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Translation SA
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Annual Review
2019

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About Health Translation SA

Health Translation SA (HTSA) is a National Health and Medical Research Foundation (NHMRC) accredited Academic Health Research Translation Centre (AHRTC) that aims to address the needs of the entire South Australian population. We provide a focal point for a state-wide collaborative, cross-sectoral approach to research and the translation of evidence into patient care.

HTSA's unique partnership unites nine academic, research and health care agencies within SA, encompasses the full breadth of health service delivery across the state and represents organisations who can contribute to, and directly influence, the activities of HTSA.

Our Partner agencies are the SA Department for Health and Wellbeing (the Department) and its 10 Local Health Networks (LHN's); the State's two Primary Health Networks (PHNs) – Adelaide and Country SA; South Australian Health & Medical Research Institute (SAHMRI); the three South Australian universities – Flinders University, Adelaide University and the

University of South Australia; the peak body representing the Aboriginal Community Controlled sector in SA – Aboriginal Health Council of SA (AHCSA); and the State's peak health consumer agency - Health Consumers Alliance.

Extensive consultation across Partners and other stakeholders has been undertaken to ensure HTSA priorities are relevant to the needs of SA.

Importantly the Department is engaged at the highest level within the governance structure of HTSA which guarantees ongoing overview of the state's current health service issues, priorities and outcomes. SAHMRI, which accommodates the HTSA office, and acts as the administering organisation, also provides multiple in-kind contributions to support the high functioning of the centre. All Partners make annual financial contributions to support the operations of HTSA.

Acknowledgement

HTSA respectfully acknowledges Aboriginal people as the traditional owners and custodians of the land and waterways on which we meet and where our facilities are located. We acknowledge the deep feelings of attachment and relationship of Aboriginal people to their Country. We pay respect to the Elders past, present and future, community members and culture and continue to uphold their ongoing relationship to the land and waterways.

The logo motif is derived from an original art piece painted by Professor Alex Brown, an Aboriginal man from the New South Wales south coast.

Alex is a Deputy Director at the South Australian Health and Medical Research Institute (SAHMRI), SAHMRI Aboriginal Health Theme Leader, and a member of HTSA Board of Partners.

The artwork represents "collaboration" and highlights the importance of connecting the efforts of individuals, organisations and communities if we are to realise the potential of the partnership approach that underpins HTSA. It acknowledges that a collaborative effort with a common vision is required to tackle the issues that currently undermine the health of South Australians.

We are very excited to be leading the development of an **Indigenous Research Capacity Building Network.** This initiative aims to redress the imbalance in the development of Indigenous researchers through a range of multi-disciplinary, translational research capacity building activities that will build and strengthen expertise, skills and knowledge across Australia.

Message from the Executive Director

This is my fourth year serving as Honorary Executive Director and Chair of the Board of Health Translation SA (HTSA), and I am very proud of its achievements since accreditation by the National Health and Medical Research Council (NHMRC) in 2015.

Our role at HTSA is to accelerate the creation and translation of new evidence that is responsive to health service and community priorities. Through our partnership, that unites nine academic, research and healthcare agencies, we enable meaningful collaboration between universities, health services, education providers and the community to deliver research and health care benefits for the community. We seek improved patient outcomes, tangible research outputs based around impact, health system improvements and collaborations with industry.

Collaboration is the underlying principle for everything that is undertaken at HTSA and the key to success is leadership and incentives to support and drive collaboration. This is not easy and requires a culture change from one of isolated investigator-driven, competitive, siloed and research metric-driven research without translation to one of open collaboration, the sharing of expertise, clinician led initiatives with consumer involvement and outcomes based on health impact.

All Translation Centres in Australia and across the world are thinking about the metrics they use to assess and demonstrate impact, leadership, collaboration, consumer and community involvement and workforce development. This is complicated by the very different measures of success used by the academic and healthcare sectors. While academic organisations have traditionally used metrics of grants, publications and citations, healthcare focuses on service outcomes (length of stay, occasions of service and patient outcomes).

In response HTSA, working closely with our Board and the many researchers involved in our work program, is developing metrics that reflect both impact and healthcare improvement at the local level as well as the larger system-wide transformative activity that fulfils the traditional evidence measures required by academia.

HTSA continues to play a very active role within the Australian Health Research Alliance (AHRA) which has grown to include 9 NHMRC accredited Translation Centres (6 Academic Health Research Translation Centres (HRTCs) and 3 Centres for Innovation in Regional Health (CIRHs)) across Australia.

From July 2018 to June 2019 I held the position of AHRA Chair, supported by HTSA CEO Wendy Keech as Chair of the AHRA Operations Group. During this time, we led the consolidation of the AHRA Council and the establishment of an across-alliance operations group.

This enabled AHRA to speak with a single voice to government, including the Commonwealth, the Medical Research Future Fund (MRFF) and the NHMRC. We successfully advocated for the formal extension of the MRFF grant funding from one year to several and for the positioning of a 10-year funding commitment.

I would like to thank our CEO, Ms Wendy Keech for her leadership in progressing HTSA's work agenda. Building relationships and creating meaningful collaborations between research, policy, and practice requires a certain set of skills and capabilities, which she has clearly demonstrated and is evidenced by the successful outcomes detailed in this report.

I also thank the HTSA Board members for their expertise and commitment to changing the way we do translational research in SA. HTSA would not exist without the support of our Partners and their commitment to our mission to deliver practical benefits from medical research and medical innovation to as many Australians as possible.

This is my final year as Chair of the Board of Partners and I am pleased to hand over the reins to our new independent Chair in 2020, knowing that HTSA is well positioned within the SA research, academic and health service delivery sectors to provide the leadership, coordination and collaboration required to progress translational research within the state.

Professor Steve Wesselingh
Honorary Executive Director and Chair of the Board
Health Translation SA

Message from the Chief Executive Officer

This is my second year as CEO and my focus has been on building relationships and providing leadership to support and drive collaboration across all sectors and disciplines to shift the paradigm from research for research's sake to research that impacts people's lives.

Building on our governance review in 2018, which saw the creation of a new Board of Partners representing the nine key academic, research and healthcare agencies in South Australia, we set to work delivering on our three programs of work – Projects, People and Platforms.

Securing financial contributions from our Partners in 2018 enabled us to employ several new staff bringing our workforce total to 4.5 FTE. Although still a small team, their skills, combined with expertise of our Partners, has allowed us to advance our mission to work together for rapid, state-wide system level change.

Collaboration is the underlying principle for everything we do at HTSA. What we have discovered is that it is often very difficult to achieve meaningful collaboration in an environment where partners are competing for funding, status and students and where even within partner organisations, there are competing departments striving for recognition, control or power. The key is leadership and incentives to support and drive collaboration and developing new metrics that measure the value of this collaboration.

The Medical Research Future Fund has also contributed to the growth of HTSA with many research groups in SA, including those represented by our Partners, benefitting from Rapid Applied Research Translation Grant funding. In 2019 we were pleased to be awarded $6 million funding for a range of projects across two Medical Research Future Fund (MRFF) Rapid Applied Research Translation (RART) rounds – Round 2 for 2019/2020, Round 3 for 2019/2020/2021.

In addition to our RART projects, HTSA supports several Flagship Programs, many of which have been under the HTSA umbrella since accreditation in 2015. These Flagships are state-based and collaborative programs that bring together teams (researchers, clinicians, policy makers, consumers) to address significant areas of need.

In April 2019 we were very pleased to welcome a new Flagship Program, the *Health in All Policies WHO Collaborating Centre* (HiAP WHOCC). The Centre is an ideal fit with HTSA as one of its key aims is to strengthen research to policy translation on the determinants of health, to increase evidence-based strategies.

All these programs and projects featured in this report, are extremely important to HTSA as they demonstrate how translational research can address key health challenges, have the greatest impact and accelerate translation into education, innovation and evidence-based practice in clinical and health care.

While supporting projects is key activity of HTSA we are also working hard on overcoming barriers and enhancing the pathway to state-wide research translation.

