



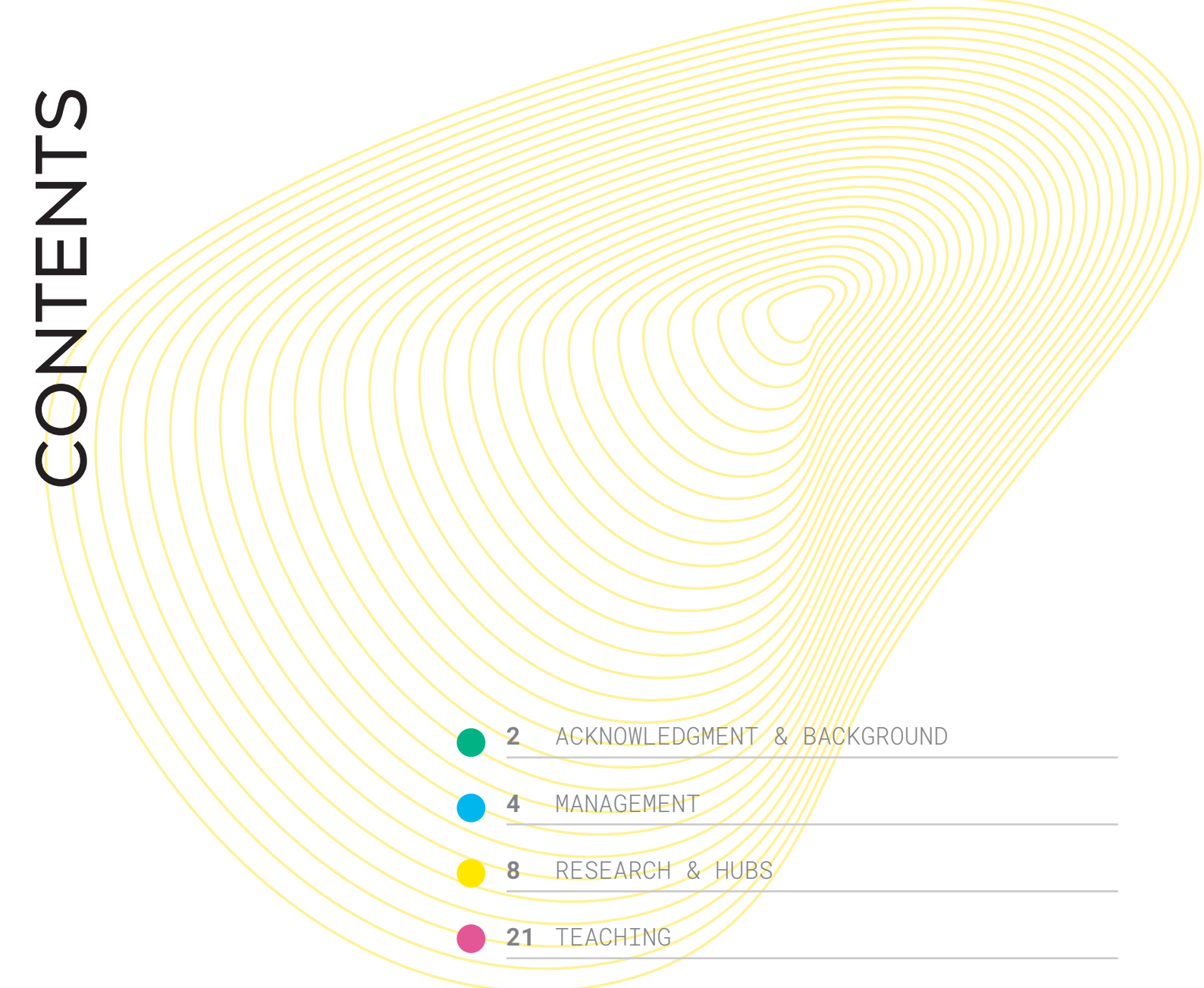
**Annual Report 2019**

**UNSW**  
SYDNEY



**UNSW RESEARCH CENTRE  
FOR PRIMARY HEALTH CARE & EQUITY**

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Centre for Primary Health Care and Equity  
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# ACKNOWLEDGMENT & BACKGROUND

The Centre for Primary Health Care and Equity acknowledges the Traditional Custodians of the land on which we work and live, and recognises their continuing connection to land, water and community. We pay respect to Elders past, present and emerging.

We would like to thank our long-standing collaborators and supporters, some of whom have been with us since our origins, over than 20 years now.

CPHCE began in 1996, operating as a UNSW Research Centre within the Faculty of Medicine since 2005. Our mission is to create “better, fairer health and health care in the community” by conducting research, evaluation and development that strengthens primary health care and by designing local, place-based interventions to prevent and reduce harm rising from inequities in health. Our research, assisted by the NSW Ministry of Health Priority Research Support Program, varies from locally based projects to international collaborations. This enables us to compare across settings, while remaining well-grounded in our local communities.

Our main collaborators, listed throughout this report, are Local Health Districts, the Ministry of Health Pillars, Primary Health Networks and Community Organisations. We support our collaborators by translating results of our research into practice. Much of this work is achieved through our collaborative research Hubs in three highly socioeconomically and culturally diverse Local Health Districts:

- The South Western Sydney Local Health District: The Centre for Health Equity Training Research and Evaluation (CHETRE)
- The Sydney Local Health District: Health Equity Research and Development Unit (HERDU), and
- The South East Sydney Local Health District: South Eastern Research Centre (SEaRCH).

The Primary and Integrated Care Unit (PaICU) in SWSLHD (formerly Department of General Practice) is also affiliated with our Centre and contributes to our research.

CPHCE is itself affiliated with the UNSW School of Primary Health and Community Medicine and provides teaching in its undergraduate and masters programs.

