Cooperative Research Centre for

Aboriginal Health

**AN INTEGRATED PROGRAMMATIC APPROACH
TO THE CRCAH'S RESEARCH AND
DEVELOPMENT ACTIVITIES**

October 2004

1. Purpose

1. This paper outlines:
   A refinement of CRCAH research priorities;
   A programmatic approach for the CRCAH's activities, particularly the key components of each program (their goals and scope);
   An integration of research, transfer and capacity development in the development and conduct of programs.
   A program structure.

This paper was discussed and endorsed by the CRCAH Board. It includes the modifications where were recommended by the Board.

2. Table of Contents

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3. Background

The Cooperative Research Centre for Aboriginal Health (CRCAH) is committed to doing research directed towards achieving outcomes in priority areas identified by its industry stakeholders. The process of developing and implementing a research agenda with meaningful industry input requires an on-going process of dialogue and refinement between industry and researchers working in partnership, with priorities evolving and sharpening through that discussion. The CRCAH's dialogue about its research priorities began in the negotiation of its Business Plan. The *Emerging Priorities* document endorsed by the Board in March 2004 outlined nine priority research areas.

The Research Development Group (RDG) has now reviewed these priorities and recommended a reduction to five priorities initially, as outlined in this paper. It has also outline a programmatic approach to ensure that the research agenda focuses on the achievement of significant health gains, builds on and maximises the impact of existing research, and addresses issues of how improved health outcomes can be achieved through either new research or improvements in the uptake of existing evidence. This approach has been endorsed by the Board.

Since the November 2003 Convocation, the refinement of priorities has occurred largely at the Research Development Group and the Board level. This work has reduced the research agenda to a more manageable and achievable size, and identified and consolidated much of the research and developmental work already done.

The next stages in the process to finalise the development of programs require the engagement of both industry stakeholders and potential research collaborators to work through the detail of goals, outcomes, research gaps and barriers to uptake, and to consolidate this detail in a brief Program Statement for endorsement by the Board. This detailed work is crucial to getting the goals – and the subsequent programs of activity – right.

4. The Programmatic Approach

4.1 Overview

The CRC for Aboriginal Health can maximize the impact it can have by:

> Coordinating research, research transfer[1] and capacity development[2] activity which will contribute to improvements in policy and service provision which industry have identified as likely to lead to significant health gains.
> Value adding to in-kind projects by maximizing their impact through research transfer and capacity development.
> Funding research and development activity which is of importance to improving Aboriginal health but which would otherwise be difficult to fund elsewhere.

The Research Development Group has proposed a process for the CRCAH community to develop program proposals based on these principles. This approach takes into account the Board's direction to form coherent programs with concrete outcomes. It integrates what have been disparate components of the CRCAH approach – funded research, in-kind projects, working towards outcomes, capacity development including education and training, research transfer, knowledge brokering, the SME Forum and Convocation. The CRCAH as a

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[1] Research transfer: targeted strategies to ensure the uptake of evidence into policy, service provision, and practice.
[2] Capacity development: the exchange of knowledge and skills on an individual, organizational, community and/or workforce level.

collaborative organisation also requires that its internal processes are transparent and inclusive.

4.2 What is a research program?

This section defines the CRCAH approach to research programs. A research program comprises a number of related research projects, research transfer and capacity development activities, that together form a coherent approach to addressing areas in which improvements in knowledge or its uptake may lead to health gains. Research programs can vary in size and scope, and may require different levels of financial or other support from the CRCAH, but all will be framed by specific research questions. The coherence of the 'program' comes from:

> the strategic direction of the package as a whole in terms of using research (both new and existing) to address gaps in knowledge or practice, in areas which are critical to Aboriginal health improvement;

> building on existing work, relating it to industry needs, identifying gaps in knowledge or barriers to uptake, and developing a comprehensive strategy to achieve outcomes;

> ensuring the planning and conduct of research, transfer and capacity development is in keeping with the principles of the Indigenous Research Reform Agenda;

> the building of links and relationships across a network of researchers, industry, SMEs and practitioners at all levels;

> the use of collaboration, complementarity and synergy to gain value beyond the simple sum of the component projects;

> a strategic and integrated approach to transfer, brokerage and dissemination;

> the integration of the education and training function into the research program and into the life of the program's network/research community, with a clear focus on building Indigenous capacity.

