

ALLIED HEALTH RESEARCH NEWS

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## 2021 La Trobe University 3MT competition heats up!

La Trobe University School of Allied Health Human Services and Sport hosted their annual Three-minute Thesis competition on June 4th. Another lockdown did not dampen the competition with the event making a last minute pivot to Zoom once again. The 3MT provides an opportunity for budding PhD candidates to show off their presentation skills and summarise their thesis in 3 minutes or less with just one slide.

Eastern Health was well represented among some high-calibre presentations. Annie Lewis presented her research on using 'STAT as scaffolding' to 'obliterate' waiting times in an epilepsy clinic

with the help of Miley Cyrus' wrecking ball.

Made Rimayanti, a PhD student on the MIHip project based at EH, pulled at the audience's heartstrings with an inspiring performance about the 'invisible dungeon' in which she described the importance of motivational interviewing to help patients achieve the freedom to participate in life after hip fracture.

Made took out both winner and people's choice and now will now progress to the 3MT La Trobe University College final. Read the transcript of her presentation on page 2. Congratulations Made!

### A Research Newsletter for Allied Health Clinicians

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Top: Made's presentation, 'The Invisible Dungeon'

Below: Annie Lewis describes taking a wrecking ball to hospital waiting lists

## The Invisible Dungeon: Made Rimayanti

Made Rimyanti is PhD student with the MIHip project at Eastern Health and winner of the La Trobe University School of Allied Health 3MT competition for 2021. Read the transcript of her winning presentation.



“There are many ways for us to feel trapped. Case in point. We can feel trapped in our own houses. We can be trapped in a prison. But for people with hip fracture, it’s another level entirely. When I landed the opportunity to work with people recovering from hip fracture, I didn’t know how it feels to be trapped in your own body. But then I suffered overuse injury on my foot from walking too much in the wrong shoes. Silly me! I had a taste of what it’s like not being able to go anywhere I want, anytime I want. You never really notice it till it’s gone, right?”

Now think of three women in your life that you love. Statistically, one of them will suffer from hip fracture in the future. One in five people die within the first year. Only two in five can walk as well as they did before. The majority can still walk, but they will walk much less because they are too scared to fall again. Imagine not being able to trust your own two feet to carry you anywhere you

want. Feeling trapped. Scared. And so hopelessly dependent.

My PhD is looking at motivational interviewing to get people recovering from hip fracture to walk again. Motivational interviewing has been found to improve confidence by asking people to remember their past victories and their personal strengths. It can also motivate them by asking them to voice their own reasons for change. Simply lecturing them to walk more won’t work, because they already know they should walk. They just can’t get over this barrier, this fear of falling. Motivational interviewing can help with that, but only if it’s done right.

I’m in charge of making sure that our clinicians are truly practicing motivational interviewing. To do this, I have to listen to the conversations between the clinicians and their clients, and then interview those clients to see what they think. The findings?

They felt seen, like they are more than just a patient. Like they’re human. They felt connected, even though they’ve never even seen the person on the other side of the phone.

This is what makes motivational interviewing so powerful. People with hip fractures are just like us. We want to be understood, we want to feel connected. And we want to live our lives to fullest, free from the shackles of doubt and disability. And if they get to voice their concerns with someone who genuinely cares, they can get over this fear to go to the other side, literally.

I don’t know if I can help everyone with hip fractures to walk normally again. But if I can help my participants to escape this invisible dungeon, then it will all be worth it.”

## PhD Spotlight: Dina Pogrebnoy

Dina is a senior physiotherapist in the Community Rehabilitation Program at Eastern Health. She commenced her PhD studies in October 2020 with primary supervisor Professor Coralie English from the University of Newcastle. Professor English and her team developed an evidence based I-REBOUND program to support physical activity and diet intervention as a measure for secondary stroke prevention.

Dina’s PhD will begin with a scoping review to understand existing evidence in development of online platforms to promote physical activity and dietary interventions in people with chronic health conditions.

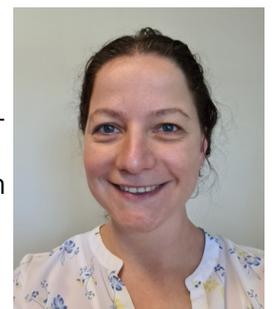
Knowledge gained from this review will inform the design of the online version of the I-REBOUND program.

