

CESPHN RESEARCH STRATEGY 2024-2027

Version	1.0
Document Author	General Manager, Primary Care Improvement
Approved	December 2023
Effective Date	15 th January 2024

Background

Central and Eastern Sydney Primary Health Network (CESPHN) is committed to achieving our vision of better health and wellbeing for everyone in our region through our strategic goals of improving care integration, improving primary care practice, and commissioning health and wellbeing services to meet local needs. Research is a key enabler of these goals as it provides the evidence base that underpins effective, equitable and efficient primary care. Research is essential for innovation and improvement in primary care, and for developing and evaluating health care innovations that are relevant and adapted to the local context.

The significant research assets and infrastructure within our region make our PHN uniquely placed to build research capacity and facilitate research collaboration to improve primary care services and health outcomes for our population. These include:

- leading universities headquartered in our region: The University of Sydney, The University of New South Wales, University of Technology Sydney, and Notre Dame University
- unique access to primary care data assets
- established research agreements with the Universities of Sydney and New South Wales
- close partnerships with local researchers, many of whom are clinician-researchers holding conjoint academic clinical appointments.
- hosting of university student placements at CESPHN with a focus on research or quality improvement
- a diverse population enabling research to be conducted with different subgroups.
- the large number of general practices and allied health providers in our region
- established local research committees with representation from the General Manager, Primary Care Improvement

Because of these assets and our growing leadership role in research, CESPHN is increasingly being asked to provide in-kind or financial support to researchers. Much of this support involves assistance with research grant submissions, recruitment of and advertising to primary care providers and practices, review of study designs and involvement in research governance and co-design processes.

To achieve the largest health gains for our region and make the best use of resources, it is important that CESPHN's involvement in research aligns with our vision, strategic goals, and the needs of our local region. To this end, we have identified five key research priorities that underpin our research strategy: addressing local needs, addressing inequities and involving priority populations, building research capacity and strengthening collaboration, increasing translational research, and enabling high-quality primary care. Wherever possible, CESPHN should be engaged in helping to set priorities for research, to ensure that these priorities are integrated into research projects and that research is codesigned and coproduced.

The purpose of this research strategy is to provide guidance to researchers and other stakeholders regarding CESPHN's research vision and strategic research priorities. This will ensure that the research efforts we support are consistent with our overall vision and [strategic planning](#).