Important progress has been made to improve ethics and governance processes to enable research projects, to enhance infrastructure to support clinical trials, commercialisation and consumer engagement across the state and to improve data access and data analytic capacity to better inform a learning health system.

HTSA is leading efforts to harness cross-sector expertise to build the capabilities of the research translation workforce. This workforce includes researchers, clinicians, policy makers and other staff involved in program implementation. Working closely with our Research Translation Capacity Building Steering Committee we have developed a strategic plan for capacity building in SA, focussing on training and resource development, networking and mentorship and career pathway development.

HTSA has also played a key role in AHRA, participating in several National System Level Initiatives (NSLIs), including leading the Indigenous Researcher and Capacity Building Initiative. We are also involved in several Special Interest Groups and networks.

Communication was a key focus in 2019 with a new dedicated staff member employed 2 days a week and a new website launched in March 2019. A program of monthly E-newsletters (EDM) was established.

From the start of 2019 we commenced developing our Strategy. During this time, I met with all our Partners and we consulted with relevant stakeholders and the community though our annual Stakeholder and Community Forums. This Strategy was endorsed in

December 2019 and will guide our work agenda until December 2020. Importantly with a new Strategy in place we are prioritising the development of an Impact Framework to assess and demonstrate impact, leadership, collaboration, consumer and community involvement and workforce development.

It is worth noting that HTSA's original accreditation by the NHMRC, which was for 5 years until March 2020, has been extended until March 2022.

Reflecting on the work described in this Annual Review, I am very excited by the significant advances HTSA has made in 2019. The number of relationships that have been built and the degree of collaboration that has occurred makes me feel very positive for the future.

Of course, there is always more work to do including developing new metrics to measure success, including collaboration, developing strategies for increasing the engagement with our health services, rural and remote services, embedding research into health policy and practice, improving strategies for partnering with the community, and building the research translation workforce.

None of our success would be possible without the support of our Board of Partners, many of whom have taken on a variety of roles including advisor, committee chair, sounding board, consultant, grant reviewer, advocate, spokesperson, editor and many more.

I would also like to thank the Honorary Director and Board of Partners Chair, Steve Wesselingh, for his valuable guidance and support and our dedicated staff team who make it all happen.

Ms Wendy Keech
CEO Health Translation SA

AHRA Council 2019

Board of Partners

(Chair) SAHMRI	SAHMRI	University of Adelaide	University of South Australia	Adelaide Primary Health Network
Professor Steve Wesselingh	**Professor Alex Brown**	**Professor Andrew Zannettino**	**Professor Susan Hillier**	**Deb Lee**

Flinders University (shared position)		SA Department of Health and Wellbeing		Health Consumers Alliance of SA
Professor Jonathan Craig	**Professor Alison Kitson**	**Chris McGowan**	**Professor Paddy Phillips**	**Julia Overton**

Aboriginal Health Council of SA		Country SA Primary Health Network
Shane Mohor (resigned July 2019)	**Nahtanha Davey** (commenced October 2019)	**Kim Hosking**

HTSA Staff

CEO	Senior Project Officer	Senior Project Officer Capacity Building	Senior Project Officer	Senior Project Officer Consumer Engagement
Wendy Keech 1 FTE	**Nicole Sargent** 1 FTE	**Ecushla Linedale** 1 FTE (Commenced Feb 2019)	**Jenni Carr** 0.6 FTE	**Alex Michelmore** 0.5 FTE
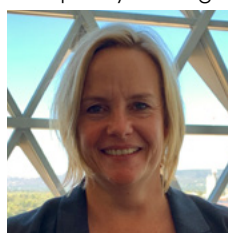
Marketing and Communications Officer	Part-time Consultant
Nicole Duffy 0.4 FTE (Commenced Feb 2019)	**Jenny Richter**
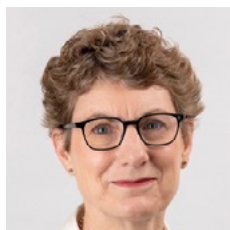
Action Area One

Our aim is to ensure research is embedded in the health system to deliver impact and we do this by mobilising leadership and collaboration to strengthen research translation. Our activities to deliver Action Area One include -

- Embedding research in health systems;
- Orienting research around impact
- Measuring and communicating impact
- Supporting increased funding opportunities
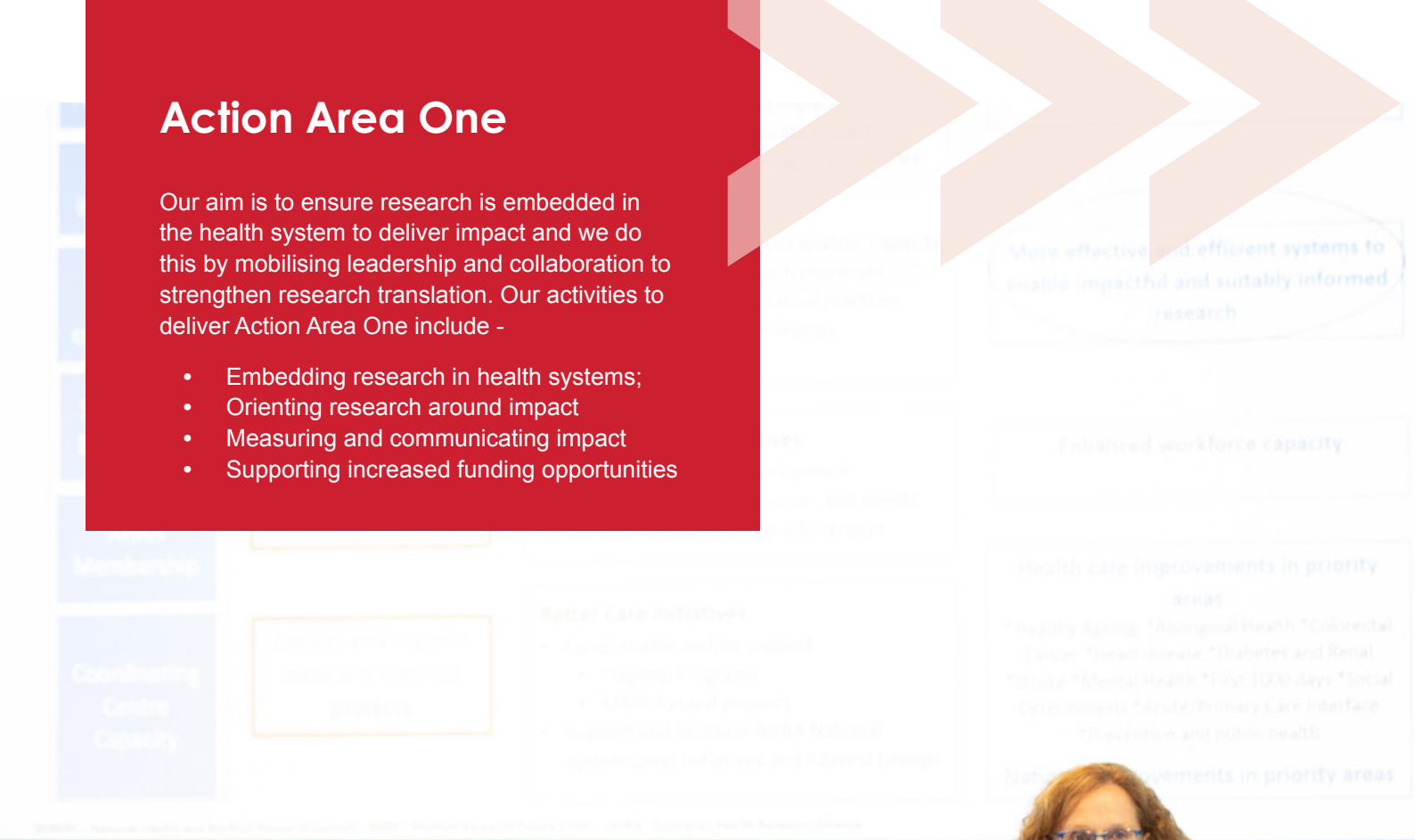
Collaboration is the underlying principle for everything that is undertaken at HTSA and must be the principle that drives research endeavours. It is often very difficult to achieve meaningful collaboration in an environment where partners are competing for funding, status and students and where even within partner organisations, there are competing departments striving for recognition, control or power.

