

Research Framework



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Context

BreastScreen Victoria (BSV) operates the Australian population-based breast cancer screening program BreastScreen Australia for the Victorian community. We invite eligible Victorians aged 50 to 74 to have a free breast screen (mammogram) every 2 years. As an organisation, we aim to reduce the impact of breast cancer and save lives through early detection.

Our primary focus is the continued success of our program. However, we recognise the vital role that research plays in improving the quality of our service. We support collaboration with researchers and share our data for research that delivers better health outcomes for the community.

We contribute to research by:

- Helping to define research questions
- · Sharing our data
- Collaborating on research projects and publications
- Applying research outcomes to our program

Client engagement is central to this Research Framework. We strive to support research that champions client needs and outcomes. At BSV, we help researchers engage with clients through our Consumer Network and Advisory Groups. Further, we firmly support Aboriginal and Torres Strait Islander self-determined research. Research impacting Aboriginal communities should follow marra ngarrgoo, marra goorri – the Victorian Aboriginal Health, Medical and Wellbeing and Research Accord, which promotes self-determined, Aboriginal-led and culturally appropriate research.

We developed this Research Framework in consultation with key stakeholders, including BSV clients. It reflects our Strategic Plan 2022-2026 and aligns with policies relating to the BreastScreen Australia program and other relevant strategies, such as the Victorian and Australian Cancer Plans.



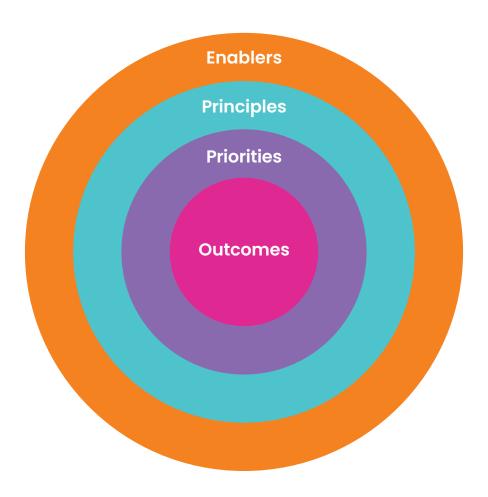
Aim

To maximise the benefit of research on our populationbased breast cancer screening program which aims to reduce the impact of breast cancer and save lives through early detection.

This Framework details the research enablers, principles and priorities that align with the desired outcomes of our program. It is a tool for researchers, research institutions, funding bodies and partners to see the areas of greatest need and interest to BSV.

The framework can be applied to:

- · Directing research activity to improve our program and services
- · Supporting research grant applications and data requests
- Prioritising BSV resources to support research
- Strengthening collaboration between BSV, researchers, consumers, clinicians and policy-makers

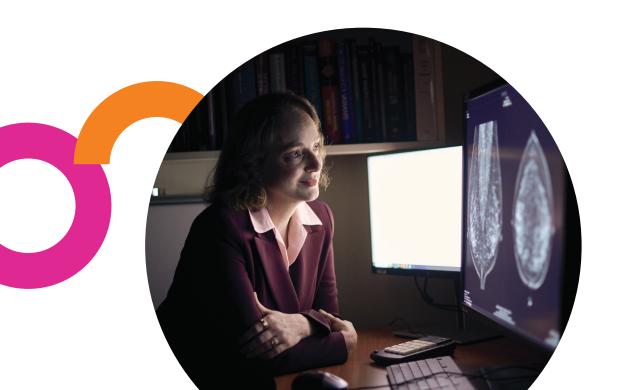


Enablers



The following enablers help us to support research – from leading and partnering on projects to providing data.

Enablers	Overview	
Systems and data	High-quality, comprehensive and secure data and systems are fundamental to research. We have over 30 years of longitudinal data collected against national standards and frameworks, which means our data is a rich source of information.	
Cost recovery and fair return on investment	As an organisation, we release data and images for research on a cost-recovery basis. Costs include human resources, infrastructure, consumables, system development, support, maintenance and licence costs. We do not profit under this model. However, should the research activity be commercialised, we maintain the right to consider a fair return on investment where appropriate.	
Governance and ethics	We convene a Research Advisory Committee to oversee activities that enable research, including the provision of data. All approved activities must comply with this Framework and the relevant privacy, ethical and legislative requirements. They must also factor in client and operational impacts. Our support is subject to Human Research Ethics Committee (HREC) approval.	
Partnerships	Research partnerships are vital to generating relevant research, supporting knowledge translation and making sustainable changes. We regularly collaborate with researchers, research institutions, BSV services, consumers, clinicians and policy-makers.	



Principles



The following principles underpin the research we support to ensure it aligns with our vision and strategic priorities.

