GenV Rapid Evidence Assessment: Large Research-led Partnerships

Executive Summary

(See full paper)

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Publication date

May, 2020

Series Number

2020-02

Abstract

This rapid evidence assessment aimed to identify the enabling and inhibiting factors that can contribute to the success or otherwise of large research-led partnerships. Its findings are informing how GenV works with its partners and collaborators across sectors and disciplines to optimise their functioning and likely impact.

Citation

Aboriginal acknowledgement

The Murdoch Children's Research Institute acknowledges the Traditional Custodians of the land upon which we are situated. We pay our respect to their Elders past, present and emerging.

Executive summary

Generation Victoria's vision is to help solve complex issues affecting children and adults today and in the future. It conceptualises an entire Australian state becoming a single platform to enhance the speed, capacity and connectedness of research. The GenV 2020s Cohort will be open to all 160,000 newborns born over two full years from 2021 and their parents. With consent, it brings together new and existing data and biospecimens across time and generations. This rich fabric can then support diverse methodologies including discovery, trials, registries, geospatial and health services research.

GenV is partnering with researchers, policymakers and practitioners in Victoria, Australia and internationally in the quest to find practical, testable and translatable solutions that will help children and parents everywhere.

Rationale

This rapid evidence assessment was undertaken to identify the enabling and inhibiting factors that can contribute to the success or otherwise of large research-led partnerships and directly inform the design and implementation of the Solutions Hub, a critical knowledge translation element of GenV. The results of the assessment will inform the design and implementation of GenV partnerships, aiming to optimise their functioning and likely impact.

Methods

The research question was defined as: *'For large research-led partnerships, what factors (both enabling and inhibiting) affect their function and impact?'* In May 2018 searches were conducted in the databases MEDLINE, Cochrane and Scopus. Publications were included if they were published in English from 2008 onwards and reported enabling and/or inhibiting factors that affected the functioning and/or impact of the partnership. We were interested in large research-led partnerships aiming to have a population or system level impact. Therefore, we excluded publications about partnerships where: a) only researchers were involved, b) the only non-research partners were consumers/clients, c) the partnership existed only for a single project (discrete activity), and/or d) the partnership existed solely for quality improvement purposes at one institution.

Publications were first screened on title and abstract. Due to the high volume of publications identified (n=3725), at second stage screening we added three additional exclusion criteria: publications from non-OECD countries, partnerships that existed for the purpose of communities conducting their own research, and publications reporting on more than one partnership where not all partnerships appeared to meet the inclusion criteria (e.g. one partnership was before 2008 and one after).

We developed a coding scheme based on published schemes to extract data structured around four thematic areas (see Box 1).

Search results

After removing duplicates, 3725 potentially relevant publications were screened on title and abstract, including six publications that were identified from a review paper rather than database searches. Of 327 (9%) publications appearing to meet the inclusion criteria, we were able to source 306 full text documents. At second stage screening 296 publications were excluded, including 95 that did not meet the added exclusion criteria, leaving 31 publications for inclusion in the rapid evidence assessment.

Publication results

The 31 publications described enablers (n=27) and/or inhibitors (n=22) for at least 42 large research-led partnerships and are summarised in Table 1. Publications most commonly described partnerships in the health sector (n=24) and were based in the United Kingdom (UK; n=9), Canada (n=7) and Australia (n=6). Six described Collaborations for Leadership in Applied Health Research and Care (CLAHRCs), a specific collaboration type from the UK health system. Partnerships were most often assessed by interviews (n=15), authors' own knowledge/reflections (n=15), and analysis of existing documents and data (n=12).

Table 1: Most common enabling and inhibiting factors

Enabler (n=27)	Publications (n)	Inhibitor (n=22)	Publications (n)
Shared vision, mission and/or goals	12	Lack of shared vision, mission and/or goals	8
Feelings of trust between partners	10	Different expectations for timelines	8
Frequent/regular communication	10	Differing expectations of partners for partnership	7
Flexibility in approaches/implementation	10	Partnership participation takes too much time/more than expected	6

Enablers and inhibitors by theme

The majority of enabling and inhibiting factors were identified under the themes that were developed as part of the coding framework (Box 1) with most under the themes of Dynamic Between Partners, Partnership Processes, and Partnership Structure and Design (Figure 1). The most common enablers and inhibitors under each of these themes are further described below.

