

RESEARCH PROGRAM ACTIVITY REPORT

2014 - Allied Health

The Allied Health Clinical Research Office at Eastern Health was established as a joint initiative between Eastern Health and La Trobe University. Many of the research activities receive direction through the Allied Health Research Committee, a committee with representatives from programs, allied health disciplines and our research active clinicians. The committee aims to strengthen the evidence base of allied health practice by undertaking, mentoring and facilitating collaborative and multi-disciplinary clinical research projects across Eastern Health.

As well as conducting research, the Allied Health Clinical Research Office has an important role in research promotion and research training. A feature in 2014 was our Allied Health Research Forum held at Wantirna in May 2014, with guest speaker Professor Karen Dodd. At this year's forum 17 of our allied health clinicians presented their work in the format of a 3 minute project competition. The Allied Health Research Newsletter is published quarterly. Research Clinics were also held across Eastern Health sites. This is a forum where a clinician with a research idea meets with an experienced clinical researcher. Research training opportunities in allied health include the Allied Health Research Training Program called Stepping into Research, a program to introduce clinicians to research by completing a systematic review. In 2014 a key development has been the collaboration between social work and Dr Helen Cleak from La Trobe University, aimed at promoting social work practitioner research.

In 2014, highlights included the large number of publications from allied health plus a number of higher degree completions. Casey Peiris graduated with a PhD for her research on providing additional allied health services for inpatient rehabilitation. Sander van de Water graduated with a PhD for his research on developing an outcome measure for people recovering from shoulder fracture. In addition, Jacinta Re and Tass Kostopoulos both graduated with Masters of Public Health.

Our team in 2014

The Allied Health Research Committee:

Nick Taylor	Professor of Allied Health EH (Chair)
Katherine Harding	Research Fellow
Glenda Kerridge	Social Work
Anne Thompson	Ambulatory and Community Services
Jason Wallis	Physiotherapy
Michelle Kaminski	Podiatry
Sheridan Clugston	Dietetics
Alison Wilby	Psychology
Judi Porter	Dietetics
Euan Donley	Mental Health
Sarah Johnson	Speech Pathology
Anna Joy	Occupational Therapy

The research outputs from Allied Health staff in 2014 reflect the continued growth in quality and quantity of research activity amongst allied health clinicians. Our research themes of community integration, health service delivery and expanded roles for allied health continue to be a focus of our research activity. We continue to build on our research base through active promotion of research opportunities amongst allied health staff, provision of training and support for clinicians at all levels of research participation, and pursue opportunities for external funding to support future projects.

Awards achieved 2014

Jude Boyd. Best 3 minute presentation at the Eastern Health Research Forum in December 2014.

Jorja Collins. Highly commended for her poster at the Eastern Health Research Forum in December 2014.

Amy Dennett. Judge's prize for best presentation at the 2014 Eastern Health Allied Health Research Forum, May, 2014.

Susie Griffiths. People's choice prize for best presentation at the 2014 Eastern Health Allied Health Research Forum, May, 2014.

Mark Guerra. Best presentation at the Victorian Allied Health Conference, March 2014.

Michelle Kaminski. Best student presentation at the Australian Podiatry Association (Vic) Conference, The Grand Hyatt, Melbourne, 20-22 March 2014.

Janice Lai and Emma George. Highly commended prize for their poster at the National Dietitians Association of Australia Conference in Brisbane.

Judi Porter. Awarded a NHMRC Translating Research into Practice (TRIP) fellowship to commence in 2015.

Kate Young. Best poster at the APAC Healthcare Forum in September, 2014.

Notable funding 2014

Improving access for community health and subacute outpatient services. NHMRC Partnership Grant (Eastern Health, La Trobe University, Department of Health) **Taylor N, Harding K, Watts J, Leggat S, Karimi L, Kent B.** \$626,292.

Can Occupational Therapy hand therapy led clinics have an impact on outpatient clinic flow, and improve patient functional status? Department of Health. **Tawse S, Young N, Leong A, Harding K.** \$25,000.

Does a walking program benefit people with severe knee osteoarthritis? Research Focus Area: La Trobe Sport Exercise and rehabilitation LASER **Taylor N, Wallis J, Webster K, Levinger P, Fong C, Singh P.** \$24,704.

Participant-selected music to increase physical activity following cardiac rehabilitation. (LASER La Trobe Sport Exercise and Rehabilitation) **Taylor N, Clark I.** \$24,200.

The impact of using video based home exercise programs along with electronic reminders on home exercise programs for patients after stroke. Eastern Health Research Foundation Grant. **Emmerson K, Joy A, Harding K.** \$11,637.

Malnutrition in Cancer Phase 2. Victorian Department of Health. **Eastern Health.** \$40,000.

Implementation and evaluation of blended learning initiatives in food service management to enhance student learning. Monash University Faculty of Medicine, Nursing and Health Sciences – Learning and Teaching Research Grant 2013. **Porter J, Truby H, Palermo C.** \$15,000.

