

# Australian Primary Health Care Research Institute

Annual Report

2005

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## Table of Contents

Chair's Message .....	4
Director's Report.....	5
APHCRI's Strategic Plan.....	7
Research Advisory Board (RAB) .....	7
Expert Review Committees (ERCs) .....	7
Addressing the Mission and Aims of APHCRI.....	8
1 To strengthen the knowledge base of primary health care through the conduct and support of research .....	8
1.1 Identification of research priorities.....	8
1.2 Manage a national research program.....	8
1.2.1 Spoke Research .....	10
1.2.2 Hub Research.....	12
2 To facilitate the uptake of research evidence in primary health care policy and practice.....	13
2.1 Review the evidence for the facilitation of uptake of new and existing research evidence in primary health care policy and practice.....	13
2.2 In partnership with relevant stakeholders develop and implement evidence-based strategies for the synthesis, dissemination and advocacy of new and existing knowledge arising from APHCRI-sponsored and other research, and other Institute activities (strategies will include publications and facilitation of meetings and forums for key stakeholders).....	14
2.3 Provide advice to the Department of Health and Ageing to inform the development of policy.....	18
2.4 Stimulate an informed national primary health care policy debate and maintain a watching brief on primary health care policy issues.....	18
3 To enhance research capacity in primary health care through strategic partnerships with other relevant national and international groups .....	19
3.1 Review the evidence for primary health care research capacity building.....	19
3.2 Develop strategic partnerships and collaborations and ensure that all funded research has an explicit capacity development component.....	20
3.3 Develop opportunities for pursuing APHCRI's core business by undertaking funded research through other agencies and by linking with development programs such as the Harkness and Packer fellowships and NHMRC fellowship schemes.....	23
3.4 Develop opportunities for enhancing research capacity through professional interaction, such as collaborations with similar primary care research institutes internationally, participation at key national and international conferences and a Visiting Fellows program.....	23
3.4.1 Visiting Fellows.....	24
3.4.2 Speaking engagements by APHCRI Hub staff.....	25
4 To ensure that APHCRI operates to the highest standards by developing and improving its organisational capacity to lead the national primary health care research network through appropriate staffing, resource, infrastructure, management practices and governance and accountability.....	25
4.1 Recruit, develop and retain staff.....	26
4.2 Effective Governance.....	26
4.3 Effective Management .....	27
4.4 Performance Reporting .....	27
Work plan 2006 .....	28
Appendix I The Staff of the APHCRI hub .....	39
Appendix II Members of the Research Advisory Board .....	40
Appendix III APHCRI Research .....	42
Appendix IV APHCRI Papers and Reports 2005.....	47
Spoke Research Papers .....	47
APHCRI Communications.....	47
Speaking Engagements.....	48
Appendix V.....	49
Appendix VI.....	50
Appendix VII .....	52
Appendix VIII.....	53

## Chair's Message



Starting a new Institute from scratch is both an enormous opportunity and an enormous challenge. This year, 2005, has seen a great deal of maturity in the life of APHCRI. Much research is happening, journal articles are being published and APHCRI is having a significant impact on Australian Primary Care and the translation of research into practice. None of this could have happened without the excellent leadership of Professor Glasgow. Without exception the staff of APHCRI have all contributed greatly to the Institute's success.

As well as thanking the staff, I would like to thank all the members of the Research Advisory Board for the productive, cohesive and constructive way in which they have each contributed over the year. For the first time we have seen some Board members complete their terms, a sure sign of maturity in an organisation. The Expert Review Committees have given generously of their time in their most important tasks and we all thank them for this.

We look forward to continuing the progress, building on the strong foundations laid and another very successful year for APHCRI in 2006.

**John Marley**  
Chair

## Director's Report



In 2005 the Australian Primary Health Care Research Institute (APHCRI) has made significant achievements against each of its strategic goals.

The primary health care knowledge base is being strengthened through the research activities of APHCRI's virtual institute. The Hub and Spokes are working together to undertake research that addresses a number of domains and topics of national policy relevance. I acknowledge the goodwill, commitment and plain hard work of all those involved, and sincerely thank them for their efforts.

I wish to particularly acknowledge Professor Jeffrey Richards whose sudden death during 2005 came as a shock to all of us. Jeff was an enthusiastic leader of one of the spokes within Stream One. All at APHCRI join with me in celebrating his many contributions to primary health care in Australia, and sharing the grief of his family and friends.

A multifaceted approach has been adopted by APHCRI to facilitate the uptake of research evidence into primary health care policy and practice. This includes focusing on linkage and exchange in all research and related activities; active participation in national policy work, such as the leadership Associate Professor Beverly Sibthorpe has provided in the development of National Performance Indicators for the Divisions of General Practice; running workshops and seminars; regular participation in conferences and meetings with key stakeholder groups; the launch of *APHCRI Dialogue*; being proactive in the management of media relationships; and hosting an increasingly sophisticated website.

Research capacity, with a particular focus on the evidence-policy interface, is being developed not only through the research activities of the Institute, but also through a number of other activities further developed in 2005. These include postgraduate training (I welcome Sanchia Shibasaki as APHCRI's first PhD candidate), taking a lead role in the research activities of The Australian National University College of Medicine and Health Sciences, establishment and development of both national and international networks, a maturing Visiting Fellows program, and success in accessing competitive grant money through building APHCRI's areas of interest into collaborative applications for NHMRC grants.

This Annual Report details these achievements, summarises the work plan for 2006 and presents the financial statements for the APHCRI. None of this work would be possible without the dedication and effort of many people whom I wish to briefly acknowledge.

To Professor John Marley and all the members of the Research Advisory Board (RAB) thank you for your constructive advice and support. The role is important, the agendas have been full and APHCRI would not be in the sound position it is today without your efforts. A special thank you to the retiring members of the RAB – Professor Louis Pilotto, Dr Cathy Marshall, Dr Sarah Larkin and Dr Peter Del Fante.

Members of the Expert Review Committees have worked hard, to very high standards and completed their task in tight timeframes. The advice provided to the RAB has been greatly appreciated.

The team at the APHCRI Hub has grown this year. My Deputy Director, Professor Beverly Sibthorpe and my colleague Mr Robert Wells, Executive Director, College of Medicine and Health Sciences, have given me excellent support; not only in the particular tasks they have led, but also in terms of developing and refining various directions APHCRI could take. Thank you.

The various research activities led by Professor Sibthorpe, Mr Wells and myself have been achieved with the significant help of Karen Gardner (Researcher), Duncan Longstaff, Anna Gear, Dhigna Rubiano and Shawn Lyons (Research Assistants). I am indebted to them. Elizabeth Kerr, Institute Manager, has led the development of internal processes at the Hub. Her dedication, professionalism, attention to

detail and consistently positive approach has been exemplary. She has led and been well supported in APHCRI's administrative operations by Rena Irby and Kimberley Brady and, through a service level agreement, the administrative team at the National Centre for Epidemiology and Population Health. Frith Rayner has developed the media and communications suite of activities for APHCRI. This is a complex role, and one that is very important to APHCRI as a method to bring evidence to bear on policy.

I look forward to 2006 and the further productivity of APHCRI.

**Nicholas Glasgow**  
Director

## APHCRI's Strategic Plan

APHCRI's work plan for 2005 was modelled on the strategic plan, which was established in 2004.

## Research Advisory Board (RAB)

The Research Advisory Board (RAB) funded two new streams of APHCRI research in 2005. Four projects were funded in Stream Three and 12 projects in Stream Four.

Under the chairmanship of Professor John Marley the RAB also reviewed Hub Research projects, and discussed the development and focus of APHCRI's future research streams and its strategic research directions.

The RAB met face-to-face on four occasions and once via teleconference. The meetings were characterised by open and constructive debate, with resolution of issues by consensus.

## Expert Review Committees (ERCs)

Two Expert Review Committees (ERCs) were convened in 2005.

Stream Three: The Stream Three ERC considered research proposals against the declared criteria and made recommendations to the Research Advisory Board (RAB). The RAB sought additional information from some applicants based on this advice before supporting four projects in Stream Three.

The ERC for Stream Three met on two occasions, once via teleconference (2004) and once face-to-face.

Stream Four: The Stream Four ERC considered research proposals against the declared criteria and made recommendations to the RAB. The ERC suggested clarification on some applications, which the RAB requested before supporting 12 projects in Stream Four.

The ERC for Stream Four met twice via teleconference to consider applications.

Review by international experts ensures the quality of APHCRI-funded research. As a result of APHCRI's networking, international experts were willing to participate in both APHCRI ERCs in 2005.

## Addressing Mission and Aims of APHCRI

### 1 To strengthen the knowledge base of primary health care through the conduct and support of research

#### 1.1 Identification of research priorities

The Research Advisory Board (RAB) determined that the research priorities for APHCRI in 2005 would continue to be:

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

Within these priorities the RAB committed to develop focussed questions as a basis for a more commissioned approach to APHCRI's research. This informed the development of Stream Four.

#### 1.2 Manage a national research program

This table summarises the research activity of APHCRI in 2005.

Domain	Topic	Stream	Lead Investigator	Lead Investigator's institution
Chronic/ complex conditions and management	<ul style="list-style-type: none"> <li>• Sustainable chronic disease management in remote Australia.</li> <li>• Caring for a marginalised community: the costs of engaging with culture and complexity.</li> <li>• Organisational and financial models that deliver Primary Health Care (PHC) to patients with lung disease.</li> <li>• Chronic disease managed in PHC – successful models and how they apply to Australia.</li> </ul>	Stream One	Associate Professor John Wakerman Dr Gary Rogers	Flinders University
		Stream One		University of Adelaide
		Stream Four	Associate Professor Alan Crockett	University of Adelaide
		Stream Four	Professor Nicholas Zwar	University of New South Wales
Multidisciplinary teams	<ul style="list-style-type: none"> <li>• A definition of integration, co-ordination and multidisciplinary teams. The influence of structure on the way they are managed.</li> <li>• Effective governance framework for integrated healthcare services. Optimal interplay between organisational and clinical governance.</li> <li>• The meaning and effectiveness of integration and co-ordination and multidisciplinary care in dealing with chronic illness.</li> </ul>	Stream Four	Mr Gawaine Powell Davies	University of New South Wales
		Stream Four	Professor Claire Jackson	University of Queensland
		Stream Four	Professor David Currow	Flinders University
Primary Health Care models/delivery	<ul style="list-style-type: none"> <li>• A study of national and international models of Comprehensive Primary Health Care (CPHC).</li> <li>• Models for CPHC. Common characteristics of effectiveness.</li> <li>• Evaluation of literature and policy covering rural and remote service innovation in Australia, specifically Aboriginal health.</li> </ul>	Stream Four	Mr Lucio Naccarella	University of Melbourne
		Stream Four	Ms Julie McDonald	University of New South Wales
		Stream Four	Associate Professor John Wakerman	Flinders University
Primary Health Care organisation	<ul style="list-style-type: none"> <li>• Qualitative study of the impact of National Performance Indicators fro Divisions of General Practice on Divisions' planning.</li> </ul>	Hub research	Associate Professor Beverly Sibthorpe	APHCRI

Domain	Topic	Stream	Lead Investigator	Lead Investigator's institution
Mental Health	<ul style="list-style-type: none"> <li>Sustaining an Aboriginal mental health service partnership.</li> <li>Exploratory economic analyses of two primary care mental health projects: implications for sustainability.</li> <li>Re-order: An investigation into the management of depression in general practice.</li> <li>An investigation into the management of depression in general practice.</li> <li>Models of primary mental health care and similarities and differences between that and chronic disease care.</li> </ul>	Stream One	Associate Professor Jeffrey Fuller Professor Jeffrey Richards	University of Sydney
		Stream One		Monash University
		Stream Three	Associate Professor Jane Gunn	University of Melbourne
		Stream Four	Associate Professor Jane Gunn	University of Melbourne
		Stream Four	Professor Helen Christensen	The Australian National University
IMIT platforms	<ul style="list-style-type: none"> <li>Electronic data for primary health care outcomes.</li> </ul>	Hub research	Dr Chris Kelman	The Australian National University
Practice nursing	<ul style="list-style-type: none"> <li>A study examining the expanded role of nurses in General Practices.</li> </ul>	Stream Three	Dr Christine Phillips	The Australian National University
Rural and Remote medicine	<ul style="list-style-type: none"> <li>Associate Professor Jeffrey Fuller and Associate Professor John Wakerman's projects both deal with rural and remote issues (see above and below).</li> </ul>	Stream One	Associate Professor Jeffrey Fuller and Associate Professor John Wakerman	University of Sydney Flinders University
Aboriginal and Torres Strait Islander focus	<ul style="list-style-type: none"> <li>Sustaining an Aboriginal mental health service partnership</li> </ul>	Stream One	Associate Professor Jeffrey Fuller	University of Sydney
Adolescent/child health	<ul style="list-style-type: none"> <li>A trial of new ways to encourage adolescent Australians to avoid or reduce risk behaviours like smoking, drinking, drug use and unprotected sex.</li> <li>A study of health preventative and promotion models effective in improving growth rates in Aboriginal children.</li> <li>An investigation into the best models for engaging parents to prevent obesity in 4-6 year olds.</li> </ul>	Stream Three	Dr Lena Sanci	University of Melbourne
		Stream Four	Professor Ross Bailie	Menzies School of Health Research/ Flinders University
		Stream Four	Professor Donna Cross	Edith Cowan University
Innovative methodologies	<ul style="list-style-type: none"> <li>Stream One and Stream Four.</li> </ul>			
Screening/early intervention	<ul style="list-style-type: none"> <li>A trial of SNAP implementation in two Divisions of General Practice.</li> </ul>	Stream One	Professor Mark Harris	University of New South Wales
Self-help organisations	<ul style="list-style-type: none"> <li>A critical evaluation of the benefits of self-help organisations (SHOs) to people who suffer chronic diseases and examination of ways to improve links between SHOs and General Practitioners.</li> </ul>	Stream Three	Dr Frances Boyle	University of Queensland
Workforce	<ul style="list-style-type: none"> <li>An investigation into the evidence base for competency-based training in primary health care settings, specifically on chronic disease in the general practice context.</li> </ul>	Hub research Stream Four	Professor Nicholas Glasgow	APHCRI

### *1.2.1 Spoke Research*

In 2005 Stream One research was completed. APHCRI also funded four projects in Stream Three and 12 projects in Stream Four of its research program.<sup>1</sup>

Stream One and Stream Four employed new approaches to commissioning research. In Stream One, research teams were brought together to consider the concept of sustainability and develop and refine a common approach to investigating their initiatives in these terms.

