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**MEMORANDUM**

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**ATTENTION** Senate  
**FROM** Jon Driver, Vice-President, Academic and  
Provost, and Chair, SCUP  
**RE:** Community Health Solutions (SCUP 11-41)

**DATE** October 18, 2011  
**PAGES** 1/1

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At its October 12, 2011 meeting SCUP reviewed and approved the proposal for the establishment of Community Health Solutions as an Institute.

**Motion**

That Senate approve the proposal for the establishment of the Community Health Solutions as an Institute for a five year term.

encl.

c: S. Lear  
D. Finegood



OFFICE OF THE VICE-PRESIDENT, RESEARCH

Norbert H. Haunerland, Ph.D.

Associate Vice-President, Research  
Professor of Biological Sciences

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**ATTENTION Sarah Dench, Secretary  
Senate Committee on University Planning (SCUP)**

FROM Norbert Haunerland, Associate Vice President, Research

RE Community Health Solutions

DATE September 21, 2011

Attached is a proposal from Dr. S. Lear and Dr. D. Finegood, for the establishment of "Community Health Solutions".

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 "Community Health Solutions" as an Institute for a 5 year term.

Dr. Norbert Haunerland  
Associate Vice-President, Research

Attachment

- C: Scott Lear, Faculty of Health Science
- Diane Finegood, Department of Biomedical Physiology and Kinesiology



SIMON FRASER UNIVERSITY  
THINKING OF THE WORLD

Norbert Haunerland, PhD  
Simon Fraser University  
Strand Hall 3195  
8888 University Drive  
Burnaby, BC V5A 1S6

September 6, 2011

Dear Dr. Haunerland

We wish to submit the attached proposal entitled *Community Health Solutions* for consideration as an institute within Simon Fraser University.

This proposal succeeds an earlier institute proposal submitted on March 10, 2011 entitled *Research Institute for the Prevention and Management of Chronic Diseases* that was later withdrawn to allow for a revision of ideas taking into account SFU's unique position within the Surrey community and beyond. Over the past few months, we have had extensive discussions across the SFU faculties, with the Surrey campus administration and various community stakeholders such as Fraser Health. The current proposal is the result of these deliberations and has been enthusiastically received by the SFU and outside communities.

The proposed Institute aligns with the sub-themes of Chronic and Infectious Diseases, and Human Development and Aging of SFU's Strategic Research Plan. The revised document better reflects SFU's direction of being *Student Centred, Research Driven and Community Engaged*. It is targeted to increasing the research productivity and capacity at SFU in the area of chronic diseases, as well as translation of this knowledge to the local, national and international community.

An important feature of CHS will be the strong partnerships with external community organizations, NGOs and health authorities that will serve as a flagship endeavour at SFU's Surrey campus. This community integration will be reflected in CHS' Stakeholder Steering and Learning Opportunities committees and will facilitate collaboration within and beyond the SFU environment, such as facilitating the design of experiential education courses and stakeholder integration in research endeavours.

Please do not hesitate to contact us for any further information.

Yours sincerely,

Scott Lear, PhD  
Associate Professor, Faculty of Health Sciences & Dept. of Biomedical Physiology & Kinesiology  
Pfizer/Heart and Stroke Foundation Chair in Cardiovascular Prevention Research at St. Paul's Hospital

Diane Finegood, PhD  
Professor, Department of Biomedical Physiology & Kinesiology  
Executive Director, The CAPTURE Project

# Community Health Solutions

## **A) Statement of Special Purpose**

Chronic diseases including cancer, cardiovascular disease and diabetes are the leading causes of death and disability worldwide. The prevalence of these diseases is increasing rapidly despite being largely preventable. Care and management for people with chronic diseases has begun to overwhelm our health care systems with costs rising to unsustainable levels as the prevalence of these conditions grows.

