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University of Stavanger

# Research strategy, 2023-2027

SHARE – Centre for Resilience in Healthcare  
Forskningscenter for kvalitet og sikkerhet i helsetjenesten



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Stavanger



Norwegian University of  
Science and Technology

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## Background

SHARE - Centre for Resilience in Healthcare (Forskningssenter for Kvalitet og Sikkerhet i Helsetjenesten) constitutes Norway's largest research group studying quality and safety in healthcare. SHARE was approved by the Board of the University of Stavanger (UiS) on 09.03.2017 as one of the research centres at UiS. SHARE completed a five year midterm evaluation in 2021 and was re-approved for a new five year period (2023-2027). A research group on patient safety started in 2008, followed by the approval of a research programme on quality and safety in healthcare systems in 2011, re-approved in 2014. The current research strategy is based on the UiS strategy (2021-2030), the Faculty of Health Sciences strategy (2021-2030), the previous SHARE strategy (2018-2022), and is aligned with the Centre partners' strategies.

## Partners and resources

SHARE currently engages more than 70 researchers across the partners and there are around 25-30 PhD students affiliated with the Centre.

## Vision

*SHARE will become an internationally recognized research centre by reforming the quality and safety of current healthcare systems (micro, meso, macro level).*

## Motto

*Knowledge is most valuable when it is shared generously.*

Sharing of knowledge is fundamental for sustainable, safe, and high quality healthcare services. SHARE researchers share ideas, analyses and results with one another within the research community and across the wider population of patients, stakeholders and society as a whole.

## Strategic priorities

SHARE's vision of reforming the quality and safety of current healthcare systems will develop through the use of six strategic research priorities illustrated in Figure 1:

### *Patient and stakeholder involvement (PSI)*

SHARE will further advance the integration of patients, carers, citizens and other major stakeholders (e.g. patient organizations, regulatory authorities, policy makers) as equal partners in the theoretical, methodological and practical activities in the Centre. Co-researchers and co-design are major elements of this priority. The goals are to document the impact of PSI on research activities, to investigate the drivers for and impacts of PSI on quality and safety research and practice, and to share the experiences in how to succeed with PSI involvement in research.

### *Collaborative learning and knowledge translation*

SHARE will further advance the design, implementation and evaluation of context-specific and practice-aligned learning interventions (e.g. education, training, simulation, shared decision-making, meeting arenas, webinars, online learning tools). The goal is to translate research into healthcare practice and education programs (bachelor, master, PhD) by engaging a wide diversity of stakeholders in a range of collaborative activities and contexts. The development of resilience laboratories, innovative learning resources, and an international master program in quality, safety and resilience in healthcare are major elements of this priority.

### *Resilience in different healthcare contexts*

SHARE will continue to conduct empirical studies in a variety of healthcare contexts (macro, meso, micro level) to understand and improve healthcare quality and safety. A major element of this priority is to investigate and integrate the mechanisms from the emergency and the continuity care contexts and patient flow and transitions within and across these. The emergency context involves actors from pre-hospital critical care, emergency departments, and intensive care, while the continuity context involves transitional interfaces and patient encounters across time, healthcare providers and system levels including nursing homes, homecare, general practitioners, ambulatory care, prehospital actors and hospitals. The goal is to map patient flow patterns, patient perspectives, investigate quality, safety and resilience characteristics, and develop complex interventions in different healthcare context to improve patient safety, patient centredness and service quality

### *International comparative studies*

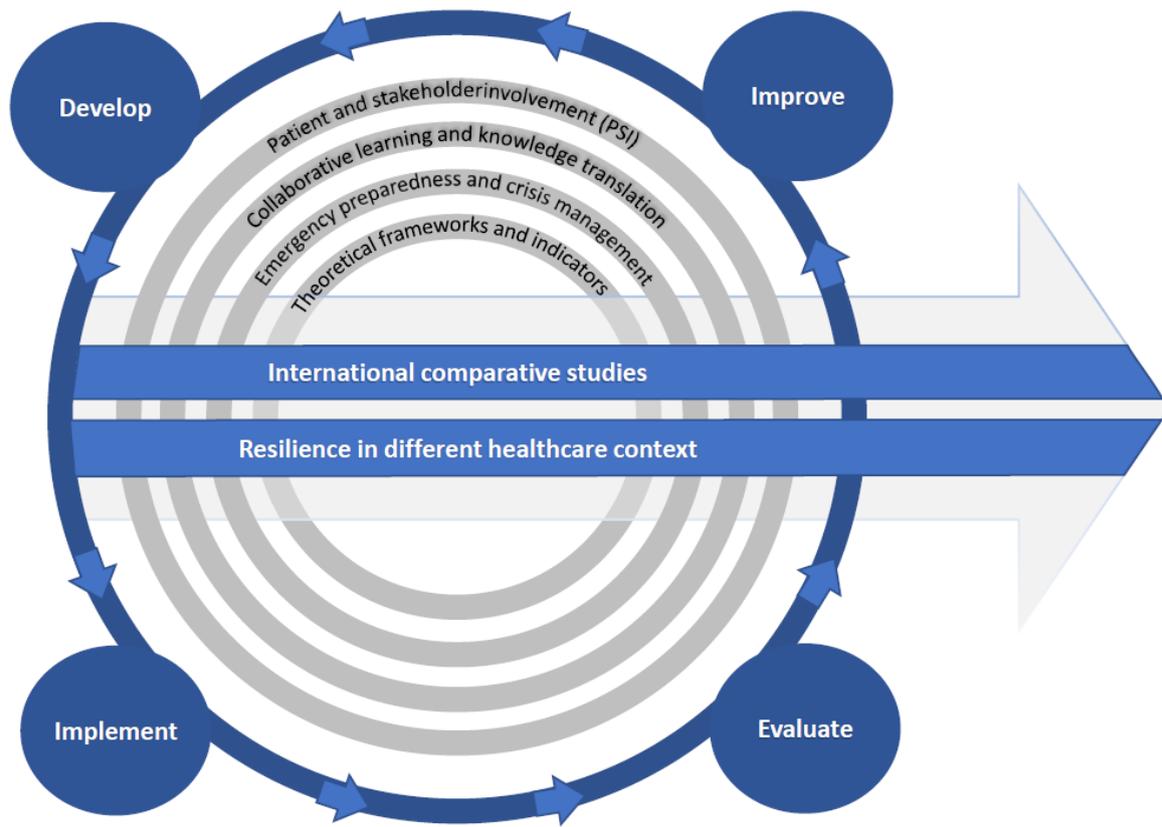
SHARE will be in the forefront of conducting cross-country comparative studies of quality and safety in different healthcare contexts in high, middle and low-income settings. The goal is to investigate under which conditions quality and safety in healthcare is produced in different countries in order to arrive at common context-sensitive theoretical frameworks within quality, safety and resilience research. A collection and open access availability of practical tools and strategies for stakeholders in different settings are major elements of this priority.

