HEALTH AND WELLBEING IMPACT

Creating new drugs and treatments and developing new therapies. Improving education and training, public awareness, and access to health care provision, as well as policy, legislation, standards or guidelines. Beneficiaries may include individuals, groups or targeted populations whose health and wellbeing outcomes have been improved or enhanced, or where potential harm has been mitigated.¹⁶ Possible indicators may include, but are not limited to:

Output Indicators

- Better public (national and international) health and wellbeing outcomes due to new or improved interventions, services, drug/treatments/therapies, diagnostic or medical technologies, care practices or processes
- Improved health and wellbeing at an individual level
- Public awareness of a health risk or benefit has been raised.
- Reduced inequalities in health status and health and social care utilisation through information and policies targeting vulnerable/disadvantaged groups
- Increased efficiency in the delivery of public health and social services, as well as health-related interventions and services delivered by NGOs and others in the community
- Decisions by public, private and voluntary stakeholders informed by academic evidence
- Improved quality of life due to improved health and wellbeing services/ interventions, products or processes
- Reduction in costs and delays for treatments, interventions, practices, and processes due to newly developed or improved alternatives (e.g. new treatments, interventions, drugs, devices or diagnostics)
- Patient health outcomes have improved through, for example, the availability of new drug, treatment or therapy, diagnostic or medical technology, changes to patient care practices, or changes to clinical or healthcare guidelines.
- Public health and quality of life has been enhanced through, for example, enhanced public awareness of a health risk, enhanced disease prevention or, in developing countries, improved water quality or access to health and social care.
- Decisions by a health service or regulatory authority (to take, or not to take action) have been informed by academia.
- Development of policy and practice with regard to medical ethics, health services or social care provision.
- Increase in number of individuals engaging in healthy lifestyles.

Outcome Indicators

- Measures of improved clinical outcomes, public behaviour or health services (lives saved, reduced infection rates).
- A new clinical or lifestyle intervention (e.g. drug, diet, treatment or therapy)
 has been developed, trialled with patients/users, related or other groups (e.g.
 community samples), and definitive (positive or negative) outcome demonstrated.
- · A new diagnostic or clinical technology has been adopted.
- Proof of changes in care and educational practices informed by academia
- Proof of changes in clinical, dietary, health or social care guidelines informed by academia
- Proof of changes in health or social care training guidelines informed by academia
- Disease prevention or markers of health have been enhanced by academia.
- Mitigation of risks to health or well-being through preventative or early intervention services and measures
- Examples of influence or shaping of relevant legislation.
- Examples or influencing policy or practice leading to improved take-up or use of services.
- Examples of improved provision or access to services.
- Increase in number of participants enrolled in clinical and community-based trials
- · Development or adoption of new indicators of health and wellbeing.
- Qualitative feedback from patients, users, partners or participants in academic projects or attendees at academic events.

¹⁶ Based on Campus Engage Framework (http://www.campusengage.ie/wp-content/uploads/2018/12/Campus_Engage_Impact_Framework_May_2018_Web.pdf) and Research Excellence Framework (https://www.ref.ac.uk/publications-and-reports/panel-criteria-and-working-methods-201902/)