Stream Four brings policy advisors and researchers together in the early stages of the program to jointly refine research questions. The aim is to improve collaboration between researchers and policy advisors and make research more relevant to policy formulation in primary health care.

#### *Stream One*

Stream One of APHCRI's research program concluded with the publication of papers in a *Medical Journal of Australia* supplement: The Sustainability of Primary Health Care Innovation, in November 2005.

Using a common approach (described in the introductory paper by Sibthorpe, Glasgow and Wells), the research teams examined the sustainability of existing innovations in primary health care across six domains – political, institutional, financial, economic, client and workforce.

The innovations were in risk factor reduction, self-care in an Indigenous community, an integrated Aboriginal mental health program, care and prevention for people living with HIV and primary mental health care. The summative analysis by Sibthorpe, Glasgow and Wells identified three key themes:

- The importance of social relationships, networks and champions;
- The effect of political, financial and societal forces; and
- The motivation and capacity of agents within the system.

#### *Stream Three*

The four Stream Three projects have been funded for three years in APHCRI's largest research commitment to date.

The four projects address issues of importance to primary health care policy and practice in an innovative way. They are:

- Dr Frances Boyle, University of Queensland, is studying the links between self-help organisations and general practice to enhance chronic illness care;
- Dr Christine Phillips, ANU, leading a team examining the expanded role of nurses in general practices;
- Dr Lena Sanci, University of Melbourne, is trialling new ways to encourage adolescent Australians to avoid or reduce risk behaviours like smoking, drinking, drug use and unprotected sex; and
- Associate Professor Jane Gunn, University of Melbourne, is investigating management of Australia's most common mental health problem, depression, in general practice.

Projects are due for completion in 2008. Researchers in Stream Three submitted their first six-monthly reports at the end of 2005, reporting positive progress across all four spokes. They also participated in a Strategic Planning Day for APHCRI, contributing useful and important perspectives to APHCRI's work.

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<sup>1</sup> Stream Two invited expressions of interest for involvement in Stream Three.

### *Stream Four*

Stream Four focuses on the nature of evidence around six domains:

- Innovative models for the management of mental health in primary health care settings;
- Innovative models for comprehensive primary health care delivery;
- Chronic disease management;
- Integration, co-ordination and multidisciplinary care;
- Children and young Australians, health promotion and prevention; and
- Workforce.

A key aspect of linkage and exchange method is bringing researchers and policy advisors together. APHCRI is using this approach in Stream Four by bringing research teams together with policy advisors to discuss and refine the research questions. The aim of this approach is to strengthen the relevance of the research questions to policy "users" of the research products through improved dialogue and relationships thereby improving transfer of research evidence into policy. Participants gain a better understanding of the different work pressures and needs faced by researchers and policy advisors.

In 2005 members of the 12 Stream Four research teams, policy advisors and stakeholders met in Canberra for two research workshops. These workshops explored the research questions of the Stream Four teams and began development of relationships between the participants and the linkage and exchange of ideas.

Stream Four addresses national health priorities identified by key stakeholders including the Department of Health and Ageing. The research questions cover a number of issues of importance to primary care and the organisation of care in Australia. The use of multidisciplinary teams and the implications for chronic illness and how these teams are brought together and should be structured to best serve the Australian public are being considered.

Some of the systematic reviews are establishing what Australian research has already taught us about our Indigenous population and methods that have proved effective in solving their unique health care needs in primary care.

Others are looking at models for the best comprehensive care in primary health care settings and the best models for helping patients with chronic illnesses.

Mental health is also featured in this grant round with a study looking into the best models for delivering primary mental health care with a comparison to models used in chronic illness care.

The on-going public health issue of obesity in children is tackled by Professor Donna Cross and an in-depth look at competence-based training models is a workforce approach being investigated by the APHCRI team.

### *1.2.2 Hub Research*

#### *Qualitative study of the impact of National Performance Indicators for Divisions of General Practice on Divisions' planning*

APHCRI is continuing its involvement with the National Quality and Performance System by conducting a qualitative study of the impact of the National Performance Indicators for Divisions of General Practice (NPIDGP) on Divisions' planning. Associate Professor Beverly Sibthorpe is lead investigator on the project being undertaken by Karen Gardner, Duncan Longstaff and herself.

The study is investigating the extent to which performance indicators have impacted on the nature and quality of planning and the delivery of local programs; and how Divisions intend to use the information generated by reporting against the indicators.

A stratified random sample of Divisions has been drawn for in-depth telephone interview and plan review. Interviews will be conducted with about 30 Division Chief Executive Officers (CEOs), as well as the CEOs of the network's State Based Organisations and a representative of ADGP.

The project will be completed in April 2006 and the results are expected to contribute to the evaluation of the National Quality and Performance System, to be conducted by the Department of Health and Ageing.

#### *Southern Highlands Diabetes Study*

A small APHCRI team is working with the Southern Highlands Division of General Practice to investigate the cost impacts of the Division's diabetes program, which began in 1995.

The study, which will be completed in 2006, is an exploratory assessment of the program's local context; costs and potential cost savings in order to better understand its system impacts, sustainability and transferability. Potential cost savings will be modelled using an internationally validated computer program.

The team is led by Associate Professor Beverly Sibthorpe and includes: Ian McRae, Karen Gardner and Dhigna Rubiano, Professor Jim Butler (ACERH), Jill Snow, Dr Warwick Ruscoe, Dr Simon Grant and Anne Rodgers (Southern Highlands DGP). Jane Taggart and Gawaine Powell Davies from the Centre for General Practice Integration Studies (CGPIS) at the University of New South Wales have contributed time and expertise.

The Southern Highlands Division, CGPIS and others developed CARDIAB, an information platform for Divisions' diabetes programs. Data was provided by CGPIS for this project and is involved in on-going research on quality of care and outcomes in diabetes management in general practice.

#### *Electronic Data for Primary Health Care Outcomes*

Dr Chris Kelman has led a program of investigative research to discover all significant available Australian electronic data collections relevant to primary health care evaluation, including those held by the Commonwealth and State/Territory health departments and institutions. Nicole Inglis assisted him in this task.

A report, including a brief summary of the potential relevance of these data to primary care outcomes research and a 'how to' guide to assist researchers in locating and accessing data, will go to Government in 2006. A discussion of legal, ethical and legislative limitations will be included.

## Workforce

There is increasing international interest in competency-based training as a means of addressing critical workforce shortages in the health sector. Competency-based training has the potential to allow accelerated progress through training programs that have traditionally required a fixed time commitment.

Professor Nicholas Glasgow is leading a team investigating the evidence base for competency-based training in primary health care settings. His project focuses specifically on chronic conditions/co-morbidities in the general practice context, and does not attempt to consider the place of complementary treatments.

The study is due to be completed in September 2006.

## 2 To facilitate the uptake of research evidence in primary health care policy and practice

### 2.1 Review the evidence for the facilitation of uptake of new and existing research evidence in primary health care policy and practice.

Aware that the National Institute of Clinical Studies (NICS) has a primary focus on bridging gaps between research evidence and practice and wishing to avoid duplication, APHCRI determined its primary focus in this domain would be facilitating the adoption of research evidence into policy.

Through reviewing the literature and subsequent visits to key authorities in the field (see section 3.2 International networks), APHCRI identified several key strategies aimed at facilitating the adoption of research evidence into policy. These all drew heavily on the seminal works of Professor Jonathon Lomas of the Canadian Health Services Research Foundation.

Central to the strategies is the Lomas notion of "linkage and exchange" – efforts aimed at bringing together producers of research and users of research at all stages of the research cycle to gain insight into each other's "worlds", thereby increasing the likelihood of research evidence being incorporated into policy responses.

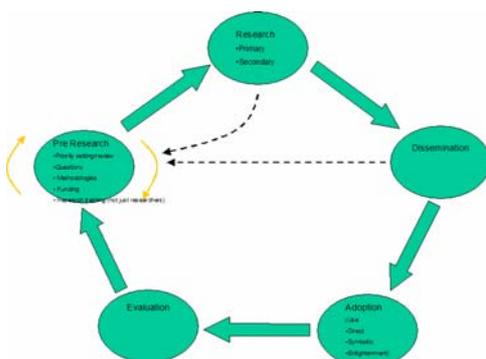


Figure 1 The Research Cycle

Figure 1 depicts an applied research cycle – applicable to APHCRI's mission and goals. A criticism of much research activity is that it ends with either the completion of the research project itself (the first black dotted line) or with the publication of a paper (the second black dotted line) and then the next research project begins. Researchers are rewarded for winning grants, publishing results and generating more questions that can win grants. The dotted lines indicate how this reality short-circuits the cycle, and therefore contributes to a lack of adoption (translation) of the evidence into policy and practice.

APHCRI is using linkage and exchange ideas in combination with other strategies to try and drive increased adoption of research evidence. The linkage and exchange strategies include:

- Involvement of policy advisors (along with other users of APHCRI's research products) in pre-research activities including priority setting, and determining policy-relevant research questions. The meetings with policy advisors take the form of regular one-to-one meetings between APHCRI staff and senior policy advisors at times that fit into the policy advisors busy schedules as well as planned small group meetings. There is iteration and refinement of the policy relevant questions – represented by the yellow arrows on the figure.
- Involvement of policy advisors in parts of the actual research activity. Thus, as previously reported in the Stream Four summary, workshops bring researchers and policy advisors together in order to facilitate ongoing dialogue.
- Involvement of policy advisors in the interpretation of the results of the research activities.
- Dissemination of results in formats useful to policy makers with brief "plain English" summaries being provided as part of the publication suite.

Other strategies that APHCRI has incorporated to facilitate adoption of research evidence into policy and practice include:

- Using systematic review and synthesis of existing evidence as a key research method relevant to the evidence/policy interface;
- Specifically identifying participation in linkage and exchange activities as a necessary part of research programs and requiring applicants for APHCRI funds to engage in these as a condition of funding;
- Specifically identifying dissemination, including brief plain English summaries of the findings, as one of the outcomes of APHCRI funded research;
- Conducting a suite of activities aimed at increasing the capacity of both researchers and policy advisors to get research evidence into policy (see section 3.1)

***2.2 In partnership with relevant stakeholders develop and implement evidence-based strategies for the synthesis, dissemination and advocacy of new and existing knowledge arising from APHCRI-sponsored and other research, and other Institute activities (strategies will include publications and facilitation of meetings and forums for key stakeholders).***

### ***National Performance Indicators for Divisions of General Practice (NPIDGP)***

In 2004 APHCRI conducted work for the Department of Health and Ageing on national and international developments in performance assessment in primary health care. As a result of that work the Department contracted APHCRI to develop a set of National Performance Indicators for Divisions of General Practice (NPIDGP).

Associate Professor Beverly Sibthorpe led a small team of experts from around the country through a process of development, consultation and expert review to complete a set of indicators relating to the government-determined domains of: diabetes, asthma, mental health, childhood immunisation, GP-hospital integration and care for older Australians in residential aged care. The team members were:

- Professor Nicholas Glasgow, Australian Primary Health Care Research Institute: asthma;
- Mr Gawaine Powell Davies, Centre for General Practice Integration Studies, University of New South Wales: GP-hospital integration and diabetes;
- Dr John Aloizos, General Practitioner, inaugural chair, ADGP: immunisation;
- The late Professor Jeffrey Richards, Director of Primary Care Research, Faculty of Medicine, Monash University: mental health;
- Associate Professor Libby Kalucy, co-director General Practice, Primary Health Care Research and Information Service: Divisions reporting;
- Mr John Glover, Public Health Information Development Unit: Divisions/population data; and
- Mr Duncan Longstaff, Australian Primary Health Care Research Institute: secretariat.

