Appendix IV: Strategic Directions, Goals, Actions and Measures

Strategic Direction #2: Research and Innovation

Strategic Direction #2: RESEARCH AND INNOVATION – Create and translate novel findings into surgical practice

Goals	Actions	Expected Outcomes/
		Measures
2-1 Pursue stable funding for research through the identification of new sources of revenue.	 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
2-2 Institute new policies to improve support 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.
2-3 Sustain and enhance the training of residents in the Surgical Scientist Training Program.	Ensure that funding, mentorship support are in place to maintain the ongoing success of the Surgeon Scientist Training Program.	No decline in numbers of top caliber surgeon scientist candidates applying to SSP

Goals	Actions	Expected Outcomes/
		Measures
2-4 Pursue greater integration of research across disciplines, sites and types of researchers	 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; editorial office, etc. Use existing forums to promote greater integration and collaboration amongst scientists, including Gallie Day Provide incentives for collaboration, e.g. internal funding which 	 Talented surgeon scientists are trained and recruited to academic faculty positions here and elsewhere Number of multi-site and multidivision collaborations increase Clinical research increases Increased numbers of faculty can participate in high level research
2-5 Enhance knowledge translation and commercialization of surgical inventions.	 requires multisite or division collaboration. Include knowledge translation and dissemination component as a potential in a potential sabbatical program, where scientists are expected to share and communicate their research. Facilitate faculty participation in, or 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 	 Greater exchange of research data amongst Scientists and Surgeons, increasing positive impact on surgical care Make is easier for faculty to access the already existing avenues to increase
2-6 Be a world leaders in surgical innovation	 Pursue priority actions and collaborations emerging from workshop. Promote innovation centrally, establish a committee on innovation which synergizes activities across the University Provide infrastructure and seed funding for innovative ideas in surgery. 	commercialization initiatives New innovative initiatives