

Mental health research and evaluation framework

Mental health research and evaluation framework

Mental Health Branch
Department of Human Services
August 2005

Contents

1 Introduction	1
2 Role of state government in mental health research	2
3 Mental health research and evaluation framework	3
3.1 Principles	3
3.2 Research and evaluation criteria	4
3.3 Scope of research activity	4
4 Identification of mental health research priorities	5
Stage 1: Priority setting	5
Stage 2: Further align current and future funded research effort	6
Stage 3: Improving capacity and effectiveness	8

1 Introduction

The *Mental health research and evaluation framework* defines the Department of Human Services' broad directions for future mental health funded research and evaluation activity, and describes a plan for the development and implementation of a research agenda congruent with departmental research priorities.

The aim of the framework is to **promote evidence based best practice in mental health** by encouraging and supporting research and evaluation effort that will address critical knowledge deficits and promote excellence in service provision across the age groups.¹

The need to build a more robust and comprehensive evidence base to inform the planned development of effective models of care, treatment approaches and service interventions, and enhance service practice was identified in *New Directions for Victoria's Mental Health Services*.

While a reasonable alignment exists between current funded research effort and national and state priorities, this has not occurred within a systemic framework. The framework will address this by:

- Clearly defining the scope, principles and criteria for funded mental health research activity.
- Describing the process for developing a 'menu' of priority research activities, which will address key knowledge deficits, and strengthen the evidence base underpinning service practice.
- Working with funded research bodies and academic positions to generate research that aligns with agreed research priorities and improve their capacity to effectively translate research knowledge into practice.
- Promoting collaborative effort and coordination between funded research bodies, clinical academics, practitioners and consumers and carers and strengthening links with the wider health research field.

1 The Framework includes research targeted to adults, children and adolescents with serious developmental disorders and psychiatric disorders associated with ageing.

2 Role of state government in mental health research

In recognition of the importance of research and evaluation in facilitating practice change and enhancing outcomes for people with serious mental illness and their carers, the Department of Human Services, through the Mental Health Branch, currently allocates in excess of \$6 million per annum to support research across the full spectrum of psychiatry, from neuroscience to health service evaluations.

The department's investment in research has been significant and sustained over many years and is substantively delivered through a range of external research bodies, clinical academic positions, centres of excellence and statewide specialist services.

The State and Commonwealth share funding responsibility for mental health research, with the primary responsibility for biomedical research residing with the Commonwealth. The State has primary responsibility for applied research and evaluation, as well as responsibility for operational infrastructure for biomedical research institutes, which is funded through its public health program.²

Examples of the State's investment in research include:

- support for the Mental Health Research Institute (MHRI)
- creation of the Centre for Psychiatric Nursing Research and Practice
- establishment of centres of excellence in eating disorders and depression
- support for the creation of Psychiatry Victoria
- establishment of *beyondblue* in collaboration with the Commonwealth
- funding for clinical and research academic positions in Mental Health services, including consumer and carer positions.

2 The Public Health Branch of the Department of Human Services provides infrastructure support for biomedical research institutes. It also supports health and medical research that will assist in preventing and controlling chronic diseases such as depression as part of its commitment to evidence-based planning.

3 Mental health research and evaluation framework

The intention of the framework is to maximise the strategic value of current and future investment in mental health research by providing research bodies and individuals with a clear statement of direction in respect to the principles, criteria and scope of activity for funded mental health research effort.

3.1 Principles

The following key principles will guide funded mental health research and evaluation effort:

Focus on research priorities

Research priorities will be determined on the basis of their potential benefit to consumers most seriously affected by their mental illness or disorder and their carers, and their capacity to enhance the performance of the service system and inform the development of public policy.

Ethical and quality standards

All funded research will comply with appropriate ethics and standards, especially standards for privacy, safety and quality.

Consumer and carer participation

The meaningful involvement of service users (consumers and carers) will be an essential element of all funded research.

Translation and dissemination of research findings

Proven research and evaluation findings must be able to be applied to practice and shared with the mental health field in a timely and appropriate manner.

3.2 Research and evaluation criteria

Mental Health funded research must be able to demonstrably meet the following criteria³:

3 Exemptions to this criteria may be granted to special purpose initiatives.

- Focus on the treatment and care needs of consumers with **serious mental illnesses and disorders** with priority given to relapse prevention and early intervention.
- Be clearly relevant to the **changing profile of psychiatric morbidity** in the population (such as the treatment needs of consumers with co-morbid mental health and substance abuse problems) and/or targeted to the prevalent diagnoses encountered by public mental health services across the age groups.
- Have a demonstrated capacity to address **critical knowledge gaps of significance** to mental health care in Victoria congruent with departmental priorities.
- Demonstrate potential to **pioneer new treatment/care approaches** or consolidate research findings that have a practical application to service practice and deliver tangible benefits for consumers across the age groups and their carers.
- Have a clear process for the **effective translation of proven research findings** into service practice.
- Demonstrate how practitioners, consumers and carers will be **meaningfully involved** in the development, delivery and evaluation of research projects.
- Demonstrate **rigour and integrity** in terms of research design and methodology.

