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CHAIRMAN’S MESSAGE

In 2007 the Australian Primary Health Care Research Institute (APHCRI) has continued to expand its research and capacity building role in primary health care in Australia.

The Institute has commissioned several new research streams, continued to develop international linkages, both directly and through research travelling fellowships, and completed major research — the Stream Six Workforce project — this year. All this activity has brought new evidence on primary health care policy options to the attention of policy advisers in Canberra and around the country, to the betterment of the Australian health care system.

It is worth noting, also, that the work of the Institute from previous years continues to permeate and research teams from Streams One and Four continue to publish, report on and present their APHCRI research regularly.

The growth and development of the Institute and its research programs is due to the hard work and dedication of APHCRI Director Professor Nicholas Glasgow. It is with great sadness that I acknowledge this is Professor Glasgow’s last APHCRI Annual Report, as he moves to a new role as Dean of the ANU Medical School in 2008. Professor Glasgow was the Foundation Director of APHCRI from 2003. It is through his vision that APHCRI has developed, and it is a credit to him that the Institute has continued to grow to the point where it is a recognised leader in primary health care research within Australia and well-known abroad.

In his endeavours Professor Glasgow has been most ably assisted by Institute Manager Elizabeth Kerr, who also moves to a new role in 2008. Ms Kerr has been the key figure in establishing the operational aspects of the Institute, working closely with the Department of Health and Ageing to ensure contractual obligations are met by both APHCRI and researchers. Her contribution to the Institute has been invaluable and she will be sorely missed. The Research Advisory Board (RAB) would also like to thank most sincerely all members of the APHCRI staff who have contributed so much to make this a very successful year.

The work at the Hub has been supported in no small way by the contribution of members of the RAB. The RAB, in turn, is grateful to the efforts of Expert Review Committee members who gave of their time and expertise to help make decisions regarding project funding.

In 2007 the RAB welcomed new members Leilani Pearce and Ian Thompson. Leilani brings her experience working for almost 15 years in Aboriginal and Torres Strait Islander health to the RAB, while Ian brings his experience in State health issues to the RAB.

We look forward to the continued growth and development of APHCRI and its research program in 2008.

John Marley

Chair, APHCRI Research Advisory Board
This will be my last report as Director of APHCRI. The last four years have been very busy. There have been high points, and not so high points. Yet, through genuinely collaborative efforts and good will from many people, APHCRI has delivered.

The research program now covers major domains at the centre of any discussions about primary health care reform. The reports published on the website, and increasingly in the "black" literature, provide a valuable resource, not only for national users, but also for international users.

Many primary health care researchers have been engaged in one or more of APHCRI's streams of work. They have worked hard. They have worked professionally. They have worked to tight timelines. They have worked together as part of the virtual institute. This report documents all their APHCRI activities. I thank them all for being willing to be part of this initiative, and willing to contribute so generously to achieving APHCRI's strategic goals.

We have been fortunate to continue to host international experts as Visiting Fellows to APHCRI. I am grateful to them all for giving of their time, and really do appreciate the fact they travel long distances in order to share their wisdom with Australian audiences. APHCRI is richer for these contacts, and they greatly contribute to the development of primary health care research capacity in this country.

I would particularly like to acknowledge the team at the Primary Health Care Research and Information Service (PHC RIS) and thank them for the way in which they have supported APHCRI at the General Practice and Primary Health Care Research Conferences. The 2007 meeting was excellent – a large number of APHCRI researchers were engaged in the program, a pre-conference workshop built on Stream Six was held, APHCRI hosted a plenary session and Professor van Weel contributed to the Australian Association of Academic General Practice activities. None of this would be possible were it not for the collegial way in which PHC RIS has engaged with APHCRI.

Each year I thank the Research Advisory Board (RAB). They are an excellent board to work to, and I thank them all. The wisdom and insights they bring to discussion about APHCRI's directions are of the highest calibre, and the success of the Institute owes much to them. I would make special mention of Professor Marley. Not only is he an excellent Chair, but he has also provided me with very sound advice on many occasions during my term as Director. For this I am very grateful.

Again, each year I acknowledge the Department of Health and Ageing and the support they provide to this program. I appreciate the contribution they make to the RAB meetings, and very much appreciate their accessibility in respect of APHCRI's work between RAB meetings.

I have had the privilege of working with a wonderful team on the ANU campus. Elizabeth Kerr was an outstanding Institute Manager. Her leadership, professionalism and commitment have underpinned APHCRI's progress. I wish her every success in her new role in Brisbane. Dr Yun-Hee Jeon has worked very hard on the National Health and Medical Council funded Serious and Continuing Illness Policy and Practice Study (SCIPPS) program, supported by Tanisha Jowsey, Carmen Pearce-Brown and Stefan Kraus. This is a very important piece of work for APHCRI. Dr Jeon's work in residential aged care workforce will add another dimension to the suite of workforce resources currently on our website. Frith Rayner has brought her media expertise to bear on the work of the Institute. She has lead the redesign of the annual report, the development of the website, media opportunities, co-ordinating the Medical Journal of Australia supplement and the co-ordination of the 1:3:25 reports for Stream Six. I am very grateful to Rena Irby and Kimberley Brady for their excellent work attending to the general office functions. Karen Gardner continues her PhD studies in APHCRI in 2008.

I wish APHCRI every success going forward. As Dean of the ANU College of Medicine and Health Science, I will continue to be closely linked with the Institute, and will watch its continued development with great interest.

Nicholas Glasgow
APHCRI COMMITTEES

APHCRI STRATEGIC PLAN

The APHCRI workplan for 2007 was modelled on the Strategic Plan, which was established in 2004.

A strategic plan 2008-2010 has been developed to cover the period until the end of the APHCRI contract extension in February 2010. This was written with considerable reference to the previous document and attempts to balance the need for future direction and vision recognising that it is the RAB’s role to determine the research agenda of APHCRI. All of this may necessarily be impacted by the PHCREd Evaluation. It is anticipated that the Strategic Plan 2008-2010 will be endorsed at the first RAB meeting in March 2008.

RESEARCH ADVISORY BOARD

In 2007 the RAB met three times to consider research, discuss future projects and to have input into the Institute’s strategic planning process.

The RAB considered funding and made final decisions on Streams Seven and Eight – the APHCRI Linkage and Exchange Travelling Fellowships and the APHCRI/Robert Graham Center Visiting Fellowship.

The role of the RAB is to receive advice from Expert Review Committees (ERCs) set up for each commissioning round and to make decisions regarding the allocation of funds to the Institute’s research programs.

EXPERT REVIEW COMMITTEES

The Institute’s Expert Review Committees (ERCs) are nominated by, and report back to, the RAB. They consider funding proposals and make recommendations to the RAB on the Institute’s research funding.

A committee is set up for each funding round and is made up of national and international experts from the primary health care research community. At least one representative on each committee is an international expert. This ensures the quality and international relevance of APHCRI-funded research.

Two ERCs were convened in 2007 to consider research proposals in Streams Seven and Eight.
The Australian Primary Health Care Research Institute’s model has injected not only much needed funds into this field of research, but has also encouraged a collaborative approach to work which has been welcomed by research teams, who have often worked in isolation in the past.

The Institute has developed a wide range of research endeavours covering several key domains and ensuring primary health care research is being conducted all around Australia.

These researchers have also been exposed to international experts through the Visiting Fellows program, and more recently through an opportunity to participate in the APHCRI Linkage and Exchange Travelling Fellowship program.

Research is promoted to end users through web publication, supplements in the *Medical Journal of Australia* and educational meetings with Department of Health and Ageing staff.

There has been a strong directive to engage with the APHCRI community of researchers with regular email updates, newsletters and correspondence between the groups. The different teams have also come together to develop *Medical Journal of Australia* supplements which have involved regular correspondence and teleconferences involving various team members.

The Institute has a commitment to building research capacity and the travelling fellowships have been targeted specifically at researchers who are new to or developing their primary health care research credentials. The APHCRI/Robert Graham Center Visiting Fellowship aims to develop young General Practitioner researchers and this was established in 2007.

At the Hub in Canberra research has continued apace with Professor Glasgow, Dr Yun-Hee Jeon and Karen Gardner all contributing to the growing number of Hub research projects examining important primary health care issues, including workforce, adolescent and child health and chronic disease.

**IDENTIFICATION OF RESEARCH PRIORITIES**

The RAB determined that the research priorities for APHCRI in 2007 would continue to be:

- Innovation in State/Commonwealth relationships
- Innovation in funding arrangements for new or existing services/models
- Innovation in organisation and linkages within the primary health care sector.
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Primary health care workforce – doctors, nurses, how to recruit them, keep them, an analysis of their role now and in the future – was the focus of a large body of work, Stream Six, in 2007.

Stream Six focussed on finding solutions to the primary health care workforce crisis in Australia. The RAB determined that workforce was a continuing and central issue for primary health care and commissioned a research stream to offer policy advisers suggestions on how to improve Australia’s workforce situation. There were nine reports commissioned covering mental health in primary health care, rural and remote health, what primary health care should look like in 2020 and nursing in primary health care.

The model used in this stream followed the linkage and exchange approach successfully used in Stream Four. It involved several workshops where researchers came together to discuss their work as it developed. Policy advisers were also involved in these workshops.

The Institute continues to develop its model of linkage and exchange to suit the specific Australian context and refined elements of the workshop and dissemination process for Stream Six.

In Stream Six a peer review process was introduced, which included national and international reviewers. To achieve this APHCRI report drafts were completed earlier in the research cycle and usual academic publishing processes included in the APHCRI model.

Stream Six was presented using the 1.3.25 document format. The one-page document offers a brief overview of the policy context and findings of each of the reports. This is linked to the three-page and 25-page reports so readers can follow an issue in greater depth.
The three-page reports include the policy context and findings, as well as some policy options for Australia and a brief overview of the methods in the report. The full report is also available.

