



AUSTRALIAN PRIMARY HEALTH CARE RESEARCH INSTITUTE



STRATEGIC PLAN 2008-2010

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INTRODUCTION AND BACKGROUND

This Strategic Plan is designed to be read in conjunction with the initial Strategic Plan 2004 – 2007, as it builds on the achievements foreshadowed in that document. Some sections of this document repeat sections of the initial Strategic Plan as they remain directly relevant. This approach is to assist readers to access relevant information in one place.

This document is deliberately written at a high level, enunciating overarching strategies against the four goals of the Institute in this period, together with performance information relevant to assessing achievement against those activities. Decision making regarding specific details of particular streams of research activity remains the role of the Research Advisory Board. This plan does not seek to pre-empt those decisions. An annual work plan in both 2008 and 2009 will provide greater detail and performance information.

In November 2007, the Australian Government, through the Department of Health and Ageing and The Australian National University (ANU) agreed to extend the funding agreement covering the activities of the Australian Primary Health Care Research Institute (APHCRI) from the end of the initial contract period (July 2008) until the end of February 2010. Funding arrangements and deliverables to cover this extension were also agreed, one of which was the production of a Strategic Plan to cover the period 2008 – 2010. The extended contract provides for additional funding, including GST of \$3.22 million to support the Institute in achieving its strategic goals.

The extension brings the duration of funding for the Institute into line with the three other components of the Primary Health Care Research Evaluation and Development Strategy (PHC RED) of which APHCRI is part. The PHC RED Phase II strategy components are:

- The Australian Primary Health Care Research Institute
- The Primary Health Care Research Information Service (PHCRIS)
- The Research Capacity Building Initiative (RCBI)
- National Health & Medical Research Council (NHMRC)-PHC RED grants and fellowships

APHCRI is now well established as part of the PHC RED strategy. The establishment phase is complete, and this Strategic Plan envisions movement toward maturity.

APHCRI's ROLE AND PURPOSE

VISION

The Australian Primary Health Care Research Institute is a national and international centre of excellence in primary health care research. It is known for its leadership in developing an innovative research agenda and strong relationships within the primary health care sector and for providing high quality information to underpin primary health care policy and practice in Australia.

MISSION

The Institute's mission is to provide national leadership in improving the quality and effectiveness of primary health care through the conduct of high quality priority-driven research and the support and promotion of best practice.

ROLE

The Institute's work focuses on important health services issues relating to the organisation, financing, delivery and performance of primary health care, including its interaction with public health and the secondary and tertiary health care sectors. Its specified aims are to:

- strengthen the knowledge base of primary health care to inform policy and practice through the conduct and support of research
- facilitate the uptake of evidence in primary health care policy and practice
- enhance research capacity in primary health care through strategic partnerships and collaborations with other relevant national and international groups.

In fulfilling its role the Institute:

- identifies and manages a national strategic program of research in primary health care
- stimulates informed national debate in health policy and funding arrangements
- undertakes high quality research as part of the national program.

VALUES AND PRINCIPLES

The Institute adheres to and promotes the values of openness, honesty, trust, respect, professionalism and accountability.

In pursuing its mission and goals, the Institute is guided by the following principles:

- The Institute's engagement of policy makers, the research community, practitioners, consumers and their organisations, is **respectful** of their needs and interests
- The Institute's relationships with its associates and stakeholders is characterised by genuine **partnerships, collaboration and teamwork**
- Research is conducted within a framework of **scientific independence, academic excellence and ethical practice**
- The Institute provides **national leadership in research, policy debate and practice**
- The work of the Institute has **practice and policy relevance** to primary health care priorities and issues in Australia and provides **service of value** to the community, the nation and the world
- The Institute's research program **avoids duplication** of work undertaken by other programs or organisations
- The Institute encourages **innovation** and an **orientation towards the future of primary health care** in Australia.