## ACHIEVEMENTS IN 2019

1	Our Equity-Focused Health Impact Assessment of SLHD Strategic Plan contributed to the establishment of a Public Health (data) Observatory and the development of a child health and wellbeing development plan (prepared jointly with the Dept of FACS).
2	Can Get Health in Canterbury (CGHiC), is a place-based intervention improving primary health care access for marginalised CALD populations. Bangla and Arabic-speaking Community Networkers responded to emerging health issues. This led to the expansion of a Bilingual Community Educator (BCE) program that now employs more than 70 BCEs through two LHDs and CESP HN. CGHiC has increased the capacity of health and community service providers to reduce risks to health in emerging CALD communities using innovative approaches to integrated care and community engagement.
3	The Central and Eastern Sydney Primary and Community Health Cohort (CES-P&CH), a partnership between SLHD, SESLHD, CESP HN and CPHCE, UNSW conducts research to inform primary and community services planning, development and evaluation. Using ten linked datasets comprising 26mil records and the 45 and Up Study of a quarter million NSW and 30,645 CES residents-we measured impact of GP management, post-hospitalisation attendance, team care plans, health and service use of socially isolated people, people who have a mental illness and carers.
4	Our HIA with Sydney Local Health District and City of Sydney (CoS) on the Green Square development resulted in CoS advocating for additional resources for local schools and transport links.
5	CINSW-funded project on water pipe use attitudes in Arabic-speaking communities with South Eastern Sydney Local Health District led to raised awareness of the associated harms to health within the communities. In partnership with the communities, four LHDs designed and implemented the "Shisha No Thanks" public health education program.
6	"Learning by Doing" training in SWSLHD is intended to equip researchers and policy makers to conduct and use policy-ready research. Working with locationally disadvantaged communities in SWSLHD, we built capacity in health impact assessment in five councils, Department of Communities and Justice, community members and local non-government organisations.
7	The Integrating Health Considerations into Planning collaboration between Wollondilly Shire Council, South Western Sydney Local Health District and CHETRE resulted in the establishment of a co-funded Senior Strategic Health Planner position. A health vision for the Council incorporated the Community Strategic Plan (the highest level of planning undertaken by a local government) and the development of a Health Assessment Protocol defining how WSC will integrate health considerations into all planning processes.
8	Our project on 'Better Management of Weight in General Practice' demonstrates the feasibility of scalable roles for GP nurses in obesity management in Sydney's disadvantaged areas. Findings informed RACGP's National Primary Prevention Guidelines and the Premier's Priority on Child Obesity.
9	Our (CINSW-funded) Electronic cancer shared-care-record for colorectal cancer provides a solution accessible to LHDs and GPs. It is now in use in St George Hospital, extended to breast cancer and trialled for people with severe mental illness.
10	The Southwestern Sydney LHD GP Unit recommenced as the Primary and Integrated Care Unit (PaICU) in the Fairfield Community Health Centre in 2019, "building primary and integrated care for the community through teaching, research and service development" and focusing on care of people with severe chronic mental illness. We completed research in Communities of Practice and integration of general practice and emergency department care.

# MANAGEMENT

## CPHCE STEERING COMMITTEE

Oversees the work of the Centre, ensuring that it is accountable and financially sound. The committee met on 30 May & 16 October in 2019.

### CHAIR

Professor John Watson, UNSW Sydney

### MEMBERS

Professor Mark Harris, UNSW Sydney

Professor Rebecca Ivers, UNSW Sydney

Professor Ilan Katz, UNSW Sydney

Amanda Larkin, South Western Sydney Local Health District

A/ Professor Freddy Sitas, UNSW Sydney

Professor Bill Randolph, UNSW Sydney

Dr Teresa Anderson, Sydney Local Health District

Tobi Wilson, South Eastern Sydney Local Health District

### SECRETARIAT (NON-VOTING MEMBER)

Sarah Ford

Administrative Officer, Centre for Primary Health Care and Equity, UNSW Sydney

## CPHCE ADVISORY GROUP

Provides strategic advice to the Centre on its research program. The group met on 19 June & 7 November in 2019.

### CHAIR

Professor Ian Webster; Dr Greg Stewart from October 2019.

### MEMBERS

Natalie Cook, Sydney North Primary Health Network

Professor Evelyne de Leeuw, UNSW Sydney

Professor Mark Harris, UNSW Sydney

A/ Professor Ben Harris-Roxas, UNSW Sydney

Tony Jackson, South Eastern Sydney Local Health District

Professor Siaw-Teng Liaw, UNSW Sydney

Miranda Shaw, Sydney Local Health District

A/ Professor Freddy Sitas, UNSW Sydney

Professor Bill Bellew, University of Sydney

Vicki Wade, National Heart Foundation

Dr Christine Walker, Chronic Illness Alliance

Louise Riley, Department of Health and Ageing

Regina Osten, NSW Agency for Clinical Innovation

Dr Stephen Conaty, South Western Sydney Local Health District

Dr Michael Moore, Central and Eastern Sydney Primary Health Networks

David Lilley, UNSW Sydney

A/Prof Margo Barr, UNSW Sydney



# CPHCE EXECUTIVE

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## EXECUTIVE DIRECTOR

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### **Professor Mark Harris, Executive Director**

*Leader of Prevention and Management of Long Term Conditions Stream*

*Research Area: Primary Health Care, Preventative Medicine, Diabetes & Cardiovascular Disease, Health Inequalities, Health Systems & Services*

## DIRECTORS

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### **Professor Evelyne de Leeuw**

*Director of CHETRE, South Western Sydney Local Health District*

*Leader of Health Environment Stream*

*Research Area: Health Promotion, Urban Health, Health Equity, Social Determinants of Health and Health Political Science*



### **A/Professor Ben Harris-Roxas**

*Director of SEaRCH, South Eastern Sydney Local Health District*

*Leader of Health System Integration and Primary Health Care Development Stream*

*Research Area: Primary Health Care, Health Service Planning, Integrated Care, Health Equity and Health Impact Assessment.*



### **A/Professor Jane Lloyd**

*Director of HERDU, Sydney Local Health District (till October 2019\*)*

*Leader of Health Equity Stream*

*Research Area: Health Equity, Primary Health Care, Health Literacy, Policy Implementation, Aboriginal Health and Qualitative Research Methods.*

*\* Kim Webber was Acting Director from May 2019 till November 2019 and David Lilley from November 2019- December 2019*



### **Dr Andrew Knight**

*Acting Director of PaICU, South Western Sydney Local Health District*

*Research Area: Quality Improvement and Integration of Primary Care.*



### **A/Prof Margo Barr**

*Research Area: Healthy Ageing, Risk Factor Surveillance, Primary Health Care Service, Epidemiology, Longitudinal Data Analysis, Health Behaviour, Health and Welfare Equity, Cohort and Survey Methodology*



**Professor John Hall, School of Public Health and Community Medicine**

*Research Area: Primary Health Care, International Health, Global Health, Health Policy & Services*



**A/Professor Freddy Sitas, Director**

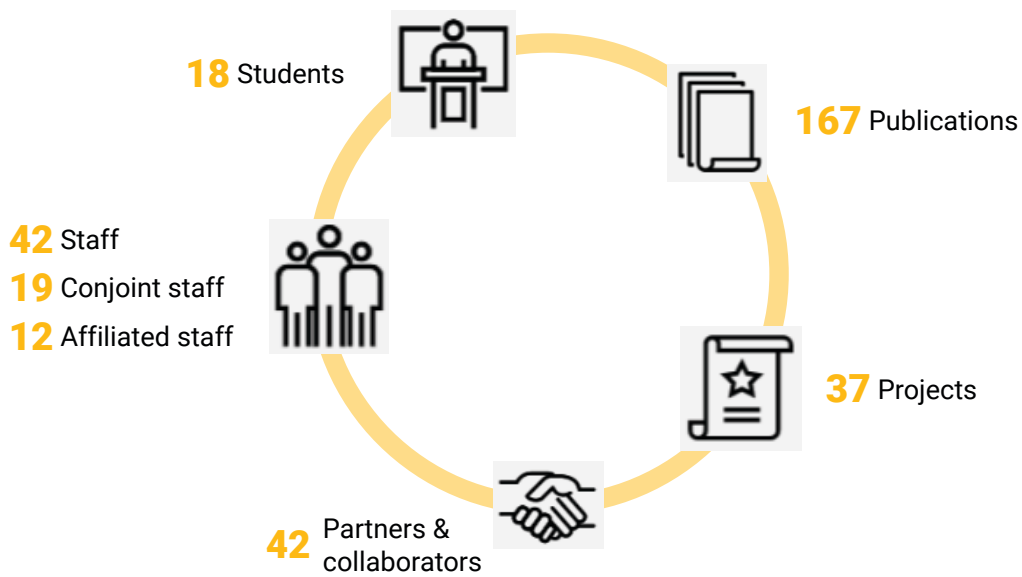
*Operations and research on: Cancer, Tobacco and Mortality*



**Professor Siaw-Teng Liaw, School of Public Health and Community Medicine**

*Leader of Health Informatics Stream*

*Research Area: Medical Informatics, Primary Health Care, Clinical Research, Cross-cultural Health, Indigenous Health, Population Health*





## MESSAGE FROM THE EXECUTIVE DIRECTOR

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In 2019 the Centre continued to align its strategic plan with the Faculty and UNSW strategic plans especially in cancer, mental health and chronic conditions. It also aligns with themes of the Sydney Partnership for Health, Education, Research & Enterprise (SPHERE) and School of Public Health and Community Medicine in these areas as well as in healthy environments.

