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ANNUAL REPORT 2014-2015

New Brunswick Health Research Foundation



Fondation de la recherche en santé du Nouveau-Brunswick

DARE TO DREAM

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2014-15 BOARD OF DIRECTORS



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Dr. BRUNO BATTISTINI President & CEO -Scientific Director, NBHRF

MESSAGE FROM THE CHAIR

Dr. RODNEY OUELLETTE

Dear Colleagues and Friends of NBHRF

It has been an honor and a privilege to serve as Board Chair for the New Brunswick Health Research Foundation these past two years. Having been on the interim board and then serving as board member since its creation, I have witnessed the incredible transformation of NBHRF and the its positive impacts on health research in the province. This was the goal behind the creation of NBHRF and I can say that it has exceeded my expectations many-fold. Health research and innovation has been a catalyst for success in every Canadian province for decades and behind every successful story we find a provincial health research foundation with a sound vision and plan. To achieve these lofty objectives is not easy and requires dedicated volunteers and skilled staff. I can say without hesitation that during my years on the board of NBHRF that I have had the privilege of working with dedicated individuals who brought vision, knowledge and expertise which enable us to move the organization and health research to new heights.

NBHRF is really about people. Supporting research allows our health researchers to build knowledge and integrate innovative solutions that are transforming how we care for our patients. The logical progression from research knowledge to evidence-based medicine to improved best practices is how the patient benefits from health research. To implement these changes in our system we also need to improve the culture on how our institutions see and embrace health research as solutions for the system. For this new knowledge to be effective it must be taken up by other health professionals and the system as a whole. We need to continue to move in this direction.

NBHRF's administrative team of five led by Dr Bruno Battistini is steadfast in the implementation of the strategic investment plan. They are succeeding and maximizing investments through a focused approach that builds on a suite funding programs and strategic partnerships with other public and private research funders. It is important for this province to increase its capture of research funding. On a per capita basis New Brunswick still trails many other provinces in Canada. We have to be responsive and committed. Opportunities to attract research funding to New Brunswick present themselves rapidly and there is a need to concert our efforts at all levels. Major research initiatives also require planning months and sometimes years in advance. If you want to succeed then we have to be ready and committed. Failure is not an option yet every year there are millions of dollars of research funding that we do not capture. This needs to change.

As we continue to grow our research capacity in a focused, strategic and synergistic way, we need to demonstrate to our citizens that this is important for our future and to demonstrate to all stakeholders that their investments bring important and measurable returns. After these six great years with NBHRF I know that the entire team is committed to showing everyone how a robust health research environment benefits our society.

MESSAGE FROM THE PRESIDENT, CEO & SCIENTIFIC DIRECTOR

Dr. BRUNO BATTISTINI

We report to YOU.

At first, we had a vision and we articulated a clear plan. In 2014-15, we pursued the second year of implementation of the Strategic Investment Plan. We believed with you that the health research enterprise is a key component of the knowledge economy and that in its wake it constitutes an engine of economic prosperity.

As established in the strategic plan, the health and medical research priorities remain about what affects New Brunswickers the most and the expertise of the current population of health researchers: Aging, Cancer / Oncology, Lifestyle diseases (obesity, diabetes and cardiovascular-related complications) and other chronic diseases, Mental health, and what links all of the above, jumping into "big data", in a big way, our first SPOR.

As per strategic direction No 2, NBHRF invested via in-house NBHRF Health Research programs (HRP) to support capacity building of human resources via salary awards (studentships, fellowships, scholarship, chair) and various forms of grants for research. Recipients, institutions and projects are all listed in tables at the end of this annual report. NBHRF funded its first Chair and first two Clinical Scholars.

Such efforts in building capacity and sustaining research are starting to pay dividends: The collective of Health Researchers have achieved new heights by obtaining \$2.6M in awards and grants from national and regional agencies with limited or no support from us.

NBHRF partnered in every *Strategy in Patient-Oriented-Research (SPOR)-travaganza* as well as other Health Research Initiatives (HRI). The pages immediately following this one introduce you to the SPOR programs, their leaders and members of their teams.



- SPOR-Support Unit (MSSU) on big data
- SPOR-TRAM-ACCESS / Transformational Research in Adolescent and Youth Mental Health
- SPOR-PIHCI Primary and Integrated Health Care Innovations
 Network development phase
- CCNA Canadian Consortium on Neurodegeneration and Aging memory clinics

Several other strategic initiatives in partnership with the private sector and regional / national health charities have also been deployed.

The 6th Annual Conference attracted a record number of delegates. The 2nd Gala of Excellence honored 12 of our Senior Health Researchers (Researchers-of-the-month campaign) in New Brunswick, as *Mentors That Dare to Dream*, and celebrated Dr. Marc Surette as the Senior Health Researcher of the Year, recognizing his research, innovation and impact. To further communicate health research generated knowledge and to prepare the group for more innovation, in partnership with CIHR, NBHRF also organized a very well attended provincial workshop on e-Health (eHIPP for e-Health Innovation Partnership Program) that led to several CIHR-eHIPP grant applications.

The imminent and on-going future relies on the development of eHIPP initiatives, partnerships in CIHR-SPOR-Networks in Chronic Disease, fostering at the national level a potential new SPOR on Capacity Development around training and career development, the recruitment of new Chairs and Scholars, and we hope, a new program to support the core-funding activities of our best Centers, Institutes and Networks in New Brunswick. Rolling out the NB Diabetes registry and creating others registries that address our most critical chronic diseases is also on the agenda.

The fundamentals of what we do are based on excellence that leads to evidence-based medicine and the knowledge translation of best practices into the health care system. It continues with our capacity building efforts, the hidden power that small choices — doing the little things right, developing daily habits — can have on our health research enterprise. I believe we have turned the corner toward a healthier and more prosperous health research enterprise.

NBHRF will continue to be the focal point for strategies in health and medical research in the province. We have to be *The Go Getter*. We don't take anything for granted and we dedicate our efforts to develop effective partnerships with all stakeholders and operate programs with national agencies, health charities and private sector partners that provide strong valuable outcomes.

NBHRF direct and partnered investments and returns in 2014-15:

- → A total of 78 grants and awards (that include Summer, MSc, PhD studentships and post-doctoral fellowships, Chairs, Clinical Scholarships and other investigator awards);
- → A total investment of \$2,315,237;
- → This investment leveraged an additional \$2,519,315;
- → A combined total investment of \$4,834,552 was therefore realized;
- → NBHRF Expense / Investment ratio was reduced by 43% from previous year;
- → An additional \$2,094,597 (66 additional awards and grants) was obtained directly by health researchers from regional and national agencies, health charities or foundations, including 2 Chairs from the NB Chapter of the Canadian Cancer Society over the past 5 years;
- → A grand total of \$7,622,504 (144 grants and awards) was invested in the New Brunswick knowledge economy though the health research enterprise.

(up 2.29-fold from previous year); (up 1.61-fold from previous year); (up 1.88-fold from previous year);

(up 2.66-fold from previous year);

(up 2.10-fold from previous year);

THE TEAM



ROGER COLE SENIOR DIRECTOR, FINANCE, ACCOUNTING AND CORPORATE AFFAIRS



LEAH CARR
DIRECTOR, RESEARCH
PROGRAMS AND HUMAN
DEVELOPMENT



LOUISE GOODWIN
DIRECTOR, ELECTRONIC
MANAGEMENT SYSTEMS AND
OFFICE ADMINISTRATION



ALYSHA ELLIOTT

NBHRF AND SPOR

COMMUNICATION OFFICER



MARTINE CYR
EXECUTIVE ADMINISTRATIVE
ASSISTANT

SPOR-MSSU

The Maritime SPOR SUPPORT Unit (MSSU) is a multidisciplinary patient-oriented research unit created under SPOR, the CIHR-funded Strategy for Patient-Oriented Research. Actively engaging with the patient population, the MSSU supports the continued development of research that enhances healthcare in the Maritimes and that produces evidence that can more effectively be integrated into practice and care. In 2014, the New Brunswick node (NB-MSSU) made significant progress in its ability to support this province's health research community.

A primary feature of the NB-MSSU is its ability to provide access to and analysis of administrative health data, and as such continued its close working relationship with the New Brunswick Institute for Research, Data and Training (NB-IRDT) at UNB. Designated as a data custodian for the Province of New Brunswick, the NB-IRDT provides a repository for curated, anonymized individual-level administrative data sets from government departments in a controlled, secure manner. In 2014, transfer of Department of Health datasets began, including the Discharge Abstract Database of hospital records from 1998-2012 and the citizen dataset, demographic information on all residents of New Brunswick with a Medicare number. Datasets close to transfer include Vital Statistics, the Medicare Provider Registry, and a dataset on Long Term Care. Other datasets are in development. With the possibility for researchers to link their own data to this key information in these datasets, the range and depth of questions that can be answered grows each day. Data migration will continue in 2015 and expand to the Departments of Post-Secondary Education, Training and Labour, and Social Development.

In addition to providing access to administrative health data, the NB-MSSU also intends to provide methodological support to New Brunswick's research community. Following the signing of key Memoranda of Understanding in November, the NB-MSSU has greatly expanded its team of experts in 2014 and early 2015, hiring key personnel with backgrounds in epidemiology, health economics, biostatistics, privacy, research and administration. 11 full time positions and three trainee positions valued at \$1,170,775 annually are included. These individuals are available to our scientific community to consult on and provide support to their research projects.

While establishing this essential infrastructure, the NB-MSSU also collaborated on a demonstration project with its counterparts in Nova Scotia and Prince Edward Island, studying the trade-offs between access to care and quality of care in delivering surgical services, and how it may impact health outcomes and resource utilization. This project will continue into 2015 as a wider range of outcomes is considered. NB-MSSU also looks ahead to a second Maritime-wide project that examines prevalence and characteristics of high-cost users of the healthcare system, with a particular eye to chronic diseases. Both of these projects will provide valuable inputs to healthcare policy and resource allocation. As well, the NB-MSSU supported the development of SPOR research networks in primary health care and youth mental health, offering more opportunities for future collaboration.

Maritime SPOR Support Unit – NB Node



www.spor-maritime-srap.ca

To further expand application the MSSU investment, the NB-MSSU has engaged extensively with the Department of Health and the two regional health authorities to understand their respective research priorities. These discussions will continue into



www.unb.ca/fredericton/arts/nbirdt

2015 and are key to understanding how the NB-MSSU can best support these bodies in finding solutions to some of the challenges seen the New Brunswick healthcare system.