The largest part of Dina’s PhD will be to co-design an online program with consumer input. To date, she has completed four workshops with consumers and has commenced clinician workshops with clinicians from a range of disciplines. Dina will use the Integrated Knowledge Translation framework to determine consumer needs including what consumers would find useful and likely to engage with.

Dina is currently facilitating a series of workshops with people who are living with stroke and their

carers as well as other stakeholders. Once workshops are completed a prototype of the website will be developed and further feedback will be sought before the website will be built.

Long term, it is hoped this website will be a valuable resource for people living with stroke that can be implemented into clinical practice.



# “Stepping into Research”

## Allied Health Research Training Scheme

Welcome and congratulations to 2021’s class of Stepping into Research. After a 12-month COVID-induced break, 10 aspiring researchers have been successful in their application and will be embarking on a systematic review in the coming months.

This program is a unique opportunity offered by the EH Allied Health Research Office and has seen 36 clinicians publish their work and 6 go on to higher degree studies.

The quality of the applications this year was excellent, and we have participants from a variety of professions and programs with a diverse range of topics. We look forward to hearing the results from participants’ projects at next year’s Allied Health research forum.

Participant	Topic of interest
Adrian Lim	The effect of exercise on range of motion and function after surgical neck of humerus fracture
Bianca Furnston	Occupational Therapy interventions in the Emergency Department
Cassandra Bendall	Meal-based refeeding versus enteral feeding and the risk of hypoglycaemia in children and young adults hospitalised with eating disorders
Grace McConchie	Adjustable fortification versus standard fortification and growth in preterm babies admitted to the SCN/NICU
Kate Lawrence	The effectiveness of sensory modulation interventions in reducing behaviours of concern for patients with dementia in an inpatient settings
Kathryn Amerasekera	Non-pharmacological treatments for adults with movement disorders after stroke
Nathan Crighton	The use of frailty assessment tools to predict clinical outcomes for elderly patients in hospital settings
Sarah Martin	The impact of Group Art Therapy in short stay residential units on positive affect and emotional wellbeing during inpatient treatment for clients with substance use disorders
Stephanie Bates	The impact of communication-focused interventions to improve patient- and health service outcomes for people with dementia in the inpatient settings
Germaine Tan	The value of telehealth interventions for cancer survivors undergoing exercise rehabilitation on clinical outcomes

## My Therapy: New trial commencing at Eastern Health

### What is My Therapy?

My therapy is self management program that aims to increase the amount of occupational and physiotherapy that patients undertake by encouraging independent practice of exercises and activities.

In 2021 and 2022, researchers from Monash and La Trobe Universities will evaluate the My Therapy program across four health services: Eastern, Cabrini, Alfred Health, and Healthscope.

### How does My Therapy Work?

My Therapy focuses on achieving goals in rehabilitation which are meaningful to patients, such as, walking the dog, spending time with family, or getting back to playing sport.

Patients are encouraged to talk to their therapists about their priorities and what would help to improve their quality of life.

The program aims to promote a feeling of partnership with therapists to guide the patient's rehabilitation journey, while allowing them to feel safe and supported. Therapist recommend exercises and activities that align with the patients goals, but it is up to the patient to decide what they do, how much they do and how often they do it. The idea is to provide a program that works with the patient's schedule.

It is hoped that My Therapy will increase the amount of therapy that patient's undertake, ultimately resulting in improvements in outcomes.

### The My Therapy Trial

The My Therapy Trial is a stepped wedge randomised controlled trial led by chief investigator Tash Brusco and funded by a National Health and Medical Research Council partnerships grant. Tash may still be known to some of our readers as a former physiotherapy manager from the Angliss Hospital.

In a stepped wedge trial, the intervention is introduced to each site, one at a time in random order, with all sites eventually receiving the

intervention. It is a rigorous trial design well suited to health services research.

Eastern Health is the first site to commence the intervention Angliss and PJC. The primary clinical outcome is achievement of a minimum clinically important difference the Functional Independence Measure (FIM) at discharge. Secondary outcomes include quality of life at discharge, length of stay, 30-day re-admissions, discharge accommodation, follow-up rehabilitation services, adverse events and cost effectiveness.