This approach aims to give busy people an opportunity to dip into research projects or look further into areas they may be interested in, without having to read full reports. It also gives readers an idea of which reports may be most relevant for them to read to develop their knowledge of an area of primary health care.

Projects in Stream Five were also completed at the end of 2007. This work built on previous research in Streams One through Four, giving researchers an opportunity to develop their original research to the next stage. Stream Five also gave research teams an opportunity to fill research gaps exposed in the original research.

The APHCRI Linkage and Exchange Travelling Fellowships – Stream Seven - were launched in 2007. This was a new initiative designed to give researchers an opportunity to develop their APHCRI research in an international context. Researchers travelled to The Netherlands, Canada, the United Kingdom and Switzerland in the second half of the year to collaborate with international colleagues and further develop their research.

Also in 2007 the Institute developed its international links through the creation of the APHCRI/Robert Graham Center Visiting Fellowship. This program sends an early career general practitioner researcher to a sister research centre in Washington DC for six weeks to participate in a short research project which has mutual benefit to APHCRI and the Robert Graham Center. In 2007 the project assessed the feasibility of translating the HealthLandscape Primary Care Atlas – which maps the location of the primary health care workforce around the country – to the Australian medical workforce policy environment.

**HUB RESEARCH**

Professor Nicholas Glasgow undertook a research project working with the European Observatory on chronic illness. Professor Glasgow has contributed to two chapters of the book, one looking at decision support and the other on Australian case studies.

Karen Gardner completed her research on Readiness for School, which examined how primary health care can be involved in promoting health and development to ensure children are ready for school.

Dr Yun-Hee Jeon began a 12 month Hub study to investigate optimising residential aged care. This study is intended to develop policy options and strategies to enhance effective workforce leadership and management within the residential aged care sector.
RESEARCH PROGRAM OUTLINES

Aboriginal and Torres Strait Islander Primary Health Care page 16

Adolescent/Child Health page 16

Chronic Disease Management page 17

Mental Health page 18

Practice Nursing page 19

Preventative Medicine page 19

Rural and Remote Primary Health Care page 20

Self-Help Organisations page 20

Workforce page 21

APHCRI Linkage and Exchange Travelling Fellowships page 26

APHCRI/Robert Graham Center Visiting Fellowship page 29
BUILDING A PORTFOLIO OF INTERVENTIONS FOR PRIMARY HEALTH CARE PROVIDERS TO PROMOTE HEALTHY WEIGHT AMONG YOUNG CHILDREN

STREAM FIVE

Research team: Lydia Hearn, Margaret Miller, Donna Cross and Delia Hendrie

This project developed and piloted a portfolio of interventions for the prevention of overweight and obesity in children aged two-to-five years, for use with different primary health care providers. It outlines key components of ‘promising’ interventions, including: relevance and acceptability, likely cost implications, availability of support materials, staff capacity building needs and level of engagement of key stakeholders.

Lydia Hearn and Margaret Miller were awarded an APHCR Linkage and Exchange Travelling Fellowship in 2007. An outline of their work is detailed in the Stream Seven section.

A TRIAL OF NEW WAYS TO ENCOURAGE ADOLESCENT AUSTRALIANS TO AVOID OR REDUCE RISK BEHAVIOURS

RESEARCH IN PROGRESS – STREAM THREE

Research team: Lena Sanci, Alan Shiell, George Patton, Jane Pirkis and Kelsey Hegarty

Risky behaviours that pose a health threat to adolescents - smoking, drinking, drug use and unprotected sex – may be reduced if doctors adopt a new proactive approach in counselling patients. This three-year study will test the effectiveness and economic viability of screening and counselling young people in general practice to try and devise a best practice model for helping adolescents.

The team will compare the results from existing models of care with the impact made by a group of General Practitioners and Practice Nurses who have undergone training in screening and counselling of young people and in linking with other agencies caring for youth.
CHRONIC DISEASE MANAGEMENT

THE EUROPEAN OBSERVATORY ON HEALTH SYSTEMS & POLICIES

Research team: Nicholas Glasgow, Nicholas Zwar, Mark Harris, Iqbal Hasan and Tanisha Jowsey

Nicholas Glasgow is contributing to two parts of a major program of research led by the European Observatory: "Responding to the epidemic of chronic disease".

The first component is a series of case studies exploring the burden of chronic disease in seven countries, the particular issues that arise, and the policy implications and responses. Each case study "interrogates" one country's activities in chronic disease using the Wagner Chronic Care Model as the framework. The case studies will form chapters within a book, to be published in 2008. Professor Glasgow is leading the Australian case study.

The second component builds on the case studies, but is written around each of the Wagner Chronic Care Model domains and examines the evidence relevant to those domains and its application in health systems.

Professor Glasgow is co-authoring a chapter on Decision Support.

In addition to the book, policy briefs will be produced and the work disseminated through meetings and workshops in 2008.


SERIOUS & CONTINUING ILLNESS POLICY & PRACTICE STUDY

HUB RESEARCH


In 2006 APHCRI was part of a successful bid for NHMRC program grant funding to investigate chronic illness in Australia. The Serious and Continuing Illness Policy and Practice Study (SCIPPS) is a five-year project focusing on chronic heart failure, diabetes and chronic obstructive pulmonary disease affecting Australians aged 45 to 85. Drawing on Australian and overseas work, the research will develop policies and interventions to enhance the health system and improve patients' health and quality of life.

The grant is through the Menzies Centre for Health Policy, with joint funding to the University of Sydney and The Australian National University. Professor Nicholas Glasgow leads the ACT research team.

Key milestones achieved during 2007 include mapping the local health services and policies for the three index conditions and the characteristics of their users, carrying out reviews of relevant literature and conducting in-depth interviews and focus groups with key stakeholders. A total of 66 patients with the index conditions and their carers and 67 health care professionals participated in this process.

The evidence gained through these qualitative and quantitative activities is critical in informing the next phase of SCIPPS, which is developing policy and health systems solutions that contribute to improved health and quality of life of people with chronic illness.

Left to right: Yun-Hee Jeon, Nicholas Glasgow, Tanisha Jowsey, Stefan Kraus, Carmen Pearce-Brown, Robert Wells and Paul Dugdale
While depression is Australia's most common mental illness, little is known about how General Practitioners treat it on the front line of Australian health. This three-year study will investigate the management of depression in general practice. It found that the delivery of treatments and services for mental health and substance use co-morbidity practice in Australia is not underpinned by a research base or clear national policy plan.

This project reviewed the evidence concerning the efficacy of treatments and models of service provision for co-morbid mood or anxiety disorders and substance use problems. It provides key practice messages based on reviewed evidence, as well as suggestions for policy and practice.

It suggests the development of a National Agenda for Co-morbidity, an emphasis on practice-based research networks and calls for evaluation to be built into co-morbidity programs provided by major organisations. Helen Christensen and Kathy Griffiths were awarded an APHCRI Linkage and Exchange Travelling Fellowship in 2007. An outline of their work is detailed in the Stream Seven section.

While depression is Australia’s most common mental illness, little is known about how General Practitioners treat it on the front line of Australian health. This three-year study will investigate the management of depression in general practice.

The project will use a complex adaptive system framework to pinpoint the minimum specifications for effective primary mental health care. It will then seek to implement these methods in a general practice setting and monitor the impact on patients and practice.

This study built upon the existing Stream Three Re-order project, which aims to inform a change in the way we think about, organise and deliver depression care in Australian primary health care in a way that is directly relevant to policy and practice.

The Stream Five work addresses culture, equity, and crosses geographical boundaries to gain a better understanding of best practice depression care for Australians with culturally diverse backgrounds.
PRACTICE NURSING

THE AUSTRALIAN GENERAL PRACTICE NURSES STUDY

RESEARCH IN PROGRESS - STREAM THREE

Research team: Christine Phillips, Chris Pearce, Kathryn Dwan, Bonnie Sibbald, Julie Porritt, Rachel Yates, Leanne Wells, Sally Hall, Marjan Kljakovic and Monika Thompson

The expanding role of nurses in general practices across Australia will be examined in detail in this three-year study which will deliver alternatives for medical service delivery in Australia.

Christine Phillips, from The Australian National University, has partnered with the Australian General Practice Network for this project. They are joined by researchers from around Australia and the United Kingdom to examine the role of practice nurses in Australian general practice.

PRACTICE NURSE ADOLESCENT CLINIC FOR HEALTH EVALUATION (PANACHE)

STREAM FIVE

Research team: Kelsey Hegarty, Rhian Parker, Lena Sanci, Elizabeth Patterson, George Patton and Chris Pearce

The practice nurse adolescent clinic for health evaluation (PANACHE) project evaluated the impact of practice nurse-led adolescent health care clinics in three distinct geographical areas.

The study provides evidence on the acceptability of practice nurse-led clinics to General Practitioners, young people and their parents, as well as practical information (economic and organisational) about setting up and running these clinics. It will also inform policy development in this area of primary health care.

PREVENTATIVE MEDICINE

45-49 YEAR OLD CHRONIC DISEASE PREVENTION HEALTH CHECKS IN GENERAL PRACTICE: UTILISATION, ACCEPTABILITY & EFFECTIVENESS

STREAM FIVE

Research team: Mark Harris, Nicholas Zwar, Gawaine Powell Davies and Rachel Laws

In 2006, the Council of Australian Governments identified the importance of promoting healthy lifestyles in order to prevent the onset of chronic disease, which has been recognised for its increasing burden on the health of Australians.

It proposed supporting the early detection of lifestyle risks and chronic disease through a health check in general practice for people aged 45-49. This study examined the utilisation, acceptability, and effectiveness of this type of health check in Australian general practice.