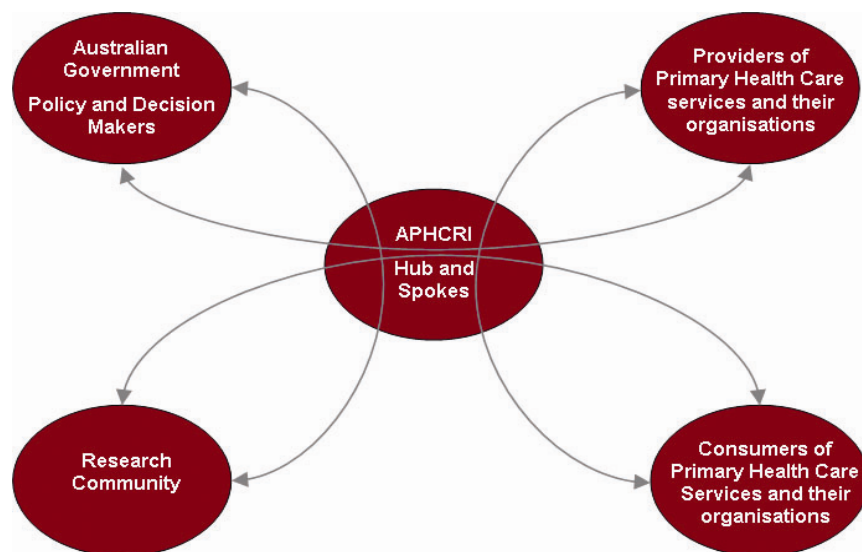
STRUCTURE

The activities of the Institute are performed through a 'hub and spoke' organisational model. Under this model, the **Hub** consists of staff located at ANU and is responsible for supporting the work of the Institute through a range of activities including the commissioning, co-ordination and conduct of research, facilitating the uptake of research evidence into policy and practice and building research capacity in Australia. The **Spokes** consist of priority-driven research projects and programs which are undertaken to support the Institute's research agenda and which will vary in location, identity and duration.

The Institute is supported by the **Research Advisory Board**, which provides advice on the directions of the Institute and on the development and implementation of the Institute's work program. The Research Advisory Board has a decision-making role in terms of determining the priority-driven research questions, allocating and reviewing research funding and establishing **Expert Review Committees** to provide advice on the distribution of funds in respect of particular research questions.

BRINGING RESEARCH EVIDENCE INTO THE POLICY ARENA

Over the period of the first funding agreement, APHCRI has increasingly focused on the nexus between research evidence and policy formulation as a key strategic theme. The approach used is derived from the work of Professor Jonathan Lomas of the Canadian Health Services Research Foundation (CHSRF). The Institute's approach to linkage and exchange (sometimes referred to as "knowledge transfer and exchange") is now an integral part of APHCRI's processes and output and is summarised here.



APHCRI's adaptations of this approach include:

- The identification of four communities of interest as shown in the above figure
- Research priorities/topics built through consultations with policy advisers
- Research Advisory Board includes senior policy advisers in both Commonwealth and State jurisdictions and senior members of all "communities"
- Expert Review Committee expertise across communities
- Assessment criteria for applications for funding reflect emphasis on policy and provider expertise in addition to more usual "academic" criteria
- Focus on systematic review and development of policy options
- Funding explicitly supports researchers' participation in linkage and exchange activities
- Facilitation of the development of personal relationships across communities

- Engaging international experts and resources
- Communication strategy implemented including:
 - APHCRI Dialogue
 - APHCRI@work
 - Website including thematic presentation of work
 - Adaptation of CHSRF 1.3.25 presentation of results

THE PLANNING CONTEXT

As explained above, funding for APHCRI has been extended to 2010. Future arrangements will then depend on government policy decisions around the PHC RED strategy.

This extension will limit any new APHCRI research initiatives to a timeframe that will have research completed by end 2009.

STRATEGIC PLANNING EXERCISE UNDERTAKEN BY THE RESEARCH ADVISORY BOARD NOVEMBER 2007

In November 2007, the Research Advisory Board convened a Strategic Planning meeting. The program comprised three main sessions:

1. Introduction, reflection and stocktake of APHCRI's work to date against the current Strategic Plan and the changing policy and stakeholder environment
2. "Looking forward" - implications for APHCRI: key directions and imperatives for our future work
3. Key research priorities and directions that will inform future research streams and implications for the operation and administration of APHCRI.