Pictured from left to right: Jennifer Moorecraft, NB MSSU Coordinator and Project Manager. NB IRDT, UNB | Dr. Anthony Reiman, NB MSSU Advisory Committee Chair, Assistant Dean, Research, DMNB | Noortje Kunnen, Senior Planning Advisor, GNB Dept. of Health, Policy and Legislation Branch | Dr. Ted McDonald, MSSU Data and Privacy Committee Chair, Director, NB Institute of Research Data and Training, UNB | Dr. Paul Peters, Canada Research Chair in Population Health Inequalities, UNB, Member MSSU Scientific Advisory Committee | Leah Carr, Director, Programs and Human Development, NBHRF | Dr. Phil Leonard, Health Economist, NB MSSU, NB IRDT, UNB | Dr. Anil Adisesh, Adjunct Professor, Faculty of Business, UNBSJ J.D. Irving Limited Research Chair in Occupational Medicine at DMNB | Caroline Jose, Research Associate, NB MSSU CFMNB | Sarah Campbell McNamara, Clinical Research Assistant, NB MSSU, Saint John Regional Hospital | Angela Cushing, Administrative Assistant, NB MSSU, NB IRDT, UNB | Dr. Mathieu Belanger, Director of Research, Centre Formation Médicale du Nouveau-Brunswick, Member MSSU Scientific Advisory Committee | Bryn Robinson, Clinical Research Manager, NB MSSU, Saint John Regional Hospital | Zikuan Liu, Data Officer, NB MSSU, NB IRDT, UNB.

MSSU-NB Leadership Team (circled): Dr. Anthony Reiman, Dr. Ted McDonald and Dr. Mathieu Bélanger



SPOR-PIHCI



Sitting (left to right): Bo Miedema, Tripartite: Researcher, FMTU/UNB | Joan Kingston, Tripartite: Clinician/Care provider, Community Health Centre | Amelia Beaney, Clinician/NurseNB, Extra Mural Program | Shelley Doucet, Tripartite: Researcher, UNB/Dalhousie Medicine NB | Kathleen Cruttenden, Researcher, Nursing | Kris Aubrey-Bassler, Clinician/FP/Researcher, Memorial University | Linda Dalpe, Clinician/FP, Private Clinician, Caraquet | Pat Charlton, Coordinator, UPEI | Bronwyn Davies, Policy, Director of Community Health Program.

Standing (left to right): Karine de Grace, Executive Administrator, NBCFP | Caroline Jose, Research Associate, MSSU | Andrea Bowes, Coordinator, UNB | Sarah Campbell-McNamara, Researcher, Horizon Health Network | Denise Connors, Manager Chronic Disease Prevention and Management, St. Joseph's Community Health Centre | Bill Montelpare, Researcher, UPEI | Joanne Young, Tripartite: Department of Health, Government of New Brunswick | Suzanne Dupuis-Blanchard, Researcher, UdeM | Martin Senechal, Assistant Professor/Researcher, UNB Kinesiology | Leah Carr, Funder, NBHRF | Penny Ericson, Patient/Individual stakeholder, HHN Patient Advisory Council | George Murray, Pharmacist, Pharmacists | Bryn Robinson, Researcher, Horizon Health Network | Tracey Rickards, Researcher, UNB/Community Health Centre | Roger Stoddard, Patient/Individual stakeholder, Quispamsis | Barbara Burnett, Director, Atlantic Institute on Aging | Barry Watson, Researcher, UNB | Bill McKenzie, Managing Director, NBSPRN.

Primary and Integrated Health Care Innovations – NB Network

Creating a New Brunswick Strategic Patient Oriented Research Network in Primary and Integrated Health Care Innovations

In the Spring of 2014, our provincial team was successful in securing the NB SPOR Network grant through Canadian Institutes for Health Research (CIHR) with matching funding from New Brunswick Health Research Foundation (NBHRF) for the Strategy for Patient-Oriented Research (SPOR) Network in Primary and Integrated Health Care Innovations in New Brunswick. This 5 year funding will allow the NB SPOR Network gain to membership in the pan-Canadian network. Under the Tripartite leadership of Dr. Marc-Andre Doucet and Joan Kingston, as the clinicians, Ms. Beverley Greene and Ms. Joanne Young from the Department of Health as the policymakers and Dr. Shelley Doucet and Dr. Baukje (Bo) Miedema as the researchers, the NB SPOR Network will function as an "umbrella" to facilitate research. The NB SPOR Network will have staff members who will be able to assist research teams with many aspects of the research.

The focus of the NB SPOR Network: Primary and Integrated Community Health Care (PIHCI) is to facilitate the conduct of quality primary health care research with an initial focus on improving outcomes and satisfaction in the care of individuals with complex needs. The NB Network is a platform to engage and connect citizens, clinicians, policy makers, social and medical organizations, and academic researchers. The NB SPOR Network will be the primary health care research hub in New Brunswick and will facilitate the advancement of evidence-based health care and research. Capacity building and knowledge translation strategies are also embedded in this network. Additionally, our network will serve both NB linguistic communities.

Primary health care involves more than just seeing primary care providers, such as family physicians or nurse practitioners, but also incorporates social, mental and physical dimensions that can impact one's health and well-being. Due to the province's unique characteristics such as the fastest growing elderly population in the country, diversity of settlements and rural geography, providing comprehensive and integrated primary health care can be challenging. Accordingly, the NB Network provides a timely opportunity for the province.

An NB SPOR Network research team led by Drs. Shelley Doucet (UNB), Rima Azar (MTA) and Bill Montelpare (UPEI) was successful with their CIHR "Quick" Strike application. Their one year research project will investigate the needs of families and children with complex health conditions. The project proposes to develop a system to best identify children with complex health conditions in order to optimize their utilization of the health care system.

Specifically, the team will identify services and programs available to address the needs of these children and their families, including resource gaps and barriers to accessing care in NB and PEI. The team will also develop statistical methods to help identify pertinent information on this population and provide epidemiological information, such as prevalence and estimates of the number of cases by condition. The project is co-funded *New Brunswick Children's Foundation*.

SPOR-TRAM-ACCESS-NB



Pictured from left to right: Paul Beauchesne, Superintendent, Kodiac Region, RCMP | Gisèle Maillet, Executive Director of Addictions and Mental Health services, Department of Health and Chair of the ACCESS NB Oversight Committee | Michelina Mancuso, Director, Performance Evaluation, New Brunswick Health Council | Dr. Lise Dubois, Vice-President, Research and Dean, School of Graduate Studies, Université de Moncton | Cindy Miles, Project Coordinator, DotsNB, Partners for Youth | Christopher Whalen, Deputy Advocate and Senior Legal Counsel, Office of the Child and Youth Advocate, Government of New Brunswick | Yvette Doiron, Director, Child and Youth Services, Department of Health, Government of New Brunswick | Dr. Ann Beaton, ACCESS NB Research Lead, Canada Research Chair and Professor, Department of Psychology, Université de Moncton | Eva Sock, Health Director, Elsipogtog First Nation | Miguel Leblanc, Executive Director, New Brunswick Association of Social Workers | Roxanne Sappier, Health Director, Tobique First Nation | Dr. Julie Devlin, Clinic Manager, Operational Stress Injury Clinic , Horizon Health Network, Fredericton | Norman Bosse, Child and Youth Advocate, Province of New Brunswick | Rick Shaw, Inspector, "J" Division, RCMP | Jessica Melanson, Coordinator, Office of the Child and Youth Advocate, Government of New Brunswick.

A Pan-Canadian Network to Transform Mental Health (TRAM) Services for Adolescents and Young Adults (age 11-25)

ACCESS Canada is a multidisciplinary network of stakeholder groups across six provinces and one territory. With youth at the centre, ACCESS stakeholders are families/carers, community organizations, service providers, researchers, policy and decision makers. The goal of ACCESS is to implement, evaluate and elaborate a transformation in the way youth access and use mental health services in real world settings. This transformation will result in identification of more youth needing mental health supports and better accessibility to evidence-informed, appropriate, timely, and quality care.

ACCESS Canada secured a 25 million dollar grant in May of 2014 to roll out this transformation over five years. This grant, called Transformative Research in Adolescent Mental Health (TRAM), is provided by the Graham Boeckh Foundation and the Canadian Institute of Health Research (CIHR). The ACCESS Network is the first-ever research Network launched under Canada's Strategy for Patient-Oriented Research (SPOR). SPOR is a coalition of federal, provincial and territorial partners - patients, researchers, health care providers, and decision-makers - all dedicated to the integration of research into care. This inaugural SPOR Network is being led by Dr. Ashok Malla, Director of the Prevention and Early Intervention Program for Psychoses (PEPP-Montréal) at the Douglas Institute, Professor at McGill University and Canada Research Chair in Early Psychosis.

New Brunswick is the only provincial roll out of the transformation across Canada. ACCESS NB launched their provincial network of youth, family, community, academics / researchers, policy-makers and service providers in January of 2015. This network will direct the roll out of the transformation within the province in NB. The proposed provincial transformation consists of four main parts:

- developing safe spaces for youth with mental health issues to empower their voice and provide improved access to care;
- providing mental health training for all sectors of society to better identify and support youth with mental health needs;
- knowledge sharing both within the province and throughout the broader national network to ensure that New Brunswick youth benefit from the best clinical care practices;
- and a process of continuous evaluation of the results of the changes to youth mental healthcare and improvements to the system.

The project will capitalize upon existing reforms underway in New Brunswick to significantly transform mental health care and improve child and youth wellbeing. This includes diverting youth with mental health problems from the criminal justice system and providing integrated service delivery across government departments, through improved mental health screening tools, increased use of family group conferencing, better mental health literacy training in New Brunswick schools, a provincial Recovery Model of Care and the construction of a provincial treatment centre for youth with complex needs.

CCNA-NB Node

Alzheimer disease and related disorders in primary care settings in New Brunswick



Alzheimer's disease and related disorders (ADRD) is a public health major concern (Alzheimer Society of Canada, 2010).

Lack of accessibility to evaluation, treatment and management throughout the course of the disease is a very significant problem resulting in long waiting lists, delayed diagnosis and late intervention (Alzheimer Society of Canada, 2010).

The present study is a part of the Canadian Consortium on Neurodegeneration in Aging (CCNA). The CCNA is a nation-wide group of researchers interested in this area of research and supports and carries out evaluations of transformative projects to make a difference in the quality of life and the quality of services for those living with the effects of neurodegenerative diseases. Twenty-one teams (in Quebec, Ontario and New Brunswick) are working under the three themes of CCNA, and the present research program is one associated with team 19 – Quality of Life theme.

