



***RESEARCH ROUNDup* evaluation**

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At PHC RIS we are constantly looking for ways to improve what we do. We have produced 16 issues of *RESEARCH ROUNDup* since October 2008 and believe it is time to evaluate this publication.

Each issue is promoted via a *RESEARCH ROUNDup* subscription alert, *PHC RIS eBulletin* and *PHC RIS infonet*. All issues are posted on our website in pdf format. Topics and number of downloads per topic are listed in the appendix. Issue 13 *Identifying gaps in primary care services: reaching the 'unreached'* was the highest downloaded pdf for 2010 at 754.

On 20 January 2011, an email was sent to all *RESEARCH ROUNDup* subscribers and subscribers to PHC RIS alerts (over 2000 people) inviting them to participate in an on-line survey of *RESEARCH ROUNDup*. An incentive (entry into the draw for a free 2011 PHC Research Conference registration) was offered to encourage participation. On 3 February an email reminder was sent to all who had not yet completed the survey. When the survey closed on 11 February 147 people had responded.

The winner of the draw for a 2011 PHC Research Conference registration was Tara Williams.

In a nutshell

Those who participated were mainly researchers, project officers and nurses/allied health practitioners and were subscribers to *PHC RIS eBulletin* and/or *RESEARCH ROUNDup*. Responses from the 147 participants showed that:

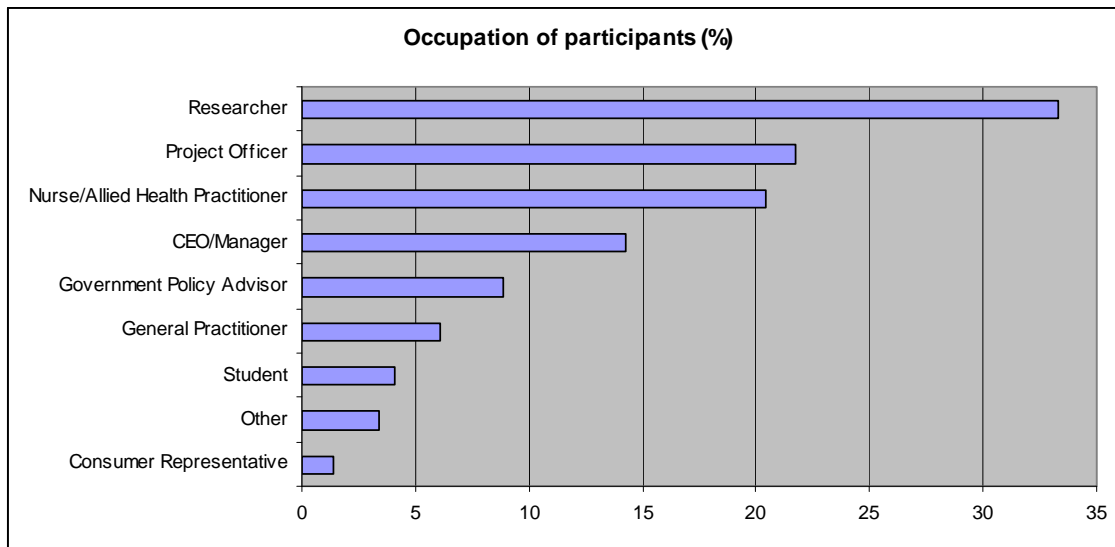
What we asked you	% who agreed
All or some of the topics were relevant to my work	99
All or some of the topics were interesting	100
An issue has led to discussion on the topic with my colleagues	81
An issue of <i>RESEARCH ROUNDup</i> changed my thinking on a subject	73
I have followed up references in issues of <i>RESEARCH ROUNDup</i>	85
I have cited a <i>RESEARCH ROUNDup</i> in my work	47
A <i>RESEARCH ROUNDup</i> stimulated change in my practice	44
A <i>RESEARCH ROUNDup</i> led to an application in my organisation	35
<i>RESEARCH ROUNDup</i> aims (to some or a great extent) to keep me up-to-date with recent primary health care research in Australia	90
The format of <i>RESEARCH ROUNDup</i> is the best way (to some or a great extent) to achieve the aim of the publication: To keep the reader up-to-date with recent primary health care research in Australia.	91
Six issues per year is just right	75
I would prefer more issues	24

