



UNSW Research Centre for Primary Health Care and Equity

Annual Report 2015

Never Stand Still

UNSW Medicine

Centre for Primary Health Care and Equity



The Centre for Primary Health Care and Equity acknowledges that their offices are built on the traditional lands of the people of the Darug Nation and the Eora Nation, and pays their respect to Elders past and present



ACKNOWLEDGMENT

It is a pleasure to be able to recognise those who support the Centre and work alongside us towards our aim of better, fairer health and health care in the community.

Our supporters and key partners have been with us for many years: the Faculty and University within which we work, NSW Ministry of Health who provide essential infrastructure funding through a Population Health and Health Services Research Support Program grant, South Western Sydney Local Health District and the Ingham Institute for Applied Medical research who support CHETRE and the General Practice Unit at Fairfield, with the Ingham Institute also providing accommodation for CHETRE. We are grateful to the Sydney Local Health District for its support of the Health Equity Research and Development Unit (HERDU) and the South Eastern Sydney Local Health District for its support of the South Eastern Sydney Research Collaboration (SEaRCH). We also thank the funding bodies who have supported our research: NHMRC, ARC, APHCRI, NSW Ministry of Health, SAX Institute, NSW Local Health Districts to name a few.

Those working alongside us also include many familiar names: the School of Public Health and Community Medicine, Muru Marri Indigenous Health Unit, the Australian Institute for Health Innovation and other UNSW researchers and research groups whose work intersects with ours; researchers from universities across Australia and in Canada, New Zealand, the USA and the UK; and people from the many government and non-government organisations with whom we work and who are listed in the Partners and Affiliations section on p.56. We are grateful also to the clinicians and service providers across all sectors who take the time to participate in our research and take an interest in our findings.

We acknowledge particularly our partnerships with the Local Health Districts and Primary Health Networks in Central and South Eastern Sydney and South Western Sydney (formerly Medicare Locals). These partnerships keep us in touch with the real world of health services and enable us to see how our findings apply to primary health care as it is practised.

We are grateful to members of our Steering Committee and Advisory Group for the support and guidance they give us. Many of them have been with us for a long time, the Chairs, Professors Terry Campbell and Ian Webster since the Centre was formed.

Finally, we thank our staff. They live with short contracts, uncertain funding, and the difficulty of building coherent research programs on an often unpredictable funding base. The work reported here shows how well they continue to respond to this challenge. What is not reflected here but is equally important is the spirit of cooperation and mutual respect with which this is done.

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Design and Printing coordinator: Chih-ching Sunny Chang
Design and Printing: Creative Promises Pty Ltd
Photos: Chih-ching Sunny Chang, Keith McInnes
Photography
Published August 2016
CRICOS Provider Number 00098G

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BACKGROUND

The Centre for Primary Health Care and Equity has been a UNSW research centre since 2005, building on two groups that had been working together since they were founded in 1996. We operate from four locations: on campus at Randwick, at Liverpool (the Centre for Health Equity Training, Research and Evaluation, "CHETRE"), at Fairfield (the General Practice Unit) and at Camperdown (the Health Equity Research and Development Unit, "HERDU")

Our mission is to contribute to better, fairer health and health care in the community by conducting research, evaluation and development that strengthens primary health care and addresses health inequities. In 2015 our research streams were:

- Prevention and Management of Chronic Disease
- Primary Health Care Informatics
- Primary Health Care System Development
- Action for Equity

We support the uptake of our research findings in policy and practice, and undertake research capacity building, particularly in Central, East and South Western Sydney.

We work across these areas at national, state and local levels. This enables us to investigate health issues at the level of individuals and communities, services and systems as well as putting them in an international context.

MANAGEMENT

2015 Steering Committee

The Steering Committee oversees the work of the Centre, ensuring that it pursues its objectives in line with its terms of reference and is financially sound. The Committee met on 3 March, 7 July and 1 December 2015.

Chair

Professor Terry Campbell Deputy Dean, Faculty of Medicine, UNSW Australia

Members

Professor Mark Harris Executive Director, Centre for Primary Health Care and Equity, UNSW Australia

Dr Greg Stewart, Director of Primary and Integrated Health, SESLHD

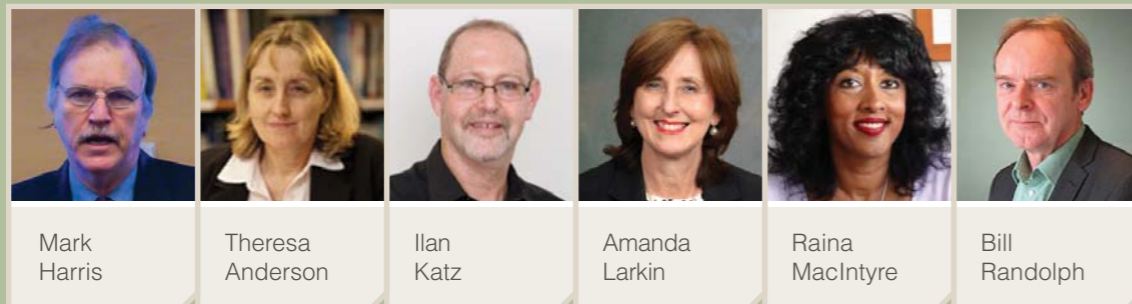
Australia Dr Teresa Anderson Chief Executive, Sydney Local Health District

Professor Ilan Katz, Social Policy Research Centre

Ms Amanda Larkin Chief Executive, South West Sydney Local Health District

Professor Raina MacIntyre Head, School of Public Health and Community Medicine, UNSW Australia

Professor Bill Randolph Director, City Futures Research Centre, Faculty of the Built Environment, UNSW Australia



Secretariat (non-voting member)

Ms Sarah Ford Finance Manager, Centre for Primary Health Care and Equity, UNSW Australia

Message from the Chair of the Steering Committee



Every year brings its challenges and opportunities and 2015 has been no different. The Centre came to the end of its current five year strategic plan with a significant milestone being achieved when the joint Research and Development Hub with South East Sydney Local Health District (SEaRCH) was established under the leadership of Dr Julie McDonald. Alongside the existing joint centres, HERDU, CHETRE and the GP Unit in Fairfield, they demonstrate the relevance and value of our research and evaluation activity in strong partnership with health services.

The most significant change to the primary health care landscape was the replacement by the Commonwealth of Medicare Locals with Primary Health Networks (PHNs) in the middle of the year. This has meant the Centre has had to establish new relationship and partnerships and begin to align the research agenda with the priorities of these new organisations. Significantly the Centre was chosen as the academic partner of the national evaluation of PHNs being conducted over a three year period by Ernst and Young.

On the traditional performance metrics of research grants and publications the Centre has continued to exceed expectations. Staff of the Centre increased publications by 20% over the previous year. Income has been maintained at a steady level although the mix of funding sources is beginning to alter. The pressure on NHMRC funding is being felt through the research sector and as a consequence alternative funding sources have been developed, primarily through increased success in competitive tendering for work commissioned by various parts of the NSW Health Department and Local Health Districts.

Members of staff who received recognition for their achievements included:

- **Mark Harris** Australian Academy of Health and Medical Sciences (AAHMS) Fellowship 2015
- **Nicholas Zwar** Australian Association for Academic Primary Care (AAAPC) Charles Bridges-Webb Medal of 2015
- **Karen Gardner** BUPA 2015 Emerging Health Researcher Finalist

This year has also marked the retirement of the Centre's longstanding CEO, Gawaine Powell Davis. He has been instrumental in the success of the Centre since its inception and was instrumental in forming a strong network of partnerships in academic institutions, health services and non-government sector. It was recognised that Gawaine's unique skills could not be replaced therefore it was decided to separate his CEO and research roles. Consequently we have welcomed Karen Gardner as a Senior Fellow in primary health care systems and Terry Findlay has been appointed as a Director on a part time basis to take on the former CEO roles.

The Steering Committee membership has remained stable throughout the year and I would like to thank members for their contribution and all new and continuing staff for their commitment and hard work

PROFESSOR TERRY CAMPBELL
Chair, Steering Committee

2015 Advisory Group

The Advisory Group provides strategic advice to the Centre on its research program. It met on 26 February, 2 July and 24 November 2015.

Chair

Emeritus Professor Ian Webster School of Public Health and Community Medicine, UNSW Australia

Members

Ms Miranda Shaw General Manager, Community Services SLHD

Associate Professor Elizabeth Harris Director, HERDU, SLHD

Dr Julie McDonald Director, SEaRCH, SESLHD

Mr Terry Findlay Director, CPHCE

Ms Tish Bruce Deputy Director, Ambulatory and Primary Health Care, SE Sydney Local Health District

Professor Mark Harris Executive Director, Centre for Primary Health Care and Equity, UNSW Australia

Professor Siaw-Teng Liaw Director, Fairfield General Practice Unit

Professor Raina MacIntyre Head, School of Public Health and Community Medicine, UNSW Australia

Professor William (Bill) Bellew School of Public Health, University of Sydney

Associate Professor Virginia Schmied School of Nursing and Midwifery, University of Western Sydney

Dr Chris Shipway Director Primary Care and Chronic Services, NSW Agency for Clinical Innovation

Dr Christine Walker Chronic Illness Alliance, Victoria

Professor Nicholas Zwar Professor of General Practice, School of Public Health and Community Medicine, UNSW Australia



Message from the Chair of the Advisory Group



The essence of primary health care is the ability to integrate services and agencies in addressing the health and social needs of individuals and communities. This is where the Centre for Primary Health Care and Equity excels: working with Aboriginal organisations and children, with disadvantaged urban and rural populations, aged persons, refugees, those in contact with the criminal justice system and other groups.

The Centre's work centres on the fundamental principle of equity - using well-tried concepts and the newer technologies of electronic medical records, patient held information and the internet.

Chronic disease, cancer and mental health-related conditions are the health challenges of the modern era. In the course of these conditions, at times of crisis, specialist treatment and hospitalisation are needed. But to change the trajectory of these conditions is the task for primary health care – prevention, early detection and management for a quality life - a contributing life – in the community.

Primary health care can do this for us. For it is in this environment where undifferentiated health problems are managed, without having to be first screened and then tested for eligibility and the presence of specific diagnoses to see a specialist. On the contrary, many patients in primary health care have conditions for which a formal diagnosis cannot be made, and for that matter, for whom it may be inappropriate.

The fields of research and inquiry undertaken by the Centre's staff attempt to grapple with these issues with realistic objectives and 'practice-worthy' goals.

While academe values a department's publication list, and by this yardstick the Centre performance is highly commendable, the real test is the practicality and implementation of health care and public health measures which can be shown to improve patient care and the community's health.

The partnerships achieved by the Centre, and the willingness of others to join in the Centre's programs, attest to the Centre's productivity and value. There are partnerships across the board - with primary health care networks, local health districts, state and national governments, non-government organisations, advocate organisations and research groups in Canada, USA and UK.

The Advisory Committee is pleased to be able to contribute to this process. We appreciate the support and leadership of Professor Terry Campbell and the Centre's leadership of Mark Harris and Terry Findlay. And we admire the work of all the researchers and wish them well for their future careers.

The Committee endorses Professors Campbell and Harris' thanks to the external funding bodies, University, Faculty of Medicine and the School of Public health and Community Medicine for their encouragement and support.

EMERITUS PROFESSOR IAN W WEBSTER AO
Chair, Advisory Group

CPHCE Board of Directors

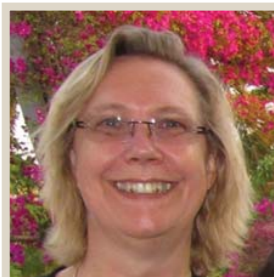


Executive Director
Professor Mark Harris



Director
Mr Terry Findlay

Directors



Professor
Evelyne de Leeuw
Start from 01/09/2015



Ms Karen Edward
Until 31/08/2015



Associate Professor
Elizabeth Harris



Professor
Siaw-Teng Liaw



Professor
Nicholas Zwar



Dr Julie
McDonald

Message from the Executive Director



CPHCE continues to grow and develop its research especially in response to the emerging needs and opportunities for change within primary health care and integration between it and both acute care and public health. The new Primary Health Networks (PHNs) were in transition from Medicare Locals throughout 2015, developing new roles in commissioning of services and programs and developing integrated pathways of care between primary and secondary/tertiary care. The patient centred medical home and health neighbourhood model has acquired new significance with the establishment of trial sites late in the year. Our close relationship with PHNs and Local Health Districts (LHDs) has meant that we have been closely involved helping understand, monitor and evaluate these changes.

In 2015, CPHCE also saw transition in key staff especially with Terry Findlay taking over from Gawaine Powell Davies as Centre director. Evelyne de Leeuw commenced as Director of the Centre for Health Equity Training, Research and Evaluation (CHETRE), our Liverpool research hub. We also saw the continued development of the other research hubs in Sydney (HERDU) and South East Sydney (SEaRCH) Local Health Districts and the development of some joint research programs across the hubs such as the primary and community health cohort sub-study of the 45 and up study, early childhood services, and work with bilingual community educators.

COMPARE- PHC, the Centre for Obesity Management and Prevention Research Excellence in Primary Health Care entered its final year of its four year funding (ending mid 2016) and the final phase of obesity management trials with patients with low health literacy in both NSW and South Australia and a study of nurse management of obesity using the UK Counterweight program in Adelaide. The Centre has begun to translate some of this work into policy and practice as well as producing several publications in 2015.

The Canadian-Australian collaboration - the Innovative Models Promoting Access-to-Care Transformation (IMPACT) – has completed systematic reviews of interventions to improve access to primary care by vulnerable and disadvantaged population groups. Trials are now being established in Sydney, Melbourne and Adelaide to evaluate the impact of these interventions on access to primary care by vulnerable population groups.