Research projects in progress in 2014

- 1. Introducing an adapted version of constraint induced movement therapy (CIMT) into a community rehabilitation setting: does it improve upper extremity function when compared to usual care? (ambulatory and community services)**
Lead investigator: **Baldwin C.** Associate researchers: **Taylor N, Harding K.** This pilot randomised controlled trial aims to evaluate the effectiveness of low intensity CIMT, adapted for use in a community rehabilitation setting, compared with usual care in stroke patients with upper limb deficits.
- 2. A 7-day allied health service (occupational therapy and physiotherapy)**
Lead investigators: **Bond A, Boyd J, Millard G.** A pre-post study using mixed methods to evaluate the introduction of a 7-day allied health service in acute general medicine wards at Eastern Health.
- 3. What is the inter-rater reliability of the newly developed speech pathology prioritisation tool? (speech pathology)**
Lead investigator: **Brady J.** Associate investigator: **Harding K.** A project evaluating the measurement properties of a speech therapy prioritisation tool using clinician evaluation of clinical scenarios.
- 4. Effect of music on exercise adherence (ambulatory and community services)**
Lead investigator: **Clark I.** Associate investigators: **L Taylor N, Shoebridge G, Peiris C, Baker F**
This randomised controlled trial is investigating whether listening to music helps graduates of the cardiac rehabilitation program adhere to advice to be physically active.
- 5. Investigating malnutrition in the subacute setting (dietetics)**
Lead investigator: **Collins J;** Associate researchers: **Porter J, Huggins C, Truby H.** This observational study of the nutritional status of 213 patients in the subacute setting has been extended to measure weight loss, readmission rates and mortality at one-year post-admission. An interventional study to extend the findings of the initial study is also currently in development.
- 6. Tendon lengthening and fascia release for healing and preventing diabetic foot ulcers: a systematic review and meta-analysis**
Lead investigator: **Dallimore S,** Associate researchers: **Kaminski M.** A systematic review and meta-analysis was performed to investigate the effectiveness of Achilles tendon lengthening, gastrocnemius recession and plantar fascia release in healing and preventing diabetic foot ulcers. This study found that these surgical procedures were as effective as the current 'gold standard' treatment for healing diabetic foot ulcers (i.e. total contact casting), however recurrence rates were found to be lower suggesting that these procedures may provide a viable adjunctive treatment option for the management of diabetic foot ulcers. Although, further rigorous randomised controlled trials are required to determine the long term effectiveness and safety of these procedures.
- 7. Should we be measuring nutritional quality of life in patients with end stage renal failure receiving renal replacement therapy?**
Lead investigators: **Desai A, Bertino S, Corken M.** Associate Investigators: **Roberts M, Huang L, Osicka T, Dodson S.** A cross-sectional observational study of 100 dialysis patients audited measures of nutritional status using Subjective Global Assessment (SGA); QoL using the Food Enjoyment in Dialysis (FED) and the Kidney Disease Quality OF Life (KDQOL) questionnaires; potassium intake and primary source of nutrition information; mental health status using Depression Anxiety Stress Scales (DASS21); health literacy using Health Literacy questionnaire.
- 8. Comparison of upper limb outcomes for patients on early supported discharge versus inpatient rehabilitation (ambulatory and community services)**

Lead investigator: **de Vos S**. Associate investigator: **Harding K**. An observational study investigating the upper limb outcomes for patients with stroke managed in the early supported discharge program.

9. **Psychiatric Assessment in the Emergency Department: A consumer perspective following a suicide attempt or deliberate self-harm (social work)**

Lead investigator: **Donley E**. EDs are at the front line of increasing presentation of mental health patients following a suicide attempt or DSH. An important part of measuring quality and effectiveness is to evaluate the perspectives of the consumer. The focus of this mixed methods via survey study is to examine mental health patient experiences of suicide risk assessment and management in the ED.

10. **Clinical document audit of patient weights in Eastern Health Bed Based Services (dietetics)**

Principal Investigator: **Jamieson R**, Associate Investigator : **Wilton A**. This audit will review the documentation and practices related to recording of patient weights in patients admitted to Eastern Health Bed based services.

11. **Reliability of performing infrared dermal thermometry in patients with Charcot neuroarthropathy**

Lead investigators: **Kaminski M, Puli N**. Associate researchers: **Dallimore S, Richards, K**. This study aims to investigate the intra- and inter-rater reliability of performing infrared dermal thermometry in patients with Charcot neuroarthropathy. The findings of this study will ultimately assist health care practitioners in providing a standardised approach to the assessment of dermal temperatures, to ensure that clinical assessments are being performed reliably and are accurately monitoring the progression of the Charcot foot.

12. **Reducing waiting time for ambulatory and community services (ambulatory and community services)**

Lead investigators: **Harding K, Taylor N**. Associate investigators: **Kotis M, Taylor M, Teo K, Kearney J (DoH)**. This NHMRC funded project will find out if the STAT (specific and timely assessments for triage) approach can help to reduce patient waiting time in a range of ambulatory and community services.

13. **Improving physical function post total hip and knee replacement surgery: An evaluation of the effectiveness of an outpatient orthopaedic exercise group (ambulatory and community services)**

Lead investigator: **Hawke L**. This observational project will evaluate the effectiveness of a community rehabilitation program for patients post lower limb joint replacement surgery.

14. **The application of clinical indicators and contra-indicators for recommending a videofluoroscopic swallowing study (VFSS) – a review of clinical decision making and associated outcomes (speech pathology)**

Lead investigator: **Julia Kawanishi**. This retrospective review will investigate current practice and decision making when recommending VFSS. It will further evaluate the impact of conducting a VFSS on dysphagia management.

15. **Validation of the Malnutrition Screening Tool (MST) for use in the Eastern Health Community Rehabilitation Program (dietetics/ambulatory and community services)**

Principal Investigators: **L'Huillier H; Bertino S** Associate Investigators: **Howell P, Leipold C**. This project is investigating the validity of the MST as a means of screening patients for malnutrition in Ambulatory settings

16. **Factors associated with whether patients recovering from hip fracture receive a home assessment visit (occupational therapy)**

Lead investigator: **Lockwood K**. Associate investigators: **Harding N, Boyd J, Taylor N**. A 12 month audit of all patients admitted to Eastern Health with a hip fracture, to find out whether there are any patterns of factors that determine whether patients receive a home assessment visit.