Recommendations

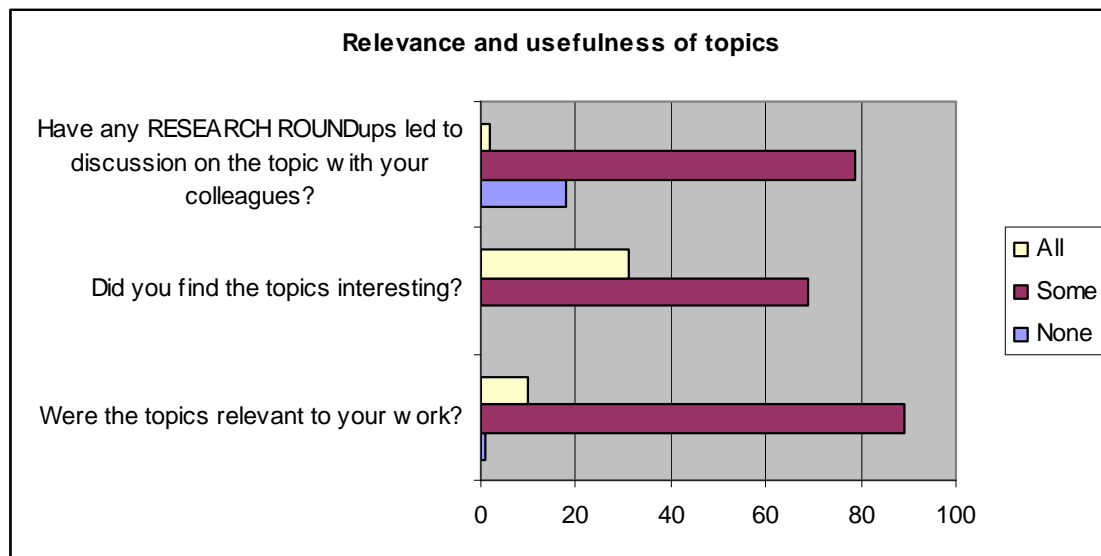
- ⇒ Continue producing six issues/year
- ⇒ Improve the format by improving the hyperlinks to the references
- ⇒ Promote the resource to a wider audience
- ⇒ Set up an on-line forum for feedback and ongoing discussions
- ⇒ Categorise *RESEARCH ROUNDup* according to topics
- ⇒ Consider topics listed in consultation with DoHA.