The challenge of chronic disease prevention and management is complex due to the need for integrated solutions at multiple system levels (individual, family, community, national and global), involving a wide range of actors and organizations (government, private sector, non-governmental organizations, academia, health care) and applied across the lifespan (prenatal to old age). Solutions based on systems thinking and complexity science include multidisciplinary and multi-sector networks and teams and support for individuals and organizations to take action and to learn continuously from and improve the effectiveness of their policies and programs. To influence the emergence of a healthier population we need to integrate efforts by “acting locally, connecting regionally and learning globally”.

**Community Health Solutions (CHS)**, (an Institute under SFU Policy R40.01), will bring a systems approach to the challenge of chronic disease prevention and management. By situating CHS at SFU’s Surrey Campus with satellite centres in other regions of the province, this unique Institute for research and knowledge translation will be well positioned to support community, government, non-governmental organizations and the health care system in planning, implementation and continuous learning from community-based solutions to improve health and prevent chronic disease. Powered by SFU students engaged in a program of experiential learning, CHS will build community along with health care system and student capacity for “real world” learning, and will integrate these efforts so that others can learn from their experience. CHS will be driven by the best available evidence and the need for new evidence about what works, for whom and under what conditions.

## **Vision**

Healthier communities populated by healthier Canadians and supported by a sustainable health care system because we continuously learn from and improve our efforts at chronic disease prevention and management.

## **Mission**

Community Health Solutions will establish integrated, community and health care system based solutions for continuous learning and adaptation of chronic disease prevention and management policies and programs.

With a local action model initially established in Surrey, CHS will be expanded into other communities leveraging SFU's other campuses and partnerships, with inclusion of those with vulnerable populations at high risk for chronic disease.

## **Goals**

To achieve this vision and mission, the CHS Institute will:

- 1) Engage community members, organizations and health authorities in the identification of challenges and opportunities for improving chronic disease prevention and control.
- 2) Build community, health care system and SFU student capacity to apply systems oriented solutions, to assess effectiveness of current and future programs and policies and to improve actions based on lessons learned in the "real-world".
- 3) Build a knowledge exchange platform<sup>1</sup> for sharing lessons learned between community members and organizations and with other communities in the region, across Canada and internationally.
- 4) Create a vibrant research environment for SFU scientists wanting to work with community members and the health care system on chronic disease prevention and management.
- 5) Create a unique opportunity for SFU students interested in experiential learning, a key feature of the Exercise and Nutrition in Health and Disease program approved for the SFU Surrey campus.

## **Approach**

Community Health Solutions will engage a broad range of stakeholders including community members, community and patient advocacy groups, health care workers and decision makers, government and non-governmental organizations, students and faculty, in identifying priority actions and opportunities to support health promotion and chronic disease prevention and control. In this way, communities and organizations will have a key role in developing research questions and projects, therefore ensuring that CHS will be responsive to the needs of patients, populations and health care, allowing for the timely and innovative development of solutions that can be readily implemented into practice.

At the core of CHS will be a platform for data and knowledge sharing that will be built up and improved semester after semester by students and researchers working with community based organizations and

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<sup>1</sup> This platform will serve as a medium/repository for a variety of data types (literature, quantitative data, maps, etc.) and support the building of the CHS logic and conceptual models.

the health authority. This platform will allow community groups, government organizations and health authorities to share their lessons learned with each other, with community leaders and with the wider community regionally, nationally and internationally. This platform will also allow groups to track their own progress and identify approaches to improve their practice and continually learn from what they are doing. Over time the platform's data bases will become a rich resource for researchers and practitioners to identify common themes about what works, for whom and under what conditions.

Another key feature of CHS is that experiential learning opportunities will power the initiative. Work integrated learning positions will be developed for graduate, undergraduate and Co-op education students across a range of disciplines. Students will be deployed to help adapt the platform and create the curriculum. Students will also work with community organizations and health care providers to help identify priorities, deliver programs and assess their effectiveness. Each semester's specific opportunities will build upon the previous semester's efforts and successes. This means that in the earliest days for example, computing science students will help to build the platform and get it ready for use, while students interested in various health disciplines would help to build the curriculum and engage community groups so as to prepare for future students who would be deployed to help deliver and/or evaluate programs in the community. As the system develops and advances there will be opportunities for students from a range of programs to improve and develop new applications for the platform, do research on the data available in the platform and support community groups in advancing their own practices. As health related programs at SFU grow, such as the Exercise and Nutrition in Health and Disease program approved for Surrey, CHS will help provide the large number experiential learning opportunities that will be needed.

