Where we’ve been, and what we’ve accomplished

Last newsletter, we wrote to say that the research team was beginning to visit HCI teams in the LHDs. Now, only 5 months later, our visits are complete! In this short amount of time, Sisse, Victoria and Katie have visited **30 offices across all 15 LHDs, for a combined total of 338 hours of fieldwork.** While this is a lot of research hours, this also reflects the time that health promotion staff across NSW have graciously shared with us. We have participated in team meetings, attended school visits, and witnessed PHIMS glitches and successes.

We want to note how incredible it is to have 100% sign-up. We have visited with every LHD in New South Wales. That sort of engagement in a research project is rare, and speaks to the interest in this work, and the dedication that HCI and HP teams in NSW have in engaging in and learning from collated insights and experience

A story at each LHD

At each LHD, we have uncovered a part of the story about HCI that has not only deepened our understanding of PHIMS, but of the values that form the bedrock of health promotion practice. Each team and staff have been generous with their insights, knowledge, and their trust – which has allowed us to learn so much more than we expected.

Now it is our turn to make sure that we’ve gotten the story right, and to work-out how our learnings can be used best to shape health promotion practice within NSW, and the field at large.
Next Steps:

Research with Policy-Level Decision Makers

For us, the real work is just beginning. We have already started reviewing and analysing data to identify insights, patterns, and determine the next steps. Two students will be joining to help with the analysis. We will also undertake interviews policy-level decision makers to better understand their perspectives and struggles.

This process will be a dynamic one that involves our partners within NSW Health, as well as LHDs interested in further engagement. To be a success, we must balance both our learnings from the LHDs and the policy-level to craft a shared understanding of problems, solutions, and steps forward.

We’re getting ready for conversations about expected and unexpected findings. We are acutely aware of the workloads you are managing, and so aim to keep you informed of our progress without being intrusive.

We will stay in touch with HCI coordinators about the best way to report findings to you as we progress.

From Broken Hill to Bondi, Health Promotion staff have exchanged insights, resources, lunches and commutes with each of us. Both on a personal and professional level, we cannot thank you enough for the openness with which you’ve welcomed us.

This opportunity is unique.

There does not seem to be any place else in the world using an e-monitoring system to capture such massive program scale-up in prevention over a sustained period of time.
Would you like to participate in analysing, reflecting or writing? Let us know!

Exploring new ways to convey differences in contexts across LHDs

Thanks to the staff in one LHD who have been helping us pilot possible ways to measure local practice-based social networks as part of this project.

We’ve observed, through working with all of you so far, that teams hold and build capacity for health promotion through their local and cross-LHD relationships. We’d like to see if we can quantify (and, of course, anonymise) the nature and extent of those relationships, so that they eventually become a more valued part of the prevention system.

We’ll let you know more about this work as we get further along. We’re building towards a 10 minute on-line social network analysis possibly being the last piece of this project. And it can be quite fun!

Thanks again for being a part of this! Best wishes,

Katie, Sisse, Victoria and Penny on behalf of the TAPPC/NSW Health collaborative team