Key outcomes in regard to the stocktake of APHCRI's work included:

- Endorsement of the ongoing relevance of APHCRI's initial vision, mission and overarching strategic goals including a strong emphasis on research excellence and quality
- Affirmation of the value of "linkage and exchange" methodologies employed in generating new policy-relevant knowledge in a timely and efficient manner
- Continuing to locate APHCRI's role within the broader PHC RED strategy
- Maintaining a primary health care focus and not venturing into clinical research
- Recognition that the Australian Government, and through them the Australian public, remain the key stakeholders for APHCRI. There was simultaneous acknowledgment that APHCRI's activities have produced outcomes that serve multiple stakeholders.

Key future high level strategic directions for APHCRI included:

- The potential to take a greater role in stimulating public debate about contentious policy issues confronting primary health care
- Fully realising the potential inherent within APHCRI as a virtual institute operating a hub and spoke model to achieve APHCRI's strategic goals, including increasing the capacity to respond quickly to policy requests
- Further development of linkage and exchange, in particular the knowledge translation approaches, and engagement of policy advisers in APHCRI activities
- A 'meta-analysis' of the existing body of APHCRI research commissioned through previous research streams realised through increased support for the Hub to engage additional staff

Five domains were prioritised through the discussions to provide guidance to the future research directions for APHCRI:

1. *Patient transition and pathways*
2. *Changing 'drivers' within the primary health care system*
3. *Better meeting the health needs of disadvantaged groups*
4. *'Best practice' primary health care models in different settings*
5. *Indigenous health*

Further details on these can be found in the Research Plan section of this document.

The forum concluded that APHCRI would continue to play an indispensable role in providing a knowledge platform for linking primary health care evidence with policy at the highest level, which in turn would drive the relevant primary health care programs designed to improve health outcomes for the Australian population.

THE OPERATING ENVIRONMENT

Key changes in the operating environment since the production of the first Strategic Plan include:

- The election in November 2007 of a new Labor Australian Government. The Australian Labor Party included a commitment to the production of a National Primary Health Care Strategy as part of its election platform. The Institute will take particular note of the directions foreshadowed as this strategy is developed and include these in its own strategic directions
- Both Phase I and Phase II of the PHC RED strategy are being evaluated during 2008 with the final report due for submission to the Department of Health and Ageing in October 2008. The report will include recommendations to the DoHA, and APHCRI will be responsive to recommendations pertaining to the Institute.

Other aspects of the environment remain relatively unchanged from those noted in the initial Strategic Plan. They are not reproduced here.

INTERNAL CHANGES AT APHCRI HUB

The planning process also noted the transition occurring in senior staff positions at APHCRI. The foundation Director is moving to a new role at ANU in January 2008, and the Institute Manager is taking up an interstate position. Succession planning is thus an important consideration.

GOAL 1: A STRONGER KNOWLEDGE BASE

SPECIFIED AIM

To strengthen the knowledge base of primary health care to inform policy and practice through the conduct and support of research.

STRATEGIES

- 1.1 From the five priority domains guiding APHCRI's research directions, identify specific research issues/questions
- 1.2 Extend APHCRI's ability to respond to emergent issues through the research commissioning process
- 1.3 Manage the program of research in accordance with the priorities identified at 1.1, by undertaking, commissioning and co-ordinating research projects and programs funded under the Agreement and through other sources
- 1.4 Provide support, assistance and tools to researchers and research organisations on technical and methodological aspects of best practice in the development, conduct and publication of APHCRI-sponsored research
- 1.5 Identify additional funding sources and partnerships to support the Institute's research agenda

PERFORMANCE INFORMATION

By February 2010, the Institute will have:

- Allocated research funding and established research contracts with researchers and research organisations through Streams Nine to 11 of the Research Plan (a description of the Research Plan is provided later in this Plan)
- Demonstrated enhanced responsiveness to emergent policy needs within the operations of the Institute
- Concluded APHCRI's commissioned research program through spokes, including monitoring of performance against milestones and deliverables
- Completed hub priority research projects
- Widely disseminated research results of completed projects
- Increased the Institute's research funding to expand the volume and range of primary health care research and related activities

