiarity may be attributed to confusing this newly recognized syndrome with our near-universal experience of acute pain. Acute pain arises from injury or illness, and subsides as the patient heals. Chronic pain, in contrast, is defined as pain that persists for longer than six months, and beyond the time its putative cause by injury or disease has healed, if indeed a cause can be identified. Rather, chronic pain is a systemic dysfunction of the pain response system; common sequelae include anxiety, depression, insomnia, decreasing mobility, cognitive impairment and social isolation. If not properly managed, chronic pain may become degenerative, resulting in turn in disability and earlier rates of morbidity.

To date, no single treatment has proved effective in the long term. The standard treatment of opioid pharmaceuticals for chronic pain sufferers has the drawbacks of dependence or addiction, which creates a medical-legal challenge for sufferers and providers alike. Because of its complexity and varied expressions among individuals, a multidisciplinary team of health care professionals is the gold standard for pain management, yet this approach has proven difficult and expensive to maintain. The need for health professionals who treat patients with chronic pain overwhelms health care capacity. This can be observed by the long waiting times (one to four years) and by early drop out rates of pain physicians.

# Governance

The Institute is constituted as a research Institute at Simon Fraser University under the terms of SFU Policy R 40.01. It resides under the direct authority of the Vice President Research and conducts its affairs in accordance with all other University policies. The term of the Institute is five years as per SFU Policy R 40.01.

The institute is led by a Director who is appointed by the Steering Committee. Term of office for the Director shall normally be three years. An annual report on the Institute's activities and financial status from April 1 to March 31, including the current membership of the Institute and Steering Committee, will be submitted to the Vice-President Research by June 30th of each year.

# **Committees**

The Institute will have two standing committees to guide the management and establish the direction the Institute's work.

The *Steering Committee* will be comprised of members of SFU Faculty, in addition to key stakeholders in the research environments of the Institute. The Steering Committee will have at least five members, with a majority being continuing research faculty at SFU. The remaining members of the Steering committee will be drawn from stakeholder groups such as Surrey Memorial Hospital, Fraser Health Authority, and/or NGOs such as PainBC. Steering Committee members are nominated by the Director with annual confirmation by the sitting Committee members. While it normally operates by consensus, when necessary it can make decisions by majority vote, including the appointment of new members of the Steering Committee, as well as the appointment and dismissal of the Director and the Deputy Director of the Institute.

# The initial Steering Committee members

Lyn Bartram, Associate Professor, School of Interactive Arts & Technology, SFU
Diane Gromala, Professor & Canada Research Chair, School of Interactive Arts & Technology, SFU
Brenda Lau, MD, Chronic Pain Clinic, Jim Pattison Outpatient Care and Surgery Centre, Surrey Memorial Hospital
Chris Shaw, Associate Professor, School of Interactive Arts & Technology, SFU
Michael Negraeff, MD, Chairman of the Board, Pain BC Society; UBC Faculty of Medicine; VGH
Carman Neustaedter, Assistant Professor, School of Interactive Arts & Technology, SFU

The work of the Institute is guided by an *Advisory Board*, consisting of individuals with a demonstrated commitment to the challenges of Chronic Pain. Invitations to join the Board are issued by the Director of the Institute; members serve for a three-year term, renewable by invitation. The Advisory Board meets at least once each year to review the Institute's activities and plans and provide advice to the Director and Steering Committee. The Advisory Board will advise on direction of the Institute and help broaden the interests and awareness of the Institute outside of SFU.

### Initial proposed advisory board members

Kellogg Booth	Prof., UBC, Dept. Computer Science; Scientific Director, NCE GRAND
Chan Gunn, MD	Emeritus, UBC Faculty of Medicine, Anesthesiology (BC pioneer in pain mgt.)
Maria Hudspith	Executive Director, PainBC
Anne Townsend	UBC, Maurice Young Centre of Applied Ethics
Andrew R Webb, MD	Clinical Prof. UBC Faculty of Medicine; VP Medicine, Fraser Health Authority
Andrew Wister*	SFU, Chair, Department of Gerontology
Ada Glustein	CIHR-designated Knowledge User
Alison Hoens	CIHR-designated Knowledge User

The work of the Institute is supported by Affiliated Scholars and Affiliated Professionals, who may be individuals from the university and external communities, and may include faculty, staff, or students. Status as Affiliated Scholar is approved by the Steering Committee based on the recommendation of the Director.