The indicators were fitted to the Framework for Performance Assessment in Primary Health Care developed by Professor Sibthorpe. This has subsequently been adopted by the Department of Health and Ageing as the overarching framework for performance assessment in the Divisions of General Practice Program. The indicators were introduced in mid-2005.

### *Common Pool Performance Indicators for Divisions of General Practice*

In response to a call from Divisions to recognise the full extent of their work in the community, the Department of Health and Ageing commissioned further work to develop indicators in a number of additional domains: youth health, healthy lifestyle, consumer involvement in Divisions, practice nursing and GP recruitment and retention. This used the same approach as for the NPIDGP.

For this work, Associate Professor Sibthorpe is leading a team comprising:  
Associate Professor Beverly Sibthorpe, Australian Primary Health Care Research Institute: team leader;  
Ms Karen Gardner, Australian Primary Health Care Research Institute: indicator design;  
Mr Duncan Longstaff, Australian Primary Health Care Research Institute: secretariat;  
Dr Jenny Beange, Dubbo Plains Division of General Practice: youth health;  
Dr Melissa Kang, NSW Centre for the Advancement of Adolescent Health: youth health;  
Dr Lena Sanci, Department of General Practice, University of Melbourne: youth health;  
Mr Gawaine Powell Davies, Centre for General Practice Integration Studies, University of New South Wales: risk factor management;  
Ms Kathy Mott, Division of Health Sciences, University of South Australia: consumer involvement;  
Ms Julie Porritt, Australian Divisions of General Practice: practice nurses;  
Dr Sally Roach, Western Australian Centre for Remote and Rural Medicine: GP recruitment and retention;  
Ms Leeann Harbridge, Flinders Division of General Practice: GP recruitment and retention;  
Ms Margaret Hordern, East Gippsland Division of General Practice: GP recruitment and retention;  
Associate Professor Libby Kalucy, Primary Health Care Research and Information Service: data issues;  
and  
Mr John Glover, Public Health Information Development Unit: data issues.

The indicators will be introduced in 2006 for optional reporting by Divisions.

### *ACT Community Care Performance Indicators*

In 2005, APHCRI was contracted by ACT Community Care to develop a set of performance indicators for a number of its programs.

Using the same conceptual framework adopted for the National Performance Indicators for Divisions of General Practice, Associate Professor Beverly Sibthorpe, Karen Gardner and Duncan Longstaff worked with Bev Gow-Wilson, Clare McGurk and program managers to develop indicators and technical details for: alcohol and drug, dental, parenting, child protection, diabetes, falls prevention, pain management, nutrition and wound management programs.

This work is due for completion and will be launched by ACT Community Care in early 2006.

### *APHCRI Dialogue*

In accordance with the work plan 2005 APHCRI launched its policy commentary document *APHCRI Dialogue* in June 2005.

The *Dialogue* was published twice in 2005, with the first edition introducing the publication and the second summarising the discussions at the *More Strategic Use of the Health Dollar* workshop hosted by the Institute in October 2005.

The *Dialogue* also examined health issues as they were reported in the media, initially in a three month review, and secondly on the topic of health spending.

The *Dialogue* was disseminated to a list of healthcare stakeholders and attracted the interest of others who have asked to be added to the dissemination list.

*APHCRI Dialogue* will be published quarterly.

### *APHCRI@work*

To build on APHCRI's hub and spoke 'virtual institute' model and develop communications with Spoke teams *aphcri@work* was launched in December 2005.

The bi-monthly newsletter will update Spoke teams on the work being done at the Hub and by each team across Australia.

The first newsletter was sent to Spoke teams and the Department of Health and Ageing.

### *Website*

In 2005 the APHCRI website was web-mastered by Hub Staff to ensure faster and more accurate updating of information.

A 'News and Events' page has been added, along with an 'Updates menu' on the 'Home' page, which is regularly refreshed.

This has also meant presentations and lectures given by APCHRI Hub Staff, Visiting Fellows and guests have been updated in a timely fashion.

There has been a steady increase in hits on the website in 2005, with a marked increase in activity when APHCRI announcements have been made or a *Dialogue* published. There were a total of 112,781 hits on the website during the year.

Quarterly results are represented in the following table:

Hits on the APHCRI website

Quarter	Website Hits
January – March	17 462
April – June	30 968
July – September	31 957
October – December	32 394
Total	112 781

The Institute uses its website to promote its work and that of its research teams in a way that is easily accessible by the public and health professionals alike.

## *Media*

The Institute developed its media profile in 2005 with the employment of a Program Co-ordinator: Communications and Policy Liaison.

In 2005, the work of the Hub and Spokes was the subject of 45 press articles, and radio, television and newspaper mediums. The articles included feature articles, opinion pieces by APHCRI Hub Staff and live radio interviews. One was a feature article in *The Australian* on APHCRI's role and ambitions.

APHCRI had nine focused press releases as part of its 2005 media strategy. The releases were to support the announcements of Streams Three and Four; to highlight lectures being given by Hub Staff; and to promote Visiting Fellows. There were also 38 interview requests made by a variety of media sources.

APHCRI Hub also contributed articles to the outreach and dissemination activities of The Primary Health Care Research and Information Service (PHCRIS), with four articles by APHCRI staff published in their newsletter in 2005.

EurekAlert is an international medical and science press agency, accessed by health journalists around the globe. APHCRI releases are posted to the EurekAlert site and statistics from the site indicated APHCRI press releases received an average of 500 hits with each posting.

## *Forums/Seminars*

### *Conferences*

#### *GP& PHC Research Conference*

As stated in the work plan 2005 APHCRI sponsored Professor Jonathan Lomas as a keynote speaker to the 2005 GP & PHC Research Conference in Adelaide.

Professor Lomas, Chief Executive Officer, Canadian Health Services Research Foundation gave a presentation with Professor Glasgow, Associate Professor Sibthorpe and Robert Wells entitled: Innovation at the research policy interface at the conference.

He also presented a workshop held in Canberra at the end of July attended by Department of Health and Ageing policy staff, NHMRC staff and the Australian Divisions of General Practice. The presentation was well received

#### *4<sup>th</sup> Health Services & Policy Research Conference*

APHCRI was a major sponsor of the 4<sup>th</sup> Health Services & Policy Research Conference, a biannual international policy and research conference in 2005.

APHCRI sponsored Professor Huw Davies, Professor of Health Care Policy and Management at the University of St Andrews, as a keynote speaker at the conference.

Professor Davies gave the presentation: Understanding Non-academic Research Impact at the conference. He also led a round-table discussion and was a Visiting Fellow at APHCRI while he was in Australia. APHCRI staff also participated in the conference. Professor Nicholas Glasgow presented at a session, giving a paper entitled: Evidence and Practice.

The Health Services & Policy Research conference has a significant reputation internationally and attracts speakers and delegates of renown. The 2005 conference brought speakers from the United

Kingdom, United States of America and Lebanon and a strong contingent from around Australia to Canberra in November.

Among the international guests was Robin Osborn, Vice-President and Director of the Commonwealth Fund who expressed an interest in APHCRI's work.

### *APHCRI Stakeholders Database*

APHCRI has developed a stakeholders database of relevant primary health care stakeholders. The database is used to inform stakeholders about APHCRI developments (eg. Stream announcements, the dissemination of *APHCRI Dialogue* and other relevant information). Stakeholders are also encouraged to participate in APHCRI strategic planning, through active participation in planning days, forums, etc.

### ***2.3 Provide advice to the Department of Health and Ageing to inform the development of policy***

Both Professor Nicholas Glasgow and Associate Professor Beverly Sibthorpe provided advice to the Department of Health and Ageing through 2005 as required.

Professor Glasgow was involved in advising on the strategic planning for the second round of the Primary Health Care Research and Development Strategy.

Professor Sibthorpe's advice centred on the development of the National Performance Indicators for the Divisions of General Practice (NPIDGP).

Professor Sibthorpe and other APHCRI Hub staff also gave advice on performance indicators to a number of other program areas across the Department.

APHCRI also provided advice and project management assistance on the development of a DVD on the NPIDGP that was part of the Department of Health and Ageing's dissemination strategy and sent out to all Divisions.

During 2005 APHCRI developed processes to allow its research programs (and other activities) to respond in a timely manner to emergent issues. This was demonstrated by the development of Stream Four. In addition, through its strategic planning processes, APHCRI is ensuring that its research program is gathering a body of evidence relating to key research priorities that can be drawn upon if/when issues arise.

### ***2.4 Stimulate an informed national primary health care policy debate and maintain a watching brief on primary health care policy issues.***

The APHCRI Hub hosted three policy forums in 2005.

#### *Performance Assessment in Primary Health Care Forum (Canberra, July 2005)*

The forum was held to discuss developments and future policy challenges and options in primary health care performance assessment in Australia and New Zealand. Held in Canberra, the forum attracted 35 delegates from Australian and New Zealand health departments, general practice groups and universities.

There was lively debate during the one and-a-half day forum about the purpose of and approaches to performance assessment; levers, incentives and rewards; threats and perverse consequences; and likely future directions.

The forum opened with scene-setting presentations by Associate Professor Beverly Sibthorpe for Australia and Professor Peter Crampton, Dr Roshan Perera and Professor Anthony Dowell from the Wellington School of Medicine and Health Sciences, Otago University for New Zealand. John O'Brien, Director of Health Policy at the Center for Health Program Development and Management at the University of Maryland drew on his many years of public sector experience in the United States both to help set the scene in broader international context and reflect on the discussions at the forum's close.

A report on the forum is due for release in early 2006.

*Measuring performance in primary health care – comparing the Australian and New Zealand experience (Brisbane, July 2005)*

As part of APHCRI's outreach strategy, those who presented papers at the *Performance Assessment in Primary Health Care Forum* in Canberra travelled to Brisbane to present again to a special meeting co-hosted by Queensland Divisions of General Practice in Brisbane. The meeting was well attended and there was a high level of interest in the issues presented.

*More strategic use of health dollar (Melbourne, October 2005)*

Directly in relation to its brief to stimulate policy debate the Institute convened a meeting to discuss the issues around health care funding and the continuing deliberations around budget holding or fund holding. The October meeting focused on the issue of pharmaceutical budget holding, but also examined many of the issues relating to budget holding more broadly.

The meeting considered the benefits and negative effects budget holding could have on the Australian system, with consideration of issues like access, service provision and resource use.

The meeting was well attended by senior members of every general practice organisation, along with State and Federal health department policy staff.

APHCRI produced a paper after the meeting, which was disseminated through *APHCRI Dialogue*.

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

#### ***3.1 Review the evidence for primary health care research capacity building***

APHCRI undertook and completed work examining research capacity building during 2004 and 2005. As a result, APHCRI identified a specific aspect of research capacity building not currently being addressed either by other aspects of the PHC RED strategy or as a primary focus of other groups working in Australia – capacity building at the research/policy interface.

APHCRI is ideally positioned to enhance capacity at the research/policy interface, with a view to creating a rich and diverse base of relevant and useful research evidence. The objectives of APHCRI's strategy include:

- Enhancing the capacity of policymakers to see the value of research in primary care;
- Enhancing policymakers' understanding of the concerns and expectations of those in a position to conduct primary care research;
- Enhancing the capacity of researchers to understand the imperatives faced by policymakers, and to take these into account in designing, conducting and communicating research;
- Enhancing the capacity of policymakers and researchers to address common problems together;
- Enhancing the capacity of primary care providers to work with policymakers and researchers around common issues; and
- Involving consumers, the ultimate beneficiaries of improving primary care, in the dialogue surrounding how research capacity can be enhanced.

### *Postgraduate Research Training*

In 2005, doctoral student Sanchia Shibasaki, transferred her enrolment to APHCRI. Her supervisory panel is chaired by Associate Professor Beverly Sibthorpe and her other supervisors are: Professor Nicholas Glasgow and Dr John Condon, Menzies School of Health Research in Darwin.

Sanchia Shibasaki's research, the Information Atlas Project, aims to identify the strategic information management practices needed by primary health care services to provide chronic disease management, with a particular emphasis on diabetes patient management.

Using a case-study methodology she is carrying out field work in a community controlled Aboriginal Medical Service, a state community health centre and two private general practices – one urban and one rural.

### ***3.2 Develop strategic partnerships and collaborations and ensure that all funded research has an explicit capacity development component.***

#### *The Australian National University*

During 2005 APHCRI continued to develop its identity as part of The Australian National University (ANU) including attending meetings regarding the future development of the health and medical science interests at ANU.

Several APHCRI staff were involved in development proposals for the creation of the new College of Medicine and Health Sciences, which will begin in 2006 and of which APHCRI will be a part. Professor Nicholas Glasgow will chair the Research Committee of the new college.

Within its setting at the ANU APHCRI also networked with a number of important groups of direct relevance to its work. These included the ANU Medical School, the Centre for Mental Health Research, the National Centre for Epidemiology and Population Health and the John Curtin School of Medical Research, all of which will be members of the new college.

#### *National networks*

Productive relationships with key stakeholders through national networks are fundamental to APHCRI meeting its strategic mission and goals. It is through these networks that APHCRI will:

- Facilitate the adoption of research evidence into policy;
- Maximise synergies between APHCRI and organisations that have some common spheres of activity;
- Minimise "duplication" or redundancy of effort for APHCRI and those same organisations in the common spheres of activity; and
- Allow APHCRI to meet its national leadership mandate.