**“MY THERAPY IS ALL ABOUT ME. I AM IN CHARGE OF HOW MUCH I DO”**



**The results of the My Therapy implementation trial are anticipated to directly influence health service models of rehabilitation care.**

Findings have the potential to improve patient function and quality of life, and the ability to self-manage health.

Potential health service benefits include reduced hospital length of stay, improved access to rehabilitation and reduced health service costs.

Occupational Therapist Alicia Devlin has been appointed as site coordinator to manage My Therapy at Eastern Health.

We look forward to publishing further updates on the trial as it gets underway.



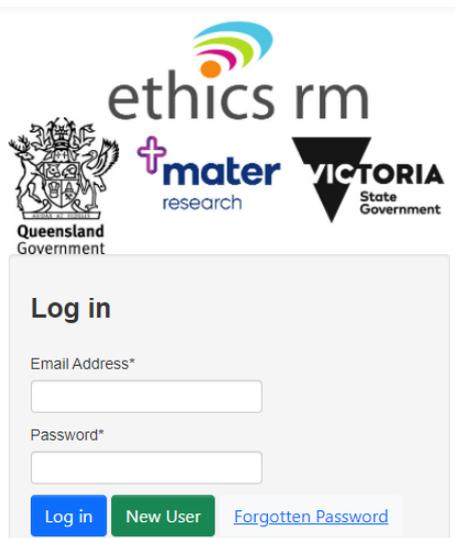
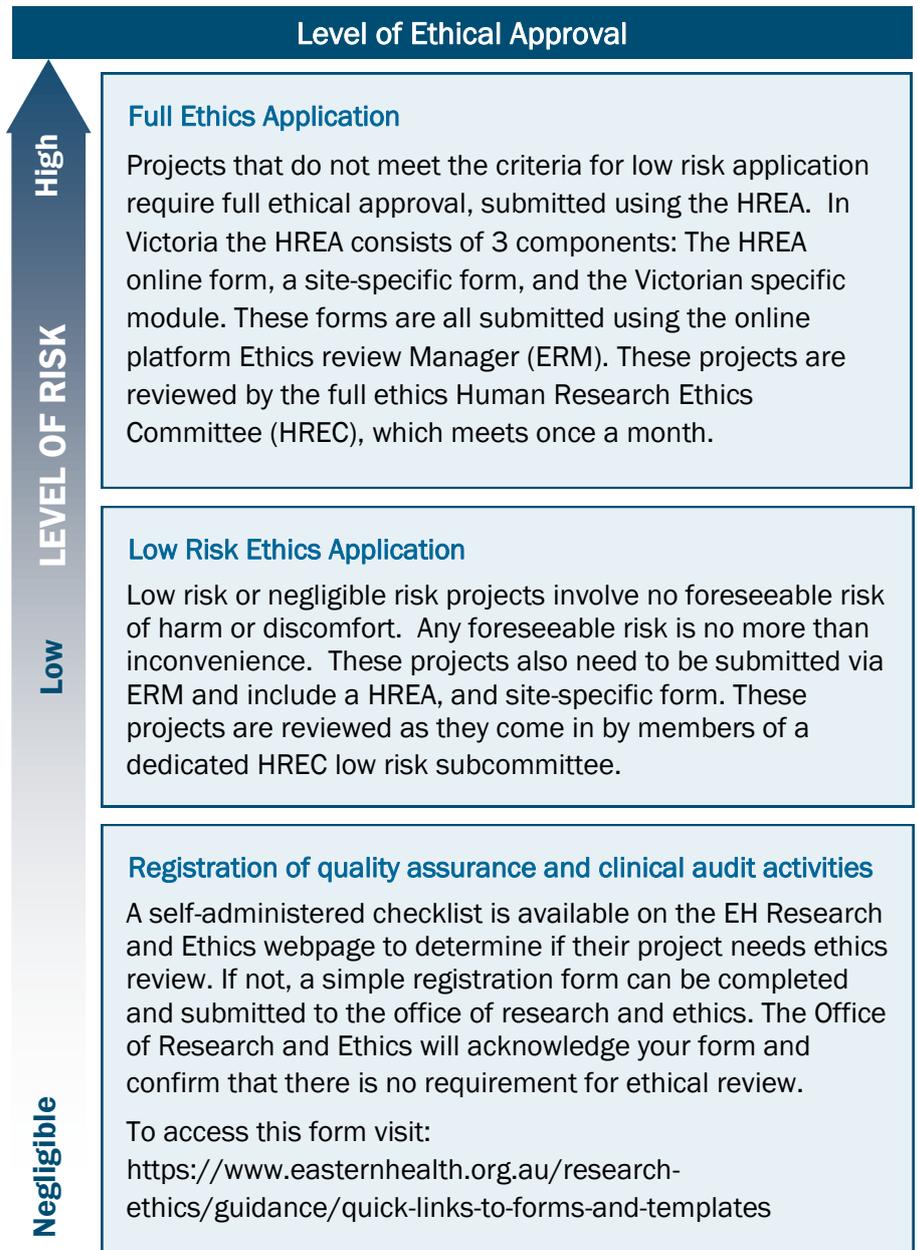
# Changes to Ethics Approval processes at Eastern Health