The Gudaga cohort of Aboriginal children which began at birth, is about to enter secondary school. As the children enter adolescence this represents a major new area for research for the cohort study and negotiations and needs assessments are currently underway with the Tharawal Aboriginal Health Corporation in Campbelltown and other stakeholders and researchers. The Ways of Thinking, Ways of Doing study program aims to embed cultural respect into routine general practices in South West Sydney and Melbourne. This program has entered the final phase of its intervention and 12 month data collection.

Work in priority areas of health equity and the social determinants of health continued in our partnerships with health districts, local government, and the Departments of Housing, and Justice Health. The Communities and Population Program undertook two “learning by doing” capacity building programs with groups in South Western Sydney Local Health District for health impact assessment and working in Locationally disadvantaged communities. Peer review of the health sections of the Western Sydney Airport Environmental Impact Statement and a health impact assessment of the Western Sydney Airport consultation processes was also started in 2015.

CPHCE's research consistently informs government health policy at state and national levels. We have a broad range of partnerships with other researchers, policymakers, practitioners, local communities and consumers.

During 2015 we hosted visits by a number of international researchers including:

- Anna Bebe and her supervisors Professors Jens Søndergaard and Jesper Bo Nielsen from Denmark.
- Associate Professor Dr Lee Ping Yein, Universiti Putra Malaysia following my own visit to Malaysia earlier in the year
- Professor Susan Jebb from Oxford University who was a visiting academic brought to Australia by COMPaRE-PHC
- Dr John Hussey from the English National Health Service
- Professor Rick Glazier from ICES, in Ontario Canada
- Professor Jeanie Haggerty, McGill University, Canada as part of the IMPACT study.

Looking Forward

In 2016 and beyond CPHCE will continue to develop research on:

- better integration of care between secondary/tertiary care and primary care in the community including through the integration of information systems (through the e-PBRN)
- preventive interventions in primary health care and better integrating primary care and public and population health
- improving access to appropriate primary health care for Aboriginal people and other vulnerable and disadvantaged population groups especially refugees
- place-based interventions to address health inequities
- addressing health literacy both at an individual and organizational level
- developing the role of primary care networks in commissioning and supporting better health care in the community.

As the environment for health care and prevention in Australia continues to change rapidly, CPHCE itself continues to evolve. CPHCE remains committed to developing local, national and international partnerships to support the delivery of applied research and policy relevant evaluation and to enable us to live up to our goal of better and fairer health in the community.



Professor Mark Harris

Professor of General Practice and Executive Director,
Centre for Primary Health Care & Equity, UNSW Australia





OUR STAFF

All staff who worked at the Centre during 2015 (including long term casual staff) are listed below. As at November 2015, there were 43 staff members (30.45 FTEs).

Professor

Professor Mark Harris MBBS, FRACGP, DRACOG, MD
Professor Evelyne de Leeuw MSc, MPH, PhD

Associate Professor

Associate Professor Pat Bazeley Cert Teaching, BA (Hons), PhD
Associate Professor Elizabeth Comino BVSc, BSc, MPH, PhD
Associate Professor Elizabeth Harris BA, DipEd, DipSoc Work, MPH, PhD
Associate Professor Lynn Kemp BHSc, PhD, RN
Associate Professor Gawaine Powell Davies BA (Hons), MHP
Associate Professor Marilyn Wise BA, MHP

Senior Research Fellow

Dr Karen Gardner BA, MPH, PhD
Dr Upali Jayasinghe MSc Maths, GradDip Stats, GradDip Appl Stats, PhD
Dr Jenny Knight BA (Hons), Dip Ed, MPH, PhD
Dr Holly Mack BSPsych, PhD
Dr Julie McDonald BA, MPH, PhD, RN
Dr Catherine Spooner BA, MPH, PhD
Dr Hairong Yu BEng (Hons), MSc, PhD
Dr Jane Lloyd BAppSc (Health Ed), MPH, PhD
Ms Karen Edwards BA, GDip Cont Ed, MBA
Mr Terry Findlay BSocStud, MBus

Research Fellow

Dr Amit Arora BDS, MDS (Hons), PhD
Dr Nighat Faruqi MBBS, MCCH, PhD
Ms Fiona Haigh BSocSc, MPH, LLB, PhD Candidate
Ms Jane Taggart BEd, Dip PE, MPH

Senior Research Officer

Ms Tracey Bruce BA, MHSM, RN
Ms Penelope Finlay BA, GradDipSocEcol, MPASR
Ms Sharon Parker, BHSc (Nursing), MPH, RN
Dr Heike Schütze, BSc (Biomedical), MPH, PhD
Dr Karen McPhail-Bell, BBehSc Hons, PhD, AFHEA

Research Associate/Research Officer/Project Officer

Ms Cheryl (Jane) Anderson Heath Worker certificate
Ms Fiona Byrne BAppSc (Information Studies); Assoc Dip Lib Prac
Ms Carreta Coleman MPsych
Dr Ros Eames-Brown B.ED (Nursing) PhD
Ms Emma Elcombe Cert IV Bus, BAppSc (Equine Studies), MSc (Brain and Mind Sciences)
Mr Iqbal Hasan MBBS, MTH
Mr Oshana Hermiz MB, ChB, DS
Mrs Katie Hirono BA, MPH
Mr Md Fakhru Islam BSc, MSc, MIS, MBIostat MIEAust
Ms Kate Jones BAS
Ms Karla Jaques BPH
Ms Chandni Joshi MPH/MHM, MIPH
Ms Rachael Kearns B Nursing, MPH, RN
Dr Catherine Kaplun BEd (ECE) (Hons), PhD
Ms Brianna Kaplun BA
Ms Vivien Le MPH
Ms Veronica Morrison BPsych (Hons)
Dr Melanie Moylan BSc (Hons) PhD
Ms Annette Riley M Social Work
Mr Nicholas (Nick) Rosser A/Dip Health (Sport and Rec), Dip Health (Sports Coaching), BExSc&R, MSc
Ms Sheryl Scharkie RN
Ms Hyun Song BASc, MSc
Ms Louise Thomas BSc/BA
Ms Natasha West Certificate III Aboriginal and Torres Strait Primary Health

Programmer

Ms Monica Aburto Cert. Microsoft Access Advanced, SAS Programming

Research Assistant

Mr Jan-Willem Weenink BSc (BioMed), MSc

Finance Manager

Ms Sarah Ford BBus

Administrative Officer

Ms Chih-Ching (Sunny) Chang BA, Grad Dip (Interpreting & Translation), MCom
Ms Nouhad (Nina) El Haddad BSc, MNutDiet, PhD Candidate
Ms Fakhra Maan BEng Lit/BJourn, MEng Lit, MCom (Organisation and Management)
Ms Lauren Norton Dip Bus Man
Ms Susan Schiotz BA, CertIV ProjectManagement

Affiliated staff

(employed by the School of Public Health and Community Medicine)

Professor

Professor Siaw-Teng Liaw MBBS, Dip Obstetrics, PhD, FRACGP, FACMI, FACHI
Professor Nicholas Zwar MBBS, MPH, PhD, FRACGP

Senior Lecturer

Dr Joel Rhee BSc (Med), MBBS (Hons), GradCert (ULT), FRACGP

Staff Specialist & Senior Lecturer

Dr Andrew Knight MBBS, MMedSci (ClinEpid), FRACGP, FAICD
Dr Michael Tam BSc(Med), MBBS, MMH(GP), FRACGP

Research Officer/Project Officer

Ms Joan Silk BA (Hons), Dip Ed
Ms Saggi Zapart BPsych (Hons), PhD Candidate

Administrative Officer

Ms Mary Knopp Dip Bus Admin*
Ms Charmaine Rodricks*

(*employed by Sydney South West Local Health District)

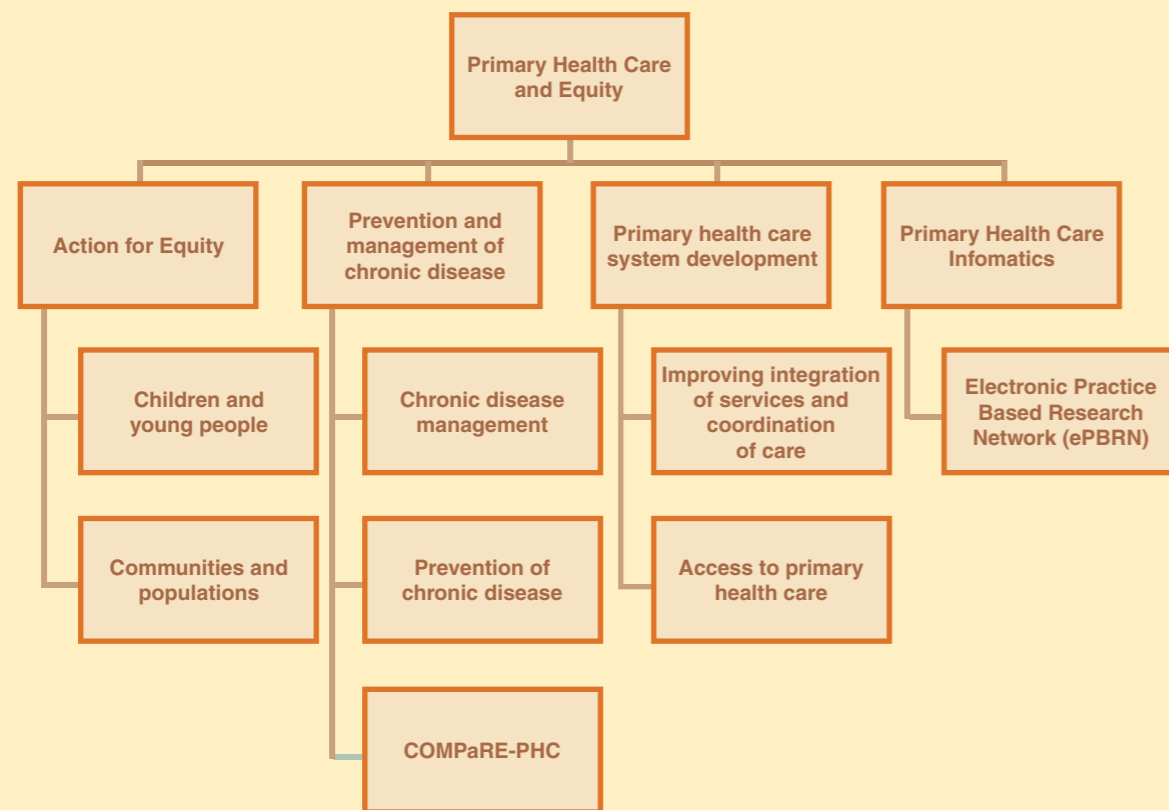
Conjoint Staff

Mr Ben Cave Ben Cave Associates, Leeds, England
Dr Elizabeth Denney-Wilson University of Technology Sydney
Dr Sarah Dennis University of Sydney
Dr Rebekah Grace Macquarie University
Dr Patrick Harris BA (Hons), MPH, PhD
Dr Benjamin Harris-Roxas Urbis Consultants
Dr Yordanka Krastev University of Technology Sydney
Dr Rachael Laws Deakin University
Dr Timothy Shortus General Practitioner
Ms Sarah Simpson World Health Organisation
Dr Salim Vohra Centre for Health Impact Assessment Institute of Occupational Medicine, London
Dr Qing Wan General Practitioner
Ms Anna Williams – Notre Dame University



RESEARCH

The Centre has four research streams, with a number of sub-programs.



Research projects active in 2015 are listed below by stream. The chief investigator is named first (in bold) followed by the project coordinator (underlined). Other members of the research team are listed in alphabetical order, and affiliations are provided for those who are not part of CPHCE. The source of funding is given in brackets. For further details of projects, please see our web site (www.cphce.unsw.edu.au)

Prevention and management of chronic disease stream

Our research on the prevention and management of chronic disease in primary health care addresses a broad range of problems currently confronting the health system as it struggles to deal with the increasing burden of chronic disease. These include innovations in the roles of health care providers within the primary care team, use of new information and decision support and quality improvement strategies, and better coordinated referral and coordination between PHC care providers. It also involves addressing patient health literacy and the education and skills to participate in their own care.

Improving chronic disease management

This program focuses on improving the quality of care for a range of chronic diseases in PHC including diabetes, chronic respiratory and cardiovascular disease, cancer and patients with multiple conditions including chronic physical and mental illness. The theoretical basis of this work includes the expanded chronic illness model which identifies the support systems and organization required for optimal patient centered chronic disease management including new roles for primary care providers especially practice nurses, support for patient self-management, decision support and information systems. This program is increasingly focusing on patients with multi-morbidities in primary health care.

Projects

Attitudes to cancer follow up care in general practice: Translational Cancer Research Network (TCRN)

Research Team: **Mark Harris**, Heike Schütze, Lena Caruso (Translational Cancer Research Network), Melvin Chin, Robyn Ward (Prince of Wales Hospital), David Weller (Edinburgh University)

Culturally appropriate diabetes care in mainstream general practice for urban Aboriginal & Torres Strait Islander people

Research Team: **Siaw-Teng Liaw**, John Furler (Department of GP, University of Melbourne), Margaret Kelaher (Onemda VicHealth Koori Health Unit, University of Melbourne), Phyllis Lau (Department of GP, University of Melbourne), Priscilla Margaret Pyett (Monash University), Kevin Rowley (Onemda VicHealth Koori Health Unit, University of Melbourne)

PELICAN: A cluster randomised trial of early intervention for Chronic Obstructive Pulmonary Disease by practice nurse - GP teams

Research Team: **Nicholas Zwar**, Alan Crockett (University of Adelaide), Sarah Dennis, Iqbal Hasan, Oshana Hermiz, Sandy Middleton (Australian Catholic University), Helen Reddel (Woolcock Institute, University of Sydney), Onno van Schayck (Maastricht University), Sanjyot Vaghokar

Integrating chronic illness self-management plans with primary care management: a clarification model of patient-provider care congruence.

