

# Research Strategy & Implementation Plan

### 2022 - 2025



#### Acknowledgement of Country

Nepean Blue Mountains Local Health District acknowledges the Darug, Gundungurra and Wiradjuri people as the Traditional Custodians of the land where we work and live. We celebrate the diversity of Aboriginal peoples and their ongoing cultures and connections to the lands and waters of NSW.

We pay our respects to Elders past, present and emerging and acknowledge the Aboriginal people that contributed to the development of this Research Strategy.

**Research Strategy & Implementation Plan** 

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## Foreword

At Nepean and Blue Mountains Local Health District (NBMLHD), excellence in clinical care is underpinned by an emerging culture of research excellence and engagement across the health system.

This Research Strategy and Implementation Plan has been developed to support existing research and to further develop the District as a research-focussed organisation.

This inaugural Strategy and Implementation Plan will lay the foundation for developing and implementing evidence based best practice to drive innovation in systems and care across NBMLHD, driven by and tailored to community needs and expectations.

The Strategy identifies five Strategic Research Aims, aligned to our overarching Strategic Directions that will be our focus over the next 3-years. The aims are focussed on partnering with the community to undertake meaningful research, building research capacity, investing in research infrastructure, building collaborations and external partnerships and responsible research governance.

Delivering on our overarching mission requires recognition that high quality services are driven by innovation with evidence and it is only through well-governed and ethical research that the evidencebase is built. By working together with the communities we serve we will ensure that research across the NBMLHD meets the needs and matches the priorities of those communities, helping them to achieve better health.

During the development of this Strategy we have spoken with many passionate staff, and thank our colleagues for their insightful and practical ideas to improve research and related systems and processes across NBMLHD. This plan will be a framework from which we will lead, collaborate and contribute advances to address the biggest health challenges facing our community, ensuring NBMLHD continues to be a high performing research-oriented organisation delivering world-class health care and research to improve the health and wellbeing of our community well into the future.

**Kay Hyman** Chief Executive Nepean Blue Mountains Local Health District **The Hon. Peter Collins, AM KC** Board Chair Nepean Blue Mountains Local Health District



### Strategy at a Glance

#### 2.1 Research Vision

Effective evidence-based best practice health care for all, delivered by a talented, happy and engaged workforce via a sustainable health system.

#### 2.2 Strategic Research Aims

- 1. Partner with the community to undertake research that is inclusive, engaging, accessible and addresses expressed local needs
- 2. Build staff capacity and support research embedded in health services that improves patient satisfaction and outcomes
- 3. Invest in research infrastructure and build funding sources that are sustainable and equitable
- 4. Build collaborations and partnerships with universities, education partners, research institutes, industry and the community that are productive, strategic and transparent
- 5. Provide effective, efficient and transparent research governance



The actions laid out in this strategy and plan aim to make research more accessible to our workforce and patients and to ensure that research conducted across NBMLHD meets the needs of the communities in our region. The strategy also aims to improve research culture across NBMLHD by increasing the profile and support for research and researchers within the District and encourage consumers to participate in these research endeavours.

The development of research priorities will also be supported; priorities that will be informed and developed in partnership with local services, local communities and, most importantly, local consumers and carers.

Please note that throughout this document 'Aboriginal' is used to refer to Aboriginal and Torres Strait Islander and all First Nations People.

#### 3.1 Aim

The NBMLHD Research Strategy and Implementation Plan articulates the overarching strategic research aims for NBMLHD as well as the actions required to achieve these aims.

This is a foundational document, intended to lay the groundwork for a more strategically focussed document in the next iteration.

#### 3.2 District Overview

The geographical spread of NBMLHD is broad, covering more than 9,000 square kilometres. NBMLHD extends approximately 120km from east to west and 140km from north to south. Service provision, while spread across the LHD, is concentrated in Penrith Local Government Area (LGA), with the highest concentration of research occurring at Nepean Hospital.

It's estimated that almost 400,000 people live in NBMLHD. Of the people currently living in our region, 4.3% identify as Aboriginal. Almost one-fifth of our population were born overseas and more than 10% were born in non-English speaking countries. This makes our region representative of the broader Australian population and subsequently an excellent opportunity for population-level research that can then be generalised across the nation.

