

ALLIED HEALTH RESEARCH NEWS

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## The results are in: How did we do in 2022?

Every year the Allied Health Clinical Research Office team compile a report of research activity for the calendar year. Our 2022 report has just been released, demonstrating that our research programs continue to go from strength to strength.

Over the year we were involved in several large

funded projects, but also saw a huge amount of clinician lead research coming through from across all disciplines and programs. Total publications continues to increase every year, as does the number of clinicians enrolled in higher degrees by research. It was also really pleasing to see 20 new projects led by

allied health staff approved by the HREC, and 43 presentations at conferences, indicating that these activities are bouncing back after Covid disruptions. The full report is available on the [Eastern Health website](#). Thanks to everyone who contributed to this important record of achievement.

## A Research Newsletter for Allied Health Clinicians

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## Key developments

- Recruitment completed in three large NHMRC funded trials: **MIHip**, **ComeBACK** and **MyTherapy**. MIHip and ComeBACK focus on health coaching to improve confidence to restore mobility during and after rehabilitation; MyTherapy uses self-management to enhance inpatient rehabilitation
- The Eastern Health Foundation has provided support for three new projects:
  - Accelerating Research Translation: The ART of Evidence-Based Care**, led by **Katherine Harding**, will test an innovative new framework for translation of research evidence into practice.
  - Renita Manning** will investigate factors associated with improved outcomes in the early supported discharge program after stroke.
  - A physiotherapy team** will implement David Snowdon's clinical supervision training program.
- Dr Amy Dennett** our Victorian Cancer Agency Research Fellow attended a competitive fellowship program at Yale University, USA and continues her research in oncology rehabilitation.
- Dr Annie Lewis** received her PhD and became our next Research and Translation Fellow, continuing her work on reducing outpatient wait lists and supporting research in medical imaging services.
- The **Allied Health Research Forum** continued in an online format to showcase allied health research. Awards were won by **Tilley Bissett** (best presentation) and **Emma Parsons** (People's Choice)
- We hosted international researcher and expert in patient flow, **Dr Sara Kreindler**, from Canada as the guest speaker for the Eastern Health Research Forum
- Allied Health Paper of the Year** awarded to **Ali Gibbs**
- Allied Health Researcher of the Year** awarded to **Sarah Osurak**

## Achievements



**78** Publications  
in peer reviewed journals

**19** enrolled in  
higher degrees  
by research,  
including  
3 PhD completions



**20** new Allied Health  
projects approved by  
the EH ethics committee

**43** Presentations  
at national and  
international  
conferences



**\$253,074**  
In research grant  
funding



# “Stepping into Research” is back!

## Allied Health Research Training Scheme

The Stepping into Research Training Scheme at Eastern Health is back in 2023 and we are looking for **enthusiastic clinicians** with a **burning clinical question** and passion to improve practice to join the program!

**Applications  
now open for  
2023!**

### What is “Stepping into Research?”

This program introduces allied health clinicians to the process of conducting and writing up a systematic review of the literature. No previous research experience is required, a demonstrated interest and enthusiasm for finding the answers to an important clinical question.

Participants will have the opportunity to present at an appropriate Eastern Health Forum, and are expected to work towards the goal of submitting their work to a peer reviewed journal.

### What if I want to apply but don't have a topic?

Some of our mentors have systematic review topics that fit within a broader program of research. Applicants are welcome to consider these ideas, and whether they are a good fit with their own interests. For more information contact Annie Lewis.

### What's Involved?

Successful applicants will be supported by their manager to spend one half day per week for twelve weeks to learn to conduct and write up a systematic review on a topic relevant to their work place. The program includes:

- 4 x 3 hr group training sessions (Thursday afternoons: 13th July, 3rd August, 24th August, 21st September). The majority of these sessions will be held over zoom, with the possibility of session 1 being face to face to enable participants to meet and get to know one another
- A series of 1:1 meetings with an allocated mentor (time and location negotiable)
- Private study time
- A virtual presentation afternoon participants and mentors on Thursday 19th October.

### Expectations & Outcomes

At the conclusion of the program, participants are expected to have written a systematic review of the evidence for a clinical intervention of relevance to their workplace to a standard suitable for submission to a peer reviewed journal.

Participants are also expected to be available to present their findings at an appropriate Eastern Health forum, such as the annual Allied Health Research Forum.

In the past, about 40% of SIR have published their reviews, and about 1 in 10 have gone on to complete a higher degree by research.

**SYSTEMATIC REVIEW  
OF THE LITERATURE**  
A systematic search,  
appraisal and summary  
of the literature on a  
clinical question.  
Often the first step to  
a change in clinical  
practice.