17. **Improving the Practice of Nutrition Therapy in the Critically Ill: International Nutrition Survey (dietetics)**

Lead investigators: **McPhee M; Ganu P**: This study will audit the nutrition delivery and associated practices and benchmark against other organisations globally and provide a ranking of nutrition care

18. The effects of introducing a falls implementation pathway in community rehabilitation program setting (ambulatory and community services)

Lead investigators: **Martin E, L'Huillier H**. The aim of this project is to conduct a small scale pilot study to investigate whether the introduction of a falls implementation pathway for Community Rehabilitation Program clients (at Peter James Centre) reduces the incidence of falls in Community Rehabilitation Program patients and improves knowledge of falls risk factors amongst staff.

19. Motivational interviewing to increase physical activity after hip fracture (ambulatory and community services)

Lead investigator: **O'Halloran P**. Associate investigators: **Taylor N, Shields N, Reed M, Wintle E**
This pilot randomised controlled trial seeks to find out if a telephone-based motivational interviewing can help people living in the community after hip fracture improve levels of physical activity.

20. The use of surface electromyography biofeedback in the treatment of dysphagia following stroke: a randomised controlled trial (speech pathology)

Lead investigator: **Jennifer Paraskeva**. This randomised control trial is evaluating the use of biofeedback in addition to usual therapies in the treatment of swallowing disorders following stroke.

21. Experience of early supported discharge for stroke survivors (ambulatory and community services)

Lead investigators: **Power L, Kennedy Jones M, Smith J, Wilson E**. This study will aim to understand and describe the subjective experience of participating in early supported discharge following stroke.

22. The relationship between measured cognitive impairment and informant report of cognitive change in the context of informant affect, perceived burden, and personality traits (ambulatory and community services)

Lead investigator: **Shay L**. Associate investigators: **Lindsay E, Embuldeniya U, Harding K**. A project exploring the relationship between measured cognitive impairment and informant report of cognitive change.

23. Exercise in rehabilitation after distal radius fracture (physiotherapy)

Lead investigator: **Bruder A**. Associate researchers: **Taylor N, Bottrell J, Hua R, Shields N, Dodd K**. This project aims to find out the role of exercise in restoring function after immobilisation for distal radius fracture using a randomised controlled trial design.

24. The impact of using video based home exercise programs along with electronic reminders on home exercise programs for patients after stroke (occupational therapy, ambulatory and community services)

Lead investigators: **Emmerson K, Joy A**. Associate researchers: **Harding K, Taylor N**. This randomised controlled trial aims to compare the effectiveness of home exercise programs using video and reminder functions on touch screen tablets compared with traditional paper based exercise programs.

25. Examining the relationship between client factors and post program exercise adherence in clients with chronic pain (ambulatory and community services)

Lead investigator: **Marlow N**. This study aims to describe patterns of exercise adherence in patients attending a chronic pain management program, and to investigate whether factors including client characteristics, pain severity and psychosocial responses to pain are associated with adherence to recommended exercise programs.

26. The effectiveness of clinical supervision in allied health (allied health)

Lead investigator: **Snowdon D**. Associate investigators: **Millard G, Taylor N**. A series of studies using a validated tool to evaluate the effectiveness of clinical supervision in allied health, looking at the effect of factors such as site, and clinician experience on effectiveness.

27. **Overcoming barriers to improved long term outcomes in type 2 diabetes and prediabetes in community health (ambulatory and community services)**
Lead investigator: **Stanford J.** This study aims to evaluate the effectiveness of a multi-disciplinary, community based diabetes management service.
28. **Can Occupational Therapy hand therapy led clinics, have an impact on outpatient clinic flow, and improve patient functional status? (occupational therapy)**
Lead investigator: **Tawse S.** Associate investigators: **Young N, Leong A, Harding K.** This project is investigating a new model of care of occupational therapy led hand therapy outpatient clinics.
29. **Evaluating clinical supervision in Ambulatory and Community Services (ambulatory and community services)**
Lead Investigator: **Wilson E.** This project will include mixed methods to evaluate the state of play for clinical supervision in ambulatory and community services.

Research projects completed in 2014

1. **Activity of inpatients after hip fracture (physiotherapy)**
Lead investigator: **Arnold M,** Associate researchers: **Davenport S, Hua C, Balachandran S, Pagram A, et al.** Activity levels of inpatients in the acute setting after surgery for hip fracture were monitored to identify if there is a difference in activity level between week days when therapy is provided and weekends when therapy is minimal. Physical activity levels were very low after surgery for hip fracture with patients averaging fewer than 50 steps per day prior to discharge home or to rehabilitation. There were no differences in activity levels between week days and weekends.
2. **Psychometric properties of the Brunel Music Rating Inventory-2 (BMRI-2) with older adults: reliability and validity (ambulatory and community services)**
Lead investigator: **Clark I.** Associate researchers: **Taylor N, Baker F, Shoebridge G, Peiris C.** The BMRI-2 was developed to facilitate the selection of motivating music for exercise. To date, the BMRI-2 has been tested and used with young health adults. The current study aimed to find out if the BMRI-2 is sufficiently reliable and valid for research with older adults in cardiac rehabilitation. The BRMI-2 demonstrated sound psychometric properties in this population and is therefore a suitable tool to assist in the selection of motivating music for exercise.
3. **Investigating malnutrition in the subacute setting (dietetics)**
Lead investigator: **Collins J;** Associate researchers: **Porter J, Huggins C, Truby H.** This observational study assessed the nutritional status of 213 patients in the subacute setting undergoing usual care. There was a small but statistically significant decrease in mean weight, mid arm circumference and fat free mass between admission and discharge. Impaired cognition was associated with reduced odds of improvement in nutritional status.
4. **Preventing shoulder subluxation post stroke (ambulatory and community services)**
Lead investigator s: **Emmerson K, Joy A, Wilson E, Scroggie G.** The evidence base and Community Rehabilitation Program data to support a future pilot of the use of electrical stimulation for the prevention of shoulder subluxation following stroke across the continuum from the acute setting to sub-acute and community.
5. **Investigation of outcome measures for community rehabilitation (ambulatory and community services)**
Lead investigators: **Grant M, Robinson D, Harding K.** The Angliss Community Rehabilitation team completed a study to compare the measurement properties of the Modified Falls Efficacy Scale in community rehabilitation patients with alternative outcome measures for this population, in order to determine the best outcome measure for use in this setting.