5. Operational Framework

The development and implementation of a programmatic approach has implications for operational issues for the CRCAH as well as providing a clearer framework for the conduct of research, transfer and capacity development. An independent consultant has reviewed the CRCAH's staffing requirements, and will recommend a revised staffing structure in keeping with the proposed programmatic approach.

This section addresses how we draw the existing and potential portfolio of CRCAH in-kind and funded research and our education and research transfer activities into a programmatic model.

5.1 How programs will work

The operational framework includes three phases which can and should occur throughout a program's life cycle, and not necessarily sequentially:

> a. **Development** – Outlined below in section 5.1.1 Program Development

> b. **Implementation** - the implementation of what has been proposed within the program statement. This may include:
>> The identification and synthesis of existing bodies of research;
>> The conduct of new research to fill important knowledge gaps;
>> The development and maintenance of networks of interest around the program topic, the communication of key information, questions, problems,

and the building or enhancement of collaborative relationships within that network;

Targeted strategies to achieve the application of research findings, address barriers to uptake, or to advocate change which will enable the use of research findings in policy and service provision;

Targeted strategies to build workforce capacity as relevant to the program area;

The maintenance of effective communications within the CRCAH community and beyond about the program's goals, activity and outcomes;

c. **Evaluation/program outcomes statement -** This phase should not *follow* the implementation phase but occur alongside it to provide real-time feedback about the direction, conduct and outcomes of the program. Each program should establish an evaluation strategy to ensure quality assurance within the program in relation to research, transfer and capacity development. An annual program outcomes statement will be required from each program on an annual basis. These will report on program activities, finances and key outcomes to date and can be used to inform the Board and Convocation of the progress and to provide an opportunity for review and input where appropriate.

5.1.1 Program development

The process of developing a program will build on the work already done within the CRCAH, the Cooperative Research Centre for Aboriginal and Tropical Health (CRCATH), and often, by the work of other organisations in developing priorities for research.

Much of this work has already been completed, through scoping and development work, reviewing literature, and industry input in the program areas of Healthy Skin, Primary Health Care Systems and Workforce, Chronic Disease, and Social Determinants and the Physical Environment. For example, in Healthy Skin, substantial informal programs of activity already exist. Similarly, considerable work has already been done to identify industry priorities about improving the physical environment in relation to health, as part of the Social Determinants scoping activity. The next phase for the Social Determinants program will require the development of research partnerships with industry to both identify projects for evaluation and identification of evaluation protocols.

The final iteration of program development proposed here focuses on sharpening the details of the program statements for each of these programs. More developmental work is required in the Social and Emotional Well Being program.

The process following the amendment or endorsement of the program structure proposed in this paper will include:

1. **Industry roundtables** will bring together a small, well-targeted group of industry partners and potential research collaborators to finalise a brief program statement for each program.

2. The **program statement** will set out in overview:
   the goals and desired outcomes of the program;
   the scope of the program;
   identified priorities around research gaps or barriers to uptake, research transfer and capacity development;
   existing work, including in-kind and funded research, transfer and capacity activity, scoping or developmental work;
   research projects which will make up each program, plus dissemination and capacity development activity already associated with each project;
   indicative research questions;
   priorities, strategies and procedures for the development and implementation of the program;

plans for the development of a network of interest around the program area; how the program will link with other programs.

The completion of each program statement should not be a lengthy process but requires the focussed input of a small group of potential industry and research collaborators.

A nominated member of the Research Development Group will oversight this process. The identification of a program leader and program manager (see section 5.2 Operational Roles) should also commence during this phase.

3. Program statements submitted to the Board, via the Research Development Group, for final endorsement.

4. The program leader and program manager will then coordinate a small group of industry representatives and potential research collaborators to develop a **full program proposal**. The development of the program proposal should also include bringing together a network of interest which will be consulted during the process. The program proposal will include a detailed description of:

   the goals and desired outcomes of the program (see above);
   identified priorities around research gaps, transfer and capacity development;
   how these priority outcomes will be achieved;
   research projects which will make up each program, plus dissemination and capacity development activity already associated with each project;
   priorities, strategies and procedures for the development and implementation of the program;
   CRCAH funds or resources required to support the achievement of these goals;
   how the program's network of interest will operate and engage industry as well as research partners;
   how CRCAH funded or in-kind students will be linked into the research program and network of interest;
   milestones, methodology, team roles, budgets.
   linkages with other programs.

