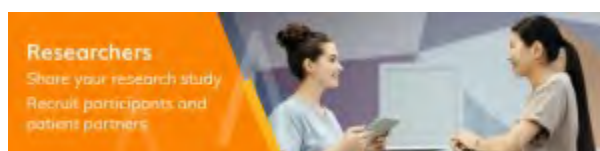




Research & Knowledge Translation Newsletter - July 2025

Newsletter outline:

- **Article: Using the REACH BC platform**
- **Article: Virtual Clinical Pharmacy Services pilot project**
- **Article: Diversity Tapestry project: Part 2**
- **Article: Five Days in May 2025 recap**
- **New research studies in the North**
- **NH Library corner**
- **Events and opportunities**



Using the REACH BC platform: Connecting researchers, volunteers and patient partners across the province

Article written by: Kristine Ho, Digital Specialist, Communications, BC SUPPORT Unit Justine Clayton, Coordinator, REACH BC Michelle Chen, Research Platform Administrator, REACH BC

Have you ever recruited participants for a study, or wondered how you could share research results back to those who took part? Have you ever wanted to volunteer for a clinical trial or find opportunities relevant to your interests?

[Read more](#)

See page 7 below for full article text.



Virtual Clinical Pharmacy Services pilot project: An example of homegrown innovation

Article written by: Stephanie Low, Evaluation Specialist, Amy Schweitzer, Registered Pharmacy Technician; Amy Nunley, Clinical Pharmacist; and Cassie Cody, Registered Pharmacy Technician

[Read more](#)

See page 11 below for full article text.



Diversity Tapestry part 2: What are best practices to conduct health research in rural and remote communities?

What are best practices to conduct health research in rural and remote communities in BC? The Diversity Tapestry has some tips. Article written by: Sahil Kanani, EDI Consultant, BC SUPPORT Unit & Megan Devlin, Communications Specialist, Health Research BC

See page 14 below for full article text.



Five Days in May 2025 recap

Five Days in May (FDIM) is a unique forum that explores broad health topics, disciplines, and unique research projects supported by BC Health Authorities. It engages a broad audience (researchers, students, patient partners, health authority staff, and members of the public) to support knowledge exchange and dissemination of research findings.

[Read more](#)

See page 17 below for full article text.



New research studies in the North: April - June 2025

NH continues to expand its research capacity while contributing to relevant research and scientific discoveries strengthening Northern and provincial health research work. This list includes the latest authorized health research studies from April to June 2025 taking place at Northern Health facilities.

[Read more](#)

See page 18 below for full article text.

NH Library corner

Wildfire smoke and extreme weather events have become a regular consideration when making summer travel plans. With the heat upon us, we're showcasing library resources relating to climate and health. Take a look at these resources available through the NH Library:

- [Global climate change and human health: from science to practice](#) (ebook)
- ["At-a-glance Climate change impacts on health and wellbeing in rural and remote regions across Canada: a synthesis of the literature"](#) (article)
- ["Community perceptions and pro-environmental behavior: The mediating roles of social norms and climate change risk"](#) (article)
- Check out [GreenFILE](#), a full-text database covering research on all aspects of human impact to the environment

During the summer, there will be delays in some library services due to staff absences, but the library facility at UHNBC remains open 24/7 for borrowing, computer and printing services, and quiet study. For questions or to schedule an appointment with the librarian, email library@northernhealth.ca.

Events

We Walk Together Project Launch: Teachings from Elders and Youth about connection to land, water and territory.

The FNHA's Office of the Chief Medical Officer (OCMO), in partnership with the Office of the Provincial Health Officer (OPHO), is hosting a virtual film screening and discussion on July 15, 2025 to launch the findings of a joint research project, *We Walk Together: Exploring Connection to Land, Water, and Territory*.

More information [on the FNHA website](#).