PhD Student: **Anna Williams**; Supervisors: Patricia Bazeley and Mark Harris

Shifting ground, common ground. Understanding the evolving care practice. Inter-country comparative study Canada USA and Australia (Canadian Institute for Health Research)

Research Team: **William Hogg** (University of Ottawa), Ben Crabtree (University of New Jersey), Jane Gunn (Melbourne University), Mark Harris, Jean-Fred Levesque (Université de Montréal), Siaw-Teng Liaw, Julie McDonald, William Miller (Pennsylvania State University), Gawaine Powell Davies, Grant Russell (Monash University), Catherine Scott (Alberta Health Services)

Preventing chronic disease

Our research in prevention has focused on the behavioural risk factors (smoking, nutrition, alcohol, physical activity) and the physiological conditions which predispose to chronic diseases (obesity, hypertension, dyslipidaemia, and pre-diabetes). We have developed and evaluated interventions based on the 5As framework (Assess, Advise, Agree, Assist, Arrange) across the life-cycle. A particular focus is on the management of overweight and obesity and preventive care for disadvantaged groups with low health literacy. The research has included mixed method feasibility studies, quasi experimental and cluster randomized trials in both general practice and community health services. The interventions have included interactive training of health professionals in assessment of risk and motivational interviewing, enhancing the role of practice nurses, supporting referral and uptake of individual and group diet and physical activity education programs, and long term follow up and support. This research has informed NSW and Australian Government health policy and has been translated into guidelines and resources for practitioners.

Projects

Centre for Obesity Management and Prevention Research Excellence in Primary Health Care (COMPARE-PHC) (APHCRI)

PhD Student: **Mark Harris**; Catherine Spooner, Deborah Askew (Queensland Health- Inala Indigenous Health Service), Adrian Bauman (University of Sydney), Kylie Ball (Deakin University), Iain Broom (Robert Gordon University), Karen Campbell (Deakin University), Ian Caterson (University of Sydney), David Crawford (Deakin University), Elizabeth Denney-Wilson (University of Technology Sydney), Noel Hayman (Queensland Health - Inala Indigenous Health Service), Upali Jayasinghe, Jonathon Karnon (University of Adelaide), Rachel Laws (Deakin University), Siaw-Teng Liaw, John Lynch (University of Adelaide), Gawaine Powell Davies, Deborah Schofield (University of Sydney), Nigel Stocks (University of Adelaide), Julie Will (Centres for Disease Control and Prevention)

A number of projects are being undertaken in the Centre as part of COMPARE-PHC including:

1. Better Management of Weight in General Practice (BMWGP)

Research Team: **Mark Harris**, Nighat Faruqi, Elizabeth Denney-Wilson (UTS), Nouhad El-Haddad, Oshana Hermiz, Rachel Laws (Deakin University), Siaw Teng Liaw, Jane Lloyd, Catherine Spooner, Nigel Stocks (University of Adelaide)

2. Health economic analysis of a model for implementation of guidelines

Research Team: **Mark Harris**, Jodi Gray (University of Adelaide), Jonathon Karnon (University of Adelaide), Sharon Parker, Catherine Spooner, Nigel Stocks (University of Adelaide)

3. Health literacy interventions for weight management

Research Team: **Mark Harris**, Catherine Spooner, Deborah Askew (Inala Indigenous Health Service), Sarah Dennis (University of Sydney), Nighat Faruqi, Chandni Joshi, Jane Lloyd, Nigel Stocks (University of Adelaide), Jane Taggart

4. Referral of obese patients in primary care

Research Team: **Mark Harris**, Ian Caterson (University of Sydney), Elizabeth Denney-Wilson (UTS), Jonathon Karnon (University of Adelaide), Kyoung Kon Kom (Gachon University of Medicine and Science), Rachel Laws (Deakin University), Siaw-Teng Liaw, Megan Passey (University of Sydney), Catherine Spooner, Lin-Lee Yeong

Implementing guidelines to routinely prevent chronic disease in general practice (PEP)

Research Team: **Mark Harris**, Sharon Parker, Raghieb Ahmad, Chris del Mar (Bond University), John Litt (Flinders University), Jane Lloyd, Danielle Mazza (Monash University), Gawaine Powell Davies, Grant Russell (Monash University), Richard Taylor (SPHCM, UNSW), Mieke van Driel (University of Queensland), Nicholas Zwar

SEEF Equity study: access to preventive and primary health care (NHMRC)

Research Team: **Mark Harris**, Elizabeth Comino, Fakhrol Md. Islam

Consumer Navigation of Electronic Cardiovascular Tools - The CONNECT study.

Research Team: **David Peiris**, Tim Usherwood, Mark Harris Harris, Sharon Parker



Primary health care system development stream

Primary health care is the setting for most of the Centre's research. The projects in this stream focus on the health care system itself, from the perspectives of improving integration and access. Much of this work is applied, and involves working with the Local Health Districts and Medicare Locals in central, south eastern and south western Sydney. The development of research hubs with Sydney and South Eastern Sydney Local Health Districts has provided new opportunities for working with them on primary health care development.

During the year, the funding for the Primary and Community Health Research Unit within south western Sydney finished. We evaluated the program and suggested future directions for building research capacity within the health services.

Improving Integration of Services and Coordination of Care

In 2015, there was a shift in policy support for more integrated care as the Department of Health prepared to replace Medicare Locals with Primary Health Networks, and in NSW the Chronic Disease Management Program (CDMP) became part of the Integrated Care program and started a redesign phase. Both of these shifts were influenced by our evaluations of Medicare Locals and the CDMP. During the year we worked through our research hubs to support integration, and commenced development of a guide to strengthening health care in the community.

Projects

Can Get Health in Canterbury (Sydney LHD, Inner Western Sydney ML)

Research Team: **Elizabeth Harris**, Penny Findlay, Tracey Wills (IWSML)

Commissioning Health Services. A rapid review. (Sax Institute/NSW Ministry of Health)

Research team: Karen Edwards (Consultant), Karen Gardner, **Mark Harris**, Chandni Joshi, Terry Findlay, Rachael Kearns, Julie McDonald, Gawaine Powell Davies

Integrated Primary Health Care Centres: A multiple methods comparative case study (APHCRI)

Research team: Sarah Dennis (Sydney University), Jeff Fuller (Flinders University), Rachael Kearns, Riki Lane (Monash University), **Julie McDonald**, Gawaine Powell Davies, Grant Russell (Monash University), Catherine Spooner, Christine Walker (Chronic Illness Alliance), Bernadette Ward (Monash University)

National Evaluation of PHNs (Commonwealth Department of Health)

Research team: Karen Gardner, Elizabeth Harris, Mark Harris, Riki Lane (Monash University), Siaw-Teng Liaw, Julie McDonald, Grant Russell (Monash University), Nick Zwar, EY and EY Sweeney

Strengthening Healthcare in the Community. A decision support tool: (Sax Institute/ACI)

Research team: Elizabeth Harris, Mark Harris, Karen Gardner, Julie McDonald, **Gawaine Powell Davies**, Tom Powell Davies.)

Access to Primary Health Care

The IMPACT study continues as a major two-country study of ways of improving access to primary health care for people in disadvantaged communities. Activities included a participatory decision making process to identify priorities in South Western Sydney and systematic reviews of the literature on interventions to improve access to PHC for vulnerable population groups.

We continued to develop our work using data linkage in a feasibility study for a cohort of older people in Sydney and South Eastern Sydney, building on the 45 and Up and the SEEF project databases.

Projects

Assessing the Feasibility of an Aged Care Cohort Study (SLHD)

Research team: Elizabeth Comino, **Elizabeth Harris**, Mark Harris, Md. Fakhru Islam, Julie McDonald

Hospital in the Home Equity Lens (SLHD)

Research Team: **Elizabeth Harris**, Elizabeth Comino, Jude Page

Innovative Models Promoting Access and Coverage Team (IMPACT) Centre for Research Excellence (APHCRI, CIHR)

Research Team: **Mark Harris**, Siaw-Teng Liaw, Jean Frederic Levesque, Julie McDonald, Sharon Parker, Gawaine Powell Davies

Investigating Best Practice Primary Care for Older Australians with Diabetes Using Record Linkage: a Pilot Study (NHMRC)

Research Team: **Elizabeth Comino**, Jeff Flack (SWSLHD), Marion Haas (UTS), Mark Harris, Bin Jalaludin (SWSLHD), Louisa Jorm (UWS), Gawaine Powell Davies, Kris Rogers (SAX Institute)

Universal Health Home Visiting Project (SLHD and SESLHD)

Research Team: **Elizabeth Harris**, Tish Bruce (SESLHD), Miranda Shaw (SWSLHD)



Action for equity stream

This research stream recognises that health, development and wellbeing are the product of complex interacting factors at the individual, family, community and environmental levels. We conduct research at different levels, with interventions and innovations that are embedded within systems and built on a relationship between local research institutions and the professional and broader community. Through this approach we undertake practice and policy relevant research that provides high quality research reports and peer-reviewed publications, and direct support for practice and service development and capacity building.

Children and Young People

This program focusses on understanding the needs of vulnerable families (including families at risk of poorer child health and development outcomes, families living in lower socioeconomic communities and Aboriginal families) and developing and trialling interventions to improve child and young people's health, development and educational outcomes, including individual, family and service system interventions. This research program is grounded in the evidence about the importance of the early years, and targets families with children from antenatal (pregnancy) to the second decade of life.

Key research in this program includes the Gudaga research program: a suite of studies that includes the NHMRC funded Gudaga cohort study of urban Aboriginal children's health and development, the ARC funded Gudaga goes to school study of the children's experience of the early years of schooling.



Projects

An ecological study of school transition and the early years of school for Aboriginal children in an urban location (ARC)

Research Team: Lynn Kemp, Rebekah Grace, Cheryl Jane Anderson, Elizabeth Comino, Sue Dockett (Charles Sturt University), Melissa Haswell-Elkins (Muru Marri Indigenous Health Unit, UNSW), Lisa Jackson Pulver (Muru Marri Indigenous Health Unit, UNSW), Cathy Kaplun, Jenny Knight, Fakhra Mann, Bob Perry (Charles Sturt University), Sheryl Scharkie, Natasha West

Evaluation of the Healthy Learner Project in a disadvantaged high school (Mounties)

Research team: [Siaw-Teng Liaw](#), Sarah Dennis, Edward Noon (Ashcroft High School)

Sustained nurse home visiting: who benefits, why and how? (PhD study)

PhD candidate: [Siggi Zapart](#); PhD candidate: Lynn Kemp, Jenny Knight

The Gudaga Study: Describing the health, development, early education, family environment and service context of Aboriginal children aged five to nine years in an urban location (Gudaga III) (NHMRC, SWSLHD)

Research team: [Elizabeth Comino](#), Holly Mack, Jennifer Knight, Cheryl Jane Anderson, Rebekah Grace, Lisa Jackson Pulver (Muru Marri Indigenous Health Unit, UNSW), Bin Jalaludin (SWSLHD), Catherine Kaplun, Lynn Kemp, Kelvin Kong, Fakhra Maan, Jenny McDonald (SWSLHD), Cathy McMahon (Macquarie University), Sheryl Scharkie, Natasha West, Kate Short

Gudaga Research Program Dissemination Project (SWSLHD, Tharawal Aboriginal Corporation (TAC))

Research team: Nick Rosser, Elizabeth Comino, Darryl Wright (TAC), Holly Mack, Cathy Kaplun, Lynn Kemp, Jennifer Knight



Team of COMPaRE-PHC

Communities and Populations

This program focuses on the health and wellbeing of whole communities and populations. This research program is grounded in the evidence about the positive and negative impacts of the social determinants of health and their distribution within our society: these inequities in health, avoidable health inequalities, arise because of the circumstances in which people grow, live, work, and age, and the systems put in place to deal with illness. The conditions in which people live and die are, in turn, shaped by political, social, and economic forces. Research in this program is conducted with communities, populations and organisations, and addresses partnership, planning and policy parameters.

In 2015 we continued to undertake research, training and capacity building in complex community intervention and to engage with local intersectoral partners including local government, NSW Land and Housing Corporation, Housing NSW, Department of Family and Community Services and SWSLHD. Community STaR, our flagship training and research centre funded by Liverpool City Council, undertook a series of community activities to explore social cohesion. We continue to undertake supervision and mentoring of undergraduate and postgraduate research and practice students in the areas of health promotion, medicine and social work.

Our health impact assessment (HIA) program continues to support the undertaking of HIA locally, nationally, and internationally, including work in South America and Africa. In 2014/15 we conducted a HIA on the proposed Trans-Pacific Partnership Agreement, which helped inform debate on this controversial topic. Our Learning by Doing Courses in HIA and in Working with Locational Disadvantage helped build capacity within LHDs and the community sector.