The major groupings of stakeholders include the Australian Government through the Department of Health and Ageing; the research community in Australia; providers of primary health care services and their organisations and consumers of primary health care services and their organisations.

The Institute continued to build on and develop its relationships with primary health care stakeholders in 2005.

Stream Four is an example how the national networks have contributed to APHCRI's research programs.

APHCRI has actively participated in several activities with key general practice organisations. It jointly sponsored an Indigenous Health Scholarship with the Royal College of General Practitioners (RACGP). It continued its work with the Australian Divisions of General Practice (ADGP) on the National

Performance Indicators for Divisions of General Practice, and also wrote a monograph (Primary Health Care Position Statement: A Scoping of the Evidence) to accompany the ADGP Primary Health Care Position Statement. The Institute hosted a meeting of the General Practice Representative Group (GPRG) to develop a primary health care national policy. Representatives from all general practice bodies have been involved in the various meetings, strategic planning days and forums the Institute held in 2005.

APHCRI and the Primary Health Care Research Information Service (PHCRIS) worked closely together during 2005. They regularly discussed their work to seek opportunities to collaborate, and the most tangible result of this in 2005 was the contribution APHCRI was able to make to the PHCRIS run GP&PHC Research conference in July. APHCRI provided financial support to Professor Jonathon Lomas to attend Australia as a Visiting Fellow, and while here, participate as a keynote speaker at this meeting.

APHCRI worked closely with the Health Services Research Association of Australia and New Zealand conference organising committee in order to raise the profile of both APHCRI and primary health care research at the 4th Health Services & Policy Research Conference in November (see 2.2). APHCRI was a major sponsor of this conference. At this meeting, APHCRI formed links with the Commonwealth Fund, and discussed the possibility of undertaking joint work in 2006.

Professor Nicholas Glasgow represented APHCRI at a number of national events and conferences in 2005. He attended major general practice meetings during the year, including the Australian Medical Association, ADGP and RACGP conferences. Professor Glasgow also took part in the 8<sup>th</sup> Rural Health Conference, in Alice Springs. Attendance at these conferences has improved APHCRI's profile with both stakeholders and international visitors.

### *International networks*

Key authorities on the uptake of research evidence into policy and practice were identified through the two literature reviews APHCRI undertook in 2004 and finalised during 2005.

In 2005 Professor Glasgow travelled internationally on two occasions to meet these authorities, talk about APHCRI and ensure that experts at the forefront of their fields informed APHCRI's work.

In January, Professor Glasgow spent a week with Professor Jonathon Lomas and his team at the Canadian Health Services Research Foundation in Ottawa. Professor Jonathan Lomas is the author of the linkage and exchange approach that APHCRI has adopted. In July he became a Visiting Fellow at the Institute.

During this trip, Professor Glasgow spent a day with Professor John Lavis. He is the Canada Research Chair in Knowledge Transfer and Uptake, Associate Professor in the Department of Clinical Epidemiology and Biostatistics, Member of the Centre for Health Economics and Policy Analysis, and Associate Member of the Department of Political Science at McMaster University. A number of his seminal writings on the links between evidence and policy underpin APHCRI's approaches.

In June/July Professor Glasgow spent four weeks travelling to the United Kingdom and the World Health Organisation in Geneva. He met with Professor Nicholas Mays, Dr Ellen Nolte, and Dr Naomi Fulop at the London School of Hygiene and Tropical Medicine, University of London. These discussions involved not only the links between evidence and policy, but also approaches to systematic review, research work on primary health care systems in Europe; and the management of research funds through the NHS Service Delivery and Organisation Research and Development Programme. He spent time with Professor Trisha Greenhalgh at the University College London. An international leader in primary care and respected author of numerous books and articles, Professor Greenhalgh's recent writings have focused on the value of evidence generated through different research paradigms.

On this trip Professor Glasgow also met with Professor Huw Davies (Professor of Health Care Policy and Management at the University of St Andrews), Professor Christopher Dowrick, Professor of Primary Medical Care in the University of Liverpool, and Dr Tikki Pang, Director, Research Policy & Cooperation,

World Health Organization, Geneva, Switzerland. All of these accepted invitations to be Visiting Fellows to APHCRI.

The final visit in the UK was to York and Professor Jos Kleijnen, Director of the Centre for Reviews and Dissemination. This Centre is expert in undertaking systematic reviews, and these discussions were very useful in shaping approaches used in Stream Four.

The Australian National University Medical School is developing formal links with key Chinese medical institutions. One of the priorities identified by Chinese officials is the development of the primary health care sector. In light of this, Professor Glasgow was invited to be part of the delegation from the Australian National University Medical School to China in 2005. The delegation visited medical schools in Shanghai and Beijing.

During 2005, Associate Professor Beverly Sibthorpe made two overseas visits to examine developments in performance assessment in New Zealand and the United Kingdom. The outcomes of these visits included the forum on Performance Assessment in Primary Health Care (see 2.4), an APHCRI Visiting Fellowship and progress on a co-authored publication.

In New Zealand Professor Sibthorpe attended the annual national meeting of the Independent Practitioners Association Council (IPAC), visited a number of IPAs, met with officers from the Auckland District Health Board and gave a presentation to the Ministry of Health on the National Quality and Performance System for Divisions. These meetings enhanced key policy and research linkages with our neighbours across the Tasman. The main focus was the measurement of quality and performance assessment in primary health care.

In June Professor Sibthorpe was a visitor at one of APHCRI's 'sister' institutions – the Health Services Management Centre (HSMC) at the University of Birmingham. The focus of her visit was developments in the recently implemented Quality and Outcomes Framework in British general practice, and the impacts of regional purchasing by Primary Care Trusts (PCTs). While there she:

- attended the annual NHS Confederation Conference;
- attended the NHS Alliance national meeting entitled "Changes in Practice";
- visited two PCTs and a number of general practices;
- met with researchers and policy advisors, including from the NHS Alliance and the Department of Health; and
- gave a guest lecture at HSMC on the Australian health care system to medical students from Maastricht.

Discussions were also held with her host, Judith Smith, about a co-authored paper setting Divisions of General Practice in international context (for completion in 2006).

Her visit strengthened APHCRI's ties with the United Kingdom, extended its international reputation and afforded the Institute a first-hand view of key reforms in the NHS that have relevance for Australia.

On the return journey Professor Sibthorpe met with Professor Nicholas Mays at the London School of Hygiene and Tropical Medicine. Among the issues discussed was a return trip to APHCRI by Professor Mays in 2006. She also met with Eugenia Cronin.

Both international visits informed the development and success of the Performance Assessment Forums held in Canberra and Brisbane in July.

During 2005, Professor Sibthorpe was also involved in two research projects in New Zealand, one relating to primary health performance measures and the other the development of a tool-kit for measuring community engagement by primary health care organisations.

As major research projects have developed APHCRI has increased its international networks with the inclusion of international researchers in teams involved in Stream Three work. This will also add to the dissemination of the completed research.

***3.3 Develop opportunities for pursuing APHCRI's core business by undertaking funded research through other agencies and by linking with development programs such as the Harkness and Packer fellowships and NHMRC fellowship schemes.***

With some of the early establishment activity coming to an end in 2005, APHCRI was able to explore broadening its funding base through NHMRC proposals formulated with other organisations.

NHMRC funding was awarded, on a collaborative basis to two projects:

- Research into a potential Avian influenza induced pandemic: The role of the Australian General Practice sector in pandemic influenza.
- Optimising prevention and the management of care for Australians with or at risk of serious and continuing chronic illness.

Professor Nicholas Glasgow undertook a consultancy for Australian General Practice Training and Education (GPET) looking at the implementation of the Royal College of General Practice Standards.

***3.4 Develop opportunities for enhancing research capacity through professional interaction, such as collaborations with similar primary care research institutes internationally, participation at key national and international conferences and a Visiting Fellows program.***

***3.4.1 Visiting fellows***

*Judith Smith*

Senior Lecturer, Health Services Management Centre, University of Birmingham, United Kingdom  
February 2005

Judith Smith has been involved in health services research and development for nine years, before which she worked as a senior manager in the National Health Service. Her research interests are concerned with primary care, commissioning, the development of health care organisations, and international health care.

Judith Smith spent a week with APHCRI, which involved several meetings to discuss APHCRI's role in the international environment. She also gave a seminar and met with stakeholders from the Department of Health and Ageing.

Her seminar set out the findings of a recent review of the research evidence on the effectiveness of primary care-led commissioning (Smith et al, 2004). In presenting these findings, Judith Smith focused on the risks and opportunities that primary care-led commissioning presents to a health system, including in her discussion an analysis of the implications for both policy and practice in primary care.

*John O'Brien*

Director of Health Policy, Center for Health Program Development and Management, University of Maryland, United States of America  
July 2005

John O'Brien has more than 25 years experience in the design, delivery, and assessment of health care systems at local, state and federal levels. The work of he and his staff addresses issues related to the operation of state Medicaid programs that deliver health services to poor and disabled populations. A focus of his work has been the development of the infrastructure and tools necessary to monitor the performance of capitated systems of service delivery.

John O'Brien spent three days with APHCRI, participating in the performance assessment forum in Canberra, and a similar meeting with Division members in Brisbane. He came to Canberra after working in New Zealand on a project entitled 'Comparing Health Care Performance Measurement in the US and New Zealand: Do we ask the same questions, and what influences the answers?' The project looked at health care system performance assessment methods in New Zealand and the United States. His presentation at the Performance Assessment Forum reflected this work.

*Professor Peter Crampton*

Head of Department, Department of Public Health, Wellington School of Medicine and Health Sciences, New Zealand  
July 2005

Professor Crampton has a background in public health medicine and general practice. His research is focused on social indicators and social epidemiology, primary care policy, and primary care organisation and funding. He has a research interest in performance monitoring in primary health care, and has served on numerous advisory panels for the New Zealand Ministry of Health in a variety of policy areas related to public health and primary care.

Professor Crampton spent three days with APHCRI, participating in the performance assessment forum in Canberra, and a similar meeting with Division members in Brisbane. His experience developing performance assessment tools in New Zealand informed his contribution to the debates in Canberra and Brisbane.

*Professor Jonathan Lomas*

Chief Executive Officer, Canadian Health Services Research Foundation, Canada  
July 2005

Professor Jonathan Lomas heads the Canadian Health Services Research Foundation, a nationally endowed organisation founded in 1997 to improve the relevance and use of health services research in health system decision-making. His background includes work or training in psychology, health economics, epidemiology, political science, and management. From 1982-1997 he was a Professor of Health Policy Analysis at McMaster University in Hamilton, Canada, where he co-founded the Center for Health Economics and Policy Analysis - an applied research group with a strong emphasis on research dissemination and uptake. He has published two books and numerous articles and chapters in the area of health policy and health services research. His main interest, and the area in which he has an international reputation, is the role and impact of research evidence in health systems decision-making.

Professor Lomas spent a week with the APHCRI team while attending the GP&PHC Research Conference as a keynote speaker. He was involved in presenting, alone and with APHCRI staff, at the conference.

*Dr Tikki Pang*

Director of the Research Policy & Cooperation Department at the World Health Organization in Geneva, Switzerland  
October 2005

Dr Tikki Pang has held positions as Associate Professor, Department of Medical Microbiology, Faculty of Medicine and Professor of Biomedical Sciences, Institute of Postgraduate Studies and Research, University of Malaya in Kuala Lumpur, Malaysia.

His research interests include: epidemiology, pathogenesis and laboratory diagnosis of dengue virus infections; molecular epidemiology and genetic diversity of enteric pathogenic bacteria; immunology and pathogenesis of typhoid fever; novel diagnostic and immunisation approaches in infectious diseases; vaccination against tropical diseases; prevention and control of infectious diseases and impact on economic development; development of research capabilities in developing countries; assessment of health research system performance, knowledge utilisation and translation, health research policy, health systems research; impact and application of modern biotechnology on developing economies.

Dr Pang spent a day with APHCRI and met with various ANU staff in the health fields. He presented a seminar on challenges in health research, which was attended by policy staff and academic staff from across campus.

*Professor Huw Davies*

Professor of Health Care Policy and Management, University of St Andrews, Scotland

November 2005

Professor Davies is Co-director of both the Centre for Public Policy and Management and the Economic and Social Research Council-funded Research Unit for Research Utilisation at the University of St. Andrews. He holds numerous posts in service delivery and health systems organisations in the United Kingdom. Professor Davies' research interests are in health care policy and management, encompassing evidence-based policy and practice, performance measurement and management, accountability, governance and trust. He also has a particular interest in the role of organisational culture in the delivery of high quality services.

Professor Davies spent three days with APHCRI, during which time held a round-table discussion on research impact in health care. He was also a keynote speaker at the 4th Health Services & Policy Research Conference in Canberra.

*Visitors*

A number of visitors came to APHCRI in 2005. A list of them and their presentations can be found in Appendix V.

