

Successful Evidence for Policy (EfP) awards listed by host Institution

University of Galway: one award valued at €370,839

1. Lead Applicant: Dr Chris Noone

Project: Unravelling the Complexity of Rising Sexually Transmitted Infections in Ireland

Patient-Oriented Research

Award Amount: €370,839.17

**Lay summary**

Understanding and tackling the rise in sexually transmitted infections (STIs) in Ireland is important for everyone's health. Our project uses critical realism to understand why STI’s are increasing. Critical realism is a way of moving beyond obvious reasons – such as only considering STIs to be a result of people not using protection – to understanding the more subtle factors involved, like changes in society and how people live their lives.

We are a team that includes psychologists, nurses, doctors, community workers, researchers, and policymakers.

Our project will involve four studies:

1. Looking at What's Happening Around the World:

We'll study research from other countries where STIs are rising. This will help us understand things like how testing for STIs, new treatments, and attitudes towards sex affect the number of infections.

2. Finding Out What's Happening in Ireland:

We'll also look at data specific to Ireland to investigate the impact of different factors on the rates of STI’s in various communities around the country.

3. Interviewing People from the Most Affected Communities:

We'll talk to people from the communities that have experienced the biggest increases in STIs, specifically young people, gay and bisexual men, and recent immigrants, to understand their experiences with condoms, getting tested for STIs, and other STI prevention strategies.

4. Mapping the Whole Picture:

Working with community organisations and policy makers, we will map how the different factors we learn about interact to affect STIs in Ireland.

Throughout the project, we'll involve people from communities affected by STIs in making decisions about our research. We will also work with relevant policymakers, healthcare workers, sexual health experts, and community organisations to make sure the lessons learned in this project help them develop practical ways to improve sexual health and consequently, help prevent STIs in Ireland.

TCD Trinity College Dublin: three awards with a total value of €952,944.13

2. Lead Applicant: Professor Sara Burke

**Project: Producing a Health in Transition health system review (HiT) for Ireland as part of the European Observatory on Health Systems and Policies HiT series**

Patient-Oriented Research

Award Amount: €223,896

**Lay summary**

This project is about creating a new, detailed definitive report on Ireland's health system, updating in light of changes that have happened since the last such report in 2009. Ireland has experienced economic ups and downs, a growing and ageing population and the COVID-19 pandemic. Analysing the impact of these events is important since it can help to inform health system delivery and also our reform plan, called Sláintecare, which aims to make healthcare better and more accessible for everyone in Ireland. The study brings together a team of experts, using data from Ireland and other countries to better understand how Ireland's health system works and what needs to be improved.

The project is split into four main parts: researching the current situation (WP1); making sure all the information is accurate (WP2); figuring out what information is missing (WP3); and communicating with lots of different people involved in healthcare to get their perspectives (WP4). By doing this, we will provide evidence on which to make Ireland's health system better for everyone who uses the service - the public, patients, carers, healthcare workers. This report could also help other countries learn from what we're doing here in Ireland, showing how research can help shape better health policies.

3. Lead Applicant: Dr Laura McCullagh

**Project: The development of data infrastructures to support on-going analyses of the impact of reimbursed medicines on healthcare service utilisation in Ireland**

Patient-Oriented Research

Award Amount: €354,348.25

**Lay summary**

In Ireland, the current process for the assessment of the expected value of new medicines involves predictions, made by experts, about how the medicines are likely to affect patients' health outcomes and how much the medicines will cost the health-state payer. According to this assessment a recommendation is made, to the state decision makers, on whether the medicine in question is likely to be effective and to provide value for money. The decision maker uses this information when deciding if the medicine should be funded for use by patients in Ireland. However, these predictions are often associated with uncertainty and the true value of the medicine is often not measured after if has been funded for use.