By 2036, the NBMLHD population is predicted to increase by 44% to 529,457 people. The greatest growth is predicted in the Penrith (74%) and Hawkesbury (16%) LGAs. The most rapid increases are projected for the population aged 65 years and over. This growth and change in the NBMLHD population will require a shift in the way healthcare is delivered, moving from responding to illness to an increasing focus on prevention and sustaining wellbeing. To meet this challenge, NBMLHD will need to respond with new and innovative ways of providing healthcare, driven by research, innovation and community participation.

#### 3.3 Our Research Achievements

Over the past two years there has been a considerable increase in the quantity and quality of health and medical research undertaken across NBMLHD. This is underpinned by a longstanding commitment to cultivating high quality research and building a culture of enquiry to improve clinical practice. This commitment is aligned to the District's goal of being a Hub for Research and Innovation and demonstrated by the breadth of strategic alignment and partnerships with leading local universities, including The University of Sydney, Western Sydney University and The University Notre Dame.

Research undertaken within NBMLHD covers a broad range of areas including public and population health, mental health, oral health, psychiatry, obstetrics and gynaecology, paediatrics, genomics, endocrine and metabolic disorders, oncology and haematology, adult and neonatal intensive care, cardiovascular, renal, respiratory medicine, orthopaedics, hepatology and gastroenterology. Basic science and clinical and non-clinical research involves medical, nursing, midwifery and allied health colleagues, as well as scientists and non-clinical staff. There is an increasing ambition among NBMLHD researchers to remove the barriers that often confine clinicians and researchers to working in disciplinary silos with the aim of working collegially, across clinical areas and disciplines, to improve health system performance and patient outcomes.

The next three years will also see a period of major change across NBMLHD. The commissioning of the two new sections of Nepean Hospital will not only further highlight the need for NBMLHD to perform well in a highly competitive job market but also ensure our service provision matches or manages community expectations. A nurturing, supportive and strategic research culture, built through the implementation of this Research Strategy and Implementation Plan, will help NBMLHD meet these aims.



#### 4.1 Governance

The development of this Strategy and Implementation Plan was governed by the NBMLHD Board Research Subcommittee with additional oversight provided by Ngara and the Strategy and Planning Board Subcommittee.

#### 4.2 Strategic Framework

This Research Strategy and Implementation Plan is an enabling and supportive plan within the NBMLHD Planning Framework. The plan has been informed by the NBMLHD Strategic Plan 2018-2023 and will help to achieve the LHD's Strategic Direction: Hub for Research and Innovation.

The Plan also aligns to, and has been informed by, a number of external plans and documents, including The NHMRC Australian Code for the Responsible Conduct of Research (2018), NHMRC Statement on Consumer and Community Involvement in health and Medical Research; the Australian Health Research Alliance National Indigenous Researcher Capacity Building Project; the NSW Aboriginal Health Plan 2013-2023 and the NSW Plan for Healthy Culturally and Linguistically Diverse Communities 2019-2023

#### 4.3 Consultation

Over 100 people were consulted, including NBMLHD Board members; senior clinicians, nurses and allied health professionals; PhD candidates; clinical trials workforce; the Aboriginal Health Unit; Population and Public Health professionals and research governance and ethics administrators.

Face-to-face group and one-on-one sessions were held via video conference and phone meetings; an online survey was conducted and the Strategy and Consultation Report were published via the District 'Documents for comment' process.

A summary of consultations can be found in Appendix 2 and the original consultation report is available on request.

#### 4.4 Background Documents Reviewed

Reviews of other relevant national, state and local documents included the National Clinical Trial Governance Framework: Guide for implementation; NSW State Health Plan: Towards 2021; and the Draft CBRE Education and Research Strategy.



### **Governance of Implementation**

The implementation of the Research Strategy and Implementation Plan will require leadership and engagement across all levels of the District and across all disciplines.