GOAL 2: UPTAKE OF RESEARCH EVIDENCE

SPECIFIED AIM

To facilitate the uptake of evidence into primary health care policy and practice

STRATEGIES

- 2.1 Strengthen APHCRI's 'linkage and exchange' approach to enhance the utility of research evidence in the processes of policy formulation
- 2.2 Refine evidence-based strategies for the synthesis, dissemination and advocacy of new and existing knowledge arising from APHCRI-sponsored and other research, and other Institute activities (strategies will include publications and facilitation of meetings and forums for key stakeholders)
- 2.3 Provide advice to the Department of Health and Ageing to inform the development of policy
- 2.4 Stimulate an informed national primary health care policy debate and maintain a watching brief on primary health care policy issues
- 2.5 Ensure that all commissioned research activity has an explicit linkage and exchange component

PERFORMANCE INFORMATION

By February 2010, the Institute will have:

- Documented APHCRI's experience to date with processes of knowledge transfer and exchange, related these to the increasing evidence base underpinning these processes and applied the results in the operations of the Institute
- Demonstrated research and implementation partnerships with key stakeholders including the other components of the PHC RED strategy
- Continued and matured APHCRI dissemination of available research evidence relevant to policy areas including:
 - National policy seminars/workshops/plenaries on primary health care policy issues
 - Issues of APHCRI@work and APHCRI Dialogue
 - APHCRI's website
 - Meetings located in the offices of the Department of Health and Ageing to maximise the opportunities for Departmental officers to attend
 - Publications in peer-reviewed literature
 - Media releases and interviews

GOAL 3: ENHANCED RESEARCH CAPACITY

SPECIFIED AIM

To enhance research capacity in primary health care through strategic partnerships and collaborations with other relevant national and international groups

STRATEGIES

- 3.1 Develop strategic partnerships and collaborations and ensure that all funded research has an explicit capacity development component
- 3.2 Develop opportunities for pursuing APHCRI's core business by undertaking funded research with other agencies
- 3.3 Maximise opportunities for enhancing research capacity through professional interaction, such as collaborations with similar primary health care research institutes internationally, participation at key national and international conferences and the Visiting Fellows programs
- 3.4 Establish an "APHCRI Fellow" position based at ANU with a particular focus on linkage and exchange
- 3.5 Provide opportunities for higher degree research students to engage in primary health care research

PERFORMANCE INFORMATION

By February 2010, the Institute will have:

- Implemented evidence-based strategies for research capacity-building focused on the nexus between research evidence and policy formulation within APHCRI's operations
- Maintained and developed strong working relationships with national and international primary health care research groups including undertaking additional capacity building activities
- Hosted four Visiting Fellows who have contributed to the Institute's work program
- Commissioned six APHCRI Travelling Fellows to contribute to the Institute's work program
- Increased the Institute's research capacity to expand the volume and range of primary health care research and related activities
- Graduated higher degree research students through the operations of APHCRI

GOAL 4: AN EFFECTIVE ORGANISATION

SPECIFIED AIM

To ensure that the Institute operates to the highest standards by developing and improving its organisational capacity to lead the national primary health care research network through appropriate staffing, resources, infrastructure, management practices and governance and accountability processes

STRATEGIES

- 4.1 Recruit, develop and retain appropriate hub staff to support the Institute's functions
- 4.2 Adhere to and, when appropriate, refine principles and practices for the effective governance by the Research Advisory Board and Expert Review Committees
- 4.3 Develop, review and improve management systems and practices to ensure the effective management of the Institute
- 4.4 Develop performance reporting capacity and systems and monitor and report on the Institute's performance and outcomes
- 4.5 Make maximum use of the academic and administrative resources within The Australian National University College of Medicine and Health Science to realise APHCRI's mission most efficiently

PERFORMANCE INFORMATION

By February 2010, the Institute will have:

- Recruited hub staff with skills and expertise appropriate to the Institute's strategic and operational requirements
- Ensured compliance with the requirements of the Handbooks for the Research Advisory Board, Expert Review Committees and Spokes
- Demonstrated continuous improvement in the business operations and systems of the Institute, including through the ANU College of Medicine and Health Sciences administrative services
- Complied with all relevant legislation, pertinent regulations and best practice in the management of the Institute
- Managed the business of the Institute to the satisfaction of ANU, the Department of Health and Ageing and Spokes
- Provided regular reports to the Department of Health and Ageing against the Strategic Plan and annual work plans to the satisfaction of the Department of Health and Ageing

RESEARCH PLAN

This section complements the broad strategies outlined by providing more detailed information on the research domains prioritised through the strategic planning process, and the programs used to commission research to support the Institute's research agenda.

The overarching research priorities for APHCRI remain unchanged:

- Innovation in State/Commonwealth relationships
- Innovation in funding arrangements for new or existing services/models
- Innovation in organisation and linkages within the primary health care sector

RESEARCH PRIORITY SETTING

The strategic planning process identified five domains that provide guidance to the future research directions for APHCRI:

1. ***Patient transition and pathways:*** including consumer experiences and the best way to organise pathways of care; the quality and performance of primary health care services, and the role of primary health care within the broader health system. Where appropriate and feasible, opportunities to develop sentinel primary health care service metrics and indicators and maximise the use of existing linked data sets should be pursued.
2. ***Changing 'drivers' within the primary health care system:*** including opportunities to move from transaction to relation-based primary health care activity; opportunities for 'smart' funding to change role and activities and facilitate task substitution; organising models of primary health care around the health needs of communities and State-Territory-Commonwealth engagement in primary health care service planning
3. ***Better meeting the health needs of disadvantaged groups:*** including the elderly, youth, socio-economically marginalised groups and others. Attention should be paid to access, equity, appropriateness, and acceptability criteria as key measures for monitoring improvements in primary health care delivery
4. ***'Best practice' primary health care organisation in different settings:*** focusing on what works well where and why; and noting in particular the specific contextual issues that impact on performance and sustainability in the delivery of optimal primary health care
5. ***Indigenous health:*** unanimous support to scope and commission a significant stream of activity in indigenous health, taking due regard of the need to consult widely with indigenous stakeholders and research organisations, and to avoid duplication of activity currently under way or proposed by the Australian Department of Health and Ageing

These domains are broad, and the specific research questions/issues within them will be determined by the Research Advisory Board as it meets, particularly in its meetings in the first part of 2008.

In its streams to date, APHCRI has adopted a number of different approaches. Given the duration of the period covered by the extension of the funding agreement, research streams commenced are likely to be variations of the successful systematic review and synthesis type (Streams Four and Six) extension type (Stream Five) or of a travelling fellowship type (Streams Seven and Eight).

RESEARCH PROGRAM

The proposed Research Program is outlined below and has been updated following the March 2008 Research Advisory Board and feedback received from the Department of Health and Ageing on the draft strategic plan. The outline which follows includes possible research streams that have not yet received final sign off by the Research Advisory Board and which may not proceed further. For simplicity the Streams have been numbered sequentially – the final number allocated to a research stream will be determined by the sequence in which they are rolled out – therefore the numbering may alter in future documents.

STREAMS Nine and 15 APHCRI/Robert Graham Center Visiting Fellowship

Through Stream Eight, APHCRI commissioned the first APHCRI/Robert Graham Center Visiting Fellow. The initiative has received very positive feedback from all involved, and based on this the Research Advisory Board has decided that the Fellowship will be offered in both 2008 and 2009. This Fellowship is aimed at early career primary health care researchers. It will carry a monetary value of up to AUD\$20,000 each year. The Stream will be announced in April 2008.

STREAM 10 – Travelling Fellowships (open to recipients of Stream Six workforce funding).