6. **Menu delivery systems: Exploring their cost and impact on patient satisfaction with hospital foodservices**
Lead investigator: **Ottrey E**. Associate investigators: **Porter J, Huggins K**. This study determined patient satisfaction and cost for three menu delivery systems – the written, spoken, and visual menu – in the acute care hospital setting. The principal investigator implemented the study, with evaluation triangulating qualitative and quantitative methods and an observational record. The spoken menu was the menu delivery model preferred by participants.
7. **Additional Saturday rehabilitation improves functional independence and quality of life and reduces length of stay: clinical outcomes (physiotherapy, occupational therapy, sub-acute)**
Lead investigator: **Peiris C**, Associate researchers: **Taylor N, Shields N, Brusco N, Watts J**. This randomized controlled trial of 996 rehabilitation patients demonstrated that providing an additional day of rehabilitation from physiotherapy and occupational therapy on a Saturday led to reduction in length of stay of about 2 days, and clinically significant improvements in functional independence and quality of life.
8. **Do additional allied health services for rehabilitation patients reduce length of stay without compromising patient outcomes? (physiotherapy/occupational therapy/ rehabilitation medicine)**
Lead investigator: **Taylor N**, Associate researchers: **Brusco N, Peiris C, Watts J, Shields N, Sullivan N, Kennedy G, Teo K, Farley A, Lockwood K, Radia-George C**. Established the cost effectiveness of providing additional Saturday allied health services to rehabilitation inpatients. Patients got better quicker with savings to the health service and health system, providing strong evidence for the benefit of providing additional occupational therapy and physiotherapy on a Saturday
9. **Barriers to implementing evidence based practice for Allied Health clinicians (multi-disciplinary)**
Lead investigator: **Harding K** Associate researchers: **Taylor N, Lynch L, Thompson A, Wilson E, Donley E, Wilby A, Kaminiski M, Radia George C, Porter J**. This project explored allied health clinician and manager perceptions of barriers to the implementation of evidence based practice.
10. **Reducing wait time in an outpatient physiotherapy department (physiotherapy)**
Lead investigator: **Harding K**. Associate investigator: **Bottrell J**. This project found that the STAT (specific timely assessments for triage) approach was effective in significantly reducing waiting time in a busy physiotherapy outpatients department without using additional resources.
11. **Investigating Practices relating to Malnutrition in Victorian Cancer Services: Cancer Malnutrition Prevalence Survey 2014 (dietetics)**
Lead investigator: **Marshall K, Venn E, Berlandier M, Mitchell H**, Kelaart A, Kiss N, Loelliger J. This project undertook a point prevalence survey of the malnutrition incidence in patients with diagnosed cancer in Eastern Health as part of a DoH funded Malnutrition in Cancer Phase 2 study.
12. **An exploratory study comparing two electronic portfolio approaches in undergraduate dietetic education (dietetics)**
Lead investigator: **Porter J**. Associate investigators: **Kleve S, Palermo C**. We implemented and evaluated an ePortfolio model as part of a final year undergraduate foodservice management unit. A randomised parallel model study design was utilised, with the student cohort allocated to two different ePortfolio approaches - the traditional Moodle ePortfolio, and the enhanced Mahara ePortfolio. Focus groups were facilitated by an independent researcher, audiotaped and transcribed with subsequent thematic analysis. Broad themes of satisfaction and supporting learning consistently across both ePortfolio models. This research provided key learnings for the incorporation of ePortfolios into foodservice management education.
13. **Reliability of the PC-PART outcome measure for occupational therapy (occupational therapy)**
Lead investigator: **Radia-George C**, Associate researchers: **Imms C, Taylor N**. This study investigated the inter-rater reliability and feasibility of using the PC-PART outcome measure to evaluate participation restriction in patients admitted to inpatient rehabilitation. Using 5 therapists and almost 100 patients, the study demonstrated that the PC-PART is sufficiently reliably to be able to evaluate group programs, and that

the amount of extra time to administer the tool in addition to standard occupational therapy assessment was feasible.