Our three research hubs CHETRE, HERDU and SEaRCH continued to develop under the leadership of Evelyne de Leeuw, Jane Lloyd and Ben Harris-Roxas. Jane left the Centre during this year and I would like to thank her for her contribution to CPHCE over many years. I would also like to thank Kim Webber and David Lilley who both acted in the role of Director of HERDU for several months during 2019. I would also like to thank the other directors on the CPHCE executive Freddy Sitas, Andrew Knight, Margo Barr, Siaw-Teng Liaw and John Hall.

Our research hubs exemplify our approach to research through partnership with local health services in order to achieve better and fairer health and health care in the community. We have also increased our collaborations with Primary Health Networks and

other local health districts in NSW. Within UNSW we collaborated with researchers in the School of Public Health and Community Medicine (in health economics, informatics, primary health care, environmental health, and the WHO Asia Pacific Observatory on Health Systems and Policies), the Faculty of Medicine (TCRN, Mindgardens) and more broadly in UNSW (Faculty of the Built Environment, Faculty of Arts and Social Sciences, and in the Faculty of Biomedical Engineering).

We continued to develop our new programs of research on the physical health of patients with severe mental illness, use of information technology to prevent and better manage long term conditions (including telehealth) and the new and emerging roles of community health workers in the Australian health system especially in health navigation, hospital avoidance and preventive health care. In refugee primary health care, our projects in south west Sydney and Canterbury have continued to develop and influence policy and practice at local, state and national levels. Our new strategic area, Health Environment, continues to grow across hubs, and is stimulated by the (MBG SPHERE) HUE Collaboratory.

Of course, we could not predict the COVID-19 crisis in early 2020. However, the strong commitment and teamwork of the Centre's staff and leadership and the strength of our partnerships have positioned us well to respond to this and the rapidly changing University and health service environment.

PROFESSOR MARK HARRIS AO

Scientia Professor and Executive Director, Centre for Primary Health Care & Equity, UNSW Sydney



# RESEARCH

We focus our research on comprehensive primary health care in communities and choose to work in areas that have some of the highest proportions of people of low socioeconomic, refugee and migrant status and people of Aboriginal and Torres Strait Island origin.

We are supported through the organisations that we work with or through external grants or funding programs. To address these challenges our research streams are:

- Prevention and Management of Long-term Conditions
- Health Care System Integration and Primary Health Care Development
- Action for Equity
- Informatics and eHealth
- Health Environment

## PREVENTION AND MANAGEMENT OF LONG-TERM CONDITIONS STREAM

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The Prevention and Management of Long-term Conditions Stream is led by Professor Mark Harris. It focuses on interventions to improve the organisation and quality of care in primary health care and the community. Our research is informed by the chronic care model in which proactive patient-centred care is underpinned by self-management support, information systems, decision support, delivery system design (especially multidisciplinary teamwork) and community resources. The Stream's research includes focus on interventions in primary health care which address:

1. The social determinants of chronic conditions including language/culture, health literacy and disadvantage.
2. Behavioural and physiological risk factors for chronic disease such as smoking, alcohol, physical activity, diet and obesity.
3. The quality and integration of long-term care for chronic conditions such as diabetes, cardiovascular disease, chronic respiratory disease and cancer

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### **Project: Electronic shared care plan for long term care of cancer patients**

This study aims to implement and evaluate a new system of cancer follow-up shared care between cancer service specialists and GPs and with patient engagement, that is underpinned by an interactive web-based care plan. The care plan was developed based on qualitative research with patients, cancer services, GPs and managers of health information systems. It is currently being evaluated in a pilot study in St George. Partners include SESLHD, St George Cancer Service, Central and Eastern Sydney Primary Health Network and the project is funded by the NSW Cancer Institute and the Translational Cancer Research Network. The study is ongoing with early evidence confirming its feasibility. The model is being adapted for breast cancer and mental health shared care.

**Project: HELP-GP: Preventing chronic disease in patients with low health literacy using e-health in general practice**

This is funded by a NHMRC project grant and involves five universities (UNSW, Adelaide, Sydney, Wollongong, Deakin and Macquarie) the CSIRO and Centers for Disease Control and Prevention (USA), and three PHNs Central and Eastern Sydney, South Western Sydney and Adelaide). The study involves a cluster randomised controlled trial of an intervention using e-health to help general practice nurses to better communicate with patients with low health literacy and to help them use health information, set priorities, navigate referral and maintain behaviour change. The intervention includes health checks provided by practice nurses and use of a mobile phone application (app) and telephone coaching (Get-Healthy). The findings (including an economic analysis) will inform implementation of evidence-based guidelines and help primary care organisations support practitioners in providing effective preventive care for vulnerable and disadvantaged patients. The study is due to be completed in 2021.

\*For more information about the stream please visit

CPHCE website: <https://cphce.unsw.edu.au/research/prevention-management-chronic-diseases>

## HEALTH CARE SYSTEM INTEGRATION AND PRIMARY HEALTH CARE DEVELOPMENT STREAM

The Health System Integration and Primary Health Care Development stream is led by Associate Professor Ben Harris-Roxas and Associate Professor Margo Barr. It focuses on the role of primary health care in improving health and social care integration, with the objectives of improving health and wellbeing, service user experience, and system effectiveness.

The Stream's research focuses on three areas. PHC System Development is concerned with the development of a strong primary health care system, including Local Health Districts and Primary Health Networks.

Improving Integration is concerned with the way that different parts of the health system work together to provide comprehensive and coordinated primary health care. This includes integration between primary health care, community health, and hospital care.

Access to Primary Health Care researches ways of enhancing access to quality primary health care, including access for culturally and linguistically diverse communities, refugees and asylum seekers, and other disadvantaged groups.

**Project: Integrating Emergency Department and General Practice Care in Fairfield**

The Primary and Integrated Care Unit (PaICU) partnered with the Fairfield Hospital Emergency Department in three studies.

The ED2GP (Emergency Department to GP) Study identified a seeming discrepancy between older men and women in terms of their follow-up rates, 90% vs 67% respectively. The study explored this finding in interviews of 100 older women. Insights from the qualitative analysis include the tension that older women often relied on their family for transport and support in health appointments, but they didn't want to be seen as a burden, and the importance of messaging from the ED regarding follow up.

