**Eastern Health Allied Health Clinical Research Office**

**Allied Health Research News, Issue 53, December 2020**

**2020 Allied Health Research Forum: An online celebration of research achievement**

In a year that has been full of new experiences, our annual Allied Health Research Forum, postposed in May, finally went virtual on October 15th.

The event may have looked a little different but the content was still an outstanding display of research achievements from our Allied Health clinicians. There were a huge variety of presentations across most of our allied health disciplines.

As in previous years the presentations took the form of a three minute presentation competition, with each speaker having precisely 3 minutes and a single slide to convey their work to the audience.

Our judging panel, consisting of Professor Meg Morris of La Trobe University and our Eastern Health Director of Research Professor David Taylor, awarded the prize for best presentation to Occupational Therapist Bianca Summers. The audience gave their online votes to Dale Miles, who took out the People’s Choice award.

If you missed out on attending the forum and would like to see one or more of the presentations, the recording of the event is available online, complete with hyperlinks to take you directly to your presentations of interest.

Our thanks to the organisers, our host Anita Wilton, our judges, our presenters and our audience for a wonderful celebration of Allied Heath Research. It was certainly a bright spot in challenging year!

**Presenters and their topics**

Rebecca Sullivan: Falls in hospital patients with acquired communication disability secondary to stroke

Rebecca Morris: Preventing falls

Rebecca Nicks: Early therapy in the acute setting

Anne Thompson: Outsourcing bed-based aged care services

Stefanie Carino: Perspectives of staff towards environmentally sustainable hospital food.

Lina Breik: Micronutrient intake from enteral nutrition in critically ill adults

Bianca Summers: Core business on subacute inpatient wards during a pandemic

Annie Lewis: Reducing waiting time in outpatients

Jo Tobin: Meet and eat interdisciplinary lunch group

Lisa Ritchie: Self Compassion and wellbeing

Dale Miles: The case of the missing cough

Alicia Devlin: Virtual Reality for upper limb rehabilitation

Claire Farrell: What's hiding in the shadows?

Kirsty Hearn: Physiotherapists and our superpowers!

Morica Tran: Exercise and healing of diabetic foot ulcers

Shae Cooke: Clinical skills development focussed supervision for physiotherapists

Claire Longden: Rehabilitation outcomes after proximal humeral fracture

Lyndon Hawke: Physical activity after knee replacement

**Lina Breik: 2020 Allied health research of the year**

Lina Breik was awarded the inaugural “Allied Health Research of the Year Award” in the Allied Health rewards and Recognition Event in October. Lina was recognised for the progress that she has made on research projects this year despite being a challenging year for research. She is leading a retrospective observational study examine micronutrient intake in enteral nutrition in critically ill adult patients in ICT, and led another research project investigating the perceptions of patients receiving a home enteral nutrition service, which she presented at the International Congress of Dietetics in 2020. She is also a lead researcher for Box Hill Hospital for a multi-centre randomised controlled trial.

Lina has also been active in developing research skills in the dietetic workforce, and has been appointed as the chair of scientific and social programs committee for the Dietitians’ Association of Australia Annual conference in 2021, which is a testament to her research and leadership skills. Congratulations Lina!

**My Therapy: New trial at Eastern Health aims to get more therapy time into inpatient rehabilitation**

One of the greatest challenges of movement rehabilitation is ensuring that patients have enough practice of therapeutic exercises and structured physical activities.

Although rehabilitation aims to enable patients to recover from injury, illness, or disease, not everyone has an optimal outcome. One of the reasons for a sub-optimal response during inpatient rehabilitation is insufficient practice of exercises and activities. Adult inpatient rehabilitation service standards strongly recommend the provision of 3 hours of therapy per weekday in addition to weekend therapy. In Australia there is an evidence practice gap and many services provide less than half of this recommended dosage and patients spend most of the day sitting and lying.

While funding additional staff to increase the amount of supervised physiotherapy and occupational therapy is always an option, limited financial resources can make this challenging. A partnership team led by physiotherapy research Dr Tash Brusco (formerly a physiotherapy manager at Eastern Health) designed ‘My Therapy’ to increase the dosage of therapy participation during rehabilitation, through independent practice of exercise and activity, in addition to usual care, without additional staff.

My Therapy is a consumer driven, self-management program that increases the amount of practice that patients do during an episode of rehabilitation. It is tailored to individual needs, is prescribed by a patient’s treating occupational therapist and physiotherapist, and can be practiced any time. In a pilot trial, My Therapy increased therapy participation by about 100 minutes per week and improved functional outcomes.