The Institute will substantially finance its activities and initiatives by means of external funding. The Dean of FCAT has provided seed funding.

### Activities

The Institute's activities are open to all interested parties, including faculty and students from across SFU and UBC, educators, knowledge users and others outside these universities.

The Institute may sponsor and organize seminars, conferences, workshops or related events dealing with chronic pain research, knowledge translation and/or training. The events may be held on their own or in collaboration with other institutions.

The Institute will maintain a website on its activities, and may also publish a range of materials, including newsletters, conference proceedings, scholarly works, applied research and publicity materials, in a variety of media.

The Institute seeks to encourage and facilitate research and training in chronic pain research, and to that end provides opportunities and support for university faculty and students, professionals, and other interested parties. Within the relevant SFU policies and guidelines, the Institute may charge for the services it provides.

Key to the success of the initiative is the identification and inclusion of partner organizations and corporations in both the government and private sectors. These are organizations interested in expanding or building their expertise in chronic pain research, training, knowledge translation and knowledge-to-action. The Institute seeks to attract long-term funding for its activities, and will pursue such opportunities in collaboration with other organizations and/or corporations.

# Membership

The Institute will conduct its activities in accordance with University policies. Members of the Institute will normally be faculty, students, researchers, clinicians and other stakeholders who make substantive

ongoing contributions to one or more of the Institute 's research, education, service activities, or funding. Members are expected to regularly engage in events related to the Institute. The Steering Committee may establish various categories of membership in order to facilitate participation in and administration of its programs.

# Members List

# Faculty

Ellen Balka	SFU Communications, Health Communications
Ron Baecker	UToronto College of Computer Science
Lyn Bartram	SFU School of Interactive Arts & Technology
Helene Bertrand, M.D.	UBC Faculty of Medicine
Jim Bizzocchi	SFU School of Interactive Arts & Technology
Sheelagh Carpendale	University of Calgary, Dept of Computer Science
Henry Daniels	SFU School of Contemporary Arts, Dance
Margaret Dolinsky	Indiana University, Hope School of Fine Arts
Halil Erhan	SFU School of Interactive Arts & Technology
Paula Gardner	Ontario College of Art & Design; Founding Director, Viz Health Lab
Bernie Garrett	UBC School of Nursing
Diane Gromala	C C
	SFU School of Interactive Arts & Technology
Brenda Lau, M.D.	UBC Surrey Memorial Hospital; Director, JPOCS
Gillian Lauder, MD	UBC Faculty of Medicine; Children's Hospital (children's pain)
Linda Li, PhD	UBC Faculty of Medicine; Director, Arthritis Centre of Canada
Karon MacLean	UBC Dept of Computer Science
Michael Negreff, M.D.	UBC Faculty of Medicine & VGH & PainBC Chairman of Board
Carman Neustetter	SFU School of Interactive Arts & Technology
Neal Pearson	UBC Faculty of Medicine & Principal, NP Physiotherapy, Penticton
Bernhard Riecke	SFU School of Interactive Arts & Technology
Thecla Schiphorst	SFU School of Interactive Arts & Technology, Assoc. Director
Yacov Sharir	University of Texas, School of Fine Arts, Dance
Chris Shaw	SFU School of Interactive Arts & Technology
Pamela Squire, M.D.,CCFP	UBC Faculty of Medicine
Louise St. Pierre	Emily Carr, Interaction Design, Health
Eleni Stroulia	University of Alberta, Dept. of Computer Science
Tarnia Taverner	UBC School of Nursing
Owen Williamson, M.D.	UBC Faculty of Medicine & Surrey Memorial Hospital JPOCS
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### Postdoctoral Fellows, Graduate students & Undergraduate Researchers