2025 Northern BC Research and Quality Forum.

The Northern BC Research and Quality Conference (RQC) is a bi-annual learning and collaborative event that includes keynote and plenary sessions, skill development workshops, poster session and social activities. The Research and Quality Conference organized as part of the MOU between Northern Health and UNBC supports the knowledge mobilization of health services research, evaluation, evidence-based practice, innovation projects, and quality improvement initiatives in the North.

Call for Abstracts is open until July 18, 2025 at noon. More information [on this website](#).

World Brain Day 2025: Caring For Our Minds and Well-being Through Life's Journey.

Join the BC Brain Wellness Program on July 23, 2025 for the annual hybrid World Brain Day celebration! This year's event will explore the interconnections between the mind, well-being and resilience throughout life.

More information and [registration](#).

BC Virtual Health Grand Rounds: Bridging the Gap between AI Development and Implementation in Health care.

The fourth quarterly session of this webinar/rounds series on July 29, 2025 will feature Dr. Hashim Kareemi, who will speak on the *Bridging the Gap between AI Development and Implementation in Health care*.

Information and registration [on this website](#).

UBC learning Circle I Centre for Excellence in Indigenous Health Webinar: Challenges I faced growing up in a Northern First Nations Community: The Ballantyne Project with Dwight Ballantyne.

In this September 9, 2025 session, Dwight Ballantyne will be sharing his personal journey growing up in a remote northern First Nation

Patient's Voice 2025: 3rd International Conference.

UBC Health is hosting the "Where's the Patient's Voice in Health Professional Education 20 Years On: 3rd International Conference" from November 12–15, 2025, bringing together educators, patient partners, and health and social care professionals from around the world

and how those experiences shaped the work he does today. Dwight will talk about the real-life challenges Indigenous youth face in remote communities—challenges most people don't even know exist. He will also talk about The Ballantyne Project and our #WeSeeYou campaign, which creates opportunities for Indigenous youth to gain life skills, explore education and career paths, and build confidence through week-long experiences in Vancouver, BC.

More information and registration on [the UBC website](#).

for the third international conference focused on advancing the inclusion of patient and community voices in health education.

More information on [the UBC website](#).

Recordings

UBC Health | Bridging Research and Action: Event Highlights and What's Next.

More than 500 people from across the province came together this spring for *Bridging Research and Action*—an event hosted by UBC Health to explore new ways of turning knowledge into meaningful impact in BC's health system.

Review more information and videos on [the UBC website](#).

Beyond Discovery: Celebrating BC's Clinical Research Professionals in Recognition of International Clinical Trials Day.

As part of International Clinical Trials Day in May, Clinical Trials BC and Fraser Health celebrated the career journeys of four clinical research professionals in BC in this recent webinar.

Watch the recording [on YouTube](#).

Opportunities

2026 BC Quality Awards

Nominations are now open for the 16th annual BC Quality Awards, hosted by Health Quality BC. The BC Quality Awards are an annual celebration of people and projects that improved the quality of health care in BC. The awards are given to people and projects that have made key contributions to quality and innovation in the delivery of care in BC. Awards are comprised of five Excellence in Quality categories, representing the five areas of care as defined by the [BC Health Quality Matrix](#), three Inspiring

Upcoming Funding Opportunity: 2025-26 Partnering for Impact – Catalyst Grant

The Canadian Institutes of Health Research (CIHR) announced the upcoming launch of the 2025-26 Partnering for Impact - Catalyst Grant Funding Opportunity. This funding opportunity is led by CIHR's Knowledge Mobilization Strategies Unit, in partnership with Canada's Strategy for Patient-Oriented Research (SPOR), the Centre for Research on Pandemic Preparedness and Health Emergencies, the Institute of Health Services and Policy Research

Individual categories that celebrate inspiring patients, caregivers and health care practitioners, and two Transformative Leadership categories focused on co-designing with communities and sustainable health care.

The nominations close on September 5, 2025. Complete information on [the Health Quality BC website](#).