Projects

Community 2168 research and training hub – Community STaR (SWSLHD)

Research Team: Joan Silk, Siggi Zapart, Ben Harris-Roxas

Equity Focused Health Impact Assessment – Healthy Together Victoria (Department of Health Victoria)

Research team: **Elizabeth Harris**, Katherine Hirono, Chandni Joshi, Heike Schütze, Marilyn Wise

Equity Focused Health Impact Assessment of Quit Victoria Review 2012-2015 (VicHealth)

Research team: **Vanessa Rose**, Joan Silk, Elizabeth Harris, Harrison Ng Chok, and the Community 2168 Management Committee

Equity Focused Health Impact Assessment of Quit Victoria Review 2012-2015 (VicHealth)

Research team: **Marilyn Wise**, **Katie Hirono**, Elizabeth Harris

From advocacy to action: Utilising Health Impact Assessment as a tool to realise the right to health (NHMRC PhD Scholarship)

PhD candidate: **Fiona Haigh**; Supervisors: Patricia Bazeley, Lynn Kemp

Healthy Built Environments (SWSLHD)

Research team: **Peter Sainsbury** (SWSLHD), Mark Thornell (SWSLHD), Meria Beer (SWSLHD), Evelyne de Leeuw, Fiona Haigh, Bin Jalaludin (SWSLHD), Steven Conaty (SWSLHD), Mandy Williams (SWSLHD), Elizabeth Millen (SWSLHD)

Health Impact Assessment of the Trans Pacific Partnership Agreement

Research Team: **Katie Hirono**, Fiona Haigh, Deborah Gleeson (La Trobe University), Patrick Harris, Anne Marie Thow (Sydney University)

Health in Council Integrating Health Considerations into Council Planning Processes (SWSLHD)

Research team: **Mark Thornell** (SWSLHD), Maria Beer (SWSLHD), Fiona Haigh, Katie Hirono, Karla Jaques, Tina Britton (Wollondilly Shire Council), Carolyn Whitton (Wollondilly Shire Council)

Housing and Health Partnership (Population Health, South Western Sydney Local Health District, NSW Health; Greater Western Sydney Area, Department of Family and Community Services; Housing NSW Land and Housing Corporation, Department of Finance and Services; CHETRE)

Research team: Fiona Haigh, Evelyne de Leeuw, Ben Harris-Roxas, Anthony Hartley (NSW Department of Family and Community Services), Debra Mitford (FACS), Cathryn Noble (FACS), Deborah Follers (Land and Housing Corp), Julie Churchward (FACS), Michael Van Der Lay (Housing NSW), Peter Sainsbury (SWSLHD), Mark Thornell (SWSLHD)

Learning by Doing Health Impact Assessment Training (SWSLHD)

Research team: Fiona Haigh, Katie Hirono, Karla Jaques

Learning by Doing Health Impact Assessment Evaluation

Research team: **Katie Hirono**, Fiona Haigh, Marie Beer (SWSLHD)

National appraisal of Continuous Quality Improvement initiatives in Aboriginal and Torres Strait Islander primary health care (Lowitja Institute)

Research team: **Marilyn Wise**, Sandra Angus, Elizabeth Harris, Sharon Parker

Working in locationally disadvantaged communities: learning by doing program

Research Team: Elizabeth Harris, Joan Silk, Siggi Zapart

World Health Organization Human Rights, health policy-making and programming: Case Study Report - Vermont's Human Rights-Based Approach to Universal Health Care Coverage (WHO)

Research team: Gillian MacNaughton (University of Massachusetts Boston), Fiona Haigh, Mariah McGill (Northeastern University School of Law), Konstantinos Koutsoumpas (University of Massachusetts Boston), Courtenay Sprague (University of Massachusetts Boston)

Health Justice Partnership: developing conceptual framework

Research team: Fiona Haigh, Karla Jaques, Ben Harris-Roxas, Evelyne de Leeuw

Health Impact Assessment of Western Sydney Airport Community Consultation

Research Team: Katie Hirono, Fiona Haigh, Karla Jaques, Ben Harris-Roxas, Stephanie Fletcher (SWSLHD), Cesar Calalang (SWSLHD)Elizabeth Millen (SWSLHD)

Learning by Doing Health Impact Assessment of Liverpool City Council's

Research Team: Karen Wardle (SWSLHD), Amanda Caddy (SWSLHD), Alison Dunshea (SWSLHD), Sheree Warne (SWSLHD), Andrea Alecu (SWSLHD) Fiona Haigh

Learning by Doing Health Impact Assessment of the Airds Bradbury Renewal Project: Stage three

Research Team: Karla Jaques, Katie Hirono, Fiona Haigh, Deb Follers (FACS), Tuyen Duong (FACS), Michael Thorn (Resident), Jen Rignold (resident)

Learning by Doing Health Impact Assessment of Community Transport

Research Team: Emily Mason (SWSLHD), Barry Taylor (SWSLHD), Jane Stratton (Think and Do Tank), Tracey Willow (Western Sydney Community Forum), Katie Hirono, Fiona Haigh, Karla Jaques

Learning by Doing Equity Focused Health Impact Assessment VicHealth Walk to School Programme

Research Team: Kerry O'Rourke (VicHealth), Kellye Hartman (VicHealth), Katie Hirono

Primary health care informatics stream

The Primary Care Informatics research and development program includes the cost-effective implementation of well-designed electronic health records (EHRs) and electronic decision support to achieve a patient-centred integrated primary care system that is accessible and equitable, which emphasises prevention and early detection. It emphasises good data quality management and information, clinical and corporate governance to ensure that EHR data is fit for purpose.

The Primary Care Informatics stream has successfully shepherded ILP, Masters and/or PhD students from a range of disciplines including health, computer science, information science, and business. There are currently 3 PhD students enrolled and working on machine learning supported predictive modelling, community readiness for mHealth services in rural Bangladesh, and health information systems to support evidence based care of survivors of colorectal cancer. Primary Care Informatics is also taught in the undergraduate and MPH program.

We have links with the following UNSW research centres:

- **The Kirby Institute for infection and immunity in society (NHMRC#1082336 2015-17 HIV treatment as prevention: A longitudinal assessment of population effectiveness.)**
- **UNSW Centre for Big Data Research in Health (MREII 2016: UNSW Medicine E-Research Institutional Cloud).**

While the Centre for Health Informatics has relocated to Macquarie University, we still maintain our eHealth research collaboration and activities. Professor Liaw continues to be a Chief Investigator in the NHMRC Centre for Research Excellence in eHealth (ehealth.edu.au) and is part of the renewal bid.

Overseas collaborators include:

- Professor Simon de Lusignan (University of Surrey),
- Professor Michael Kahn (University of Colorado),
- Professor Craig Kuziemsky (University of Ottawa).
- Professor Abbas Bhuiya (icdr,b Bangladesh)
- Professor Frank Sullivan (University of Toronto)

CORE PROGRAM: UNSW ELECTRONIC PRACTICE BASED RESEARCH NETWORK (ePBRN)

The current ePBRN Research team includes: Siaw-Teng Liaw (Director); Jane Taggart, Mark Harris, Hairong Yu and Gawaine Powell-Davies from CPHCE; Andrew Hayen from SPHCM; and Geoff Delaney (Cancer Services), Bin Jalaludin (Population Health) from SWSLHD; Blanca Gallego Luxan from the Centre for Health Informatics, Macquarie University.

The ePBRN is a collegial network of computerised general practices, Area/District Health Services and other public and private health providers involved with integrated care in the Fairfield health neighbourhood. The objective is to share data extracted from health information systems (HIS) to facilitate professional collegiality and coordination of health services, quality monitoring and research and development to improve health documentation, patient care and health outcomes in an integrated health neighbourhood. Coordinated from the General Practice Unit at Fairfield Hospital, the Fairfield ePBRN

connects 10 general practices, Diabetes Clinic, Community Health Centre, Emergency Department and hospital admission services in the Fairfield health neighbourhood.

The ePBRN team works closely with the University of Melbourne GRHANITE™ Informatics Unit to use and enhance the data extraction and linkage tool the underpins the e-PBRN methodology: the extraction from general practice and health services information systems and linking the patient information in a secure way that protects patient privacy. Informatics methods, developed with collaborators in UK, Canada and USA, are used to manage and analyse the large data repository which contains only pseudonymised data from primary and secondary care information systems. Participants receive a structured report on the quality of their data in comparison with the aggregate of all the services. Interactive feedback encourages practices to reflect and act on the quality of practice information in an ongoing quality improvement program.

We will continue to work with NGOs such as the National Prescribing Service MedicineInsight program to assist their planning and system development, with a focus on testing the extraction tools being considered, and the Improvement Foundation on issues of data quality.

A. ePBRN establishment phase (2010 -2015):

The ePBRN was established with funding and in kind support from UNSW Medicine, South west Sydney Local Health District (previously Sydney South West Area Health Service), the Ingham Institute for Applied Medical Research and Commonwealth government as a core research and development infrastructure and platform for primary and integrated care projects. Grants were also received from the UNSW Major Research Equipment and Infrastructure Initiative (MREII) program. During this phase the ePBRN team successfully:

1. Established, tested and validated the ePBRN data repository, infrastructure, tools and protocols including:
 - extracted, linked and managed data from the participating HIS, and validated the accuracy and precision of the results and tools used;
 - tested traditional methods, using MS SQL© and SPSS©, to manage and analyse the aggregated data and provide automated feedback reports on the data quality and clinical significance of the data trends to participating general practices;
 - used ontology-based automated methods to establish a cohort of diabetes (T2DM) patients in the Fairfield ePBRN; and
 - tested the ePBRN consent, privacy and security models and found them to be adequate to address ethical, legal and social issues in the current context, including health care policy, financing and professional practice.
2. Extended and enhanced the ePBRN infrastructure and protocols for data management and stewardship to support a primary health and integrated care where patient privacy is sacrosanct within the patient-doctor relationship, collaborating in a collegial environment in an integrated health neighbourhood (IHN). In this case, the Fairfield IHN includes Fairfield Health Services (inpatients, ambulatory care, and ED) and primary care and community health services participating in the referral and information exchange network.
 - These techniques and protocols sit on top of practice accreditation requirements for informed consent and privacy in the use of data and information in general practices and health services.
 - The technical infrastructure is continually being enhanced with refinements to the methodology and protocols as the various ePBRN research projects progress and inform the further requirements of the ePBRN program.
 - The ethical, legal and social issues in this domain are being addressed to support the development of a comprehensive program to inform and assist the researcher, teacher, manager and clinician to effectively and efficiently address the issues associated with collecting and managing routinely collected HIS data to ensure fitness for the effective and efficient coordination of large multicentre research, teaching, clinical care and quality improvement programs and networks.

3. This Fairfield IHN data repository has been, and will be, used to generate research questions and test multidisciplinary integrated care models to a level of robustness for implementation and evaluation across SW Sydney and, if indicated, across NSW. Foundational projects conducted include:
 - developmental work (such as pilot studies and testing of instruments) to refine research questions and service models for definitive experimental studies and comparative effectiveness research;
 - leading edge health informatics research with a focus on ontology-based methodologies to manage, analyse and use “big data”;
 - recruitment of clinicians and patients into these experimental studies, implement and monitor the processes, impacts and outcomes; and
 - monitor performance at the service unit level in real time, with positive implications for quality improvement and professional development.

B. ePBRN extension and expansion phase (2015 – 2020 and beyond):

A major component of the ePBRN workplan for the next 5 years is to extend and enhance the ePBRN infrastructure and methodology to support the ethical implementation and evaluation of health service and population health projects in SW Sydney as part of the SWSLHD-SWSPHN Integrated Health program.

Extension includes the development of other IHNs and establishing the ePBRN infrastructure and methodology to support service, quality improvement, evaluation and research. In the first instance, the extension program will include the Oran Park and Wollondilly integrated care projects regions of SW Sydney. The focus is on the various local adaptations and implementation of the Fairfield IHN ePBRN methodology to support the system and service integration of primary and secondary care services to meet the Integrated Health objectives.

We will extend our current research program to understand the optimal systems integration required to support and enhance multidisciplinary service integration. We have recently completed an evaluation of current Integrated Primary Care Centres. The report can be accessed at: <http://aphcri.anu.edu.au/aphcri-network/research-completed/ehealth-initiatives-and-health-care-integration-gp-super-clinics-0>.

Enhancement includes continuing the development, enhancement and validation of the use of ontology-based semantic web technologies and methods to enable greater flexibility and reliability in the automated data quality management (DQM) and fitness of data from multiple and often disparate health information systems (HIS) to support the care of and research into individuals and populations across a range of other chronic diseases, multimorbidity and polypharmacy. Activities in the enhancement phase include:

- natural language processing and machine learning on text data in EHRs such as in progress notes, letters, results and reports. This will improve the quality of data, especially the completeness. Jitendra Jonnagaddala, a PhD student, is currently leading this work with a focus on coronary artery disease.
- current automated clinical phenotyping and cohort creation algorithms will be enhanced and extended to apply the ontology-based methodology to other diseases and health issues such as asthma, COPD, CVD, mental health and cancer;
- current predictive modelling will be enhanced and extended from hospital admissions to other health service outcomes such as emergency attendance and death;
- geographical information systems incorporated into the ePBRN systems and methodology
- personalised decision support systems will be developed and supported such as the assessment of health information systems for “patients like mine” and “patients like me”;
- Safety and quality of general practice information systems assessed with a focus on sociotechnical factors affecting the successful implementation of health information systems and to relate it to the safety and quality, including adverse events related to use of information systems in general practice and primary care.
- Consumer health informatics including social media based tools used by consumers and impacts on health and health care. Training in use of online resources to answer clinical questions will also be implemented.

- Digital technology to support the training of GP registrars in the General Practice Unit, including remote video-monitoring. Experiments are being conducted to assess its utility and validity as an educational tool and in the assessment of training programs. Dr Michael Tam, Staff Specialist at the General Practice Unit, is leading this eLearning program with support from the UNSW South Western Clinical School.

At the end of this period, the ePBRN infrastructure, tools and data will be consolidated as a valid, reliable and accurate platform from which to conduct ethical and confidential clinical and other translational research and quality improvement audits. It is sustainable asset, enabling the development, implementation and evaluation of innovations in informatics-enhanced tools and models of care and integration to promote the health of individuals and populations.