The NBMLHD Board takes overarching responsibility for primary governance and implementation leadership. KPIs for the Plan will be set by the NBMLHD Board Research Subcommittee.

The Director, Allied Health, Research and Strategic Partnerships will take overarching responsibility for monitoring and evaluation of the Plan, closely supported by the Director of Research Operations, who will take responsibility for implementing the actions within each of the defined Strategic Aims.

Regular monitoring, measurement and reporting will occur throughout the life of the Plan and will be reported quarterly at the NBMLHD Board Research Subcommittee meeting, with outcome reports completed annually. The next iteration of the Research Strategy and Implementation Plan will be developed in 2025.



### Strategy & Implementation Plan



Strategic Aim 1: Partner with the community to undertake research that is inclusive, engaging, accessible and addresses expressed local needs.

### Objective 1: Work with the community to identify priority research areas that address community needs.

Actions:

- 1. Conduct community consultations, across all LGAs, including with Aboriginal and other culturally and linguistically diverse groups, to understand research priorities across the LHD and any specific research priorities for vulnerable populations.
- 2. Establish a consumer reference group for research.

#### Outcomes:

- 1. Documented community and consumer research priorities to inform the next iteration of the research strategy.
- 2. Improved cultural competency of researchers and key research staff.
- 3. Increased networks with local Aboriginal, multicultural, and other key stakeholder groups.
- 4. Accreditation for the National Clinical Trials Governance Framework (Action 1.4 ,1.15 & 2.9).

### Objective 2: Embed consumer and community engagement into research conducted throughout the LHD.

Actions:

- 1. Develop and implement a policy, including key outcome measures, for consumer and community engagement in research.
- 2. Provide education and training to researchers on the policy and its implementation.

- 1. Endorsement and implementation of policy for consumer and community engagement in research.
- 2. Accreditation for the National Clinical Trials Governance Framework (Action 2.9 and 2.10).

#### **Objective 3: Promote NBMLHD research to consumers and the community.**

Actions:

- 1. Establish a strong public web presence that shares information about research processes, programs, and projects.
- 2. Establish strategies to ensure patients are offered information regarding opportunities to participate in research trials.

Outcomes:

- 1. An engaging externally-facing website and other web presence showcasing research across NBMLHD.
- 2. Increased community participation in research trials.

### Objective 4: Ensure that research conducted in Aboriginal communities uses a strengths-based approach.

Actions:

- 1. Develop and implement an Aboriginal health research policy (in partnership with Aboriginal researchers).
- 2. Provide cultural competency in research training.

- 1. Endorsement and implementation of Aboriginal Health Research Policy.
- 2. Improved cultural competency of researchers and key research staff.
- 3. Accreditation for the National Clinical Trials Governance Framework (Action 1.4, 1.15 and 2.9).

### Objective 5: Ensure a wide range of clinical trials are available for community participation.

#### Actions:

- 1. Establish and/or strengthen relationships with pharmaceutical companies and/or collaborative groups.
- 2. Seek opportunities to attract external clinical trials to NBMLHD.

- 1. Increased community participation in emerging treatment options and new treatment techniques.
- 2. Improved equity of access to medications/procedures that are still being trialled.

Strategic Aim 2: Build staff capacity and support research embedded in health services that improves patient satisfaction and outcomes.

#### **Objective 1: Build clinical research capacity and capability.**

#### Actions:

- 1. Establish the Research Capacity Building Committee to address capacity building issues identified by research staff.
- 2. Develop and implement education programs and training pathways for researchers, including wide scale education regarding the Research Career Pathway.

#### Outcomes:

- 1. Increased researcher capacity, as defined by an increase in research output and impact, i.e., publications, grants, students, influencing guidelines and clinical practice.
- 2. Increased researcher capability as demonstrated through improvements in Ministry of Health KPIs.

### Objective 2: Develop research-specific roles and position descriptions for staff aligned with their professional qualifications.

#### Actions:

- 1. Work with Workforce, People and Culture (WPC) and clinical units to identify issues with recruitment to research positions and develop solutions.
- 2. Work with the Office of Health and Medical Research (OHMR) to standardise position description templates for key research positions.