The "Hal tafahum ealay (Do you understand me)?" Study collected data from 172 patient-doctor participant pairs. The low use of professional interpreters was observed, and the results suggest that recent migrants, those with more severe illness, and those not supported by an interpreter may be at particular risk of miscommunication in the ED.

**Projects: Central and Eastern Sydney Primary and Community Health Cohort Resource (CES-P&CH)**

The CES-P&CH Cohort Resource is a collaboration between Central and Eastern Sydney Primary Health Network, South Eastern Sydney Local Health District, Sydney Local Health District, and the UNSW Centre for Primary Health Care and Equity. It answers health service relevant questions based on data from 30,645 people living in Central and Eastern Sydney, dating back to 2006. The Resource brings together 10 NSW and national datasets and 26 million records.

The Resource has undertaken partner-led projects on integrated care, GP follow up after hospitalisation, predictors of health service use amongst older people, the use of care plans in primary health care, loneliness, and carers. The Resource has also led to competitive research grant applications and PhD student projects.

\* For more information about the stream please visit CPHCE website: <https://cphce.unsw.edu.au/research/primary-health-care-system-development>

# HEALTH ENVIRONMENT STREAM

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Health environments do not necessarily confine themselves to the built environment alone. In 2019 this research and development stream addressed particular areas of disadvantage in gambling-related harm (in Fairfield) and through its work with Local and Community Drug Actions Teams (LDATs and CDATs). CHETRE won a grant to develop community-based work in this area.

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## **Project: Continuity of care in the Wollondilly Integrated Health Neighbourhood**

In another example of a health environment CPHCE further engaged in the 'Continuity of care in the Wollondilly Integrated Health Neighbourhood' Project. The Wollondilly Health Alliance (Wollondilly LGA, SWSLHD, SWSPHN) commissioned the initial establishment of the Wollondilly ePBRN in 2016, incorporating all the general practices in the region. The initial focus was on data quality reports and feedback. This next phase is the use of the ePBRN methodology to evaluate the Oran Park integrated primary care centre and to examine continuity of care in the integrated health neighbourhood. The project also engages with the Fairfield Health Neighbourhood and aims to correlate findings with the use of SWSLHD services (Community Health, Emergency Department and Admissions) by patients with ambulatory care sensitive conditions.

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## **Project: Healthy Urban Environments**

Through the Healthy Urban Environments (HUE) Collaboratory of Maridulu Budyari Gumal-Sydney Partnership for Health, Education, Research and Enterprise (MBG SPHERE), CPHCE connects to a range of stakeholders in government, industry, universities and local health districts and develops programmes of work around health environments. These include projects around active and sustainable transport (in HERDU and CHETRE) and housing (in SEaRCH and CHETRE).

Through the work with the Healthy Urban Environments (HUE) Collaboratory of MBG SPHERE, CHETRE won a grant to undertake a project "Climate change health and vulnerability assessment of South Eastern and South Western Sydney – Scoping Study".

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*\* For more information about the stream please visit CPHCE website: <https://cphce.unsw.edu.au/health-environment-0>*

# ACTION FOR EQUITY STREAM

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Health equity means that everyone has a fair opportunity to enjoy good health and that no one should be disadvantaged from achieving this potential. Health inequities arise when there are systematic, socially produced (and therefore modifiable), unfair or unjust differences in health. Taking action to address inequities is core to the work of CPHCE and its Hubs SEaRCH, HERDU and CHETRE.

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## **Project: South Western Sydney Local Health District: Fair Health Matters Equity Framework to 2025**

CHETRE has been supporting SWSLHD to develop an equity strategy toolkit. The CHETRE team worked closely with SWSLHD; analysing the policy context and drivers, reviewing existing health equity strategies and learning from others experiences, review of existing equity tools, consultation across the LHD carrying out 17 interviews and two focus groups, consultation with clinical leads to identify and develop service level equity indicators. The Equity Framework focuses on four strategic directions: embed equity into all facets of the health service; translate and implement evidence; build capacity and develop skills; and partner with our communities and collaborators. Each direction has a linked agreed set of actions and an equity toolkit has been developed to support integrating equity into planning processes throughout the LHD.

**Project: OPTIMISE - Collaborative improvement of primary health care delivery to the Australian refugee community**

This project was being conducted by a partnership involving UNSW, Monash and La Trobe Universities and Refugee and settlement services in NSW and Victoria. In NSW, the partners included the NSW Refugee Health Service, Settlement Services International and SW Sydney PHN, building on previous collaborations on refugee and asylum seeker health. The project aimed to improve the quality of care for refugee patients in general practice and the quality of communication between refugee services and general practice.

The project began by mapping the system-level facilitators and barriers to accessible and appropriate primary health care in SW Sydney and is now working with refugee-focused health services and mainstream general practice in three regions (two in Melbourne and one in Sydney) to develop models for access to primary health care and continuity in the transition between specialized and mainstream services. These were tested using a multi-site quasi-experimental design in 12 practices in each of the three regions.

The project demonstrated improved uptake of procedures in general practice including for use of interpreters, assessment of refugee health and mental health and communication between services and GPs. These findings have been disseminated and a number of presentations at national and international conferences and papers are currently being prepared for submission. The project is informing the way in which PHNs and refugee specific services work with general practice especially those with large numbers of refugee patient and has resulted in changes to referral procedures and processes. We predict that this project will have a significant effect on the quality of care received by refugee patients in general practice.

**Project: Can Get Health in Canterbury (CGHiC)**

CGHiC was established in 2014 as a collaboration between Sydney Local Health District, Central and Eastern Sydney Primary Health Network (then Inner Western Sydney Medicare Local) and the UNSW Centre for Primary Health Care and Equity, as a place-based initiative in the most disadvantaged local government area of inner Sydney. A 2020 evaluation of the project highlighted the effectiveness of CGHiC in achieving its priority outcomes: improved health of communities and individuals; improved organisational capacity of communities to participate in planning services and programs; enhanced capacity of service providers to meet health needs of Culturally and Linguistically Diverse (CALD) communities; contributing positively to the strategic directions and objectives of SLHD and CESP HN, and to health research and innovation.

*\*For more information about the stream please visit CPHCE website: <https://cphce.unsw.edu.au/action-equity-0>*

## INFORMATICS AND EHEALTH STREAM

**Projects: The electronic Practice Based Research Network (ePBRN) platform and tools**

The ePBRN platform enables the creation of linked datasets from general practice and health district facilities to support research and quality improvement activities. The core programs address data quality and interoperability.

Data standards and interoperability have been achieved through harmonisation with the Observational Medical Outcomes Partnership (OMOP) Common Data Model. This enabled cohort identification and characterisation for collaborative clinical and epidemiological studies with the international Observational Health Data Science and Informatics (OHDSI) community and the Australian Health Research Alliance Transformative Data Collaboration.

The ePBRN data quality R&D program has evolved to an international collaborative program with the UK-based RCGP Research & Surveillance Centre and the US-based Data Quality Collaborative and International Medical Informatics Association Primary Care Informatics Working Group. The Australian Institute of Health & Welfare recently commissioned us to review and recommend a data quality assessment framework and strategy to guide its role as custodian of the My Health Record data repository to provide fit-for-purpose data for public health, service improvement and research.