Figure 1: Inhibiting and enabling factors by theme
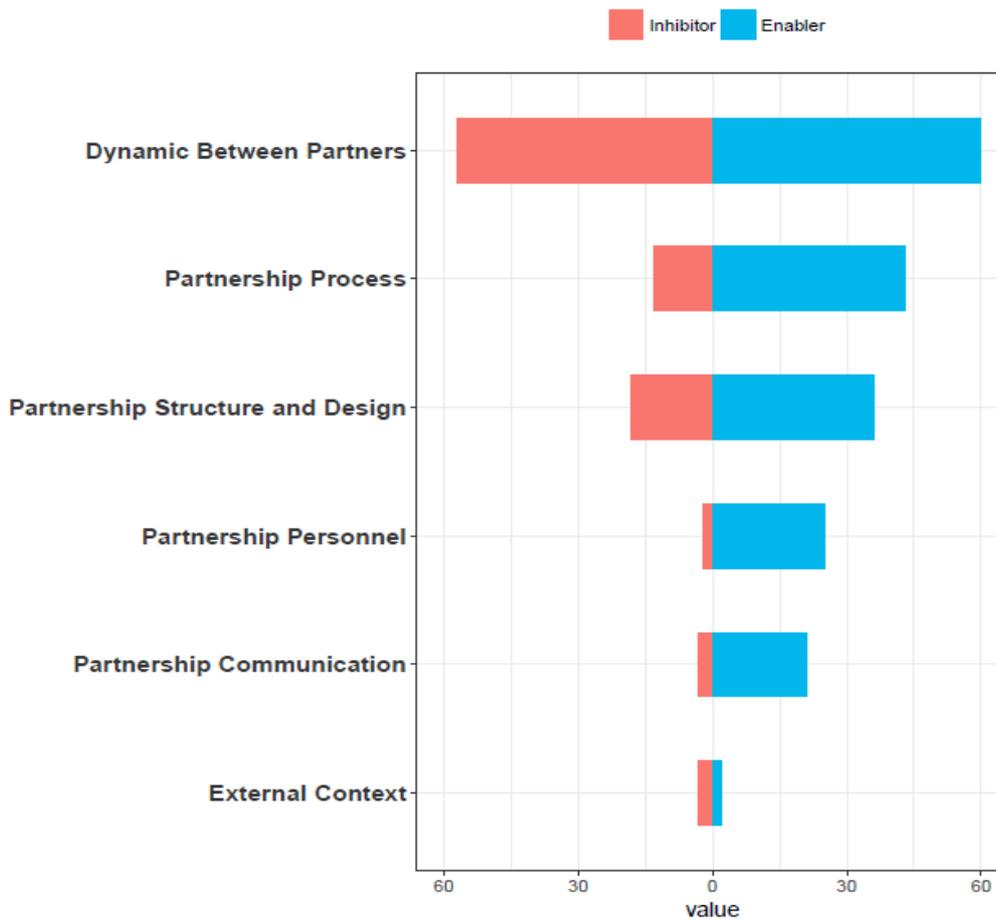
Dynamic between partners

Having a shared vision, mission and/or goals (n=12) was the single most common inter-organisational enabler identified, while *lack* of a vision was frequently identified as a partnership inhibitor (n=8). Relationships between partners, with enablers including feelings of trust (n=10) and respect (n=5) and understanding or appreciating other partners' perspectives (n=8) was a similarly common finding.

'...it was essential to engage and maintain a shared vision of the potential benefits of collaboration over a long period of time' (Payne)

Not understanding or appreciating these perspectives was a frequent inhibitor (n=5).

Partnership structure and design

Common enablers included previous experience working together (n=7) and adequate funding to support the partnership (n=5). The balance and clarity or lack thereof of governance structure, roles and functions was identified as inhibiting and enabling factors.

Partnership processes and external context

Strong partnership leadership/governance was identified as an enabler in eight publications. Frequent/regular communication was identified as an enabler (n=10) and infrequent communication (n=3) as an inhibitor. The most common process-related enablers were flexibility in approaches/implementation (n=10) and formal operational protocols/processes (n=8).

'Participants acknowledged that regular, multi-modal communication was an important aspect of successful partnering' (Sibbald)

The most common process-related inhibitor was time – that participation in the partnership took too much time, or more time than expected (n=6). External contexts affecting partnership functioning and impact were identified in few publications.

Lessons for GenV

There are some critical key learnings that have emerged for GenV and in particular the Solutions Hub. There are also a number of implementation approaches that can activate these learnings. These include:

1. Shared outlook and commitment

- A clearly articulated GenV Vision communicated over the life of the partnership
- Agreement on the purpose and expected outputs and outcomes of the partnership

2. Partner expectations are clear and acceptable

- An explicit agreement as to 'what' each individual and organisations will contribute to the partnership in regards to roles, time and resources
- Ensuring that adequate time is allocated to complete partnership work, while also ensuring that this time is not overly onerous, or perceived as such
- Outlining what benefits partners will obtain from partnership participation (for example improved skills or access to training)

3. Establishing and nurturing relationships

- Allowing enough time to 'get to know each other' at all stages of the relationship
- Being explicit about 'how' the partners will work together

4. Formal processes and flexibility

- Dedicated staff to operate partnerships
- Standardised principles or practices of working e.g. Terms of Reference

Conclusion

This rapid evidence assessment identified a diversity of enablers and inhibitors of large research-led partnerships. Likely limitations include probable omissions of some eligible partnerships and gaps in how partnership assessments were reported. However, these results broadly reflect the key partnership enablers and inhibitors identifiable within published partnership assessments. The findings of this assessment have immediately informed and will continue to inform the detailed planning for GenV partnerships. We hope it is also useful to other large research-led partnerships in OECD countries.