The key is leadership and incentives to support and drive collaboration. Traditional metrics must be complemented by new metrics that measure the value of collaboration.

HTSA is well positioned with the SA research, academic and health service delivery sectors to provide the leadership, coordination and collaboration required to progress impactful research within the state.

Board of Partners

HTSA is led by a representative Board of Partners. Chaired by our Honorary Director, Professor Steve Wesselingh, the Board met five times in 2019.

The Board also convenes time-limited working groups to undertake specific tasks as needed.

These groups may be led by a Board member or an appointee of the Board and can include other members with relevant expertise invited from the broader community.

Stakeholder Forum

The Forum is a key feature of HTSA's governance and its purpose is to the inform, consult and involve key stakeholders, who are not partners, in the development of priorities and the operational activities. Stakeholders are defined as any individual, organisation, sector or community that has a 'stake' in enhancing the rate of translation of research into healthcare. Reporting to the Board of Partners the findings of the Forum are taken into consideration when setting the health research translation agenda in SA.

Forty-five stakeholders attended the annual Stakeholder Forum held in November 2019. Chaired by Lincoln Size, CEO of Cancer Council SA, the Forum included a presentation from the HTSA CEO, Wendy Keech, entitled – *'Not just a Letter of Support'*. The focus of the presentation was to highlight the research funding opportunities available through the MRFF and emphasise that the focus of the MRFF is partnerships, collaboration, leverage and co-investment, together with burden of disease and unmet need. She highlighted the importance of stakeholder involvement to the success of MRFF funded projects.

In the interactive session that followed Forum members explored how HTSA can support stakeholders to be more engaged in their work and ensure that the areas of research most important to stakeholders are prioritised and progressed in SA.

A key outcome of the session was to strengthen the network opportunities offered by the Forum and use this as a link between researchers and stakeholders, for information sharing, skill development opportunities and more.
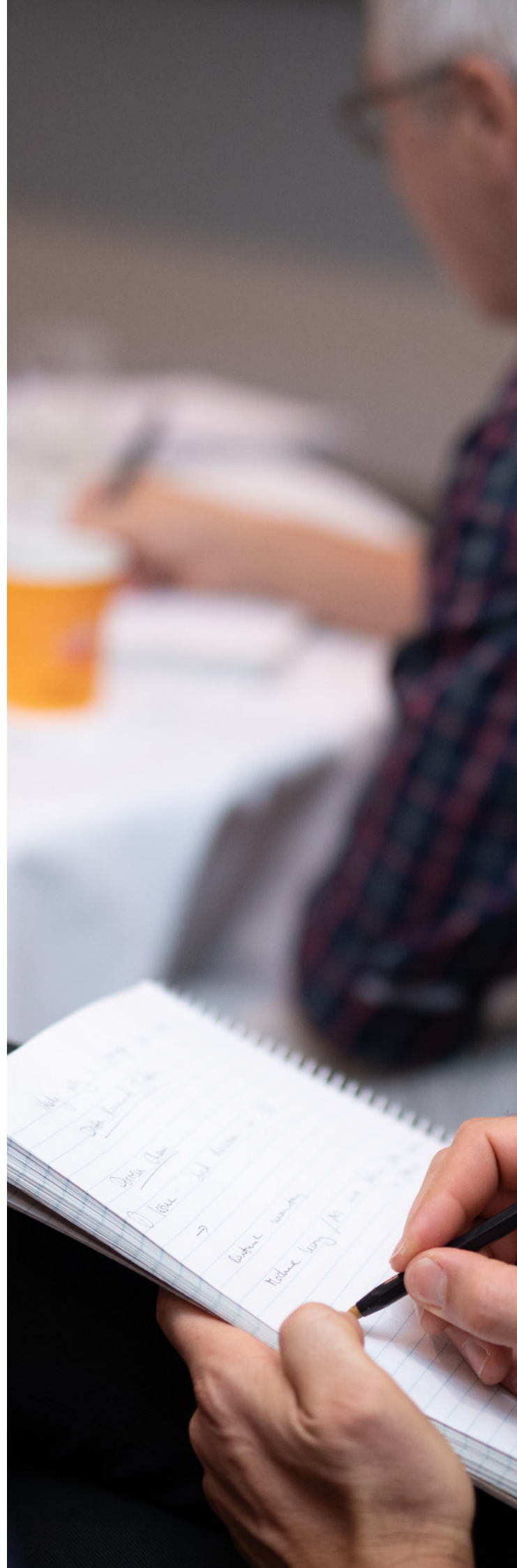
The Importance of the Medical Research Future Fund

When HTSA was accredited by the NHMRC in 2015 funding was not included and Academic Health Research Translation Centres (AHRTCs) were dependant on partner contributions to operate.

In late 2017/early 2018 the MRFF commenced a process to allocate $2 million to each AHTRC to deliver health and medical research translation projects that had impact in a short period of time.

Initially in Round 1 funding was available to the first four AHRTCs (HTSA, Monash Partners, Melbourne Academic Health Centre and Sydney Health Partners). Subsequently Rounds 2 and 3 were made available to the new AHRTCS and CIRHS accredited in 2017 (SPHERE, Brisbane Diamantina Health Partners, Western Australian Health Translation Network (WAHTN) and 2 CIRHs (Central Australia Health Translation Network, NSW Regional Health Partners).

This MRFF funding program is referred to as the MRFF Rapid Applied Research Translation (RART) Program and it has significantly changed the landscape for HTSA.

To date HTSA has coordinated the allocation of $8 million to fund a range of projects across 3 RART funding rounds (RART 1 - 2018, RART 2 - 2019/2020 RART 3 - July 2019/June 2021).

> The MRFF is a $20 billion long-term investment supporting Australian Health and Medical Research and innovation to improve lives, build the economy and contribute to health system sustainability.

It must be noted that targeted translation projects have largely been health service-based projects and they were required to deliver "impact" in a 12 month period. It has now been acknowledged that it is difficult to deliver projects with a level of academic rigour, at scale and include meaningful stakeholder and consumer engagement within a 12-month window.

In response, MRFF RART funding has been extended to 2-year timeframes.

HTSA coordinates the selection, awarding, reporting and ongoing administration of the MRFF program of work.

These project were supported by the Australian Government's Medical Research Future Fund (MRFF) as part of the Rapid Applied Research Translation program.

HTSA Impact Framework

All Translation Centres in Australia and the world are thinking about what metrics are best used to assess and demonstrate impact, leadership, collaboration, consumer and community involvement and workforce development.

Choosing measures of success is complicated by the conflicting metrics that are used by the academic and healthcare sectors.

While academic organisations tend to prioritise the traditional metrics of grant funding, publications and citations, healthcare focuses on service outcomes such as length of hospital stay, occasions of service and patient outcomes.

HTSA needs to develop metrics that reflect both impact and healthcare improvement at the local level, as well as the larger system-wide transformational activities that meet the traditional evidence measures required by academia.

HTSA is developing an impact framework to ensure we can map and measure our progress towards our goal of accelerating the translation of research along the impact pathway to improve health outcomes for South Australia. In September 2019 our 'Better Care' Flagship and MRFF funded project teams took part in a workshop to provide advice and input on success and impact measures to assist us with developing this Framework which will be finalised in 2020.

SA Medical Research Future Fund (MRFF) Working Group

A key requirement of the MRFF is strategic and priority driven research (not investigator driven) for direct health and economic outcomes coupled with a focus on partnerships, collaboration, leverage and coinvestment, together with burden of disease and unmet need.

To achieve MRFF funding success South Australia needs to fundamentally change its research approach by working more closely with health services and the community to determine the greatest healthcare challenges and form partnerships across organisations, industries, sectors and disciplines.