The Mental Health Branch of the Department of Human Services encourages and supports research effort that is delivered through collaborative partnerships and is linked to the activities of the wider health research field as relevant.

3.3 Scope of research activity

Included within the scope of the Framework are the following **broad domains of research activity**:

- **Assessment of the efficacy of existing mental health interventions and treatments** in facilitating rehabilitation and recovery outcomes for consumers.
- Identification of new and innovative interventions that can **effectively reduce relapse and improve recovery outcomes for consumers**, including those with significant co-morbid health problems.
- **Identification of best practice approaches** to optimise clinical and psychosocial practice, including research into cross program and sector approaches that improve continuity of care and rehabilitation and recovery outcomes for consumers, and best practice approaches to workforce development.
- Examination of the aetiology of major mental illnesses to **improve understanding of the causes of these illnesses**, which in turn will inform prevention and treatment approaches.
- Evaluation of the **impact of the translation of proven research** into clinical and psychosocial practice.

- **Epidemiological research** into the underlying risk factors affecting the distribution and control of serious mental illness and disorders in the population, including contributing factors such as socio-economic status and homelessness.
- **Economic and demand modelling** including cost benefit analysis and cost effectiveness analysis of existing and proposed interventions. Demand modelling includes the modelling (forecasting) of future supply requirements for mental health services and workforce.
- **Cyclical evaluations** of the long-term impact of key funded programs, policies and interventions aimed at improving treatment, care and social support outcomes for consumers and **service reviews** to clarify the role and function of key service components and the interface between elements of the service system.

The process for identifying the specific research priorities with the above research domains is detailed in the *Section 4 Identification of Mental Health Research Priorities*.

4 Identification of mental health research priorities

The identification of research priorities for the period 2005-10 will involve a three staged process as follows.

Stage 1: Priority setting

This stage involves identifying the strategic menu of research priorities within each research domain. This will involve:

- confirmation of current and new research commitments identified in the National Mental Health Strategy and Plans⁴
- linking research and evaluation activity with priorities identified in the Department's *New Directions for Victoria's Mental Health Services: The Next Five Years*, mental health strategies currently under development and other relevant planning frameworks⁵
- consideration of currently funded research and evaluation activity in the context of its potential benefit to consumers with serious mental illness and relevance to current and emerging research needs of significance to mental health care in Victoria
- review of the research priorities of the broader sector involved in health research, including VicHealth and Centres of Excellence in Health Research
- expert input from the mental health research field.

4 Research priorities are documented in the Commonwealth's Research Priorities in Mental Health (2001)

5 Examples include the Mental Health Branch Outcome Measurement Initiative and the Victorian Strategy for Safety and Quality.

To assist with this task the Mental Health Branch will convene a time limited Expert Committee to provide advice on:

1. Research priorities for inclusion in the Framework with reference to the research and evaluation criteria.
2. How best to engage funded research agencies and academic positions in the process of aligning their research activities, over time, with these priorities.
3. Systemic approaches to improve the effective and timely translation (application) and dissemination of proven research findings into clinical and psychosocial practice.
4. Mechanisms and strategies to:
 - **improve collaboration and information sharing** between funded mental health researchers to reduce disciplinary isolation and maximise research outcomes
 - **monitor the impact** of the funded research and evaluation agenda
 - **maximise opportunities for collaboration with the wider health research field.**

The expert committee will comprise selected representatives from research institutes, centres of excellence, academic and research positions, and practitioners with a background in research and evaluation practice.

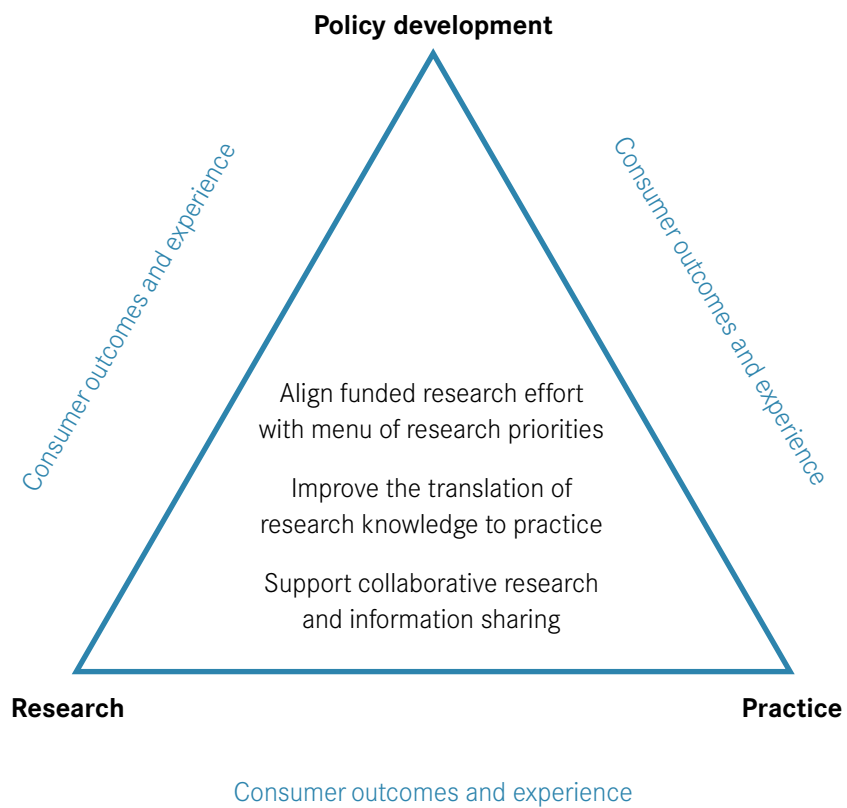
Stage 2: Further align current and future funded research effort