5. The full proposal will be submitted to the Research Development Group which will oversight an external peer review process before recommendation to the Board.

6. Board approves funding for the program.

5.2 Operational roles

The key roles required within each program area are:

1. Program leaders – This role will be shared by a leader in the research and a leader from industry in the field which is the focus of the program. This role will provide leadership in the development of the program proposal and implementation, ensuring research, transfer, communications and capacity development activity are integrated within the program. (Normally an in-kind role.)
2. Program manager – the program manager is the key operational role to ensure the program's implementation and partnerships, and the effective delivery of its outcomes in research, transfer and capacity development. (Normally funded by the CRCAH.)

A member of the Research Development Group will also be identified to co-ordinate the development of each program statement and oversight the development and implementation processes. The Research Development Group is to be reviewed, and this review will include a re-alignment of the role of the RDG to fit the programmatic structure.

The CRCAH may call for nominations for Program Leaders for each program area in the interests of transparency.

In keeping with the CRCAH's commitment to support capacity development, particularly Indigenous leadership, there will be a strong emphasis on recruiting Indigenous people to the roles of Program Leader and Program Manager.

5.3 Linkages

It is essential that mechanisms are in place to link programs together and prevent them becoming silos.

> All programs will be across all Theme areas which will give them common ground in areas such as focusing on primary care and consideration of social determinants. (see section 6)

> The Program Leader and Program Manager will also play an important role in linking programs. They will be responsible for communication within the program area, with other programs, and within the general CRCAH community. For example, all Program Managers will meet regularly and keep each other informed of program activities. It is proposed that a Senior Program Manager will coordinate this group.

> It is anticipated that there will be some overlap in membership of different programs which should also facilitate communication between areas

> The Board, with the assistance of the Research Development Group, will play a strategic role in overseeing all program areas and ensuring that they are working in the collaborative sense of the CRCAH rather than in isolation.

> Convocation will be important in bringing people from different program areas together to provide an opportunity for updates on what is happening across other areas and to foster a sense of belonging to the CRCAH rather than just the program area.

6. Priority Areas for Program Development

Program development is an iterative process. Input from community and stakeholders is required at each stage. The precise detail of each program can only be determined with detailed input from the Board, particularly about goals and scope, and potential industry, community and research collaborators about the specific outcomes which are likely to produce maximum health gain, and which are both researchable and achievable.

It is also important to note that while each program is identified separately, each will incorporate elements of the four Research Themes identified in the CRCAH Business Plan. There will be a high level of relationship and synergy between programs. It is proposed that comprehensive primary health care is a core element of all program areas.

Program Areas:

The program areas are listed below with the names of the nominee(s) from the Research Development Group (RDG) who has been leading the development in each area. It should be noted that until the Board has endorsed program statements, each areas should be seen as indicative.

Healthy Skin [Scabies]:
RDG nominee: Bart Currie

Chronic Diseases
RDG nominee: Kevin Rowley

Primary Health Care, Systems and Workforce
RDG nominees: David Legge and Yael Cass

Social Determinants and the Physical Environment
RDG nominees: Fran Baum and Ross Bailie

Aboriginal Social and Emotional Well Being
RDG nominee: Trish Fagan

Of the five programs areas, Healthy Skin is the one closest to implementation. The next two programs to present program statements to the Board will be Chronic Disease and Primary Health Care, Systems and Workforce. Social Determinants and the Physical Environment, and Social and Emotional Well Being are currently the least developed of the program areas.

Once program statements have been developed and are endorsed by the Board, they will be circulated to the CRCAH community to provide people with further information on program areas and to invite people to be involved in these areas.