14. **The maximum tolerated dose of walking for patients recovering from hip fracture (physiotherapy)**
Lead investigator: **Taylor N**. Associate investigators: **Peiris C, Shields N, Kennedy G**. Using an A + B design this study found that the maximum tolerated dose of walking for rehabilitation inpatients with hip fracture was 6 minutes. These findings may influence the design of optimum rehabilitation programs for these patients.
15. **Development of a new scale to measure upper limb activity after shoulder fracture (physiotherapy)**
Lead investigator: van de Water A. Associate researchers: **Taylor N**, Shields N, **Bottrell J**, Evans M. This project developed a new scale, the SFINX (the shoulder functional index) to measure activity in people after proximal humeral fracture. After generation of scale items using focus groups and literature review the scale was tested on patients with shoulder fracture which established its measurement properties as a clinician observed outcome measure of shoulder function.
16. **Identifying, preventing and treating malnutrition in Eastern Health Oncology Services – opportunities to improve nutritional care (dietetics)**
Lead investigator: **Venn E**; Associate investigators: **Porter J, Wilton A, Brennan E**. The aims of this DoH supported project were to assess the validity of the nutrition screening process being implemented in EH Chemotherapy Day units; measure the effect of the implementation of nutrition screening in EH Chemotherapy day units on dietetic referrals and develop and pilot a “Supersnack” program in Box Hill Hospital oncology/haematology inpatient ward, conducting cost-benefit analysis and impact to patient satisfaction and nutritional intake.
17. **Get fit for hip and knee joint replacement surgery: a pre-operative program of education, self-management and exercise for people waiting for hip and knee joint replacement surgery (physiotherapy)**
Lead investigator: **Wallis J**. Associate researchers: **Fong C, Parslow S, Moorcroft B, Lundberg K, Man V, Levinger P, Webster K, Taylor N**. This project aimed to evaluate the effectiveness of a pre-operative exercise and self-management program in improving the self-efficacy of patients waiting for joint replacement surgery for hip or knee osteoarthritis. We found that the program had little positive effect on self-efficacy or physical functioning for those waiting for surgery, questioning the benefit of this type of program.
18. **The maximum tolerated dose of walking for patients with severe osteoarthritis of the knee (physiotherapy)**
Lead investigator: **Wallis J**. Associate investigators: **Taylor N, Fong C, Singh P, Webster K, Levinger P**. Using an escalating dose design, it was found that people with severe osteoarthritis of the knee could safely tolerate an additional 70 minutes of moderate intensity exercise in the form of walking each week.
19. **Investigating common themes for why people volunteer their time to provide transport for a volunteer transport service at the Yarra Ranges Health Community Rehabilitation (occupational therapy, ambulatory and community services)**
Lead investigators: **Young K**. This project identified common reasons for why people have volunteered their services in the Volunteer Transport Service at Yarra Ranges Health. A qualitative study will be conducted which will include an in-depth interview with current volunteers of this service to identify common themes and how they interrelate in order to better understand why people volunteer and how people adapt to retirement and the role of Occupational Therapy within this population

Research training

Bruder A. PhD (year 3). Exercise in the rehabilitation of fractures of the distal radius. La Trobe University, P/T

Brusco N. PhD (year 3). A health economic analysis of providing extra rehabilitation. La Trobe University, P/T

Clark I. PhD (year 2). Music's influence on the physical activity levels of older adults in health-care settings. La Trobe University, P/T

Collins J, PhD (year 3), Exploring malnutrition in the subacute setting, Monash University, F/T

De Vos S. Masters of Clinical Rehabilitation (Neurological Occupational Therapy) (year 2). Flinders University, P/T

Donley E. PhD (year 2). Risk assessment and management in the emergency department of psychiatric patients following a mental health crisis. Monash University, P/T

Emmerson K. Masters by Research (year 1). Using video based home exercise programs for patients after stroke. La Trobe University, P/T.

Hawke L. Masters of Clinical Rehabilitation (Neurological Physiotherapy) (year 1). Flinders University, P/T

Joy, A. Master of Occupational Therapy Practice (year 1). La Trobe University, P/T

Kaminski M. PhD (year 2). Risk factors of foot ulceration in people with end-stage renal disease on dialysis. La Trobe University, F/T (NHMRC Postgraduate Primary Health Care Scholarship).

Lockwood K. PhD (year 1). Home assessment visits for people recovering from hip fracture. La Trobe University, F/T (La Trobe University Scholarship)

Morris M. Masters of Clinical Rehabilitation (Neurological Occupational Therapy) (year 2). Flinders University. P/T

Power L. Master of Occupational Therapy Practice (year 1). La Trobe University, P/T

Sekhon J. Post Graduate Diploma in Health Research Methodology. La Trobe University, P/T

Yap R. Graduate Diploma in Neurological Rehabilitation. University of Western Australia. P/T

Wallis J. PhD (year 2). Osteoarthritis: exercise and physical activity. La Trobe University, P/T

Publications for period 30 June 2013 to December 2014

Journal articles

1. **Benjamin D, Peiris C.** Effect of exercise on diastasis of the rectus abdominis muscle in the ante-natal and post-natal period: a systematic review. *Physiotherapy*. 2014;100(1):1-8.
2. **Brennan E, Thompson A, Clark I.** Strategies to support the success of culturally and linguistically diverse (CALD) health students during clinical placements; a systematic review'. *Focus on Health Professional Education*. 2014;15(2).
3. Brusco N, **Taylor N**, Watts J, Shields N. Economic evaluation of adult rehabilitation: a systematic review and meta-analysis of randomized controlled trials in a variety of settings. *Archives of Physical Medicine and Rehabilitation*. 2014;95(1):94-116e114.
4. Brusco N, Watts J, Shields N, Chan S, **Taylor N**. Does additional acute phase inpatient rehabilitation help people return to work? A subgroup analysis from a randomized controlled trial. *Clinical Rehabilitation*. 2014;28(8):754-761.
5. Brusco N, Watts J, Shields N, **Taylor N**. Are weekend inpatient rehabilitation services value for money? An economic evaluation alongside a randomised controlled trial. *BMC Medicine*. 2014;12(89).