Electronic decision support projects

An assessment of community readiness for mHealth in rural Bangladesh (AusAid, PhD study)

PhD Student: **Fatema Khatun**; Supervisors: Siaw-Teng Liaw, Anita Heywood (SPHCM, UNSW), Pradeep Ray (APuHC)

Healthy me to optimise the management of asthma (CRE in eHealth) (NHMRC)

Research team: **Annie Lau** (CHI), Amael Arguel (CHI), Sarah Dennis, Siaw-Teng Liaw

Mobile health in aged and disadvantaged communities (WHO Collaborating Centre (eHealth))

Research team: **Pradeep Ray** (APuHC), Raina MacIntyre (SPHCM, UNSW), Siaw-Teng Liaw

Safety of GP information systems (NHMRC Centre for Health Informatics)

Research team: **Farah Magrabi** (CHI), Michael Kidd (Flinders), Siaw-Teng Liaw

ePBRN-related projects

eHealth and integration in Integrated Primary Care Centres, including SuperClinics

Research team: **Siaw-Teng Liaw**, Andrew Knight, Joel Rhee, Michael Tam, Jane Taggart, Hairong Yu, Nicholas Zwar

Ontology-based approaches to identify patients with type 2 diabetes mellitus from electronic health records: Development and Validation (Iran Government, PhD study)

PhD Student: **Alireza Rahimi**; Supervisors: Siaw-Teng Liaw, Pradeep Ray (APuHC)

Safety of GP information systems (Centre for Health Informatics) (NHMRC)

Research team: **Farah Magrabi** (CHI), Michael Kidd (Flinders), Siaw-Teng Liaw

The accuracy of existing data extraction tools from GP Electronic Health Records (EHR) (NPS)

Research team: **Siaw-Teng Liaw**, Andrew Knight, Joel Rhee, Michael Tam, Jane Taggart, Hairong Yu, Nicholas Zwar

Using the electronic Practice Based Research Network (ePBRN) to prevent re-admission for type-2 diabetes (HCF)

Research Team: **Sarah Dennis** (University of Sydney), Mark Harris, Bin Jalaludin (SWSLHD), Siaw-Teng Liaw, Alan McDougall (SWSLHD), Rene Pennock (SWSML), Gawaine Powell Davies, Jane Taggart, Hairong Yu, Nicholas Zwar

Research and development hubs

In 2015 the Centre continued establishing a new structure: hubs for research and service development, as joint ventures with the South Western, South Eastern and Sydney Local Health Districts. This builds on experience with CHETRE, which has long been supported by the University and the Local Health District, and has provided a base for collaboration on research, capacity building and putting evidence into practice.

Each hub is supported by both the Centre and the Local Health District with a formal agreement, an advisory committee and funding from both groups. The hubs are seen as bridges between the Centre and the LHD, conducting research and evaluation that is of interest to both groups, supporting the uptake of research into practice and giving researchers direct engagement with health services. We hope that in future the Primary Health Networks can also become part of these research hubs.

SEaRCH

The South Eastern Sydney Research Collaboration Hub (SEaRCH) was formally established as a partnership with South Eastern Sydney Local Health District (SESLHD) in late 2014. The new hub in South Eastern Sydney is coordinated by Dr. Julie McDonald. It started formally in October 2014, building on several years' of close collaboration, and is currently funded to mid 2018. The purpose is to: 1) Undertake, promote and support research and evaluation that strengthens primary health care and equity; 2) Support the implementation of research evidence into practice and policy; and 3) Contribute to the development of primary health care in SESLHD.

SEaRCH is part of the organisational structure of the SESLHD and through the Director (Dr Julie McDonald) is a member of the Primary and Integrated Health Directorate executive, and a member of the Primary Health Care Partnership involving the three local health districts (SES, St Vincent's Hospital Network, and Sydney Children's Hospital Network), and the CESP HN.

The major areas of focus for 2015 were:

- A feasibility study on the use of patient activation in SESLHD which involved a scoping literature review and a retrospective record audit,
- Feasibility of establishing a longitudinal cohort of older people living in the eastern and central Sydney region, in partnership with SLHD and CESP HN. Three record linkage projects were undertaken and the findings disseminated in a peer reviewed paper and a seminar
- Undertaking a series of consultations and survey with key informants across the Primary and Integrated Health Unit and others regarding research priorities and activities. This culminated in the production of a report summarising research and evaluation activities and outputs undertaken between 2014-2016.
- Contributing to the evaluation of the SESLHD Integrated Care Strategy.

CHETRE

The Centre for Health Equity, Research and Evaluation (CHETRE) is in South West Sydney and has operated since 1998. In 2015 a new Director was appointed, Professor Evelyne de Leeuw. Evelyne brings substantial expertise in health promotion and healthy urbanism to the centre, complementing CHETRE's existing research on locational disadvantage and health impact assessment.

CHETRE has two program areas:

- Indigenous Health, which includes the Gudaga cohort study and related research
- Communities and Populations, which includes decision support incorporating health impact assessment, locational disadvantaged and health services research activities.

CHETRE's partnership with South Western Sydney Local Health District (SWSLHD) is a strong one and operates at multiple levels of both organisations. CPHCE and the Local Health District reviewed CHETRE's activities, to ensure alignment with the strategic priorities of both organisations and to identify the support needed to sustain the Centre in the longer term. This review confirmed both organisations' commitment to CHETRE and set directions for future development.

CHETRE's achievements included:

- receiving funding from the CAGES Foundation to support a new Program Leader position for the Gudaga research program and inform better health services for the community
- conducting two learning by doing capacity building programs for both working in locationally disadvantaged areas and health impact assessment
- receiving ongoing funding from Tharawal Aboriginal Medical Service and SWSLHD for the dissemination of findings from the Gudaga study to inform services and planning
- conducting a peer review of the Western Sydney Airport proposal on behalf of the Western Sydney Regional Organisation of Councils (WSROC) and commencing a health impact on the Western Sydney Airport consultation
- continuing the activities of Community STaR, the Service for Training and Research that CHETRE operates in Miller
- contributing to SWSLHD's responses on a range of land use planning and local government proposals
- contributing to teaching in the School of Public Health and Community Medicine.

HERDU

Health Equity Research and Development Unit (HERDU) is a unit of Population Health in Sydney Local Health District and a research hub of the Centre for Primary Health Care and Equity at UNSW Australia. HERDU aims to work with SLHD staff and with communities to improve the health of groups of people who do not have opportunities to receive the health care and resources they need to be as healthy as others in the population.

HERDU has implemented processes to assess the accessibility and delivery of health services through the use of Equity Focused Health Impact Assessment (EFHIA) and the STARS Equity App. This has helped to:

- Identify differences in patterns of use of services such as hospital in the home services across the LHD;
- Reinforce and prompt the inclusion of strategies to reduce inequities in SLHD policies and plans (e.g. Child Health Strategic Plan, Multicultural Services Plan, and Community Health Plan);
- Identify need for specific services such as bilingual community educators.

HERDU has also promoted models of care and policy development to prevent or reduce inequities including early childhood sustained nurse home visiting and integrated care between primary and secondary health services.

Working with government, non-government, private and community organisations to address determinants of health inequity

Together with Central and Eastern Sydney Primary Health Network (CESPHN) and SLHD Health Promotion Unit, HERDU has worked with immigrant communities through Can Get Health in Canterbury to provide training in mental health first aid and, with Rohingya

Conducting high quality research to describe health inequities and evaluate, translate evidence into practice, and monitor the impact of interventions, policies and programs on health equity

Together with CESPHN and SESLHD, HERDU has established an older persons' cohort as a subgroup of the 45 and Up Study cohort in NSW. HERDU also participated in a Universal Health Home Visiting review across several LHDs and in the conduct of baseline research for the Healthy Homes and Neighbourhoods Program.

Together with CPHCE it is developing research to evaluate an initiative to develop the organisational health literacy of hospitals and community services and new models for increasing equitable access to health services.

Developing leadership, skills and capacities to address health equity through training of SLHD staff, partner organisations and communities

HERDU has:

- Secured free access for SLHD staff to relevant MPH Summer School programs at UNSW;
- Mentored four Learning by Doing projects being undertaken by SLHD services to assess and respond to inequities in the provision and delivery of services;
- Supervised research students examining refugee and immigrant health;
- Conducted workshops



Researcher Profile

DR KAREN GARDNER



For as long as I can remember, I've been railing against injustice and inequality. I can still see the images of homeless Biafran children that flooded the television screens of the western world in the late 1960s when I was a young child. Later, studying sociology at university gave me a framework for understanding what I'd been thinking about for a long time. By the time I'd finished my undergraduate studies I was working in the community sector as a refuge worker and I flicked off honours to pursue work in the real world. As it turned out, Advanced Class Analysis, Gender and Marxist studies gave me great skills in analysis but did not provide adequate preparation for real world work and I had a lot of learning to do. I stayed in

the community sector for a time and went into policy positions in state government which kept me busy for a decade or so but it wasn't long before I craved a return to academic studies.

I went back to university to do a masters degree in population health while I was on maternity leave with my third child and worked part time as a tutor and on the evaluation of the ACT Coordinated Care Trial. That led to research work in Aboriginal health services and in community health under the direction of Dr Bev Sibthorpe and various other academics at ANU. When life circumstances intervened so I was not in a position to pursue a PhD, I decided to try a policy job in Commonwealth Health working in primary care on the design of the national quality and performance system for Divisions of General Practice. I learned a lot in those few years, but it was relatively short lived and I returned to ANU when I won a job as a Research Fellow at the newly established APHCRI in 2006. Not long after I started a PhD in Aboriginal health.

Following the completion of my PhD I established a research partnership with Dr Dan McAullay at the Aboriginal Health Council of Western Australia and we obtained funding from the Australian government to design and trial a CQI model in WA Aboriginal Community Controlled Health Services to improve the use of data as a stimulus for service redesign and improvement. That led to other work in Aboriginal health and later to an invitation from the Lowitja Institute to research and write the National CQI Framework in Aboriginal primary health care. I had the pleasure of working with terrific people at ANU on a variety of applied and interesting projects that cemented links and partnerships that I hope will endure for time to come.

At the end of 2014 with my children past the finishing line at school and the closure of APHCRI, I decided a change was on the agenda and took the unusual step of leaving home to come to UNSW to work on various projects in the health systems stream with Dr Julie McDonald and Assoc. Professor Gawaine Powell Davies. Since then, I've been working on a variety of reviews and evaluations, including one on commissioning and as lead for the UNSW contribution to the PHN Evaluation.

As is the way of academics, I am becoming a practiced grant writer and hope to win a fellowship so I can pursue my interests in health services research. I still rail at injustice and inequality and hope that my small contribution can help to strengthen the service sector and stem the rising tide.



Education and capacity building

Education and capacity building is an important part of the way in which the Centre achieves its objectives. Following a review in 2014 we committed to developing this aspect of our work through the research translation activities arising from specific projects and events designed to bring together health services and research findings and experts. We also agreed to explore opportunities to work with partners to identify areas of common interest in education and capacity building. One example of this was an agreement with GP Synergy to develop an online education program in research skills for general practice registrars.

In 2015 we undertook projects designed to develop the research capacity of practitioners and directly inform policy and service development. Our contribution to academic teaching and to external training is reported on p.40. The following programs have a particular strong focus on education and capacity building.

The electronic Practice Based Research Network (ePBRN)

The ePBRN, coordinated from the General Practice Unit at Fairfield Hospital, has evolved from a data extraction and record linkage project into a research infrastructure that underpins a series of Integrated Health Neighbourhoods to support integrated health services research. These Neighbourhoods comprise a "medical home" and its referral network. The most developed of these, the Fairfield Neighbourhood consists of the Fairfield Hospital and its ambulatory care and outreach services, community health services, primary care and general practice services. This has been used to develop a predictive model for admission of patients with diabetes in the Fairfield Network. Similar infrastructure is being used in the Wollondilly Integrated Care project led by the SWSLHD and SWSPHN as part of the Wollondilly Health Alliance.

This research infrastructure allows for longitudinal studies of integrated health care, with the Integrated Health Neighbourhood as the focus of integration across the primary-secondary care continuum and the LHD/ PHN seen as a network of Integrated Health Neighbourhoods. This will enable comparative effectiveness research across Integrated Health Neighbourhoods and also across LHDs.

The ePBRN then becomes a platform for health services research and research training with a focus on the use of routinely collected electronic data in electronic health records. With high quality data and a sound understanding of multi-method research, researchers from primary and secondary care will be able to conduct robust cohort studies, clinical trials, quality improvement audits and comparative effectiveness research cost-efficiently.

This data quality and analytics research program is one of the core activities that underpin the PHC Informatics Stream of the CPHCE.

A number of PhD students, academic GP registrars and ILP students have benefited from the ePBRN infrastructure. The principles underlying the ePBRN have been taught as part of undergraduate and continuing professional development programs e.g. Grand Rounds and GP seminars.

Centre for Obesity Management and Prevention Research Excellence in Primary Health Care (COMPARE-PHC)

Like other APHCRI-funded Centres of Research Excellence, COMPARE-PHC has a role in building capacity in its particular area of primary health care research. In 2015 COMPARE-PHC funded three postdoctoral fellows and three PhD scholarships as well as supporting a range of other students at Doctoral, Masters, Honours and undergraduate levels. These fellows and students were located across the COMPARE-PHC sites: CPHCE, Deakin University, UTS University of Adelaide and Inala Indigenous Health Service. During 2015, three journal articles were published with postdoctoral fellows, two with the postdoctoral fellows as first authors. COMPARE-PHC organised a range of activities that aimed to build capacity beyond academia. A number of these events included international experts. Professor Susan Jebb from Oxford University talked about food and nutrition policy and effective interventions in general practice for weight management, public seminars and targeted workshops.

COMPARE-PHC continued to develop and maintain its website and e-newsletter, both of which had been established in 2013 to disseminate information to researchers, policy makers, clinicians and others interested in the prevention and management of obesity by PHC.

Learning by Doing – building capacity to put equity into practice.

HERDU has run a learning by Doing Program for SLHD staff. This involved 2 days of training plus ongoing mentoring by HERDU staff on the equity related project the team is working on. There are three projects currently underway:

- Exploring access to A&E services by newly arrived refugee groups.
- Examining equity if access to chronic disease programs
- Using community Workers to support patients released home with heart failure

Mentoring and supervision

Mentoring and supervision include the work of the General Practice Unit at Fairfield in training registrars in the GP training program, supervision for Masters and PhD candidates; and providing research experience for Independent Learning Project and other students from the Faculty of Medicine.





FELLOWSHIPS, SCHOLARSHIPS, AND AWARDS

In 2015, 3 staff in receipt of research fellowships and 2 staff were in receipt of PhD scholarships. The Centre also awarded top up scholarships to those on PhD scholarships of less than \$25,000 per annum. Other higher degree candidates are listed later in the report.