(IHSPR), the Institute of Neurosciences, Mental Health and Addiction (INMHA), the Institute of Population and Public Health (IPPH) and Employment and Social Development Canada (ESDC).

Overview, funds, timelines and complete information can be found on [the CIHR website](#).

Would you like to write and publish a short health research article?

The Research & Knowledge Translation Newsletter is accepting articles for future editions. We are open to all areas of health research and knowledge translation as well as evaluation, data analytics, quality improvement or innovation projects.

If interested to include an article or to share information about an upcoming event, email: research@northernhealth.ca

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Using the REACH BC platform: Connecting researchers, volunteers and patient partners across the province

Article written by: Kristine Ho, Digital Specialist, Communications, BC SUPPORT Unit; Justine Clayton, Coordinator, REACH BC; Michelle Chen, Research Platform Administrator, REACH BC



Have you ever recruited participants for a study, or wondered how you could share research results back to those who took part? Have you ever wanted to volunteer for a clinical trial or find opportunities relevant to your interests?

REACH BC is a health research platform that bridges the gap between researchers and volunteers, strengthening the connection between both. Read on to:

- learn about REACH BC, why it exists and how it works
- hear how it could support Northern communities
- explore an exciting new feature that helps researchers share back in-depth study results with volunteers

What is REACH BC?

REACH BC is a provincial health research platform. It connects researchers and potential volunteers to various health research studies, clinical trials and patient partner opportunities, including those in Northern BC.

The platform gives researchers in BC a place to post their studies and recruit eligible volunteers or patient partners. At the same time, it also matches the public with relevant research opportunities that interest them.

“Building reciprocal connections is at the heart of what REACH BC does,” says Alison Orth, Portfolio Director, Research Programs at Michael Smith Health Research BC

(Health Research BC). “It’s linking researchers with volunteers, connecting individuals to research opportunities that matter to them, and closing the loop by sharing study outcomes and impacts with participants. REACH BC helps build vital bridges between communities, research and knowledge.”



Alison Orth, Portfolio Director, Research Programs at Health Research BC shares the unique value of REACH BC for British Columbia.

Why was this platform created? How does it help?

REACH BC was created to address a major challenge facing many clinical trials and health research projects: finding participants.

By pairing research opportunities and interested participants together through a unique and personalized matching system, REACH BC bridges the gap between the two. It ensures that health research needs are met, while also engaging the public and providing a variety of opportunities to get involved in research.

How can REACH BC support Northern communities?

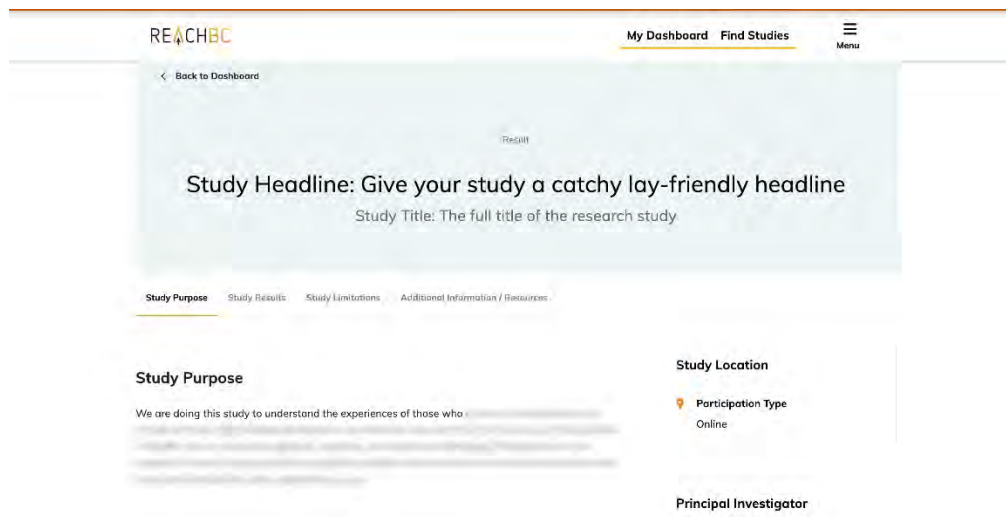
“People living in the North should have the opportunity to get involved in health research that matters to them,” says Alison. “This includes access to and information about clinical trials, research studies and patient partner opportunities in Northern BC.”

