Key trends, which may have an impact on this area over the next 5 to 10 years:

Key opportunities

- Size and breadth of the department and the larger university's research capacity, including large cadre of scientists
- Expansion to community hospitals which increases opportunities for clinical research
- Vibrant research institutes with opportunities to recruit and collaborate in shared priority areas

Key issues/challenges

 Sustained funding for scientists and research; CIHR funding will likely be declining in coming years so other sources are needed.

Working Group Lead: Ben Alman

- Independent and somewhat competitive nature of the various hospital research institutes
- Providing the right environment to bring people in to the
 Department and enabling them to innovate and be successful
 throughout their research careers. Not much attention on
 providing the best support for mid level scientists in the past
- Lack of department Infrastructure support to enable greater grant success and greater multi-site and division collaboration
- Lack of harmonization with the Research Institutes and with the Research Ethic Boards

Goals	Actions	Expected Outcomes/
Enhance innovative research that will		Measures
have a high impact on patients.		
Develop stable funding for research from new sources.	 Pursue novel funding strategies including endowments or new types of donated funds to be distributed. Hire staff dedicated to identify and then support the faculty in the application process for applying for novel external research funding sources (e.g. NSERC/CIHR collaborative grants). Allocate a portion of Academic Enrichment Funds department-wide to supporting research 	Increased funding available to support research from non-traditional sources

	Goals	Actions	Expected Outcomes/
E	nhance innovative research that will		Measures
	have a high impact on patients.		
2.	Develop and implement policies to provide the right environment for the Department's scientists to be successful.	 Adopt and implement recommendations from the Surgeon Scientist white paper – some of these will benefit the broader faculty. Drop "non" from the term non-clinician scientist, renaming this faculty group as "scientist". Develop a white paper outlining issues and recommendations for scientists. Clinicians and non-clinicians in the department should be part of a rebranded part of a "surgeon scientist program". 	Stable support for an environment that will provide the best chance of success for our department's scientists.
3.	Pursue greater integration of research across disciplines, sites and types of researchers both within and outside the Department	 Enhance community hospital involvement in clinical research by providing central resources and infrastructure to enable greater participation in research (e.g. a clinical research network of research assistants) Establish the infrastructure to support multihospital and division collaboration including researcher coordinator for data entry; grant writer, etc. Use existing forums to promote greater integration and collaboration amongst scientists, including Gallie Day Provide incentives for collaboration, e.g. internal competition which requires multisite or division collaboration. 	 Number of mulit-site and multidivision collaborations increase Clinical research increases Increased numbers of faculty can participate in high level research
4.	Increase commercialization	 Host commercialization workshop(s) that brings together scientists, potential funders, MaRS and industry to develop an action plan and overall strategies for commercialization. Pursue priority actions and collaborations emerging from workshop. 	 Make is easier for faculty to access the already existing avenues to increase commercialization initiatives
5.	Enhance knowledge translation and exchange.	 Include knowledge translation and dissemination component as a potential in the sabbatical program, where scientists are expected to share and communicate their research. 	

Goals	Actions	Expected Outcomes/
Enhance innovative research that will		Measures
have a high impact on patients.		
Sustain and enhance training of surgeon scientists.	Ensure that funding, mentorship support are in place to ensure the ongoing success of the Surgeon Scientist Training Program.	 impact on surgical care No fall off in numbers of top caliber surgeon scientist candidates apply to SSP High quality surgeon scientists are trained and recruited to academic faculty positions here and elsewhere

Unique considerations for this theme including overlaps with other working groups:

Opportunities to advance cross-cutting themes:

- Partnerships and collaboration Large research grants are dependent on team and multi-site, discipline and division collaboration
- Innovation research program is dedicated to creating new knowledge, innovation and disseminating that knowledge
- Global Health and Social responsibility engaging the broader faculty (e.g. community hospitals) in clinical research is a mechanism of enhancing social responsibility.

Top 2 implementation priority activities for this area – for next 12 to 18 months

- 1. Implement the recommendations of the Surgeon Scientist white paper; develop a complementary white paper that includes scientist that are not practicing surgeons.
- 2. Revisit the use of Academic Enrichment funds or other departmental funds to provide central resources that could support the research priorities of the Department (e.g. fund research directly, hire research coordinator(s), people who can help with grants, etc.).

Key processes, mechanisms and infrastructure required to achieve these goals.

- 1. Funding will be a key enabler for many of the goals
- 2. Hiring a number of critical support persons, e.g. research coordinator(s) See recommendations in the details
- 3. Building up independent funding base to allow the Department to better engage in recruitment and retention discussions with the RIs.