In May 2019 HTSA invited our Partners and other key stakeholders, such as the Office of the Chief Scientist, to join a working group to strengthen and position South Australia to maximise MRFF grant funding success.

By bringing together the key organisations that are responsible for driving health and medical research in SA , that is SAHMRI, the three universities, SA Health and the Department of Innovation and Skills, we are exploring ways to leverage the strengths of the state through collaboration to deliver research that meets the needs of health services and the community and to successfully compete for MRFF funding.

Supporting and Facilitating the Australian Health Research Alliance (AHRA)

HTSA is one of nine NHMRC accredited AHRTCs/ Centres for Innovation in Regional Health (CIRHs) across Australia that form the Australian Health Research Alliance (AHRA). AHRA works collaboratively at a national level to advocate for action to drive health research translation and research impact across Australia. Collectively it aims to address and overcome the barriers between research evidence and health benefit.

HTSA has played a very active role in AHRA. From July 2018 to June 2019, our Executive Director, Professor Steve Wesselingh was the AHRA Chair, supported by our CEO Wendy Keech as Chair of the AHRA Operations Group.

While in these roles they oversaw the consolidation of the AHRA Council and the establishment of an across-alliance operations group.

This enabled AHRA to speak with a single voice to government, including the Commonwealth, the MRFF and the NHMRC. Additionally, the formal extension of the MRFF funding from one year to several, and then the positioning for a 10-year funding commitment, were also part of their achievements.

Nationally HTSA works collaboratively with AHRA in progressing five agreed national priority areas and a number of interest groups. HTSA representatives participate in these activities.

HTSA and its representatives are involved in all AHRA initiatives including

Aged Care Services Network
Assoc Professor Maria Inacio (SAHMRI) / Professor Maria Crotty (Flinders University)
Women's Health Network
Professor Maria Makrides (SAHMRI) / Karen Glover (SAHMRI)
Health Service Improvement and Sustainability
Professor Jon Karnon (Flinders University) / Wendy Keech (HTSA) / Dr Ecushla Linedale (HTSA)
Indigenous Researcher and Capacity Building
Professor Alex Brown (SAHMRI) / Dr Karla Canuto (HTSA)
Data Driven Healthcare
Professor Derek Chew (Flinders University/SAHMRI) / Wendy Keech (HTSA) / Associate Professor Nicole Pratt (University of South Australia)
Consumer and Community Involvement
Professor Caroline Miller (SAHMRI) / Ellen Kerrins (SAHMRI) / Alex Michelmore (HTSA)
Workforce Development
Dr Ecushla Linedale (HTSA)
Clinical Research Facilitation
Professor Maria Makrides (SAHMRI) / Professor Derek Chew (Flinders University/SAHMRI)
Wound Care
Professor Rob Fitridge (University of Adelaide) / Professor Allison Cowin (University of South Australia)

Case study: Mobilising Leadership and Collaboration to Strengthen Research Translation

When the third round of MRFF Rapid Applied Research Translation (RART) funding was announced in late 2018 the HTSA Board agreed to a new strategic approach for allocating the funds.

HTSA wanted to develop a process that reflected its mission to facilitate cooperation and collaboration between researchers, health care services and the community. To date funding allocations for previous funding rounds had still focussed on the traditional "researcher led" projects.

The first step in the process was to convene a **Board Research Advisory Working Group.** The group comprised Board members, researchers, SA Health Executives and consumers.The role of the Working Group was to determine Strategic Priority Areas that reflected real issues facing the health system and patients in South Australia and develop options for a process to distribute funds that facilitated collaboration and cooperation.

In developing the priorities, the Working Group considered the following

- MRFF priorities
- Current HTSA priorities
- Researcher strengths/themes from previous MRFF funding
- Strategic planning interests (findings from consultation with HTSA Partners)
- Community stakeholder interests (as per Stakeholder Forum outcomes)
- SA Health priorities
- AHRA priorities

On the recommendations of the Working Group the Board endorsed the following

1. Five Strategic Priority Areas –
   - Aboriginal Health
   - Ageing
   - Data Access and Data Analytics
   - Mental Health
   - Health Services Interface

2. A Strategic Project Approach with the aim to encourage multi-sectoral and multi-disciplinary action to provide "scalable solutions to complex health service problems that directly benefits patients".

HTSA approached experts in the fields identified as Strategic Priority Areas to a Roundtable Session held on 28 February 2019. These experts represented health services, academia and the community sector.

One hundred and twenty researchers, healthcare services staff, stakeholders and community members came together to design and develop projects. Importantly consumers were engaged in all aspects of co-design – from priority setting through to proposal and project development.

Action Area Two

Our aim is to develop more effective and efficient systems to enable impactful and suitably informed research and we do this by overcoming barriers to and enhancing the pathway to state-wide research translation. Our activities to deliver Action Area Two include -

- Improving data access and analytic capacity
- Improving clinical research processes
- Advancing commercialisation practices
- Increasing consumer/community participation

HTSA is committed to reorienting systems and platforms to ensure there is the infrastructure in place to accelerate research findings into action to support improved health services. Platforms are strongly embedded in our governance structure with operations focusing on data access and analytics, clinical trials/registries, consumer engagement, communication and commercialisation.

System based barriers must be addressed if we are to improve the speed and scale of the implementation of our "Better Care" projects.

Improving data access and data analytic capacity

A key focus for HTSA during 2019 was improving data access and data analytic capacity to better inform a learning health system.

This led to a collaboration with the Commission on Excellence and Innovation in Health (CEIH) to establish the Health Analytics Research Collaborative (HARC) which brings together members of the research community, including clinical researchers, registry analysts and data scientists, to boost collaboration and further develop the data analytic capacity in South Australia.

HARC works closely with health services to consolidate and build upon the analytic expertise that is already available across the state and to mobilise and connect the expert analytic capability within the academic and research sectors to realise the potential of relevant information sources to enhance policy, practice and care across the health system. HARC engages with both primary and acute health services and associated stakeholders, including the community and consumers, to work towards this vision.

The HARC Leadership Group, co-Chaired by Professor Derek Chew (SAHMRI Lifelong Health Theme Leader) and Tina Hardin (Executive Director, Clinical informatics, CEIH) was established to provide strategic scientific direction, guidance for research priorities and expert methodological leadership and be responsible for the selection of exemplar projects and for the appointment of key personnel including Data/Informatics Fellows.

HARC aims to assist with the development of the next generation of data science leaders in research. Recruitment for a cohort of Data/Informatics Fellows (3 FTE) and a Senior Data/Informatics Fellow (1 FTE) began in late 2019.

Commencing in early 2020 and led by a Senior Fellow, the Fellows will undertake research analyses on exemplar projects that will use data to understand and inform current health service challenges. These roles will undertake planning, execution, analysis, dissemination and management of several exemplar projects. In addition, the Fellows will work with the Clinical Networks being established by the CEIH. A mentoring and training program will also be provided.

Improving ethics and governance processes

HTSA is committed to improving ethics and governance processes to enable research projects, enhancing infrastructure to support clinical trials, commercialisation and consumer engagement across the state.

South Australia has a long and distinguished record for quality in clinical research delivered by highly dedicated clinicians and researchers. There are significant benefits to the community and the economy from facilitating clinical research, and jurisdictions across Australia are recognising, and competing, for the opportunity to support this activity. It is to SA's advantage to improve our clinical research governance processes to make them faster and more efficient.

To this end HTSA has established and is facilitating a strategic leadership group - the SA Clinical Research Governance Steering Committee. Chaired by the SA Chief Scientist, Professor Caroline McMillen, the Steering Committee's initial key activity is to prioritise the 17 recommendations included in the Review of Research Governance in the Department for Health and Wellbeing and related LHN's Report commissioned by the Department for Health and Wellbeing SA (the Birch Review) in 2018.

This Committee reports to the Minister for Health and Wellbeing and has the support of the Chief Executive SA Health and the Chairs and CEO's of each of the LHN Governing Boards.