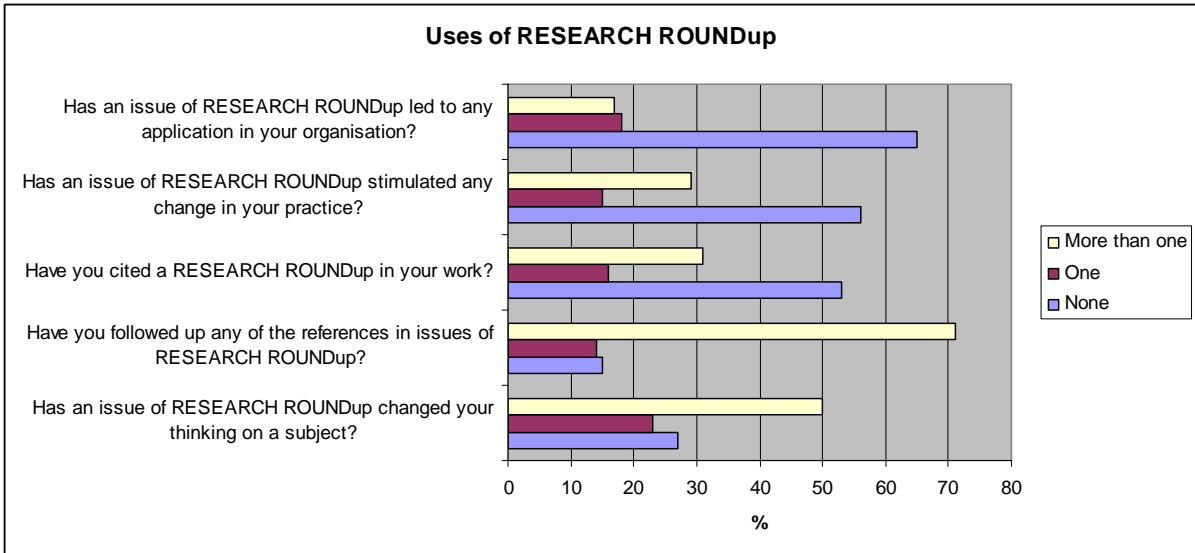
The results in more detail

Researchers were the largest group of participants

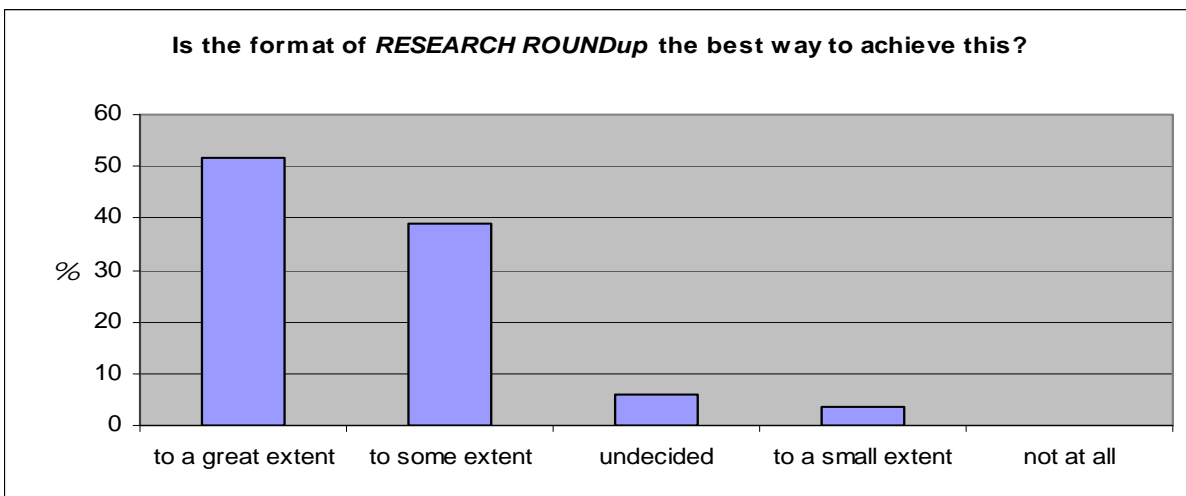
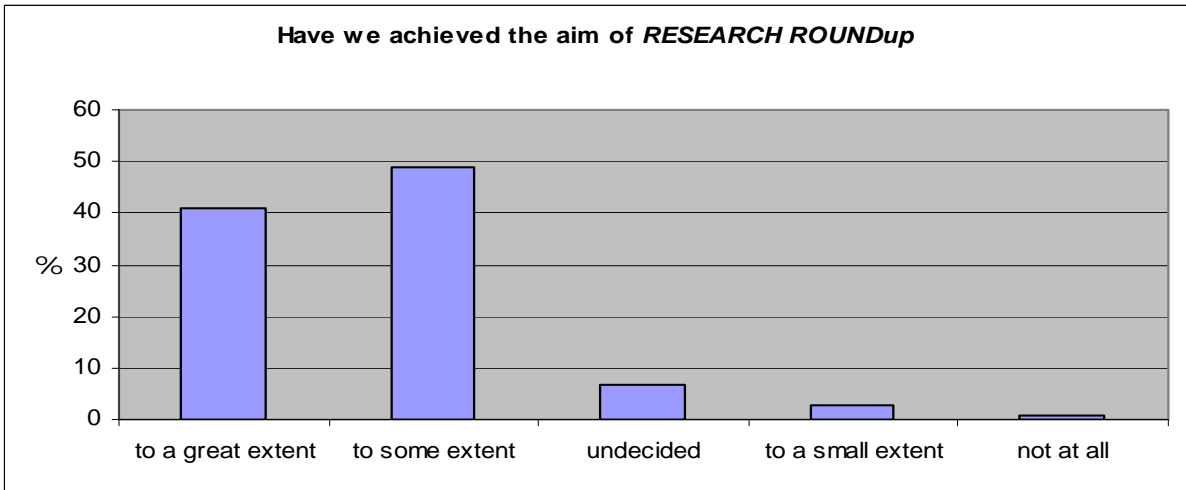