Strategic Development Areas

As well as the five program areas proposed above, there are a number of areas in which the CRCAH could play an important development, advocacy or leadership role, but in which it would not necessarily make a significant financial investment. These areas include:
- Sexually transmissible infections
- Injury
- Maternal and child health

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7. An Integrated Programmatic Approach

The CRCAH and its predecessor the Cooperative Research Centre for Aboriginal and Tropical Health (CRCATH) have already begun to develop processes and partnerships which will make important contributions to the development of programs.

As noted above, the programmatic approach brings together what have been disparate elements of the CRCAH approach – funded research, in-kind projects, working towards outcomes, capacity development, education and training, research transfer, knowledge brokering, the SME Forum and Convocation.

The approach to research funding taken by the CRCAH to date and, formerly, the CRCATH, has had a number of key issues constraining its full impact. These have included:

> The overall CRCAH research program outlined in the Business Plan was very broad, covering a wide range of issues – all of which are of importance in Aboriginal health – but which for a relatively small organisation like the CRCAH was an unrealistic and unachievably large agenda.

> While the CRCATH began to focus on increasingly strategic research, and on larger projects, neither the CRCATH nor the CRCAH had so far brought together large bodies of work into a concerted and coherent effort to achieve specific outcomes.

> Research transfer approaches were mainly project focused, rather than being focused on broader outcomes. This made it difficult to achieve effective transfer of research findings into policy or practice.

> Education and training activities in most cases existed separate from research projects.

> Knowledge brokerage had found no practical manifestation and struggled to do so in the face of such a wide range of potential topics and users.

> The SME Forum, while still in its development phases, was not directly linked to the research program.

> The Convocation contributed to the development of priorities, but as the CRCAH's life cycle progresses this too requires a different approach.

The following sections clarify how some of these components of the CRCAH will be integrated into the CRCAH's programmatic approach.

7.1 Research

Key issues:
As outlined above in Section 7, the CRCATH and CRCAH research programs have been largely focused on projects, rather than on bringing together bodies of work into coherent programs aimed at specific outcomes. Other issues with the research approach have included:

> The CRCAH's research agenda as outlined in the Business Plan is extremely broad, while the budget and resources are – while large for a CRC – limited in relation to such a wide-ranging agenda.

> The CRCAH's research commissioning process has been cumbersome and competitive, causing fractures within what must be a collaborative organisation. Project proponents were given timeframes for development of proposals that limited their ability to develop partnerships and consider other transfer and capacity development issues.

> The CRCAH's research development and approval process included a plan for developmental support from Theme Leaders and Function Leaders, but in practice this developmental support was minimal.

> While there has been an increase in the level of industry involvement in research projects, most projects are still investigator initiated.

Indigenous research projects have struggled to find a place within the increasingly strategic focus of the CRCAH.

The CRCATH and to date, CRCAH, made relatively little strategic use of the substantial contributions of its partners through in-kind projects.

A programmatic approach:
By limiting the CRCAH research agenda to five key priorities – at least initially – it becomes possible to achieve real health gains in these areas. The proposed programmatic approach will see a focus on specific outcomes as identified by industry, within the fields in which the CRCAH can already draw upon a strong body of work. In-kind and funded research projects will be brought together into a coherent program to explore what might be achieved from this base of work, what important gaps in knowledge exist, how research findings can be transferred and knowledge shared, and how capacity can be built around each area.

7.2 In-kind projects

Key issues:
In-kind projects are a vital part of all cooperative research centres. A substantial amount of the overall activity of any CRC comes from its in-kind projects. However, for the CRCATH and CRCAH, **in-kind projects have been greatly underutilised** within the overall organisational activity. Issues around in-kind have included:

Little incentive to core partners to put forward and report on in-kind projects;

No integration of in-kind projects into an overall strategy to achieve outcomes;

Some confusion as to which in-kind projects would be acceptable to the CRCAH;

Little quality control over the types of projects accepted as in-kind;

No direct involvement between the CRCAH's development arm and the planning or conduct of in-kind projects, and, as a result, only ad hoc strategies for research transfer or capacity development;

While the previous CRCATH had reasonably substantial budgets for both professional development and dissemination around in-kind projects, no similar budget existed in the CRCAH.