It puts forward several policy options that examine changes to the item, enhancing the effectiveness of the checks, improving the referral process, developing Lifescripts resources, Divisions’ role in supporting referral, recall and training, and public promotion of the item number.
RURAL & REMOTE PRIMARY HEALTH CARE

IMPLEMENTATION, SUSTAINABILITY & GENERALISATION OF EXEMPLARY MODELS OF PRIMARY HEALTH CARE SERVICE DELIVERY IN RURAL & REMOTE AUSTRALIA: A CASE STUDY ANALYSIS

STREAM FIVE

Research team: John Humphreys, John Wakerman, Robert Wells and Pim Kuipers

Australians living in small, rural and remote communities face significant health disadvantage. Generally, mortality and illness levels increase with distance from major cities.

This research examined the factors which facilitate and inhibit the implementation, sustainability and generalisability of primary health care models in rural and remote Australia and what processes will support these factors.

Governance/leadership was the most frequently identified and prioritised essential service requirement to achieve the above goals.

Other issues, like human resource management along with community engagement, were also highlighted as important. An identified barrier to change is alternating political priorities and the research suggests the creation of a national rural and remote health policy and plan to guide further development of health services in order to improve the health of those in rural and remote Australia.

John Wakerman and John Humphreys were awarded an APHCRI Linkage and Exchange Travelling Fellowship in 2007. An outline of their work is detailed in the Stream Seven section.

SELF-HELP ORGANISATIONS

INVESTIGATING CHRONIC ILLNESS CARE IN THE COMMUNITY

RESEARCH IN PROGRESS – STREAM THREE

Research team: Fran Boyle, Marie-Louise Dick, Allyson Mutch, Julie Dean and Chris Del Mar

This three-year study will critically evaluate the benefits of self-help organisations to people who suffer chronic diseases and examine ways to improve links between the groups and General Practitioners.

The study aims to find out if there is an evidence base for the largely anecdotal indications that self-help organisations could aid patients and their carers dealing with the day-to-day realities of chronic disease.

The researchers will conduct Australia’s first comprehensive survey of people who contact self-help organisations focused on chronic illness. They will also trial an education strategy with General Practitioners designed to improve awareness of, and access to, such organisations.
WORKFORCE

The number of workers

IMPROVING PRIMARY HEALTH CARE WORKFORCE RETENTION IN SMALL RURAL & REMOTE COMMUNITIES

STREAM SIX

Research team: John Humphreys, John Wakeman, Robert Wells and Pim Kuipers

Rural and remote Australia’s small rural communities are some of the hardest hit by workforce shortages. This study examined the role and contribution of education and training programs (including continuing professional development - CPD) in enhancing workplace attractiveness, and thereby improving retention of primary health workers, in these communities.

The evidence collected considers a ‘package’ of multifaceted policy options is needed to tackle this issue. It suggests catering CPD to specific needs, for example if rural doctors need to travel or arrange locum support to attend training, this should be supported by employers.

The review also found evidence that it may be the non-professional supports that encourage General Practitioners to stay in small communities. Housing, locum relief and transport support all contribute to doctors staying in these communities.

Regardless of the impact on retention, CPD is considered important and should be supported for its role in keeping GPs abreast of advances in best practice and new technologies and should be part of any package to keep doctors in rural and remote communities.

REVIEW OF PRIMARY & COMMUNITY CARE NURSING

STREAM SIX

Research team: Helen Keleher, Rhian Parker, Karen Francis and Leonie Segal

This review aimed to provide evidence-based measures to support Australia in developing a capable, efficient and effective primary and community health care nursing workforce to address health needs.

It suggests policy advisers consider: data collection of practice nurse activities to establish evidence of effectiveness; higher education institutions developing and delivering education and training in this field of nursing; and the creation of a career framework for practice nurses.

The review also found evidence for reforming payment models for nurses to award rates, a need for funding to standardise core elements of primary and community health care, education and training and explores the idea of practice or Division systems where nurses can be supervised by nurses to enhance professional development.
WORKFORCE

ATtracting Health Professionals into Primary Care: Strategies for Recruitment

Stream Six

Research team: Jill Thistlethwaite, Tim Shaw, Michael Kidd and Stephen Leeder

The general practice workforce in Australia is expected to continue to decrease, in terms of the number of full-time equivalent General Practitioners. This project brings together the available evidence about how to attract young medical trainees to general practice.

It suggests incentives to medical schools which encourage a percentage of their students to move into general practice and considers further support to rural students entering medical school as an option. Medical schools should also be funded to provide career counselling advice to students and to increase the number of GP teachers and academics on staff.

Optimising the Workforce

Optimising Skill-Mix in the Primary Health Care Workforce for the Care of Older Australians

Stream Six

Research team: Nicholas Zwar, Sarah Dennis, Rhonda Griffiths, Iqbal Hasan and David Perkins

This project identifies the options for optimising the skill-mix of the primary health care workforce to benefit older Australians’ health. The work recognises that any change in traditional health professional roles can cause tensions and calls for dialogue between professions to develop and support trust so that change can occur.

The review calls for the development of a process for identifying and evaluating the significance of skill mix innovation, particularly evaluation of rural and remote health care skill mix. It also suggests developing a process for implementing effective skill mix change which includes professional organisations meeting, streamlining regulations, accreditation and training and establishing a Health Workforce Improvement Agency.

In other options the report proposes ensuring health professional education programs meet national standards for accreditation and modifying the range of payment options to facilitate and support skill mix at a local level. It also puts forward the idea of health professionals training in change management and maximising the use of IT and e-health.
THE CONTRIBUTION OF APPROACHES TO ORGANISATIONAL CHANGE IN OPTIMISING THE PRIMARY HEALTH CARE WORKFORCE

Research team: James Dunbar, Adrian Schoo, Prasuna Reddy, David Weller and Chris Selby-Smith

James Dunbar and his team conducted a systematic review to evaluate the impact organisational development could have on optimising the Australian primary health care workforce, particularly in reference to chronic disease management.

The systematic review notes that while organisational development is not widely used in primary health care, there is convincing evidence of its potential contribution.

Organisational development could assist in managing change towards multidisciplinary care; care planning, co-ordination and review; integrated primary health care networks; adopting standard referral procedures; focusing care on to chronic disease management and developing strategic partnerships.

The review suggests practice accreditation be extended to clinical standards and systems; that the Collaboratives continue; and that initiatives in clinical leadership and team development are considered by policy advisers.
The place of generalism

WHAT IS THE PLACE OF GENERALISM IN THE 2020 PRIMARY CARE TEAM?

STREAM SIX

Research team: Jane Gunn, Renata Kokanovic, Catherine Pope and Judith Lathlean

The Australian primary health care system is embracing and rapidly moving towards a team approach for general practice. Over the past one hundred years the Australian health care system has been founded on a generalist approach and Australia is recognised as having a health care system equal to the best in the developed world.

This work illustrates that a generalist primary health care workforce, underpinned by generalism, will be well equipped to deliver cost-effective, equitable and accessible health care.

It suggests policy to enhance the importance and status of primary health care through: career pathways and remuneration; enhancing educational content and settings to strengthen the workforce; and develop evidence about strategies to strengthen generalism, will all aid the workforce to meet the challenges of primary health care in 2020.

The Expanding Role of Generalists in Rural & Remote Health: A Systematic Review

STREAM SIX

Research team: Dennis Pashen, Tony Fallon, Bruce Chater, Richard Murray and Colin White

This project identified dedicated and targeted support mechanisms to produce rural generalist practitioners to serve rural and remote communities.

The systematic review suggests expanding clinical teaching capacity within the health system and developing incentives for junior doctors to do generalist training, including clear career pathways and access to procedural training posts in hospitals.

It also puts forward the idea of regional health workforce policy implementation as a model to meet local requirements, expanding roles for mid-level practitioners [nurses, physician’s assistants] and the integration of other disciplines into generalist primary health care are all considered.

The issue of the perceived status of general practice, particularly in remote practice, is also raised here. The systematic review suggests training, accreditation, remuneration and promotion of the generalist role in hospitals as models for overcoming these issues.
WHAT IS THE PLACE OF GENERALISM IN MENTAL HEALTH CARE IN AUSTRALIA

STREAM SIX

Research team: David Perkins, Karen Larsen, Gawaine Powell Davies, Julie McDonald and Mark Harris

The Council of Australian Governments has agreed to pursue a co-ordinated approach to mental health services in which the integration of generalist and specialist health services provides early and equitable access to quality services.

David Perkins and his team have examined how well placed General Practitioners are to deliver these services and put forward policy options to enable them to fulfil this role, within the workforce parameters.

The review puts forward 10 policy options for policy advisers to consider. They include facilitating training to better use Better Outcomes in Mental Health and other supports, along with medication training. Training in identifying mental illness, not only for doctors, but also Non-Government Organisations and welfare organisations was suggested. Team work and expanded roles for practice nurses were also put forward as key areas to improve health outcomes for patients and effectively use the workforce.

OPTIMISING THE RESIDENTIAL AGED CARE WORKFORCE: LEADERSHIP & MANAGEMENT

HUB RESEARCH

Research team: Yun-Hee Jeon and Nicholas Glasgow

Aged care is in crisis in terms of meeting present and future qualified nurse workforce demand in Australia. National and international evidence reveals the importance of leadership and management on recruitment and retention, including staff turnover and nurses intention to stay or to leave the residential aged care workforce.

The objectives of this Hub study include:

- A systematic literature review examining theoretical and practical elements integral to the provision of effective leadership and management in the context of residential aged care workforce
- To test and refine emerging policy options through engaging key stakeholders in the process of knowledge transfer
- To develop policy options and strategies designed to enhance effective workforce leadership and management within the residential aged care sector.

The outcomes of the study will inform middle/senior management in providing effective leadership and management, fundamental to the enhancement of staff competency, morale and job satisfaction and the establishment of an enabling environment for those working in residential aged care facilities. The findings of the study will also inform policy directions and development to contribute to establishing sustainable workforce in residential aged care settings.
APHCRI ANNUAL REPORT 2007

APHCRI LINKAGE & EXCHANGE TRAVELLING FELLOWSHIPS

APHCRI Linkage and Exchange Travelling Fellowships develop the knowledge transfer model of the Institute. They give Stream research participants the opportunity to share lessons from Australia, network with international colleagues, facilitate policy exchange and to improve the capacity of Australian primary health care researchers to conduct international research.