Have you ever thought about doing research but been put off by the ethics review process?

While it might seem like a hurdle, the ethics process is important. The primary purpose of the Eastern Health Ethics Committee is to protect people who are involved in research. But it is also there to help researchers by having people with a number of different perspectives review project proposals. The committee provides feedback which helps to get the design right before a project gets underway. Furthermore, if you are considering submitting your work to a journal, evidence of ethical review is often a requirement for consideration for publication.

Ethics approval processes have recently been simplified whereby all research projects are submitted using one online system: **Ethics Review Manager (ERM)**.

There are still three different levels of ethical approval depending on the level of risk associated with your project. All projects, even those involving no 'participants' such as clinical audits, should at least be registered with the Ethics Committee. Clinicians wanting to conduct projects involving patients or staff as participants should consider whether their project can be considered "low risk" or whether it requires consideration by the full ethics committee.



To access the ERM, create an account at:

<https://au.forms.ethicalreviewmanager.com/Account/Login>

**What if the project was initiated by an external institution?**

Eastern Health HREC may be able to accept a review conducted by another health service, although completion of a site specific form (SSA) will still be required. Eastern Health will generally not accept university HREC approvals, although universities often have expedited processes projects approved by health service HRECs. Therefore if you require university approval as well, it is usually best to start the process with approval at Eastern Health.

**For queries and further information please contact:**

[ethics@easternhealth.org.au](mailto:ethics@easternhealth.org.au) or visit

<https://www.easternhealth.org.au/research-ethics/guidance>

## Pathways to Research Information Session

Would you like to get into research but not sure how to go about it?  
Have you wondered what is involved in doing a PhD, and how to get into a program?  
How do you find a supervisor? How much time do you have to put in to be successful?

**Come along to this casual discussion forum to find out the answers to these questions and more.**

### Presenters:

**Casey Peiris** is a physiotherapist who first “stepped into research” through the Eastern Health Stepping into Research Training Scheme in 2009. Casey is now the Graduate Research Coordinator at La Trobe University. She will share her story and answer your questions about La Trobe’s Post Graduate Research programs.

**Nick Taylor** is our own Professor of Allied Health and recipient of the La Trobe University Research supervisor of the year award. He has supervised 30 PhD students to completion and can tell you everything you need to know about life as a higher degree research student.

**Thursday 5th August**

**5.00-6.00pm**

**Seminar Room 1,  
Level 3, 5 Arnold Street Box Hill**

**This event is free but registration is essential. Register now at Eventbrite:**

<https://www.eventbrite.com.au/e/pathways-to-research-information-session-tickets-161048653859>



### Euan's Musings

*Euan Donley works with the Psychiatric and Emergency Response Team and is a regular columnist for Allied Health Research News. His views are entirely his own and should not be considered high level evidence.*

#### LESSONS FROM SUPANOVA

In May I took my children to Supanova. It is a geek thing and if you don't exactly know what I am referring to then maybe the regular wisdom that is known as “Euan's Musings” is not for you. Have a great life.

For the one reader remaining (which now excludes my own immediate family) there were a number of changes as to how Supanova operated. Supanova, of course, is a geek festival where people dress up, play video games, talk sci fi, attend seminars, and buy things that no shop would generally sell if their aim is to turn a profit. I am now the proud owner of a Yoda themed quidditch top and got a free Star Wars themed cookie. You lose for not being there.