The programmatic approach:
Within the programmatic approach now being adopted by the CRCAH, in-kind projects can play a very important role, with such projects even forming the largest part of some programs. In these cases, the 'program' may largely focus on maximizing the impact of existing research projects. This could be done by bringing externally funded projects together within the focus of a large program of work, and developing a planned approach to research transfer, knowledge brokering, and capacity development around the whole program, not just individual projects. This approach will enable a much more targeted approach to research transfer, knowledge brokering and capacity development.

To encourage the contribution of in-kind projects, the CRCAH budget and/or each program budget needs to include allocations to provide incentives to Core Partners to put forward in-kind proposals. These incentives might include supporting research transfer or capacity development activity, as part of the overall program approach.

In-kind projects are also vital to maintaining the agreed contributions of partners to the CRCAH, upon which Commonwealth funding is reliant. Projects which address the broad parameters of the Business Plan will be accepted as in-kind projects, although the CRCAH will be particularly seeking in-kind projects which contribute to the major program areas. Partners should be aware that the level of support for projects which fall outside program areas will be minimal.

The benefits to individuals and organisations who contribute in-kind projects or elements of programs are thus:

Being part of a targeted program of research aiming to achieve specific outcomes (most researchers want their research to make a difference).

Accessing expertise and resources to maximize the impact a program of work can have through research transfer, knowledge brokerage and capacity development.

Being part of a community of interest around specific program areas and the opportunities for learning and the sharing of knowledge this provides

Linkages with industry through the CRCAH partners and Small to Medium Enterprises Forum (see above).

Ensuring Core Partners meet their in-kind commitments and guarantee continued CRCAH Commonwealth funding

7.3 Indigenous research projects and capacity development

The paper *Developing the CRCAH Research Agenda* (endorsed by the Board at its November meeting) included a pathway for the development and approval of Indigenous research projects. Indigenous projects are those proposed by Indigenous researchers, communities or small organisations outside the main priority driven approach to research. This pathway has become largely invisible in the further development of the CRCAH research agenda. The development of a programmatic approach provides an opportunity to redress this issue and link Indigenous research projects to the overall strategic effort of the CRCAH.

Key issues:

Difficult for localised Indigenous projects to compete against strategic, nationally-focussed projects in competitive rounds

Difficult for Indigenous communities and organisations to know about and prepare submissions for competitive rounds.

Developing Indigenous projects may require more time and flexibility, particularly if the CRCAH is to encourage people who may not be experienced researchers. It may also require building relationships of support with non-Indigenous research collaborators which also takes time.

Programmatic approach:

Indigenous research projects can be linked to programs in a similar way to scholarships (see below section 7.5), in that most proposed projects would be likely to fit within one of the five program areas in some way. However it is also important for program leaders and managers to actively encourage the development and incorporation of Indigenous projects within programs as these will provide valuable and indeed essential perspectives and grounding for the program, as well as making important contributions to Indigenous capacity development. The CRCAH will also need to work in a proactive way with community partners to facilitate their involvement in research. The CRCAH will also seek to maximise the opportunities for Indigenous students and researchers through its Education and Training activities outlined below in section 7.5.

7.4 Research transfer and knowledge brokering

Key issues:

There has been a growing understanding of how best to achieve research transfer under the CRCATH and CRCAH which has led to a shift from the dissemination of projects findings at the end of a project towards a concerted focus on the front-end of the project – to make sure the project is designed to maximize its likelihood of translating into policy and practice. However a number of issues continued to be problematic for research transfer and knowledge brokerage in the CRCAH:

Projects were still largely investigator driven rather than outcomes-focused and frequently did not arise from specific industry needs or problems. Investigator-initiated projects are far less likely to achieve effective transfer than research which is driven by an industry desire to solve a specific problem or achieve a particular outcome.

A project-by-project focus on research transfer is very limited and not an effective use of resources, as policy makers and service providers prefer syntheses of bodies of knowledge to one-off project findings.

Knowledge brokerage has struggled to find a place within the CRCAH to date, despite the evidence that knowledge brokerage is more likely to bring about changes in Aboriginal health outcomes than the doing of new research. Like other activities, knowledge brokerage requires the identification of particular goals and potential users of knowledge. These matters have been difficult to bring within a manageable framework within the very broad research agenda set out in the Business Plan.

