

Supplementary Material

Clinical research imperatives: principles and priorities from the perspective of Allied Health executives and managers

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Appendix 1: Survey questions

Many thanks for attending our workshop (date and place). We have collated the responses from the 5 focus groups and now ask that you review the priorities identified and add some details from your perspective as an Allied Health Executive or Manager in SA Health.

1. Firstly you discussed the Spirit Action Framework and where you perceive your current research needs to sit within this. From your responses we have interpreted several principles of research engagement that appeared consistently.

Please read the following principles. If you feel some are missing please enter more in the text box following the list.

Allied Health Research should:

- Involve multiple disciplines
- Be in partnership (for example with clinicians and researchers/academics)
- Involve close engagement with people with lived experience
- Consider quality of care
- Consider impact, that may include economic evaluation
- Intrinsically be capacity building
- Use best available evidence as a foundation
- Other....

2.a You identified topics that you would prioritise for research in your health service. We have summarised these in a general sense. Please rate each general research topic in terms of importance FOR YOUR HEALTH SERVICE from 0-10 where 0 means this topic is of no interest to your health service and 10 means this is a top priority for your service:

- Develop and validate tool/s to prioritise patients for your service

Conduct and evaluate new or alternate models of care such as:

- Substitution clinics
- Telehealth services
- Hospital avoidance programs
- Wait list services
- Care pathways including transitions of care
- Effectiveness of alternate staffing

- Evaluate the effectiveness of preventative care

- Investigate what data are currently being collected routinely by allied health, what is useful and what can be learnt from these data sets

- Investigating ways to balance clinical risk with consumer-drive practice

- Research to close the gap: research by, with and for Aboriginal people

- Measuring the general effect (impact) of allied health care across all populations (using one common tool)
- Measuring the value of allied health services for the individual and at a service level
- Research to understand allied health workforce needs, retention, support and training

2b. These are your top 3 priorities (*automatic population from 2a*). For each of them can you be more specific about the investigation in terms of:

- For which patient (client) population? (diagnostic, socio-demographic group etc)
- In what service? (diagnostic specific and or acute, rehabilitation, community etc)

3.a We are interested in how your views would change if we asked you to consider the research priorities **from a STATEWIDE perspective** rather from your own service perspective. Please rate each general research topic in terms of importance for the state from 0-10 where 0 means this topic is of no interest to your health service and 10 means this is a top priority for your service:

- Develop and validate tool/s to prioritise patients for your service

Conduct and evaluate new or alternate models of care such as:

- Substitution clinics
- Telehealth services
- Hospital avoidance programs
- Wait list services
- Care pathways including transitions of care
- Effectiveness of alternate staffing
- Evaluate the effectiveness of preventative care
- Investigate what data are currently being collected routinely by allied health, what is useful and what can be learnt from these data sets
- Investigating ways to balance clinical risk with consumer-drive practice
- Research to close the gap: research by, with and for Aboriginal people
- Measuring the general effect (impact) of allied health care across all populations (using one common tool)
- Measuring the value of allied health services for the individual and at a service level
- Research to understand allied health workforce needs, retention, support and training

3b. These are your top 3 priorities (*automatic population from 3a*). For each of them can you be more specific about the possible research program in terms of:

- For which patient (client) population? (diagnostic, socio-demographic group etc)
- In what service? (diagnostic specific and or acute, rehabilitation, community etc)

4. We would like to know a bit about you to help interpret your responses:

What is your age (5 year blocks from 25-65)

Do you identify as

- Male
- Female
- Prefer not to say

What is your discipline? (AHP options)

What is your LHN?