HealthPathways

Research & Evaluation Hub – Annual Report 2020

Research & Evaluation Hub Annual Report 2020

Introduction

This report summarises the activity of the Research and Evaluation (R&E) Hub during its first year of operation, between the 25th November 2019 and 25th November 2020.

The R&E Hub was established to encourage, assist, facilitate, and seek out research opportunities in R&E in the HealthPathways (HP) platform (hospital and community). The first phase (first 6 months) of the R&E Hub's activity was devoted to building the foundation of the R&R hub and establishing the R&E Hubs presence in the community. This included:

- Drafting the R&E Hub Terms of Reference & Implementation Plans
- Reviewing publications & previous R&E material
- Commissioning the:
  - R&E Website
  - publication database
- Initial community outreach (relationship building).

The second phase of the R&E Hub built on the first phase and expanded the relationship building to researchers and the wider health community.

The Covid-19 pandemic had a large impact on the R&E Hub's planned relationship building activities in 2020. During the pandemic communication was limited and other activities postponed allowing the regions to focus on Covid-19. The initial relationship plan was anchored around the May 2020 HealthPathways Conference, which would have introduced the R&E Hub and manager to the HealthPathways community, and the evaluation framework was going to feature as a workshop component.

The R&E relationship building activities were deferred until Covid-19 subsided and the next series of regional forums began, which started in late June. After the regional forums, the R&E manager proactively followed up with each region to arrange and conduct individual meetings. These follow up meetings have been used to establish a one-to-one relationship, inform the Evaluation Framework design, and develop the People & Projects database of planned R&E work.

It was important to understand the HP community R&E needs and limitations before approaching the wider health system. In October, the second phase of the R&E Hub began with R&E manager expanded the relationship building to include the wider health community. Initially sending emails to previous HealthPathways researchers, then approaching research institutes.

Rather than start with a multitude of research institutes the R&E Hub manager started at the top, and focussed on Australia, which has the most opportunities for R&E growth. The Australian Health Research Alliance (AHRA) is a peak researcher body representing 10 organisations that in turn represent 95% of Australia's academic and research teams, and 78% of its acute health services. The R&E Hub manager arranged a meeting with the AHRA chairman to discuss HealthPathways. A positive outcome from this meeting was an invitation to present at the next board meeting on the 30th November. This meeting would have representatives from health translation centres across Australia and has the potential to form substantial strategic partnerships. The R&E hub manger met with the strategic group and passed the presentation opportunity to Andy Froggatt – Director of Strategic Partnerships Global.

Research & Evaluation Hub Site Usage

Data extracted from 1st June to 30th November – using a normalised view to exclude internal usage, the normalised view was created on the 26th May 2020. Since the R&E Hub is part of the HP community site a filter is used to limits data to R&E Hub pages. However, this might also reduce the sessions, as a session begins when a user interacts with the site (the HP community).

A spike in PV activity was observed in July which coincided with the Regional Forums when the R&E Hub manager presented and introduced the R&E Hub (see Figure 1).

Figure 1 – Monthly Page View & Sessions.

	Page Title	Page Views	Page Views ▼	Avg. Time on Page
1.	Research and Evaluation Hub	463	30.38%	00:00:31
2.	Publication Database	243	15.94%	00:02:08
3.	Key Publications	198	12.99%	00:01:10
4.	Case Studies	181	11.88%	00:01:09
5.	Evaluation	149	9.78%	00:01:36
6.	Research	67	4.4%	00:00:24
7.	Evaluation Examples	63	4.13%	00:03:31
8.	Evaluation Framework Project	49	3.22%	00:00:42
9.	HealthPathways Community > Resear...	29	1.9%	00:00:16
10.	Access to HealthPathways Data or Sites	25	1.64%	00:00:20

1 - 16 / 16 < >

Table 1 – Top 10 pages

Table 1 displays the Top 10 pages that have been viewed on the Research Hub. The home page (landing page) had 463-page views (PVs) and the Publication Database 243 PVs. The majority of activity was from Australia, followed by New Zealand, and then the United Kingdom. Activity from non-HealthPathways regions was also observed, e.g., USA 51 PVs.

The Publication Database PVs are not a true indication of PV activity, it is likely to be substantial larger. Unfortunately, Google Analytics only records the first entry and not any of the subsequent activity and it is not possible to identify the individual pages that have in been viewed in the Publication Database. This functionality has been deemed of low importance and may be introduced if spare IT development time becomes available.

Relationship Building

After the June Regional Forums the R&E Hub manager had 37 one-to-one meetings with regions in the HealthPathways community. These meetings discussed the R&E Hub, their R&E approach, and any R&E projects (planned or in-progress). The outcomes from these meetings also informed the development of the Evaluation Framework.