Pictured from left to right: Christina French, Ph.D.(c) Psychology; Lise Gallant, Mireille Demers, Ph.D.(c) Psychology; Mylène Michaud, MA(c) Psychology; Bianca Bastarache, MA(c) Psychology and Valérie Theriault, BA(c) Psychology.

Seated in front: Sarah Pakzad, Ph.D..



http://ccna-ccnv.ca/en/

The overall objective is to assess collaborative health care models to identify key factors for appropriate quality of care and effective implementation and scale up of best practices across NB.

More precisely, Dr. Sarah Pakzad and her team will study the implementation of the collaborative health care model in primary care setting in New Brunswick and its impact on diagnostic procedures and management of dementia. The principal question in this 5 year research program is to determine if the collaborative health care model enhances the quality of care and management of dementia in N.B.

Two NB primary health care settings have been chosen and will include patients who have been identified as potential dementia cases by their family physicians. The program will also include health care professionals such as family physicians, nurses, medical residences and administrative staff. In addition, longitudinally, the changes process occurring in two NB primary health care settings with regards to patients with ADRD and the change in the social contexts (laws, public policies, management priorities, etc.) will be investigated.

This research will collect data over several years to monitor the implementation of the collaborative health care model in N.B. and the research program will begin in the fall of 2015.

Connected Voices

Using eHealth/mHealth to support a rural cardiac rehabilitation pilot program

Research in this area is of particular importance in the province of New Brunswick given the burden of an aging population, rural demographics (55 percent), unhealthy behaviours, and low health literacy.

These factors have created the need to develop new and innovative strategies to deal with chronic disease management in a province that has one of the highest rates of cardiopulmonary disease in the country.

The goal of the project is not to develop new technologies, but rather to better understand the use of available technologies to promote healthy life-style changes following cardiopulmonary rehabilitation. Participants first complete a 12 week rehab program at the JK Irving Center in Bouctouche (strength training and aero-



bic exercise and education) and then another 12 weeks of virtual follow up where different health professionals will help participants maintain the healthy lifestyle changes promoted in rehabilitation. This two year project hopes to work with 100-180 participants. Results to be measured as part of the study include number of cigarettes smoked per day or whether smoking has ceased, phys-

Brian Gallant, Premier of New Brunswick, and **Dr. Michel Johnson**, Project Leader, U de Moncton



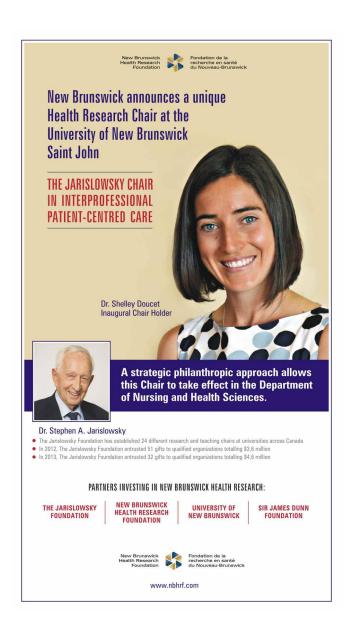
Pictured from left to right: Mr. Gaston Losier, U de Moncton, Dr. Michel Johnson, Project Leader, U de Moncton, Dr. Bruno Battistini, NBHRF, Dr. Shelley Doucet, UNB, Mr. Eric Gionet, Consultant, Dr. Anik Dubé, U de Moncton, and Dr. Mathieu Bélanger, CFMNB

ical capabilities, indicators such as blood pressure and heart rate as well as cognitive results. Simultaneously, this assessment will increase the understanding of how inter-professional health teams communicate when using information and communication technologies in a rural province. Health care providers will also weigh in on whether they enjoyed the process and if they are feeling any better.

The Connected Voices project was funded through the New Brunswick Health Research Foundation and Pfizer pharmaceutical. The project received a 2015 Connected to the Community Award from the Canadian Wireless Telecommunications Association.

Jarislowsky Health in Interprofessional Patient-Centred

In July 2014, Dr. Doucet was named the inaugural Jarislowsky Chair in Interprofessional Patient-Centred Care. Her research will contribute toward improving the health of individuals and populations by embedding interprofessional collaborative practice in health education programs and practice settings across New Brunswick and Canada.



Over the last decade, there has been an emphasis on the need for interprofessional approaches to sustain the delivery of health care in the future. To date, most health professionals practice in multi-disciplinary teams and work independently toward a common purpose. Interprofessional teams need to shift away from practicing independently to having practitioners work collaboratively with patients to develop a shared plan of care, resulting in a more patient-centred and coordinated approach. Interprofessional education, which involves two or more professionals engaged in learning with, from, and about each other, is critical for health professionals to have the knowledge, skills, and attitudes necessary for collaborative practice.

With generous donations from the Jarislowsky Foundation, the New Brunswick Health Research Foundation and the Sir James Dunn Foundation, UNB has the potential be an international leader in the implementation and evaluation of interprofessional education and practice initiatives.

An advisory council that has been established to guide the relevant research initiatives over the next five years which focus on two overarching objectives:

Dr. Shelley Doucet, Jarislowsky Research Chair in Interprofessional Patient Centred Care

Research Chair Care: Dr. Shelley Doucet

1) the development of innovative community based primary health care interprofessional practice models and evaluation of their short- and long-term impacts on health professionals, patients, and health service delivery and 2) the development of interprofessional education experiences and the evaluation of the short- and long-term impacts on learners, patients, and health service delivery.

Since joining UNB Saint John in 2010, Dr. Doucet has developed several initiatives and research projects that are inter-institutional and international. In partnership with Dr. Rima Azar from Mount Allison University, she was awarded \$750,000 from the New Brunswick Children's Foundation to develop an

innovative integrated service delivery model using a patient navigator to meet the needs of this population across the full continuum of care.

Dr. Doucet is also currently working with 10 graduate students and this research chair will provide her with more time to offer the one-on-one support that is necessary to train the next generation of skilled researchers. There is an urgent need for more expertise in interprofessional education and practice. Trainees involved in Dr. Doucet's program of research will be prepared to make significant research contributions in this area. The appointment of this chair is timely, as health care reform is occurring across Canada.



Left to right: Dr. David Burns, Vice President, Research, University of New Brunswick (UNB) | Mr. Michael Doyle, Governor, Sir James Dunn Foundation | Dr. Bruno Battistini, President, CEO and Scientific Director, New Brunswick Health Research Foundation | Dr. Shelley Doucet, Jarislowsky Chair in Inter-professional Patient-Centred Care, UNB | Mr. Roy Heenan, Director, Jarislowsky Foundation | Dr. Robert MacKinnon, Vice President, University of New Brunswick Saint John

www.unb.ca/saintjohn/sase/dept/nhs/people/doucet.html

Clinical Scho

The Clinical Scholarship is a salary award designed to assist with the conduct of research by clinicians. The scholarship is geared to (1) drive retention and recruitment of qualified clinical health researchers in various clinical therapeutic areas, (2) mentor clinical health researchers to become more competitive on the national and international scene with regard to obtaining grants and awards; (3) promote the continuity and expansion of clinical research in New Brunswick; and (4) increase the likelihood that new knowledge, derived from basic and clinical research, will benefit patients in New Brunswick as quickly as possible.

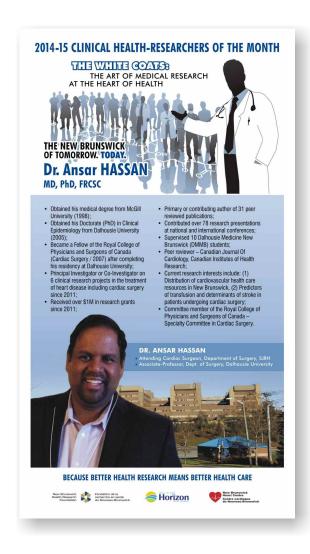


An independent peer-review committee made up of five clinician researchers (M.D. and M.D./PhD) from across the country evaluated the first set of proposals.

"We are delighted that NBHRF was in a position to design and implement such a program for our Clinicians who are determined to conduct health and medical research in New Brunswick. This year's recipients are well deserving and we are looking forward to their research and contribution to improved health and an improved economy in NB", said Dr. Bruno Battistini, President and CEO – Scientific Director of the NBHRF. "It is challenging at best for Clinicians to carry out such endeavours without dedicated protected time and the support of their regional health authority. This program is at the core of any strategy to promote and implement research within the system", he added.

Dr. Ansar Hassan, Attending Cardiac Surgeon, Saint John Regional Hospital, and Dr. Colleen O'Connell, Research Chief and Physiatrist at the Stan Cassidy Centre for Rehabilitation have been awarded a combined total of \$330,000 over the next 4 years. The funds are provided to Horizon Health Network from NBHRF to provide dedicated time to conduct clinical health and medical research.

larships



"As an academic cardiac surgeon at the New Brunswick Heart Centre, I have a responsibility to not only provide high quality cardiovascular care for my patients but also to conduct scientific research aimed at determining how we can improve patient outcomes. Having been granted the NBHRF Clinical Scholarship Salary Award this past year has afforded me the time and support needed to be a successful clinician researcher," said Dr. Hassan.

Dr. Hassan will also carry out his own research to identify measures of obesity and functional capacity above and beyond traditional socio-demographic characteristics and clinical factors that may effectively predict risk of adverse inhospital and 30-day outcomes among obese individuals undergoing cardiac surgery. Upon identification of these factors, treatment and prevention strategies may be devised to target at-risk obese patients in advance of their surgery so as to effectively reduce their risk and to improve their surgical outcomes.

"The integration of clinical research into our neurorehabilitation services is essential to transforming research findings into health behaviours and supporting best practice implementation. Fostering a culture of enquiry that supports such research will result in better patient outcomes and ultimately improved health and function for persons living with mobility impairments," said Dr. O'Connell.

Dr. O'Connell will have the opportunity to advance her engagement in collaborative projects in applied clinical technologies for mobility with University of New Brunswick, while developing an environment of interest and study at the provincial neurorehabilitation center and medical school. Her own research will focus on the use of exo-skeletal devices and functional electrical stimulation systems for restoration of mobility following neurologic injury. This research will contribute to create the environment for a new industry in mobility health systems in the province of New Brunswick.

CIHR-eHIPP



Today's health research innovators need access and advice. In October 2014, CIHR's eHealth Innovation Partnership Program (eHiPP) regional workshop was held in New Brunswick at the Fredericton Delta Hotel.

This dynamic workshop approach is a novel idea about how a national funder can play a catalytic role by working closely with a partner (in this case, the provincial health research funding agency – NBHRF) to present the best and the brightest research ideas via inspired health researchers, in a working partnership with investment-ready information technology (ICT) entrepreneurs.