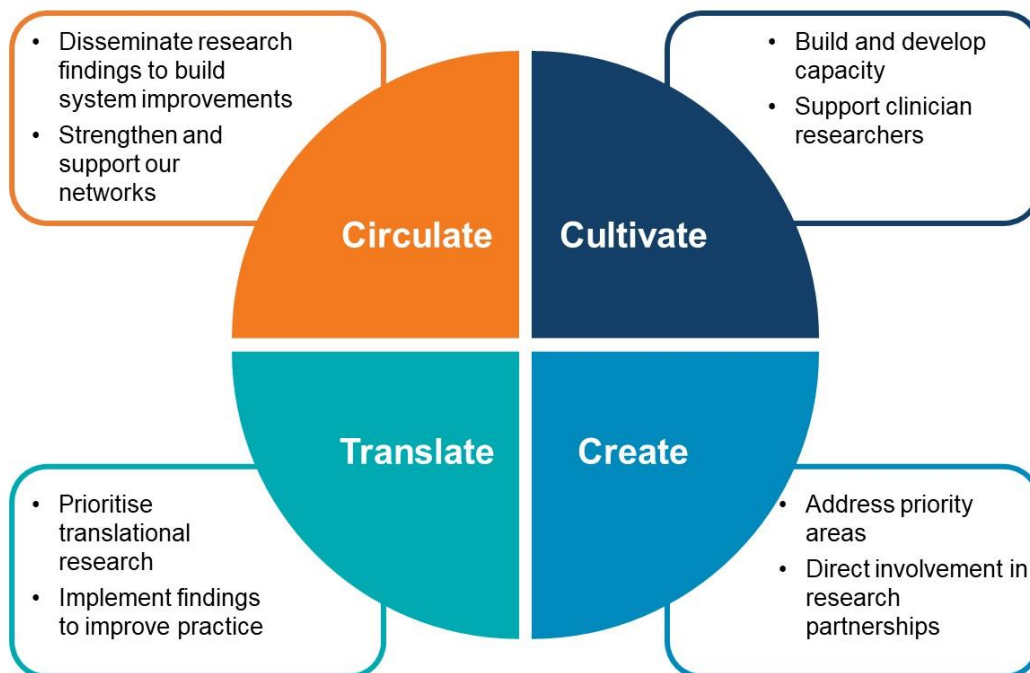
Our research vision

At CESP HN we recognise and value the importance of research. Activities that are informed by research provide evidence that leads to effective, safe, innovative and best-practice primary care. We are committed to fostering high-quality, ethical research that addresses local needs and has potential to be translated into improved care integration and primary care practice in our region.

A four-part model – **Cultivate, Create, Translate, Circulate** – establishes our vision for research (Figure 1):

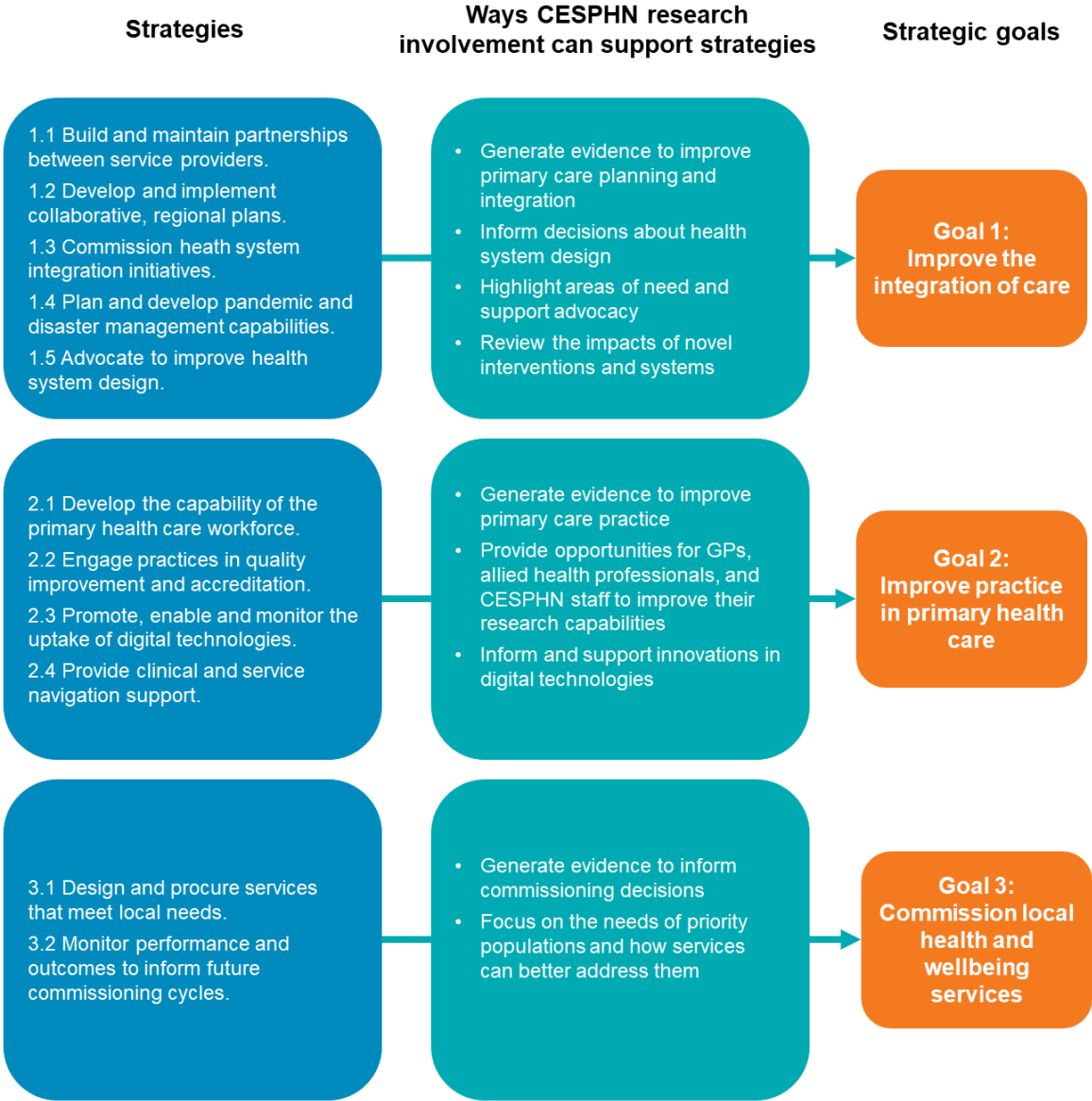
- **Cultivate** refers to developing research capacity and strong research networks, which are key enablers of high-quality research and effective research translation.
- **Create** refers to undertaking research that generates new knowledge and understanding in identified priority areas, and to being actively involved in the codesign and coproduction of research.
- **Translate** refers to prioritising research with strong translational potential and the translation of research findings into improved care integration and practice.
- **Circulate** highlights the importance of disseminating research findings to our primary care providers and wider networks.