TRAVELLING FELLOWSHIP REPORT
STREAM SEVEN

Helen Christensen & Kathy Griffiths

Helen Christensen and Kathy Griffiths shared an APHCRI Linkage and Exchange Travelling Fellowship to spend time investigating how their Stream Four project on computer-assisted Cognitive Behavioural Therapy (CBT) could be used in the United Kingdom.

Stream Four illustrated that computer-assisted CBT was an effective intervention when delivered in general practice. Community interventions offered a level of benefit that matched those of general practice interventions. Examples with positive outcomes were workplace educational programs, self-referred educational workshops, and interventions conducted in health maintenance organisations.

Their fellowship involved consultation and exchange with high profile research/provider groups/policy groups in the UK and Netherlands. They linked with six institutions which provide: expertise and knowledge of the components of collaborative care (York University), knowledge as to how computer products have been introduced into Primary Care Trusts (Kings College London) (Warwick), consumer participation in research (SCHARR) knowledge of the implementation of free access programs in mental health and addiction and health provider of those programs (Trimbos Institute, Netherlands) and research into therapist and non-therapist delivered psychological therapies (Vrije Universiteit Amsterdam, Netherlands).

Stream Four report: Models of mental health delivery: efficacy, support and policy
www.anu.edu.au/aphcri/Domain/MentalHealth/approved_final_1_christensen.pdf

Lucio Naccarella

Lucio Naccarella led a Stream Four project which looked at innovative models for comprehensive primary health care delivery. He used his travelling fellowship as an opportunity to consider the context within which evidence will be used for effective policy making.

Dr Naccarella travelled to the United Kingdom where he visited the National Primary Care Research and Development Centre, University of Manchester and the On-call Facility for International Healthcare Comparisons, Health Services Research Unit, London School of Hygiene and Tropical Medicine. At both sites he conducted semi-structured interviews with both policy makers and researchers.

The interview process led to several recommendations which could be used to develop APHCRIs linkage and exchange approach, including facilitating relationships, co-creating a learning environment oriented to using evidence for policy making and encouraging flexible models of resourcing evidence-informed policy making.

Stream Four report: SIREN project: Systems innovation and reviews of evidence in primary health care: narrative review of innovative models for comprehensive primary health care delivery
TRAVELLING FELLOWSHIP REPORT
STREAM SEVEN

Sarah Dennis

Sarah Dennis participated in a Stream Four research program examining chronic disease management led by Nicholas Zwar. She took the findings from this research on her fellowship to the National Primary Care Research and Development Centre, University of Manchester and the Centre for Health Management, University of Birmingham.

Her fellowship aimed to try and understand how the process of linkage and exchange between researchers and policy makers operates and is sustained in the UK. What are the components necessary for a successful and sustainable model?

She made presentations at both Centres and did semi-structured interviews with researchers and policy makers to discuss the policy view of the linkage and exchange process.

Stream Four report: A systematic review of chronic disease management
www.anu.edu.au/aphcri/Domain/ChronicDiseaseMgmt/approved_1_Zwar.pdf

TRAVELLING FELLOWSHIP REPORT
STREAM SEVEN

Julie McDonald

Julie McDonald undertook a Stream Four study investigating different system-wide models being developed in Australia, the United Kingdom and New Zealand to achieve primary health care reform.

On her APHCRRI Linkage and Exchange Travelling Fellowship she spent several weeks in Canada meeting colleagues from Ontario, Alberta and Quebec. Her report suggests Australia could benefit from a broader range of funding mechanisms to meet population health goals. She also highlights the focus and investment in interdisciplinary collaboration and associated research agenda in a number of provinces as having potential to inform Australian developments.

Stream Four report: Systematic review of comprehensive primary health care models
www.anu.edu.au/aphcri/Domain/PHCModels/Final_1_McDonald.pdf

TRAVELLING FELLOWSHIP REPORT
STREAM SEVEN

John Wakerman & John Humphreys

John Wakerman and John Humphreys conducted a Stream Four report which examined successful elements of rural and remote health primary health care models between 1993 and 2006.

They travelled to Canada on the APHCRRI Linkage and Exchange Travelling Fellowship visiting British Columbia, Ontario and Ottawa. Many of the difficulties facing rural and remote communities in Australia are also issues for Canadian health policy. Professors Wakerman and Humphreys used the fellowship to develop links with Canadian academics working in their field, developed a major comparative international collaborative primary health care research proposal and presented their work on 10 different occasions. They were also able to develop their understanding and ideas for further Australian investment in linkage and exchange.

Stream Four report: A systematic review of primary health care delivery models in rural and remote Australia 1993 - 2006
Lydia Hearn and Margaret Miller conducted a Stream Four project looking at prevention of obesity in young children. On their APHCRI Linkage and Exchange Travelling Fellowship they compared notes with experts in the United Kingdom, Canada and Georgia, USA.

The pair found examples of governments and primary health care organisations tackling obesity in children in each place. They identified six key findings which aligned with their APHCRI research:

- Engaging families from early in a child’s life is essential
- Health professionals serve an important role in preventing overweight by incorporating appropriate strategies
- Schools, preschools and child care facilities can serve a vital role in supporting the promotion of healthy lifestyles
- Communities can serve as a focal point to mobilise family engagement
- Innovative programs need to be evaluated and successful programs disseminated
- Effective approaches require constant data collection, staff training and capacity building.

Stream Four report: Preventing overweight and obesity in young children: synthesising the evidence for management and policy making

Elizabeth McDonald worked with Ross Bailie on the Stream Four project examining preventing growth faltering in children in remote indigenous communities. As part of her fellowship she spent time at INTARESE Annual Project Meeting in Prague, the Environmental Health Group, London School of Hygiene and Tropical Medicine (LSHTM) and at the World Health Organization in Geneva.

The fellowship gave her the opportunity to investigate and increase knowledge on a number of water, sanitation, hygiene and nutrition factors relevant to child health and remote Indigenous communities. In particular, it provided an opportunity to interact face-to-face with the developers of existing cause-effect environmental health models and frameworks and gain a better understanding of the theory that underlies the existing model and framework. At the same time she was able to explore with key persons issues concerning getting research evidence into policy and practice.

Her visit illustrated that the work of Stream Four linked closely with other research on children in poverty, but highlighted a dearth of information about child poverty in resource rich countries like Australia.

Stream Four report: Interventions to Prevent Growth Faltering in Children in Remote Indigenous Communities

Gawaine Powell Davies led a Stream Four project examining strategies used to co-ordinate care for people with complex care needs, both within primary health care and between primary health care and other sectors. The studies focused on areas where co-ordination of care is especially important, predominantly chronic disease, mental health and aged care.

The Netherlands has many similarities with Australia in terms of population and general practice model, so is a good comparator country. It is also the base for the International Network of Integrated Care.

During his fellowship Associate Professor Powell Davies spent time at the University of Utrecht assessing how the strategies identified in the systematic review fit with Dutch approaches to care co-ordination within primary health care, comparing Australian national policies and programs supporting co-ordination of care with those used in the Netherlands, with a view to understanding what Australia can learn from the Dutch experience of co-ordination of care and in linkage and exchange in this area.

**TRAVELLING FELLOWSHIP REPORT**

**STREAM SEVEN**

*Gawaine Powell Davies*

**Stream Four report:** Co-ordination of care within primary health care and with other sectors: a systematic review


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**APHCRI/ROBERT GRAHAM CENTER VISITING FELLOWSHIP**

**STREAM EIGHT**

*Paul Grinzi*

This Visiting Fellowship program was established in 2007 as a joint venture with sister Institute, the Robert Graham Center in Washington DC. It presents an early career primary health care General Practitioner researcher the opportunity to undertake a six week research program of interest to both APHCRI and the Robert Graham Center, in Washington.

Paul Grinzi was the inaugural recipient and he completed a project examining the applicability of HealthLandscape to the Australian context. Dr Grinzi concludes that a HealthLandscape tool would be useful in Australia, but it would be used differently. He suggests political and inter-organisational barriers would need to be overcome in order to facilitate collaboration on the project, but that there would be value in attempting it.


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LINKAGE & EXCHANGE

APHCRI facilitates the uptake of research evidence into health care policy and practice.

The Institute continues to evolve the Linkage and Exchange model developed by Professor Jonathon Lomas of the Canadian Health Services Research Foundation. The key concept underpinning APHCRI’s approach is that groups from different parts of the primary health care sector work together as producers of the Institute’s research.

Policy advisers, researchers, providers of primary health care services and consumers are the key stakeholder groups for APHCRI. In all its functions, APHCRI seeks to actively engage these stakeholders to increase the probability of the outcomes being of practical use. These interactions provide the basis for each of the stakeholder groups to develop their understanding of the role they can play in increasing the adoption of research evidence into policy and practice. The above diagram illustrates the approach APHCRI adopts in facilitating interactions between these key groups.
APHCRI, in partnership with relevant stakeholders, develops and implements 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 (including publications and facilitations of meetings and forums for key stakeholders).

Dissemination and advocacy

- Stream Six reporting template and publication on the website
- Presentations to the Department of Health and Ageing on research outcomes
- "Reader friendly writing" course for National Institute of Clinical Studies
- General Practice and Primary Health Care Research Conference
- Membership of Research Australia
- 5th Health Services and Policy Research Conference
APHCRI DISSEMINATION

APHCRI Dialogue

APHCRI Dialogue – the Institute’s policy commentary bulletin - focussed on advances in primary health care: the development and use of Information Management and Information Technology (IM/IT) by Australian General Practitioners (GPs) and mental health care.