After submitting a Letter of Interest (LOI), five health research teams and their industry partner entrepreneurs from each corner of the province pitched their novel ideas in an interactive setting with a large stakeholder community contributing to each team's designbuild process. Multiple rooms were set abuzz with the ease and flow of creative conversations, curiosity-driven observations and challenging questions for each research/entrepreneur team to respond to on-the-spot.

A health research Dragon's Den type energy fueled the day with an experienced panel of judges providing next steps guidance and direction. Strategic advice, entrepreneurial experience, and leadership came from the following committed individuals: a health technology entrepreneur, Dr. Brian Freeman, Co-Founder, ROC Consulting Group; Dr. Kathleen Valentine, UNB Dean of Nursing/former global leader in electronic medical record (EMR-based) approaches for health authorities; Dr. Alex Mihailidis, Prof. Barbara G. Stymiest Research Chair in Rehabilitation Technology, University of Toronto; and Gerry Fairweather, Enterprise Strategist, Health and Business Technology Solutions Branch, NB Department of Health.

One example of an eHiPP research proposal that evolved from one of the first CIHR-eHiPP regional workshops in the country is UNB's "Poly-pharmacy Balance Awareness (B-Aware) app to Reduce Falls in Seniors" by an interdisciplinary collaborative team under the direction of Principal Investigator, Dr. Chris McGibbon, Institute of Biomedical Engineering and department of Kinesiology. Given that New Brunswick has the second oldest population in North America, it is an eHealth opportunity for health researchers to unlock the code for

eHealth Innovation Partnership Program

longevity for seniors living in residential care. The team led by Dr. McGibbon includes Ms. Barbara Burnett, Executive Director, Atlantic Institute on Aging; Dr. Bill McIver, Research Chair, New Brunswick Community College; Dr. Erik Scheme, UNB Institute of BioMedical Engineering; Dr. Grant Handrigan, Université de Moncton; Mr. Kevin Harter, CEO, York Care Centre; Ms. Donna Leggatt, PhD (c), UNB; Ms. Jennifer Donovan, RN, York Care Centre; with industry partners Autonomous_ID Inc., Ottawa ON and HealthQR, Halifax NS.

The aging population and the increased life-years of living with chronic diseases means that polypharmacy plays an important role in the health of seniors. Polypharmacy is defined as an individual taking more than five or six medications at a time. Currently, the tools available to seniors and their care-givers are limited in terms of ensuring safety and efficacy of multiple medications. Falls in seniors are strongly associated with the number and type of medications, the consequence of which represents a significant yet preventable public health concern for seniors with complex needs.

The proposed eHiPP research program seeks to develop, evaluate, and deliver a solution for real-time, falls-risk monitoring. Recent advancement in wearable sensor and information technologies, specifically those in the area of mobile communication devices and cloud computing, in combination with a national move towards unified and accessible health care records, makes it possible to accomplish such ambitious aims. The dire need to reduce falls in "polypharmic" seniors is most evident by the high rates of fall-related morbidity and mortality of seniors living in residential care. The eHiPP pitch is that "balance awareness" is the missing link to effective falls prevention. The research team will test this proposition by evaluating an innovative and scalable eHealth solution, the B-Aware™ system, to reduce medication related falls of seniors living in residential care.

Other innovative eHiPP ideas pitched included:

Cognitive Computing of Cardiac Care for Seniors

Keith R. Brunt, PhD, Dalhousie Medicine New Brunswick (DMNB), Director of Community Engagement & Innovation Development, Assistant Professor Pharmacology, Dalhousie University, Adjunct Professor, University of New Brunswick, Ansar Hassan, MD, PhD, Cardiovascular Surgeon, New Brunswick Heart Centre, Assistant Professor, Dalhousie University and Marc Pelletier, MD, MSc, Head, Division of Cardiac Surgery, New Brunswick Heart Centre, Associate Professor, Dalhousie University

Our Health Within Reach – Dieppe eHealth Initiative Michel J Johnson, Anik Dubé, Shelley Doucet, Eric Mathieu Doucet, Mathieu Bélanger – Collaboration between Université de Moncton, UNB and Centre

Cloud connected, intelligent assistive mobility devices

Formation Médicale du Nouveau Brunswick

Graeme Powell, CEO, Drs. Orders, Dr. Erik Scheme, NB Innovation Research Chair in Medical Devices and Technologies, Institute of Biomedical Engineering and Dr. Chris McGibbon, Professor, Faculty of Kinesiology, UNB.

Transformative innovations for digital interfacing with seniors – patient self-manage-ment, vital sign monitoring and cloud based diagnostics

Keith R. Brunt, PhD, Dalhousie Medicine New Brunswick (DMNB), Director of Community Engagement & Innovation Development, Assistant Professor Pharmacology, Dalhousie University, Adjunct Professor, University of New Brunswick, Sohrab Lutchmedial, MD, Medical Director, New Brunswick Heart Centre Research Initiative and Martin MacKinnon, MD, Complicated Hypertension Clinic, Saint John Regional Hospital, Cloud Diagnostics (Cloud DX Inc.)

2014

6thAnnual Conference and 2nd Gala of Excellence

The 6th Annual New Brunswick Health Research Conference attracted 215 full registrants to the Delta Beauséjour in Moncton, a new record, co-hosted with the Université de Moncton in November 2014. Over two days, 72 posters were displayed and 11 oral presentations were made. There were also six plenary sessions and eight workshops, and the 2014 Gairdner Keynote Address was given by Dr. Guy A. Rouleau (www.nbhrf.com/sites/default/files/docs/nbhrf_2014_program_long_2.pdf).



The 2nd Gala of Excellence (Spotlight on Mentors who Dare to Dream; www.nbhrf.com/nb-health-researcher-month) showcased twelve (12) New Brunswick Senior Researchers-of-the-Month who were introduced every month in the provincial newspapers (Videos – YouTube: @nbhrf). The Gala was hosted by the Minister of Health, the Hon. Victor Boudreau, who received (from the Chair of the independent 7-member national peer-review committee, Dr. Pedro D'Orléans-Juste from the Université de Sherbrooke) the name of the 2014 Laureate: Dr. Marc Surette, Professor, Dept. Chemistry and Biochemistry, Faculty of Sciences, Université de Moncton (To view Dr. Surette's ROM article: www.nbhrf.com/sites/default/files/docs/telegraph_full_page_ad_-_researcher_december_low-rez.pdf).



PROFILE OF NBHRF AND PARTNERED PROGRAMS

NBHRF has regrouped all its programs into three categories: Health Research Programs (HRP), Health Research Initiatives (HRI) and Strategic Investment in Health Research Innovation (SIHRI). In 2014-15, NBHRF was able to maintain and increase grant and award funding because of its deferred revenues of 2013-14.

In summary:

- → A total of 78 grants and awards (that include Summer, MSc, PhD studentships and post-doctoral fellowships, Chairs, Clinical Scholarships and other investigator awards);
- → A total investment of \$2,315,237;
- → This investment leveraged an additional \$2,519,315;
- → A combined total investment of \$4,834,552 was therefore realized;
- → NBHRF Expense / Investment ratio was reduced by 43% from previous year;
- → An additional \$2,094,597 (66 additional awards and grants) was obtained directly by health researchers from regional and national agencies, health charities or foundations, including 2 Chairs from the NB Chapter of the Canadian Cancer Society over the past 5 years;
- → A grand total of \$7,622,504 (144 grants and awards) was invested in the New Brunswick knowledge economy though the health research enterprise.

(up 2.29-fold from pervious year);

(up 1.61-fold from previous year);

(up 1.88-fold from previous year);

(up 2.66-fold from previous year);

(up 2.10-fold from previous year);

NBHRF HEALTH RESEARCH PROGRAMS (HRP)/SALARY AWARDS

NBHRF UNDERGRADUATE / MEDICAL SCHOOL SUMMER STUDENTSHIPS

| Student | Researcher/Supervisor | Affiliation | Project Title | Pillars | Areas | NBHRF Funding |
|-----------------------|-----------------------|-------------|--------------------------------------------------------------------------------------------------------------------------|---------|---------------|------------------|
| Hannah Law | Keith Brunt | DMNB | Heme oxidative stress | 1 | Heart Disease | \$5,768 |
| Alexandra Smithers | Karen Crosby | MtA | Endocannabinoid and nitric oxide interactions in the rat hypothalamus: potential implications for stress-induced obesity | 1 | Obesity | \$5,768 |
| Jonathan Cann | Sara Eisler | UNB | Targeted Drug Delivery and Release: Multi-Functional Small Molecule Vectors | 1 | Metabolism | \$5,768 |
| Craig Groskopf | David Fleming | MtA | Enhanced X-ray Spectrometry for Arsenic and Selenium Detection | 1 | Poisons | \$5,768 |
| Luke Duffley | Petra Kienesberger | DMNB | Role of Amino Acid Metabolizing Enzymes in Muscle Insulin Resistance | 1 | Diabetes | \$5,768 |
| Josée Haché | Luc Martin | UdeMoncton | Caractérisation de l'expression des facteurs Sox par hybridation in situ au niveau des testicules de souris | 1 | Men's Health | \$4,944 |
| James Fowler | Chris McGibbon | UNB | Summer studentship in biomechanics of robotic exoskeleton walking devices for rehabilitation | 1 | Mobility | \$4,944 |
| Yvonne Anisimowicz | Baukje Miedema | UNB | Accessing Mental Health Services in Primary Care Settings: Patient and Physician Experiences and Barriers | 2 | Mental Health | \$4,944 |
| Jonathan Jean | Colleen O'Connell | SCCR/UNB | The Canadian Neuromuscular Diseases Registry | 3 | Neurology | \$5,768 |
| Rachel Scott | Sue O'Donnell | UNB | Masculinities, lifetime violence exposure, and health | 4 | Mobility | \$5,768 |
| Jordan Bartlett | Thomas Pulinilkunnil | DMNB | Role of Lysosomal Autophagy in Doxorubicin Cardiomyopathy | 1 | Men's Health | \$5,768 |
| Emily Leaman | Tracey Rickards | UNB | Gay men, prostate cancer and what comes after? | 4 | Men's Health | \$5,768 |
| Nathan Quinn | Jon Sensinger | UNB | Improving SCI-patient control using exoskeletons | 1 | Mobility | \$4,944 |
| Kayla Beck | Krista Wilkins | UNB | Supportive Care for Cancer Survivors in the Parish Nursing Contex | 4 | Cancer | \$5,768 |
| TOTAL | | | | | | \$77,456 |