#### Outcome:

1. Streamlined recruitment processes for research positions, including appointment of permanent positions and development of research specific roles and position descriptions aligned with professional qualifications.

### Objective 3: Provide formal opportunities for professional development and for staff to come together to share experiences and for capability building opportunities.

#### Actions:

- 1. Establish a formal research mentoring program with opportunities for crossdisciplinary mentorship.
- 2. Establish a Research Community of Practice.
- 3. Strengthen research groups to wrap around early career and mid-career researchers.
- 4. Establish regular research events such as research grand rounds.

#### Outcomes:

- 1. Mentoring program available for early and mid-career researchers (up to 10-years postdoc).
- 2. All researchers, but particularly early and mid-career researchers, feel supported in their research career.
- 3. Regular opportunities to network and build professional connections are available and accessible.

### Objective 4: Celebrate and promote research success including improving the transparency of what research is happening and by whom.

Actions:

- 1. Establish a regular research communication highlighting achievements and opportunities, including funding opportunities.
- 2. Routinely report major research achievements in 'In the Know'.
- 3. Establish an annual event to celebrate research achievements.

- 1. Research is celebrated within NBMLHD and researchers feel supported and valued.
- 2. Research achievements regularly reported in 'In the Know'.
- 3. Annual research event held.

Strategic Aim 3: Invest in research infrastructure and build funding sources that are sustainable and equitable.

### **Objective 1: Centralise management of research finance and clinical trials infrastructure across NBMLHD.**

Actions:

- 1. Undertake financial analysis of current activity and derive an optimal model to ensure financial viability and efficiency.
- 2. Establish a Clinical Trials Unit and implement the NSW Health Clinical Trials Management System (CTMS).
- 3. Utilise CTMS to increase efficiencies in clinical trial finance management and processes.

Outcomes:

- 1. Accreditation with the National Clinical Trials Governance Framework.
- 2. Increased number of clinical trials and clinical trial capacity.
- 3. Centralised management of research finance and clinical trial infrastructure.

#### Objective 2: Facilitate access to technologies that will enable more efficient and high-quality approaches to increase capacity and be more agile in conducting investigator-initiated research and quality improvement and assurance projects.

#### Actions:

- 1. Identify and address gaps in available research software (i.e., databases etc.) to engage more researchers in high quality investigator-initiated research.
- 2. Identify opportunities to make routinely collected clinical and administrative data more accessible and usable for research.

- 1. Improved research culture, capabilities and knowledge sharing.
- 2. Researchers have access to a local platform to conduct research.
- 3. Researchers have access to routinely collected data with which to conduct research.

### Objective 3: Facilitate health specialities to build capacity for external clinical trials.

Actions:

- 1. Identify gaps in treatment provision that could be filled with clinical trials.
- 2. Identify requirements needed to start up clinical trials in areas previously not participating.

#### Outcome:

1. Increased number of areas participating in clinical trials.

### Objective 4: Develop a business case for the establishment of a dedicated NBMLHD research space/institute.<sup>1</sup>

Actions:

- 1. Identify potential locations for a dedicated research space.
- 2. Work with NBMLHD Finance to identify cost implications of options.
- 3. Develop case for change, including the aims, structure and functions of a dedicated research space.
- 4. Identify preferred option and develop a Business Case.

#### Outcomes:

1. Business case finalised and supported by NBMLHD Executive, Chief Executive, The Board and the NSW Ministry of Health.

<sup>&</sup>lt;sup>1</sup> Securing funding for the establishment of a dedicated space/institute will be one of the focus areas of the next iteration of this plan.

Strategic Aim 4: Build collaborations and partnerships with universities, education partners, research institutes, industry and the community that are productive, strategic and transparent.

### Objective 1: Ensure current and future partnerships and collaborations are aligned to the NBMLHD's strategic directions and priorities.

Actions:

- 1. Conduct an audit of all partnerships and affiliations across NBMLHD and make this information readily available internally.
- 2. Identify low value, high resource use collaborations and relationships and make decisions about investment/disinvestment in these partnerships.
- 3. Develop a framework that guides decisions around partnerships and collaborations.