She shares three major ways that REACH BC could support Northern communities and research in the North:

1. **Improve access to research opportunities:** Many studies on the platform allow for virtual participation or participation from a location outside the main study site, making it easier for people living in rural or remote communities to get involved.
2. **Support health priorities specific to communities:** The platform allows for customization of study matches to better support the unique needs, challenges, and lived experiences of rural and remote populations.

3. **Promote equitable participation:** By centralizing information online and using tailored outreach, REACH BC helps reduce barriers to research involvement, like long travel distances or limited awareness.

What's the new study feature on REACH BC?



An example of a standalone study result, where researchers can add in-depth project results to their research studies.

The new feature allows researchers to share in-depth study results back to research participants and patient partners, even if the study did not recruit through REACH BC.

Called a “standalone study feature,” these results are open to the public. They help empower participants and patient partners to see the real-world impact of their contribution, while helping researchers share a study’s purpose, its outcomes and knowledge translation resources like videos, publications and websites.

How can researchers use this new feature?

By adding their study results, researchers can:

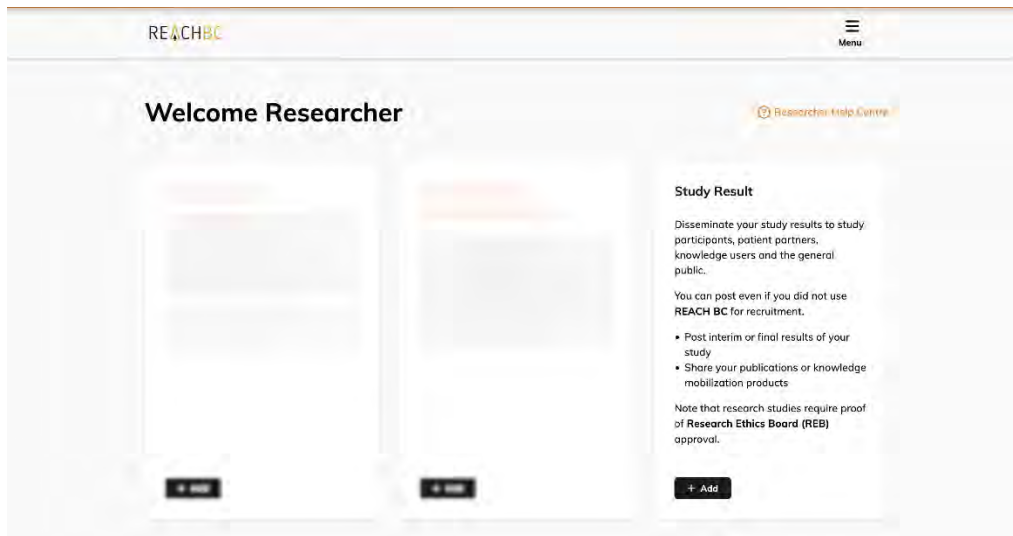
- Get a public link to share study results with peers and partners
- Increase the potential for past volunteers to participate in future studies
- Share information directly back with communities that can benefit from research

When viewing study results, participants and the public can:

- Learn about outcomes from studies in health areas that interest them
- Understand how they’ve made an impact in the studies they’ve joined

- Access more information about studies they participated in, like videos, websites and infographics related to the research

How can I learn more about the new study feature?



When you sign in to REACH BC as a researcher, you'll see the option to use this new study feature and add your results.