The framework seeks to maximise the strategic value of current and future investment in mental health research by improving the alignment of funded research effort with the menu of research priorities identified in Stage 1. This will be achieved within **existing resource allocations**. To achieve this outcome the Mental Health Branch will:

- require funded agencies to submit for Departmental approval a rolling tri-annual research strategy consistent with research domains and associated menu of research priorities identified in the stage 1. As funded projects are completed agencies will be required, as a condition of recurrent funding, to deliver all new research projects within the parameters described by the Framework and in alignment with the research priorities
- monitor performance of funded agencies against agreed research outcomes to enhance accountability
- take the lead role, as part of its core business functions, in delivering significant components of the applied research agenda (which includes cyclical evaluations and service reviews). This may be done in-house, through externally contracted consultants and/or via a submission based funding process.

Diagram 1 demonstrates the synergies required between research, practice (including practitioners, consumers and carers) and policy formulation in order to support a culture of evidence-based practice in the mental health field.

Diagram 1: Inter-relationship between policy, research and practice



Stage 3: Improving capacity and effectiveness

The Mental Health Branch will work with funded research bodies and academic positions to enhance their capacity to more effectively translate proven research knowledge into practice and better coordinate research activity within other relevant areas of mental health research and the broader health research field. This will involve:

- provision of ongoing support to clinical academic institutions and bodies involved in funded mental health research and improved utilisation of joint academic/clinical positions
- monitoring broad social and service usage trends to guide funded research and evaluation activities and engaging with researchers and clinicians to identify the key research questions requiring further investigation
- supporting innovative research and the evaluation of new initiatives
- supporting the translation of proven research knowledge into practice
- fostering collaboration, partnerships and information sharing between funded research bodies, academic positions, practitioners and service users and with the wider health research field.

Improving the translation of research knowledge to practice

Research is often undertaken without adequate consideration of how the findings may be applied to enhance practice or outcomes for consumers and carers thus reducing its inherent benefits and impact. These problems can be alleviated through researchers, practitioners (managers and staff) and service users collaboratively conducting projects that mesh basic science and clinical and social realities, and by building strategies into the research methodology that will facilitate the dissemination of proven research findings to the field and their utilisation in practice.

Consideration will be given to ways to bridge the gap between research and practice such as:

- Requiring funded research bodies to build an information dissemination strategy into their research methodology.
- Strengthening the nexus between research and training and education, for example, through:
 - formal links between research bodies and mental health education and training clusters
 - conducting best practice forums on appropriate interventions that have been found to be effective
 - developing evidence based practice standards and accompanying guidelines based on proven best practice approaches and conducting training in these, especially for new service initiatives.

- Facilitating better links between research bodies, academic positions and centres of excellence, practitioners, consumer and carer groups to ensure the applicability of research to practice.
- Improving the process for enabling research outcomes to better inform policy development.

Fostering collaboration and information sharing

The Mental Health Branch aims, as one of the key stakeholders in research, to establish better links with, and between, entities that have a major interest and investment in mental health research. In line with this the branch will encourage and support strategies that reduce fragmentation of effort and disciplinary isolation, and achieve greater coherence across all relevant activity.

The Mental Health Branch will continue to network with key international, national and state parties involved in research to progress the mental health research agenda in Victoria.

Consideration will be given to other initiatives that contribute to strengthening collaborative effort between research bodies such as:

- Working with Mental Health Research Institute to strengthen the operation of the database registry of Victorian mental health research projects in order to enhance information sharing and better coordinate/inform the activities of clinicians interested in research.
- Proactively bringing together a number of health care organisations for six to eight months to work on improving treatment and care outcomes and reducing costs in specific areas of priority interest.
- Supporting the facilitation of research forums for the exchange of information on optimal care and treatment practices. For example, *Beyondblue* is currently funded to do this in relation to depression and related disorders.

Published by the Mental Health Branch, Victorian Government Department of Human Services, Melbourne, Victoria, Australia.

© Copyright State of Victoria, Department of Human Services, 2005.

This publication is copyright. No part may be reproduced by any process except in accordance with the provisions of the *Copyright Act 1968*.

Authorised by the State Government of Victoria, 555 Collins Street, Melbourne.

Published on www.health.vic.gov.au/mentalhealth/publications/pubs

September 2005

(050809)