**3.4.2 *Speaking engagements by APHCRI Hub staff***

Professor Glasgow, Professor Sibthorpe and Robert Wells had a number of speaking engagements in 2005. A complete list of these and their presentations can be found in Appendix IV.

**4 To ensure that APHCRI operates to the highest standards by developing and improving it's organisational capacity to lead the national primary health care research network through appropriate staffing, resource, infrastructure, management practices and governance and accountability.**

*Budget performance*

APHCRI general funds finished 2005 with a surplus. The principal reason for this surplus is the Common Pool of Performance Indicators for Divisions of General Practice project will not be completed until April 2006. This was due to Division requests for a time extension to ease their workload.

APHCRI research funds finished 2005 with a surplus. However, there are substantial on-going commitments to projects in Stream Three and Stream Four.

APHCRI Hub research finished 2005 with a surplus. The principal reason for this is the three Hub research projects due for completion in 2006. In addition there is one Hub proposal being considered by the Research Advisory Board.

APHCRI, in accordance with the agreement with the Australian Government Department of Health and Ageing, will discuss with the Department plans to deploy these surpluses. Once Department approval is obtained APHCRI will include these in 2006 projections.

Statement of income and expenditure for APHCRI General Funds 2005

See Appendix VI

Statement of income and expenditure for APHCRI Research Funds 2005

See Appendix VII

Statement of income and expenditure for APHCRI Hub Research Funds 2005  
See Appendix VIII

### *Contractual obligations*

In 2005 APHCRI satisfied all of its contractual obligations to the Australian Federal Government.

In April 2005 The Australian National University and the Department of Health and Ageing finalised a variation to the Funding Agreement that enabled the allocation of funding to underpin APHCRI's competitive research program and support the research program of APHCRI Hub staff. The variation also revised the clauses relating to the payment of GST on APHCRI funds.

#### **4.1 *Recruit, develop and retain staff***

The number of staff at APHCRI increased significantly in 2005, in line with the growth in activity of the Institute.

Karen Gardner joined the Hub staff as a full-time researcher. She has worked closely with Associate Professor Beverly Sibthorpe on performance indicator development (Department of Health and Ageing and ACT Community Care), the hub research project on the impact of the introduction of the National Performance Indicators for Divisions of General Practice, and the Southern Highlands cost impact study.

Three new research assistants joined the hub staff, two on a part-time basis and one full-time until early 2006. Anna Gear, Dhigna Rubiano and Sean Lyons all joined APHCRI in July and August 2005. They have supported the hub research work of Professor Glasgow and Professor Sibthorpe. All three research assistants have supported a number of important APHCRI projects in 2005 including: the preparation of material for the ADGP monograph that underpinned their National Primary Health Care position statement, background research for the creation of a National Primary Health Care policy for GPRG, and hub research projects on workforce.

In 2006 the administration support role became a job-share position and Kimberley Brady became part of the APHCRI team.

Dr Chris Kelman took on a short-term project for APHCRI during October and November. He investigated electronic data for primary health care outcomes (see 1.2.2).

#### **4.2 *Effective Governance***

APHCRI has employed effective governance arrangements in 2005.

The Research Advisory Board (RAB), which helps guide the Institute's research, met four times during the year. The RAB provided feedback to successful and unsuccessful grant applicants contributing to the transparency of the grant process. The RAB also reviewed its performance and the strategic directions of APHCRI in November 2005.

There were three Expert Review Committee (ERC) meetings in 2005. These meetings gave feedback to the RAB. Through the ERC process research proposals were independently and objectively reviewed to ensure the quality and relevance of commissioned research.

APHCRI allocated research funding and established research contracts with 15 research organisations in Streams Three and Four. As well as finalising all arrangements under the research contracts for Streams One and Two.

In 2005 APHCRI involved its stakeholders in a Strategic Planning Day. This event was organised as APHCRI reached the middle of its funding contract to give stakeholders an opportunity to discuss the

development of the Institute and its direction in the next years of its funding contract. A broad mix of stakeholders, including Department of Health and Ageing staff, APHCRI research teams and representatives from general practice organisations attended the meeting, which was led by a facilitator. The results of this, and a staff-planning day, fed into the development of the APHCRI Work Plan 2006.

### *ANU Strategic Requirements*

#### Membership on Committees and Outreach

APHCRI staff are members of a number of national and international committees. In 2005 they participated in meetings of:

Australian Drug Evaluation Committee (Professor Glasgow);

Australian Medical Council (Professor Glasgow);

NHMRC Aboriginal and Torres Strait Islander Health Research Working Committee (Professor Sibthorpe);

NHMRC International Collaborative Indigenous Health Research Partnership (Professor Sibthorpe);

Member Australian Government Private Sector Investment Taskforce (Robert Wells);

Advisor Australian Government Taskforce on Neuroscience Research (Robert Wells).

### **4.3** *Effective Management*

In 2005 APHCRI reviewed and streamlined the processes for funding under its research program. APHCRI documented best practice processes, contracts, tools and resources to supporting the funding and co-ordination of research. The rollout of two additional research streams in 2005, and the management of milestones under the various spoke funding contracts demonstrate the success of this systematic approach. In addition the documentation of administrative procedures, in the form of a procedures manual, provides transparency of process and ensures that these procedures are also consistent with ANU requirements.

APHCRI actively participated in the process associated with the implementation of the College of Medicine and Health Sciences in 2006.

### **4.4** *Performance Reporting*

APHCRI met all reporting requirements under the Funding Agreement with the Department, submitting four Quarterly Publications notices, the Annual Report, and required financial statements. The Director, Deputy Director and Institute Manager met with members of the Department throughout the year to ensure that APHCRI continued to meet its obligations under the Funding Agreement.

APHCRI met all ANU reporting requirements including submissions to ANU committees, budget reviews, and DEST reporting.

APHCRI also ensured that the reporting requirements of spokes under their funding agreements were met.



*Australian Primary Health Care Research Institute*

*Work plan 2006*

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
<b>1 A STRONGER KNOWLEDGE BASE</b>		
<b>1.1 Identify priority research questions</b>	Continuous review of priorities by RAB in consultation with stakeholders (see process for identifying priorities for Stream Six in 1.2.1 below)	Commissioned research addresses priority questions relevant to the needs of primary health care
<b>1.2 Manage a National Research Program</b>		
1.2.1 Spokes Research		
Stream One	Conduct a workshop on sustainability in research (July 2006)	The capacity of the primary health care workforce is enhanced through the incorporation of approaches to sustainability in research
Stream Two / Stream Three	<p>Maintain regular communication with Stream Three participants including monitoring contract progress and regular newsletters</p> <p>Workshop with Jane Gunn / Prof Dowrick on policy and evidence (6 Feb 2006)</p>	<p>Submission of Financial Statement July 2006</p> <p>Submission of 2<sup>nd</sup> Progress Report December 2006</p> <p>Four issues of the APHCRI newsletter (APHCRI@work) are disseminated</p> <p>Links between the APHCRI Hub and Spokes as a virtual research community are strengthened</p> <p>Workshop presentations are publicly available on the APHCRI website</p> <p>An increased understanding of the inter-relationship between evidence and policy formulation is developed</p>
Stream Four	Two workshops as planned including additional meeting with Prof Nicholas Mays (30 January 2006)	<p>Workshop presentations are publicly available on the APHCRI website</p> <p>An increased understanding of approaches to incorporating primary health care policies and principles in chronic disease management and mental health is developed</p> <p>Final Reports submitted in September 2006</p>

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
1.2.1 Spokes Research (cont.)		
Stream Five  (under consideration by the Research Advisory Board)	Development of a research program focusing on the evaluation and health economic analysis of Divisional models addressing issues in primary health care One information workshop is developed and delivered	Up to six Division / University spokes are commissioned by July 2006 At the completion of the research in December 2007, models of primary health care intervention are identified and evaluated for their viability, sustainability and capacity to be transferred to other primary care contexts. This research informs future improvements in primary health care.
Stream Six  (To be considered by the Research Advisory Board in 2006)	Identification of directions and priorities for Stream Six based on the outcomes of Streams One, Three and Four	Stream Six commissioned in fourth quarter of 2006
1.2.2 Hub Research		
Southern Highlands Diabetes Program	Completion of report by April 2006	Report and possible publication Launch with partners in April 2006, media release The potential cost savings of a GP-based diabetes management program are evaluated Findings will inform the development of Stream Five
Electronic Data for Primary Health Care Outcomes	Finalisation of draft report by Jan 2006 and circulated through the PHCRIS network for comment and input	Report A resource, in the form of an inventory of Australian electronic datasets relevant to primary health care evaluation, is available, including the custodian and contact details for each Barriers to utilisation and opportunities for further development and improvement are identified

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
1.2.2 Hub Research (cont.)		
Impact of National Performance Indicators on Divisions Planning	Provision of draft report to participants for comment and finalisation of report by March 2006	<p>Report, disseminated to the PHCRIS network and the Department of Health and Ageing</p> <p>Through the evaluation of the implementation of performance indicators, and their further development, more effective utilisation of performance indicators is facilitated (we need to be careful we are not accused of evaluating our own work, can this be rephrased?)</p> <p>Results are expected to contribute to the evaluation of the National Quality and Performance System</p>
Workforce	Finalisation of draft report by September 2006	<p>Report</p> <p>Findings will be the basis for content of a <i>Dialogue</i> on Workforce in first quarter 2006</p> <p>Findings will contribute to the policy debate on solutions to the medical workforce shortages</p>
Division Performance Indicators Project II	Collation of information and preparation of the report by the end of April 2006	<p>Report</p> <p>Project outcomes provide additional performance indicators for the Divisions network</p>
Child Health – Readiness for school	Research commenced early 2006	<p>Through systematic review of the literature and identification of best practices and data, approaches to support assessment of performance are evaluated</p> <p>Research capacity in the primary health care sector (and in the Hub) is strengthened by supporting an early career researcher to develop a doctoral research program</p>
1.3 Provide support to researchers	See activities under Spokes research above	
1.4 Identify additional funding sources	See activities under 3.3 below	

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
<b>2 UPTAKE OF RESEARCH EVIDENCE</b>		
<b>2.1 Review the evidence for the facilitation of uptake</b>	Report completed 2005 No further activities planned for 2006	Activities to facilitate the uptake of research are informed by evidence-based approaches (eg. presentation of reports in 1:3:25 format)
<b>2.2 Disseminate and advocate new and existing knowledge</b>		
<i>APHCRI Dialogue</i> – national primary care policy bulletin	Publish four issues in 2006, including two developed by streams	Policy debate on national primary health care issues relevant to policy development is enhanced
Newsletter – <i>aphcri@work</i>	Develop and publish four issues per year	Connections and links within the APHCRI virtual research community are strengthened
Website	Maintain and enhance the APHCRI website	APHCRI information, events and publications are publicly accessible
Forums/Seminars	Plan and conduct workshops in relation to specific streams, as well one seminar on chronic disease (February) and a workshop on sustainability (July)	Workshop/seminar outcomes will contribute to a number of APHCRI goals including research dissemination, policy debate and research capacity building
Media	Plan and conduct briefing meetings with the media in accordance with the APHCRI Communications Strategy	The public profile of APHCRI as a resource in relation to policy evidence is enhanced Increased engagement with the media results in an enhanced contribution to policy debate
Partnerships	Conduct a joint meeting with PHCRIS in 2006 Participate in the planning committee for the GP & PHC Research Conference in July 2006	Collaboration with PHCRIS and the network ensures a more relevant and targeted approach and more efficient and effective use of resources

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
2.2 Disseminate and advocate new and existing knowledge (cont)		
Major Conference Presentations	<p>It is anticipated that hub staff will present at the following conferences:</p> <ul style="list-style-type: none"> <li>- QLD Divisions Forum</li> <li>- RACGP</li> <li>- ADGP</li> <li>- GP &amp; PHC Research Conference</li> <li>- AMA</li> </ul>	<p>Dissemination of new and existing knowledge The public profile of APHCRI as a resource in relation to policy evidence is enhanced</p>
2.3 Provide advice to the Department of Health and Ageing	<p>APHCRI provides advice to the Department through the availability of research outcomes, ongoing dialogue, participation in meetings and forums, responses to ad hoc requests and assistance with specific activities such as the 'Safe Harbour' meetings (see 2.4 below)</p>	<p>The Department has access to timely, responsive and policy-relevant advice and evidence to support its policy development functions</p>
2.4 Stimulate policy debate	<p>Utilise APHCRI's dissemination channels, such as <i>Dialogue</i> and engagement with media (see 2.2 above), to stimulate policy debate</p>	<p>Primary health care policy debate is enhanced and informed by research evidence</p>
	<p>Work with the GPRG to explore further opportunities for collaboration in the development of an approach to a National Primary Health Care Policy</p>	<p>Discussions and deliberations on the development of a National Primary Health Care Policy are supported and informed by collaboration between APHCRI and GPRG</p>
	<p>Plan and conduct at least one 'Chatham House' or 'Safe Harbour' meeting on topics to be determined</p>	<p>An independent and 'safe' discussion environment is provided to facilitate open debate between key opinion leaders on national policy issues relevant to primary health care</p>
	<p>Position APHCRI as a key national resource for Government (Ministers and Shadow Ministers and their policy advisors) and local members in relation to research evidence to support policy decisions</p>	<p>The profile and work of APHCRI is enhanced Understanding of the role and contribution of APHCRI in developing knowledge to inform policy is increased</p>