Based on data collected through the APHCRI-funded Commonwealth Fund international survey of GPs the first Dialogue focussed on how prepared doctors are to face the challenges of developing and using IM/IT technologies in their practices.

The second Dialogue was concerned with GP management of patients in the early stages of dementia.

APHCRI@work

Internal communications within the 'virtual institute' model of APHCRI continued to be developed with the aphcri@work newsletter, which is sent to all teams involved in APHCRI funded work.

The newsletter featured updates on the Stream Three and Five participants in 2007 as well as keeping Spokes informed of activities at the Hub.

This newsletter is specifically aimed at the research teams working with APHCRI to inform them of developments at the Hub and of the work being done by their colleagues across the country.

In 2007 aphcri@work contributed to the continuing good relationship between the Hub and the Spokes.

APHCRI Website

The APHCRI website experienced a significant increase in traffic during 2007.

For the period January – March 2006 the site received 39,949 hits and, over the same period in 2007, 120,864 hits were recorded. A significant amount of the increase can be attributed to interest in the Stream Four reports, which have been consistently popular since they were uploaded in December 2006. A similar spike in activity can be identified in December 2007, when the Stream Six reports were published. This indicates APHCRI’s research presence continues to be felt around the country and internationally.

The most frequently accessed reports related to chronic disease management – Professor Nicholas Zwar’s systematic review was the most popular, followed by Professor John Wakerman’s review of primary health care models in rural and remote Australia. Dr Lucio Naccarella’s report on the SIREN project also received a lot of attention and the papers on multidisciplinary teams were equally well accessed.

Common search strings which lead to the site being accessed included “primary health care” and “aphcri”, which suggests that APHCRI’s dissemination strategy is effective within both the primary health care community in Australia and internationally, as the site was regularly visited by people from places as diverse as Israel, Denmark and Brazil.

![Website Traffic 2006/2007](chart.png)
Media

The Institute continued to be approached by media from around the country to comment on issues of primary health care policy and research. Media responded to press releases announcing research funding and also contacted the Hub for expert comment on primary health care and research issues. Including:

- Workforce
- Multidisciplinary team working
- APHCRI visiting fellows

Media were also invited to approach researchers from Streams for comment on some articles.

APHCRI also contributed articles for the PHC RIS newsletter.

CONFERENCES

General Practice & Primary Health Care Research Conference

The Institute sponsored keynote speakers Professor Chris van Weel and Professor Bonnie Sibbald to attend the 2007 General Practice and Primary Health Care Research Conference in Sydney.

Professor van Weel gave a keynote presentation which considered the need to promote the role of the General Practitioner researcher as a way to improve health care outcomes for the global population. This is one of Professor van Weel’s passions and one he hopes to see become more prominent during his time as head of the World Organisation of Family Doctors (Wonca).

Professor Sibbald contributed to APHCRI’s plenary session and a concurrent workshop which looked at Stream Six work investigating workforce solutions for Australian primary health care.

The APHCRI-hosted plenary session, chaired by Dr Norman Swan, examined Australia’s commitment to influencing policy and practice through research in chronic disease management.

The panel discussion included commentary from Professor Sibbald.

In addition to the APHCRI-funded speakers, eleven APHCRI research projects were presented as papers at the conference. Professor Claire Jackson’s report on “Getting evidence into policy: integrated governance arrangements in health care” won one of the AAAGP Distinguished Paper presentations. There were also a number of poster presentations featuring APHCRI work on display.

The 5th Health Services and Policy Research Conference

In 2007 the Institute was again a major sponsor of the Health Services and Policy Research Conference, an important conference on the primary health care policy agenda. The conference was held in New Zealand and a number of APHCRI-sponsored research teams presented their work.

In addition to sponsoring the conference, APHCRI also invested in a number of Australian primary health care researchers’ attendance at the conference. The conference Scientific Committee was asked to nominate the best 10 Australian primary health care researcher abstracts, preferably by early career researchers, who were then put forward for sponsorship. The high calibre of the research projects indicated 10 travelling fellowships, five of which were directed at early career researchers, were sponsored to attend, along with two APHCRI internal staff.

APHCRI held a workshop which examined the linkage and exchange model and APHCRI work to date, Professor Claire Jackson was a keynote speaker in this session and reflected on her own experience of Stream Four.
APHCRI RESPONDS TO POLICY

APHCRI makes providing advice to the Department of Health and Ageing for the development of policy a priority. The Institute stimulates informed national debate and maintains a watching brief on primary health care policy issues.

The Institute provides advice to the Department of Health and Ageing through the availability of research outcomes in hard copy form and on the website and through presentations to interested policy advisers across the Department.

The Institute's use of the 1.3.25 reports and linkage and exchange approaches to research, like in Stream Six, also give the Department ready access to research in an easily accessible format and through the early stages as it develops.

Department staff participation in Stream Six workshops enables policy advisers to discuss on-going research with the teams directly and seek advice and information about the research outcomes of various projects.

APHCRI research staff were available to give presentations to the Department on research outcomes throughout the year and researchers from Streams Three and Five presented early outcomes for a number of Department staff in November.

Professor Nicholas Glasgow held regular meetings with Department of Health and Ageing staff to discuss new research outcomes and offer advice when requested.

The Institute stimulates an informed national primary health care policy debate and maintains a watching brief on primary health care policy issues.

The Institute continued to produce regular APHCRI Dialogue publications. These addressed important issues in primary health care in 2007 – including IM/IT and mental health issues.

The Institute continued to develop its relationship with media organisations and was frequently contacted to discuss primary health care issues.

APHCRI ENHANCES RESEARCH CAPACITY

APHCRI enhances research capacity in primary health care through strategic partnerships with other national and international groups.

The Institute has continued to develop research capacity in primary health care, commissioning and actively engaging in research activities in this area. The Institute has raised the profile of Australian primary health care research nationally and internationally, though international participation in the research program, the Visiting Fellows program and the international speaking engagements of Hub staff and research teams who are reporting their work overseas.

The Institute has continued to develop the research program by building on, and learning from, earlier research streams. Stream Six was developed through learnings from Stream Four, Stream Five developed earlier stream programs further and Streams Seven and Eight developed through international links and the commitment to disseminating work and ensuring its international relevance.

POST-GRADUATE RESEARCH TRAINING

APHCRI supported three students working towards their PhDs in 2007

Sanchia Shibasaki, submitted her PhD to her supervisors in 2007. She explored the Information Atlas Project, which 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 carried 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.
Daniel McAullay continued his PhD research in 2007. Daniel is investigating the distribution of selected primary health care related maternal and child health indicators in Western Australian geographical areas, what are the characteristics of maternal and child primary health care services in these areas and the relationship between the two.

Karen Gardner became APHCRIs third PhD student in 2007. Her research will examine the sustainability of a continuous quality improvement (CQI) approach to improving diabetes care in Indigenous Community Controlled Health Services.

The research will use case studies to examine the system characteristics and factors in the policy and regional environments that affect the sustainability of service improvements associated with the continuous quality improvement approach. It will investigate how organisations use the CQI methodology to mobilise these factors and put into place processes that support the institutionalisation and reproduction of change over time. From this, the study will aim to identify what sorts of policies support sustainability of CQI approaches.

APHCRI develops strategic partnerships and collaborations and ensures that all funded research has an explicit capacity development component.

The Australian National University

During the year APHCRI continued to develop its role within The Australian National University community.

APHCRI took a leading role in the ANU College of Medicine and Health Sciences, as Director Professor Nicholas Glasgow continued his work as chair of the research committee.

Mr Robert Wells, who has continued to work with APHCRI, is Executive Director of the College.

APHCRI develops opportunities for enhancing research capacity through professional interaction, such as collaborations with similar primary care research institutes internationally, participation at key conferences and a visiting fellows program.

National linkages

The Institute has continued to develop its links with national primary health care organisations and stakeholders in 2007.

The Institute continues to partner with the Royal Australian College of General Practitioners (RACGP) to sponsor the APHCRI/RACGP Indigenous health research scholarship. This scholarship aims to improve the capacity of researchers in primary health care working in indigenous health care.

APHCRI also worked closely with the PHC RIS, sponsoring the General Practice and Primary Health Care Research conference and serving on the organising committee, assisting with their media promotion of the speakers and bringing some keynote presenters to the event. APHCRI also regularly contributes to the PHC RIS newsletter.

The Institute was represented at a number of other primary health care conferences and events in 2007, including international conferences, the RACGP conference, 5th Health Services and Policy Research Conference and General Practice Registrars Association conference.
International trips

**Professor Nicholas Glasgow** travelled overseas twice on APHCRi business in 2007. During February he attended a meeting in London in relation to the European Observatory work, visited Manchester to liaise with Professors Helen Lester, Martin Roland and Bonnie Sibbald at the National Primary Care Research and Development Centre and then visited Ottawa to present to the Canadian Health Services research Foundation an overview of APHCRi’s achievements to date, seeking critical input particularly on APHCRi’s use of the Linkage and Exchange approach. APHCRi was a major sponsor of the biennial 5th Health Services and Policy Research Conference in Auckland. Professor Glasgow spoke on the topic The Australian Primary Health Care Research Institute: Fad or Foundation for the Future?

**Dr Yun-Hee Jeon**

Dr Jeon attended the 35th North American Primary Care Research Group Annual Meeting held in Vancouver, Canada in October 2007. The meeting provided opportunities to learn about the latest primary health care research and build international links with colleagues. Key topics covered included: practice-based research, electronic health record and its research utility, complex interventions and evaluations, and best models of primary health care delivery.

Dr Jeon also attended the World Health Organization’s Global Perspectives on Chronic Disease: Prevention of Management conference during this trip. The research presented reported on innovative and successful models of chronic disease management and its impact on health outcomes.

