



Supporting Information

Supplementary figures and tables

This appendix was part of the submitted manuscript and has been peer reviewed.
It is posted as supplied by the authors.

Appendix to: Teede HJ, Johnson A, BATTERY J, et al. Australian Health Research Alliance: national priorities in data-driven health care improvement. *Med J Aust* 2019; doi: 10.5694/mja2.50409.

Table 1. List of AHRTC's and CIRH's

Advanced Health Research and Translation Centres (AHRTC's) • Brisbane Diamantina Health Partners (recognised in 2017) • Health Translation South Australia (recognised in 2015) • Melbourne Academic Health Science Network (recognised in 2015) • Monash Partners Academic Health Science Centre (recognised in 2015) • SPHERE Maridulu Budyari Gumal (recognised in 2017) • Sydney Health Partners (recognised in 2015) • Western Australian Health Translation Network (recognised in 2017) Centres for Innovation in Regional Health (CIRH's) • Central Australian Academic Health Science Network (recognised in 2017) • NSW Regional Health Partners (recognised in 2017)
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Table 2. Multistep process to engage stakeholders and establish national AHRA priorities for data driven healthcare improvement

1. Representative experts were nominated by AHRA NHMRC accredited Centres, considering discipline, geography and expertise and supplemented with key stakeholders including consumers and representatives from national data agencies 2. A literature review was completed 3. First round priorities were generated from policy, evidence-based literature review and national expert committee members 4. A policy prioritisation framework was adapted and agreed upon via electronic communication across the national AHRA data committee 5. A modified Delphi survey was circulated, pre workshop, to rank first round priorities 6. A facilitated national workshop was held in March 2018, applying a Nominal Group technique including review of the first round ranking, sense making and consolidation of priorities and small group work to apply the agreed policy prioritisation framework 7. A final independent vote across each Centre and external stakeholders generated agreed priorities and consensus was obtained on the final ranked priorities Methodological details can be found at Monash Partners (https://monashpartners.org.au/research-facilitation/resources-and-forms/)

AHRA – Australian Health Research Alliance
Council

NHMRC – National Health and Medical Research Council

Table 3. Final priorities

	Priority
1	Create virtual or actual health data research incubator hubs within the AHRTCs/ CIRHs to stimulate partnerships across academic, clinician and industry stakeholders.
2	To integrate large scale data sets to undertake research and quality improvement across the primary care, acute and sub-acute continuum
3	Building workforce capacity in data use for health care improvement through training (undergraduates/ graduates)
4	Electronic Medical Records
5	Establish a strategic international collaborative in data priority areas to leverage multiple agency, discipline, national or industry investment (e.g. with Farr Institute or ICES)
6	Registries; National initiative to reduce burden and improve governance of and access to databases/ registries
7	Identify key infrastructure needs through a National data management study. With the aim of enhancing use of secure, digitised My Health Record, linked health and social data and inter-agency collaborative research
8	Develop a National framework to maximise interoperability and value of data to research and clinical practice

AHRTC – Australian Health Research Translation Centres CIHR – Centres for Innovation in Regional Health
 ICES - Institute for Clinical Evaluative Sciences