This research stream will enable researchers who have actively participated in the APHCRI funded Stream Six Workforce spoke to take one/some of the research outputs from that project, visit an international 'sister' institution and contrast the Australian findings with those in the relevant country(ies). This is a mirror to the successful Stream Seven and consolidates the linkage and exchange philosophy that underpins the Institute's work. Up to six Fellowships will be offered. This research stream has been approved by the Research Advisory Board and will be announced in April 2008.

STREAM 11 International Visiting Fellowships Program

This is a new kind of Visiting Fellowship stream, utilising the capacity of the hub and spoke model to identify international experts and support their ability to make policy-relevant contributions to Australia's primary health care sector. Up to 15 international fellows will be supported to come to Australia with combined financial support from APHCRI and the hosting institution. The visit will include elements of teaching and/or knowledge exchange over and above a simple conference presentation. There will be a mandatory visit to Canberra, presentation to the Department of Health and Ageing and media interviews where appropriate. The Program aims to support visitors from a variety of countries, hosted by institutions across Australia. The Research Advisory Board will make the final decisions about successful applications based on the strategic value to APHCRI and its stakeholders. This research stream has been approved by the Research Advisory Board and will be announced in the first half of 2008.

STREAM 12 Extension funding – adding value to previous streams

This extension funding is to allow existing spokes to take the next logical step in their research work and to "add value" to work already underway or completed under the APHCRI banner. After reviewing the success of a previous, similar, stream of work (Stream Five) the Research Advisory Board agreed to support four-to-six spokes in this next extension funding round. Expressions of interest will be invited from participants in Stream Three, Four and Six. In order to emphasise the fourth research priority domain (best practice primary health care organisation in different settings), applicants from Stream Three and Four will only be considered if they specifically address organisational issues in their extension work.. This

stream has been approved by the Research Advisory Board and will be announced in April 2008.

STREAM 13 Systematic review, synthesis and development of policy options.

This stream is still in the development phase. The work will involve systematic review and development of policy options, addressing the question: "What are the drivers for success in preventative primary health care service delivery?" There will be a focus on three settings – disadvantaged and marginalised groups, large metropolitan settings and workplaces. Activities envisaged within this stream will be variations on the approaches used in Streams Four and Six. The Research Advisory Board committed up to \$1.8 million dollars to support this stream. The final proposal for this work is being developed by hub staff and will be presented to the Research Advisory Board at the June meeting.

STREAM 14 Commissioned work to address an Indigenous health priority.

The Research Advisory Board has previously committed up to \$500,000 to this stream. After consultation with the Office of Aboriginal and Torres Strait Islander Health (OATSIH) within the Department of Health and Ageing, it was decided to support current and planned research projects that focus on the area of prevention and reduction of smoking amongst Indigenous people. This is in direct response to the continued high prevalence of smoking in Indigenous communities and the acknowledged significant impact that smoking has on preventable Indigenous deaths. The proposed research stream is continuing to be developed but current plans are that it should consist of the following elements:

- 1 Systematic review and synthesis of research already undertaken in two areas;
 - a) A systematic review and synthesis of successful smoking prevention and cessation programs in Indigenous communities internationally
 - b) A systematic review and synthesis of the successful primary health care prevention programs targeted at other (non-smoking) health behaviours that have been successful amongst Australian Indigenous populations
2. The development of a discussion paper based on the above that highlights gaps and identifies potential policy options for the future
3. The facilitation of a stakeholders' forum to discuss the paper. The forum would include presentations on areas of access, equity and challenges to implementation. This would be a major linkage and exchange exercise

Hub staff are continuing to develop the proposal for this program which will be further discussed at the next Research Advisory Board meeting.

RESEARCH TIMEFRAME

Program	2008		2009		Feb 2010
STREAMS Nine and 15					
STREAM 10					
STREAM 11					
STREAM 12					
STREAM 13					
STREAM 14					

MONITORING AND EVALUATION

This Strategic Plan, and detailed annual work plans based on the Strategic Plan, from the basis of ongoing monitoring and performance reporting of the activities of the Institute. In addition to Annual and Quarterly Reports provided to the Department of Health and Ageing as part of the Funding Agreement, an external review will be undertaken in 2008 to evaluate the performance of the Institute and recommend future directions.