### *Emergency preparedness and crisis management*

SHARE will conduct empirical studies and develop new theory on emergency preparedness and crisis management. International crisis, pandemics, ICT threats, and natural disasters demonstrate the need for investigating quality and safety in emergency preparedness and crisis situation. The goal is to investigate emergency preparedness processes including, planning, training and risk communication in normal situation and how this is executed in crisis responses. SHARE will arrive at key mechanisms for healthcare system resilience and an integrated understanding of the role of responses across system levels and stakeholders for sustainable high quality services. Risk communication strategies, emergency training, multi-stakeholder simulation and collaboration patterns across emergency preparedness and response actors are major elements of this priority.

### *Theoretical frameworks and indicators*

SHARE will continue positioning the centre in the forefront of theory development and testing of integrated theoretical frameworks for quality, safety and resilience in healthcare based on systematic theoretical and empirical evidence. The frameworks will build on individual psychological theory (micro), organizational theory (meso) and societal theory (macro) together with comprehensive analytical syntheses of empirical studies of different healthcare contexts. The frameworks will furthermore be complemented by system safety theories, human factors approaches and patient and citizen involvement theory. The development of empirical and analytical contributors and indicators at the micro, meso and macro levels, involving patients and stakeholders in collaborative processes is a major element of this priority.



## Objectives and work tasks

Objectives with associated work tasks emerging from the six strategic research areas:

<i>Objective</i>	<i>Selected work tasks</i>
Evaluate and update the the PSI strategy for use in SHARE research activities	<ul style="list-style-type: none"> <li>• Systematic use of co-researchers</li> <li>• Stakeholder analysis</li> </ul>
Describe and document the impact of PSI on quality and safety in healthcare	<ul style="list-style-type: none"> <li>• Use of participatory approach and co-design in empirical studies</li> <li>• Review and research PSI in emergency preparedness and crisis management</li> </ul>
Design empirically-based collaborative learning interventions for use in SHARE research activities and educational programs	<ul style="list-style-type: none"> <li>• Context-specific and practice-aligned intervention design/implementation</li> <li>• Translate collaborative learning activities into practice and educations</li> </ul>

Engage a range of stakeholders in collaborative learning activities to form and translate research into practice	<ul style="list-style-type: none"> <li>• Use of collaborative learning tools and innovations</li> <li>• Establish resilience laboratories</li> </ul>
Develop novel research methods to systematically assess resilience characteristics and effectiveness of complex interventions	<ul style="list-style-type: none"> <li>• Develop resilience indicators and measures</li> <li>• Mixed-methods design and evaluation</li> </ul>
Develop conceptual models of, and complex interventions for quality, safety and resilience in different healthcare contexts and processes	<ul style="list-style-type: none"> <li>• Map patient flow patterns and perspectives</li> <li>• Intervention bundles design</li> </ul>
Conduct cross-country comparative studies	<ul style="list-style-type: none"> <li>• Within- and across-case analyses</li> <li>• Practical tools and strategies for stakeholders</li> </ul>
Conduct multi-level, cross-sector studies of emergency preparedness and crisis management	<ul style="list-style-type: none"> <li>• Review of actors and roles for quality and patient safety in emergency preparedness and crisis management</li> </ul>

## Organization and infrastructure

To be able to fulfil the priorities, objectives and work tasks outlined in the research strategy the following organizational and infrastructure issues are vital for the success of the SHARE centre:

- An active SHARE Board consisting of members from the centre partners and from external institutions.
- All large research projects funded by EU/Research Council of Norway will have a Scientific Advisory Board composed of international members in the forefront of quality and safety research, and patient and stakeholder leaders.
- A competent SHARE management team consisting of research coordinators, centre director, and resources for web-editor and financial administration.
- Experienced theme leads within the strategic priorities.
- Committed PhD supervisory teams with international co-supervisors and

international mentoring support for post doctoral scholars.

- Structured researcher mobility support.
- Joint office location for SHARE researchers at UiS campus including available office space for SHARE partners and visiting scholars.

## Dissemination

Following up on the SHARE motto, an existing dedicated dissemination strategy focuses on sharing scientific knowledge, information and results through a public relations programme conducted through centre activities. Vital elements of the dissemination strategy are scientific publication, participation at national and international conferences, an active and updated website ([www.uis.no/share](http://www.uis.no/share)), annual report, media focus, social media, etc. SHARE will organize annual open research seminars to support knowledge exchange and translation. Sufficient funding through the SHARE budget will secure the dissemination activities over the strategy period.