Most participants were subscribers to *PHC RIS eBulletin* and/or subscribers to *RESEARCH ROUNDup*. The relevance and usefulness of the topics as well as how they used the resource is described in the figures below.





The aim of *RESEARCH ROUNDup* is to keep the reader up-to-date with recent primary health care research in Australia. Most indicated that *RESEARCH ROUNDup* achieves this purpose to some or a great extent and that the current format was the best way to achieve this.



Frequency of Issues

Three quarters of the participants indicated that six issues per year is just right while 24% would prefer more.

Stories about how this resource has been used

- ⇒ *Already considering changes in practice team- reinforced need to consider hierarchical possibilities as barrier to this change.*
- ⇒ *As a Primary Care Partnership, our work is focused on building capacity of members to deliver safe, quality primary care & to improve the client's journey through integration & coordination of care/pathways. There is a dearth of PHC research capacity & resources within agencies. The PCP uses the data & information from several PHCRIS articles to help drive change. The PCP is committed to the use of data for continuous improvement, to assess changes that are needed, to monitor progress of change and to evaluate impact & outcomes of that change as a means of sustaining it. Issues 2 & 3 have been useful to our service coordination work, & several others to our work in building CDSM capacity & Early Intervention programs.*
- ⇒ *By regularly reading the bulletins and reviewing the website, I have been able to link organisations to particular research organisations with a view to engaging (and possibly contracting) their expertise for evaluative research eg. refugee health, indigenous health.*
- ⇒ *Have used information in research about primary health reform.*
- ⇒ *I am currently undertaking research into the implementation of chronic disease self management support in primary health care. Many of the topics are either directly or indirectly related ... and I love it. Thanks for the succinct summaries which are easy to fit into a busy day.*
- ⇒ *I have been able to share the research findings with colleagues, stimulate discussion in the tea room, and also use the research to support and improve the quality of position papers and discussion forums.*
- ⇒ *I like the relevance to Australian and Regional population.*
- ⇒ *I tend to forward the Research Round up to other colleagues who are practitioners completing research in the particular area of interest. In this way it is of more direct value for them than it is for me.*
- ⇒ *I work with a chronic disease management company and have found the publications very useful in the care of the patients and helping them better self managed their condition.*
- ⇒ *Information around dementia has assisted with developing service plans for dementia services and carer support.*
- ⇒ *Many times articles have confirmed our thinking and actions rather than changed them.*
- ⇒ *RESEARCH ROUNDups have been helpful as starting points to identify key issues for specific topics and as pointers to current research on those topics.*
- ⇒ *We (the EFPC) have used some of the content to spread the information throughout our European network. Thank you!*

Features about this resource that they liked

Many mentioned that this resource was:

- ⇒ easy to access
- ⇒ easy to read
- ⇒ easy to forward to others
- ⇒ user-friendly
- ⇒ available at no cost
- ⇒ brief, concise, comprehensive and succinct
- ⇒ relevant and informative
- ⇒ up to date.

The topic content:

- ⇒ was based on trustworthy material
- ⇒ provides a balanced overview
- ⇒ provides links to further research
- ⇒ titles were informative
- ⇒ a good list of references
- ⇒ provides a good summary
- ⇒ stimulated discussion
- ⇒ provides a useful overview of research being conducted in the sector.