A programmatic approach:

The programmatic approach focuses the CRCAH's research agenda squarely towards achieving specific outcomes identified as important by the CRCAH's industry stakeholders. This dramatically increases the likelihood of effective transfer into practice. It is also likely that for some programs, with already well-established bodies of work, the main focus of activity will be in the application of existing knowledge into policy and practice. An important step in this is the identification of whether the key issue in each program is a need for new knowledge, or barriers to the uptake of existing knowledge.

In bringing together the combined efforts of a range of funded and in-kind projects, the programmatic approach also provides greater opportunity for effective targeted transfer of research findings into policy and practice through a synthesis of a range of evidence/knowledge. This may mean that more of the CRCAH's activity is directed towards the collation and synthesis of bodies of knowledge into useable and accessible evidence.

The other key principles of research transfer embedded in the CRCAH's assessment criteria will still need to apply: that potential users of research are involved in its planning, conduct and dissemination, both within individual projects and the program as a whole; that projects/programs are targeted towards specific outcomes and planned to achieve these outcomes; that research is of high quality and credibility; that specific plans are made and acted upon to promote the transfer of findings into policy and practice. It is also imperative that the CRCAH draws upon the valuable resources of its Board members, the SME Forum, and the opportunities provided by Convocation, to promote the uptake of research into policy, practice and service provision.

Program leaders and managers will be required to develop a detailed strategy at the outset of a program about how its proposed outcomes will be achieved. Each program will then produce an annual program outcomes statement which details research, transfer and capacity development outcomes achieved, and strategic plans for any additional strategies required to promote research uptake. This report should be prepared in conjunction with the SME Forum and Convocation, before presentation to the Board. The Board will provide strategic advice for maximizing the transfer opportunities from each program.

In knowledge brokering, the five proposed program areas provide an opportunity for the CRCAH to focus its knowledge brokering efforts on particular topics and target the communication of important evidence and findings to identifiable networks of potential users of research. It will be important for each program to have a network of interest (see section 7.6 below) around it, both to engage potential users and the CRCAH community in the development of the program and to set up a vibrant community for the exchange of questions, answers and exploration of problems. These networks can then play a key role in knowledge brokerage. For example, ensuring key emergent international findings in chronic disease prevention are effectively communicated to and can be used by those working in chronic disease. It is important that the work required to carry out these knowledge brokering activities – which become a key element of the programmatic approach – is resourced adequately.

7.5 Education and Training

Key Issues:
The Education and Training Function has focused on funding career pathways from traineeship level to post-graduate study to encourage and retain students, particularly Indigenous students in order to build the Indigenous health research workforce. This activity has contributed to building the capacity of individuals and to a limited extent, the capacity of the CRCAH to conduct research about Indigenous health. However there has been little linkage between the Education and Training programs and the CRCAH's research activity. Other issues include:

> To date no Indigenous doctoral students have graduated with either the CRCATH or the CRCAH. A large proportion of scholarship funding has gone to non-Indigenous students.

> There appear to have been barriers that have prevented Indigenous people taking up scholarships. For example, potential scholarship candidates may not have the academic and social networks needed to aspire to or access the higher education sector.

> Experience suggests that many Indigenous scholars would like to explore local community-driven issues which may not have fitted with existing projects.

> There has been no requirement that scholarships are linked to the broader CRCAH research community, which has resulted in some students - both Indigenous and non-Indigenous –feeling a sense of isolation.

> While the CRCAH Business Plan includes considerable discussion of the importance of capacity development through research projects and programs, the Business Plan does not outline any practical mechanism to do this.

> The Education and Training Function needs to strategically approach supporting capacity development at individual, project/program, organisational, and community levels.

Programmatic Approach:
The primary aim of the Education and Training Function is to develop the CRCAH's capacity for research in priority areas, particularly capacity for Indigenous people to participate and take responsibility in carrying out this research. The Function aims to identify Indigenous people to take up traineeships, cadetships, scholarships and professional development which develop career pathways through supporting the CRCAH research activities.

The CRCAH also has an important role in fostering the development of Indigenous leadership in research. For example, ensuring that Indigenous Program Leaders and Program Managers, receive appropriate mentoring and professional development.