Principles	Overview	
Client first	When supporting research, we always put our clients first. We consider what is most important to our clients and work to achieve the best outcomes for the community. We support research where consumers are involved in the whole research process, from the initial stages to the interpretation of results.	
Equity and inclusion	We believe that research must actively address disparity and involve priority groups or communities, including Aboriginal and Torres Strait Islander, culturally and linguistically diverse, LGBTIQ+, rural and regional, socio-economic disadvantaged and people with disability.	
Translation	We aim to support research that has a clear pathway to translating research findings into policy and service delivery. This process includes communicating any relevant changes with consumers.	
Impact	We carefully consider the impact of research projects on our program and its operations, as well as on clients, the community and the broader health system. Some considerations include population health outcomes, cost-effectiveness, workforce and service impacts. We also avoid duplicating existing or ongoing research.	
Collaboration, consultation and co-design	We expect that researchers will work closely with BSV services and clients on any research projects that may impact on them. This process involves close collaboration, consultation and co-design with affected groups. Further, research impacting Aboriginal communities should be self-determined, Aboriginal-led and culturally appropriate.	



Priorities



The following research priorities have the highest potential to translate into policy change and improve our service delivery, leading to better breast cancer outcomes.

Each priority aligns with elements of our breast cancer screening pathway, from prevention to screening and assessment.

Priorities	Screening pathway	Overview
Understanding and reducing breast cancer risk	Prevention	Primary prevention is the best chance to alter long-term trends in incidence and mortality.
Social, cultural and behavioral factors that influence participation	Screening	The state-wide breast cancer screening participation rate is currently at 49.5% of the eligible population (2020-2022 BSV program data). This figure is lower in some priority population groups, including Aboriginal and Torres Strait Islanders, culturally and linguistically diverse, LGBTIQ+, rural and regional, socioeconomic disadvantaged and people with disability. Improving social, cultural and behavioural factors such as client experience, cultural safety, community engagement and health literacy will strengthen our program. They will help us to meet client needs and achieve equitable screening participation rates and cancer outcomes.
Risk- based breast cancer screening	Screening	Interest in a risk-based, personalised approach to breast cancer screening in Australia is increasing. This interest is driven by a growing body of evidence on breast cancer risk assessment and risk-based management, new imaging technologies, Artificial Intelligence (AI), genomics and community awareness about breast cancer risk factors such as breast density. Projects such as the Roadmap for Optimising Screening in Australia – Breast (ROSA) are starting to provide direction on the most appropriate changes we can make to our program.
Breast cancer diagnostic assessment	Assessment	Assessment and diagnosis after a breast screen (mammogram) that shows signs of cancer is a critical step in the screening pathway. We operate Reading and Assessment Services that deliver this crucial service across the state. There are always opportunities to improve the assessment and diagnosis process. Some examples include enhanced biopsy and imaging techniques and the management of 'borderline lesions' detected during breast screening.
Improving Aboriginal and Torres Strait Islander women's health	All	Breast cancer disproportionately affects Aboriginal and Torres Strait Islander Victorians. Evolving breast cancer screening services to better meet the needs of our Aboriginal communities is one of our priorities; this includes improving access, enhancing cultural safety and increasing screening participation rates.

Further information

Client consent and privacy

All BSV clients consent for their de-identified data to be used for research, to evaluate and improve screening services and to investigate breast disease. All research projects and activities are reviewed and approved by our Research Advisory Committee, which only allows data release for projects with HREC approval. For further information, read our <u>BSV Privacy Policy</u>.

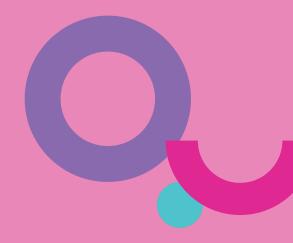
Project management methodology for research projects

Translational and interventional studies will be required to meet minimum requirements for project management. The project can choose whether to leverage BSV's project management methodology and templates or utilise existing project processes.

Contact information

For further information regarding our research, this research framework or how to access our data, visit www.breastscreen.org.au/research or email research@breastscreen.org.au/research or emailto:





RESEARCH FRAMEWORK

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In the spirit of reconciliation, BreastScreen Victoria acknowledges the Traditional Custodians of country throughout Victoria and their connections to land, sea and community. We pay our respect to Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today

There are many terms to describe Aboriginal and/ or Torres Strait Islander peoples living in Victoria. This includes First Nations People, Sovereign Nations, Indigenous Australians, Traditional Owners etc. In this report, to be inclusive and respectful, we have chosen to use the term Aboriginal.

BreastScreen Victoria is committed to ensuring we offer a welcoming, safe and accessible service for all eliaible Victorians.

BreastScreen Victoria gratefully acknowledges the support of the Victorian Department of Health and the Australian Department of Health and Aged Care.