6. Cai M, Bewaja S, Reilly R, Clements A, Kent A, **Taylor NF**, MacGinley R, Holt S, McMahon L. 2014. Psychological and exercise intervention training for hemodialysis patients (PEIDS): a pilot study. *World Journal of Nephrology and Urology* 3(2): 83-91.
7. Clark I, **Taylor NF**, Baker B. The modulating effects of music listening on health related exercise and physical activity in adults: A systematic review and narrative synthesis. *Nordic Journal of Music Therapy*. (in press).
8. Clark IN, Baker FA, **Peiris CL, Shoebridge G, Taylor NF**. (in press). The Brunel Music Rating Inventory-2 is a reliable and valid instrument for older cardiac rehabilitation patients selecting music for exercise. *Psychology of Music*
9. **Collins J, Porter J**. The effect of interventions to prevent and treat malnutrition in patients admitted for rehabilitation: a systematic review with meta-analysis. *Journal of Human Nutrition & Dietetics*. (in press).
10. Darzins SW, Imms C, Di Stefano M, **Taylor NF**, Pallant J. 2014. Evaluation of the internal construct validity of the Personal Care Participation Assessment and Resource Tool (PC-PART) using Rasch analysis. *BMC Health Services Research* 14:543.
11. **Davenport S, Arnold M, Hua C, Schenck A, Batten S, Taylor N**. Physical activity levels during acute inpatient admission after hip fracture are very low. *Physiotherapy Research International*. (In press).
12. **Dennett A, Taylor N**. Machines that go 'ping' may improve balance but may not improve mobility or reduce falls risk. *Journal of Rehabilitation Medicine*. (In press).
13. **Donley E**. Managing difficult behaviours in the hospital emergency department: the use of cigarette breaks with mental health patients. *Social Work in Mental Health*. 2014;12(1):36-51.
14. **Guerra M, Singh P, Taylor N**. Early mobilization of patients who have had a hip or knee joint replacement reduces length of stay in hospital: A systematic review. *Clinical Rehabilitation*. (In press).
15. **Harding K, Porter J, Horne-Thompson A, Donley E, Taylor N**. Not enough time or a low priority? Barriers to Evidence-Based Practice for allied health clinicians. *Journal of Continuing Education in the Health Professions*. 2014; 34(4):224-231.
16. **Harding K, Robinson D, Grant M**. Old tool, new tricks? A new adaptation of the Modified Falls Efficacy Scale performs well as a global outcome measure in community rehabilitation. *International Journal of Therapy and Rehabilitation*. (in press).
17. Iles RA, Davidson M, **Taylor NF**, O'Halloran P. An effective coaching intervention for people with low recovery expectations and low back pain: a content analysis. *Journal of Back and Musculoskeletal Rehabilitation* 2014;27(1):93-101.
18. **Jamieson R, Porter J**. Nutritional supplementation and muscle mass preservation in adults during bed rest: A systematic review to inform clinical practice. *Journal of Aging Research and Clinical Practice*. 2013: 2(4):355-362.
19. **Johnson S**, Cocks N, Dipper L. Use of spatial communication in aphasia. *International Journal of Language and Communication Disorders*. 2013;48(4):469-476.
20. **Lawler K, Taylor N**, Shields N. Involving family members in physiotherapy for older people transitioning from hospital to the community: a qualitative analysis. . *Disability & Rehabilitation*. In press.
21. **Lockwood K, Harding K, Taylor NF**. Pre-discharge home assessment visits in assisting patients return to community living- A systematic review and meta-analysis. *Journal of Rehabilitation Medicine*. (in press).

22. **McGrice M, Porter J.** The micronutrient intake profile of a multi-centre cohort of Australian LABG patients. *Obesity Surgery*. 2014;24(3):400-404.
23. **Porter J.** A transdisciplinary model to improve screening and early intervention within dietetics and speech pathology: A case study. *Journal of Research in Interprofessional Education*. 2014; 4(2), online.
24. **Radia-George C, Imms C, Taylor N.** The Inter-rater reliability and clinical utility of the personal care Participation Assessment and Resource Tool (PC-PART) in an inpatient rehabilitation setting. *American Journal of Occupational Therapy* 2014;68(3):334-343.
25. **Reed M, Harding K.** Do family meetings improve measurable outcomes for patients, carers or health systems? *Australian Social Work*. 2014;DOI: 10.1080/0312407X.2014.913070.
26. **Robertson B, Harding K.** Outcomes with Individual versus Group Physical Therapy for Treating Urinary Incontinence and Low Back Pain: A Systematic Review and Meta-Analysis of Randomized Controlled Trials. *Archives of Physical Medicine and Rehabilitation*. 2014;(in press).
27. **Snowdon D, Millard G, Taylor N.** Effectiveness of clinical supervision of physiotherapists: a survey. *Australian Health Review*. (In press).
28. Tang C, **Taylor N**, McDonald C, Blackstock F. Level of adherence to the Global initiative for chronic Obstructive Lung Disease strategy document for management of patients admitted to hospital with an acute exacerbation of chronic obstructive pulmonary disease. *Respirology* 2014;19(8):1191-1197.
29. Tang CY, Blackstock FC, **Taylor NF.** Patients admitted with an acute exacerbation of chronic obstructive pulmonary disease had positive experiences exercising from the beginning of their hospital stay: a qualitative analysis. *Chronic Respiratory Disease*. 2013;10(4):197-205.
30. **Taylor N.** A 7 day physiotherapy service. *Journal of Physiotherapy (Editorial)*. 2014;60: 179-180.
31. van de Water A, Shields N, Davidson M, Evans M, **Taylor N.** Reliability and validity of shoulder function outcome measures in people with a proximal humeral fracture. . *Disability and Rehabilitation* 2014;36(13):1072-1079.
32. **Wallis J, Webster K, Levinger P, Fong C, Taylor N.** A pre-operative group rehabilitation programme provided limited benefit for people with severe hip and knee osteoarthritis. *Disability & Rehabilitation*. 2014; 36: 2085-2090.
33. **Winkler R, Taylor N.** Do children and adolescents with mild traumatic brain injury benefit and persistent symptoms benefit from treatment? A systematic review *J Head Trauma Rehabil*. (in press).
34. **Zheng C, Lynch L, Taylor NF.** Effect of computer therapy in aphasia: a systematic review. *Aphasiology*(in press).