To obtain an application form, contact Katherine Harding at the Allied Health Clinical Research Office.

Further information is available from Annie Lewis (9091 8874)

**Applications close Friday 2nd June.**

## “I just need a plan”: Consumer perceptions of waiting for healthcare

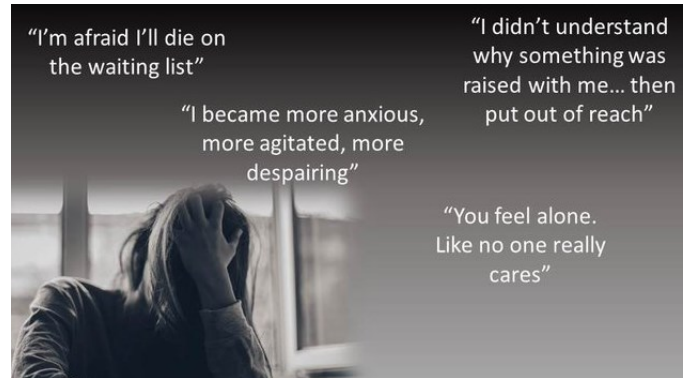
Waiting lists are common in healthcare. Our services are in high demand and capacity is limited. Despite these challenges, there are strategies that can be used to maximise the benefit of available resources and reduce the likelihood of long waiting lists developing with the inevitable result being that some people will never see the front of the queue.

At Eastern Health we have been conducting a world-leading program of research into evidence based methods to improve patient flow through outpatient and community services and reduce waiting lists. But how much does it matter if people have to wait for these services?

In a project conducted by Katherine Harding, Annie Lewis and Nick Taylor with funding from La Trobe University, focus groups were conducted with consumers (n=14) who had experience of being on waiting lists for a broad range of services, such as medical outpatients, cardiac rehabilitation, paediatric community health, and mental health services.

The researchers aimed to explore the experiences of these consumers and to understand the impact of delays in access to services on people's lives.

Data from the three focus groups clearly showed that waiting for healthcare has detrimental impacts on health and well-being. People talked about feelings of stress and anxiety, deterioration in their health conditions, fear and frustration. Consumers on wait lists want their health needs addressed, but they also want the ability to plan, clear communication and to feel like someone cares. Instead, they talked about feeling forgotten by impersonal and inflexible systems, often with very little communication. There were frequent stories of emergency departments and general practitioners left to fill in the gaps.



Findings suggest that more consumer-centred approaches are needed for access systems for outpatient and community services, featuring honesty about what services can realistically be provided, early access to initial assessment and information and clear lines of communication.

Thanks to the clinicians across Eastern Health who assisted with recruitment to this trial. The findings have been published in the [Journal of Evaluation in Clinical Practice](#).

## PhD Spotlight: Anna Joy

Anna Joy is known to many in allied health at Eastern Health, and is currently a clinical grade 4 in occupational therapy. She is currently a PhD candidate at La Trobe University, conducting research into the use of online learning strategies to facilitate knowledge translation among allied health professionals.

Throughout Anna's career working with stroke survivors, she developed an interest as to why some clients received evidence-based care, while others did not. She began to investigate innovative ways of increasing the translation of research evidence into practice through a Masters' research thesis investigating clinical supervision as a platform for knowledge translation.

An example of evidence-based practice endeavour with a structured program targeting clinicians is the SENSE implement and SENSE partnership work led by Professor Leanne Carey (La Trobe University) that intends to improve the quality of somatosensory

rehabilitation for stroke survivors. Existing SENSE training is provided mainly through face to face workshops, creating access barriers due to geography, cost and time required to attend courses. Anna's research program is looking at whether online courses can be used as an effective alternative for knowledge translation initiatives, using SENSE as a case study.

This work seeks to influence the care provided to stroke survivors with somatosensory changes after a stroke. Sensory changes are known to have a significant impact on the daily activities that stroke survivors are able to complete, so we hope to improve this component of clinical care to match the good work that Eastern Health therapists do to improve motor function following a stroke.

Anna's work began with a systematic review into the effectiveness of online training for knowledge translation, which suggested that these programs increase knowledge and skills, but

there is little evidence available to say whether they are effective in changing behaviour; changing knowledge doesn't always equate to changing practice. She went on to explore current practice in somatosensory assessment and rehabilitation at Eastern Health, and conducted focus groups with clinicians to discuss feasibility of delivering professional education through online courses. She is now working with a team to finalise a prototype of the first online SENSE training course, which she will pilot with a group of neurological Occupational Therapists in private practice, before rolling out in a larger implementation trial at Eastern Health. This final study will consider both knowledge and behaviour change outcomes, addressing an important gap in current knowledge.





