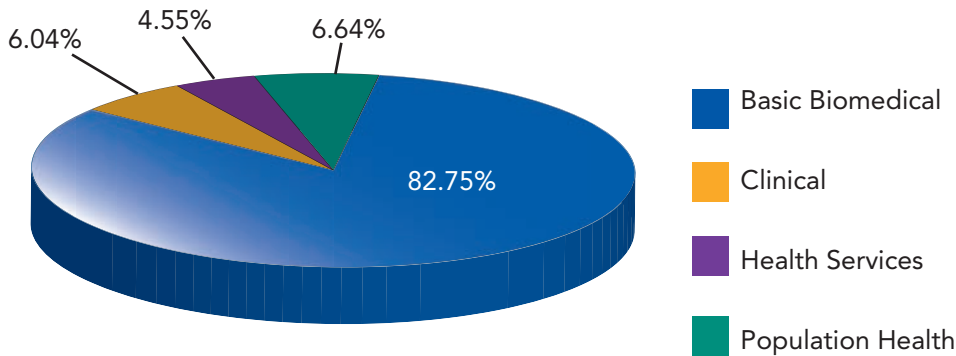


## Grant-in-Aid Awards

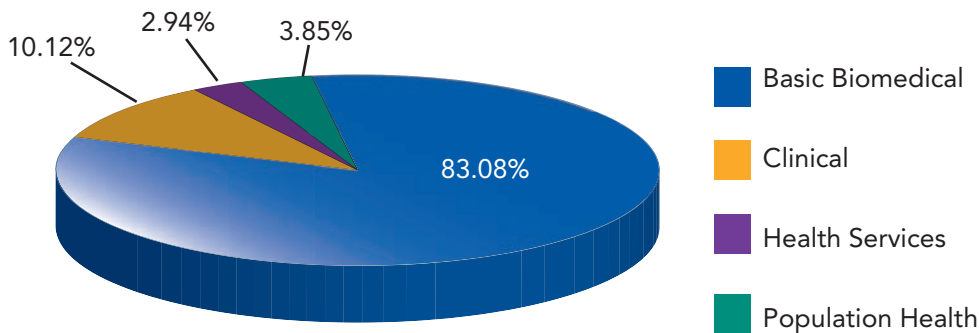
The Heart and Stroke Foundation of BC & Yukon's (HSFBCY) Research Advisory Committee **approved funding for 13 grants** at its annual April review meeting. The success rate for the 2009-2010 application round was 24%, down slightly from last year's 27%. The total applications to HSFBCY numbered 55, including six for multi-provincial teams (new guidelines for Heart and Stroke Foundation multi-provincial grant applications are outlined on page 2 in this issue). Total funding for new grants for the 2009-2010 fiscal year was \$1.5 million with an additional \$3 million for continuing grants.

As in previous years, the bulk of funding – over 80% – went to basic biomedical projects. As the charts below show, the distribution of the remaining funding is slightly different for new grants than for all grants due to a rise in the number of awards with a focus on health services and/or population versus clinical research. Overall, however, the proportion of funding devoted to those two pillars remains quite small.

HSFBCY research awards by theme – new grants 2009-2010



HSFBCY research awards by theme – all grants 2009-2010



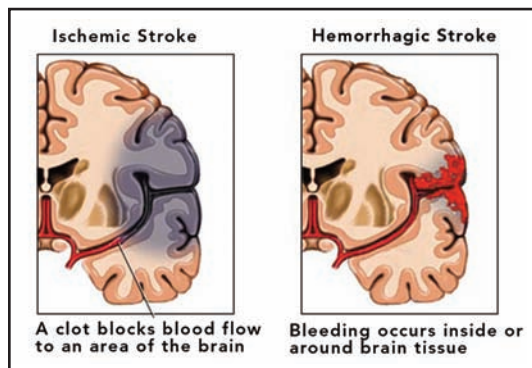
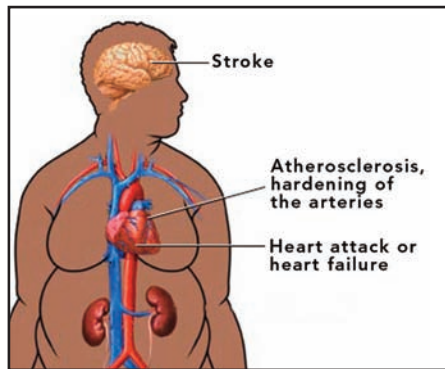
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## News from the HSF Federation Research Fund

The **HSF Federation Research Fund (FRF)** supports projects in three strategic areas – obesity, stroke, and resuscitation – often in partnership with other organizations.