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
<b>3 ENHANCED RESEARCH CAPACITY</b>		
<b>3.1 Review the evidence for capacity building</b>	Work completed in 2005 Use this material to develop 1:3:25 template in 2006	Capacity building activities are informed by evidence-based approaches 1:3:25 template developed for future use in APHCRI work
Postgraduate Research Training	Supervision of PhD Students	Develop research capacity in primary health care
<b>3.2 Develop strategic partnerships and collaborations</b>	Sponsorship of the RACGP Indigenous Award	Primary health care research capacity directly related to indigenous health is enhanced
	Develop a network of national and international organisations and individuals with interests and expertise in primary health care Also see 2.2 above	APHCRI's profile and reputation internationally is enhanced Opportunities for collaboration are identified Potential future visiting fellows and other experts are identified
	Also see 3.3 below	
<b>3.3 Develop opportunities for funded research</b>		
Consultancies	GPET	Report Through an assessment of the viability of new educational standards, barriers to implementing improvements in primary health care practice are evaluated and addressed APHCRI's external funding base, profile and reputation and capacity in the delivery of externally funded research services are enhanced
NH&MRC Funding	Avian Flu EOI (do we want to include more information now?) Health Services Research Program, Round 2	APHCRI's external funding base, profile and reputation and capacity in the delivery of externally funded research services are enhanced

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
<b>3.4 Develop opportunities for professional interaction</b>		
Visiting Fellows	Professor Larry Green, USA (July 2006) Professor Nicholas Mays, UK (Jan 2006) Professor Christopher Dowrick, UK (February 2006)	APHCRI's short-term capacity within the Hub is enhanced The national leadership role which APHCRI plays in policy-related research evidence is strengthened APHCRI's international links and networks is strengthened through collaboration Activities of the visiting fellows will contribute to a number of APHCRI goals including synthesis of research evidence, dissemination of research, policy debate and research capacity building
Major Conference Presentations	See 2.2 Above	
<b>4 AN EFFECTIVE ORGANISATION</b>		
	APHCRI undertakes a wide range of administrative and managerial 'enabling' activities to support its operations, including planning, reporting, contract management, financial and resource management, stakeholder engagement, advocacy and liaison with ANU and the Department. In addition to these ongoing activities, APHCRI has a number of priority activities for 2006 as listed below.	APHCRI operates as an efficient and effective organisation
<b>4.1 Recruit, develop and retain staff</b>	Recruit, induct and train new staff for current vacancies	Appropriate APHCRI Hub capacity and expertise is established
	Provide professional development opportunities for Hub staff in research, management and leadership skills	The capacity of Hub staff is developed and maintained to support its operations

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
<b>4.2 Effective governance</b>	Undertake strategic planning for 2007 and beyond and develop the 2007 Work Plan	APHCRI's current and future work is informed by a rigorous and ongoing assessment of the strategic environment, imperatives and priorities for research in primary health care and operational risks
	Conduct four RAB meetings in 2006	Research priorities are identified and relevant research programs developed
	Conduct ERC meetings as appropriate and in accordance with established guidelines and procedures	Research proposals are independently and objectively reviewed to ensure the quality and relevance of commissioned research
<b>4.3 Effective management</b>	Management of the activities of the Institute by the Executive Group	Effective strategic and operational management of the Institute's activities
	Ongoing internal review and evaluation of operational systems and procedures	Improved efficiency and effectiveness of management systems and procedures
	Development of a systematic approach to determining APHCRI's response to new activities and opportunities	Strategic and efficient use of APHCRI resources to develop new activities which are relevant and consistent with APHCRI priorities and directions
	APHCRI staff to engage in professional development activities relating to procurement processes	Effective monitoring and accountability of APHCRI financial management
<b>4.4 Performance reporting</b>	Prepare, monitor and review regular financial reports	Effective monitoring and accountability of APHCRI financial management
	Participate in and / or provide reports to ANU committees, including Board and Committees such as the Education, Administration, Ethics, Executive, Research, Deans and Directors and Science, Health and Engineering Research Committees	APHCRI fully complies with all ANU reporting and accountability requirements
	Provide the Department of Health and Ageing with Quarterly publications notices	Monitoring and measurement of research output
	Prepare the 2006 Annual Report	Monitoring and measurement of APHCRI performance and accountability for the investment in primary health care research

GOALS AND STRATEGIES	ACTIVITIES IN 2006	EXPECTED OUTCOMES
<p><b>4.5 Service to the University</b></p>	<p>The Director will participate as a member on the following ANU Committees:                      Member, Executive, College of Medicine and Health Sciences (CMHS)                      Chair, Research Committee, CMHS                      University Committee on Research Policy                      Deans and Directors                      Divisional Research Committee for Sciences, Health and Engineering (SHE)                      NIHHS – National Institute of Health and Human Sciences - ANU</p>	<p>Satisfy ANU requirements                      Raise APHCRI Profile</p>
<p><b>4.6 Service to the Community</b></p>	<p>The Director will participate as a member on the following external committees/organisations:                      ADEC – Australian Drug Evaluation Committee (core member)                      ALF – Australian Lung Foundation.                      NAC – National Asthma Council.  <i>TSANZ – Thoracic Society of Australia and New Zealand.</i>                      AMC – Australian Medical Council.</p>	<p>Satisfy ANU requirements                      Raise APHCRI Profile</p>

**APHCRI 2006 Budget Projection**

	<b>2006 General budget</b>	<b>2006 Research Budget</b>	<b>2006 Hub Research Budget</b>
<b>Income</b>			
2005 Dept. Approved Underspend	40,112.23		8,672.40
Stream 3 & 4 Contracted Funds accrued in 2005		1,482,742.18	
2005 Approved Roll-Over Hub Projects			180,592.00
2006 Dept. Health & Ageing	1,000,000.00	3,000,000.00	200,000.00
2006 anticipated Interest	8,000.00	20,000.00	4,000
<b>Total Income</b>	<b>1,048,112.23</b>	<b>4,502,742.18</b>	<b>393,264.40</b>
<b>Expenditure</b>			
Salaries & related costs:			
Academic	408,300.00		
General (including RAs)	228,210.00		
Consultancies	19,034.00		
Equipment	23,000.00		
Travel, meetings & related costs:			
Travel - national & International, conference expenses etc	41,700.00		
Visiting Fellowships	20,000.00		
	50,000.00		
Research Advisory Board + support			
Workshop/Forums/Safe Harbour	60,000.00		
Expert Review Committee	10,000.00		
Incidentals (car hire /taxis etc)	6,800.00		
Other expenses:			
SLA with CMHS for building infrastructure, admin support, phones, computer consumables, printing etc	83,090.00		
Entertainment, FBT etc	10,500.00		
Exchange losses, sitting fees, advertising, publication, postage, removals, stationery etc.	34,600.00		
Additional pool of Performance Indicators for Divisions of General Practice	40,000.00		
Spokes (Stream 3) Contracted Funds 2006		750,369.00	
Spokes (Stream 4) Contracted Funds 2006		862,100.00	
Spokes (Stream 5)*		850,000.00	
Spokes (Stream 6)**		750,000.00	
Hub Project: Southern Highlands			46,395.00
Hub Project: NQPS			27,500.00
Hub Project: Workforce			106,697.00
Hub Project Proposal: Children*			100,072.00
Hub Proposal**			100,000.00
<b>Total Expenditure</b>	<b>1,035,234.00</b>	<b>3,212,469.00</b>	<b>380,664.00</b>
<b>Estimated Unspent Funds 2006</b>			
	<b>12,878.23</b>	<b>1,290,273.18</b>	<b>12,600.40</b>
2007 Stream 3 Contracted Funds		650,369.00	
2007 Stream 5 Contracted Funds (anticipated)		500,000.00	
2007 Stream 6 Contracted Funds (anticipated)		375,000.00	
2008 Stream 3 Contracted Funds		550,369.00	
2008 Stream 5 Contracted Funds (anticipated)		350,000.00	
2008 Stream 6 Contracted Funds (anticipated)		375,000.00	
<b>Balance</b>		<b>-1,510,464.82</b>	

\* To be approved by RAB

\*\*To be submitted & approved by RAB

## Appendix I

### The Staff of the APCHRI Hub as at December 2005

Director:	Professor Nicholas Glasgow
Deputy Director:	Associate Professor Beverly Sibthorpe
Researcher:	Karen Gardner
Institute Manager:	Elizabeth Kerr
Program Co-ordinator:	
Communications and Policy Liaison:	Frith Rayner
Administration:	Rena Irby Kimberley Brady
Research Assistants:	Duncan Longstaff Dhigna Rubiano Anna Gear Shawn Lyons

More information about APHCRI Hub staff can be found at:  
<http://www.anu.edu.au/aphcri/Staff/index2.php>

## Appendix II

### Members of the Research Advisory Board as at December 2005

**Professor John Marley (Chair)** is Pro Vice-Chancellor (Health) at the University of Newcastle. He heads a Faculty of four schools and several major research and other centres, covering Australia's most comprehensive range of health professions. His clinical experience includes practice in cardiology and in metropolitan and rural and remote general practice. Professor Marley serves on a number of boards and major national and international committees. He is Editor of the Australian Journal of Rural Health, Rural Practice and a member of the Editorial Committee of Australian Prescriber.

**Professor Linda Kristjanson (Deputy Chair)** RN, BN, MN, PhD is the Western Australian Cancer Foundation Chair of Palliative Care. She is also Director of the WA Centre for Cancer and Palliative Care at Edith Cowan University and is Director of the Centre of Nursing Research at the Sir Charles Gairdner Hospital in Perth. Professor Kristjanson has worked as a clinical researcher in Canada, the United States and Australia. In 2002 Professor Kristjanson was Australian Telstra Business Woman of the Year. She is a council member of the NHMRC.

**Ms Pat Anderson** is the Executive Officer of the Aboriginal Medical Services Alliance Northern Territory (AMSANT), the peak indigenous health organisation in the Northern Territory. She is also Chair of the Cooperative Research Centre for Aboriginal Health, a collaboration of twelve member organisations representing research users, research providers, policy makers and service delivery agencies all working to improve aboriginal health. Ms Anderson was Chief Executive Officer of Danila Dilba, the Aboriginal Community controlled health service in Darwin and Chair of the National Aboriginal Community Controlled Health Organisation (NACCHO), the peak national indigenous health organisation.

**Professor Justin Beilby** MBBS, MD, MPH, FRACGP, DA, DRCOG is a Professor of General Practice. He was in general practice in both rural and urban settings for more than 18 years. He manages a large academic department of general practice with broad research interests across general practice and primary care. He is President of AAAGP (Australian Association for Academic General Practice) and a member of the Strategic Research Initiative Working Group of the NHMRC.

**Ms Janette Donovan** BA, UWA; Dip TESL, UPNG; Dip Public Policy, UniMelb is a consumer consultant on medicines and health policy. Since 1998 Ms Donovan has been a Director of the National Prescribing Service, an independent organisation established by the Commonwealth Government to promote the quality use of medicines. She also serves as a consumer representative on the Australian Pharmaceutical Advisory Council and the Health Connect Stakeholder Reference Group. Ms Donovan worked for six years in evidenced-based policy analysis for the Council on the Ageing (Australia). She brings an understanding of key priority areas of primary care research of importance to consumers to the RAB.

**Professor Nicholas Glasgow** MBChB, MD, FRNZGP, FRACGP, FChPM Director of APHCRI, is a member of the RAB.

**Ms Sally Hall** is a Registered Nurse with a background in critical care and post-graduate qualifications in clinical management. She has worked in primary care and population health since 1997 in a variety of roles including clinical health improvement. Ms Hall is the Research Manager of the Australian General Practices Nurses Study, and received the inaugural General Practice Leader Awards established by the National Institute of Clinical Studies.

**Professor Mark Harris** MBBS, DRACOG, FRACGP, MD has extensive experience in primary care research and research capacity building in primary health care in Australia. He is Professor at the University of New South Wales School of Public Health and Community Medicine. His research interests include: chronic disease prevention and management in primary care, health inequalities and integration of primary health care with other health and non-health services. He brings an understanding of research collaboration and partnerships to the RAB.

**Mr David Learmonth** is First Assistant Secretary of the Primary Care Division, Australian Government Department of Health and Aging. The Primary Care Division currently has six domains of activity. These are the Policy and Evaluation Branch, General Practice Access Branch, Primary Care Quality and Prevention Branch, Principal Medical Advisor, Red Tape Taskforce and Medicare Implementation Team.

**Professor David Lyle** is a Public Health Physician who has worked in public health practice, academia and as a medical epidemiologist with the NSW Health Department. He has a strong research and health service development background. David is Head of the Broken Hill Department of Rural Health (University of Sydney), a multi-professional academic unit in far western NSW established in 1997 to contribute to an Australian government initiative designed to address rural workforce problems.