## Award winners announced in the 2022 Allied Health Research Report



### Allied Health Research Paper of the Year: Ali Gibbs

Each year at Eastern Health, an award is granted to the Allied Health Research Paper of the Year. A short list is nominated from all of the papers included in the research report. These papers are reviewed by an independent judge who selects a winner.

This year's winning paper was led by Ali Gibbs from physiotherapy. Ali's study explored factors influencing guideline-based care from the perspectives of physiotherapists working in specialised osteoarthritis services.

The judge commented on the quality of the short-listed papers singling out the paper by Lina Briek "Micronutrient intake from enteral nutrition in critically ill adult patients: A retrospective observational study" for a special mention.

The full paper can be found at

[https://  
onlinelibrary.wiley.com/doi/  
full/10.1002/msc.1638](https://onlinelibrary.wiley.com/doi/full/10.1002/msc.1638)

#### **Osteoarthritis management care pathways are complex and inefficient: A qualitative study of physiotherapist perspectives from specialised osteoarthritis services**

Alison J. Gibbs, Jason A. Wallis, Nicholas F. Taylor, Joanne L. Kemp, Christian J. Barton

Musculoskeletal Care, Col 20, Issue 4, 2022

**Objective:** Hip and knee osteoarthritis guidelines internationally provide consistent first-line care recommendations. However, uptake of these recommendations remains suboptimal. This qualitative study explores factors influencing guideline-based care from the perspectives of physiotherapists working in specialised osteoarthritis services across different models of care.

**Methods:** Nineteen semi-structured interviews were conducted with physiotherapists working in specialist osteoarthritis services across three different Australian models of care (OsteoArthritis Hip and Knee Service n = 10; OsteoArthritis Chronic Care Programme n = 4; Orthopaedic Physiotherapy Screening Clinics and Multidisciplinary Services n = 5). Interviews were audio recorded and transcribed verbatim. Data were coded and analysed inductively using thematic analysis.

**Results:** The overarching theme to emerge was that accessing first-line osteoarthritis care is complex and difficult, regardless of model of care. Subthemes indicated that: (i) services are either unavailable or inadequately funded, (ii) referral pathways are labyrinthine and lengthy, (iii) patients and other health professionals often believe that surgery is the only/best option and (iv) managing patient co-morbidities is challenging.

**Conclusion:** Physiotherapists working in specialised osteoarthritis services perceive multiple and complex factors influencing adherence to first-line care. Barriers occur at various levels in all models of care, including patient and health professional beliefs, health service, and system levels. These results suggest improving healthcare for people with osteoarthritis requires urgent system reform.

### Allied Health Researcher of the Year: Sarah Osieurak

The Allied Health Researcher of the Year award recognises the outstanding contribution of clinicians undertaking research embedded within their clinical role at Eastern Health to the generation and application of research evidence in practice, educational programs, workforce and policy development.

For 2022, the award was received by Sarah Osieurak for her

contribution to improving the effectiveness of clinical supervision practices at Eastern Health. Sarah conducted a literature review on effective clinical learning environments and clinical supervision through her Masters of Healthcare Leadership in 2020 and conducted a randomised controlled trial in 2021/22 evaluating an interactive workshop series on effective clinical supervision of physiotherapists. The trial found a

notable improvement in the effectiveness of clinical supervision and a clinically significant reduction in burnout for participants compared to the control. Sarah also completed a comprehensive qualitative study exploring barriers to participation in effective clinical supervision that will shape the structures and processes enabling effective practice over coming years.

## The Lived Experience Workforce: Partners in practice and research

### Who are the Lived Experience Workforce?

**Katherine Dowson**  
Associate Program Director for Lived Experience

The Lived Experience Workforce is integral to the Mental Health and Wellbeing program at Eastern Health. These workers play a key role in the design, development and delivery of mental health service provision, either through direct support to consumers through peer support or advocacy, or indirectly through leadership, system advocacy, education, and research.

The EH Lived Experience Workforce comprises a large and diverse team that spans across community, inpatient and residential settings and across age ranges from perinatal work, children through to older adults. Key positions include:

- Associate Program Director Lived Experience;
- Consumer & Carer Consultants;
- Consumer & Carer Peer Support roles;
- Manager Lived Experience Workforce Adult and Older Adult;
- Manager Lived Experience Workforce ICYMHS (Infant, Child, Youth);
- Team Leaders & Practice Supervisors;
- Casual Lived Experience Worker role;
- Aboriginal Lived Experience Peer Support Worker;
- HOPE (Hospital Outreach Post-Suicidal Engagement);
- ICYMHS Lived Experience Workforce;
- Training & Education

### Peer workers enhancing research at Turning Point

**Baden Hicks,**  
Peer Worker, Turning Point

I work as a pharmacotherapy peer worker at Turning Point Richmond on the pharmacotherapy team where I support people in relation to pharmacotherapy treatment programs, and providing harm reduction education around using drugs.