Between the two conferences Dr Jeon was a visiting fellow for two days at the University of British Columbia. She represented APHCRi at the School of Nursing, presenting the paper: Making a Difference: Translating Research into Policy. She also took the opportunity to meet with the faculty members to share research experiences in primary health care and aged care.

Dr Jeon also attended the 5th Health Services and Policy Research Conference in New Zealand.

**APHCRi develops opportunities for pursuing 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.**

The Institute was part of a successful bid for NHMRC program grant funding in 2006, this five-year program continued through 2007.

- Serious and Continuing Illness, Policy and Practice Study (SCIPPS) program grant (outlined in research section)
APHCRI VISITING FELLOWS PROGRAM

February

**Judith Smith** is Senior Lecturer and Director of Research, Health Services Management Centre, University of Birmingham, UK, and Visiting Senior Research Fellow, Health Services Research Centre, Victoria University of Wellington, New Zealand.

Judith Smith has been involved in health services research for twelve years, before which she worked as a senior manager in the NHS in England. Her research interests are concerned with the organisation and management of primary health care, health commissioning, management and organisational development, and international health policy.

Recent projects include a review of the evidence regarding effectiveness in health commissioning (Smith, Lewis and Harrison, 2006), an analysis of the likely impact of an expanding market in NHS primary care (Smith, Ham and Parker, 2005), writing a book *Towards Managed Care: the role and experience of primary care organisations* for Ashgate Publishing (with Nick Goodwin), and editing a major new textbook *Healthcare Management* (with Kieran Walsh) for the Open University Press. During 2007, Judith was based at Victoria University in New Zealand, where she was a senior visiting research fellow, focusing on the evaluation and development of primary health care. She is also using the year to write her PhD thesis on the role of chief executives of primary care organisations.

While with APHCRI Judith attended the first Stream Six workshop for 2007 and gave a presentation examining “Experiences with systematic reviews of the ‘messy’ literature that informs policy”. She also provided a commentary on the day’s events.

March

**Professor Helen Lester** is Professor of Primary Care at the National Primary Care Research and Development Centre, University of Manchester and Honorary Professor of Primary Care Mental Health at the University of Birmingham.

Professor Lester has been a General Practitioner in inner city Birmingham since 1990, providing primary health care for hard-to-reach groups including homeless people and, more recently, asylum seekers and refugees.

Professor Lester is also national primary care lead for the Mental Health Research Network and Academic Lead of the Expert Panel reviewing the GP Contract Quality and Outcomes Framework (QOF) in the UK. The latter role involves assessing the underpinning evidence for the 150 financially incentivised indicators in QOF across clinical, organisational and patient experience domains, and advising the British Medical Association and the Department of Health on the revision of existing and addition of new indicators.

While in Australia Professor Lester contributed to the research projects of the UNSW research spokes, and also gave a seminar in Canberra on “Quality indicators in British general practice: or, the pros and cons of performance related pay”. Professor Lester also contributed to discussions regarding APHCRI hub research.

May

**Professor Chris van Weel** is the President of Wonca. He is also the recipient of a Dutch Royal honour making him an Officer in the Order of Oranje Nassau for his contribution to medicine.

Professor Chris van Weel has contributed greatly to practice-based evidence, proving that good general practice improves health outcomes for patients. He is a qualified General Practitioner, and both Professor and Head of General Practice at Radboud University Medical Centre at Nijmegen in the Netherlands. Professor van Weel has expertise in chronic disease management and the patient’s journey though the health system. He is active in local and international research initiatives, teaches medical students and sees patients on a regular basis. Professor van Weel took up the Wonca Presidency in July 2007.

While at APHCRI Professor van Weel gave an ANU public lecture on general practice. He was also a keynote speaker at the Sydney General Practice and Primary Health Care Research Conference where he presented on: “Promoting the general practitioner researcher: working together to improve health globally”.

Judith Smith

Helen Lester

Chris van Weel
Professor Bonnie Sibbald is Professor of Health Services Research and Deputy Director of the National Primary Care Research and Development Centre (NPCRDC), University of Manchester.

Professor Sibbald is an experienced practitioner, manager and commissioner of health services research, with a particular interest in health care organisation and delivery in general practice. She leads NPCRDC’s workforce research program and the Manchester-based program of research into co-morbidity within the NIHR National School of Primary Care Research. From 2000 to 2006 she chaired the management board of the University of Manchester Institute of Health Sciences that brings together the major groups engaged in health sciences research across the university and local National Health Service organisations. She was made an Honorary Fellow of the Royal College of General Practitioners in 1996 for her contribution to the development of academic general practice.

Professor Sibbald spent several days with APHCRI, both in Canberra and as part of the APHCRI plenary at the Sydney General Practice and Primary Health Care Research Conference. Professor Sibbald and Dr Christine Phillips from Stream Three gave a breakfast presentation to Department of Health and Ageing and various stakeholders in Canberra looking at nursing roles in the medical workforce.

November

Professor Tony Kendrick is Professor of Primary Medical Care at the University of Southampton, School of Medicine and a General Practitioner. His research addresses the management of common and costly mental health problems in primary health care, through multi-practice randomised controlled trials of new treatments and service developments, as well as observational and qualitative studies. He has published extensively, particularly on the primary care of depression, schizophrenia, and eating disorders. His work has been influential in the development of good practice guidelines and the new quality indicators in the UK general practice contract for the management of severe mental illness and depression.

Professor Kendrick joined APHCRI in Melbourne in November to be part of the Strategic Planning day. He gave a presentation on research looking at the antidepressant treatment of depression to illustrate the utility of large datasets in informing policy, as well as giving some insights into the GP contract quality and outcomes framework from his perspective as chair of the mental health expert group for the Quality and Outcomes Framework.

December

Professor Andrew Bindman is Professor of Medicine, Health Policy, Epidemiology and Biostatistics, at the University of California San Francisco (UCSF). He is also the Chief of the Division of General Internal Medicine at UCSF’s affiliated San Francisco General Hospital and Director of the UCSF Division of General Internal Medicine’s Research Fellowship Program.

Professor Bindman has published more than 90 peer-reviewed scientific articles on access to primary medical care, health outcomes associated with barriers to primary care, and the evolving role of primary care physicians and safety net providers in US health care system.

He has practiced and taught primary care at San Francisco General Hospital and its affiliated clinics for more than 20 years.

At APHCRI Professor Bindman met with APHCRI team members to discuss the research being developed and led by the Institute. He also chaired a meeting of invited organisations brought together to discuss the necessary elements of a primary health care strategy for Australia.
APHCRI OPERATIONS

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.

Budget performance

Australian Primary Health Care Institute general funds finished 2007 with a small surplus of $3782.77.
APHCRI research funds finished 2007 with a surplus of $1,674,175.35. However, there are substantial on-going commitments to Stream Three in 2008. In addition, it is anticipated that Streams Nine through 15 will be launched in 2008.

APHCRI Hub research finished 2007 with a surplus of $115,662.71. The principal reason for this is that two Hub research projects (European Observatory and Optimising Residential Aged Care Workforce) will not be completed until later in 2008. For statements of income and expenditure, see Appendix V.

Contractual obligations

In 2007 APHCRI satisfied all of its contractual obligations to the Australian Federal Government.

Recruit, develop and retain staff

The number of staff at APHCRI increased with new Research Assistants joining the team to work with senior researchers on a number of Hub projects.

Research Assistants Carmen Pearce-Brown and Stefan Kraus joined APHCRI to work part-time on the SCIPPS research. Angela Scotney also spent several months with the Institute working with Karen Gardner to complete the Readiness for School project and later assisting Dr Jeon on her Optimising Residential Aged Care project.

Some of our Research Assistants moved on to full time work in their field of study in 2007, including Shawn Lyons and Dhigna Rubiano. Anna Gear also moved on to concentrate on her medical studies.

Effective governance

The Institute has employed effective governance arrangements in 2007.

Current and future work of APHCRI was informed by a rigorous and ongoing assessment of the strategic environment. This included continued dialogue with the Department, key stakeholders and the RAB. To inform the future strategic directions of the Institute, the RAB and members of APHCRI staff participated in a Strategic Planning Workshop during two days in November.

The RAB, which guides the Institute’s research, met three times during the year. The RAB identified APHCRI’s research priorities and developed relevant research programs. The RAB continued to provide feedback to successful and unsuccessful grant applicants contributing to the transparency of the grant process.

There were three ERC meetings in 2007. These meetings provided recommendations to the RAB on Streams Seven and Eight of APHCRI’s research program. 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 six research organisations in Streams Seven and Eight, as well as finalising all arrangements under the research contracts for Stream Six. The performance of Streams Three and Five spokes continued to be monitored in 2007.
ANU strategic requirements

Membership on committees and outreach

APHCRI staff are members of a number of national and international committees. In 2007 they participated in meetings of:

- Australian Drug Evaluation Committee (Professor Glasgow)
- Australian Medical Council (Professor Glasgow)
- AHIC - Australian Health Information Council (Professor Glasgow)
- AEAC – Asthma Expert Advisory Committee (Professor Glasgow)
- ALF – Australian Lung Foundation (Professor Glasgow)
- NAC – National Asthma Council (Professor Glasgow)
- Research Board of Australian College of Mental Health Nurses (Dr Jeon)
- Primary Dementia Collaborative Research Centre Advisory Committee (Dr Jeon)

APHCRI staff are also members of a number of internal ANU committees. In 2007 they participated in meetings of:

- ANU Academic Board (Professor Glasgow, Ms Kerr)
- University Research Committee (Professor Glasgow)
- Deans and Directors (Professor Glasgow)
- ANU College of Medicine and Health Sciences Executive (Professor Glasgow)
- ANU College of Medicine and Health Sciences Board (Professor Glasgow, Ms Kerr)
- ANU College of Medicine and Health Sciences Research Committee (Professor Glasgow, Ms Kerr)
- ANU College of Medicine and Health Sciences Education Committee (Dr Yun-hee Jeon)
- ANU College of Medicine and Health Sciences Ethics Committee (Ms Gardner)

Effective management

In 2007 APHCRI continued to improve the efficiency and effectiveness of management systems and procedures by an ongoing process of internal review and evaluation. The rollout of two additional research streams in 2007 and the management of milestones under the various spoke funding contracts demonstrate the success of this systematic approach.

