

## Interim Report: Feedback Survey

The Sustainable Health Review Interim Report feedback survey consisted of 14 questions. The responses to the open feedback questions are detailed below. Responses to questions 9-12 have been published in a summarised report on the SHR website.

Your Personal Details	
1. Title	Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/>
2. First Name(s)	
3. Surname	
4. Contact Details	
5. Organisation	Western Australian Health Translation Network (WAHTN)
6. Location	<input checked="" type="checkbox"/> Metropolitan <input type="checkbox"/> Regional WA <input type="checkbox"/> Outside WA
7. Are you providing a response on behalf of your group/organisation or as an individual? (Required)	<input checked="" type="checkbox"/> Group/organisation <input type="checkbox"/> Individual <input type="checkbox"/> Other, please specify: _____
<b>Q8. Do you consent to your feedback being published, in summaries or in the Final Report? (Required)</b>	
<input checked="" type="checkbox"/> I consent to my feedback being published <input type="checkbox"/> I consent to my feedback being published anonymously <input type="checkbox"/> I do not consent to my feedback being published	

The next two questions will allow you to provide more detailed feedback on how to maximise improvements in each of the Directions or suggest other areas or actions for the Sustainable Health Review Panel to consider to develop a more sustainable health system.

**13. In regards to the 12 Directions, please provide detailed comments on how to maximise improvements in each of the Directions. Where possible, please indicate which Direction your comments relate to.**

My comments relate mainly to research and innovation throughout the report as Executive Director of the WAHTN. It is informed however by my 22 years as a Director of Emergency Services PMH and my recently concluded 5 years as Chief Medical Officer for WA.

Throughout the Report it is acknowledged that WA Health is under tight fiscal constraint and that a period of no growth in budget must be maintained over the next few years. The challenge is how to be innovative, forward thinking and embrace change in such a climate. To best promote research in this climate funding for research needs to be identified, transparent and quarantined as opposed to current practice.

While research is part of the report I feel its potential benefits could be recognised more widely throughout the Directions. For example in Direction 7 while Culture is highlighted there is no mention of the need for change of Culture in research. This is one of the fundamental weaknesses at present in the research environment. One obvious way to help change culture and give real influence and importance of research is to recommend representation at the “top table” in each Hospital Service Provider and the Department of Health.

Under Direction 10 on Workforce there is no mention of the recognised benefits of recruiting clinicians with an academic/ research background. Having a robust research environment will attract recognised leaders in each field ensuring that patients receive the best contemporary evidenced based care. There should not be a divide between the service and research needs when recruiting.

Direction 9 states “The Panel supports giving greater prominence to research and moves to better enable the research environment, generating policy-relevant research and driving research translation into health.” It also strongly advocates for continued support of the WAHTN, along with the Future Health Research Innovation Fund and makes reference to WA as a potential “centre of choice for translational and policy relevant research”. However the report is generally light on in terms of discussing specific research issues such as strengths, barriers, leverages, future directions etc. Given this, a possible Recommendation under Direction 9 is to develop an integrated state wide research strategic plan. This is especially important given the recent increase in state funding for support of research with the need to use such funding as efficiently as possible.

While the report acknowledges WA’s strong track record in research the Panel received feedback that “WA is being held back by a lack of progress in introducing electronic records, a commitment to data sharing, an historic lack of NHMRC funding and a lack of uptake by new graduates in research”. The Report notes that the “WA Data Linkage System (WADLS) is recognised as one of the most comprehensive and high quality linkage systems worldwide” and that it enables secure linking of health data from a wide range of sources to support a range of activities including research. It does not expand on WADLS further and does not discuss the

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difficulties and significant time delays that have been encountered by researchers. To some extent this relates to cultural issues and underlines the need for a state-wide strategic plan.

Initiatives undertaken to increase WAs share of the national research funding pool such as the new research facilities, 'funding programs' and the formation of the WAHTN are noted. The importance of collaborative networks for effective health and medical research and translation were recognised. Despite this WA receives reduced NHMRC funding access, based on population. Given the new Medical Research Future Fund will essentially double the federal research funds potentially available to WA, this is increasingly concerning.

The Panel suggested that innovation and uptake was occurring well at a local level but that a more systematic approach to innovation and research was needed. The States investment in WAHTN, the Future Health and Research Innovation Fund and the WA Health Innovation Hub at RPH provide an opportunity to invest in and develop research, technology and innovation capability in WA.

Direction 8: "Greater use of technology, data and innovation to support consumers, clinicians and drive change" also has relevance to WAHTN and research community with reference to data linkage, My Health Record, and development of a digital strategy. An 'area for further work' under this Direction is to "support and enact the Department of Health-related actions from the data linkage review". I would recommend the title of Direction 8 is changed to incorporate 'researchers' along with consumers and clinicians.

Direction 1 "Keep people healthy and get serious about prevention and health promotion" does not recognise the value of research in achieving this goal. The report highlights the value of preventative and early intervention strategies and the challenge of current funding models which do not take a 'whole of health perspective' nor acknowledge 'return on investment' in public health and prevention.

There are multiple references throughout the report to supporting consumers taking greater responsibility in maintaining their own health and wellbeing through a number of approaches including embedding the patient voice into health service planning. With regard to research it should be noted the Consumer and Community Health Network of the WAHTN is recognised as an exemplar for consumer engagement in research.

**14. Is there anything else that the Panel has missed so far that is important in developing a more sustainable health system for Western Australia?**

See Q13

Please note the question 12 was unclear as it asked for responses but it was not clear whether it was to the Directions which were quite broad or the relevant Recommendations under each Direction. ie general prevention as opposed to action on childhood obesity only. This will lead to various responses as people interpret the questions differently.

Also Q9 seemed to be asking very leading questions.