Figure 1: The ‘Cultivate, Create, Translate, Circulate’ model illustrating our research vision



Our vision for research aligns with and facilitates the overarching vision, goals and strategies established in our [2022-2024 Strategic Plan](#), as outlined in Figure 2.

Figure 2. Ways that CESP HN research involvement can support the strategies and strategic goals identified in the [2022-2024 Strategic Plan](#)



Our research priorities

1. Address local needs

We will prioritise research that addresses identified health and health service needs in our local communities. This includes needs outlined in the annual [CESPHN Needs Assessment](#), commonwealth and state government priorities, and emerging issues in primary health care. In doing so, we will facilitate the generation of new knowledge and understanding which is directly relevant to our vision of improving the health and wellbeing of our region.

This will help to fill current evidence gaps and ensure that our research resources, and those of our partners, are directed to areas with the greatest potential to benefit health and improve primary health care in our region.

2. Address inequities and involve priority populations

We will prioritise research that addresses areas of inequity and in which the study design involves priority populations and health consumers in our community. Within CESPHN these populations include people living with socioeconomic disadvantage, Aboriginal and Torres Strait Islander peoples, multicultural communities, people living with disability, people experiencing homelessness or at risk of homelessness, people who identify as LGBTQI+, veterans, care leavers and people in contact with the criminal legal system. This will ensure that the benefits of our research involvement flow to those with the highest need and advance our vision of better health for *all* in our region.

3. Build research capacity and strengthen collaboration

We will support research that builds the capacity of our local primary care workforce and strengthens collaborative research partnerships within our region. We will look for opportunities to support primary care clinician-researchers, who have a crucial role in generating the evidence needed to lead and shape the future of primary care. We will increase the direct involvement of CESPHN in research partnerships and advocate for CESPHN staff and primary care providers to be involved as study investigators contributing to the development of study concepts, study protocols and grant applications, and as co-authors on publications. We will seek opportunities for CESPHN staff to participate in and contribute to research, including through secondments with researchers, enabling development of skills in areas including critical thinking and data management and analysis.

This will lead to improved recognition of CESPHN as a key research partner in our region and contribute to capacity building, professional development and satisfaction among CESPHN staff and primary care providers. We will continue to build relationships with local academic institutions and foster links between these institutions and local GP and allied health researchers. By facilitating connections between relevant bodies, researchers, and clinicians, we will drive a collaborative research culture that supports the upskilling of primary care providers and CESPHN staff in research.

4. Increase translational research

We will place a greater focus on translational research – the generation of evidence that leads to practice and system change. This includes testing interventions and treatments with the greatest potential to reduce morbidity and mortality and enhance appropriate service usage and delivery. We will seek to facilitate an interactive, two-way approach to research translation. This means advocating for the involvement of CESPHN, health consumers and primary care service providers in codesign and coproduction throughout the entire research process, starting at the point of priority setting for research.

This will ensure that we support research that is impactful, relevant, and acceptable to health consumers and primary care providers in our region. We will further emphasise the dissemination of research

findings to primary care providers and health consumers to ensure that the benefits of research flow on to our local region.