Conference including proceedings, papers, poster

International

1. **Donley E.** Managing difficult behaviours in the hospital emergency department: the use of cigarette breaks with mental health patients. 'Mental health pathways' for social workers in mental health; July 23rd-28th, 2013; Los Angeles, USA.
2. **Donley E.** Psychiatric Assessment in the Emergency Department: A consumer perspective of risk assessment following a suicide attempt or deliberate self-harm. 15th International Mental Health Conference; 25-27th August 2014, 2014; Gold Coast, Queensland.

3. **Harding KE, Leggat S, Bowers B, Stafford M, Taylor NF.** Reducing waiting time for community rehabilitation services: A controlled before and after trial. 8th Health Services Policy and Research Conference; 2-4th December 2013, 2013; Wellington, New Zealand.
4. **Harding K, Taylor N.** Stepping into Research: An Allied Health Research Training Scheme (Poster). 8th Health Services Policy and Research Conference; 2013; Wellington, New Zealand.
5. **Young K.** Why volunteer? Identifying common themes for why older adults choose to work for a Volunteer transport service. World Federation of Occupational Therapy Conference; July 2014; Tokyo, Japan.

State/National

1. **Bedford A, Sudbury M.** Stroke Support Group: Promoting opportunities for peer support within the Early Supported Discharge Program. Smart Strokes Conference, Sydney, August 2014.
2. **Belcher E.** Determining readiness for Occupational Therapy intervention for patients with delirium. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
3. **Bell B.** "Term on term off". Service delivery in a busy paediatric community health clinic: are parents satisfied? Speech Pathology Australia Conference, Melbourne, May 2014.
4. **Bond A, Terrington.** Uniting acute OT services by defining scope of practice. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
5. **Bond A, Millard G.** Evaluation of a 7-day allied health service model in acute general medicine and emergency departments. Victorian Allied Health Research Conference. March 28, 2014, Melbourne.
6. **Boyd J.** Leading the way: introducing and evaluating a 7-day occupational therapy service in the acute setting. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
7. **Boyd J, Durant K.** Eastern health and Community health Occupational Therapy referral pathways and guidelines. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
8. **Brennan E, Wilton A.** Investigating the attitudes of hospital staff to food served to patients: now and into the future. 31st Dietitians Association of Australia National Conference, Brisbane, May, 2014.
9. **Collins J, Huggins K, Truby H, Porter J.** Mapping the nutritional state of patients admitted to rehabilitation. 31st Dietitians Association of Australia National Conference, Brisbane, May, 2014.
10. **Collins J, Porter J.** Do we agree? Investigating the inter-rater reliability of estimates of plate waste made by multiple observers. 31st Dietitians Association of Australia National Conference, Brisbane, May, 2014.
11. **Collins J.** The change in nutrition state between admission and discharge among rehabilitation patients. Victorian Allied Health Research Conference. March 28, 2014, Melbourne.
12. **de Vos S.** The early supported discharge program for stroke – the way of the future for stroke rehabilitation. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
13. **de Vos S.** The Early Supported Discharge Program for Stroke – the way of the future for stroke rehabilitation. Smart Strokes Conference, Sydney, August 2014
14. **de Vos S.** The Early Supported Discharge Program for Stroke – the way of the future for stroke rehabilitation. Stroke Association of Australasian Conference, Hamilton Island , July 2014