Fellowships

Harris, Mark NHMRC Senior Principal Research Fellowship. 2011-2015

Lloyd, Jane NHMRC Training Fellowship. Addressing variations in the implementation of guidelines for preventive activities in general practice. 2011-2016

Scholarships

***Nouhad El Haddad**. COMPARE-PHC Postgraduate Research Scholarship. 2013-2016

***Fiona Haigh**. NHMRC Postgraduate Research Scholarship. 2013-2015

*Also received CPHCE top up for lower paying PhD scholarships

Awards

Nicholas Zwar Australian Association for Academic Primary Care (AAAPC) Charles Bridges-Webb Medal of 2015

Mark Harris Australian Academy of Health and Medical Sciences (AAHMS) Fellowship 2015

Karen Gardner BUPA 2015 Emerging Health Researcher Finalist

Gudaga Program Leader The CAGES Foundation (2015-2018)



Prof Nick Zwar receiving the Charles Bridges-Webb Medal of 2015



TEACHING

Our teaching within the Faculty of Medicine, elsewhere in UNSW and for other universities and organizations allows us to share current research with students and enables staff to develop and maintain their teaching experience. Below is a summary of teaching by Centre staff in 2015.

Undergraduate Medicine at UNSW

Subject	Lecturer(s)
Foundation Course	Mark Harris, Elizabeth Harris, Katherine Hirono
Independent Learning Project – student placement	Mark Harris (supervisor)
Phase 1 Clinical Teaching	Siaw-Teng Liaw, Michael Tam, Andrew Knight(tutors)
Phase 2 Society and Health	Elizabeth Harris, Andrew Knight, Siaw-Teng Liaw, Mark Harris, Michael Tam, Nicholas Zwar (lecturers)
Phase 3 Primary Care	Joel Rhee (course convenor), Andrew Knight, Siaw-Teng Liaw, Tim Shortus, Michael Tam, Nicholas Zwar (lecturers)

Postgraduate Medicine at UNSW

Master of Public Health Program

a) MPH Electives run through CPHCE

Subject	Lecturer(s)
Health Impact Assessment	Fiona Haigh (course co-ordinator), Ben Cave, Katherine Hirono (co-convenor), Marilyn Wise (lecturers)
Inequalities in Health	Elizabeth Harris, Jane Lloyd (course co-ordinator), Evelyne de Leeuw, Katherine Hirono, Jude Page, Peter Sainsbury, Hyun Song, Marilyn Wise(lecturers),
Prevention and management of chronic disease	Mark Harris, Heike Schütze (coordinators), Elizabeth Denney-Wilson, Sarah Dennis, Mary-Beth MacIsaac, Catherine Spooner, Jane Taggart (lecturers)
Principles and Practice of Primary Health Care Services in the Community	Julie McDonald (course co-ordinators); Mark Harris, Jane Lloyd

b) Contributions to other MPH Courses

Subject	Lecturer(s)
Introduction to Public Health	Elizabeth Harris, Patrick Harris, Katherine Hirono
Development human rights and health	Fiona Haigh
Foundations in Public Health	Jane Lloyd (tutor)
Principals of Primary Health Care	Heike Schütze

Other Undergraduate and Graduate Teaching

Subject	Lecturer(s)
Work effectively with Aboriginal and Torres Strait Islander peoples	Heike Schütze (Coordinator and lecturer)

Other Teaching

Subject	Lecturer(s)
Supervision of GP Registrars in Practice for GP Synergy	Siaw-Teng Liaw, Andrew Knight, Joel Rhee, Michael Tam, Nicholas Zwar (supervisors)

Short Courses and Workshops

Course	Lecturer(s)
Improving access to quality health services to improve health equity: learning by Doing. Two-day intensive workshop + mentoring.	Elizabeth Harris, Marilyn Wise, Heike Schütze, Telphia-Leanne Joseph
Health Impact Assessment Learning by Doing Training	Fiona Haigh and Katie Hirono (coordinators and lecturers), Elizabeth Harris (lecturer)

PhD Research Students

The Centre provides many opportunities for research students. In 2015 a total of 10 PhD students were enrolled at the Centre (including a number of CPHCE staff members). In addition, CPHCE staff co-supervised a number of students from other Universities.

Name	Thesis Title	Supervisor/ Co-supervisor	Expected Completion
Shona Dutton	Quantifying physical activity behaviour in a primary care setting - an instrument for measuring physical activity change in general practice	Nicholas Zwar, Sarah Dennis, Mark Harris	Submitted 2015
* Nouhad El Haddad	Ethnicity and health literacy for weight management in non-English speaking migrants attending primary health care	Mark Harris, Elizabeth Denney-Wilson, Nighat Faruqi, Catherine Spooner	2016
* Fiona Haigh	From advocacy to action: Utilising Health Impact Assessment as a tool to realise the right to health.	Patricia Bazeley, Lynn Kemp	2016
Fatema Khatun	An assessment of community readiness for mHealth in rural Bangladesh	Siaw-Teng Liaw, Anita Heywood, Pradeep Ray	Submitted 2015
Janani Pinidiyapathirage	Gestational diabetes in Sri Lankan women	Rohan Jaya-suriya, Vanessa Rose	2015
Alireza Rahimi	Ontology-based approaches to identify patients with type 2 diabetes mellitus from electronic health records: development and validation	Siaw-Teng Liaw, Pradeep Ray	2015
Katherine Short	The variability in vulnerable children's communication development over time and the impact of treatment.	Lynn Kemp, Patricia Eadie, Jenny Knight	2020
Anna Williams	Integrating chronic illness self-management plans with primary care management: a clarification model of patient-provider care congruence	Mark Harris, Patricia Bazeley	2015
Sue Woolfenden	Inequity in Developmental Vulnerability, its determinants and the role of access to prevention and early intervention services	Lynn Kemp, Valsa Eapen, Katrina Williams	2017
* Siggi Zapart	Effective sustained nurse home visiting: who benefits, why and how?	Lynn Kemp, Jenny Knight	Submitted 2015

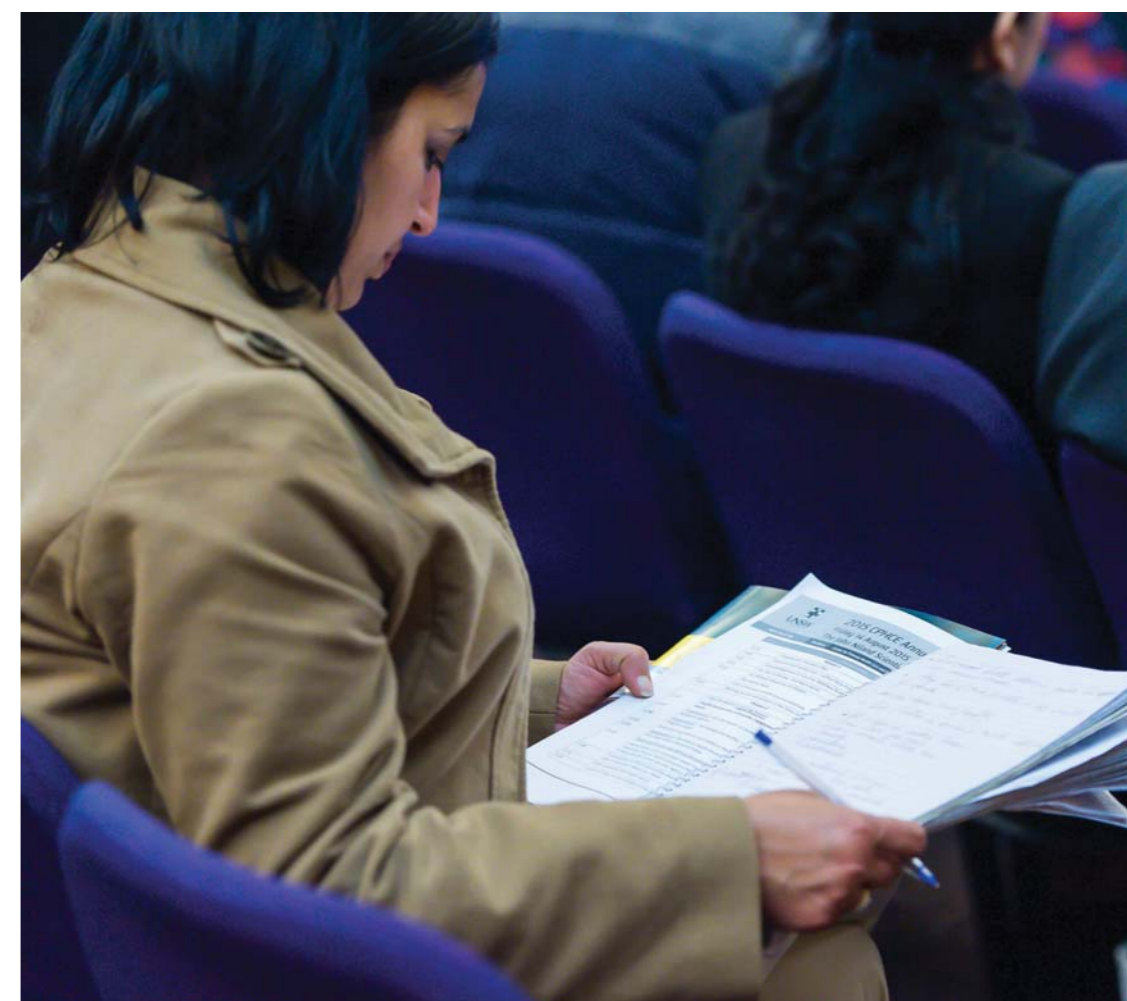
* CPHCE Staff enrolled in post-graduate study

ILP Research Students

Name	Thesis Title	Supervisor/ Co-supervisor	Completion
Ranawaka Sandali De Alwis	The impact of sociodemographic factors on change in weight, diet and physical activity in obese patients	Mark Harris Catherine Spooner	2015

Masters Research Students

Name	Thesis Title	Supervisor/ Co-supervisor	Completion
Dylan Appelqvist	Managing obesity and diabetes in patients with low health literacy	Mark Harris Catherine Spooner	2015



PhD Student Profile

DR SANJYOT VAGHOLKAR (AWARDED 2015)



One year on from completion of my PhD, it is both satisfying and a relief to be able to reflect on the whole experience. Undertaking a PhD on a part-time basis means you devote a significant chunk of your life to it – in my case almost seven years. Things happen along the way, both to you and the people around you, and yet you still seem to be enrolled and being asked the perennial question “How is your PhD going?” I am thoroughly enjoying not having to answer that question any longer.

I came to a PhD via a career in general practice. My earliest foray into teaching and research was via an academic registrar post.

That experience allowed me to see the possibility of developing another set of skills apart from being a clinician and kindled an interest in pursuing academic work. Following some years of involvement in general practice teaching, I found myself working at the GP Unit at Fairfield Hospital, one of CPHCE's research hubs. It was there that I had the opportunity to become involved in primary care research in a substantial way.

After testing the waters for a while by contributing to various projects, I found myself enrolling in a higher degree at UNSW, twenty years after graduating in medicine from the same institution. What tipped me over that line and decide to commit to a PhD? I had never really envisaged doing a PhD early in my career and then slowly after working in academic departments the idea started to rub off on me, probably helped by subtle and sometimes not so subtle hints from some of my senior colleagues. I think it was partly almost a challenge to myself, and partly that I wanted to have choices in the future about what I could do in general practice.

The topic of my thesis was absolute cardiovascular risk assessment and its impact on prescribing in general practice. One of the things that was important to me in undertaking a PhD was that the topic needed to be important and relevant to clinical general practice. Cardiovascular risk and medications are bread and butter general practice work. I deal with it all the time as a clinician, so investigating something that could contribute in some small way to improving our understanding of this topic seemed a really useful thing. My experience has been that when I talk with GPs they get the topic and they can see how it relates to their practice. This really reassures me that I wasn't just living in some ivory tower for seven years.

I was lucky to receive a RACGP grant that allowed me to conduct a pilot study for the first stage of my thesis, and then was part of the team at CPHCE that was successful in obtaining an NHMRC primary care grant to conduct a RCT exploring absolute cardiovascular risk assessment. It was data from this trial that provided me with the core material of my analysis. Conducting the pilot study and being an investigator on an RCT gave me invaluable experience in how to do research. My work involved a combination of quantitative and qualitative methods, and just like medicine, research has its own language and processes. Having now completed a PhD, I guess I feel like I get the language a bit better.

Research is rarely about an individual and I would never have been able to complete this PhD without the guidance of numerous people. I was fortunate to have very skilled and supportive supervisors as well as the opportunity to work with a great research team at CPHCE. You often hear people say they hated their research topic by the time they got to the end. I think one of the few advantages of completing a PhD part-time while working full-time (apart from not being poor) is that you are never truly immersed in the work and so you probably don't get time to be sick of your topic. I did get a small taste of immersion when I took a year out from employment to write up my thesis. I think I can honestly say I wrote most of my thesis working at home in my pyjamas.

Having taken the risk of leaving my job, I have been fortunate to land on my feet post-PhD. Earlier this year I took up the position of Deputy Director of Primary Care and Clinical Associate Professor at Macquarie University Hospital. We are trying to expand the role of the GP Clinic here and develop innovative models of integrated care with specialist services. The Faculty of Medicine and Health Sciences at the university sees the three pillars of clinical work, teaching and research as integral in the provision of health care and my role here is to help develop this in the primary care setting. I'm still finding my feet to some extent but it is an exciting opportunity. I certainly hope to make use of the skills I have acquired in research. I guess I would say that although the PhD is complete, the future is a work in progress.



Dr Sanjyot Vagholkar was awarded her PhD degree at UNSW in 2015



KNOWLEDGE EXCHANGE

Gudaga Van Donation by Macarthur Automotive

Thursday 11th June 2015, Campbelltown

Working together with the local community has been key to the success of the Gudaga Research Program and the team continue to foster their ongoing partnership with the Tharawal community and Tharawal Aboriginal Corporation. The Gudaga team also have a local business partnership with Macarthur Automotive in Campbelltown who very generously donated a van to the Gudaga Programs, which has been of great assistance in carrying out home visits and child assessments in schools by project staff who sometimes cover long distances across the Macarthur region. The van has storage capabilities for equipment used for weighing and measuring children, and assists with transporting families. The van also acts as a promotional vehicle by keeping the Gudaga Program visible in the community. Uncle Ivan Wellington, an Elder in the Tharawal community, performed a traditional Smoking Ceremony for the van in June 2015.