Commencing in 2021, Eastern Health will be participating alongside Alfred Health, Healthscope and Cabrini Hospital in a fully powered, multi-site trial to scale up the implementation of the My Therapy program across inpatient rehabilitation wards in Australian public and private hospitals. Funded by the National Health and Medical Research Council, this trial is led by Tash Brusco and involves Eastern Health investigators Nick Taylor and Rania Abdelmotaleb. Associate investigators Anna Joy and Leanne Boyd will also support the trial at Eastern health.

The trial aims to evaluate the benefits of MIHip when scaled, the mechanisms of successful scaling, and the cost effectiveness of the program.

We look forward to bringing further updates as the trial gets underway.

**Effect of hip precautions on dislocations after hip replacement surgery: A systematic review**

Hip dislocation is the second most common complication after hip joint replacement surgery. Most dislocations occur in the first 90 days after surgery and patients have, historically, been encouraged to restrict movements at the hip that may compromise the stability of the joint.

Physiotherapists and occupational therapists spend much time assisting patients to regain independence in mobility and selfcare after surgery while taking account of these movement restrictions.

As a participant in the Stepping into Research training program, physiotherapist Jacoba Reimert, and mentors Nicholas Taylor, Raphael Hau and Kylee Lockwood (La Trobe university, and former Eastern Health Occupational Therapy manager), conducted a systematic review and metaanalysis to investigate whether movement precautions reduce the risk of hip dislocation after hip replacement using a posterior surgical approach.

The team analysed data from over 9500 hip replacements across seven studies. They found that teaching hip replacement patients to avoid certain movements may make no difference to the risk of hip dislocation after surgery using a posterior approach.

“The results of this review indicate that the resources associated with promoting patient adherence to movement precautions may be better allocated to other areas, such as falls reduction,” says Eastern Health physiotherapist, Jacoba Reimert.

La Trobe occupational therapist, Dr Kylee Lockwood, notes the potential impact on patient recovery, health and wellbeing.

“When prescribed movement precautions, patients are unable to perform activities or movements that are commonly required within the workplace, such as bending, squatting and sitting on a variety of chairs,” she says. “As a result, they may experience financial burdens associated with transport, reliance on carers, and loss of wages.”

“This study has the potential to transform practice by encouraging the patient’s treating team, including physiotherapists and occupational therapists, to disinvest from movement precaution interventions and, instead, focus on promoting active rehabilitation.”

**Euan’s Musings International Journal of the Leaky Cauldron Peer review feedback.**

Dear Dr Donley. Thank you for your submission to the International Journal of The Leaky Cauldron entitled “2020, a year in review”. I am saddened to inform you that your submission has not been successful on this occasion. However, with the major revisions you are welcome to resubmit with the following peer reviewed recommendations.

**Peer reviewer # 1**

The author makes a strong point that working in the hospital system in 2020 was rewarding but not without challenges, especially when trying to combine research and full time work. I hope the author takes the time to consider the following recommendations.

1/ Despite your acknowledging that most of 2020 was ‘a new crap centred sandwich with new crap topping each morning’ this journal is not willing to accept this type of informal writing.

2/ The assertion that ‘most parents working from home while remote learning have thrown at least one 1-pod at the wall’ needs a citation.

3/ Your methodology of ‘analysing the disinterested facial expressions of colleagues via zoom’ is not a ‘rigorous observational epistemology’.

4/ The argument that most staff working from home now require physiotherapy from the lower back down is outside the scope of your research question.

5/ Speaking of which, perhaps your research question ‘why I want to forget all the good things I did in 2020’ may be your personal feelings, it is a question that lacks an appropriate scope of the literature.

6/ The construct ‘at least the traffic was good’ was not introduced into your literature or indeed noted in your questionnaire. Speaking of which, where was your questionnaire?

**Peer reviewer #2**

Thank you to the author for their insights into a review of the year 2020. I hope the following recommendations shed some light into my view of the article.

1/ Reading it is time I will never get back. I missed my son’s 6th birthday.

2/ You mentioned this was a review, but there is no actual review be it systematic, scoping, Cochrane, or, well anything.

3/ You misspelled your own name and qualifications

4/ Your reference list included, “Tree, Outside (2020) *Those leaves just gave me an idea probably because I have been staring at them for 5 months’*, Journal of my Backyard’s Botanical Science, Eastland”. I have searched all databases and I suspect this is not in fact a real journal.

5/ Grovelling and thanking your colleagues for being on site all year is nice, but this conclusion does not match your results section.

6/ There was no actual results section.