**Project: WHOCC (eHealth) - Digital Health Profile and Maturity Assessment Toolkit**

The WHO Collaborating Centre on eHealth (AUS-135) worked with Western Pacific Regional Office (WPRO) to co-create a Digital Health Profile and Maturity Assessment Toolkit to assist Pacific Island Countries (PICs) to create and assess their digital health profile and maturity to facilitate the dialogue within the country on digital health development and programs. This Toolkit assesses the maturity of four essential digital health foundations: infrastructure, essential digital tools, information sharing and facilitators of adoption and change. A fifth foundation was quality improvement, measurement, monitoring and evaluation.

The Toolkit has been tested with representatives from a number of PICs (Cook Islands, Fiji, FSM, Kiribati, Marshall, Nauru, Palau, PNG, Samoa, Solomon, Tonga, Tuvalu, Vanuatu) individually as well as collectively at the 2019 Pacific Health Information Network meeting. This user-testing session led to Version 2, which will be applied (with embedded evaluation) to the PICs through the WHO Pacific Development and Support Unit and the WPRO.

*\*For more information about the stream please visit CPHCE website: <https://cphce.unsw.edu.au/informatics-and-ehealth-0>*





AFHC Healthy City International Forum in Korea with CHETRE Director, Professor Evelyn de Leeuw (in red).



PhD candidate Uday Narayan Yadav and researcher Cathy O'Callaghan presented at the 2nd Asia Pacific Conference on Integrated Care in Melbourne in November 2019. Cathy presented on 'Using a participatory approach to assess the effectiveness of the Get Healthy Service among Chinese communities in Sydney, Australia' and Uday presented on 'Using Co-design Process to Develop an Integrated Self-management Intervention Program for COPD patients in Nepal'.



PhD candidate Jinhee Kim presented her PhD research on health equity in local government policies at AFHC Healthy City International Forum in Korea on 26 Sept 2019.





## RESEARCH AND DEVELOPMENT HUBS

### South Eastern Sydney Research Collaboration Hub (SEaRCH)

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## RESEARCH

The South Eastern Sydney Research Collaboration Hub (SEaRCH) is a partnership between the South Eastern Sydney Local Health District and the UNSW Centre for Primary Health Care and Equity. Since its foundation SEaRCH has focused on integrating care, enhancing chronic disease management, and addressing priority populations' health service needs.

Dr Cathy O'Callaghan and Dr Nina El-Haddad joined SEaRCH in 2019, working on integrated care and raising awareness of the harms of water pipe use. SEaRCH also welcomed Dr Hester Wilson, David Lilley, Anna McGlynn and Jenni McCrindle-Fuchs as new higher degree by research students who are joint- or co-supervised by SEaRCH staff.

SEaRCH convenes the Principles and Practice of Primary Health Care course within the School of Public Health and Community Medicine's postgraduate coursework programs. This course was offered online for the first time in 2019, which enabled more frontline health workers to participate.

SEaRCH had a range of new and ongoing collaborative research projects, including:

- raising awareness about the harms of shisha use
- care coordination for people with chronic conditions
- carers needs
- climate change and health.

In September SEaRCH jointly organised a forum with South Eastern Sydney Local Health District Multicultural Health Service on the role of technology in health translation and interpreting, which was attended by more than 110 people and featured speakers from CSIRO, Hunter New England LHD, Sydney LHD, Western Sydney LHD, and Swinburne University. SEaRCH also hosted visits by Dr Tom Blakeman from the University of Manchester, and Ben Cave from the International Association for Impact Assessment and the University of Liverpool.



'Can Technology Speak my Language?' Research to Practice Forum on the use of technology in health translation and interpreting on 25 September 2019



## CENTRE FOR HEALTH EQUITY TRAINING, RESEARCH AND EVALUATION (CHETRE)

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### RESEARCH

CHETRE continues to operate at the complex interface between university research and teaching, health service delivery, and top quality third party financed health and medical research. UNSW, the South Western Sydney Local Health District and the Ingham Institute for Applied Medical research are our homes, but each of their links and institutions shape the playing field for CHETRE.

Several (Scientia) PhD students are associated with CHETRE, including David Lilley, Jinhee Kim, Tracey Ma, Jude Page, Alex Richmond, and Kristina Ulm. The new urban and environmental health lead of the UNSW School of Public Health and Community Medicine, A/Prof Xiaoqi Feng, also spends time at the CHETRE offices.

We remain committed to working with – and take guidance from – local communities and governments (including Liverpool and Fairfield Councils, and the Wollondilly Health Alliance), other public sectors (including developments in and around the Nancy-Bird Walton International Airport; and departments of planning, housing, transport) and important efforts within South Western Sydney population health – including refugee health, health promotion and equity.

We provide advice, offer opportunities to frame research and suggest solution-oriented evaluations, and often bring together stakeholders from industry, government and communities. The resulting myriad projects involve long-range Learning-by-Doing programmes of work in community development, various iterations of Health Impact Assessment, and commitments to locational disadvantage. CHETRE staff member Andrew Reid worked hard to re-establish a 2168 interagency group after 9 years - started with a forum of 60 services in October 2019. Service integration continues in quarterly forum meetings.

The three CHETRE streams are constantly re-inventing themselves. In Locational Disadvantage we shape action and research on gambling, domestic violence and inclusion. The Decision Support Stream works with the housing and transport sectors to integrate health in planning. Indigenous Health refocused from wrapping up the Gudaga suite of studies toward an Indigenist reinterpretation of data sovereignty (including the 'Grannies Project').

CHETRE continues to enjoy interns from around the world and we stay in touch with many of them. Last year, among many others, we hosted James Ma who contributed to our equity analyses. We also welcome more senior guests from around the world. Last year they included Professors Trevor Hancock and Louise Potvin from Canada, and Professors Nam-Soo Park, Young-Bok Kim, and Kwangwook Koh from Korea.

### 15 |

CHETRE staff almost in its entirety attended the IUHPE World Conference in Rotorua and many other online and face-to-face meetings, including attending the Fourth International Conference on Public Policy (Montreal, June) and the SWSLHD/ Ingham Health Beyond Showcase in Warwick Farm.

Perhaps CHETRE's most notable event was our 21st birthday celebration with song, dance and 21 awards in November.





International HIA workshop on Learning by Doing in Korea on 30 September 2019.



Evelyne de Leeuw and Mary Knopp received awards at the 7th Annual Ingham Institute Awards Dinner on 14 November 2019



CI meeting at the 'Grannies Project'



## HEALTH EQUITY RESEARCH AND DEVELOPMENT UNIT (HERDU)

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### RESEARCH

The Health Equity Research and Development Unit (HERDU) has been established as a Sydney Local Health District service in partnership with the CPHCE at the UNSW and collaborates with the Central and Eastern Sydney Primary Healthcare Network (CESPHN).

The Health Equity Research and Development Unit aims to work with Sydney Local Health District staff, partners and with communities to identify and address health inequities. It does so through the research, service development and education programs that it leads and by supporting existing Sydney Local health District services, programs and process.