This research programme will use national databases to assess the health outcomes actually experienced by patients and the costs actually incurred by the health-state-payer. We will bring together data from the national medicines-funding database (PCRS), the National Cancer Registry of Ireland (NCRI) and the Irish Longitudinal Study of Aging (TILDA) to inform the use, health outcomes and costs associated with medicines in Ireland. The main health conditions, for close examination here, will be cancer and chronic diseases. These are considered to be the areas of highest spend on medicines.

The research team includes experts from Trinity College Dublin, the National Centre for Pharmacoeconomics, the NCRI, TILDA and national and international collaborators. The aim of the research is to inform national decision-making in relation to sustainable medicine policies. We will do this by providing evidence on the predicted and realised health outcomes associated with new and existing medicines. The team will investigate this over five work packages. In the final work package, we will deliver recommendations that take into account both national and international evidence.

4. Lead Applicant: Dr Irina Kinchin

**Project: Optimising PrEP delivery in Ireland: A model for an integrated digital-hybrid clinical service enhancing Value for Money in healthcare**

Patient-Oriented Research

Award Amount: €374,700.03

**Lay summary**

Context and gap: The introduction of new treatments can enhance health and benefit society, yet their success depends on developing effective and efficient service models. For example, Pre-exposure Prophylaxis (PrEP) has enhanced HIV prevention. However, in Ireland, service capacity and access pose challenges to equitable service implementation. Drawing from the experiences of Ireland’s national home Sexually Transmitted Infections (STIs) testing and the COVID-19, adopting a hybrid-digital approach could enhance PrEP service delivery and offer lessons applicable to other healthcare settings.

Specific aims:

• Develop a new digital-hybrid, online and in-person, model of PrEP care to improve service capacity, efficiency, and value for money.

• Explore how this model can be applied to other healthcare services in Ireland to maximise the potential benefits and inform standards for digital healthcare.

Approach: We will work with SH:24, a leader in online sexual health services, users, providers, designers, and the Department of Health, using policy analysis, routinely collected data, surveys, and interviews to:

• co-develop the digital-hybrid, online and in-person, PrEP care model;

• pilot in two locations (Dublin and Cork) and gather feedback; and,

• evaluate and refine, analysing process and outcome data, including cost, patient, staff, and organisational experiences to refine the model for broader use and transferability in other healthcare settings.

Impact: By making PrEP services more accessible and efficient, this project offers to overcome capacity and access challenges providing equitable access to PrEP and reducing HIV infections in Ireland. It sets the stage for transforming other healthcare services with hybrid-digital solutions, making the healthcare system more responsive to the needs of the modern patient. Ultimately, this project will demonstrate how integrating digital services in healthcare can lead to better patient experiences, improved health outcomes, and more efficient use of resources

RCSI University of Medicine and Health Science: two awards with overall value of €729,064

5. Lead Applicant: Professor Helen French

**Project: Advancing Practice –impact of interface musculoskeletal triage embedded in integrated pathways on access to care, clinical and cost outcomes, and potential for future implementation (MSK-ACCESS)**

Patient-Oriented Research

Award Amount: €373,589

**Lay summary**

Although musculoskeletal conditions including back pain and osteoarthritis can be managed in primary care by GPs/other health and social care professionals (HSCPs), many patients are referred to rheumatology/orthopaedic consultants in hospitals. Due to long orthopaedic and rheumatology waiting lists, and growing understanding that HSCPs have the skills to manage the majority of these conditions, the Health Service Executive (HSE) created ‘interface clinics’. These interface clinics, run by HSCPs (physiotherapists/occupational therapists), use advanced skills to assess patients and decide best management. Research shows that most patients in interface clinics do not need to see rheumatology/orthopaedic consultants.

We want to evaluate three newly established interface services for musculoskeletal conditions, to help improve the patient journey through the Irish health system and reduce orthopaedic/rheumatology waiting times. We also want to identify what specific advanced skills are used by the HSCPs.

This research has three stages, with public patient involvement throughout.

1. We will invite 517 patients attending three different interface services to complete questionnaires about their pain, everyday activity, quality of life and healthcare use study start, 3-months and 6-months later.