NBHRF CLINICAL SCHOLARSHIPS

| Student | Affiliation | Area of Research | Pillars | Areas | NBHRF Funding | Leveraged Funding | Total Funding |
|-------------------|-------------|-----------------------|---------|----------------|------------------|----------------------|------------------|
| Ansar Hassan | HHN-SJRH | Cardiovascular Health | 2 | Cardiovascular | \$50,000 | \$0 | \$50,000 |
| Colleen O'Connell | SCCR | Rehabilitation | 1,3 | Rehabilitation | \$32,500 | \$0 | \$32,500 |
| TOTAL | | | | | \$82,500 | \$0 | \$82,500 |

NBHRF MSc & PhD (C) STUDENTSHIPS AND POSTDOCTORAL FELLOWSHIPS

| | Student | Researcher/ Supervisor | Affiliation | Project Title | Pillars | Areas | NBHRF Funding | Leveraged Funding | Total Funding |
|-------------|------------------------|-----------------------------|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------|------------------|----------------------|------------------|
| | Eric Allain | Marc Surette | UdeMoncton | Caractérisation de l'isoforme delta-13 de la 5-lipoxygenase humaine | 1 | Biochemistry | \$17,000 | \$50,000 | \$67,000 |
| Studentship | Sabrina Duguay | Marc Surette | UdeMoncton | Activation de la SCD-1 chez des cellules cancereuses de la prostate par des androgenes | 1 | Cancer | \$7,000 | \$10,000 | \$17,000 |
| | Patrick Roy | Alain Simard | UdeMoncton | Détermination du role des sou-types de récepteurs nicotinique sur l'inflammation in-vivo | 1 | Smoking | \$7,000 | \$10,000 | \$17,000 |
| MSc | Stephanie St-Pierre | Alain Simard | UdeMoncton | Effet de la nicotine sur la production et la différenciation des monocytes provenant de la moelle osseuse de souris | 1 | Smoking | \$7,000 | \$27,000 | \$34,000 |
| Studentship | Trevor Clark | Chris Gray | UNB | Application of NMR/LC-HRMS based metabolomics for dereplication and prioritization in bioactive natural product discovery | 1 | Natural Products | \$20,000 | \$10,000 | \$30,000 |
| PhD(c) Stud | Sylvie Gautreau | Catherine Aquino-Russell | UNB | Developing a Surgeon-Patient Expectations Checklist to Predict Greater Patient Satisfaction with Total Knee Replacement: A Sequential Exploratory Mixed Methods Study | 2 | Clinical | \$20,000 | \$0 | \$20,000 |
| | TOTAL | | | | | | \$78,000 | \$107,000 | \$185,000 |

NBHRF HEALTH RESEARCH CHAIR

| Researcher | Affiliation | Chair Title | Funding Partner | Pillars | Areas | NBHRF Funding | Leveraged Funding | Total Funding |
|----------------|-------------|----------------------------------------|--------------------------------|---------|----------------------|------------------|----------------------|------------------|
| Shelley Doucet | UNB | Interprofessional Patient Centred Care | Jarislowsky & Dunn Foundations | 3, 4 | Patient Care | \$100,000 | \$300,000 | \$400,000 |
| Paul Peters | UNB | Health and the Environment | Canada Research Chair Tier 1 | 4 | Health / Environment | \$15,000 | \$75,000 | \$90,000 |
| TOTAL | DTAL | | | | | | \$375,000 | \$490,000 |

NBHRF HRP/GRANTS & WORKSHOPS

NBHRF ESTABLISHMENT GRANTS

| Researcher | Affiliation | Project Title Project Title | Pillars | Areas | NBHRF Funding | Leveraged Funding | Total Funding |
|-----------------|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------|------------------|----------------------|------------------|
| John Sensinger | UNB | Body Powered Terminal Devices | 1, 2, 3 | Mobility | \$59,500 | \$94,728 | \$154,228 |
| Sandra Turcotte | UdeMoncton/ ACRI | Targeting the loss of the von Hippel-Lindau tumor suppressor gene at a late- stage of autophagy for the development of anticancer therapy | 1 | Kidney Cancer | \$41,205 | \$41,205 | \$82,410 |
| Erik Scheme | UNB | Improving the Performance, Robustness and Reliability of Myoelectric Control | 1 | Mobility | \$60,000 | \$25,000 | \$85,000 |
| TOTAL | | \$160,705 | \$160,933 | \$321,638 | | | |

NBHRF BRIDGE GRANTS

| Researcher | Affiliation | Project Title | Pillars | Areas | NBHRF Funding | Leveraged Funding | Total Funding |
|----------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------|------------------|----------------------|------------------|
| France Talbot | UdeMoncton | Improving Access to the Treatment of Anxiety and Depression among Francophone Minority Communities: A Feasibility Open Trial of an Internet-based Transdiagnositic Therapy Devlievered as an Online Course | 3 | Mental Health | \$22,512 | \$0 | \$22,513 |
| Thomas Pulinilkunnil | DMNB/UNB | Proteotoxic basis for diabetic cardiomyopathy | 1 | Diabetes | \$30,000 | \$65,000 | \$95,000 |
| Natalie Carrier | UdeMoncton | L'interprofessionnalisme, une perspective de l'apprenant en santé en milieu minoritaire francophone | 4 | Patient Care | \$18,000 | \$22,000 | \$40,000 |
| Lucia O'Sullivan | UNB | Young Love: Psychiatric Morbidity, Distress and Personal Growth Following Romantic Breakup in Late Adolescence | 4 | Mental Health | \$24,210 | \$0 | \$24,210 |
| Ryan Hamilton | UNB | Addressing Loss and Fostering Hope for New Brunswick Cancer Survivors with Lymphedema: An Intervention Pilot Study | 4 | Mental Health | \$24,964 | \$12,170 | \$37,134 |
| Keith Brunt | DMNB/UNB | Nanomedicine for cardiovascular dieseas: High density lipoprotein mimetic nanoparticle delivery of therapeutics to atherosclerotic lesions | 1 | Heart Disease | \$30,000 | \$30,000 | \$60,000 |
| Sandra Turcotte | UdeMoncton/ ACRI | microRNA profiling by next-generation sequencing: Identification of VHL-regulated miRNA in Renal Cell Carcinoma | 1 | Cancer | \$25,000 | \$0 | \$25,000 |
| Petra Kienesberger | DMNB | The Role of Autotaxin in Obesity-related Hypertrophic Cardiomyopathy | 1 | Heart Disease | \$25,000 | \$30,000 | \$55,000 |
| TOTAL | | | | | \$199,687 | \$159,170 | \$358,857 |

NBHRF CORE FUNDING FOR CENTRES, INSTITUTES & NETWORKS

| Group | Area | Title | NBHRF Funding | Leveraged Funding | Total Funding |
|-----------------------------|------------------|-------------------------------------------|------------------|----------------------|------------------|
| Atlantic Institute on Aging | Health and Aging | Let's get aging right / Share your wisdom | \$75,000 | \$0 | \$75,000 |
| TOTAL | | | \$75,000 | \$0 | \$75,000 |

NBHRF ANNUAL CONFERENCE AND WORKSHOP GRANTS

| Researcher | Affiliation | Workshop Title | Number of Attendees | NBHRF Funding | Leveraged Funding | Total Funding |
|------------------|-------------|----------------------------------------------------------------------------------------------------------|------------------------|------------------|----------------------|------------------|
| Collective | NBHRF | 6th Annual Conference on Health Research in New Brunswick | 215 | \$32,512 | \$68,678 | \$101,190 |
| Collective | CIHR-eHIPP | 1st e-Health Innovation Partnership Program | 80 | \$14,286 | \$5,000 | \$19,826 |
| | | Collective Sub-Total | 295 | \$46,798 | \$73,678 | \$121,016 |
| Erik Scheme | UNB | Mechanical Engineering Conference (MEC) 2014 | 230 | \$5,000 | \$24,971 | \$29,971 |
| Shelley Doucet | UNB | New Brunswick Community of Practice in Interprofessional Education and Practice Workshop | 20 | \$4,304 | \$1,214 | \$5,518 |
| Barry Strack | HHN | Interprofessional Health Reseach Day – 2015 | 200 | \$3,925 | \$7,025 | \$10,950 |
| Suzanne Harrison | UdeMoncton | 3é Journée de formation de base sur la recherché en sante et mieux-être : Passeport pour la recherche | 100 | \$3,350 | \$7,650 | \$11,000 |
| | | Individual Sub-Total | 550 | \$16,579 | \$40,860 | \$57,439 |
| TOTAL | | | \$63,377 | \$114,538 | \$177,915 | |

NBHRF HRI: HEALTH RESEARCH INITIATIVES

These programs are aimed at developing major research projects with federal agencies and health charities at assembling and coordinating networks.

CIHR-SPOR-MSSU, PIHCI, TRAM-ACCESS, CCNA AND PHSI

These partnerships are with one of the federal tri-council CIHR on patient-oriented research and other programs.

| | Researcher | Affiliation | Project Title Project Title | Pillars | Areas | NBHRF Funding | Leveraged Funding | Total Funding |
|------|-----------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------------------|------------------|----------------------|------------------|
| | Ted McDonald et al. | UNB | MSSU-Maritime SPOR Support Unit - NB Node and NB-IRDT | All | Big Data | \$723,985 | \$723,985 | \$1,447,970 |
| S. | Baukje Miedema et al. | UNB | PIHCI-Primary and Integrated Health Care Innovations Network | All | Primary Care | \$75,000 | \$75,000 | \$150,000 |
| SP(| Ann Beaton et al. | Ude Moncton | TRAM-ACCESS-NB (Transformational Research in Adolescent & Youth Mental Health – Adolescent/young adult Connections to Community-driven, Early, Strengths-based and Stigma-free services) | All | Mental Health | \$41,692 | \$35,000 | \$76,692 |
| CCNA | Sarah Pakzad | Ude Moncton | CCNA-Memory Clinics in primary care settings | 3 | Aging | \$75,887 | \$22,800 | \$98,687 |
| PHSI | Barbara D'Entremont | UNB | Intervention models for preschoolers with autistic spectrum disorder (ASD): A population-based | 4 | ASD | \$18,153 | \$169,131 | \$187,284 |
| T | TOTAL | | | | | | \$1,025,916 | \$1,960,633 |

NOTE: Part of the MSSU funding is dedicated to Trainee Awards (below)

