Lessons from establishing and managing multi-institution centres of research excellence

Catherine Spooner, 1,2 Lisa Lavey,3,4 and Chilandu Mukuka5

1 Centre for Obesity Management and Prevention Research Excellence in Primary Health Care
2 Centre for Primary Health Care & Equity, University of New South Wales
3 Centre of Research Excellence in Rural and Remote Primary Health Care
4 School of Rural Health, Monash University
5 Australian Primary Health Care Research Institute, Australian National University
Outline

• Background
• Partnership model
• Study design
• Results
• Next step
Background

• Trend towards funding multi-institution centres of research excellence (MICREs)
• Partnerships of universities + others
• APHCRI funded 9 MICREs in primary health care
• Others exist e.g. those funded by NHMRC
Study Rationale

- Experience of the Coordinators/Managers
- Lack of information to guide management of a MICRE
- Informal sharing of information between MICRE managers – *reinventing wheels*
Study Objectives

• Document and disseminate lessons learned by APHCRI MICREs
• Produce ‘tips’ for others planning or managing a MICRE
• Provide information to assist future funders of MICREs
Evidence-informed partnership model

1. Context & history
2. Governance structures
3. Interpersonal process - relationships
4. Administrative process
5. Type & nature of collaboration
6. Outcomes
Partnership model

Context & history
- Funding rules
- Previous experience of investigators in establishing and managing a MICRE

Governance structures
Interpersonal process - relationships
Administrative process

Type & nature of collaboration
Outcomes
Partnership model

- Governance structures
  - Committees
  - Policies
  - Agreements
  - Monitoring mechanisms
  - Leadership

- Interpersonal process - relationships

- Administrative process

- Type & nature of collaboration

- Outcomes

- Context & history
Partnership model

- Trust
- Mutuality and autonomy
- Conflict resolutions
- Sense of ‘team’
Partnership model

Context & history

Governance structures

Interpersonal process - relationships

Administrative process

Type & nature of collaboration

Outcomes

Administrative process
- Contracts
- Budgets
- Reporting to funding body
- Recruitment
- Implementation of policies & decisions of meetings
- Risk management
Partnership model

- Context & history
  - Governance structures
  - Interpersonal process - relationships
  - Administrative process
- Type & nature of collaboration
  - Level of trust
  - Degree of efficiency
  - Commitment to the partnership
  - Partner satisfaction
- Outcomes
Partnership model

Context & history

Governance structures

Interpersonal process - relationships

Administrative process

Type & nature of collaboration

Outcomes

- MICRE sustainability
- MICRE profile
- Achievement of MICRE objectives
  - Research capacity
  - Research outputs
  - KTE outputs
Study method

• Key informant consultations
  N=21
  – CRE Director / Chief Investigator  n=9
  – CRE manager/coordinator  n=9
  – Funding body: APHCRI  n=2
  – PHCRED evaluation team  n=1

• Iterative development of draft document
<table>
<thead>
<tr>
<th>Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Number invited</td>
</tr>
<tr>
<td>• Number interviewed:</td>
</tr>
<tr>
<td>– Directors</td>
</tr>
<tr>
<td>– Coordinators/Managers</td>
</tr>
<tr>
<td>– Other</td>
</tr>
<tr>
<td>• Response rate for MICREs:</td>
</tr>
</tbody>
</table>

* Includes 2 investigators; # includes 1 investigator
Data collection

1. Specific problem
2. How unique to a MICRE?
3. Impact of the problem
4. Causes or contributors to problems
5. Lessons: how to avoid or manage next time
Results: Problems

• **Budget**
  - For postdocs
  - For management & admin

• **Contracts**
  - Head Agreement
  - Partner agreements
  - In-kind support
  - Allocation of funding

• **Recruitment**
  - Delayed appointment of manager
  - Across institutions

• **Communication**
  - Communication infrastructure
  - Meeting management

• **Team**
  - Investigator engagement
  - Monitoring activities & outputs
  - MICRE profile
Did the data fit our model?
Context & history

Governance structures

Interpersonal process - relationships

Administrative process

Type & nature of collaboration

Outcomes

What caused or contributed to the problem

Lessons

- Several and varied for previous (not involving stakeholders)
- Flow chart showing the impact of the problem and solutions for each.
- Current solutions, role of each institution, process, and data.
- During the development of the model, the institutions had little experience with the problem.
- During the development of the model, the institutions had little experience with the problem.
- Funding allocation and/or process should be reassessed in an UMIC.

- After the completion of funding across the fundholder and partner institutions, the funding levels were determined by the total number of institutions involved.
- As per the suggestion, the funding levels were determined by the total number of institutions involved.
- The funding allocations and/or processes should be reassessed in an UMIC.

- The UMIC may be more open to funding the fewer number of institutions involved.
- The UMIC may be more open to funding the fewer number of institutions involved.
- The UMIC may be more open to funding the fewer number of institutions involved.

- The UMIC may be more open to funding the fewer number of institutions involved.
- The UMIC may be more open to funding the fewer number of institutions involved.
- The UMIC may be more open to funding the fewer number of institutions involved.
Example: MICRE profile

• **Challenge**: obtaining investigator support to raise the profile of the MICRE

• **Impact**:
  – Low MICRE profile – nobody knows to approach us
  – Non-compliance with contractual clause
  – Cannot report activities/outputs as MICRE achievements

• **Unique** to MICRE? Yes
Example: MICRE profile - Causes

- MICRE viewed as short-term project vs research centre
  - Limited lifespan (4 years)
  - A virtual centre, with no physical place
- Little apparent benefit in promoting the MICRE
  - Investigator careers are with their institution - affiliation
- Acknowledging affiliation not always possible
- Variable investigator engagement with the MICRE
Example: MICRE profile - Lessons

• Early in the life of the MICRE:
  – Policy/Agreement
  – Process for monitoring
  – Provide templates/tools

• During the life of the MICRE:
  – circulate a list of MICRE outputs
  – positive and public reinforcement
13 Problems documented and analysed

- **Budget**
  - For postdocs
  - For management & admin

- **Contracts**
  - Head Agreement
  - Partner agreements
  - In-kind support
  - Allocation of funding

- **Recruitment**
  - Delayed appointment of manager
  - Across institutions

- **Communication**
  - Communication infrastructure
  - Meeting management

- **Team**
  - Investigator engagement
  - Monitoring activities & outputs
  - MICRE profile
Lessons from the study

1. All 3 domains (admin, governance and relationships) are necessary for effective functioning

2. MICREs’ experienced added complexity in all 3 domains

3. Most challenges could have been prevented:
   a. during grant preparation – requires resources
   b. At commencement of the MICRE – requires sufficiently experienced, skilled and resourced coordinator appointed early
Next step

Tips document to be developed and disseminated e.g. posted on PHCRIS website

To be on a mail list for the tips document:

Catherine Spooner  c.spooner@unsw.edu.au
Lisa Lavey        lisa.lavey@monash.edu
Chilandu Mukuka   Chilandu.Mukuka@anu.edu.au
Thank you

This research is a project of the Australian Primary Health Care Research Institute, which is supported by a grant from the Australian Government Department of Health. The information and opinions contained in it do not necessarily reflect the views or policy of the Australian Primary Health Care Research Institute or the Australian Government Department of Health.