This spring, **three groups of BC researchers** were awarded grants in two of these areas, stroke and obesity.

**Dr. Teresa Liu-Ambrose**, of the Vancouver Coastal Research Institute and Centre for Hip Health, is the Principal Investigator for a clinical study looking at the Role of Exercise in Cognition and Function in Seniors with Vascular Cognitive Impairment. This project is funded through a request for proposals for research in Vascular Cognitive Impairment sponsored by HSF and the Canadian Stroke Network.

The second BC project funded through the FRF is one of three funded through the Secondary Stroke Prevention competition, sponsored by HSF in partnership with the Institute for Circulatory and Respiratory Health and the Canadian Stroke Network. The Principal Investigators, **Dr. Andrew Penn**, from the Vancouver Island Health Authority, and **Dr. Malcolm Maclure**, from UVIC, together with their co-Investigator, **Dr. Devin Harris** from St. Paul's Hospital, will conduct A Natural Experiment in Rapid TIA Care with Knowledge Transfer and Exchange. This project will focus on evaluating the outcomes from VIHA's rapid stroke assessment clinic.

Finally, **Dr. Louise Mâsse** of the Child and Family Research Institute, is the Principal Investigator for a project aimed at Understanding the Environmental Influences that Guide Changes of Behaviours among Overweight/Obese Adolescents and their Families. This study will assess the impact of an online support program for children in the context of the home and school environment. The project is one of five funded nationally through a partnership between HSF, CIHR, and the Rx&D Health Research Foundation, and the First Nations and Inuit Health Branch of Health Canada.

**In June, HSFC will announce three upcoming competitions.**

These include requests for applications for two personnel awards programs, Focus on Stroke 9 and a new competition, Jump Start Resuscitation. As well, HSFC will partner with Canadian Institutes of Health Research (CIHR) in the Partnership for Health System Improvement program.

**Guidelines and application forms** for the 2010-2011 grants-in-aid and New Investigator/ Distinguished Clinician Scholar will be posted on the HSF website by the end of June.

In addition, Heart and Stroke Foundation of Canada (HSFC) will be announcing **three new competitions** (see paragraph to the left).

## Personnel Awards

Initial offers have been made to applicants for HSF **Personnel Awards**. Nine of 37 BC-based applicants have been offered New Investigator, Research Fellowship, and Doctoral Research Awards. No one from BC applied for the new Research Scholarship that is available for practising health professionals. Across the country, a total of 241 applications were submitted and 67 offers have been made.

Guidelines and applications for the upcoming round of Personnel Awards will be posted soon. Applications for the New Investigator/Distinguished Clinician Scientist award are due by Tuesday, September 1, 2009. The deadline for the other Personnel Awards is Friday, October 30, 2009.

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## New guidelines for Multi-Provincial GIA (MPGIA) applications

The Foundation has revamped and streamlined the application process for multi-provincial research teams. The new guidelines will be posted at the same time as the Grant-in-Aid (GIA) guidelines. Potential applicants will be required to submit a Letter of Intent prior to the full application. As with the current process, all **MPGIAs** will be reviewed by the Scientific Review Committee at all other GIA applications. However, rather than separate budget reviews by each province to which the application has been submitted, the new process will feature a national-level review of the budgets of eligible grants. Each province will also set a maximum amount that will be available to MPGIA projects. This will be reviewed annually. In 2010-2011, HSFBCY will fund up to \$75,000 for an MPGIA.