**Dr Tom Stubbs** BSc (Hons), PhD, DipEd, LMusA, AFAIM is Executive Director Metropolitan Health in the South Australian Department of Human Services. A physicist by training and former staff member of the University of Adelaide, he has held a range of senior public service positions in the areas of information management, environment and health. As well as a background in research and experience in dealing with the State/Commonwealth duality in our system, he brings a pragmatic perspective as someone with responsibility for health unit funding and operation in both the primary and acute sectors.

**Dr Peter Del Fante** BSc (Physics and Neuroscience), DipCompSc, MBBS (Hons), MSc (PHM), FAFPHM, FRACGP, MRACMA is Medical Director at the Adelaide Western Division of General Practice, a Clinical Lecturer in the Department of General Practice, University of Adelaide, and as a General Practitioner at the Wakefield Street Family Practice, Adelaide. He contributes to the RAB his broad experience in supporting and developing all aspects of general practice, the ability to identify high priority areas of research to General Practitioners and general practice, as well as the ability to understand needs of various players in the continuum from academic general practice to operational general practice.

**Dr Sarah Larkins** MBBS, BMedSci, MPH&TM, FRACGP is a General Practitioner at the Townsville Aboriginal and Islander Health Service, and an NHMRC Doctoral Fellow at James Cook University. She is in the early stages of a research career, combining this with a busy family life. Her interests are: Indigenous youth health and problems in vocational training for junior doctors.

**Dr Cathy Marshall** FRACGP; FACCRM member, RDN; member, RMTF has been a rural General Practitioner for 22 years. Since moving to Bathurst in 1987 she has been involved in primary care research. Dr Marshall was NSW Rural Training Coordinator for the Royal College of General Practitioners Training Program from 1998 – 2001, and is now on the Board of CentWest Regional Training Provider as RACGP representative. She holds an appointment with The University of Sydney and is involved with the community medicine term of the Dubbo Clinical School.

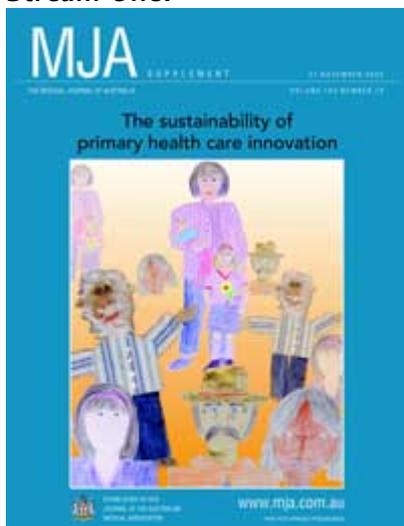
**Professor Louis Pilotto** BSc, MBBS (Hons), PhD, FRACGP, FAFPHM is Professor and Head of the Department of General Practice and Director of the Flinders Centre for Epidemiology and Biostatistics at Flinders University. He is also Co-Director of the Primary Health Care Research and Information Service (PHCRIS). He has a track record in epidemiology research and more than 17 years experience in general practice, with a number of years in rural practice. As a public health physician, he also brings substantial experience at the primary health care-public health interface to the RAB.

**Dr Del Fante, Dr Larkins, Dr Marshall and Professor Pilotto** stepped down as RAB members at the end of 2005.

## Appendix III

### APHCRI Research

#### *Stream One:*



In 2005 APHCRI's first research stream concluded with the publication of a supplement in the 21 November issue of the *Medical Journal of Australia*. There were five research teams from around Australia involved in Stream One, their work addressed important areas of policy research.

A copy of the supplement can be viewed at:

[http://www.mja.com.au/public/issues/183\\_10\\_211105/suppl\\_contents\\_211105.html](http://www.mja.com.au/public/issues/183_10_211105/suppl_contents_211105.html)

#### *The MJA paper titles, research teams and institutions involved in Stream One were:*

##### *Sustainable chronic disease management in remote Australia*

**Research Team:** Associate Professor John Wakeman, Elizabeth Chalmers, Christine Clarence, John Humphreys, Andrew Bell, Ann Larson, David Lyle and Dennis Pashen.

##### **Institutions involved in the research:**

Centre for Remote Health, Flinders University and Charles Darwin University  
 Monash University School of Rural Health  
 Katherine West Health Board Aboriginal Corporation  
 Combined Universities Centre for Rural Health  
 Broken Hill University Department of Rural Health  
 Mt Isa Centre for Rural and Remote Health, James Cook University

##### *Caring for a marginalised community: the costs of engaging with culture and complexity:*

**Research Team:** Dr Gary Rogers, Christopher Barton, Ann Lawless, Joy Oddy, Rebecca Hepworth and Justin Beilby, Brita Pekarsky.

##### **Institutions involved in the research:**

Health in Human Diversity Unit, Department of General Practice, University of Adelaide  
 School of International Business, University of South Australia

##### *Sustaining an Aboriginal mental health service partnership*

**Research Team:** Professor Jeffrey Fuller, Lee Martinez, Kuda Muyambi, Kathy Verran, Bronwyn Ryan and Ruth Klee.

##### **Institutions involved in the research:**

Northern Rivers University Department of Rural Health, University of Sydney  
 Spencer Gulf Rural Health School, University of South Australia  
 Northern and Far Western Regional Health Service

*Exploratory economic analyses of two primary care mental health projects: implications for sustainability*

**Research Team:** Cathrine Mhalopoulos, Sophy Ting-Fang Shih, Dr Grant Blashki and Litza Kiropoulos, Graham Meadows, Associate Professor Jane Gunn.

**Institutions involved in the research:**

Program Evaluation Unit, Melbourne University Health Economics Group  
 Department of General Practice, Monash University  
 Department of Psychological Medicine, Monash University  
 Department of General Practice, University of Melbourne

*A trial of SNAP implementation in two divisions of general practice*

**Research Team:** Professor Mark Harris, Dr Coletta Hobbs, Gawaine Powell Davies, Sarah Simpson, Diana Bernard and Anthony Stubbs.

**Institutions involved in the research:**

University of New South Wales  
 National Heart Foundation of Australia:

*Stream Three:*

*RE-ORDER – Re-organising care for depression and related disorders in the Australian primary health care setting*

**Research team:** Associate Professor Jane Gunn, Associate Professor Kelsey Hegarty, Associate Professor Rosalind Hurworth, Dr Gail Gilchrist, Dr David Pierce, Dr Frances Griffiths, Dr Grant Blashki, Dr Kathy Griffiths, Professor Chris Dowrick, Professor Dimity Pond, Ms Cathrine Mihalopoulos, Associate Professor Michael Kyrios, Professor Helen Herrman.

**Institutions involved in the research:**

The University of Melbourne  
 University of Warwick  
 Monash University  
 The Australian National University  
 University of Liverpool  
 University of Sydney

*The Contribution of Self-help Organisations to Chronic Disease Self-Management, and their Linkages with General Practitioners.*

**Research team:** Dr Frances Boyle, Dr Marie-Louise Dick, Ms Allyson Mutch, Dr Julie Dean, Professor Christopher Del Mar.

**Institutions involved in the research:**

The University of Queensland  
 Bond University

*Health risk screening and counselling of adolescents in primary care: a cluster randomised controlled trial*

**Research team:** Dr Lena Sanci, Professor Alan Shiell, Professor George Patton, Associate Professor Jane Pirkis, Associate Professor, Kelsey Hegarty, Dr Elizabeth Patterson, Ms Patty Chondros, A/Professor Susan Sawyer.

**Institutions involved in the research:**

The University of Melbourne  
 Monash University  
 Griffith University  
 Royal Children's Hospital

***Australian Practice Nursing Study: A multi-centre, qualitative study examining nurses' workplace roles and activities with nested change implementation***

**Research team:** Dr Christine Phillips, Dr Christopher Pearce, Dr Kathryn Dwan.

**Institutions involved in the research:**

ACT Health

The Australian National University

Australian Divisions of General Practice

***Stream Four:***

***Integration, co-ordination and multidisciplinary care***

**Question:** To examine the meaning and effectiveness of integration co-ordination and multidisciplinary care in general practice in dealing with complex and chronic illness.

**Research team:** Professor David Currow, Dr Geoff Mitchel, Ms Jennifer Tieman, Ms Tania Shelby-James

**Institutions involved in the research:**

Southern Adelaide Palliative Services

University of Queensland

Flinders University

**Question:** What is meant by the terms and what do they mean in an Australian context. How do structural factors influence the way integration and co-ordination are managed?

**Research team:** Gawaine Powell Davies, Professor Mark Harris, Mr David Perkins, Mr Martin Roland.

**Institutions involved in the research:**

University of NSW

Centre for Equity and Primary Health Research in the Illawarra and Shoalhaven

University of Manchester

**Question:** What is the most effective governance framework for the delivery of integrated regional primary and secondary care services? What is the optimal interplay between organisational and clinical governance in Australian communities?

**Research team:** Professor Claire Jackson, Ms Caroline Nicholson, Dr Jenny Doust, Dr John O'Donnell.

**Institutions involved in the research:**

Mater Health Services

University of Queensland

Mater Misericordiae Health Services Brisbane Ltd

***Innovative models for comprehensive primary health care delivery***

**Question:** What models exist in primary health care, looking at factors affecting the development of those models. National and international models for delivery of comprehensive primary health care and factors that influence development and sustainability.

**Research team:** Mr Lucio Naccarella, Dr John Furler, Dr Anthony Scott, Dr Doris Young.

**Institutions involved in the research:**

The University of Melbourne

**Question:** What models exist for comprehensive primary health care (CPHC) both nationally and in comparable countries? Are there common characteristics that make them effective? What are the implications for CPHC developing care? Can we develop a computer simulation model of CPHC?

**Research team:** Julie McDonald, Dr Jackie Cumming, Gawaine Powell Davies, Professor Mark Harris.

**Institutions involved in the research:**

University of NSW

Victoria University of Wellington

**Question:** Bring together and evaluate literature and policy covering rural and remote health service innovation in Australia, specifically including Aboriginal health.

**Research team:** Associate Professor John Wakerman, Professor John Humphreys, Dr Pim Kuipers.

**Institutions involved in the research:**

Centre for Remote Health  
 Monash University School of Rural Health  
 Griffith University

***Children and young Australians, health promotion and prevention***

**Question:** Identifying the most effective models that promote parent participation in the delivery of prevention and early intervention of overweight/obesity among 4-6 year olds.

**Research team:** Professor Donna Cross, Professor Ken Resnicow, Ms Delia Hendrie, Margaret Miller.

**Institutions involved in the research:**

Edith Cowan University  
 University of Michigan  
 University of Western Australia  
 Department of Health WA

**Question:** What preventive or health promotion program models/approaches are most likely to improve patterns of growth faltering in children under five years in the Australian remote Indigenous community context?

**Research team:** Professor Ross Bailie, Dr Peter Morris, Dr Barbara Paterson, Ms Elizabeth McDonald.

**Institutions involved in the research:**

Menzies School of Health Research  
 Northern Territory Dept. of Health & Community Services

***Chronic Disease Management***

**Question:** A systematic review of organisational and financing models that deliver optimal primary health care to people with mild to moderate chronic lung disease.

**Research team:** A/Professor Alan Crockett, Mr John Moss, Dr Robert Pegram, Dr Nigel Stocks.

**Institutions involved in the research:**

The University of Adelaide  
 Central Northern Adelaide Health Service

**Question:** Focus on chronic disease most commonly managed in primary care. What models have been developed internationally/nationally. Characteristics of successful models, how applicable are they to Australia? Facilitators and barriers.

**Research team:** Professor Nicholas Zwar, Professor Mark Harris, Professor Rhonda Griffiths, Martin Roland.

**Institutions involved in the research:**

University of NSW  
 Sydney South West Area Health Service  
 University of Manchester

***Innovative models for the management of mental health in primary health care settings***

**Question:** An investigation into best models for delivering primary mental health care and consideration of the similarities and differences between these models and models for delivery of chronic disease care.

**Research team:** Professor Helen Christensen, Dr Kathleen Griffiths, Leanne Wells, Dr James Butler.

**Institutions involved in the research:**

Australian National University  
 Australian Divisions of General Practice

*Workforce*

**Question:** An investigation into the evidence base for competency-based training in primary health care settings, specifically on chronic disease in the General Practice context.

**Research team** Professor Nicholas Glasgow, Robert Wells, Professor James Butler.

**Institutions involved in the research:**

Australian National University

## Appendix IV

### APHCRI Papers and Reports 2005

Sibthorpe B, Glasgow NJ, Wells R. Emergent Themes in the Sustainability of Primary Health Care Innovation *Med J Aust* 2005; 183 (10): S77-S80

Sibthorpe B, Glasgow NJ, Wells R. Questioning the sustainability of primary health care innovation *Med J Aust* 2005; 183 (10): S52-S53

Glasgow NJ, Sibthorpe B, Wells R. Beyond "motherhood and apple pie" - using research evidence to inform primary health care policy in Australia *Med J Aust* 2005; 183 (2): 97-98

*Primary Health Care Position Statement: A Scoping of the Evidence*

Nicholas J Glasgow, Beverly Sibthorpe, Anna Gear

<http://www.adgp.com.au/site/index>.