2015 CPHCE Annual Forum

Friday 14 August 2015, John Niland Scientia Building, UNSW Australia

The CPHCE Annual Forum is an important calendar event where we showcase our current research and recognise organisations and individuals with whom we have worked and have assisted us in our research. It is also a networking opportunity where our staff can meet and socialise with staff from our partner organisations. Over 120 staff, research partners and colleagues from interstate attended the 2015 Annual Forum.



Ian Webster Health for all Oration

Ms Leanne Wells, CEO of Consumers Health Forum



Individual Partnership Award

Ms Tish Bruce



Organisational Partnership Award

Liverpool City Council



Primary Health Network Partnership Award

Central and Eastern Sydney Primary Health Network



Primary Health Network Partnership Award

South Western Sydney Primary Health Network



Health Impact Assessment Partnership Award 2015

Healthy Together Victoria

Gudaga celebrates the first decade

Wednesday 28th October 2015, Tharawal Aboriginal Corporation (TAC)

The Gudaga team have been working with the Aboriginal community of the Macarthur region of South Western Sydney for 10 years. The Gudaga Study (meaning healthy baby in the local Dharawal language) is a longitudinal cohort study that started in 2005, which aims to address the gap in health, development and health service use of Aboriginal families and children in disadvantaged urban communities. It started by monitoring, over a three year period, the health status of 149 Aboriginal babies born at Campbelltown hospital. The study has continued on and expanded into Gudaga II, III and Gudaga goes to School with the children now 9 years of age.

The birthday event ran in two parts with the first hour aimed at project stakeholders and networks. It showcased short presentations of Gudaga's journey, findings and community impact, along with future Gudaga plans for Gudaga Goes to High School. A birthday cake was cut to celebrate the milestone by TAC CEO Mr Darryl Wright and Gudaga Program Leaders A/Prof Elizabeth Comino and Prof Lynn Kemp.

The second part of the festivities began with children arriving after school and starting the party. The children received healthy snacks of fruit and water and a gift bag to begin the activities. Aboriginal games and activities were run by Tharawal's Family and Communities personnel and Gudaga staff. A raffle was also conducted for the children with prizes including an iPad, fruit and vegetable boxes, and basketballs. The prizes were donated by our research partner TAC. The families, staff and event attendees enjoyed a delicious and healthy dinner. The evening concluded with another birthday cake, which was cut by Mr Wright and Gudaga children.



Guests joined a tour around Tharawal Aboriginal Corporation after the birthday celebration



A/Prof Elizabeth Comino(middle) and Mr Darryl Wright (right) cutting the birthday cake for Gudaga

Researcher Profile

DR JEAN-FREDERIC LEVESQUE, CEO OF THE BUREAU OF HEALTH INFORMATION (BHI)



Clinician, decision-maker, academic. Canadian expat and ice hockey-playing father of two teenagers, Jean-Frederic Levesque leads a busy life as the 'boundary spanning' Chief Executive Officer of the Bureau of Health Information. Somehow he graciously found the time to sit down with me for an interview to talk about his impressive career journey, work and family life in Australia, and peculiar Sydney winters.

It would be an understatement to call Jean-Frederic Levesque a 'multi-tasker'. As Chief Executive Officer of the Bureau of Health Information, Jean-Frederic is constantly juggling multiple roles:

leading a team of 35 employees, providing research expertise to various stakeholders, meeting with government officials, managing finances, doing interviews with the media... the list goes on. On top of this, he is a researcher on various projects – collaborating with colleagues from both Australia and his native Canada – and continues to publish steadily. "I've always considered myself a 'boundary spanner', someone that has got his feet in both worlds of academic and decision-making at the same time."

For Jean-Frederic, getting to this point in his career has taken a series of fortuitous collaborations in research and academia. With the original plan of becoming a full-time physician, his foray into research is something he says he "kind of fell into" through his medical studies. Upon finishing a clinically-focused Master's project on TB screening in refugees, he was encouraged to continue his studies onto a PhD by his professors at the University of Montreal, who noticed his potential for an academic career. By the time Jean-Frederic submitted his doctoral thesis, looking at inequalities in access to care in South India, he had also completed a clinical specialisation in community medicine and was already working full-time. "All of this was a really long university process, really," he recalls amusedly, "I started university in 1992 and finished being a student in 2007."

This journey did generate some contributions he is particularly proud of. He published in 2013 a conceptual framework on access to care which has since been widely cited and used internationally. "I can see many people using the framework in both academic work as well as in guiding healthcare systems to try to address access issues for vulnerable people. That has always been a very important issue for me."

The next ten years after graduation saw his career progressing from a regional public health specialist to the Deputy Commissioner for the province of Quebec, and finally to Scientific Director at the National Institute of Public Health. At the same time, his academic career was taking off, with him also taking on the role of Associate Clinical Professor at the University of Montreal's Department of Family Medicine. In 2011, Jean-Frederic was invited to join a Melbourne-based research group to help evaluate primary care reform models across Canada, United States, and Australia. This work led to an offer to spend a sabbatical at the University of Melbourne in their academic visitor program. "When I finished the academic visitor program, I went back to Canada for a few months and then I was quickly called to see if I would be interested in leading the Bureau of Health Information." The time that Jean-Frederic and his family had spent in Melbourne played a big role in his decision. "We decided that as a family and it would make sense to live this adventure together. So we decided to accept to come and do this."

Fast forward to 2016, Jean-Frederic and his family have happily settled in Sydney. He and his wife have two teenagers, both of whom have adapted very well to Australian life: his son has taken up surfing and is part of a life-saving club, and his daughter enjoys horseback riding. But they have also kept some of the more Canadian ways. Jean-Frederic and his son are still playing ice hockey in Sydney, and he tells me that his family is still nostalgic for the English-French bilingualism of Montreal. "And we're certainly missing the snow, the cold, and skiing! But overall Sydney is a lovely place to be and my kids have had a very good transition in school as well." Any surprises about moving to Australia? "The fact that during winter, it's cold inside while the weather is warm outside is something that we're constantly reminding people back home of," he laughs, "They don't really get it." True. It's definitely not the kind of winter most us from Canada – let alone arctic Montreal – could relate to.

At his work, Jean-Frederic is known as somewhat of "a quiet leader, somebody who would not speak out of turn", with a deep-rooted sense of politeness, a stereotypical (but admittedly true) Canadian trait. This, he says, has proven to be a challenge for him in some of his roles in Australia. "Such a level of politeness sometimes prevents people from really understanding if you're in agreement or not with what they're saying. There is a certain directness in Australia that I have to adapt to, so that I can also be more direct, and therefore, more easily understood by staff members and by stakeholders I interact with." He pauses. Then, in his typical Canadian fashion, he is sure to add: "But it's not to say that one has got an advantage over the other, really".

(Written by: Hyun Song, PhD student at the Centre for Primary Health Care and Equity)

Staff Membership of External Committees

Committee	Name
Academic Primary Health Care Centre Green Square	Terry Findlay
ACI Chronic Care Network Executive Committee	Julie McDonald
American Medical Informatics Association (AMIA) International Affairs Committee	Siaw-Teng Liaw
American Medical Informatics Association (AMIA) Ethics Committee	Siaw-Teng Liaw
Asia Pacific HIA Network	Fiona Haigh
Australia Primary Health Care Research Institute Knowledge Exchange Committee	Nicholas Zwar
Australian Family Physician Editorial Board	Nicholas Zwar
Australian Primary Care Research Network Management Committee (Chair)	Nicholas Zwar
Australasian Association for Academic Primary Care (President)	Nicholas Zwar
Australasian College of Health Informatics Council	Siaw-Teng Liaw
Baker IDI NHMRC Diabetes Secondary Prevention Guideline Advisory Group	Mark Harris
Certified Health Informatician Australasia Board	Siaw-Teng Liaw
Coalition of Research into Aboriginal Health	Elizabeth Harris
Department of Veterans Affairs: Coordinated Veterans Care Advisory Committee	Mark Harris
Early Years Research Group at the Ingham Institute (Principal Investigator)	Holly Mack
eHealth Informatics Journal Editorial Board	Siaw-Teng Liaw
GP Synergy Board Director	Siaw-Teng Liaw
Heart Foundation Prevention in Practice Advisory Group	Gawaine Powell Davies
HeartSmart Committee Warwick Farm	Joan Silk

Committee	Name
Health Informatics Society of Australia (Board Director)	Siaw-Teng Liaw
Health Informatics Conference (HIC) Scientific Committee	Siaw-Teng Liaw
Ingham Health Research Institute Scientific Advisory Committee	Evelyne de Leeuw, Siaw-Teng Liaw
Inner Western Sydney Medicare Local Board	Mark Harris
Informatics in Primary Care, Section Editor	Siaw-Teng Liaw
International Medical Informatics Association Academy Taskforce	Siaw-Teng Liaw
International Primary Care Respiratory Group Education Committee	Nicholas Zwar
International Journal of Family Medicine Editorial Board	Siaw-Teng Liaw
International Journal of Medical Informatics Editorial Board	Siaw-Teng Liaw
International Union for Health Promotion and Education (IUHPE). Global Working Group on Health Impact Assessment	Elizabeth Harris
Liverpool Community Drug Action Team	Joan Silk
Lung Foundation COPD-X Evaluation Committee	Nicholas Zwar
Lung Foundation COPD-X Concise Guide for Primary Care Writing Committee	Nicholas Zwar
Medical Journal of Australia Content Review Committee	Mark Harris
National Diabetes Data Working Group	Mark Harris
National Heart Foundation Clinical Issues Committee	Mark Harris, Siaw-Teng Liaw
National Heart Foundation, National Blood Pressure & Vascular Disease Advisory Committee	Nicholas Zwar
NHMRC Prevention and Community Health Committee	Mark Harris
NHMRC Mental Health and Parenting Working Committee	Mark Harris
National Prescribing Service Diagnostics Advisory Committee	Mark Harris
NSW Health Acute Care Taskforce	Siaw-Teng Liaw
NSW Health Tobacco Senior Officers' Steering Group	Nicholas Zwar
Primary Health Care Advisory Committee - National Health Performance Authority	Terry Findlay



Committee	Name
Primary Health Care Research, Evaluation and Development (PHCRED) Strategy Advisory Committee	Mark Harris
Primary Health Care Research Information Service Strategic Advisory Group	Gawaine Powell Davies
Primary health Stakeholders Meeting – Agency for Clinical Innovation	Terry Findlay
RACGP National Research Ethics Committee (Chair)	Siaw-Teng Liaw
RACGP National Standing Committee Research	Siaw-Teng Liaw
RACGP Quality Committee	Mark Harris
RACGP Red Book Task Force	Mark Harris
RACGP Smoking Cessation Guidelines Content Advisory Group (Chair)	Nicholas Zwar
RACGP SNAPW guide working group	Mark Harris(chair), Nicholas Zwar
SE Sydney Medicare Local Board	Nicholas Zwar
SE Sydney Medicare Local Map of Medicine project steering group	Nicholas Zwar
SE Sydney Medicare Local Needs Assessment Steering Group (Chair)	Nicholas Zwar
SE Sydney Primary Health Care Partnership Committee	Terry Findlay
Primary Health Partnership Committee	Terry Findlay Julie McDonald
SESLHD/CPHCE Research Hub Operations Committee	Mark Harris Terry Findlay Julie McDonald
SESLHD Integrated Care Strategy Steering Committee	Julie McDonald
SWSLHD Population Health Division Executive	Evelyne de Leeuw
SWSLHD Research & Teaching Committee	Siaw-Teng Liaw
SWSLHD-SWSML Integrated Health Committee member	Siaw-Teng Liaw
SWSML Information Technology Committee	Siaw-Teng Liaw
SWSML Universities Committee	Siaw-Teng Liaw
Waran Warin Steering Committee	Elizabeth Comino





Partners and Affiliates

We collaborate with many different individuals and organisations. Some of our main partners in 2015 are listed below.