Summary of HealthPathways community discussions:

R&E Hub
Publication database has been very helpful. Generally positive feedback about the R&E Hub's purpose and goals, with some regions wishing it been done earlier.

Simple R&E advice – Complex and large R&E projects will most likely be commissioned and conducted by an external agency or with internal expertise. Therefore, the Evaluation Framework, resources and advice needs to be kept simple and aimed at programme managers with limited resources.

Data access & variability can be an obstacle due to different systems across multiple organisations. This is a more of an issue when HP regions have multiple organisations to contend with (e.g., Auckland and Murray):
- o Access – privacy and sharing
- o Variability – different methods & systems (patient coding)
- o Veracity – across different PHNs LHDs DHBs

This can be hard to deal with especially with limited R&E resources. To mitigate with this some regions avoid using this data and focus their R&E efforts towards qualitative methods with their primary audience, GPs.

Dashboards which are optimised to support executive engagement and save programme managers time would be beneficial. This would also support the implementation and regular reporting aspects of the Evaluation Framework.

Timeline – as regions progress the "value" of HP is often accepted and there is less demand to conduct program evaluations that prove value. More "mature" regions appear to be interested in case studies that focus on smaller service redesign/clinical audits. However, new executives may still require proof of value.

In additional to ad hoc support and data requests the R&E Hub has also provided feedback to the HP community for future evaluation projects:

- Nepean Blue Mountains – attending evaluation working group meetings and provided feedback
- Mid and North Coast – provided feedback to their evaluation plan
- ACT and SNSW – provided feedback to their evaluation plan
- Tasmania – provided feedback to their evaluation plan
- Southern – provided material and feedback to aid their evaluation plan

Issues & barriers

- **Google Analytics** is an important data set for evaluations; however, the R&E hub manager only provides limited assistance to regions as it is considered out of scope.

- **Covid-19** has delayed the R&E Hub relationship building. However, it has also been the catalyst for increased pathway sharing and adoption of the lead region model. Long-term the lead region model has potentially greater research value and may increase the research interest from larger entities, e.g., translation research centres and state-wide research initiatives.
- **Active research & evaluation** is out of scope for the R&E Hub. The R&E Hub is passive in its approach to R&E of HealthPathways, relying on other entities to drive research. A more active role may be required to achieve outputs.

Year 2

The second year will focus on expanding external research relationships while continuing to build the HealthPathways community research and evaluation capability. Focusing on:

Research
- Pathway sharing (lead region model) has good research potential and needs to be promoted to research institutes.
- Promoting HealthPathways usage in research
  - Australian translation centres
  - Identified researchers

Relationships
- Relationship building – wider HealthPathways community - Projects & People database

Support
- Evaluation Framework – Implementation & adoption
- Conference/webinar presentations to raise HealthPathways research profile
- Focus R&E Hub support on regions that are need more support, planning & conducting R&E
- Creating a dashboard (TBC). This will also include updating the:
  - implementation framework
  - online help

Conclusion

The Research and Evaluation Hub has achieved the initial goals set for Phase 1, which focussed on the creation, and launching of the R&E Hub site and publication database. Relationship building was heavily disrupted by Covid-19 and moved into Phase 2. The relationship building only began in late June. Phase 2 is ongoing as it is predominately concerned with establishing relationships with the wider health community and researchers.

Increasing research output that identifies the value of HealthPathways is a long-term process, particularly as the R&E Hub has adopted a passive approach and is reliant on other entities producing the work. Generally, the HealthPathways community has little spare capacity to engage in research, therefore collaboration with research institutes is necessary.

The R&E Hub has been beneficial and supported R&E efforts in the HealthPathways community. However, some aspects have not advanced as much as initially planned, due to Covid-19 delaying the relationship building. The R&E Hub manger intends to focus his efforts in 2021 on this, the AHRA presentation is an exceptional start towards this goal.