The 2004 scholarship round will see scholarships tied to research programs in an effort to link education more closely to the conduct of quality research. It is important that this process is monitored and evaluated to investigate successes and barriers. The CRCAH will also investigate the possibility of providing incentives to core partners to put forward in-kind trainees, cadets and scholarship students who could contribute to education and training outcomes in relation to program areas.

Integrating Education and Training into the program areas will enable the CRCAH to provide support to students through connections with a larger program of work and involvement in the networks of interest. Consultation with industry about outcomes should develop programs around issues that are relevant to Indigenous students. Core partners should be proactive in encouraging students to be involved in the program areas so students can develop productive relationships with a large group of experts and peers who have similar interests.

Both funded and in-kind students will be involved in the program's network of interest. These networks will provide access to potential supervisors and mentors as well as a focus for support and professional development activities. The programmatic approach should

maximize the benefits to the students in being part of the CRCAH community which has links to academics and industry. It will also provide the CRCAH with mechanisms to ensure that students make a valuable contribution to the research outcomes.

7.6 Networks of interest

The Program Leader and Program Manager will share responsibility for ensuring that open and inclusive communications strategies are identified and implemented within each program.

A key mechanism will be the bringing together of a wide range of relevant industry and researchers into a network of interest around each program area to:
- o Engage potential collaborators;
- o Ensure support and cohesion for those who are developing and undertaking program activities;
- o Provide a mechanism through which knowledge can be exchanged, questions posed and answered, problems discussed;
- o Link researchers, potential users of research and evidence, students, SMEs and the broad CRCAH community.

Networks should evolve over time and may include:
- o Industry partners and potential users of research, possibly including the SME forum;
- o Members of CRCAH project teams in the program area;
- o CRCAH trainees, cadets and scholarship students.
- o Other interested people in partner organisations;
- o Relevant experts (may be co-opted from outside CRCAH if necessary).

7.7 SME Forum

Key issues:
The Board has had a number of discussions about the most appropriate role for the Small to Medium Enterprise (SME) Forum within the CRCAH. Like knowledge brokering, the SME Forum found difficulty in identifying a focus and purpose within the broad research agenda. Participants in the 2003 SME Forum included representatives from a number of small to medium sized enterprises, particularly the community controlled sector. These participants were largely those who had a general interest in research, rather than a specific interest or need. For those who had very little experience of research, it was unclear how they could be meaningfully involved in the CRCAH's activities.

The programmatic approach:
The programmatic approach provides a structure around which the Small to Medium Enterprise Forum can become a flourishing part of the CRCAH community. A small number of strategically selected participants with specific interest in a particular program area should be invited to the next SME Forum to help provide industry input to the development of program plans, provide advice about who else to involve in the networks being developed around each program area, and about the best mechanisms for communicating important evidence.

The next SME Forum will be focused around 3-5 of the large program areas, and participants invited because of their particular interest and direct involvement in each area. Program leaders and RDG nominees will have the opportunity to outline existing work and findings arising from the CRCAH program area, and to explore with the industry participants specific outcomes which would be of benefit to industry as a whole. Core partner industry representatives will also be invited to attend the SME Forum.

The CRCAH should also explore whether the SME Forum might link into or even be incorporated within the network of interest around each program area, one of the key knowledge brokerage opportunities for the CRCAH.

7.8 Convocation

<u>Key issues:</u>
The 2003 Convocation contributed to the refinement of the CRCAH's research priorities by providing the opportunity for a large group of people to be involved in a discussion about the shape and nature of the research agenda. However, practically it is impossible to progress the refinement of priorities and the development of specific goals with such a large group.

<u>The programmatic approach:</u>
Convocation provides an additional tool for engaging potential collaborators and discussing approaches which could lead to outcomes in program areas. It provides a forum in which researchers, industry and community representatives can together explore ideas about how the program can be most effectively developed and refined as it proceeds. It also plays an important role as a forum where potential research partners can develop relationships within program areas and across program areas. It would clearly be desirable for the Convocation to include sessions in which participants can discuss specific program areas. However it is not the role of such a large group to come up with specific plans – it is more an opportunity for brainstorming and engaging the CRCAH community in the program areas. It also provides an excellent opportunity for programs and projects to share their experiences and achievements and contribute to the overall body of knowledge about both the outcomes and conduct of CRCAH research.