MSSU TRAINEE HEALTH RESEARCH AWARDS

| Researcher | Grade | Supervisor | Affiliation | Project Title | Pillars | Areas | NBHRF Funding | Leveraged Funding | Total Funding |
|----------------------|-----------------------------|---------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------------------|------------------|----------------------|------------------|
| Ronald Yan | Summer Studentship | Yu Chen | DMNB | Computerized Tool to Generate Automated Reports on Laboratory Test Utilization | 2 | Clinical | \$5,900 | \$0 | \$5,900 |
| Edward Percy | Summer Studentship | Ansar Hassan | DMNB | Post-operative Creatinine trends in cardiac surgery- associated Acute Kidney Injury | 1 | Heart Surgery | \$5,900 | \$2,063 | \$7,963 |
| Emily Taylor | Summer Studentship | Wayne Albert | UNB | Comparison of subjective versus objective biomechanical outcome measures in postoperative spine patients | 1 | Mobility | \$5,900 | \$0 | \$5,900 |
| Emilie LeBlanc | MSc Studentship | Mathieu Bélanger | Ude Moncton | Déterminer les facteurs prédictifs d'un contrôle adéquat de l'hémoglobine glycosylée (HbA1C) chez les patients diabétiques du Nouveau-Brunswick | 1 | Diabetes | \$17,400 | \$10,000 | \$27,400 |
| Amanda Slaunwhite | Post-Doctoral Fellowship | Paul Peters | UNB | Pathways to Care for Youth and Adults with Mental Health Issues in New Brunswick | 3 | Mental Health | \$50,000 | \$0 | \$50,000 |
| Naga Puvvada | Post-Doctoral Fellowship | Keith Brunt | DMNB | Detection and tracking of blood cancer stage during therapy via blood plasma through Raman scattering | 1 | Cancer | \$50,000 | \$0 | \$50,000 |
| TOTAL | | | | | | | \$135,100 | \$12,063 | \$147,163 |

WELLNESS RESEARCH FUND (WRF)

This fund was initiated by the GNB-DHIC (Dept. Healthy & Inclusive Communities) to sustain social population health research.

| Researcher | Affiliation | Project Title | Pillar | Area | NBHRF Funding | Leveraged Funding | Total Funding |
|-------------|-------------|------------------------------------------------------------------|--------|-------------------|------------------|----------------------|------------------|
| Ann Sherman | UNB | Wellness Resources supporting First Nation and Aboriginal People | 4 | Aboriginal Health | \$10,000 | \$0 | \$10,000 |
| TOTAL | | | | | \$10,000 | \$0 | \$10,000 |

STRATEGIC INITIATIVE PROJECTS & PARTNERSHIPS

This NBHRF program partners with the private sector and/or the health charities to support operating grants and/or salary awards in New Brunswick.

| Partner | Program | Trainee | Researcher / Supervisor | Affiliation | Project Title | Pillars | Areas | NBHRF Funding | Leveraged Funding | Total Funding |
|--------------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------|-----------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------|------------------|----------------------|------------------|
| 3CTN - Canadian Cancer Center Trials Network | Network Grant | N/A | Tony Reiman et al. | HNN/RSV | Establishing NB - Network Cancer Center (NCC) | 1 | Cancer | \$30,000 | \$0 | \$30,000 |
| Rx&D-HRF, Eli Lilly, Sanofi, NovoNordisk, Janssen, Boehringer-I | Grant | N/A | Mary MacSween & Remi Leblanc | HNN/RSV | Universal Implementation of Insulin Order Sets in New Brunswick Hospitals / DCOS | 3 | Diabetes | \$37,500 | \$87,500 | \$125,000 |
| BioSign | Grant | N/A | Keith Brunt | DMNB/ HHN-NBHC | Comparison, calibration and validation of non-invasive BioSign Pulsewave Health Monitor with direct invasive radial and central arterial measure- ments during cardiac catheterization | 2 | Cardiovascular MedTech | \$30,000 | \$60,000 | \$90,000 |
| Shaping Purpose | Grant | N/A | Edward Yuzda | HHN | Shaping Purpose of Military & Youth | 3 | Mental Health | \$20,000 | \$40,000 | \$60,000 |
| Pfizer | Grant | N/A | Michel Johnson | Ude Moncton | Connected Voices - Bouctouche | 3 | eHealth mHealth | \$37,500 | \$75,000 | \$112,500 |
| Boehringer-Ingleheim | Grant | N/A | Rob Roscoe | R2 Consulting | Pharmacist Led(PL) Diabetes Mellitus(DM) Chronic Disease Management Program (CDMP) pilot = OPTIONS Program Pilot | 3 | Diabetes | \$5,000 | \$10,000 | \$15,000 |
| CCS-RI/Canadian Cancer Society Research Institute & Craig's Cause Pan- creatic Cancer Society | Grant | N/A | Stephen Lewis, Aniban Ghosh and Rodney Ouellette | ACRI | Use of a novel extracellular microvesicle capture method for enrichement and identification of pancreatic cancer biomakers | 1 | Cancer | \$25,000 | \$25,000 | \$50,000 |
| | Summer Studentship | Ethan Toumishey | Tony Reiman | DMNB | Evaluation of TRPV6 as a potential therapeutic target in Non-Small Cell Lung Cancer | 1 | Cancer | \$2,785 | \$2,785 | \$5,570 |
| | Summer Studentship | Ashley DiPasquale | Tony Reiman | DMNB | The analysis of TRPV6 expression in lymphoid tumors and its impact on survival rate | 1 | Cancer | \$2,785 | \$2,785 | \$5,570 |
| | Summer Studentship | Sarah Robichaud | Sandra Turcotte | Ude Moncton | Contribution of the glutamine/gluta- mate cycle in response to STF-62247 revealed by metabolic profiling: Correlation between the PI3K/AKT/ FOXO pathway and autophagy | 1 | Cancer | \$3,250 | \$3,250 | \$6,500 |
| | Summer Studentship | Pascale Michaud | Gilles Robichaud | Ude Moncton | Functional characterization of mammaglobin-1 gene products in breast cancer malignancy | 1 | Cancer | \$3,250 | \$3,250 | \$6,500 |
| | Summer Studentship | Dominque Comeau | Stephen Lewis | Ude Moncton | Characterization of novel miRNAs involved in breast cancer metastasis | 1 | Cancer | \$3,250 | \$3,250 | \$ 6,500 |
| BHCRI / Beatrice Hunter Cancer | MSc Studentship | Sarah Robichaud | Sandra Turcotte | Ude Moncton | Contribution of the glutamine/gluta- mate cycle in response to STF-62247 revealed by metabolic profiling: Correlation between the PI3K/AKT/ FOXO pathway and autophagy | 1 | Cancer | \$8,925 | \$8,925 | \$17,850 |
| Research Institute | MSc Studentship | Lyzandra Pereira | Krista Wilkins | UNB | Infertility among young men after cancer treatment | 4 | Cancer | \$8,925 | \$8,925 | \$17,850 |
| | MSc Studentship | Megan Williams | Krista Wilkins | UNB | Young Women and Breast Cancer: Meanings of Sexuality Post Contralateral Mastectomy | 4 | Cancer | \$8,925 | \$8,925 | \$17,850 |
| | PhD(c) Studentship | Jason Harquail | Gilles Robichaud | Ude Moncton | Elucidating the interaction between Pax-5 and miRNAs in breast cancer | 1 | Cancer | \$8,925 | \$8,925 | \$17,850 |
| | Post-doctoral Fellowship | Sami Benzina | Gilles Robichaud | Ude Moncton | Study of Pax5 in breast cancer metastasis | 1 | Cancer | \$18,375 | \$18,375 | \$36,750 |
| | CRTP-Cancer Research Trai- ning Program | Ming Han | Tony Reiman | DMNB | The pharmacogenetics of mainte- nance therapy for multiple myeloma | 1 | Cancer | \$8,925 | \$8,925 | \$17,850 |
| | New Investi- gator Award | N/A | Krista Wilkins | UNB | Through the Images of Cancer Survivors: The Lived Experience of Surviving Multiple Cancer Diagnoses | 4 | Cancer | \$12,500 | \$12,500 | \$25,000 |
| | Grant | N/A | Stephen Lewis | ACRI | Characterization of novel miRNAs involved in breast cancer metastasis | 1 | Cancer | \$15,000 | \$15,000 | \$30,000 |
| KFOC /Kidney Foundation of Canada | Scholarship | N/A | Sandra Turcotte | Ude Moncton | Targeting the loss of the von Hippel- Lindau tumor suppressor gene at a late-stage of autophagy for the development of anticancer therapy | 1 | Cancer | \$24,000 | \$36,000 | \$60,000 |
| MSSC / Multiple Sclerosis Society of Canada | Grant | N/A | Alain Simard | Ude Moncton | Cholinergic control of monocyte differentiation, function and recruitment to the CNS | 1 | Multiple Sclerosis | \$20,000 | \$80,000 | \$100,000 |
| TFRI / Terry Fox Research Institute | Postdoctoral Fellowship | Ali Murugesan | Anthony Reiman | UNB/ HHN | Combinatorial Therapeutic Approach to Treat Multiple Myeloma: Inhibition of the 3' Immunoglobulin Gene (101) Enhancer Using Small Molecule | 1 | Cancer | \$18,375 | \$18,375 | \$36,750 |
| TOTAL | | | | | | | | \$353,195 | \$537,695 | \$890,890 |

SIHRI - STRATEGIC INVESTMENT IN HEALTH RESEARCH INNOVATION

These programs are aimed at preparing institutions for major national partnering projects

CANADA FOUNDATION FOR INNOVATION (CFI)

| Researcher | Affiliation | Project Title | Pillar Area | Area | NBHRF Funding | Leveraged Funding | Total Funding |
|--------------|-----------------|---------------------------------|-------------|--------|------------------|----------------------|------------------|
| Marc Surette | UdeMoncton/ACRI | NB Centre on Precision Medicine | 1 | Cancer | \$30,500 | \$27,000 | \$57,500 |
| TOTAL | | | | | \$30,500 | \$27,000 | \$57,500 |