Recognising the importance of clinical research for the SA economy, there is also wider Government support for this initiative from Minister Ridgeway (Trade, Tourism & Investment) and Minister Pisoni (Innovation & Skills).

Working groups, consisting of research staff from across SA Health have been established and there is significant opportunity for engagement with SA universities, SAHMRI, Aboriginal Health Council of SA, Industry, clinical researchers and other key stakeholders.

Members

Professor Caroline McMillen
SA's Chief Scientist (Chair)

Dr Hendrika Meyer
Acting Chief Medical Officer, SA Health

Wendy Keech
CEO, HTSA

Lesley Dwyer
CEO, Central Adelaide LHN

Sue O'Neill
CEO, Southern Adelaide LHN

Jim Birch
Expert Adviser

Dirk Beelen
Director, Health & Medical Industries, Department for Trade, Tourism & Investment

Professor Maria Makrides
Distinguished Clinical Researcher

Yvette Van Eenennaam
General Manager, Adelaide Biomed City

Ben Shores
Manager, Medical Training and Research Operations, SA Health

Jenny Richter
HTSA Project Support

Clinical research is good for patients the health system and the South Australian economy.

Involving our Community

Health Translation SA works in partnership with South Australia's lead consumer advocacy agency Health Consumers Alliance of South Australia, and community members to ensure our research priorities and projects reflect the current and future health care needs of South Australians.

Community members play active roles within our Stakeholder Forum, grant planning and review processes, state and national research projects and other strategic planning activities.

HTSA also contributes to national consumer and community engagement partnership activities through AHRA.

HTSA has a dedicated staff member, Ms Alex Michelmore, who works in collaboration with SAHMRI, to implement a consumer and community engagement framework. This framework guides a range of capacity building and infrastructure projects to ensure consumers can have a greater voice in HTSA's and SAHMRI's work and develop strong and productive relationships with our researchers.

Community Engagement in Research Toolkit

We also have a dedicated consumer and community engagement page on the HTSA website to keep the public informed about progress towards implementing the Framework and engagement opportunities across HTSA. The first suite of resources for the Community Engagement in Research Toolkit were made available on the HTSA website in mid 2019.

The Toolkit is a joint initiative with SAHMRI and aims to offer community members and researchers practical resources to support community involvement in health and medical research and research activities.

In partnership with SAHMRI we hosted our second 'Connecting with Community' Forum in October 2019, with over 50 consumers and researchers in attendance. The Forum brought together people currently involved in, or having an interest in, community engagement activities across HTSA, SAHMRI and our other partner organisations.

The Forum featured a showcase session on examples of community voice in research with presentations from the Hospital Research Foundation, HTSA and the Registry of Senior Australians. A special focus of the morning was to explore different examples of how community members have influenced research priority setting within South Australia.

Community Interest Register

A Community Interest Register, which provides a database of consumers who are interested in being involved in health and medical research, was launched in May 2019. Since its launch, 72 people have registered, and 5 research groups have requested engagement with consumers.

Case study:
Increasing Consumer and Community Participation

HTSA's Consumer and Community Engagement Action Group is made up of representatives from each of our nine Partner organisations. The group assists HTSA design and implement state-wide initiatives to increase the active involvement of consumers and community members in health and medical research in South Australia.

In 2019 the group assisted HTSA by -

- Actively promoting the Community Interest Register, and other community engagement opportunities initiated by HTSA across the partner organisations and various communication media (HTSA newsletter, website).

- Partnering with Flinders University to pilot a Partnering in Research Workshop (February 2019), with the aim to expand it to include involvement from other HTSA Partner organisations.

- Providing advice on local implementation of national initiatives under the AHRA Consumer and Community Involvement Project. A key outcome of Phase 1 of the Project was the publication of an Australia-wide Audit Report which summarised results of a national survey into the extent and nature of community and consumer involvement in health and medical research.

A national workshop with relevant stakeholders to review the findings from the environmental scan and survey was held in Sydney in November 2019.

The findings of the survey, along with the outcomes of a literature review, have informed four priority consumer engagement projects that will be led by AHRA

- Develop minimum standards for good practice
- Facilitate sharing of existing resources and expertise
- Sponsor research and evaluation projects
- Formalise alliances with leading agencies

Action Area Three

Our aim is to develop the skills and knowledge of all people involved in research translation by providing opportunities to build expertise and capacity and enabling collaboration.

Our activities to deliver Action Area Three include developing and growing our capacity building platform and adopting a two-pronged approach encompassing -

- Linking with, supporting and promoting current capacity building activities that are part of partner, state and national programs of work and;
- Developing and implementing a strategic plan for the state-wide approach to research translation capacity building in SA.

Translating research into products and services that improve people's lives is rarely a linear process.

Rather it is dynamic and iterative and takes place within a complex system. Successful research translation requires a diverse skillset beyond that of traditional research skills.

Capacity building

A key focus for HTSA during 2019 was providing opportunities to build expertise and capacity, and enable collaboration. In early 2019 we appointed Dr Ecushla Linedale, to develop and grow our capacity building platform and have adopted the following two-pronged approach to achieve this.

1. Linking with, supporting and promoting current capacity building activities that are part of partner, state and national programs of work and;

2. Developing and implementing a strategic plan for the state-wide approach to research translation capacity building in SA.

Research Translation Capacity Building Steering Committee

Ensuring a co-ordinated, connected and state-wide approach to building the capabilities of the research translation workforce in SA is important.

In May 2019 the Research Translation Capacity Building Steering Committee was formed to guide and inform our capacity building strategy. To facilitate this, a preliminary scoping of the 'health translation' landscape was conducted with leading experts in research translation across a broad array of disciplines and sectors.

Under the guidance of the Committee, a strategic plan for Research Translation Capacity Building in SA was developed, focussing on three long-term key pillars -

- Training and Resource Development
- Career Pathway Development
- Networking and Mentorships

Members

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Training and Resource Development

HTSA has identified and promoted relevant courses being run by our partners and other translation centres across Australia. A suite of introductory educational resources to build understanding and operational clarity around research translation are currently in development.

This is in part informed by a commissioned Rapid Review that focused on the meaning and use of current terminology. We have also identified key competencies for effective research translation, and mapped and published current training opportunities via our online training portal.

HTSA also offered the Entrepreneurial Research Accelerator Program to all 'Better Care' projects (funded by the MRFF in 2018/19) and HTSA's Flagship Program.

Career Pathway Development

A research translation competency framework is being developed by the Capacity Building Steering Committee and will be used to inform career pathway development opportunities and fellowships.

As previously noted HTSA is also developing and supporting a Data Translation Fellowship program commencing in early 2020 as part of the Clinical Informatics Hub. This will include networking and mentorship opportunities and career pathway development in the health system.

HTSA also supports the development of the National Indigenous Capacity Building Network *(An AHRA initiative led by Professor Alex Brown).* This includes supporting the roll-out of an implementation fellowship program as part of the Aboriginal Capacity Building Project *(funded by the MRFF in 2019).*

Networking and Mentorship

Facilitating relationship building and collaboration amongst researchers and between researchers, industry, and consumers is a core principle of all work undertaken by HTSA. In 2019 we brought together these key stakeholder groups to consider the opportunities for SA to leverage its strengths on larger scale collaborative projects or strategic planning. To do this we supported and, in some cases coordinated, several events -

- Connected Health Cities: 'Learning health systems at scale for innovation and improvement' (Mar 2019)
- Advancing the Science and Practice of Implementation and Improvement in SA (Oct 2019)
- Equity in Health Forum (Dec 2019)
- SA Cancer Care Consortium (hosted by SAHMRI, Nov 2019)

Following on from these events we support ongoing communities of practice and relationship development in these fields.

Together with our three University partners, SAHMRI and the CSIRO, HTSA coordinated the **Higher Research Degree Student Open Night** for translational health and medical research on the 19 September 2019. Adopting a new expo style format and including greater participation from student representatives, the event attracted 120 students.