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## BC Stroke Strategy

For two years, the Heart and Stroke Foundation of BC & Yukon has been overseeing and managing the **BC Stroke Strategy**, and momentum is growing. Across the province, partners have developed prototype projects in key areas and applied for additional project funding from the BC Ministry of Health Services. These projects cover the continuum of care – from prevention through acute care to rehabilitation. A key element is accurately measuring and evaluating outcomes, making sure that health care resources are used as efficiently and effectively as possible.



Here's a high-level update of several Stroke Strategy initiatives:

### TIA Rapid Assessment Clinics

A Transient Ischemic Attack (TIA or mini-stroke) occurs when blood flow to part of the brain is blocked or reduced, often by a blood clot. After a short time, blood flows again and the symptoms go away. Unfortunately, most people don't recognize a TIA as a stroke or heed the warning: within 30 days, 10 per cent will go on to have a full-blown stroke. TIA Rapid Assessment clinics specialize in identifying and treating TIAs, helping prevent more serious strokes.

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## BC Stroke Strategy - cont'd

As part of the BC Stroke Strategy, new TIA Rapid Assessment clinics are coming on line and existing ones are expanding. In February, the Fraser Health Authority launched three clinics. Vancouver Island Health Authority expanded hours at the TIA clinic in Victoria, and recently opened a new clinic in Campbell River. Vancouver Coastal Health is expanding hours of the Vancouver General Clinic and has opened an outpatient clinic at St. Paul's Hospital. Northern and Interior Health Authorities are looking at options for TIA clinics.

### Telestroke

Telestroke brings together stroke therapies and telemedicine, allowing stroke specialists to support other health professionals in the evaluation and management of stroke, especially acute stroke, using information and communication technologies. The BC Telestroke Team is working closely with Health Authorities and clinicians to enable service delivery in two Vancouver Island and two Lower Mainland referring hospitals. The project's first phase runs until Spring 2010.

### Rehabilitation and Community Reintegration

This team has proposed four priority projects to evaluate and improve the level of rehabilitation and survivor services available to patients recovering from stroke. The projects would:

- identify the standards and levels of stroke care patients can expect in hospitals across the province;
- help patients receive rehabilitation services at home after they've been discharged from hospital;
- improve access to community resources and supports for stroke survivors returning home; and
- build on the Telestroke initiative by developing and introducing Telerehab, giving therapists in rural or remote communities access to specialists in larger centres.

The BC Stroke Strategy has asked the BC government for funding to initiate these projects, and is awaiting a response.

### Emergency Department Protocols

The BC Stroke Strategy continues to support the implementation of stroke/TIA protocols in Health Authorities across British Columbia. These protocols will help support a consistent response and treatment for patients arriving in emergency departments with stroke symptoms.

### Hyperacute ACVS

This project would see hospitals across BC designated as either comprehensive, regional or primary stroke centers, helping stroke patients receive the right care in the right hospital. Ambulance transportation protocols and training will be developed, ensuring that ambulance personnel know the best response for stroke patients. Providing rapid stroke diagnosis and treatment means more patients will receive tPA, an innovative and effective clot-busting drug. A consensus statement has been developed, and the BC Stroke Strategy team is seeking approval and funding from the Ministry of Health Services and Health Authorities.

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## BC Stroke Strategy - cont'd

### Measurement and Evaluation

Measurement and evaluation of Stroke Strategy initiatives are key to identifying what projects work and why. This team has developed an improved methodology to ensure reliable and consistent stroke data. The resulting revised stroke registry will help gather comprehensive information about strokes, mini-strokes, incidence, prevalence, treatment and outcomes. As a result, it will be easier to measure the overall performance of stroke care in BC as well as assess the impact of prototype projects on key stroke indicators.

To keep up to date on progress with the BC Stroke Strategy, bookmark our website ([www.bcstrokestrategy.ca](http://www.bcstrokestrategy.ca)). We're in the process of expanding the site, turning it into a one-stop shop for professionals, patients and our partners.

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**Research Memo** is distributed three times a year via e-mail to contacts with an interest in Heart and Stroke Foundation of BC & Yukon research programs. Its purpose is to keep you informed of Heart and Stroke Foundation research activities and to provide a forum for anyone wanting to raise issues of concern within this community. Your comments and suggestions are welcome. Please feel free to forward this newsletter to anyone you believe would be interested, including students at all educational levels.

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