Appendix:

Timeline

Major activities & events:

- 25th November 2019 – Start of role
- 6th December 2019 – Initial Steering Group Meeting (with limited attendance)
- 5th February 2020 – 1st Steering Group Meeting
- **20th March 2020 – R&E Hub website live**
- March April May – **Covid-19**
  - Conference cancelled
  - Regional Forums pivoted to Covid-19 response
  - reduced communications to regions
- 22nd April – HealthPathways community news item (first R&E Hub communication to region)
- 10th June 2020 – 2nd Steering Group Meeting
- 24th June – 1st Regional Forum
  - **Start of HP community relationship building**
- 20th August – last Regional Forum
- 16th September 2020 – 3rd Steering Group Meeting
- 2nd October – **Start of Phase 2 wider community relationship building**
- 25th November 2020 – 1st Annual Report
- 30th November – ARHA presentation
- 2nd December 2020 – 4th Steering Group Meeting

Activities – completed

- Initial R&E Hub documentation – TOR and strategic plan (Phase 1 & 2)
- R&E Hub – website
- R&E Hub – publications database
- Progress vs Plan Report
- R&E Hub usage & feedback
- Evaluation Framework – Draft
- Implementation Guide – Draft
- Ad hoc support – to other CSMs and other SNZ teams (e.g., Leading Lights)

Metrics

R&E Hub (1 Jun – 30 November 2020)	
Page views	**1,524**
Sessions	**273**
Users	**567**
Presentations	
Regional Forums	**7**
Meetings	
Initial region meetings (one-to-one)	**37**
Steering Group	**5**
Meetings logged (Hub Spot)	**45**
Requests (Research)	
Data extraction (via tech team)	**2**
Data extraction	**1**
Site Access	**1**

Business as Usual (BAU)

BAU consists of providing support as required on an ad hoc basis and regular communications with the HealthPathways community via the regional forums.

1. Support HealthPathways with R&E – as required (dependant on their R&E activity)
   - maintain and strengthen relationships
   - provide evaluation/research feedback and help/advice as required
   - promote collaborations
2. Maintain R&E databases & website (contacts, publications, funding, projects)
2. Identify and promote new opportunities (R&E projects, collaborations, and funding opportunities)
3. Liaise with external research and triage research requests
4. Regularly present at the regional forums
   - promote R&E
   - highlight any items of interest e.g., funding, publications, or R&E opportunities
5. Relationship building – growing the People & Projects database
   - usual suspects – who may be interested in research activities (names and interests via pers. comms)
   - active researchers – who are publishing articles on HealthPathways
   - local universities – work with each region to identify local researchers/opportunities e.g., their local university
   - national & state bodies (research institutes)
6. Support CSMs and other teams (e.g., Leading Lights) as required

Key Performance Indicators (KPIs) – Strategic Planning Document

Short Term (first 6 months) – Establish the Hub

Domain/Category	Task	Measurable output	
Steering Group	Quarterly Meetings	• Agendas • Meeting notes	✓ ✓
	Terms of Reference (ToR)	• ToR document	✓
	Initial Strategic Plan (6 months)	• Short term	✓
		• Long term	✓
	R&E Hub Data Policy	• Data quality policy	✓
		• Data access & sharing policy	✓
Website (co-located on HP community site)	Website pages	Live pages: • Overview • Contact information	✓
	Publication database	Database functionality: • Searchable • Tags / key words	✓

	Value propositions linked to research	• Live page	Andy & Ian
	Guidance & Resources	Live pages: • Evaluation guidelines • Research guidelines	✓
	Funding opportunities database	• List of resources (private)	✓ (public)
Relationship Building	Community / Regions	• Agendas • Meeting notes • Hubspot / Asana	✓ ✓ ✓
	Key institutions & partnerships	• Agendas • Meeting notes • Hubspot / Asana	✓ ✓ ✓
	Communications	• HP platform members • Regional Forums (Mar/Apr)	✓ ✓
2020 HP Conference	Presentation & soliciting hub feedback	• Presentation • Feedback received	✗ ✗

HealthPathways Outputs

Tables 1 & 2 tabulate the HealthPathways (focused) outputs that are hosted on the R&E Hub publication database. These outputs are directly focussed on HealthPathways. There are more publications that mention and include HealthPathways as a component, but these have not been included in the following tables.

Table 1.

Research & Evaluation Outputs by Type
(HealthPathways Focused)

	Clinical Study		Evaluation		Conference		Total (year)
	Journal	Report	Journal	Report	Presentation	Poster	
2020			2	1			**3**
2019	2		1	4			**7**
Total (since 2019)	**2**		**3**	**5**			**10**

Table 2.

List of 2020 Research Outputs
(HealthPathways Focused)

Title	Type	Main Methodology	Resource	Journal/Conference	1st Author
Evaluation of HealthPathways:	Evaluation	Survey	Journal	Australian Health Review	Goddard-Nash, Arran
HealthPathways COVID-19 Content	Evaluation	Interviews	Report		HealthPathways
HealthPathways: a detailed analysis of utilisation trends in the northern Sydney region	Evaluation	Google Analytics	Journal	Australian Journal of Primary Health	Lind, Kimberly