15. **Folan A.** Examining the effectiveness of air-relieving cushions on reducing pressure injuries for acute and sub-acute populations: a systematic review. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
16. **Griffiths D.** The design of a process enabling improved relationships between Community Health and Acute Podiatrists. Presented at the Australian Podiatry Association (Vic) Conference, The Grand Hyatt, Melbourne, 20-22 March 2014.
17. **Griffiths S.** Oropharyngeal dysphagia and aspiration in patients with COPD. What's the evidence? Speech Pathology Australia Conference, Melbourne, May 2014.
18. **Guerra M, Taylor NF, Singh P.** 2014. Early mobilisation reduces length of stay after hip and knee joint replacement surgery. Victorian Allied Health Research Conference. March 28, 2014, Melbourne (awarded prize for best presentation).
19. **Guerra P.** Multi-disciplinary case conference redesign. Victorian Allied Health Research Conference. March 28, 2014, Melbourne.
20. **Harding K, Porter J, Thompson A, Donley E, Taylor N.** Not enough time or a low priority? Barriers to evidence based practice for allied health clinicians. 3 rd Annual NHMRC Symposium on Research translation, Melbourne, December 2014.
21. **Harding K.** Prioritization of services in Allied Health. Victorian Allied Health Research Conference. March 28, 2014, Melbourne (invited speaker).
22. **Jamieson R, Porter J.** Do nutritional supplements alone support the preservation of muscle mass during bed rest? 31st Dietitians Association of Australia National Conference, Brisbane, May, 2014.
23. **Kaminski M.** Risk factors for foot ulceration and lower extremity amputation in people with end-stage renal disease on dialysis: a systematic review and meta-analysis. Paper presented at the Australian Podiatry Association (Vic) Conference, The Grand Hyatt, Melbourne, 20-22 March 2014.
24. **Kaminski M.** Risk factors for foot ulceration and amputation in dialysis patients: a systematic review and meta-analysis. Paper presented at the Australian Wound Management Association National Conference, Gold Coast, 7-10 May 2014.
25. **King K.** Development of a home assessment indicator tool. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
26. **Lai J, George E.** Dietitians into the future: implementation of a portable electronic toolkit (PET) to improve efficiencies in delivering quality patient care. 31st Dietitians Association of Australia National Conference, Brisbane, May, 2014.
27. **Matthew R.** Improving clinical handover in the acute hospital setting: an evidence based project. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
28. **Porter J, Wilton A, Stewart A, Collins J.** Protected mealtimes in the sub-acute setting: a multi health-network observational study. 31st Dietitians Association of Australia National Conference, Brisbane, May, 2014.
29. **Porter J, Palermo C, Kleve S.** Demonstrating competency in food service education via ePortfolios. 31st Dietitians Association of Australia National Conference, Brisbane, May, 2014.

30. **Porter J.** Allied Health triage : not as simple as 1,2,3... Victorian Allied Health Research Conference. March 28, 2014, Melbourne.
31. **Puli N.** Dermal temperatures in assessing the acute Charcot foot: a review of current clinical practice in Australian high risk foot centres & Management of the acute Charcot foot: a snapshot of Australian high risk foot. Paper presented at the Australian Podiatry Association (Vic) Conference, The Grand Hyatt, Melbourne, 20-22 March 2014.
32. **Richards, K.** One Step at a Time - Maximising the Graduate Experience. Presented at the Australian Podiatry Association (Vic) Conference, The Grand Hyatt, Melbourne, 20-22 March 2014.
33. Robinson V, Hill M, Neef D, **Bourke C**, O'Boyle S, Collet C, Brooks I. A Roadmap to Collaborative Family and Carer Peer Support: COPES Bouverie Cross-Sector Collaboration Conference, Melbourne. August 2014.
34. **Sekhon J.** Current Australian SP practice in addressing psychological well-being in people with aphasia after stroke. Speech Pathology Australia Conference, Melbourne, May 2014.
35. **Smith J.** Are outcomes for clients admitted to the Early Supported Discharge Program at Eastern Health consistent with those reported in the literature? Stroke Association of Australasian Conference, Hamilton Island, July 2014.
36. **Smith J.** Are outcomes for clients admitted to the Early Supported Discharge Program at Eastern Health consistent with those reported in the literature? Smart Strokes Conference, Sydney, August 2014.
37. **Smith J.** Do clients admitted to the Early Supported Discharge Program Eastern Health engage in increased therapy compared to stroke survivors admitted to inpatient rehabilitation? Stroke Association of Australasian Conference, Hamilton Island, July 2014.
38. **Smith J.** Do clients admitted to the Early Supported Discharge Program Eastern Health engage in increased therapy compared to stroke survivors admitted to inpatient rehabilitation? Smart Strokes Conference, Sydney, August 2014.
39. **Snowdon D.** The effectiveness of physiotherapy clinical supervision in relation to Proctor's model of clinical supervision. Victorian Allied Health Research Conference. March 28, 2014, Melbourne.
40. **Stute A.** Stroke education: meeting consumer expectations and clinical guidelines for stroke management. Occupational Therapy Australia. Victorian State Conference, Melbourne, May 2014.
41. **Venn E.** Identifying, preventing & treating malnutrition in Eastern Health Oncology Services - malnutrition screening & the supersnack study. Clinical Oncology Society of Australia Annual Scientific 41st Annual Meeting, 2-4 December 2014, Melbourne.
42. **Wilton A.** Acute Diabetes management- what do people with diabetes eat in hospital. Diabetes Australia-BakerIDI Symposium; Melbourne May 2014.
43. **Wilson E, Smith J.** An Early Discharge Service for Stroke "Great Care in the Community Setting." Victorian Health Care Association Annual Conference, Melbourne, October 2014.
44. **Young K.** Why volunteer? Identifying common themes for why older adults choose to work for a Volunteer transport service. APAC Forum; Melbourne, September 2014.

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About Eastern Health

Eastern Health provides a comprehensive range of high-quality acute, sub-acute, palliative care, mental health, drug and alcohol, residential care, community health and statewide specialist services to people and communities that are diverse in culture, age, socio-economic status, population and healthcare needs. We deliver clinical services to more than 750,000 people through eight programs from 29 locations. Our services are located across 2816 square kilometres in the east – the largest geographical catchment area of any metropolitan health service in Victoria. We employ more than 9500 staff and volunteers, deliver more than 950,000 episodes of patient care each year and manage a budget approaching \$750 million.

Eastern Health is committed to building a culture of research and ensuring such research is embedded in everyday clinical practice and contributes to local, national and international research activity. This document forms part of the broader seventh annual Eastern Health Research Report reflecting the high-calibre research, commitment and strength of research programs across Eastern Health.

A hard copy of the 2014 Research Report (feature document) is available by contacting The Office of Research & Ethics on 9895 9551 or via download from www.easternhealth.org.au.

Readers note: Where projects are collaborative with our respective research partners, Eastern Health staff names are in bold.