#### Outcome:

1. All partnerships and collaborations align to the NBMLHD strategic directions and priorities.

#### **Objective 2: Increase networking and collaboration opportunities externally.**

Action:

- 1. Increase the number of collaborations with:
  - Academic partners including Western Sydney University, University of Sydney, The University of Notre Dame, UNSW.
  - Industry partners including The Quarter and Celestino.
  - Other LHD's including South West and Western Sydney LHD's through the Greater Western Sydney Health Partnership.

#### Outcome:

1. Increased formally agreed University, industry and other LHD partnerships.

### Objective 3: Increase the strategic impact of collaborations and partnerships.

#### Actions:

- 1. Identify partners with strategic research aims and priorities that align to NBMLHD.
- 2. Explore new opportunities to strengthen the impact of research programs with current partners.

#### Outcome:

1. Increased number of Higher Degree by Research students, focussed student placements, collaborative clinical trials, other research projects and awarded research grant funding.

### Strategic Aim 5: Provide effective, efficient and transparent research governance

### **Objective 1: Develop and implement a formal Research Governance Framework (RGF)**

Actions:

- 1. Transform the Research Office into a Research Development and Governance Unit that will take overarching responsibility for the development and implementation of the RGF and focus more on research project pre-submission rather than post-submission.
- 2. Establish a Research Policy and suite of related Standard Operating Procedures that comprise a Quality Management System (QMS).
- 3. Establish a pathway for managing research misconduct.
- 4. Establish a virtual research resource centre to support all aspects of research operations and management.

- 1. Accreditation with the National Clinical Trials Governance Framework (Action 1.3, 1.16).
- 2. Improved consistency and efficiency in operational processes, i.e. meeting KPIs.
- 3. NBMLHD will be a centre of excellence and agile leader in research innovation in NSW.

### Objective 2: Establish research units with formally appointed clinical research leads and an understanding of existing and additional funding required to support core activities developed.

#### Actions:

- 1. Establish and appoint members to a Research Advisory Council.
- 2. Develop research plans for each clinical service that are aligned to this strategy and the broader vision of NBMLHD.

- 1. Improved oversight of unit and department level research.
- 2. Increased unit and department level research output, including an increased focus on strategically relevant research.
- 3. Increased compliance of research trials with research governance standards.
- 4. Decreased number of identified breaches of standards.
- 5. Funding requirements identified to support core activities in research units, including funding of clinical research leads.

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### Appendices

#### Appendix 1: Abbreviations

AHMRC	Aboriginal Health and Medical Research Council
CGU	Clinical Governance Unit
CTUM	Clinical Trials Unit Manager
CTMS	Clinical Trials Management System
LGA	Local Government Area
LHD	Local Health District
NBMLHD	Nepean Blue Mountains Local Health District, 'The District'
OHMR	Office of Health and Medical Research
WPC	Workforce, People and Culture

#### Appendix 2: Consultation summary

A series of current state and strategy development consultations were conducted to inform the development of this Research Strategy in the first half of 2021. These consultations were a mixture of face-to-face and virtual and individual and group consultation sessions. An anonymous survey was also circulated for those who were unable to attend a consultation session. In total, 71 people attended at least one consultation session and a further 30 people completed the online survey. The main areas addressed through the consultations were:

- What does NBMLHD do well in research?
- How can we improve in the following areas:
  - o Administration of research
  - Research infrastructure
  - Funding
  - o Staffing
  - Research partnerships
  - What are the barriers to research
- How can consumers be empowered to be involved in research?

At a high level, the consultations indicated that there is:

- Strong interest and enthusiasm for research in NBMLHD and many opportunities
- A need for both a research institute and a clinical trials unit
- An opportunity to improve the research culture in NBMLHD
- A need to improve the visibility of research and researchers in NBMLHD
- An opportunity to improve the support services around research
- An opportunity to facilitate knowledge sharing, collaboration and capability building
- A need to improve the funding of research, or awareness of funding opportunities, in NBMLHD.

The full consultation report can be made available upon request.

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