GRANTS OBTAINED WITHOUT NBHRF CONTRIBUTION

| Researcher | Affiliation | Program | Project Title | Pillars | Areas | Period | Duration | Total Funding | 2014-15 Funding | Funding Year |
|----------------------------------------------------------|-----------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------------------|-----------------------|----------|------------------|--------------------|-----------------|
| Ansar Hassan | HHN-SJRH/ NBHC | SJRH-Foundation / Fund for Innovative Research Excellence (FIRE) | ETHICS – Ensuring Patients Thrive after ICU following cardiac surgery | 2 | Cardiovascular Health | 2014-15 | 1 year | \$35,690 | \$35,690 | FY01 |
| Joshua Mayich | HHN-SJRH | SJRH-F / FIRE | Wide Awake Foot and Ankle Surgery; physiological analysis | 2 | Surgery Techniques | 2014-15 | 1 year | \$23,234 | \$23,234 | FY01 |
| D. Webster & A. Adisesh | HHN-SJRH/ DMNB/UNB | SJRH-F / FIRE | Emerging Viral Zoonotic Infections in NB: Seroprevalence Study | 4 | Infectious Diseases | 2014-15 | 1 year | \$16,500 | \$16,500 | FY01 |
| Anne Marie Creamer | HHN-SJRH | SJRH-F / FIRE | PEER 126: Exploration of Youth with PEER - factors affecting participation | 4 | Mental Health | 2014-15 | 1 year | \$4,000 | \$4,000 | FY01 |
| S. Sayanarayana | HHN-SJRH | SJRH-F / MindCare "Transformation Grants" | Stay Strong: A multifaceted approach to breast cancer survivorship | 2 | Cancer | 2014-15 | 1 year | \$107,000 | \$107,000 | FY01 |
| YXie & T Comeau | HHN-SJRH | Chesley Research Fund | Whole exome sequencing of BCR-ABL Neoplasms – searching for causative/modifier genes | 1 | Cancer | 2014-15 | 1 year | \$19,963 | \$19,963 | FY01 |
| M. Howlett & J Talbot | HHN-SJRH | Chesley Research Fund | Critical Dynamics Intervention Tool: Coping Style Interventions to reduce Burnout | 2 | Mental Health | 2014-15 | 1 year | \$20,000 | \$20,000 | FY01 |
| Thomas Pulinilkunnil; Co-Is: A. Adisesh, T. Reiman | DMNB | Chesley Research Fund | Role of anti-oxidant metabolism in doxorubicin cardiotoxicity and its impact on life quality | 1,3 | Cardiovascular Health | 2014-15 | 1 year | \$20,000 | \$20,000 | FY01 |
| Grant Handrigan | UdeMoncton | NB Trauma Research Fund | Validation of a Novel Tool for clinical diagnostic accuras of falls with MS patients | 2 | Frailty | 2014-15 | 1 year | \$9,987 | \$9,987 | FY01 |
| Anil Adisesh | DMNB/UNB | Worker's Compensation Boards - NB, NS, PEI | Review of the Medical Service Delivery Model | 4 | Service Delivery | 2014-15 to 2015-16 | 2 years | \$117,000 | \$45,000 | FY01 |
| Anil Adisesh | DMNB/UNB | Worker's Compensation Boards - NB, NS, PEI | Difficult Retum to Work Decisions | 2, 4 | Retum to Work | 2014-15 to 2015-16 | 2 years | \$31,885 | \$6,500 | FY01 |
| Shelley Doucet & Rima Azar | UNB & MtA | New Brunswick Children Foundation | Strategic collaborative partnership for children with complex health needs | 3 & 4 | Children's Health | 2014-15 to 2018-19 | 5 years | \$750,000 | \$140,000 | FY01 |
| Keith Brunt | DMNB | Dalhousie University Faculty of Medicine Bridge Grant | Nanomedicine for cardiovascular disease: High-density lipoprotein mimetic nanparticle delivery of therapeutics to atherosclerotic lesions | | Cardiovascular Health | 2014-15 | 1 year | \$30,000 | \$30,000 | FY01 |
| Sandra Turcotte | UdeMoncton/ ACRI | NB Chapter - Canadian Cancer Society, Health Research Chair | To characterize VHL function in autophagy to develop a therapeutic strategy based on synthetic lethality to target renal cancer cells | 1,3 | Cancer | 2011-12 to 2014-15 | 4 years | \$440,000 | \$110,000 | FY04 |
| Tony Reiman | UNB/HHN- SJRH/DMNB | NB Chapter - Canadian Cancer Society, Health Research Chair | To advance the quality of life and survival of patients receiving cancer drug therapy, focusing on lung cancer. Iymphoma, and multiple myeloma by bridging the gap between the laboratory and the clinic | 1,3 | Cancer | 2011-12 to 2014-15 | 4 years | \$440,000 | \$110,000 | FY04 |
| ACRI | ACRI | Prostate Cancer Canada – Wake Up Breakfast | Health Research | 1 | Cancer 2014-15 | 2014-15 | 1 year | \$18,467 | \$18,467 | FY01 |
| SJRH | SJRH | Prostate Cancer Canada – Wake Up Breakfast | Health Research | 1,2 | Cancer | 2014-15 | 1 year | \$7,300 | \$7,300 | FY01 |

Private Foundations / Health Charities

| | Researcher | Affiliation | Program | Project Title P | Pillars | Areas | Period | Duration | Total Funding | 2014-15 Funding | Funding Year |
|-------|-----------------------|-----------------------------|---------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------|-----------------------|----------|------------------|----------------------|-----------------|
| | Kelly Scott-Storey | UNB | Operating Grant | Masculinities, Lifetime Violence and Health | 4 | Men's Health | 2014-15 to 2018-19 | 5 years | \$383,676 | | FY01 |
| | Sandra Turcotte | U de Moncton / ACRI | Operating Grant | Exploiting synthetic lethality in Renal Cell Carcinoma: Targeting the loss of the von Hippel-Lindau tumor suppressor gene through autophagy for the development of anticancer therapy | 4 | Kidney Cancer | 2014-15 to 2018-19 | 5 years | \$495,930 | \$78,690 | FY01 |
| | Guillaume Desnoyers | U de Moncton | Post Doctoral Fellowship | Investigating the mechanism of eIF3e-mediated epithelial-to-mesenchymal transition during breast cancer | 1 | Cancer | 2012-13 to 2014-15 | 3 years | \$135,000 | \$30,000 | FY03 |
| | Rima Azar | Mount Allison University | New Investigator Award | Maternal prenatal negative mood & infant stress and immunity: Could increased maternal inflammation during pregnancy be the linking mechanism? | 1 | Matemal & Infant Health | 2010-11 to 2014-15 | 5 years | \$150,000 | \$30,000 | FY05 |
| СІНВ | Karen Furlong | UNB | Post Doctoral Fellowship - Regional Partnership Program (RPP) | Exploring the Educational Imperatives to Support Successful Electronic Health Record Integration | 3 | Health Services | 2012-13 to 2014-15 | 3 years | \$82,500 | \$2,708 | FY03 |
| | Natalie Lefort | U de Moncton | Post Doctoral Fellowship | Impact of a novel bioactive form of omega-3 polyunsaturated fatty acid, stearidonic acid, on immune health in humans | 1 | Immunity | 2011-12 to 2015-16 | 5 years | \$155,000 | \$40,000 | FY04 |
| | Stephen Lewis | ACRI | Operating Grant - RPP | Understanding the cytoplasmic roles of hnRNP A1 | 1 | Cancer | 2012-13 to 2014-15 | 3 years | \$142,285 | \$30,000 | FY03 |
| | Lucia O'Sullivan | UNB | Operating Grant | Problems, Predictors, and Progression of Sexual Functioning among Adolescents | 4 | Sexual Health | 2010-11 to 2014-15 | 5 years | \$487,292 | \$97,334 | FY05 |
| | Gilles Robichaud | U de Moncton | Operating Grant - RPP | Mapping the Pax-5 cancerous interactome in breast cancer cells | 1 | Cancer | 2010-11 to 2014-15 | 5 years | \$150,000 | \$30,000 | FY05 |
| | Pablo Santos Iglesias | UNB | Banting Fellowship | Sexual Well-Being in Couples Living with Fibromyalgia: An Application of the Interpersonal Exchange Model of Sexual Satisfaction | 4 | Sexual Health | 2012-13 to 2014-15 | 2 years | \$140,000 | \$70,000 | FY02 |
| | Keith Brunt | DMNB | Infrastructure Operating Fund | A new laboratory to create innovative experimental therapeutics and establish regenerative medicine capacity for cardiovascular disease in NB | 1 | Cardiovascular Disease | 2014-15 to 2018-19 | 5 years | \$125,000 | \$25,000 | FY01 |
| Н | Thomas Pulinilkunnil | DMNB | Infrastructure Operating Fund | A new laboratory aimed at establishing a Cardiac Metabolism and function pheotyping program at the Dalhousie Medicine New Brunswick Cardiovascular Research Center | 1 | Cardiovascular Disease | 2014-15 to 2018-19 | 5 years | \$125,000 | \$25,000 | FY01 |
| 0 | Keith Brunt | DMNB | Leaders Opportunity Fund | A new laboratory to create innovative experimental therapeutics and establish regenerative medicine capacity for cardiovascular disease in NB | 1 | Cardiovascular Disease | 2014-15 to 2018-19 | 5 years | \$313,830 | \$313,830 | FY01 |
| | Thomas Pulinilkunnil | DMNB | Leaders Opportunity Fund | A new laboratory aimed at establishing a Cardiac Metabolism and function pheotyping program at the Dalhousie Medicine New Brunswick Cardiovascular Research Center | 1 | Cardiovascular Disease | 2014-15 to 2018-19 | 5 years | \$311,822 | \$311,822 | FY01 |
| | Wayne Albert | UNB | Discovery | Fatigue-related accomodations to lifting coordination pattems | 1 | Mobility | 2014-15 | 1 year | \$32,000 | \$32,000 | FY01 |
| | Christopher Baker | UNB | Discovery | Cosmetics product safety, knowledge and data management | 1 | Skin Health | 2014-15 | 1 year | \$25,000 | \$25,000 | FY01 |
| | Keith Brunt | DMNB | Discovery | Role of heme metabolism in muscle function | 1 | Heart Function | 2014-15 | 1 year | \$35,000 | \$35,000 | FY01 |
| | Denise Clark | UNB | Discovery | Genome evolution through RNA-based gene duplication | 1 | Genetics | 2014-15 | 1 year | \$35,000 | \$35,000 | FY01 |
| (| Bryan Crawford | UNB | Discovery | Regulation and consequences of extracellular matrix remodelling protease activity in the developing zebrafish | 1 | Genetics | 2014-15 | 1 year | \$36,000 | \$36,000 | FY01 |
| NSEBC | Victoria Chester | UNB | Discovery | The development of kinematic and kinetic multisegment foot models for gait analysis | 1 | Mobility | 2014-15 | 1 year | \$27,000 | \$27,000 | FY01 |
| | Kevin Englehart | UNB | Discovery | Myoelectric control of powered upper limb prostheses | 1 | Mobility | 2014-15 | 1 year | \$60,000 | \$60,000 | FY01 |
| | Christopher Gray | UNB | Discovery | Combining bioactivity and metabolomic profiling in the discovery of antibiotic natural products from endophytic fungi | - | Natural Products | 2014-15 | 1 year | \$30,000 | \$30,000 | FY01 |
| | Katherine Guérard | UdeMoncton | Discovery | The role of the motor system in the retention of information | 1 | Memory | 2014-15 | 1 year | \$32,000 | \$32,000 | FY01 |
| | Eric Hildebrand | UNB | Discovery | Road safety and travel needs for the rural elderly | 1 | Elderly | 2014-15 | 1 year | \$24,000 | \$24,000 | FY01 |
| | Bernard Hudgins | UNB | Discovery | Myoelectric signal processing and applications to rehabilitation | | Mobility | 2014-15 | 1 year | \$25,000 | \$25,000 | FY01 |