Amber Choo	SFU M.A. student
Chao Feng	SFU MSc. student
Tyler Fox	SFU Ph.D. student
Mehdi Karamnejad	SFU MSc. student
Terry Lavender	SFU Ph.D. student
Bryn Ludlow	University of Toronto Ph.D. student

### **Non-Profit Partners**

Fraser Health Authority Surrey Memorial Hospital PainBC

# **CIHR-designated Knowledge Users**

Ada Glustein	Certified Leader, UVic Chronic Pain Self-Management Program
Alison Hoens	Clinical Professor, UBC Department of Physical Therapy
Barbara Sefren	Moderator, People In Pain Network

### **Corporate Partners**

Ayogo Health Inc.	Vancouver
FirstHand Technologies, Inc.	Seattle
Thought Technologies, Ltd.	Montreal

### **Professional Contributors for In-kind Services**

These professionals ha	ave a long-term commitment to contributing in-kind services.
Kirsta Friesen	Health Researcher & Project Manager, AIM Medical Imaging
Jana Esser	Interaction Designer, Fairfax, California
Abhishek Kumar	Interaction Designer, Sonos Inc., Santa Barbara, California
Judy Pryce	Board Member (Finance) PainBC & AIM Medical Imaging
Shridhar Reddy	Interaction Designer, Cisco Systems, San Jose, California

\* All people named in this document have agreed to participate, with the exception of those indicated with an asterisk. They have been out of town or are in the midst of determining their ability to contribute based on existing commitments.



# **Library Course Assessments**

The Library participates in the course approval process for new courses at both the undergraduate and graduate levels. By Senate motion (S.93-11) "no new course should be approved by Senate until funding has been committed for necessary library materials." A Library review should be conducted after new course proposals have been approved by the department or school curriculum committee, before being considered by the Faculty curriculum committee. New courses will not be approved at the Senate Committee on Undergraduate Studies (SCUS) or Senate Graduate Studies Committee (SGSC) until a Library review has been completed. Even if the department states that no new library resources are required, a report from the Library is required to confirm this view.

To submit course proposals for review by the Library, forward the following materials to Megan Crouch.

- course proposal forms
- complete course outline
- reading list created for the course, if any
- date of Faculty curriculum committee meeting (or other deadline for library report)

Please send the above materials at least two weeks prior to your deadline.

An assessment will be done to evaluate whether the Library's holdings and present collection development activities are adequate to support the new course. If no new library resources are required, the course will be added to the appropriate list below indicating the library is adequately resourced to support the course.

If additional library resources are required, a full report will be created and linked below, and the associated costs will be identified. The costs may be one-time, to fill gaps in holdings, or ongoing, for example, to start new journal subscriptions, or sustain book collecting in areas not now included in the Library's collection scope. If costs are attached, the department or school is asked to transfer the required funds to the Library's materials budget. Questions about the process can be directed to <u>Megan Crouch</u>.

# **No Additional Library Resources Required**

 Unless otherwise indicated, these courses require no additional library resources based on a course location of SFU Burnaby. In many cases, if the courses were to be offered at SFU Surrey or Vancouver or as off-campus courses, additional Library costs might be involved. Please contact <u>Megan Crouch</u> for details.

### **Chronic Pain Research Institute**

BUS 301, 396, 563, 564, 565, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 656, 719, 723, 724, 725, 726, 729

CMNS 327, 427

EAS 101

**EDUC 458** 

ENSC 120, 180, 870

ENV 400

FREN 896, 998 GEOG 618 HIST 463, 476, [358 / IS 358] HSCI 843 IAT 210, 854, 856 IS [845, 855, 865 / HS 845, 855, 865] KIN 482 MBB 324 MSE 420, 422, 423, 424, 425, 711, 720, 721, 722, 725, 726, 727, 750, 780, 782, 801, 811, 821, 822, 881 POL 854 URB 615 Completed Library Course Assessments BUS 961, 962, 963, 964, 992, 993 FPA 186 MA in Comparative Media Arts

Mediterranean and Southeastern European Studies Minor (International Studies & Hellenic Studies)

<u>Senate Approved Library Course Assessments</u> Senate document numbers appear in brackets where available, e.g. (S.11-7)