Case study: Developing Skills and Knowledge in Research Translation

The HTSA Capacity Building Steering Committee identified that South Australia has a unique and timely opportunity to position itself to become a leader in the science and practice of implementation and improvement.

Working with the Department for Health and Wellbeing and the Commission for Excellence and Innovation, HTSA assisted with delivery of a high level, invitation-only forum to discuss the role of implementation and improvement science and explore current strategic opportunities for SA. The Joanna Briggs Institute (JBI) also supported the event.

Forty healthcare decision makers, clinical champions and research academics attended the **Advancing the Science and Practice of Implementation and Improvement in SA** Forum on 30 October 2019.

The aim of the Forum was to consider opportunities to build on the considerable breadth of activities and world-renowned expertise in South Australia in evidence-based healthcare innovation and implementation.

Attendees included Executive leaders from The Department of Health and Wellbeing, the Commission on Excellence and Innovation in Health, Wellbeing SA, the Local Health Networks, Primary Health Networks, Health Consumers Alliance of SA, Aboriginal Health Council of SA as well as Adelaide University, University of South Australia and Flinders University.

Alignment of the forum with the G-I-N & JBI Conference allowed implementation science experts Professor Bridie Kent (University of Plymouth), Professor Ian Graham (Ottawa Hospital Research Institute) and Professor Roman Kislov (University of Manchester) to contribute to the forum, as well as Ms Megan Campbell - Centre Director of the Australian Centre for Health Services Innovation (AusHSI).

Action Area 4

Our aim is improved health care for South Australians, and we do this by delivering and supporting Better Care Initiatives that focus on health care improvements in priority areas. Our activities to deliver Action Area Four include -

- Funding, enabling and/or supporting
    - Flagship Programs
    - MRFF funded projects
- Supporting and facilitating AHRA National System Level Initiatives and Interest Groups

HTSA facilitates a collaborative environment to support clinicians, researchers, policy makers and community members to work together to address some of the real issues facing the health system and patients in South Australia.

Our Better Care projects include our Flagship Programs and our MRFF RART Projects.

These projects are extremely important to HTSA as they demonstrate how translational research can address key health challenges, have the greatest impact and accelerate translation into education, innovation and evidence-based practice in clinical and health care. They contribute research findings to support a high-quality and sustainable health system.

Flagship Programs

Since accreditation in 2015 HTSA has provided funding and support to several state-based and collaborative programs that bring together teams (researchers, clinicians, policy makers, consumers) to address areas of significant need and build on strengths in SA.

In April 2019 we were very pleased to welcome a new Flagship Program, the Health in All Policies WHO Collaborating Centre (HiAP WHOCC). The Centre is an ideal fit with HTSA as one of its key aims is to strengthen research to policy translation on the determinants of health, to increase evidence-based strategies.

The formal launch of the WHO HiAP CC was held on Friday 13 December 2019 and was opened by the Minister for Health and Wellbeing, Hon. Stephen Wade MLC. Emphasis was placed on the importance of knowledge translation to raising capabilities for collaborative action on the determinants of health through HiAP approaches.

During a pre-meeting with WHO colleagues, discussions progressed regarding the alignment of the work programme of the WHO HiAP CC with the soon to be designated South Gate Institute WHO CC on Social, Political and Commercial Determinants of Health.

South Australian Aboriginal Chronic Disease Consortium (ACDC)

The vision of the SA ACDC is to reduce the impact of chronic disease experienced by Aboriginal people living in SA. It has driven immediate outcomes.

Firstly, a very important initial piece of infrastructure was developed in partnership with stakeholders.

This Aboriginal Chronic Disease Monitoring and Evaluation Framework ensures that any changes that are implemented can be measured and that the system can be held to account.

This has led to the development of a suite of Aboriginal Health Indicators (aligned with National Safety and Quality Health Service Standards and Patient Reported Experience Measures) that will be used in an Aboriginal-specific dashboard by SA Health. The dashboard will provide accessible, up-to-date information on health activity and outcomes and will provide a solid evidence base to guide chronic disease policy and advocate for changes in policy and resource allocation.

The SA ACDC also worked with all relevant stakeholders to develop a model for improving ongoing care after a hospital stay at South Australia's largest hospital - the Royal Adelaide Hospital. This is now being used to improve the transition between hospital and home and ultimately health outcomes for patients and their families.

An Emergency Services Protocol has been developed to ensure culturally appropriate evacuation, transfer and retrieval of Aboriginal patients in an emergency.

The Risk Factor Assessment and Screening Protocol is now providing clinical and cultural guidance for health service providers across a broad spectrum of clinical professions in the primary and acute health care systems in South Australia. Other projects are similarly being integrated into routine care.
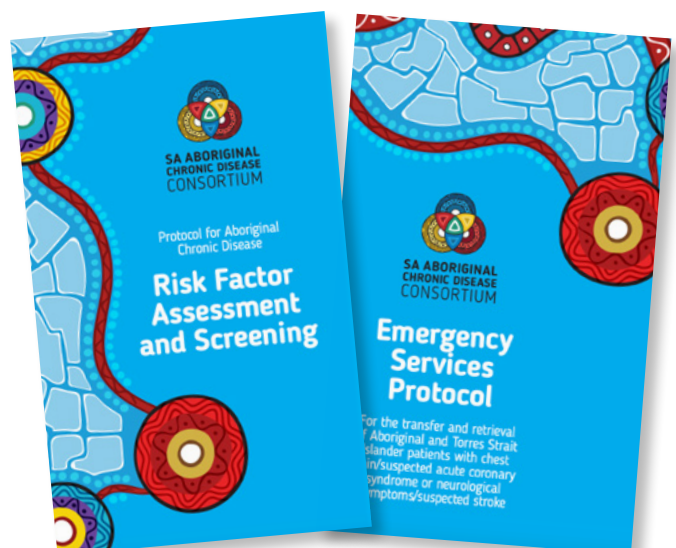
Registry for Older South Australians (ROSA)

ROSA is a powerful data platform linking information from the health and aged care sectors, to monitor the health and wellbeing of people receiving aged care services. Using big data and sophisticated computational research, ROSA produces evidence to guide decision-making for quality, efficient, innovative and age-friendly services and practices.

Like other Australian Clinical Quality Registries, ROSA has been designed to monitor the effectiveness and appropriateness of care over time, to identify variance and advise on best practices.

ROSA has contributed to the national understanding of

- The prevalence and trends in major diseases
- Evaluation of the quality use of medicines
- Variation in practices and models of care nationally

ROSA has developed an Outcome Monitoring System that encourages transparency and best practice. It is a pragmatic, efficient, and low burden tool to support evidence-based quality and safety improvement. It measures and reports on 12 quality and safety indicators of aged care at a population level, including use of antipsychotic medicines and the incidence of falls and fractures.

ROSA has also been informing the Royal Commission into Aged Care Quality and Safety on several fronts

- Providing reports, such as the utilisation of antipsychotic medicine use in residential aged care that have been used in public hearings
- Providing evidence for background documents;
- Sharing ROSA's work on the development of quality and safety indicators in care to inform their investigations.

These contributions showcase ROSA's ability to deliver evidence directly to influential decision makers.

Heart Disease and Rehabilitation

This program works at a state and national level to refocus services on outcomes that can be measured and systems to measure practice.

In 2019 this program built on foundational work completed in 2018 (MRFF RART funded project) which included the development of a cardiac rehabilitation monitoring system and a set of quality indicators to measure the effectiveness of cardiac rehabilitation (CR) programs.

More recently the project team has contributed to National Cardiac Rehabilitation Measurement (NCRM) Taskforce and used data linkage results to identify several important research questions, particularly in relation to the factors impacting on attendance at cardiac rehabilitation.

In South Australia activity in this program of work is expected to increase due to a reinvigoration of the SA Health Cardiac Clinical Network.

No Australians Dying from Bowel Cancer Initiative (NADBCI, Formerly Beat Bowel Cancer Project)

This initiative has the goal of markedly reducing (eliminating) preventable deaths from colorectal cancer in the South Australian population via increasing broader uptake and application of existing evidence, generating new evidence and accelerating translation. By engaging clinicians, researchers and policy makers this project is impacting on health outcomes and making a difference to the way services are delivered.