5. Enable high-quality primary care

We will prioritise research examining the enablers of high-quality primary care and leverage our strong relationships with primary care providers to support the implementation of research findings into primary care practice. This will ensure that our involvement in research actively enhances the delivery of primary care within our region. We will use relevant research findings to inform our advocacy on primary care policy to the Commonwealth and facilitate enhancements at the broader system level. We will support research that enhances the implementation and evaluation of state and federal policy innovations at the local level, with the potential to contribute to improvements in the wider primary health care system.

Our research strategy

Each of our research priorities is supported by specific actions, as outlined below. Together, these form our research strategy.

Research Priority 1: Address local needs

- 1.1 Prioritise research that addresses identified local health and health service needs, with a particular focus on the priority areas identified in our annual [CESPHN Needs Assessment](#).
- 1.2 Prioritise research that addresses the current priorities of commonwealth and state governments.
- 1.3 Prioritise research that addresses emerging issues in primary health care.

Research Priority 2: Address areas of inequity and involve priority populations

- 2.1 Prioritise research that explicitly addresses health inequities.
- 2.2 Support research involving priority populations in our region, including people living with socioeconomic disadvantage, Aboriginal and Torres Strait Islander peoples, multicultural communities, people with a disability, people experiencing homelessness or at risk of homelessness, people who identify as LGBTQI+, veterans, care leavers and people in contact with the criminal legal system.

Research Priority 3: Build research capacity and strengthen collaboration

- 3.1 Increase the direct involvement of CESPHN in research projects including as study co-investigators and as co-authors of publications.
- 3.2 Support GP, allied health and consumer researchers through in-kind support, funding, and creating links to consumers, local research stakeholders including academic institutions.
- 3.3 Support research being conducted by local institutions within our region.
- 3.4 Support student researchers through existing partnerships with The University of Sydney and The University of New South Wales.
- 3.5 Foster a collaborative research culture by facilitating communication, collaboration and networking between clinician researchers, academic institutions, and other relevant bodies, participating in relevant research committees, and encouraging joint clinical and academic appointments.

Research Priority 4: Increase translational research

- 4.1 Prioritise research with the greatest potential for research translation within our region.
- 4.2 Advocate for the involvement of CESP HN, primary care providers and health care consumers within our region at all stages of the research process.
- 4.3 Utilise and further develop communication pathways and networks to communicate research opportunities, activities, and findings within our region.

Research Priority 5: Enable high-quality primary care

- 5.1 Prioritise research examining the enablers of high-quality primary care
- 5.2 Support the implementation of relevant research findings by primary care providers to improve primary care practice within our region.
- 5.3 Use research findings as a basis for advocacy by CESP HN to facilitate broader system-level improvements.

Research Processes and Procedures

CESP HN is committed to ethical, efficient, and accountable research conduct. This is facilitated by our processes and procedures for reviewing research requests and our reporting and governance requirements. The following process will be used to manage requests for research assistance:

Requests for CESP HN research involvement or assistance

- Researchers wishing to seek preliminary input from and engagement with CESP HN during the conceptualisation, planning and development stages of their research project should contact research@cesphn.com.au
- All researchers requesting the involvement or assistance of CESP HN with a research project must complete a [Research Request Form](#) and may be required to provide a copy of the study protocol.
- CESP HN will only support research projects that are ethically sound and have obtained ethics approval from a registered Human Research Ethics Committee. However, consideration may be given to researchers requesting support from CESP HN prior to obtaining ethics approval where appropriate.

Review and decision-making in relation to research requests

- Research requests will be assessed against the degree to which they align with CESP HN's research strategy and priorities as outlined in this document.
- CESP HN may request further information from researchers prior to making a decision.
- Applicants will be notified in writing of the outcome of their research request.

Research reporting and governance

- The CESP HN Board will be updated regularly regarding the involvement of CESP HN in research projects.
- CESP HN's research involvement and activities will be reported to stakeholders at regular intervals through the website and newsletter.
- Researchers will be required to provide CESP HN with copies of all publications arising from research in which CESP HN is involved.
- At the completion of any research project towards which CESP HN provides funding, researchers must provide CESP HN with a report summarising the conduct, findings, and

outputs of the research. Interim progress reports at defined intervals may also be requested at the time of approval of the research request, depending on the nature of the project.

- The involvement of CESP HN in research will be guided by and compliant with relevant CESP HN policies.

Contacts

For any queries regarding this document, please contact research@cesphn.com.au