During 2019 HERDU led several events, programs and projects, and developed a variety of resources.

The third annual EquityFest was held at St Barnabas Centre in Broadway, on Tuesday 2 April 2019 and focused on the theme of People, Place and Partnerships; bringing together more than 230 people to inspire participants, showcase opportunities and connect with local communities and cultures. Participants experienced an engaging day, with networking, case studies and presentations, including performances by the Sydney Street Choir, African Drumming Group, Aboriginal Dancers, and Tai Chi sessions. Through EquityFest 2019 we celebrated our current research and development work, and also considered actions that will create services and environments for health equity.

HERDU continued to develop the Can Get Health in Canterbury (CGHiC) program as an innovative research partnership program with Sydney Local Health District, Central and Eastern Sydney PHN and the University of New South Wales' Centre for Primary Health Care and Equity. The CGHiC program is underpinned by values of equity and community engagement and works in collaboration with Canterbury communities and community organisations. The program aims to reduce inequities in the Canterbury region through strengthening health literacy; access to services, particularly comprehensive primary health services; and environments that protect and promote health.

Working in partnership with Child and Family Health Nursing in Sydney Local Health District, and Health Direct, a health equity intervention was developed which aimed to improve access to health care services, health care information and social support for migrant Bangla and Mandarin speaking new mothers and grandmothers. The project aimed to evaluate the effectiveness of providing new parent classes to migrant mothers and their newborn babies (0-1 years) delivered by SLHD in language. The intervention consisted of utilising Bilingual Community Researchers as a novel recruitment mechanism to reach new mothers and grandmothers who may not be connected to the health service. The intervention also included delivering culturally re-designed new parents' classes to this group with an interpreter.

HERDU led the delivery of the UNSW Masters of Public Health subject on Health Inequalities. Partner organisations including Sydney LHD staff were offered complimentary places in the course. The delivery of the Health Inequalities subject has received positive feedback from attendees.

Waterloo faces substantial changes in the near and longer term, with the development of a new Metro Quarter over the next two years, the redevelopment of the Waterloo Estate over 15-20 years, as well as any additional redevelopment that may be catalysed by these initiatives. HERDU is conducting a staged Health Impact Assessment (HIA) that will address specific issues/topics relevant to specific stages of the planning and development processes noted above. The HIA will provide an important input into each of these processes and will support HERDU and SLHD more broadly to provide tailored input and recommendations.





HERDU' Equity Fest on 2 April 2019



HERDU team presenting the findings of 'Supporting newly arrived migrants' pilot project to Healthdirect Australia in October 2019.



## RESEARCHER PROFILE

Dr Cathy O'Callaghan

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My work has focused on addressing health inequities and understanding the social and cultural determinants of health. I first became familiar with the work of the Centre for Primary Health Care and Equity (CPHCE) when researching culturally and linguistically diverse (CALD) populations in Cabramatta. I joined the Centre in 2019 to conduct research into integrated care and evaluation to gather evidence for preventing poorer health outcomes for the most vulnerable populations.

I am currently working as a Research Fellow in Integrated Care, South Eastern Sydney Research Collaboration Hub (SEaRCH) in the CPHCE. This involves leading the evaluation of the South Eastern Sydney Local Health District's Integrated Care Strategy which has the goal of providing more integrated, less fragmented, person centred services. I am also continuing to conduct research and evaluation with priority populations.

I have over 20 years' experience in research, evaluation and service development in the fields of health promotion and disease prevention. I have led a range of cross-cultural research projects working with a teams of bilingual research assistants and I have been a Research Consultant for a range of government health projects. I developed and delivered a range of cultural competency face-to-face and video modules for health staff and in languages other than English for CALD communities.

I completed my PhD Recognising Cultural Diversity in Children's Hospitals in 2013. It used a qualitative methodology to investigate the impact of systemic constraints, policies and cultures on staff practice when working with children and families from CALD backgrounds. The research has advanced diversity management in health organisations and has informed current learning and workforce development approaches for priority populations. My Master of Public Health (Hons) researched the lived experiences of elderly immigrant patients' in health literacy and managing medicines. I also have a Master of Arts and Development Studies in which I analysed the impact of socio-cultural factors on migrant patients' experiences in a dialysis ward. This research resulted in increased service funding for communities and recommendations of best practice cross-cultural health research.

When I am not at CPHCE you will find me socialising with friends, reading, swing dancing, learning Spanish, propagating plants and playing the Irish drum called a Bodhrán.





16 August 2019 Visiting Academic - Prof Leiyu Shi, the Director of the Johns Hopkins Primary Care Policy Centre visited CPHCE. Small group discussion focused on shared research agendas and avenues for collaboration was conducted during Prof Shi's visit.



Research Priorities Forum on 16 July 2019 with attendees from Sydney Local Health District, South Eastern Sydney Local Health District, Central and Eastern Sydney PHN, UNSW, Ministry of Health and Sax Institute.

# TEACHING

## POSTGRADUATE MEDICINE AT UNSW MASTER OF PUBLIC HEALTH PROGRAM

Subject	Role
Health Impact Assessment (PHCM9628)	Fiona Haigh - course convenor Ben Harris-Roxas - guest lecturer
Inequalities in Health (PHCM9626)	Amy Bestman - course convenor Marilyn Wise - course convenor Ben Harris-Roxas - guest lecturer Elizabeth Harris, guest lecturer
Prevention and Management of Chronic Disease (PHCM9129)	Mark Harris - course convenor Catherine Spooner - course convenor Ben Harris-Roxas - guest lecturer Freddy Sitas - guest lecturer
Principles and Practice of Primary Health Care Services in the Community (PHCM9615)	Ben Harris-Roxas - course convenor Mark Harris - guest lecturer
Environmental Health (PHCM9612)	Ben Harris-Roxas - guest lecturer
Global approaches to Cardiovascular Disease, Diabetes and Cancer Prevention (PHCM9786)	Freddy Sitas - guest lecturer

## UNDERGRADUATE MEDICINE AT UNSW

Subject	Role
Health Maintenance B (MFAC1524)	Tony Bolton - scenario-based learning facilitator
Primary Care (MFAC3504)	Tony Bolton - tutorials, workshops, assessments, marking
Society and Health (MFAC1527)	Andrew Knight - lecturer Michael Tam - lecturer Aline Smith - lecturer

## SHORT COURSES AND WORKSHOPS

Subject	Role
Health Impact Assessment Workshop for Korea Institute for Health and Social Affairs, Seoul	Fiona Haigh - facilitator
Mental Wellbeing Impact Assessment Training for Health Promotion, SWSLHD	Fiona Haigh - facilitator
Society of Practitioners of Health Impact Assessment Health Impact Assessment Training, Barcelona	Fiona Haigh - contributor



# PHD, INDEPENDENT LEARNING PROJECT (ILP) & MASTERS RESEARCH STUDENTS

The Centre provides many opportunities for research students. In 2019 a total of 13 PhD students four ILP, one overseas Masters student and Research Masters student were enrolled at the Centre.