Community Health Solutions will also provide an umbrella for SFU health related research, education and community engagement in Surrey and other communities. The platform and curriculum developed will support "real-world" research and evaluation projects of policies and programs. Researchers will be supported by the development of strong linkages and relationships with community groups and the health care system.

Effective ideas for solutions to the epidemics of chronic disease can come from anywhere, the community, the health care system and the university. CHS will provide all of these stakeholders with the opportunity to advance their ideas and to learn if they work and how to improve them.

## **Funding**

The recently funded Community Trust Endowment Fund project "Using a Systems Analytic Approach to Living (SynAL) with Chronic Diseases" lead by CHS co-Director S. Lear, with members across four SFU faculties including CHS co-Director D. Finegood, will provide a nucleus of research activity relevant to CHS.

The CHS Directors will obtain funding for CHS through applications to the appropriate granting agencies (e.g. CIHR, MSFHR, CFI), through contracts with government and non-governmental sources and through donations or educational grants from private sector and community sources.

## **B) Provision for the Appointment of a Director**

Community Solutions for Health will be co-led by Drs. Diane T. Finegood, PhD, Professor in the Department of Biomedical Physiology and Kinesiology and Dr. Scott Lear, PhD, Associate Professor in the Faculty of Health Sciences. Dr. Finegood brings her international reputation as a leader in systems thinking as applied to obesity and chronic disease prevention, as well as a wealth of administrative experience, having served as inaugural Scientific Director of the Canadian Institutes of Health Research, Institute of Nutrition, Metabolism and Diabetes (2000-2008) and currently as the Executive Director of the CAPTURE Project, a prototype shared measurement platform. Dr. Lear brings his extensive experience in leading major research projects in cardiovascular disease prevention, telehealth, and disparities in heart disease risk in different ethnic communities. Dr. Lear was recently appointed the Pfizer/Heart and Stroke Foundation BC & Yukon Chair in Cardiovascular Prevention Research.

The role of Director or co-Director will be subject to a five-year renewable term made at the discretion of the Vice President, Research. Three months prior to the end of their term Directors will submit a report to the Vice-President Research and to the Steering Committee. For Director's seeking renewal the report will outline progress made over the past five years and a strategic plan for the next term. The Steering Committee will make a recommendation to the VP Research about renewal and/or the need for a search for a new Director.

## **C) Obligations**

Community Health Solutions will conduct its affairs in accordance with SFU Policy R40.01. The Institute will come under the direct authority of the Vice President of Research and have a renewal term of five years. An annual report on the Institute's activities and financial status will be prepared each fiscal year (ending March 31) and will be submitted to the Vice-President Research by June 30th of that year.

## **D) Internal Governing Procedure**

Two committees will be established to help steer the work of the Institute:

A *Stakeholder Steering Committee* comprised of representatives from key stakeholder organizations including SFU, Fraser Health and other health authorities, municipalities and community groups interested in health, health promotion and chronic disease prevention. The Steering Committee will be responsible for strategic planning and will support the development of linkages between stakeholders. The Steering Committee will consist of an initial group of six members that will be chaired on an alternating basis by the co-Directors (non-voting members of the Steering Committee). While the initial composition of the Steering Committee has yet to be finalized, we will ensure it consists of three SFU faculty members, one representative from Fraser Health, one from the City of Surrey and one representative from one of the province's other health authorities (see table below). As CHS grows, we envision the Steering Committee to include representation from additional stakeholders but be limited to approximately 10 members.