The changes were COVID-related. It

was more than just hand sanitiser, it included new designs for queues, staggered times, entry and exit procedures, checking in and out, and new types of interactivity that minimised contact. This, naturally, meant that in likelihood an organiser had to research how they were going to adapt to (pending trigger warning) “the new normal”. And no doubt the plan they went with was not the only plan they had.

You may be wondering, as usual, if there is a point in all of this, or if I am just wanting to talk about awesome geek stuff again. I wonder this on occasion too, but they keep asking me to write this stuff so I'm gonna stick with “the old norm” (I am claiming that expression when it catches on and sorry of your name is Norm and you think you are youthful).

You may not be a researcher but I bet you have had to do some

research to adapt to your work and social life the last 18 months. At the start I bet it was scary, but you prepared yourself with knowledge, sought advice, figured out how you would implement it, and went ahead with a plan. Congratulations, you have what it takes to be a researcher.

So if you are at a novice level, use these basic principles to think about what research you would like to do. You can do it. And if you are currently conducting research, think about how you may have to adapt again and have a plan B or C, just in case.

See you at Comic Con in July.

*Dr Euan Donley is ashamed to admit he does not actually dress up for Supanova, but as a good parent ensures his young children do. Despite talking of adapting, he has no plan B if Comic Con is cancelled in July other than to blubber around the house for a few days overeating.*

## Conference News

Despite a temporary pause on the traditional conference experience, it has been great to see our Eastern Health Allied Health clinicians continuing to fly the flag online.

### Abstracts accepted for the Dietitians Australia National Conference, July 2021

**Nichloas Van Veenandal** – What is the Waste? A cross sectional audit of oral nutrition support usage and consumption

**Georgia Moore, Graeme Duke, Lina Breik** – Parenteral Nutrition - Let's Consider the Liver.

**Jennifer Flanagan** – Evaluating the bariatric dietetic service at a public tertiary hospital

**Andrea Elliott** – A systematic review exploring patient experiences of dietetic care.

**Hannah Silva** – Cost and affordability of a nutritionally adequate six-food elimination diet for people with eosinophilic oesophagitis

**Cassandra Bendall, Shyharini Abeysinghe, Cara Brockbank** - Can hospitalised eating disorder patients be managed on oral nutrition support without the event of hypoglycaemia?

**Jorja Collins**

- Lessons from the pandemic: Exploring how Victorian hospitals responded to COVID-19
- Why we need to transform the presentation of dietitians on the internet
- Strategies to divert food waste from landfill: A review of hospital food services worldwide
- Training the future workforce through a pandemic: The Monash University experience

**Melissa Corken, Nicholas van Veenendaal**—What is the waste? A cross sectional audit of oral nutrition support usage and consumption

### Occupational therapy Australia National Conference June 23-25

**Bec Nicks** – Early therapy in the acute general medical setting improves patient and hospital outcomes

**Jennifer Bone** – The effectiveness of non- pharmacological interventions on functional independence in inpatients with delirium: A systematic review

**Christy Walsh** – A personal journey through re-registration: reflections on barriers and enablers

**Jessica McKenzie** – An interdisciplinary approach to facilitating independence on the rehabilitation wards: A mixed method study

**Katherine Harding, Annie Lewis**

- Translating evidence into practice to reduce waiting time in community- based outpatient services
- Reducing waiting times for community and outpatient occupational therapy: An introduction to the stat model of access and triage (workshop)



**Functional Independent Measure (FIM)**

- Experimental group had higher FIM scores in:
  - Total discharge score
  - Total amount of FIM change
  - Walking, transferring, bathing, dressing.



**Results – discharged home**

- n = 30, 71% of extra therapy group
- n = 12, 40 % of usual care group
- $p = 0.01$

Above: Bec Nicks presents on the benefits of additional early therapy in acute general medical wards

Left: Jess McKenzie on using swivel shower chairs to reduce manual handling and improve independence in rehabilitation wards.