Name	Thesis Title	Supervisors	Completion Year
Alana Crimeen	Healthy Airports	Robert Freestone Evelyne de Leeuw Bill Randolph	2023
Alex Richmond	Sport for Social Change and Social Enterprise for Health	Anne Bunde- Birouste Evelyne de Leeuw	2022
Anna McGlynn	Evaluation of an integrated care multi-level model of service (Future Health Leaders DrPH Program)	Ben Harris-Roxas Siaw-Teng Liaw Marianne Gale	2022
Charlotte Hespe	Translating into real world general practice, implementation of quality improvement strategies– a study of evidence-based practice in cardiovascular disease	Mark Harris Lucie Rychetnik David Peiris	2020
David Lilley	Growing Well: Renewing Sydney's housing for health, wellbeing and equity	Evelyne de Leeuw Hal Pawson Ben Harris-Roxas	2023
Hester Wilson	Shared care between general practice and specialist alcohol and other drug services	John Hall Ben Harris-Roxas Nick Lintzeris	2023
Hyun Song	Measurement and Meaningful Use of Patient Experience in Australian Primary Health Care	Mark Harris Jean-Frederic Levesque Sarah Dennis	2020
Jennie McCrindle-Fuchs	Air pollution, climate change and human health in Sydney	Donna Green Melissa Hart Ben Harris-Roxas	2023
John Lewis (passed in May 2019)	Enhanced information systems to support general practitioners to manage the monitoring and treatment of colorectal cancer survivors in accordance with principles of evidence-based practice	Siaw-Teng Liaw Ben Smith Pradeep Ray	2019
Jinhee Kim	Healthy cities: health equity in Sydney's fastest growth area	Evelyne de Leeuw Ben Harris-Roxas Peter Sainsbury	2021
Jude Page	The role of visual communication tools (My Story Cards) in communication, reasoning and shared understanding	Evelyne de Leeuw	2021
Kristina Ulm	Urban agriculture	David Sanderson Alec Thornton Evelyne de Leeuw	2024
Myron Anthony Godinho	Integrating eHealth, Social Business and Citizen Engagement to Achieve Sustainable Development Goals	Siaw-Teng Liaw Md Mahfuz Ashraf	2022



Name	Thesis Title	Supervisors	Completion Year
Rashid Muhammad Ansari	Self-management of type 2 diabetes: focusing on the middle-aged population of rural area of Peshawar Pakistan	Hassan Hosseinzadeh Mark Harris	2020
Sabuj Kanti Mistry	Community health workers as navigators: improving access to preventive care	Mark Harris Elizabeth Harris	2023
Telphia-Leanne Joseph	Career Pathways for Aboriginal and Torres Strait Islander Health Professionals	Lois Meyer Mark Harris	2021
Tracey Ma	Place-based policies to support health in old age	Rebecca Ivers Evelyne de Leeuw Kathleen Clapham Conrad Kobel	2022
Uday Narayan Yadav	Does a health literacy-responsive self-management intervention lead to improved self-management practices among multi-morbid COPD patients in Nepal	Mark Harris Jane Lloyd Hassan Hosseinzadeh	2021
Vera Buss	Development of risk profiling matrix for chronic diseases and preventive smartphone application	Margo Barr Mark Harris Marlien Varnfield	2022

## INDEPENDENT LEARNING PROJECT (ILP) RESEARCH STUDENTS

Name	Thesis Title	Supervisor/ Co-supervisor	Completion
Balakumar Anandasivam	Melanoma risk perceptions among Australian and NZ GPs	Michael Tam	2019
Jehan Karem	Hal tafahum ealay (Do you understand me?)	Michael Tam Andrew Knight	2019
Shaddy Hanna	Barriers to GP follow-up for older women after ED discharge	Michael Tam Andrew Knight	2019
Stuart Leesong	Enablers and barriers for app & telephone coaching-based lifestyle interventions in low socio-economic status patients with or at risk of T2DM in general practice	Mark Harris	2019

## OVERSEAS MASTERS STUDENT

Name	Thesis Title	Supervisor/ Co-supervisor	Completion
Irene Giovanetti	Culturally tailored group-based health education interventions targeted to migrants: what characteristics make them work?	Mark Harris Jane Lloyd	2019

## RESEARCH MASTERS STUDENT

Name	Thesis Title	Supervisor/ Co-supervisor	Completion
Antony Bolton	Caring for people who regularly use methamphetamine in General Practice: barriers and enablers to the provision of structured healthcare	Mark Harris Catherine Spooner Nadine Ezard	2020



# PHD STUDENT PROFILE

Vera Buss

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The first time that I became aware of the Centre for Primary Health Care and Equity (CPHCE) was when I searched the internet for potential PhD supervisors. While browsing through the list of researchers at the University of New South Wales (UNSW), I noticed the profile of Associate Professor Margo Barr. I contacted her and explained my research idea to her.

At this point, I was already working on my potential PhD topic with Dr Marlien Varnfield from the Australian eHealth Research Centre (AEHRC), which is a joint venture between the Commonwealth Scientific and Industrial Research Organisation (CSIRO) and the Queensland Government. So, in 2019 I commenced my PhD at the CPHCE in collaboration with the AEHRC, supervised by A/Prof Margo Barr, Professor Mark Harris, and Dr Marlien Varnfield.

The focus of my PhD project is chronic disease prevention. Specifically, developing an evidence-based mobile application (app) to assist people in increasing or maintaining healthy behaviours. The app is being designed to be used by laypersons to determine their risk of two of the most prevalent chronic conditions – cardiovascular disease and type 2 diabetes mellitus.

My academic background is in pharmacy. I completed my undergraduate studies in pharmacy at the University of Heidelberg in Germany. After my studies, I worked for one year in a community pharmacy in Germany. Driven by the frustration that German pharmacists have limited involvement in patient care and are mainly dispensing medications, I decided to pursue a research degree in pharmacy practice research. Last year, I graduated with the Master of Pharmacy (Research) from the University of Canberra. In my Master thesis, I studied the various health services that are provided by community pharmacists in Australia. During that time, I felt the desire to switch my research focus from disease management to disease prevention.

Since I started at the CPHCE, I have been able to learn about the research that is being conducted at the Centre and I feel honoured to be able to learn from the experiences of such distinguished researchers. I am very grateful for the support I have received from the staff of the CPHCE so far. I can feel daily the Centre's emphasis on equity, and it is a great experience for me to be part of a multidisciplinary and multicultural team. When I am not working on my PhD, I like all sorts of exercise, particularly riding my bike, and cooking. I am also passionate about sustainability; I enjoyed being part of the sustainability team of the CPHCE last year. Our team took part in the Green Impact program at UNSW to create a more sustainable work environment and won a Silver Award.