Performance reporting

The Institute met all reporting requirements under the Funding Agreement with the Department of Health and Ageing, submitting four Quarterly Publications notices, the Annual Report and required financial statements.

The Institute met all ANU reporting requirements including submissions to ANU committees, budget performance reviews, and Department of Education, Science and Training reporting.

APHCRI continued to monitor the performance of spokes under their funding agreements and ensured that all milestones and deliverables were met.
THE YEAR AHEAD

The Institute is expecting a busy year in 2008. Particularly, the team look forward to the opportunity to discuss the successes of the past five years with evaluators in the middle of 2008 and to benefit from any suggestions on how APHCRI can build on the work to date to grow into a stronger organisation.

With the departure of key staff, the Director and Institute Manager, APHCRI will be recruiting from around Australia and internationally to find a Director to take the Institute into the next stage of its development. A new Institute Manager is expected to join the team in the first quarter of 2008.

New research streams will be developed in the next 12 months to further develop the scope of primary health care research undertaken by the Institute. Several projects will go to the Research Advisory Board for consideration in the early part of the year.

The Institute will continue to build the Hub research program with ongoing work by Dr Jeon. Professor Glasgow will complete work on chronic illness with the European Observatory early in the year and will remain involved in the Serious and Continuing Illness Policy and Practice Study.

There will be an additional PhD student as part of the Institute, while one will complete and two more will continue with their studies.

While APHCRI will look different in 2008, there remains a strong commitment to development and dissemination of Australian primary health care research to benefit the health of Australians.
APPENDIX I

APHCRI Hub staff

Director

Professor Nicholas Glasgow

Fellow

Dr Yun-Hee Jeon

Researcher

Karen Gardner (to August)

Institute Manager

Elizabeth Kerr

Program Co-ordinator:
Communications and Policy Liaison

Frith Rayner

Administration Officer (SCIPPS)

Philip Robson

Administration

Rena Irby
Kimberley Brady

Research Assistants

Tanisha Jowsey
Dhigna Rubiano (to June)
Anna Gear (to October)
Shawn Lyons (to June)
Angela Scotney (to November)
Carmen Pearce-Brown (from May)
Stefan Kraus (from May)

More information about APHCRI Hub staff can be found at:

www.anu.edu.au/aphcri/Staff/index2.php
### APPENDIX II

**Research Advisory Board**

**Professor John Marley (Chair)**

*Professor John Marley* MD MBChB FRCP(Edin) FRACGP FACRRM DA DRCOG FPCert MAICD holds a Chair in the Faculty of Health Sciences at the University of Queensland. In addition, he is Director of Strategy and Role Redesign in the Clinical Services Redesign Program of NSW Health. He also holds conjoint Chairs at the University of Adelaide and at the University of Newcastle. Previously he was Pro Vice-Chancellor Health at the University of Newcastle and before that, Foundation Professor of General Practice and Associate Dean of students at the University of Adelaide. His past clinical experience includes practice in cardiology and in metropolitan and rural and remote general practice. He continues in active clinical work in emergency medicine and general practice. Professor Marley’s research profile spans from the laboratory bench to the largest of clinical trials. He has published extensively in major journals. Professor Marley serves on a number of other boards and major national and international committees.

**Professor Linda Kristjanson (Deputy Chair)**

*Professor Linda Kristjanson* RN, BN, MN, PhD is Deputy-Vice Chancellor Research and Development, Curtin University of Technology in Western Australia. Between 2000 and 2006 she held the position of The Cancer Council WA Chair of Palliative Care. In this role Professor Kristjanson created and led the Western Australian Centre for Cancer & Palliative Care. She has received competitive research funding from local and national organisations in Canada, the USA and Australia. Professor Kristjanson served as a member of the National Health and Medical Research Council from 2003 - 2006. Professor Kristjanson was chosen as the 2002 Australian Telstra Business Woman of the Year for her entrepreneurial work in health and science.

**Ms Janette Donovan**

*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 health care research of importance to consumers to the RAB.

**Professor Nicholas Glasgow**

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

**Ms Sally Hall**

*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 health 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 Practice Nurses Study, and received the inaugural General Practice Leader Awards established by the National Institute of Clinical Studies.
Professor Mark Harris

Professor Mark Harris MBBS, DRACOG, FRACGP, MD has extensive experience in primary health care research and research capacity building in primary health care in Australia. He is Foundation Professor of General Practice and Executive Director of the Centre for Primary Health Care and Equity at the University of New South Wales. 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.

Professor David Lyle

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. Professor Lyle 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.

Leilani Pearce

Leilani Pearce has worked in Aboriginal and Torres Strait Islander health for more than fourteen years. She is Director of Create Consulting Group which provides management and business development support services to organisations within the health and community service industries. Her core experience is in primary health care policy and program development, implementation, and evaluation, community consultation and facilitation. Ms Pearce has worked at both the Federal and State levels of government, and continues to work with and support the Aboriginal and Torres Strait Islander Community Controlled health sector through the Queensland Aboriginal and Islander Health Council.

Ian Thompson

Ian Thompson has worked in the health sector at Commonwealth and ACT Government levels for 15 years. He is the Deputy Chief Executive of ACT Health, and is responsible for the clinical operations of ACT Health, covering public hospital, mental health and community health services. Previously he has been involved in national activities such as negotiations for the Australian Health Care Agreements, which are the principal Commonwealth/State agreements for hospital services and funding in Australia, national research and service delivery evaluation of models and care and funding for chronic disease management, and development and implementation of the National Mental Health Strategy.

Department of Health and Ageing

Department of Health and Ageing representative a member of the Department of Health and Ageing contracts section has observer status on the APHCRI Research and Advisory Board.
APPENDIX III

Papers and Reports

Papers


Stream Six Spoke Research Papers

Optimising skill mix in the primary health care workforce for the care of older Australians

What is the place of generalism in the 2020 primary health care team?
Gunn J, Naccarella L, Palmer V, Kokanovic R, Pope C, Lathlean J

Optimising the primary mental health care workforce: how can effective psychological treatments for common mental disorders best be delivered in primary health care?
Moulding R, Blashki G, Gunn J, Mihalopoulos C, Pirkis J, Naccarella L, Joubert L

The contribution of approaches to organisational change in optimising the primary care workforce

Improving primary health care workforce retention in small rural and remote communities – how important is ongoing education and training?

Review of primary and community care nursing
Keleher H, Parker R, Abdulwadud O, Francis K, Segal I, Dalziel K

The expanding role of generalists in rural and remote health: A systematic review

What is the place of generalism in mental health care in Australia? A systematic review of the literature
Perkins D, Williams A, McDonald J, Larsen K, Powell Davies G, Lester H, Harris M

Attracting health professionals into primary care: Strategies for recruitment
Thistlethwaite J, Shaw T, Kidd M, Leeder S, Burke C, Corcoran K
Editorials/Book Reviews


Glasgow N, Laying foundations for the future Australian Doctor, March 2007

Conference Report

Glasgow N. Integration and co-ordination. Presented at TSANZ Annual Conference, Auckland, New Zealand, March 2007


Jeon Y-H. Unfolding the SCIPPS (Serious and Continuing Illness Policy and Practice Study) methodological pondering. Presented at GP & PHC Research Conference, Sydney, 23-25 May


Glasgow N, Sibbald B. Addressing the workforce challenges: APHCRI’s Stream Six – the number of workers, optimising the workforce and the place of generalism. Presented at GP & PHC Research Conference, Sydney, 23-25 May

Glasgow N, What is the evidence on chornic disease in PHC that needs to go into PHC practice and policy – what we know, what we don’t know and where policy can make a difference. Presented at GP & PHC Research Conference, Sydney, 23-25 May


APHCRI Dialogue

Australian GPs ready to take on developments in IT technology March 2007

Early dementia detection and screening - what more can we do? September 2007

APHCRI@work

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December
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</tr>
<tr>
<td>2.4 Stimulate an informed national primary health care policy debate and maintain a watching brief on primary health care policy issues</td>
<td>Pages 30-31: Dissemination and advocacy</td>
<td>(APHCRI Dialogue, APHCRI@work, website, media, conferences)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pages 37-38: Visiting Fellows program</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pages 33: Conference sponsorship</td>
</tr>
</tbody>
</table>
### Strategic Goal

<table>
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<tr>
<th>Section</th>
<th>Description</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>To enhance research capacity in primary health care through strategic partnerships with other relevant national and international groups</td>
<td>Page 8: Table of research program, Page 34: Enhancing research capacity, Page 34: Post-graduate research training, Pages 35-36: National and international linkages, Pages 37-38: Visiting Fellows program</td>
</tr>
<tr>
<td>3.1</td>
<td>Review the evidence for primary health care research capacity building</td>
<td>Page 8: Table of research program, Page 34: Enhancing research capacity</td>
</tr>
<tr>
<td>3.2</td>
<td>Develop strategic partnerships and collaborations and ensure that all funded research has an explicit capacity development component</td>
<td>Page 8: Table of research program, Page 34: Enhancing research capacity, Pages 35-36: National and international linkages, Pages 37-38: Visiting Fellows program</td>
</tr>
<tr>
<td>3.3</td>
<td>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</td>
<td>Page 8: Table of research program, Pages 35-36: National and international linkages, Page 36: Externally funded research</td>
</tr>
<tr>
<td>3.4</td>
<td>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</td>
<td>Page 8: Table of research program, Page 34: Enhancing research capacity, Page 34: Post-graduate research training, Pages 35-36: National and international linkages, Pages 37-38: Visiting Fellows program</td>
</tr>
<tr>
<td>3.4.1</td>
<td>Visiting fellows</td>
<td>Pages 37-38: Visiting Fellows program</td>
</tr>
<tr>
<td>4</td>
<td>To ensure 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</td>
<td>Pages: 39, 40 and 59-54, Appendices I, II and V</td>
</tr>
<tr>
<td>4.1</td>
<td>Recruit, develop and retain staff</td>
<td>Page 39</td>
</tr>
<tr>
<td>4.2</td>
<td>Effective governance</td>
<td>Page 39</td>
</tr>
<tr>
<td>4.3</td>
<td>Effective management</td>
<td>Page 40</td>
</tr>
<tr>
<td>4.4</td>
<td>Performance reporting</td>
<td>Page 40</td>
</tr>
<tr>
<td>4.5</td>
<td>Service to the University</td>
<td>Page 40</td>
</tr>
<tr>
<td>4.6</td>
<td>Service to the community</td>
<td>Page 40</td>
</tr>
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</table>
### Appendix V