The NADBCI has facilitated, advocated and achieved -

- Establishing a realistic target of 60% bowel screening participation (currently 41%) and 90% follow-up colonoscopy (currently 70%) by 2020, almost halving the current age standardised colorectal cancer mortality rate and from 2030-2040 predicted to save the health system about $450 million.
- State and Federal advocacy to keep bowel cancer on the political agenda through Government attention to the urgent need to address public colonoscopy services leading to a $5 million pre-election commitment.
- Improved public colonoscopy wait lists over the last 6-months of 2018 and an upward trend in bowel cancer screening participation rates, with the SA rate of 47% being the highest in Australia.

- Helping GPs to refer well and efficiently and provide equitable, excellent and affordable colonoscopy for all South Australians.
- A Colonoscopy Lead Committee, which is the only group of frontline services addressing the long-standing colonoscopy wait list problem.
- Ongoing provision of robust data that highlights where inequalities exist and explores patterns of care and variations in colorectal cancer clinical practice in SA.
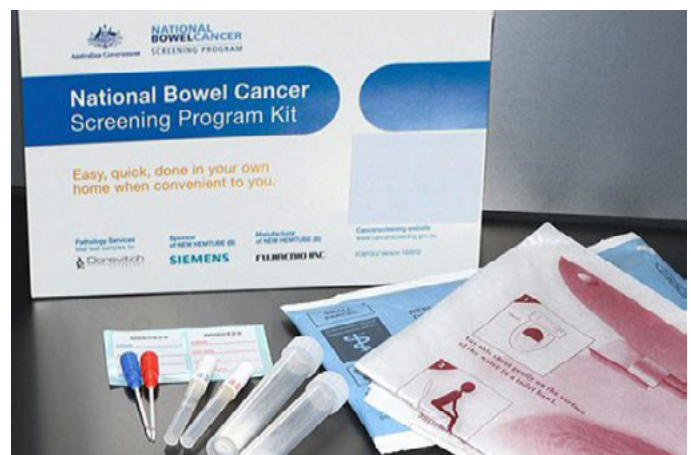
First 1000 Days

Work in this program area covers a number of important initiatives relating to the first 1000 days of life.

One of the key projects within this program is the Preventing Preterm Birth with Omega-3 Fatty Acids Project, which synthesised the evidence from a Cochrane systematic literature review of the effect of Omega-3 Fats on reducing the risk of premature birth. The Cochrane review showed supplementation of Omega-3 fats (mostly fish oil) can reduce the risk of preterm birth by 11% and early preterm birth by 42%. The findings guided development of a clear recommendation for health professionals and pregnant women. The materials that were developed contain information and actions to translate the findings into practice.

The findings are being incorporated into NHMRC national clinical practice pregnancy guidelines. Ongoing work will help determine which specific groups of women

(e.g. those with low omega-3 levels, Aboriginal women), will benefit most from fish/algal oil supplementation and how to easily identify these women through dried blood spot technology. Key stakeholders (health professionals, pregnant women), along with policy makers and industry, have been actively engaged in the development of pathways and planning of an implementation strategy.

Medical Research Future Fund Rapid Applied Research Translation Projects

These projects were supported by the Australian Government's Medical Research Future Fund (MRFF) as part of the Rapid Applied Research Translation (RART) program.

Projects funded through the RART program have active engagement from health service providers. The sheer cross-section of highly relevant, influential organisations and individuals engaged in the projects ensures that outcomes will be delivered from strategic, scalable projects, the findings of which can then be successfully and rapidly rolled out.

The projects are strongly collaborative with co-leads of researchers and clinicians and further enhanced by close links with HTSA partners including universities, health organisations, the community and consumers. They focus on the integration of research, education and clinical care by building capacity across the three sectors. Additionally, they consider the interface between policy makers, consumers and other key stakeholders and are focused on driving impact across the state.

Known as our Round 2 Better Care Initiatives, eight Transformative Translational Research grants were awarded via a competitive process commencing January 2019.

HTSA received 95 applications and undertook an exhaustive peer-reviewed process.

- A specifically appointed Research Advisory Workgroup (RAW) had oversight of the process which was independently chaired. The Chair was not involved in voting or scoring and the RAW reported to HTSA Board.

- Applications were peer reviewed by panels. Panel members were nominated by members of the HTSA board, ensuring expertise in translational research. (the process involved 7 Review Panels - 49 reviewers including consumers). The timelines were very short, and we are very grateful to the reviewers who were able to participate.

These project were supported by the Australian Government's Medical Research Future Fund (MRFF) as part of the Rapid Applied Research Translation program.

The 2019 Round 2 Better Care Initiatives

No Australians dying of bowel cancer

Lead: Professor Dan Worthley (SAHMRI)

This project contributes to the target of eradicating bowel cancer death in Australia. Building on extensive earlier work, this project aims to reduce the time between screening and colonoscopy, as a key indicator of the efficiency and impact of the National Bowel Cancer Screening Program. This project will help hold front-line health services accountable for their performance, will identify new issues and ways to improve, and implement evidence-based practice that is yet to be implemented.

Community breathlessness intervention services

Lead: Dr Kylie Johnston (University of South Australia)

This project will adapt, deliver and evaluate a short home-based program that helps people to manage and cope better with breathlessness and conduct and evaluate a training course in breathlessness management, enabling clinicians to continue delivering such services beyond the life of this project.

Acting fast to increase time-critical stroke treatments to all South Australians

Lead: Professor Susan Hillier (University of South Australia)

This project will introduce a suite of system-wide stroke care improvements to reduce disparities and improve access to certain treatments, improve the speed they are administered, thus reducing death and disability from stroke, and improving patient flow through the SA Health system. The aim is to end the 'postcode lottery' that currently determines stroke outcomes.

Implementing a decision support tool to facilitate early access to community-based care for people with severe mental illness

Lead: Associate Professor Niranjan Bidargaddi (Flinders University)

Explore whether the use of patients' MBS and PBS data consolidated in My Health Record via the AI2 platform can support improved decision making by clinicians and other healthcare professionals and optimize health care for patients with severe mental illness by assisting the transition between community and primary care.

Healthy South Initiative

Lead: Professor Fran Baum (Flinders University)

Testing the feasibility of the rapid translation of Health in All Policies (HiAP) ideas to create healthy urban environments, create health promoting services and stem the non-communicable disease epidemic in the Southern area of Adelaide.

Safely sleeping Aboriginal babies in South Australia – doing it together

Lead: Associate Professor Julian Grant (Flinders University)

This project will provide the opportunity for Aboriginal families to provide a safe sleep environment for their newborn babies while increasing awareness and knowledge of safe sleeping behaviours. It aims to reduce the gap between Indigenous and non-Indigenous rates of Sudden Infant Death Syndrome (3:1) and Sudden Unexpected Death in Infancy (4:1).

Engaging with Aboriginal People to Improve Kidney Care and Outcomes in South Australia

Lead: Dr Janet Kelly (University of Adelaide)

The over-arching aim of this collaborative project is to improve kidney care for Aboriginal people in South Australia. The project focuses on the needs and priorities of Aboriginal patients with complex care needs complicated even further by kidney failure.

Initiation of a novel in-hospital intervention for patients with Type 2 diabetes

Lead: Professor Gary Wittert (University of Adelaide)

Implement and rapidly optimise an intervention for people admitted to the Lyell McEwin Hospital with a cardiac condition and found to also have type 2 diabetes based on an evidence-based Model of Care.

Round 3 Better Care Initiatives

The third round of MRFF Rapid Applied Research Translation (RART) funding was announced in late 2018 and the HTSA Board adopted a new strategic approach for allocating the funds which is described in detail in the case study on page 12. These projects commenced in July 2019.