# KNOWLEDGE EXCHANGE & CAPACITY BUILDING

## CALENDAR OF EVENTS

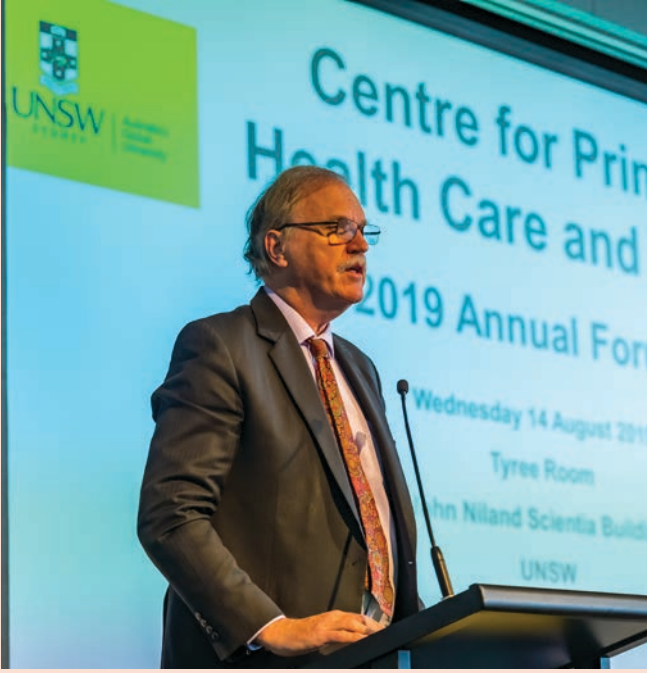
Name	Presenters	Date	Number of registrations
Sydney Local Health District (SLHD) Equity Fest 2019	Jane Caro Katherine Moore	2 April 19	234
Advanced Approaches in Health Impact Assessment Workshop	Odile Mekel Lennert Veerman	4 April 19	40
Research and policy development Workshop	Evelyne de Leeuw	18 April 19	20
Health Impact Assessment and Infrastructure Opportunities for the health sector	Ben Cave	6 May 19	30
Self management support for Chronic conditions	Tom Blakeman	15 July 19	35
Research Priorities Forum - Research Priorities for Central and Eastern Sydney	Jessica Stewart Yalchin Oytam Tony Jackson Lou-Anne Blunden Michael Moore Margo Barr Mark Harris	16 July 19	34
CPHCE Annual Forum 2019	Jean-Frédéric Levesque Margo Barr Jane Taggart Andrew Knight Michael Tam	14 August 19	108
Can Technology Speak my Language? The role of technology in health translation and interpreting	Ben Harris-Roxas David Silvera-Tawil Ashley Young Ben O'Mara Vesna Dragoje Eva Melhem	25 September 19	120

## 2019 CPHCE ANNUAL FORUM

The 2019 Forum theme was on “Integrated Care”. Dr Jean-Frédéric Levesque - CEO, Agency for Clinical Innovation, and Conjoint Professor, Centre for Primary Health Care and Equity, UNSW Sydney – presented the “Ian Webster Health for All Oration” entitled Data, theories and metaphors: primary healthcare research through art, relationships and science”. This was followed by presentations by A/Prof Margo Barr on- Innovative use of big data to answer primary health care policy relevant questions, Jane Taggart – on e-Innovation in cancer follow-up care and Drs Andrew Knight and Michael Tam – on ED2GP - Integrating Emergency Department and General Practice. This was followed by a Panel commentary and plenary discussion comprising, Dr Sonia Van Gessel, Medical Advisor, Primary Integrated & Community Health, South Eastern Sydney Local Health District, Andrew Simpson, Program Manager, Living Well Living Longer, Sydney Local Health District, Dr Jean-Frédéric Levesque, CEO, Agency for Clinical Innovation, and Justin Duggan, General Manager, South Western Sydney Local Health District. Professor Rebecca Ivers, Head of School of Public Health and Community Medicine UNSW presented the CPHCE partnership awards to the following: Geoff Turnbull – individual award, Organisational award- St George Hospital Cancer Care Centre, Career Achievement award - A/Prof Elizabeth Harris, Consumer award - John Lewis (Posthumous award) and Research General Practice award - Green Valley Medical Practice.







CPHCE Annual Forum 2019 at UNSW, Sydney on 14 August 2019



CPHCE Annual Forum 2019 at UNSW, Sydney on 14 August 2019



## Statement of Financial Performance

for the Year Ended 31 December 2019

	Notes	2019	2018
		\$000	\$000
<b>Revenue</b>			
Research Revenue	1	685	1,145
Donations & Bequest - Draw downs		17	232
UNSW Contributions		89	158
Faculty Contributions	2	845	728
Other Restricted Revenue	3	1,874	2,621
Commercial Activity - Fees for Service		0	10
Sundry Other Revenue		4	78
<b>Total Revenue</b>		<b>3,512</b>	<b>4,971</b>
<b>Expenses</b>			
Salaries, On costs and other staff costs		\$3,648	\$3,908
Scholarship Stipends		48	31
Contract & Consulting Services		144	81
Consumables		31	18
Travel		55	94
Equipment Non-Capitalised		6	10
Entertainment		1	2
Marketing		-1	12
Miscellaneous Expenses		15	97
<b>Total Non-People Costs</b>		<b>300</b>	<b>345</b>
<b>Total Expenses</b>		<b>\$3,947</b>	<b>\$4,253</b>
<b>TOTAL CONTRIBUTION - SURPLUS/(DEFICIT)</b>		<b>(435)</b>	<b>718</b>
Depreciation		2	1
<b>SURPLUS / (DEFICIT) after Depreciation</b>		<b>(437)</b>	<b>717</b>
<b>Cashflow Funded Capital Expenditure (CAPEX)</b>		<b>0</b>	<b>9</b>

## NOTES:

1. Revenue in Advance will be noted in Creditors & Other Liabilities

Research Revenue generated (cash basis)		552	953
Category 1 Research Revenue therein		246	419

2. UNSW Budget model includes other revenue items

Teaching Revenue		34	35
Block Grants		976	950
Indirect Cost Recoveries		3	7

3. Other Research Revenue includes internal fund transfers

4. Restricted Funds - Cash at year end		\$1,736	\$2,230
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## Statement of Financial Position

As at December 2019

	Notes	2019	2018
	6	\$000	\$000
UNSW Sydney Internal Cash	7	1,813	2,332
Accounts Receivable		169	224
Sundry Assets		31	0
Investments	8	0	0
Property Plant & Equipment	1	6	8
Creditors and Other Liabilities	1	54	138
<b>NET ASSETS</b>		<b>\$1965</b>	<b>\$2,427</b>

NOTES: Statements are prepared on UNSW Accounting principles – Operating & Strategic funds adjusted revenue  
 UNSW has central provisions in respect of payments made to employees and taxation.  
 Such provisions will not be reflected in this Centre's Statement of Financial Position.  
 Cash balance includes the GST centralised daily on Debtor and Creditor balances.  
 Accounts Receivable are gross value - inclusive of applicable GST.  
 Property Plant & Equipment is depreciated over the expected useful life of the asset.  
 UNSW Division of Advancement holds donated funds centrally.  
 Draw down of funds to the Centre is reflected in the Statement of Financial Performance.

## Main Campus

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**Email:** m.f.harris@unsw.edu.au

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## Centre for Health Equity Training Research and Evaluation (CHETRE)

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## Health Equity Research and Development Unit (HERDU)

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Please direct any inquiries regarding the Annual Report to  
A/Prof Freddy Sitas at f.sitas@unsw.edu.au.

Further information about the Centre for Primary Health Care and Equity  
can be found at [www.cphce.unsw.edu.au](http://www.cphce.unsw.edu.au).

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