As a researcher:

1. Sign up as a researcher: <https://app.reachbc.ca/researcher/create>
2. Click Add+ from the Study result panel
3. Add your study details

As a volunteer:

1. Sign up as a volunteer: <https://app.reachbc.ca/volunteer/create>
2. Check out your dashboard
 - a. Under 'My projects' or 'My archived projects,' you can learn more about the outcomes of studies you've participated in or expressed interest in by clicking the study with the 'Results available' label (if results have been added).
3. You can also look at existing research studies by going to the study directory and selecting 'Study results' from the first dropdown: <https://reachbc.ca/studies>

Have questions or feedback to share? Send it to info@reachbc.ca.

This new study feature was developed as a collaborative effort between [REACH BC](#) and the [BC SUPPORT Unit](#), both part of [Michael Smith Health Research BC](#)

Virtual Clinical Pharmacy Services pilot project: An example of homegrown innovation

Article written by: Stephanie Low, Evaluation Specialist, Amy Schweitzer, Registered Pharmacy Technician; Amy Nunley, Clinical Pharmacist; and Cassie Cody, Registered Pharmacy Technician

Northern Health and health authorities in BC are facing a prolonged pharmacist shortage. There are many communities without access to clinical pharmacy services that are necessary for making sure patients get the right medications in a safe and effective way.

To help fill the gap, GR Baker Hospital in Quesnel engaged in a pilot project called the Virtual Clinical Pharmacy Services (VCPS) program. The idea? Use virtual care to bring clinical pharmacy expertise to remote areas with no onsite (in-person) clinical pharmacists. The pilot team included one clinical pharmacist who was off-site and two pharmacy technicians who were on-site, working together to support patients in this new way.

Funded through BC's Ministry of Health Innovation Grant, the VCPS program ran from November 2024 to March 2025, offering services four days a week. Despite some interruptions (due to staff being redeployed to other roles), the program made a significant impact.

What did the pilot achieve?

The pilot project made a positive impact on patient care. The VCPS pharmacist received 362 referrals in just a few months:

- 150 from verification pharmacists (verification pharmacists verify the safety and accuracy of medication orders prior to being dispensed)
- 80 from doctors
- 78 from nurses
- 36 from patients themselves
- 15 from VCPS pharmacy technicians

Starting from scratch, the pharmacist identified and addressed unique drug therapy issues that might have gone unnoticed without this service.

One of the standout features of the pilot was the expanded role of pharmacy technicians. They took on the task of gathering “Best Possible Medication Histories” (BPMHs)—a detailed look at what medications a patient is *actually taking*. Between November and March, they completed 114 BPMHs.

What’s next?

On March 18, 2025, the VCPS team held a planning session to determine how to build on the pilot’s success. Several recommendations were crafted, including applying the VCPS program core program in: (1) a rural site with no on-site pharmacy staff, and (2) a rural site with limited pharmacy staff, supported by non-pharmacy staff.

Stay tuned for updates!

Interested to learn more about virtual clinical pharmacy services internationally? The VCPS pilot project is based on the Australian model. The following paper provides a background to the VCPS in Australia:

Chambers, B., Fleming, C., Packer, A., Botha, L., Hawthorn, G., & Nott, S. (2022). Virtual clinical pharmacy services: A model of care to improve medication safety in rural and remote Australian health services. *American journal of health-system pharmacy: AJHP: official journal of the American Society of Health-System Pharmacists*, 79(16), 1376–1384. <https://doi.org/10.1093/ajhp/zxac082>



Virtual Clinical Pharmacy Services (VCPS) Pilot Project

A specialized clinical pharmacist will work with the on-site interprofessional team to virtually see hospitalized patients and help optimize their medications. This will be facilitated by our on-site VCPS technicians.

Examples of What VCPS Can Do:

- Work collaboratively with patients and interprofessional team to optimize medication therapies and increase safety and efficacy.
 - For example, optimizing antibiotics.
- Counsel patients on the purpose of their medications, how to take them, and what side effects to monitor.