| | Researcher | Affiliation | Program | Project Title | Pillars | Areas | Period | Duration | Total Funding | 2014-15 Funding | Funding Year |
|------|-------------------------------------------------|-------------|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------|---------|----------|------------------|--------------------|-----------------|
| | Peter Kyberd | UNB | Discovery | Investigation and assessment of the control of upper limb prostheses | 1 | Mobility | 2014-15 | 1 year | \$23,000 | \$23,000 | FY01 |
| | Vett Lloyd | MtA | Discovery | Genomic imprinting in Drosophila | 1 | Genetics | 2014-15 | 1 year | \$40,000 | \$40,000 | FY01 |
| | Tyson MacCormack | MtA | Discovery | Coupling cardiovascular control and energy metabolism in fish: the influence of emerging (nanoparticle) toxicants | 1 | Metabolism | 2014-15 | 1 year | \$29,000 | \$29,000 | FY01 |
| | Luc Martin | UdeMoncton | Discovery | Sox transcription factors: Regulatory mechanisms and impact on steroidogenesis | н | Cancer | 2014-15 | 1 year | \$33,000 | \$33,000 | FY01 |
| | Christopher McGibbon | UNB | Discovery | Biomechanical and physiological effects of using an active assist knee brace during activity of daily living | 1 | Mobility | 2014-15 | 1 year | \$25,000 | \$25,000 | FY01 |
| | Petra Kienesberger | DMNB | Discovery | Lysophospholipid metabolism and signalling - role of lysophospholipases | 1 | Metabolism | 2014-15 | 1 year | \$35,000 | \$35,000 | FY01 |
| | Erik Scheme | UNB | Discovery | Improving the Performance, Robustness and Reliability of Mycelectric Control | 1 | Mobility | 2014-15 | 1 year | \$25,000 | \$25,000 | FY01 |
| | Jonathan Sensinger | UNB | Discovery | Exploration of optimal prosthesis feedback information using computational motor control | - | Mobility | 2014-15 | 1 year | \$31,000 | \$31,000 | FY01 |
| | Thomas Pulinilkunnil | DMNB | Discovery | Identifying and characterizing pathways of amino acid metabolism and signaling | 1 | Metabolism | 2014-15 | 1 year | \$35,000 | \$35,000 | FY01 |
| | Mohamed Touaibia | UdeMoncton | Discovery | Design and synthesis of phenolic acid analogues as inhibitors of fatty acid metabolism | 1 | Heart Disease | 2014-15 | 1 year | \$30,000 | \$30,000 | FY01 |
| | Luc Tremblay | UdeMoncton | Discovery | Impacts de la matière organique sur le cycle du carbone révélés par des méthodes novatrices de caractérisation moléculaire | - | Biochemistry | 2014-15 | 1 year | \$27,000 | \$27,000 | FY01 |
| | Nancy Black | UdeMoncton | Engage | Ergonomic study of Workblade Postural Support System: Controlled comparative study of users relative to seated and sit-stand workstations and collaborative design refinements | - | Posture | 2014-15 | 1 year | \$20,180 | \$20,180 | FY01 |
| SERC | Jonathan Sensinger | UNB | Research Tools and Instruments | Haptic Interface for: Computational Motor Control for Better Control of Prosthetic Devices | 1 | Mobility | 2014-15 | 1 year | \$112,372 | \$112,372 | FY01 |
| N | Student (Supervisor) | Affiliation | Program | Project Title | Pillars | Areas | Period | Duration | Total Funding | 2014-15 Funding | Funding Year |
| | Corrine Boudreau (Dr. Vett Lloyd) | MtA | Summer Studentship | Effectiveness of antibiotic treatment in MS patients with Lyme disease | 1 | Lyme Disease | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Chelsey Brown (Dr. Christopher Gray) | UNB | Summer Studentship | Bioactive natural products from endophytic fungi | 1 | Natural Products | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Madison Carroll (Dr. Christopher Gray) | UNB | Summer Studentship | Isolation, culture and bioactivity of fungal endophytes from marine algae | 1 | Natural Products | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Brandon Doucet (Dr. Christopher Gray) | UNB | Summer Studentship | Isolation and culture of fungal endophytes from medicinal plants | 1 | Natural Products | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Steve Morrison (Dr. Christopher Gray) | UNB | Summer Studentship | Bioactivity screening of Canadian traditionally used medicinal plants | 1 | Natural Products | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Julie Chiasson (Dr. François Vigneau) | UdeMoncton | Summer Studentship | Rotation mentale : facteurs de performance et différences individuelles | 1 | Mental Heatlh | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Luke Anthony Dillman (Dr. Erik Scheme) | UNB | Summer Studentship | Effects of demoskeletron use on ankle and knee dynamatics | 1 | Mobility | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Véronique Leblanc (Dr. Pierre Morin) | UdeMoncton | Summer Studentship | Characterization of temozolomide resistance in human glial cells | 1 | Cancer | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Mariah Martin-Shein (Dr. A. Hamilton-Wright) | MtA | Summer Studentship | Risk Modeling in Repetitive Strain Injury | 1 | Injury | 2014-15 | 1 year | \$4,500 | \$4,500 | FY01 |
| | Jason Robertson (Dr. Erik Scheme) | UNB | PhD Studentship | Myoelectric control of a prosthetic limb | 1 | Mobility | 2014-15 | 1 year | \$21,000 | \$21,000 | FY01 |
| | Andrew Flewelling (Dr. Christopher Gray) | UNB | PhD Studentship | Discovery of natural product based efflux inhibitors from endophytic fungi of North Atlantic marine macroalgae | 1 | Natural Products | 2014-15 | 1 year | \$35,000 | \$35,000 | FY01 |
| | TOTAL | | | | | | | | | \$2,762,185 | |

TOTAL FUNDS ALLOCATED AND LEVERAGED in 2014-15

The table below presents the revenues and allocated funds by NBHRF. Funds are invested via two categories: Salary Awards & Operating Grants.

| | Sources of Financing | FY 06 / 2013-14 | FY 07 / 2014-15 |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| A | Funds received from GNB - GNB-RDC / CDC (Total Development Fund) - GNB-DOH / MRF (Medical Research Fund) - GNB-DIHC / WRF (Wellness Research Fund) TOTAL | \$2,000,000 \$500,000 \$75,000 \$2,575,000 (\$3.42 per capita) | \$1,290,717 \$400,000 \$200,000 \$1,890,717 (\$2.52 per capita) |
| В | NBHRF Directed Funds INVESTED on Salary Awards and Operating Grants | \$1,010,511 | \$2,315,237 |
| С | Additional Funds Matched and/or Leveraged through partnering with NBHRF - Federal (CIHR, CFI) - Health Charities - Private Sector - Other GNB Departments & Agencies | \$934,844 \$151,800 \$354,039 \$126,000 \$1,566,683 | \$1,250,086 \$322,196 \$692,038 \$254,995 \$2,519,315 |
| D | Total Funds invested as Salary Awards and Operating Grants (B + C) | \$2,577,194 | \$4,834,552 |
| E | NBHRF Operating Expenditures - Administrative Salaries & Benefits - Research Programming Salaries & Benefits - Balance for Operation & Administration TOTAL % of A % of D | \$250,917 \$134,008 \$274,186 \$659,111 25.6% 25.6% | \$261,074 \$148,420 \$300,279 \$709,773 37.5% 14.7% |

2014-15 SUMMARY OF ALL MATCHED AND LEVERAGED FUNDS

| Program | # of grants and salary awards | NBHRF Funding 2014-15 | Leveraged Funding 2014-15 | Total Dollars 2014-15 |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------|------------------------------|--------------------------|
| HRP – Health Research Programs | | | | |
| NBHRF Undergraduate / Medical School Summer Studentships | 14 | \$77,456 | \$0 | \$77,456 |
| NBHRF Clinical Scholarships | 2 | \$82,500 | \$0 | \$82,500 |
| NBHRF MSc & PhD(c) Studentships and Postdoctoral Fellowships | 6 | \$78,000 | \$107,000 | \$185,000 |
| NBHRF Health Research Chair | 2 | \$115,000 | \$375,000 | \$490,000 |
| NBHRF Establishment Grants | 3 | \$160,705 | \$160,933 | \$321,638 |
| NBHRF Bridge Grants | 8 | \$199,687 | \$159,170 | \$358,857 |
| NBHRF Core Funding for Centres, Institutes & Networks | 1 | \$75,000 | \$0 | \$75,000 |
| NBHRF Annual Conference & Workshop Grants | 6 | \$63,377 | \$114,538 | \$177,915 |
| SUB-TOTAL | 42 | \$851,725 | \$916,641 | \$1,768,366 |
| HRI – Health Research Initiatives | | | | |
| CIHR-SPOR-MSSU, PIHCI, TRAM-ACCESS, CCNA and PHSI | 5 | \$934,717 | \$1,025,916 | \$1,960,633 |
| MSSU Trainee Health Research Awards | 6 | \$135,100 | \$12,063 | \$147,163 |
| Wellness Research Fund (WRF) | 1 | \$10,000 | \$0 | \$10,000 |
| Strategic Initiative Protects & Partnerships | 23 | \$353,195 | \$537,695 | \$890,890 |
| SUB-TOTAL | 35 | \$1,433,012 | \$1,575,674 | \$3,008,686 |
| SIRI - Strategic Investment in Health Research | | | | |
| Canada Foundation for Innovation (CFI) – grant preparation | 1 | \$30,500 | \$27,000 | \$57,500 |
| SUB-TOTAL | 1 | \$30,500 | \$27,000 | \$57,500 |
| TOTAL | 78 | \$2,315,237 | \$2,519,315 | \$4,834,552 |
| Grants obtained from Other Sources (CFI, CIHR, NSERC, Private Foundations/Charities) without NBHRF contribution | 66 | \$0 | \$2,787,952 | \$2,787,952 |
| GRAND TOTAL INVESTED INTO THE NEW BRUNSWICK KNOWLEDGE ECONOMY | 144 | \$2,315,237 | \$5,307,267 | \$7,622,504 |