

What does the system need?

Goal

## Action Plan (2025 - 2027)

Shared outcome

What could we deliver together?

Neensland Children's Health

Metro South Metro North Health

HTQ's role (and value add)

How does HTQ make this possible/more



## possible through working together? efficient/more effective? Clear, streamlined, repeatable Activate collective focus & drive on key issues Priority #1 **Connect the right people** way of turning health challenges Lead the process of bringing together the **right** Develop and pilot a consistent, collective 1.3. to deliver outcomes into scalable action stakeholders (e.g. consumers, including First approach for using research to tackle New solutions/models of care Nations and other priority groups, and primary specific large-scale health service care) to identify causes and develop potential ✓ Use research to tackle health piloted in multiple health services **needs/issues** - starting with a priority solutions that build on the existing evidence service priorities Increased collaboration between 1.5. that aligns with the Health Minister's base to pilot ✓ Link researchers and end users researchers, clinicians and Charter and HTQ partners' joint regional Enable **piloting** across multiple health services sites (clinicians, clinician researchers, end users 1.6. needs assessments: Enable opportunities for securing external funding clinical administrators, consumers) More external health and medical Establish new models of care to scale research programs, their implementation Identify and convert innovative funding to Queensland between EDs and Mental Health and evaluation ideas into action Deliver the dissemination of a clear co-designed Units to ensure patients presenting process and resources to hospital with mental illness are > Evaluate process, refine based on feedback and triaged and treated promptly confirm second health service need for next pilot Build the capability of Improved capability of workforce Inject expertise in a considered, consistent way **Priority #2** in accessing and securing 1.2. » Lead the co-design process and deliver the Deliver a structured mentorship our research resources (including funding) for mentorship and training program and training program for 1.3. research translation projects » Lead the establishment of and practical support for a translation workforce early-career research-active 1.4. A more research-informed, connected, interprofessional, peer-to-peer clinicians across HTQ partners and amplify our learning cohort innovative culture in health services that drives innovation culture evidence-based care Define (objectively) what excellence looks like Priority #3 Enhanced skills and confidence in ✓ Create more research-active » Lead stakeholder engagement to measure current As a partnership, develop a identifying, analysing and solving 1.2. clinicians consistent maturity model as a innovation and research culture across HTQ partners health service challenges using ✓ Improve access to translation > Lead the co-development of a HTQ partner-specific blueprint for building innovation and 1.3. research methodologies maturity model, drawing on national and expertise and health economics research capability in HTQ health Better retention and attraction of international best practice to drive accelerated impact 1.4. services passionate research-active *Lead* the **co-development of a roadmap** to support ✓ Strengthen the research culture clinicians in Oueensland HTO partners to strengthen their innovation and within health services (i.e. more research culture on their journey to 'excellence' evidence-based, researchdriven care) Leverage and clarify across the system **Priority #4** » Lead the end-to-end process (e.g. map existing Develop and promote navigation tools resources/support, engage staff across multiple and recommended TRIP (Translating levels, co-design solutions) *Research Into Practice*) pathway to » Deliver a co-designed **navigation tool** and connect frontline staff with tools to be recommended TRIP pathway evidence-based health practitioners Consistent processes that **Broker shared agreement and alignment Remove barriers to Priority #5** make it easier to collaborate in Harmonise and streamline approval Enable discussions to simplify and coordinate collaboration to an efficient, productive way site-specific approval requirements requirements across HTQ partners Increased capacity of research accelerate translation (leveraging the HTQ Passport) Deliver updated HTQ Passport Agreement that translation workforce incorporates agreed partner changes ✓ Reduce time wasted on duplicated or unnecessary processes/bureaucracy **Connect and promote consistently Priority #6** Increase energy invested in innovation **Position and promote the Clinical** (rather than frustration) » Lead co-design discussions with clinical trial 1.2. ✓ Build Queensland's capability in clinical researchers and teams to inform content Trials Hub as a central and trusted trials and studies resource for clinical researchers and Deliver more resources to meet user needs clinical trial teams *Enable* greater access to best practice tools through raising awareness of the Hub Targeted education and training in areas of identified need, e.g. Indigenous Cultural & Intellectual Property, best practice CCI Inclusive ✓ Whole system lens inclusive of primary care ✓ CCI Microgrants Program

**Priority area** 

What will we do in 2 years that's only

- Digital Health Networking Breakfast
- ongoing ✓ National HREC Conference activities

Our

- ✓ Health Studies Australian National Data Asset (HeSANDA) Queensland node
- ✓ Digital, Mental Health, CCI and Human Research Ethics and Governance Collaborative Groups

partnership

approach











How we measure success How will we evaluate our shared impact? Lead

- 1.1. Defined process and resources developed
- 1.2. Process applied (and refined) to 2 health needs
  - Number of times the process is applied to a specific health need by 2028 (HTQ-driven & partner-driven)
  - Process embedded as an ongoing mechanism for
  - prioritising HTQ research and advocacy focus
  - Amount of funding secured for projects initiated through the collaborative process
  - Scale and impact of solutions tested and evaluated
  - across health services over next 5 years

1.1. # participants enrolled in the program Participant experience and perceived impact on **research culture** (via pre-post surveys) Active embedding of learnings (post-program tracking) # participants actively in research after 5 years

- 1.5. Increase in interprofessional collaboration
- 1.1. Queensland-specific blueprint for driving excellence in
  - integrating innovation and research Baseline maturity data across the region (strengths &
  - opportunities) Standard questions in staff surveys to track research
  - culture Clear actions/benchmarks to support planning and
- uplift 1.5. Improvements in innovation and research maturity within our health system over next 5-10 years
- 1.1. Number of users accessing the tool/resources
- 1.2. Participant feedback on usability and relevance of the navigation tool and resources

1.1. Researcher feedback on ease of access and collaboration across academic & health partners 1.2. Increased uptake of HTQ Passport Agreement 1.3. Increased collaboration across partners

- 1.1. Increased interactions with Clinical Trials Hub resources
  - Ratings of effectiveness, usability and relevance of **Clinical Trials Hub**
- 1.3. Improved quality of clinical trials

 Engaging closely with priority and vulnerable groups ✓ Active representation and connection across levels within HTQ partners Ongoing insights and analysis to shape collective impact and success