RESEARCH ROUNDup covers a range of topics some that are particular to my area of work and some that extend my knowledge into new areas.

I like the synthesis of the current research. The ROUNDup gives just enough information for me to follow-up in areas of research interest to me and has in the past spurred me on to look that topic a little more to ascertain where Australia is at, and where might it be heading.

Like the mix of PHC related articles - good broad topics/ themes.

Provides information of relevance to my work that can provide additional evidence to support the work we do.

I can send it on to those where there is easily identifiable direct relevance for them.

A useful bite-sized summary. Easy to reference and distribute.

Features about this resource that they did not like

There were far fewer comments about features that were not liked. These included:

- ⇒ hyperlinks to further information that required a log in and payment
- ⇒ there was not enough depth on any issue
- ⇒ relevant information is sometimes missed
- ⇒ many primary care problems had not been addressed
- ⇒ not always well written
- ⇒ would prefer more Australian content.

Suggestions for improving RESEARCH ROUNDup

Relating to engagement of readers

- ⇒ asking for feedback on every publication
- ⇒ provide an on-line forum so that people can add their comments, links to relevant documents
- ⇒ Involve more professionals in research round up and allow them to share their views. Let them take some responsibilities to make the program success. Every four month meetings in a designated location would be good.

Relating to presentation

- ⇒ author/s and references beneath each article, not at the end of the newsletter; keywords for each article; proper references should include date/year and publisher
- ⇒ provide hyperlinks to references where possible
- ⇒ make sure every link works and is quick to download
- ⇒ free availability of full articles
- ⇒ it would be good if it were easier to navigate - had clearer site structure
- ⇒ more user friendly organisation of the information - seems a bit intense at time
- ⇒ more visually pleasing
- ⇒ some grouping will be useful, especially if it grows in size.

Relating to content

- ⇒ comparison with overseas research
- ⇒ examples of any initiatives implemented from the research
- ⇒ a greater range of topics covered
- ⇒ make sure not only the medical perspective addressed in the topics and questions - there are clearly attempts perhaps but it is definitely skewed.

Relating to amount of content

- ⇒ I would appreciate more detail - I understand they're a snapshot but I would like them to be a bit longer
- ⇒ more in depth analysis of topics.

Relating to promotion

- ⇒ make them more readily available
- ⇒ promote them more by reaching more people working in this area
- ⇒ perhaps providing printed copies to workplaces may help to encourage discussion between colleagues (in addition to accessing on-line).

Suggestions for other topics in this series

Reform topics

- ⇒ topics useful for the development of Medicare Locals eg. extended primary health activities which Divisions may have an impact on health outcomes
- ⇒ more features on the implications of the proposed changes to the health-care system eg. will GP super clinics decrease the use of EDs
- ⇒ anything that relates to the PHC reform, and even international research that may have bearing on the direction that Australia is taking; OR international research into which our Australian research may shed some light
- ⇒ close response and alignment to topical issues such as proposed structural changes with Medicare Locals, improving collaboration and cooperation between health care sectors, sources of accessible, up-to-date research
- ⇒ As general practice and primary care start to work in collaborative teams, we require extensive knowledge in the 'how' to work better. Especially in an emerging e-health environment. e-health is an area that will start to take a high profile and will require us to be e-health aware.

Broad topics

- ⇒ look at the common difficult problems in PC
- ⇒ a broader catch of work being done in primary health care service delivery
- ⇒ those where there is something new to say, a major change or development worth noting and understanding where practice change is required.
- ⇒ more research specific to disease states.
- ⇒ more about the non-GP primary care sector- community health, allied health etc
- ⇒ more articles based around primary health care that is not 'medical' but holistic health ie. relevant to community health services.

Research methodology

- ⇒ more sociology based topics dealing with research issues such as research design, methodology, methods and theoretical perspectives
- ⇒ methodology articles 'Pushing the envelope' - being a bit controversial



- ⇒ perhaps some on different research methodologies (esp. relating to qualitative research here)
 - just demonstrating how a different approach leads to different ways of collecting and understanding the information
- ⇒ qualitative information outlining processes and reporting good evidence-based practice.