## Allied Health Research Achievements

### Publications

**Dennett AM, Zappa B, Wong R, Ting SB, Williams K, Peiris CL.** Bridging the gap: a pre-post feasibility study of embedding exercise therapy into a co-located cancer unit. *Support Care Cancer*. 2021 (Early online)

**Dennett AM, Taylor NF, Porter J, Evans J, Horne-Thompson AL, Harding KE.** Bridging the Divide: An Analysis of Allied Health Quality and Research Projects. *J Contin Educ Health Prof*. 2021 (Early online)

**Dennett A, Peiris C, Tan G, Shields N.** Clinician's perspectives of implementing exercise-based rehabilitation in a cancer unit: A qualitative study. *Supportive Care in Cancer*. 2021 (in press)

Flood C, Parker EK, Kaul N, Deftereos I, **Breik L**, et al. A Benchmarking Study of Home Enteral Nutrition Services, *Clinical Nutrition ESPEN*, 2021 (Early online)

**Griffiths DA, Kaminski MR.** Duration of total contact casting for resolution of acute Charcot foot: A retrospective cohort study. *Journal of Foot and Ankle Research*. 2021 (Early online)

**Hawke LJ, Taylor NF, Dowsey MM, Choong PFM, Shields N.** In the dark about physical activity - exploring patient perceptions of physical activity after elective total knee joint replacement: a qualitative study. *Arthritis Care and Research*. 2021 (Early online)

**Harding KE, Lewis AK, Snowdon D, Kent B, Taylor NF.** A multi-faceted strategy for evidence translation reduces healthcare waiting time: A mixed methods study using the RE-AIM framework. *Frontiers in Rehabilitation Science*. 2021; 2(1)

**Lewis A, Harding KE, Carney P, Taylor N.** What is the effect of delays in access to specialist epilepsy care on patient outcomes? A systematic review and meta-analysis. *Epilepsy & Behavior*. 2021 (in press)

**Senserrick C, Lawler K, Scroggie GD, Williams K, Taylor NF.** 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*. 2021 (Early online)

**Taylor NF, Harding KE, Dennett A, Febrey S, Warmouth K, Hall A, Prendergrast L, Goodwin V.** Behaviour change interventions to increase physical activity in hospitalized patients: A systematic review, meta-analysis and meta-regression. *Age and Ageing* 2021. (In press)

**Tran MM, Haley MN.** Does exercise improve healing of diabetic foot ulcers? A systematic review. *Journal of Foot and Ankle Research*. 2021; 14 (19)

### Conference Presentations

**Dennett AM.** Leveraging physios to provide exercise assessment and interventions: Experiences with the new COSA guideline (Invited). 2nd International Conference on Physical Therapy in Oncology (ICPTO) -When Research Meets Clinical Practice. May 3-4, 2021 (Virtual)

**Dennett AM, Cauchi T, Harding K, Kelly P, Ashby G, Taylor NF.** Research interest, experience and confidence of allied health professionals working in medical imaging (Poster) ASMIRT-NZIMRT 2021 "Re-Vision" June 4-6, 2021. (Virtual)

**Puli N** Infrared dermal thermometry is highly reliable in the assessment of patients with Charcot neuroarthropathy Wounds Australia National Virtual Conference 2021, May 4-6, 2021 (Virtual)

**Harding KE, Lewis AL, Snowdon D, Kent B, Taylor NF.** A KT strategy to reduce health service waiting time using the RE-AIM framework. International KT Conference in rehabilitation. McGill university, Montreal. 14-15<sup>th</sup> June. (Winner Best Poster Award!)

VICTORIAN  
CANCER  
AGENCY



### 2021 Funding Round - now open

*The Victorian Cancer Agency (VCA) is a team within the Department of Health that funds translational cancer research to improve clinical practice and outcomes for Victorian people impacted by cancer.*

*The VCA's research grants have been supporting innovation and excellence in cancer research since 2006, investing more than \$250 million into translational research and infrastructure.*

*This funding round includes non-biomedical early career fellowships incorporating research funding and salary support over 3 years. Allied health professionals within 5 years of completion of a PhD are eligible to apply.*

More information:

[www.victoriancanceragency.vic.gov.au](http://www.victoriancanceragency.vic.gov.au)

### Allied Health Research Committee

Nick Taylor  
Katherine Harding  
Amy Dennett  
Anne Thompson  
Alison Wilby (Psych)  
Sarah Dallimore (Pod)  
Andrea Elliot/Lina Breik (Dietetics)  
Rebecca Nicks (OT)  
Kate Morris (SP)  
Glenda Kerridge (SW)  
Judy Bottrell (PT)  
Peter Brann (Mental Health)

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