Strengthening Aboriginal Capacity in Health Research Translation and Development in South Australia (State)

Leads: Professor Alex Brown (SAHMRI), Shane Mohor (AHCSA)

A shortage of Aboriginal and Torres Strait Islander Translation Scientists (ATSITS) exists. Capacity strengthening strategies are needed to support the continued growth, success and sustainability of the South Australian (SA) Aboriginal and Torres Strait Islander health researcher workforce. This project identifies and implements supportive and tailored pathways to develop ATSITS career researchers and broader support host partners, explicitly for the recruitment and retention of Aboriginal and Torres Strait Islander researchers.

The project will be governed by a committee of Aboriginal and Torres Strait Islander Health and Research Leaders to ensure feasibility and culturally relevant projects. It will train and support a cohort of ATSITS to develop explicit skills in knowledge translation and exchange and practical experience in the implementation of research evidence in the real-world context of Aboriginal health services and community.

Data Access and Data Analytics – including an exemplar Health Services Interface Data Project

Lead: HTSA

The focus for this project is to make better use of the rich supply of data, information and knowledge in South Australia to improve both planning and delivery of health care services and improve patient outcomes. It encompasses collaboration between clinicians, academics, data specialists, health care planners and consumers. By enabling better access to data and enhanced analytics across the state, this collaborative Informatics Hub, will deliver exemplar projects that have significant potential for impact. It will intersect with SA's new Commission for Excellence and Innovation and deliver on the data needs of SA Health Service projects by employing data fellows that work within clinical priorities.

Additionally, a Health Services Interface Data Project will focus on primary, acute and sub-acute care data. This will be informed by the SA based PHNs, work with national projects in this space (led by Sydney Health Partners and Melbourne Academic Centre for Health) and link into the soon to be established SA Health Urgent Care Clinical Network.

Providing Better Out-of-Hospital Care for Senior Australians
Project title: STAAR-SA (State Action on Avoidable Re-hospitalisations and Unplanned Admissions)

Leads: Professor Maria Crotty (Flinders University), Associate Professor Craig Whitehead (SA Health), Professor Gillian Harvey (Unversity of Adelaide), Associate Professor Maria Inacio (SAHMRI)

This project focuses on improving Out of Hospital care for frail older people, ensuring that the care provided is timely, coordinated, high quality and meets the needs and expectations of older people themselves. It will improve the pathway of older people being discharged from hospital. While there is evidence about strategies to improve older patients' experiences of hospital discharge and reduce readmissions, they are not implemented systematically across South Australia.

This project will establish a partnership with health providers, aged care nongovernment agencies (NGOs), general practices, consumers and researchers to guide the study, profile the older SA population at risk of multiple hospitalisations, develop an evaluation framework/matrix for health services and policy makers to evaluate all Out of Hospital programs for older people and establish a quality improvement collaborative with the goal of increasing the quality of care for older people at times of transition.

Needs based community mental health services: Implementing timely and needs based interventions in the community by applying algorithms to transactional health care data

Leads: Associate Professor Niranjan Bidargaddi (Flinders University), Professor Tarun Bastiampillai (SA Health), Dr Jőrg Strobel (SA Health)

Non-adherence to medication is common among individuals with severe mental illnesses, and often leads to acute relapse requiring potentially avoidable hospitalisation. In practice medication non-adherence is difficult to detect due to lack of effective monitoring systems. The AI2 decision support application (the first ever application of machine learning on My Health Record in Australia) is a real-time monitoring system that uses Medicare and prescription data to provide clinicians with objective information about medication adherence for their patients to support early intervention from health services.

This project further enhances the AI2 decision support application to enable collaborative decision making about side effects, dosage and patient choice, and evaluate the benefits of implementation in practice. It will adopt a user-centred approach and develop new components for AI2 to capture patient reported side effects and treatment response such as trigger alerts on worsening side effects or inappropriate dosing, extend the adoption of AI2 in consultation with clinicians and consumers and evaluate the value/benefits of implementation ultimately closing the evidence-practice gap.

National System Level Initiatives

Nationally HTSA works collaboratively with AHRA in progressing five agreed national priority areas. The provision of support from the MRFF RART program for these National System Level Initiatives (NSLIs), as listed below, aim to advance health services and research and the rapid translation of knowledge into improved health care across the country.

Each NSLI is led by a Centre or group and each has a cross Centre Steering Committee.

Health Systems Improvement and Sustainability (HSIS) Framework and health technology assessment platform

The Health Systems Improvement and Sustainability (HSIS) Framework and health technology assessment platform addresses the challenges facing Australia in the critical areas of health systems improvement and sustainability, that is the unwarranted variations in the quality and safety of care delivered by Australia's healthcare systems, and the increasing pressures on healthcare budgets.

HTSA engages in the national activities and actively participates in the HSIS Steering Committee.

We also directly contribute at a project level, through a South Australian node, by investing in an Embedded Economist Project - an intervention consisting of an education and economist-in-residence program where researchers will actively engage with the health service to impact on patients through providing the best possible evidence to inform health services decisions. Professor Jon Karnon has been appointed to the SA node of the Embedded Economist project.

Building capacity in data driven health care improvement

HTSA actively engages with this project through membership on the Steering Committee and opportunities that include establishing the Health Informatics Hub with exemplar projects and developing a primary acute and sub-acute data project.

HTSA learnings from the AHRA Data Sharing Projects, AHRA Incubation Hub, and the AHRA Primary Care Initiative guide our work.

Consumer and Community Engagement

HTSA is actively engaged with AHRA committed to improving the approach to, and engagement of, consumers and the community in health and medical research.

During 2019 the focus was on the implementation of four following priority actions.

1. Develop minimum standards for good practice
2. Facilitate sharing of existing resources and expertise
3. Sponsor research and evaluation projects
4. Formalise alliances with leading agencies

HTSA's Consumer Engagement Senior Project Officer directly supported work required under the four priority actions and facilitated involvement of local experts across HTSA partner organisations.

HTSA participated in a national consumer and community involvement workshop in August 2019 and supported the national research and evaluation projects in collaboration with Sydney Health Partners and NSW Regional Health Partners. A key activity will be to identify and trial evaluation tools to assist in measuring the impact of community involvement in research.

HTSA nominated to lead the development of a position statement which summarises the evidence supporting the importance of community involvement in research. This piece of work is due to be released in early 2020.

Indigenous Research Network and Capacity Building

The vision for this project, led by HTSA, is to support and grow the next generation of Indigenous researchers working in Aboriginal health. It includes training and support to develop explicit skills in knowledge translation and exchange and practical experience in the implementation of research evidence in the real-world context of Aboriginal health services and community. It adopts a collaborative, Indigenous-led and consensus driven approach with the Steering Committee comprising two representatives (both Indigenous and non-Indigenous) from each Centre.

After completing a range of foundational pieces of work in 2018, HTSA continued to lead this project in 2019 with progress underway in several areas:

Building a collaborative platform that will include

- Providing individualised mentorship and development support to Indigenous researchers
- Establishing Research Masterclasses to train and develop capacity in Indigenous researchers and host organisations
- Connecting Researchers to a range of initiatives including:
- Yearly Grant Writing and 'Project Incubator' Workshops
- Capacity Exchange Program
- Establishing a yearly AHRA Indigenous Research Showcase. (Planning has commenced for a significant event in early 2020)
- Building an evidence base of what works using a 'living' longitudinal observational study to support the growth and development of up to 25 Indigenous people engaged in research and implementation science.

Wound Care

This initiative is aimed at addressing persistent challenges to wound care at systemic, policy and practice levels. Working on the priorities set by the national working group HTSA brings together experts and key stakeholders in South Australia to identify priorities from the national action plan.

Professor Alison Cowan and Professor Rob Fitridge represent SA nationally and also lead an SA based wound care project looking at a personalised care strategy for patients with diabetic foot ulcers to develop a suite of biomarkers that can be used to identify people with diabetes who are at risk of acquiring a diabetic foot ulceration (DFU) and determine if people who already have a DFU are healing effectively. Early treatment and/or prevention of DFUs will reduce the potential risk of amputations and will improve the lives of the increasing number of people who develop diabetes.

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