Hours: Monday to Thursday from 8 a.m. to 3 p.m. (excluding stats and unplanned shortages)

Vcps Technician Email: QUEVCPS.Staff@northernhealth.ca

Vcps Technician Telephone: 250.983.4833.



Tell Us How We Are Doing.

13-110-6169 (FF69033-IND-12/24)



Diversity Tapestry part 2: What are best practices to conduct health research in rural and remote communities?

Article written by: Sahil Kanani, EDI Consultant, BC SUPPORT Unit & Megan Devlin, Communications Specialist, Health Research BC

This is the second article in a series about the Diversity Tapestry. To read the first article, check out the [April 2025 newsletter](#) (20th edition).



The Diversity Tapestry offers practical tips on conducting health research in rural and remote communities.

What are best practices to conduct health research in rural and remote communities in BC? The Diversity Tapestry has some tips.

Northern BC is home to about 300,000 people, many of whom live in communities considered rural or remote*. Researchers interested in including people from rural and remote communities in their projects may need to tweak their approach from conducting studies in urban centres.

[The Diversity Tapestry project](#) is a set of online educational modules on practical ways to build equity, diversity and inclusion into patient-oriented research. Each module was co-created by a team of researchers, trainees and patient partners from communities that have historically faced barriers to being heard. One of the modules is about engaging patients living in rural and remote areas. We highlight some key messages from this module.



The Diversity Tapestry module on engaging with people in rural and remote communities consists of seven short videos on best practices.

Engage with communities from the start

Earlier is better when it comes to involving community members in research. Involvement means more than just participation – it means including patients as partners to design the study itself.

A project should seek to benefit the local community. If it doesn't leave a positive impact, it could cause conflict. If members of the community express concerns or doubts, be prepared to pivot or to not go ahead with the project.

Research approaches are usually not one-size-fits-all

In small communities, residents don't have the same level of anonymity people in cities do. That means focus groups or other research methods that work in an urban centre like Vancouver may not be feasible in a smaller community in northern BC. For example, if only one location in town is used to gather data or conduct interviews, residents may guess why their neighbour is participating – and information about health status could be unintentionally revealed.

Participant honoraria may need specific considerations

Patient partners and research participants should be [compensated for their time](#). Wondering how much? Consider a similar wage to what a research assistant would be paid. That's because helping with a research project is work.

Researchers may also consider helping with compensation for childcare or transport costs. Individuals in rural and remote communities may have to travel further to participate in in-person initiatives. Researchers could also consider alternatives such as phone interviews or online surveys, while also keeping in mind that some communities may lack stable cell service or high-speed internet. In such cases, less data-intensive forms of engagement should be prioritized e.g. opting for a voice call instead of a video call or designing surveys accessible through a mobile phone versus only a computer.

Use local community hubs, talent and businesses

The local coffee shop, community hall, or general store may be a huge help to research projects. If suitable, these venues could also be used for meetings. Noticeboards at these locations can be a simple way to reach community members too,

Researchers should get in touch with community leaders and Elders well in advance of their work to build relationships, understand the community they will be working in and with, and approach the community in a respectful way. Town councils and local non-profits can also be good places to start.

Another simple way to support local communities is to buy project supplies from local businesses. Employing locals for staff positions tied to a research project is another good practice to create a positive impact in the community.

Working with communities is an ongoing process

Work isn't done when the data gathering phase is complete. Researchers should create a plan to share results with the community involved and propose suggestions to sustain any advancements resulting from their project.

Including community members and patient partners as co-creators of research projects leads to better and more relevant results for communities. The Diversity Tapestry project was created to provide practical tools for researchers to foster diversity and inclusion in patient engagement.

Want to learn more? Check out the Diversity Tapestry [module](#) on engaging rural and remote communities. The Diversity Tapestry was funded by the [BC SUPPORT Unit](#), part of [Michael Smith Health Research BC](#).