Specific topics

- ⇒ alcohol and other drugs
- ⇒ chronic Disease Management, successful interventions
- ⇒ climate variability and its impact on mental health
- ⇒ community engagement
- ⇒ community Health
- ⇒ education/workforce in PHC issues
- ⇒ environmental changes and health
- ⇒ falls and injuries prevention New Model of care for osteoporosis management
- ⇒ GPs and referral patterns/pathways. How GPs coordinate services with others, especially in regard to care planning and CDM
- ⇒ health education/health literacy
- ⇒ Health Promotion and workforce
- ⇒ immunisation
- ⇒ impact of allied health in patient care
- ⇒ improving the integration of care for people with chronic illness
- ⇒ infection Prevention and Control MROs Infectious Diseases
- ⇒ Lymphoedema Management
- ⇒ maternal infant/child health, Breastfeeding
- ⇒ maybe adding in a Researcher profile of one of the research pieces in the issue
- ⇒ meeting the needs of Younger people with disabilities
- ⇒ Men's Health
- ⇒ mental health treatment
- ⇒ migration and health
- ⇒ more cancer information if possible, and shared care models that work or didn't
- ⇒ more issue of relevance to direct clinical practice in allied health
- ⇒ More on A&TSI Primary Health Care, Quality Improvement in A&TSI Primary Health Care and Capacity Building in A&TSI Primary Health Care
- ⇒ nurse practitioners in primary care with CALD communities
- ⇒ funding models for primary care/ state government collaborations. Improving links between state government community health and primary care.
- ⇒ nursing in primary health care
- ⇒ nutrition
- ⇒ primary health care and the ageing population - meeting their needs
- ⇒ primary health care during disaster
- ⇒ Public Health
- ⇒ renal
- ⇒ reproductive and sexual health
- ⇒ research funding opportunities
- ⇒ research on PHC practitioner involvement in end of life care and advance care planning
- ⇒ rural population research
- ⇒ Taking pain history, understanding pain perception in patients, communicating effectively re pain presentations, musculoskeletal, sleep deprivation(the underlying problem for many mental health issues), Application of PIPGAS (People in pain get autonomic symptoms) needs to be developed so ALL PC can understand the multiple S&S which are/have ANS



involvement. Whole body function (human as a single operative entity) instead of reductionist system/organ/tissue only concepts too often considered.

⇒ would there be a chance to cover audit and registry in the health care and any research on hospital morbidity and mortality?

Appendix

RESEARCH ROUNDup topics

Issue number	Issue name	Issue date
Issue 16	<i>Meeting the primary health care needs of refugees and asylum seekers</i>	Dec 2010
Issue 15	<i>Avoiding hospitalisation: effective primary care interventions</i>	Oct 2010
Issue 14	<i>How does teamwork support GPs and Allied Health Professionals to work together?</i>	Sep 2010
Issue 13	<i>Identifying gaps in primary care services: reaching the 'unreached'</i>	Aug 2010
Issue 12	<i>Avoiding hospitalisation: ambulatory care sensitive conditions</i>	Jul 2010
Issue 11	<i>Continuity and safety in care transitions: communication at the hospital/community care interface</i>	May 2010
Issue 10	<i>Australia's primary health care research workforce</i>	Dec 2009
Issue 9	<i>Evaluation of chronic disease management in primary health care</i>	Nov 2009
Issue 8	<i>Health promotion of physical activity</i>	Oct 2009
Issue 7	<i>Chronic disease self-management</i>	Jul 2009
Issue 6	<i>Dementia and primary health care</i>	Apr 2009
Issue 5	<i>The primary care role for people with cancer</i>	Mar 2009
Issue 4	<i>Nursing in General Practice: still some way to go</i>	Feb 2009
Issue 3	<i>Improving access to rural health care</i>	Dec 2008
Issue 2	<i>Researching patient & family experience</i>	Nov 2008
Issue 1	<i>A new climate for Indigenous health</i>	Oct 2008