Diane Finegood, Co-Director	Department of Biomedical Physiology and Kinesiology, Simon Fraser University
Scott Lear, Co-Director	Faculty of Health Sciences, Simon Fraser University
Cynthia Patton	Department of Sociology and Anthropology, Simon Fraser University
Andrew Wister	Department of Gerontology, Simon Fraser University
Surrey Campus Faculty Representative	Simon Fraser University
Sonia Singh, Program Medical Director of Research	Fraser Health Authority
To be named	City of Surrey
To be named	Other BC Health Authority

Steering Committee members will serve two-year renewable terms, after which they have the option to renew for a subsequent term. The Steering Committee will maintain a membership of at least five members. The Steering Committee will meet three times per year to review progress during the previous term. Any member of the Steering Committee or the Director has the opportunity to call for a meeting of the Steering Committee if needed to address time sensitive issues. Quorum for meetings will be 50% plus one of the total number of Steering Committee members.



*A Learning Opportunities Committee* will be comprised of representatives from SFU Faculties and Departments interested in supporting the experiential learning component of CHS. Each semester this committee will consider the learning opportunities available for undergraduate and graduate students, as well as community learners. Committee members will be determined on an as needs basis depending on the stage of development and the current projects associated with CHS. It is anticipated that the Learning Opportunities Committee will include representatives from Biomedical Physiology and Kinesiology, Faculty of Health Sciences, Computing Science, Communications, Interactive Arts and Technology, Co-op Program, Centre for Teaching and Learning, and the Centre for Dialogue.

Also to be housed under the umbrella of Community Health Solutions will be The CAPTURE Platform ([www.thecaptureplatform.ca](http://www.thecaptureplatform.ca)). This first generation shared measurement platform developed at SFU with funding from the Canadian Partnership Against Cancer will serve as the basis for the core data system to be further developed for CHS. Through this platform CHS will be able to exchange lessons learned within and between communities, provinces, nationally and internationally.

# Library Assessment for Community Health Solutions

September 28, 2011

This is the Library's report on the proposed Community Health Solutions Institute.

The SFU Library supports the establishment of this Centre as outlined in the proposal. The SFU Library is actively collecting in the areas of Chronic Diseases and Community Health at the Burnaby Campus. As the Centre will be located on the SFU Surrey Campus, there are library costs associated with it.

Existing online journal and database subscriptions will adequately support this Institute.

The Fraser Valley Real Estate Board Academic Library will need to start collecting monographs to support this centre. Books in the subject areas of Chronic Disease (cancer, cardiovascular disease, diabetes, etc) and Community Health will need to be added to their profile with our book wholesaler. It is estimated that approximately 20 books/year at an average cost of \$180 per book will be required.

**Total library cost:**

**\$3,600 / year ongoing money**

The Library will request funding from Surrey Administration to cover these costs.

**From:** "Megan L. Crouch" <mcrouch@sfu.ca>  
**Subject:** **Library Report for Community Health Solutions**  
**Date:** September 30, 2011 11:22:47 AM PDT  
**To:** Valerie Murdoch <murdoch@sfu.ca>  
**Cc:** Scott Lear <salear@sfu.ca>, Diane Finegood <diane\_finegood@sfu.ca>, Gwen Bird <gbird@sfu.ca>, Natalie Gick <natalie\_gick@sfu.ca>

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Dear Valerie, Scott, and Diane,

The Library has completed it's assessment of the proposal for Community Health Solutions. Because of the Institute's location in Surrey, there are costs associated with our assessment.

Existing online journal and databases are sufficient to support this Institute in Surrey, but a budget for supporting monographs will need to be established. It is estimated that \$3,600/year will be required to adequately do this.

Our full assessment has been added to the Library website here: <http://www.lib.sfu.ca/collections/course-assessments/chs>

The Library will request funding from Surrey Administration to cover these costs.

Please let me know if I can be of further assistance.

Regards,  
Megan

Megan L. Crouch  
Health Sciences Librarian  
Collections Librarian  
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**\*\*I am on campus Monday, Tuesday, Wednesday, and alternate Fridays\*\***