UNSW

- Biomedical Systems Research Laboratory, School of Electrical Engineering and Telecommunications
- Faculty of the Built Environment
- Faculty of Medicine Lifestyle Clinic
- Institute for Health Innovation: Centre for Clinical Governance and Centre for Health Informatics
- School of Business (through Asia Pacific Ubiquitous Health Research Centre)
- School of Public Health and Community Medicine
- Social Policy Research Centre

Health Departments

- Australian Government Department of Health and Ageing
- NSW Health
- NSW Kids and Families

NSW Ministry of Health Centre for Epidemiology & Evidence

- Tasmanian Department of Health and Human Services
- WA Health

Health Services

- Hunter New England Local Health District
- La Perouse Aboriginal Community Controlled Health Service
- Inala Aboriginal Health Service
- South Eastern Sydney Local Health District
- South Western Sydney Local Health District
- Sydney Local Health District
- Tharawal Aboriginal Corporation
- Western Sydney Aboriginal Medical Service
- Gandangarra Aboriginal Health Services

Other Government Departments

- NSW Department of Family and Community Services
- NSW Department of Education and Communities
- Victorian Department of Education and Early Childhood Development

Local Government

- Canterbury City Council
- Liverpool City Council
- Wollondilly Shire Council

Australian Universities and Research Institutes

- Australian National University:
- Australian Primary Health Care Research Institute
- National Centre for Epidemiology and Population Health
- University of Sydney:
 - Broken Hill University Department of Rural Health
 - Faculty of Health Sciences
 - Northern Rivers University Department of Rural Health
- Bond University
- Charles Sturt University
- Curtin University
- Flinders University
- The George Institute for Global Health
- Ingham Institute for Applied Medical Research
- James Cook University
- LaTrobe University
- Lowitja Institute
- Macquarie University
- Royal Children's Hospital Centre for Community Child Health (CCCH), Murdoch Children's Research Institute, University of Melbourne
- School of Rural Health; Southern Academic Primary Care Research Unit (SAPCRU), Monash University
- Southgate Institute for Health, Society and Equity, Flinders University
- University of Adelaide
- University of Melbourne
- University of Newcastle
- University of Queensland

- University of Technology Sydney
- University of Western Sydney
- Woolcock Institute of Medical Research

Medicare Locals and Associated Organisations (Medicare Locals ceased operations on 30 June 2015, replaced by Primary Health Networks)

National

- Australian Medicare Local Association

NSW

- Eastern Sydney Medicare Local
- Far West Medicare Local
- GP New South Wales
- Inner West Sydney Medicare Local
- Hunter Medicare Local
- Murrumbidgee Medicare Local
- Nepean Blue Mountains Medicare Local
- South Eastern Sydney Medicare Local
- South Western Sydney Medicare Local
- Western Sydney Medicare Local

South Australia

- Central Adelaide and Hills Medicare Local (CAHML)

Victoria

- The Northern Melbourne Medicare Local (NMML)
- Barwon Medicare Local



Non-Government Organisations

- Agency for Clinical Innovation (ACI)
- Ashcroft High School
- Australian National Preventive Health Agency
- Australian Practice Managers' Association
- Australian Research Alliance for Children and Youth
- Benevolent Society
- Beyond Blue
- Bupa Health Foundation
- Bureau for Health Information (BHI)
- Cabramatta Community Centre
- Chronic Illness Alliance
- Community 2168
- Ernst and Young
- Fairfield Migrant Resource Centre
- Gandangara Aboriginal Health Service
- Good Beginnings Australia
- GP Synergy
- Hepatitis NSW
- Karitane
- Kurrangula Aboriginal Community
- La Perouse/ Botany Bay Aboriginal Corporation
- Liverpool Migrant Resource Centre
- Maules Creek Community Council
- Miller Art and Fact
- National Aboriginal Community Controlled Health Organisation
- National Prescribing Service
- NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STaRTTS)
- NSW Users and AIDS Association
- Nutrition Australia
- National Aboriginal Community Controlled Health Organisation
- Royal Australian College of General Practitioners
- South West Youth Peer Education
- Warwick Farm Neighbourhood Centre

International

- Alberta Health Services
- Birkbeck College, London
- CDC Chronic Disease Prevention
- China-Australia health and HIV/AIDS facility (CAHAF)
- Department of Family Medicine, University of Ottawa
- Edinburgh University
- Gesundheit Osterreich GmbH
- Institut National de Santé Publique du Québec
- International SOS
- International Union for Health Promotion and Education
- Kings College London
- Kurume University
- Maastricht University
- Manchester University
- McGill University
- National Primary Care Research and Development Centre, University of Manchester, UK
- Robert Wood Johnson Medical School, New Jersey
- Seoul National University
- The Nuffield Trust
- University of British Columbia
- University of California (San Francisco)
- University of Central Lancashire
- University of Colorado
- University of Otago
- University of Ottawa
- University of Surrey
- University of Sussex
- University of Washington
- Victoria University (Wellington, New Zealand)

Visiting Academics



Dr Mylaine Breton
Université de Sherbrooke,
Canada



Prof Sarah Cowley
Dame Commander of the Order of
the British Empire (DBE), UK



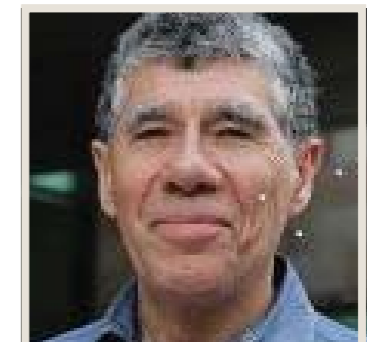
Dr John Hussey
General practitioner,
consultant of Liverpool
Community Health, UK



Prof Susan Jebb
University of Oxford, UK



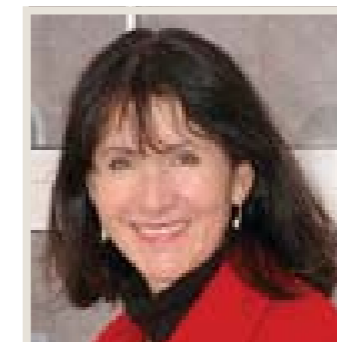
A/Prof Doug Klein
Department of Family
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Prof Dennis McDermott
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Mr Dave Sjoberg
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Haggerty**
McGill University, Canada



**Associate Professor
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Universiti Putra, Malaysia



PUBLICATIONS

Book Chapters

1. de Leeuw EJ, Palmer N, Spanswick L. City fact sheets: WHO European Healthy Cities Network. Copenhagen: World Health Organization. 2015/05/01

Report

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7. Grace R, and Gudaga team. Introducing Gudaga. *European Early Childhood Education Research Association (EECERA) 25th Conference*. September 7-10th 2015, Barcelona Spain.
8. Grace R, Kemp L, Elcombe E, Knight J, Comino E. Bulundidi Gudaga: The impact of epidemiological and intervention research on maternal and child health service policy and program delivery for Australian Aboriginal families in an urban community and beyond. *Society for Prevention Research, 23rd Annual Meeting: Integrating Prevention Science and Public Policy*. 26th -29th May 2015, Washington DC, USA.
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Conference Presentations

1. Broe GA, Chalkley S, Daylight G, Delbaere K, Draper B, Mack HA, Radford K (2015). Parenting, childhood adversity and late-life outcomes in urban Aboriginal Australians. *Australian Association of Gerontology (AAG) 48th Annual Conference*, 4-6 November; Alice Springs, Australia.
2. Comino, E, Knight J, Wright D, & Grace R. Describing the developmental progress of Aboriginal preschool children in an urban environment: the Gudaga Study. *Population Health Congress 2015*, September 6-9th 2015, Hobart, Australia.

12. Harris M, Faruqi N, Stocks N, Hermiz O, Powell K, El-Haddad N, et al., editors. Limitations experienced by GPs and nurses relating to health literacy and obesity management in primary health services (oral presentation). 9th Health Services and Policy Research Conference; 2015; Melbourne.
13. Harris M, Faruqi N, Stocks N, Hermiz O, Powell K, Spooner C, et al., editors. Managing health literacy for weight loss in primary health care. 2015 Primary Health Care Research Conference; 2015; Adelaide.
14. Harris MF, Faruqi N, Stocks N, Hermiz O, Spooner C, El-Haddad N. Obesity management in middle age adults with low health literacy in general practice: the better weight management in general practice trial (poster). Australian and New Zealand Obesity Society Annual Scientific Meeting. Melbourne 2015.
15. Harris MF. What kills men and why? Australian Doctor Men's Health seminar. 21 February 2015, Sydney.
16. Harris MF. Health literacy in the prevention and management of chronic disease in primary Health Care. Health Literacy Research to Practice Forum, Prince of Wales Hospital. March 13 2015, Sydney.
17. Harris-Roxas BF, editor Concepts, évolution de la démarche à l'international et évaluation des evaluation d'impact sur la santé. Les journées de la prévention et de la santé publique 2015; 2015/08//; Centre universitaire des Saints - Pères, Paris: Institut national de prévention et d'éducation pour la santé (INPES).
18. Islam MF, Comino E, Harris M. Factors associated with preparation and review of general practice management plans in people living with diabetes: a linkage study. Primary Health Care Research Conference, Adelaide, 2015. Adelaide.
19. Knight J & Kaplun C, Grace R, Docket S, Perry R, West N, Anderson C, Comino E & Kemp L. "Sometimes I don't need help": Aboriginal children's self-identity in transition to school. European Early Childhood Education Research Association (EECERA) 25th Conference. 7-10th September 2015, Barcelona Spain.
20. Lavey L, Spooner C, Mukuka C, editors. Research Administration Managers and Research Project Managers – playing a key role in establishing and managing multi-institutional collaborations. The 17th Australasian Research Management Society 2015 Conference "Research Management in a Global Context"; 2015; Singapore.
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26. Schutze H, Harris E, Jackson Pulver L, Harris M. Unannounced standardised patients - Improving primary care to Aboriginal and Torres Strait Islander peoples by giving them a voice. Population Health Congress 2015. Hobart.
27. Short K, Knight J, Eadie P, Descallar J, Kemp L, Comino E. The Gudaga Study: Longitudinal development of vocabulary in Australian Aboriginal children. Australasian Human Development Association. 8-11th July 2015, Wellington, New Zealand.
28. Spooner C, Lavey L, Mukuka C, editors. Lessons from establishing and managing multi-institution centres of research excellence. 2015 Primary Health Care Research Conference; 2015; Adelaide.
29. Spooner C, Laws R, Milat A, Denney-Wilson E, Harris M. How can knowledge translation & exchange be supported by a multi-institution research centre? (Poster). 4th Annual NHMRC Symposium on Research Translation. Sydney 2015.



A/ Prof Elizabeth Comino (left) and Prof Lynn Kemp at the Gudaga van donation.

Other Presentations:

1. Comino E. 'The Gudaga Research Program Overview'. Sector Connect Health Services Workshop. 13th May 2015.
2. Comino, E. & Mack HA. Pregnancy outcomes for Aboriginal infants in an urban community. UNSW guest lecture for Reproductive Maternal and Child Health Course, 5th May 2015.
3. Elcombe E. 'Health outcomes for Aboriginal children in an urban community'. Sector Connect Health Services Workshop. 13th May 2015.
4. Grace R on behalf of the Gudaga Team. 'Gudaga Developmental Outcomes'. Sector Connect Health Services Workshop. 13th May 2015.
5. Kaplun C, Grace R, Kemp L, Elcombe E, Knight J, Comino E. Bulundidi Gudaga: The impact of epidemiological and intervention research on maternal and child health service policy and program delivery for Australian Aboriginal families in an urban community and beyond. 2015 SWSLHD and Ingham Research Showcase, Thomas and Rachel Moore Education Centre, Liverpool Hospital, 27th November 2015.
6. Kaplun C. 'Gudaga goes to school'. Sector Connect Health Services Workshop. 13th May 2015.
7. Kaplun C. 'Gudaga goes to school'. The Ingham Institute Research Seminar. 16th June 2015.
8. Knight J, Short K, Eadie P, Descallar J, Kemp L, Comino E. The Gudaga Study: Longitudinal development of vocabulary in Australian Aboriginal children. 2015 SWSLHD and Ingham Research Showcase, Thomas and Rachel Moore Education Centre, Liverpool Hospital, 27th November 2015.
9. Mack HA on behalf of the Gudaga Team (2015). The Gudaga Partnership. 2015 Centre for Primary Health Care and Equity (CPHCE) Annual Forum, 14th August 2015.
10. McDonald J on behalf of the Gudaga Team. 'The Gudaga Study: Early child development'. School counselors from the Macarthur District. 11th June 2015.
11. Rosser N. 'Gudaga background & additional information'. KARI Aboriginal Resources, 10th April 2015.
12. Rosser N. 'Gudaga background'. The Nagle Centre, 27th February 2015.
13. Rosser N. 'The Gudaga Research program – a practical approach to utilising research outcomes'. The Ingham Institute Research Seminar, 12th May 2015.
14. Rosser N. 'The Gudaga Research program – a practical approach to utilising research outcomes'. Sector Connect Health Services Workshop. 13th May 2015.
15. Rosser, N. Gudaga dissemination activities, CPHCE Research to Practice Seminar. 22nd September 2015.
16. Short K. 'What do words tell us? Protective and risk factors for longitudinal vocabulary development in Australian urban Aboriginal children.' The Population Health Research & Evidence Meeting, 23rd June 2015.
17. Short K. 'What do words tell us? Protective and risk factors for longitudinal vocabulary development in Australian urban Aboriginal children.' The Ingham Institute Research Seminar. 14th July 2015.

Presentations on Gudaga Program data presented by our CSU research partners:

1. Dealtry L. Sense of self at school transition for an urban Aboriginal child: A narrative case study. European Early Childhood Education Research Association (EECERA) 25th Conference. 7-10th September 2015, Barcelona Spain.
2. Perry R & Dealtry L. Sense of self at school transition for urban Aboriginal children and their families. Pedagogies of Educational Transitions Work package 6 (2015), Hamilton NZ, 21st March 2015.



FINANCIALS

Centre for Primary Health Care and Equity

Statement of Financial Performance

for the Year Ended 31 December 2015

	Notes	2015	2014
		\$000	\$000
Revenue			
Research Revenue		\$2,553	\$1,657
Consulting/Commercial Activities		\$76	\$440
Other Research Revenue		\$746	\$124
UNSW Contributions		\$386	\$399
UNSW Medicine Contributions	ii/iii	\$403	\$463
Other Revenue		\$84	\$629
Total Revenue		\$4,248	\$3,712
Expenses			
People Costs, oncosts & other		\$3,702	\$3,997
Staff Costs			
Scholarship Stipends		\$63	\$85
Contract & Consulting Services		\$232	\$299
Consumables		\$14	\$29
Travel		\$114	\$166
Equipment < than \$5,000		\$8	\$11
Other Expenses		\$174	\$525
Total Expenses		\$4,308	\$5,112
Net Result before Depreciation		-\$60	-\$1,400
Depreciation		\$3	\$3
Net Result after Depreciation		-\$63	-\$1,403

Notes to the Statement of Financial Performance

- i) The financial statement is prepared on an accrual basis for the year ended 31 December 2015.
- ii) The Centre (CPHCE) also recognises in-kind contributions provided to it by UNSW that are not brought to account in the Statement of Financial Performance - this includes space occupied at Level 3 Building G27 - AGSM, Randwick.
- iii) Includes contribution to salaries of 11 (8 staff in 2014) CPHCE staff and Non-salary Fellowship Enhancements for Professor Mark Harris & Dr Jane Lloyd



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Please direct any inquiries regarding the Annual Report to
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Further information about the Centre for Primary Health Care and Equity
can be found at www.cphce.unsw.edu.au.