**Statement of Income and Expenditure**

For the Period 01 January, 2007 to 31 December, 2007

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
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<tbody>
<tr>
<td><strong>Unspent Balance as at 01 January, 2007</strong></td>
<td>$1,213.67</td>
</tr>
<tr>
<td><strong>Current Period</strong></td>
<td><strong>$</strong></td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td><strong>$1,003,961.18</strong></td>
</tr>
<tr>
<td><strong>Total Available Funds Before Expenditure</strong></td>
<td><strong>$1,005,174.85</strong></td>
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#### Less Expenditure

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<tbody>
<tr>
<td>5001 Salary-Academic Continuing</td>
<td>48,852.28</td>
</tr>
<tr>
<td>5002C Salary Research A (Casual)</td>
<td>26,657.05</td>
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<tr>
<td>5004 Salary Admin Staff Continuing</td>
<td>209,349.42</td>
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<tr>
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<td>5022C Super - Research A (Casual)</td>
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<td>5024C Super - Admin Staff (Casual)</td>
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<td>5031 Wcprop-Academic Continuing</td>
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<td>5034C Wcprop - Res Assistants(Casual)</td>
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<tr>
<td>5034 Wcprop-Admin Staff Continuing</td>
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<td>5034C Wcprop - Admin Staff (Casual)</td>
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<td>5034C P/Tax-Academic Continuing</td>
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<td>5044C IntPurch: Salary admin fee</td>
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<td>5044C Office Equipment -Nil/Inventory</td>
<td>50.00</td>
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<tr>
<td>5052C Salaries &amp; Related Costs</td>
<td>368,032.93</td>
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<td>5111 Computer Equip -Nil/Inventory</td>
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<tr>
<td>5102 Equipment - Non-Capital</td>
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<td>5701 Stip-PhD Scholars</td>
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<tr>
<td>5308 Books, Subs &amp; Electronic Access</td>
<td>124.15</td>
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<td>5311 Gas</td>
<td>363.00</td>
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<td>5312 Telephone</td>
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<tr>
<td>5312M Telephone - Mobile Services</td>
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</table>
### STATEMENT OF INCOME AND EXPENDITURE

**For the Period 01 January, 2007 to 31 December, 2007**

<table>
<thead>
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<th>Item Description</th>
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<td>Electricity</td>
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<td>Maintenance-Vehicles</td>
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<td>Internet &amp; Network Services</td>
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<td>Secur/Traf Expenses</td>
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<tr>
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<td>Cater Expenses</td>
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<td>Light meals non-FBT deductible</td>
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<td>Entertainment Non-FBT</td>
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<td>Rental Premises</td>
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<td>Consultancies Accs Payable</td>
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<td>Advertising-Mktg_Promo_Other</td>
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<td>Advertising-Staff Recruitment</td>
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<td>Postage</td>
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<td>Stationery</td>
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<td>Lease Other &amp; Hire Equip/Room</td>
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<td>IntPurch-Print/PubAdv/Publics</td>
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<td>IntPurch-CourseFee/Training/PD</td>
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<tr>
<td>IntPurch-Mngt/AdminFee/Intern</td>
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<td>IntPurch-Network Serv Charges</td>
<td>1,657.00</td>
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<td><strong>Total Other Expenses</strong></td>
<td><strong>522,393.13</strong></td>
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**Current Period**

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<th>Item Description</th>
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<td>Airfare Aust-Visiting Fellow</td>
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<tr>
<td>Airfares International</td>
<td>25,498.97</td>
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<tr>
<td>Conference Reg’n Australia</td>
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<tr>
<td>Conf Reg’n Aust-Visiting Felloes</td>
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<tr>
<td>Conference Reg’n International</td>
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<tr>
<td>Accommodation Australia</td>
<td>14,495.90</td>
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<td>Accom Aust - Visiting Fellow</td>
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<tr>
<td>Accommodation International</td>
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<td>Taxi BusTrain Australia</td>
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<td>Taxi Bus Train International</td>
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<td>Incidental Travel Exp Aust</td>
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<tr>
<td>Incidental Travel Exp Internat</td>
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<tr>
<td>Meals Australia</td>
<td>594.85</td>
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<tr>
<td>Meals International</td>
<td>1,213.81</td>
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</tbody>
</table>

Page 2 of 3
**Statement of Income and Expenditure**
For the Period 01 January, 2007 to 31 December, 2007

<table>
<thead>
<tr>
<th>Current Period</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel Field &amp; Survey Expenses</td>
<td>105,018.92</td>
</tr>
<tr>
<td>Total Expenditure</td>
<td>1,091,392.08</td>
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**Unspent Balance as at 31 December, 2007**

<table>
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<th></th>
<th>$</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>3,762.77</td>
</tr>
</tbody>
</table>

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.

Lorraine Piper  
Senior Accountant  
Special Purpose Funds

Page 3 of 3
THE AUSTRALIAN NATIONAL UNIVERSITY
FINANCE AND BUSINESS SERVICES
SPECIAL PURPOSE FUNDS

FUND No.: SCI13000101
DONOR: Department of Health and Ageing
DONOR Ref:
PROJECT: Australian Primary Health Care Research Institute
APHCRI Research

Prof Nicholas Glasgow

STATEMENT OF INCOME AND EXPENDITURE
For the Period 01 January 2007 to 31 December 2007

<table>
<thead>
<tr>
<th></th>
<th>$</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unspent Balance as at 01 January, 2007</td>
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</table>

<table>
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<tr>
<th>Income</th>
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<tbody>
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<td>Department of Health &amp; Aged Care Grant</td>
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<td>Interest</td>
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<td><strong>Total Income</strong></td>
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</table>

<table>
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<tr>
<th>Expenditure</th>
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<tbody>
<tr>
<td>Research Funds</td>
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<tr>
<td>Stream 3</td>
<td>650,368.50</td>
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<td>Stream 4</td>
<td>58,191.50</td>
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<td>Stream 5</td>
<td>464,136.50</td>
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<tr>
<td>Stream 6</td>
<td>1,013,385.19</td>
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<tr>
<td>Stream 7</td>
<td>303,026.00</td>
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<td>HSPR Conference</td>
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<tr>
<td>AMPC MJA Supplement (Printing)</td>
<td>42,816.00</td>
</tr>
<tr>
<td><strong>Total Expenditure</strong></td>
<td>2,614,533.02</td>
</tr>
</tbody>
</table>

Unspent Balance as at 31 December, 2007: $1,674,175.35

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.

Lorraine Prier
Senior Accountant
Special Purpose Funds

6/10/08
## Statement of Income and Expenditure

For the Period 01 January, 2007 to 31 December, 2007

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tr>
<td><strong>Unspent Balance as at 01 January, 2007</strong></td>
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<td><strong>Add Income</strong></td>
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<tr>
<td>9970 Health And Aged Care Grant</td>
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<td>Other Income</td>
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<tr>
<td>9520 Interest - Short Term MMarket</td>
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<td>Investment Income</td>
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<td></td>
<td>$1,625.94</td>
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<td><strong>Total Income</strong></td>
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<tr>
<td><strong>Total Available Funds Before Expenditure</strong></td>
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<td><strong>Less Expenditure</strong></td>
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</tr>
<tr>
<td>5001 Salary-Academic Continuing</td>
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<td>5002 Salary Research Assistant</td>
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<td>5002C Salary Research Ass (Casual)</td>
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<tr>
<td>5004 Salary Admin Staff Continuing</td>
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<td>5032C Wcomp - Res Assistants (Casual)</td>
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<td>5042 PT/Res Assistants</td>
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<tr>
<td>8501 IndPurch- Salary admin fee</td>
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<tr>
<td><strong>Salaries &amp; Related Costs</strong></td>
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<tr>
<td>5365 Internet &amp; Network Services</td>
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<td>5576 Print Pub/WK External</td>
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<tr>
<td>5824 Interest Expense</td>
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<td>5830 Advertising-Staff Recruitment</td>
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<td>5852 Office Administration Expenses</td>
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<td>5400 Airfares Australia</td>
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<td>$413.52</td>
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Fund No: SCH3000102  
Project: APHCRI Hub Research

**Donor Ref:**  
**Chief Investigator:**

**STATEMENT OF INCOME AND EXPENDITURE**  
For the Period 01 January, 2007 to 31 December, 2007

| Item                        | Amount  
|-----------------------------|---------
| 5401 Airline International  | 10,621.94
| 5420 Accommodation Australia| 170.32
| 5421 Accommodation International | 2,344.97
| 5425 Taxi Rui Team International | 383.48
| 5450 Incidental Travel Exp Asst | 52.7
| 5471 Meals International    | 442.97

**Travel Field & Survey Expenses**  
14,967.17  
**Total Expenditure**  
153,235.69  

**Unspent Balance as at 31 December, 2007**  
$115,682.71

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.

Lorraine Piper  
Senior Accountant  
Special Purpose Funds

Page 2 of 2