*Learn more about different perspectives on the meaning of 'rural and remote':

- So, what do we mean by "rural," "remote," and "northern"?
- <https://cjr.archive.mcgill.ca/article/view/1932/1926>
- Developing Meaningful Categories for Distinguishing Levels of Remoteness in Canada
- <https://www150.statcan.gc.ca/n1/pub/11-633-x/11-633-x2020002-eng.htm>

Five Days in May 2025 recap

Article written by: Marcelo Bravo, Lead, Patient-Oriented Research and KT Capacity Building; Co-Lead, BC SUPPORT Unit Northern Centre



Five Days in May ([FDIM](#)) is a unique forum that explores broad health topics, disciplines, and unique research projects supported by BC Health Authorities. It engages a broad audience (researchers, students, patient partners, health authority staff, and members of the public) to support knowledge exchange and dissemination of research findings. The 2025 edition brought 400+ participants who took part in provincial and regional events. You are invited to review this year's provincial main panels recordings:

- **May 2, 2025:** [From Patients to Partners: Building Community with Heart through Arts-Based Health Research](#)
- **May 9, 2025:** [Innovations in Long-Term Care: Research to Improve Quality of Life](#)
- **May 30, 2025:** [Indigenous-Led Health Research: Fostering Wellness, Strengthening Knowledge](#)

Want to learn more? Explore insightful local events who were part of FDIM 2025, these be found [here](#).

Interested to disseminate the findings of a research project where NH staff contributed as team members? Let's discuss opportunities to showcase this at the next edition of Five Days in May. Contact: marcelo.bravo@northernhealth.ca

Stay tuned for FDIM2026!

New Research studies in the North: April – June 2025

NH continues to expand its research capacity while contributing to relevant research and scientific discoveries strengthening Northern and provincial health research work.

The following list includes the latest authorized health research studies from April to June 2025 taking place at Northern Health facilities.

#	Principal Investigator	Institution	NH Affiliated Team Member	Study Title	HDSA/ Area	Facilities
1	Mark Elliott	University of British Columbia	N/A	Precision medicine in the management of hyperkalemia in patients with chronic kidney disease	Prince George	UHNBC
2	Marie-Pier St-Laurent	University of British Columbia	N/A	NEO-BLAST: Neoadjuvant therapy for bladder cancer followed by active surveillance vs treatment	Prince George, Terrace, Fort St. John	Ksyen Regional Hospital, Fort St. John Hospital, UHNBC
3	Robert Olson	University of British Columbia and BC Cancer	N/A	TAILOR RT: A randomized trial of regional radiotherapy in biomarker low risk node positive and T3N0 breast cancer	Fort St. John, Quesnel, Terrace	Fort St. John Hospital, Ksyen Regional Hospital, G.R. Baker Memorial Hospital
4	Shaylene Keddie	Royal Roads University	Shaylene Keddie	Bridging the Gaps: Improving team coordination across cardiac services at UHNBC	Prince George	UHNBC
5	Morgan Price	University of British Columbia	Morgan Price	British Columbia team-based primary care evaluation	All	UPCCs or primary care clinics owned or operated by Northern Health
6	Jeffrey Sulpher	BC Cancer	N/A	A Phase III, Open-Label, randomised	Prince George	UHNBC

				study to assess the efficacy and safety of Camizestrant (AZD9833, a Next-generation, oral selective estrogen receptor degrader) vs standard endocrine therapy (Aromatase inhibitor or tamoxifen) as adjuvant treatment for patients with ER+/HER2- Early breast cancer and an intermediate-high or high risk of recurrence who have completed definitive locoregional treatment and have no evidence of disease (CAMBRIA-2)		
7	Evan Jost	University of British Columbia	N/A	Factors associated with use of sentinel Lymph Node biopsy in Northern BC	Prince George	UHNBC

Note: Interested to know more details about any of these studies for Knowledge Translation purposes? Contact marcelo.bravo@northernhealth.ca