2. We will interview some patients about their experience (what worked/didn’t work well) of attending the interface service, and the HSCPs and administrative staff in the clinics about their experiences in running the service. We will interview GPs about their experience of referring patients into these clinics, as well as people working in HSE management about considerations for rolling out these out nationally.

3. We will assess what advanced skills the HSCPs use in the clinics.

This information will be used to provide recommendations to the Department of Health on how to best roll out these services nationally and identify the need for a specific salaried grade to recognise the high skills used by HSCPs in these roles.

6. Lead Applicant: Professor Jan Sorensen

**Project: Exploring value of digital health applications in stroke care**

Patient-Oriented Research

Award Amount: €355,475.21

**Lay summary**

Healthcare decision-makers face immense pressure to provide high-quality healthcare amidst population growth and technological advancements. This surge in demand, coupled with increased costs due to higher specialisation of care and technology, necessitates a strategic approach to maintain quality while benefiting patients. Digital health, encompassing various computer and electronic communication systems like electronic patient records, telemedicine, personalized monitoring, and artificial intelligence, holds promise in revolutionizing clinical care, enhancing patient outcomes, and improving healthcare productivity and efficiency.

Despite its potential, the escalating strain on healthcare resources requires a transparent basis for investment decisions to maximize value. This project aims to explore the potential value of digital health, focusing on stroke care as an exemplar case due to its significant impact on patients, families, and healthcare resources. Stroke care is witnessing advancements in digital health solutions that benefit patients, staff, and society.

This project will identify existing and forthcoming digital health solutions for Irish patients across the stroke trajectory, including primary prevention, acute hospital care, and community and long-term care. It will pinpoint solutions with particularly promising outcomes and assess their value under different circumstances. Given the rapid evolution of digital health, obtaining empirical evidence for robust evaluations is challenging. Thus, a value assessment framework will be developed to gauge the effectiveness of digital solutions in the absence of high-quality evidence. This framework will integrate existing empirical data with mathematical and statistical methods to model the value of digital health solutions.

Using this framework, the project will evaluate a range of exemplary stroke applications, considering safety, effectiveness, cost-effectiveness, budget impact, and implications for health equality and equity. By examining the value proposition of digital health solutions in stroke care, the project aims to inform decision-makers on strategic investment choices for delivering high-quality healthcare while optimizing resources.

UCC University College Cork: one award with a total value of €369,235

7. Lead Applicant: Professor Margaret McGrath

**Project: A person-centred evidence informed approach to management of therapy waiting lists in primary care.**

Patient-Oriented Research

Award Amount: €369,234.72

**Lay summary**

Primary care therapy services, including occupational therapy, physiotherapy, psychology and speech and language therapy are provided through 96 community health networks (CHNs) across 6 health regions in Ireland. Demand for therapy is increasing, and CHNs must balance the needs of the communities they serve with the availability of therapists. Right now, it is not clear how community health networks achieve this balance. People report different experiences across different therapies and locations. Some therapies are available as needed while others have lengthy waiting times. It is difficult to access information about how waiting lists and patients are prioritized. There is no universal approach to waiting list management for therapies in primary care in Ireland.

Our research project, completed over 2 years, will address this problem. We will begin by documenting, for the first time, how different CHNs currently manage waiting lists for occupational therapy, physiotherapy, psychology and speech and language therapy. We will select 6 CHNs (1 from each health region) and will work with community network managers, therapy managers, clinicians, administrators and patient representatives to accurately map current processes so that we can identify areas of excellence and understand barriers to successfully managing waiting lists.

We will identify examples of best practice in managing waiting lists and prioritizing therapy patients in primary care. We will do this by systematically reviewing what is already known about these topics in other contexts. We will use this information to provide evidence for developing waiting list management protocol for therapies in primary care.

Finally, we will collaborate with key stakeholders to develop evidence informed, person centred waiting list management protocol(s) for occupational therapy, physiotherapy, psychology and speech and language therapy in primary care. These protocols can be used to inform further service planning and development in primary care.

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