Longstaff D, Glasgow NJ. Australian Primary Health Care Research Institute Strategy for Enhancing Research Capacity in Primary Health Care Systematic Review

Longstaff D. Contentious crop: Harvesting information from electronic health records, <http://www.anu.edu.au/aphcri/Publications>

APHCRI *Dialogue*

June 2005

October 2005

### Spoke Research Papers

Fuller J, Marinez L, Muyambi K, Verran K, Ryan B, Klee R. Sustaining an Aboriginal mental health service partnership *Med J Aust* 2005; 183 (10): S69-S72

Mihalopoulos C, Kiropoulos L, Ting-Fang Shih S, Gunn J, Blashki, G, Meadows G. Exploratory economic analyses of two primary care mental health projects: Implications for sustainability *Med J Aust* 2005; 183 (10): S73-76

Harris M, Hobbs C, Powell Davies G, Simpson S, Bernard D, Stubbs A. A trial of SNAP implementation in two divisions of general practice. *Med J Aust* 2005; 183 (10): S54-58

Rogers G, Barton C, Pekarsky B, Lawless A, Oddy J, Hepworth R, and Beilby J Caring for a marginalised community: the costs of engaging with culture and complexity *Med J Aust* 2005; 183 (10): S59-63

Wakerman J, Chalmers E, Humphreys J, Clarence C, Bell A, Larson A, Lyle, D Pashen D. Sustainable chronic disease management in remote Australia *Med J Aust* 2005; 183 (10): S64-68

### APHCRI Communications

Future Directions: Implementing a National Quality and Performance System for the Divisions of General Practice,

DVD

[aphcri@work](mailto:aphcri@work)

December 2005

## Speaking Engagements

### *Professor Nicholas Glasgow*

- April 2005, Northern Territory Health, Alice Springs: Primary Health Care Funding;
- May 2005, GPCE conference, Sydney: COPD and Asthma;
- June 2005, The Canberra Hospital Research Meeting, Canberra: Who's question? Who's outcome? Challenges for clinical research in primary health care settings;
- July 2005, GP&PHC RED Conference, Adelaide, with Associate Professor Sibthorpe, Robert Wells and Jonathan Lomas, Innovation at the Research Policy Interface;
- September 2005, Royal College of General Practitioners annual conference, Darwin: the research cycle: undertaking research to inform policy and practice;
- October 2005, PHCRED Queensland Research Forum, Cairns: State of the National, review of the program from a national perspective, success and failures, the work of APHCRI and where to from here?;
- November 2005, 4<sup>th</sup> Health Services & Policy Research Conference, Canberra: Evidence and Practice.

### *Associate Professor Beverly Sibthorpe*

- March 2005, two-week road show on the National Performance Indicators for the Divisions of General Practice, five State capitals, presenting the framework for the indicators to State Based Organisations and Divisions of General Practice;
- April 2005, presentation to Department of Health and Ageing staff: Division Performance Indicators, Divisions Performance Indicators - How will it work?;
- May 2005, Ministry of Health, Wellington, New Zealand. Seminar: Divisions performance indicators;
- May 2005, Independent Practitioners Association Council conference, Christchurch, New Zealand: National Performance Indicators for Divisions;
- June 2005, HSMC, University of Birmingham. Guest lecture on the Australian Health Care System, for Maastricht medical students;
- July 2005, Performance Assessment in Primary Health Care Forum, Canberra and Brisbane, Measuring performance in primary health care - comparing the Australian and New Zealand experience;
- July 2005, GP&PHC RED Conference, Adelaide, Divisions Reporting Framework;
- July 2005, GP&PHC RED Conference, Adelaide, with Professor Glasgow, Robert Wells and Jonathan Lomas, Innovation at the Research Policy Interface;
- November 2005, ADGP National Forum, Perth, Primary Health Care Financing: Lessons from the UK.

### *Mr Robert Wells*

- February 2005, Medical Education Conference 2005, Canberra: Health Leadership: The Context;
- March 2005, CDAMS/AMC conference, Canberra: Future Medical Training: Making the vision happen;
- March 2005, 8th Rural Health Conference, Alice Springs: The Future Health Workforce: Options we do and do not have;
- July 2005, GP & PHC Research Conference, Adelaide: Innovation at the Research Policy Interface, presented with Professor Nicholas Glasgow, Associate Professor Sibthorpe and Professor Jonathan Lomas;
- October 2005, National Primary & Community Health Network: Primary Health Care in Australia: Overview and Future Options.

## Appendix V

### APHCRI Visitors

#### *Professor Nigel Mathers and Dr Susan Nancarrow*

Institute of General Practice and Primary Care, School of Health and Related Research, University of Sheffield and Trent Research & Development Support Unit

February

Professor Mathers and Dr Nancarrow used this visit to discuss the research projects of their organisations and to explore opportunities for research collaborations between Australia and the United Kingdom.

Their seminar was well attended by ANU research staff and policy makers.

Seminar topic: Exploring opportunities for health research collaborations between Australia and the UK

#### *Eugenia Cronin*

Head of Healthier Communities, London Borough of Greenwich

PhD student.

April

Eugenia Cronin held a round-table discussion and mini-seminar as a visitor to APHCRI. Her presentation focussed on her PhD research into health care system delivery of care for depression, comparing the United Kingdom and Australia.

Based in the UK Eugenia Cronin used her time in Australia to develop her research base and meet with health care professionals and policy makers in this field.

Seminar topic: Health care system characteristics and delivery of primary care for depression in the UK and Australia

## Appendix VI General Funds



**THE AUSTRALIAN NATIONAL UNIVERSITY**  
FINANCE AND BUSINESS SERVICES  
SPECIAL PURPOSE FUNDS

**FUND No:** S5620001  
**DONOR:** Department of Health and Ageing  
**DONOR Ref:**  
**PROJECT:** Australian Primary Health Care Research Institute

Prof Nicholas Glasgow

### STATEMENT OF INCOME AND EXPENDITURE FOR THE PERIOD 1 JANUARY 2005 TO 31 DECEMBER 2005

Unspent funds as at 1 January 2005	\$	\$	258,114.95
<b><u>Income</u></b>			
Special Research - Transfer From (/To) Reserve	5,000.00		
Interest	5,055.51		
Department of Health & Aged Care Grant	910,000.00		
<b>Total Income</b>		<u>920,055.51</u>	<u>1,178,170.46</u>
<b><u>Expenditure</u></b>			
Academic Staff Salaries	345,211.35		
Administrative Staff	236,713.01		
Long Service Leave Academic Staff	3,067.80		
Salary oncosts Academic Staff	23,705.78		
Salary oncosts Research Officers	279.39		
Salary oncosts Administrative Staff	58,088.17		
Minor Equipment	8,786.00		
Printing, Publishing and Photo	2,871.36		
Other Consumables and Services	16,822.70		
Subscriptions / Books	264.58		
Other site maintenance & servicing	158.14		
Vehicle Maintenance/Fuel	10,081.38		
Telephone Charges	1,425.96		
Computer consumables/ software	5,664.45		
Airfares Australia	83,416.02		
Airfares International	33,612.59		
Appointment Expenses	2,272.73		
Travel, Fieldwork and Conferences	20.00		
Conference Registration Australia	23,512.98		
Conference Registration International	5,369.87		
Staff development	1,205.00		
Accommodation Australia	18,939.49		
Accommodation International	7,569.02		
TA Australia	300.00		

**THE AUSTRALIAN NATIONAL UNIVERSITY**  
 FINANCE AND BUSINESS SERVICES  
 SPECIAL PURPOSE FUNDS

**FUND No:** S5620001  
**DONOR:** Department of Health and Ageing  
**DONOR Ref:**  
**PROJECT:** Australian Primary Health Care Research Institute

Prof Nicholas Glasgow

**STATEMENT OF INCOME AND EXPENDITURE  
 FOR THE PERIOD 1 JANUARY 2005 TO 31 DECEMBER 2005**

	\$	\$
Car Rent Australia	149.01	
Taxi, Bus, Train Australia	5,448.75	
Taxi, Bus, Train International	1,295.17	
Incidental Travel Exp Australia	4,073.28	
Incidental Travel Exp International	1,033.08	
Meals Australia	5,807.97	
Meals International	603.65	
Fringe Benefits Tax	(1,757.77)	
Office Expenses	559.57	
Subsidies/Grants	3,000.00	
Scholars Stipends	3,200.00	
Other operating expenses	969.96	
Advertising - Staff Recruitment	23,480.86	
Management fees	185,486.00	
Membership - Professional Bodies	911.16	
Consultancies	13,235.07	
Freight and Postage	1,204.62	
<b>Total Expenditure</b>	1,138,058.15	1,138,058.15
<b>Unspent funds as at 31 December 2005</b>		\$40,112.31

*Note : Approved underspend to complete PI project.*

I certify that the above statement accurately summarises the financial records of the grant and that these records have been properly maintained so as to record accurately the Income and Expenditure of the grant. This statement is prepared on a cash basis.

Lorraine Piper  
 Senior Accountant  
 Special Purpose Funds

9/03/2006

**Appendix VII**  
**APHCRI Research Funds**



**THE AUSTRALIAN NATIONAL UNIVERSITY**  
 FINANCE AND BUSINESS SERVICES  
 SPECIAL PURPOSE FUNDS

**FUND No:** S562000102  
**DONOR:** Department of Health and Ageing  
**DONOR Ref:**  
**PROJECT:** Australian Primary Health Care Research Institute - Research

Prof Nicholas Glasgow

**STATEMENT OF INCOME AND EXPENDITURE**  
**FOR THE PERIOD 1 JANUARY 2005 TO 31 DECEMBER 2005**

Unspent funds as at 1 January 2005	\$	\$	412,487.94
<b><u>Income</u></b>			
Interest		21,749.61	
Department of Health & Aged Care Grant		3,000,000.00	
<b>Total Income</b>		<u>3,021,749.61</u>	3,021,749.61
			<u>3,434,237.55</u>
<b><u>Expenditure</u></b>			
Travel - Airfares Australia	(1)	(1,873.63)	
Research Funds			
<i>Stream 1</i>		358,100.00	
<i>Stream 2</i>		50,000.00	
<i>Stream 3</i>		650,369.00	
<i>Stream 4</i>		862,100.00	
<i>MJA Supplement</i>		32,800.00	
<b>Total Expenditure</b>		<u>1,951,495.37</u>	1,951,495.37
<b>Unspent funds as at 31 December 2005</b>			<u><u>\$1,482,742.18</u></u>

*Note: Underspend is covered by contractual payments for Streams 3 & 4*

I certify that the above statement accurately summarises the financial records of the grant and that these records have been properly maintained so as to record accurately the Income and Expenditure of the grant. This statement is prepared on a cash basis.

Lorraine Piper  
 Senior Accountant  
 Special Purpose Funds

(1) Travel adjustment to correct 2004 code error

## Appendix VIII Hub Research Funds



THE AUSTRALIAN NATIONAL UNIVERSITY

FINANCE AND BUSINESS SERVICES

SPECIAL PURPOSE FUNDS

**FUND No:** S562000103  
**DONOR:** Department of Health and Ageing  
**DONOR Ref:**  
**PROJECT:** Australian Primary Health Care Research Institute – Hub Research

Prof Nicholas Glasgow

### STATEMENT OF INCOME AND EXPENDITURE FOR THE PERIOD 1 JANUARY 2005 TO 31 DECEMBER 2005

Unspent funds as at 1 January 2005	\$	\$	201,910.42
<b><u>Income</u></b>			
Interest		7,672.30	
Department of Health & Aged Care Grant		78,090.00	
<b>Total Income</b>		<u>85,762.30</u>	<u>85,762.30</u>
			287,672.72
<b><u>Expenditure</u></b>			
Academic Staff Salaries		29,153.37	
Research Officers Salaries		23,823.48	
Casual Research Assistant Salaries		22,137.22	
Long Service Leave Academic Staff		297.58	
Salary oncosts Academic Staff		5,784.63	
Salary oncosts Research Officers		2,799.18	
Salary oncosts Casual Research Assistants		3,808.11	
Subscriptions / Books		22.68	
Vehicle Maintenance/Fuel		199.31	
Telephone Charges		2,000.00	
Airfares Australia		327.49	
Accommodation Australia		117.46	
Car Rent Australia		67.3	
Taxi, Bus, Train Australia		225.68	
Incidental Travel Exp Australia		29.37	
Meals Australia		14.55	
Other operating expenses		5,000.00	
Consultancies		2,600.91	
<b>Total Expenditure</b>		<u>98,408.32</u>	<u>98,408.32</u>
<b>Unspent funds as at 31 December 2005</b>			<u><u>\$189,264.40</u></u>

*Note: Unspent funds of \$189,264.40 consists of \$180,592.00 for outstanding projects and \$8,672.40 approved underspend.*



**THE AUSTRALIAN NATIONAL UNIVERSITY**

FINANCE AND BUSINESS SERVICES

SPECIAL PURPOSE FUNDS

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I certify that the above statement accurately summarises the financial records of the grant and that these records have been properly maintained so as to record accurately the Income and Expenditure of the grant. This statement is prepared on a cash basis.

Lorraine Piper  
Senior Accountant  
Special Purpose Funds

9/03/2006