Euan has actually learned a lot from 2020 and has seen tremendous work from many colleagues no matter where they are. He is talking in third person and is actually 7 feet tall.

**Motivational Interviewing After Hip Fracture: MiHIP Project Update**

The MIHip randomised controlled trial, testing the effectiveness of motivational interviewing to improve outcomes after hip fracture, currently underway at Eastern Health continues to make great progress. 76 participants have been recruited and 10 have completed the full 12 months of follow up. Thanks to all the staff at Eastern Health and patients who continue to support this important project!

“I am a fit and healthy 66 year old and broke my hip in a simple fall off my bike. Not being able to enjoy riding my bike every day has brought some new challenges. I was invited to join 'MIHip' and I have enjoyed it. It’s important being able to contribute to the knowledge of how older people react to having a broken hip and how their recovery both physically and mentally can be improved during the post-operative period. This is vital for the injured person and also for their families and the health professionals involved in their care.” – MIHip Participant

**Allied Health Research Achievements**

**Publications**

Dallimore, S.M., Puli, N., Kim, D. Kaminski M. Infrared dermal thermometry is highly reliable in the assessment of patients with Charcot neuroarthropathy. J Foot Ankle Res, 2020, 13;56

Dennett AM, Sarkies M, Shields N, Peiris CL, Williams C, Taylor NF. (in press). Multidisciplinary, exercise-based oncology rehabilitation programs improve some patient outcomes but their effectiveness on health service-level outcomes remains uncertain: a systematic review and meta-analysis. J of Physio (in press)

Donley E, Moon F. Building Social Work Research Capacity in a Busy Metropolitan Hospital. Research Soc Work Practice. 2021;31

Harding KE, Snowdon DA, Prendergast L, Lewis AK, Kent B, Leggat SG, Taylor NF. Sustainable waiting time reductions after introducing the STAT model for access and triage: 12-month follow up of a stepped wedge cluster randomised controlled trial. BMC Health Serv Res, 2020 (early online)

Harding KE, Dennett AM, Lewis AK, Taylor NF. Rising to the telehealth challenge: Clinician experiences during COVID-19. Inspire Magaiine, Research Australia. 2020; 17

Lewis AK, Harding KE, Taylor NF, O’Brien TJ, Carney PW. The feasibility of delivering first suspected seizure care using telehealth: a mixed methods controlled study. Epilepsy Research 2020 (early online).

Lewis AK, Taylor NF, Carney PW, Harding KE. Reducing the waitlist of referred patients in a medical specialist outpatient clinic: an observational study. J Health Organis Manag (early online)

Reimert J, Lockwood KJ, Hau R, Taylor NF. Are hip movement precautions effective in preventing prosthesis dislocation post hip arthroplasty using a posterior surgical approach? A systematic review and meta-analysis. Disab & Rehab 2020 (early online)

Senserrick C, Lawler K, Scroggie GD, Williams K, Taylor NF. (in press). Three short sessions of physiotherapy during rehabilitation after hip fracture were no more effective in improving mobility than a single longer session: a randomised controlled trial. Physiotherapy (in press)

Tan GA, Dennett AM, Nagarajan D, Freeman J, Peiris C. Program for oncology wellness and exercise rehabilitation (POWER) A Feasibility study of oncology rehabilitation in the community. J of Cancer Rehab 2020 (early online)

Bunzli S, Taylor NF, O'Brien P, Dowsey MM, Wallis JA, Choong PF, Shields N. (in press). How do people communicate about knee osteoarthritis? A discourse analysis. Pain Med (in press).

Wallis JA, Roddy L, Bottrell J, Parslow S, Taylor NF. A systematic review of clinical practice guidelines for physical therapist management of patellofemoral pain. Phys Ther (in press).

**Reflective articles published in Issue 4, 2020 of Australian Social Work:**

* Going against the grain - Lyndal Greenwood and Sophie Hatzipishalis
* Covid and telehealth in a child adolescent mental health clinic - Margaret De Kam
* Starting out: beginning practice as hospital social worker under Covid-19 - Paula Anastasi

**Congratulations Dr. Kellie Emmerson!** On receiving her PhD for her thesis titled “Video-based instructions for prescription of home exercise programs in rehabilitation” and paving the way for baby Atticus to follow in her footsteps!

**… And as one journey ends, another begins….**

Congratulations to physiotherapist Shae Cooke who has recently enrolled in a PhD at the University of Melbourne with the topic “Reducing the burden of stroke: Physical Activity for improving glycaemic control and maintaining bone mass after stroke.