I also have an important role supporting research projects at Turning Point. I am involved in a lot of research projects, including as a co-investigator. For example, I am currently a researcher on an application for a \$180,000 ADRIA grant on supporting people with education and support groups with pharmacotherapy. Another project I am involved in is developing guidelines and best practice in supporting the lived and living experience workforce for the department of health.

I have also been on research projects to do with the medically supervised injecting rooms, a contingency management project to support people with problematic methamphetamine use and also a co-design project to support AOD

treatment in inpatient psychiatric units, to name a few.

I have also done a lot of public speaking and advocacy work. I have presented at a Thought Leadership event held by Firststep in St Kilda, presented on a panel at the rethink addiction convention, and the International medicine in addiction convention. I have also spoken at Parliament house about the need for decriminalization, been in Insight on SBS, and appeared on the ABC news and the Project on channel 10 where I have spoken about drug use and addiction. My role has also given me a lot of opportunities to do educational talks to students about drug use and peer work.

There's a saying 'nothing about us without us' I think people with lived and living experience can have a more insightful lens than people without lived or living experience when it comes to research. I think if you're doing a research project on people with experience around drugs and alcohol then its common sense to involve them on the research project.

### Benefits of including people with lived experience in research

**Peter Brann, Director of Research and Evaluation in the Infant, Child and Youth Mental Health Service**

The high quality research at Eastern Health can be further improved by ensuring that the perspective and expertise of those with relevant lived experience is incorporated from the design phase onwards. Engaging consumers and carers as 'co-collaborators', rather than 'subjects' can enhance the questions, methods, results and implications of our research.

For example, in a current study investigating how young people and their families view the relationship between Mental Health Services and the Emergency Department, a Consumer Consultant, Carer

Consultant, Academic Psychiatrist and Clinical Psychologist were all involved from the outset. They helped to refine our questions, debate presumptions, develop the recruitment method, write interview questions, and design the safety net for participants. We decided that a young person and a carer should take the lead in the interviews. The themes that emerge from this study will be checked by all of us to ensure that everyone's experiences are included. It is a longer process but one that we believe has respected the commitment to 'nothing about us, without us'.

## Congratulations to our Eastern Health social workers on new publications

### Social work in alcohol and other drug service navigation: supporting social complexity in dual diagnosis

Many people with dual diagnosis present with social complexity that impedes service access. The role of social work support in such service navigation is poorly understood. In a study led by **Sally Thomas**, social worker at Turning Point, Eastern Health, researchers aimed to characterise client presentations to an Australian telephone-based social work alcohol and other drug (AOD) service navigation and linkage program.

The study was conducted in AOD Pathways, a publicly funded service comprising of social workers and operates Victoria-wide assisting to support clients, assisting with Alcohol and other Drug (AOD) issues. The team focuses on AOD sector service navigation, advocacy, support and referral for complex and high risk AOD clients who may have a co-occurring mental health diagnosis or presentation.

A retrospective audit was conducted of routinely collected clinical information from a six-month period, selected to capture the social and health challenges experienced during the mid-pandemic period (mid-2021) in Victoria, Australia, during which a number of lockdowns resulted in a reliance on telephone-based services. The audit focused on client and presentation characteristics, and compared clients with and without a history of co-occurring mental health and AOD concerns.

Three in four people accessing the service presented with dual diagnosis. These individuals required more support compared to those without a co-occurring mental health disorder; but overall, were just as likely to achieve a successful linkage to services,

when offered holistic, long-term social work support.

This study highlights the challenges in operationalising social complexity factors alongside clinical mental health and AOD diagnoses, and points to the need for further research to guide future service development for this vulnerable client group.

Thomas, S., Cotroneo, S., Pham, D., Kalogeropoulos, R., Tyler, J. and Arunogiri, S. (2023), "Social work in alcohol and other drug service navigation: supporting social complexity in dual diagnosis", *Advances in Dual Diagnosis*, <https://doi.org/10.1108/ADD-10-2022-0027>

### Peer worker perspectives on barriers and facilitators: implementation of recovery-oriented practice in a public mental health service

Janice (Jaz) Chisolm and  
Melissa Petrakis

This paper was published in the

*Journal of Evidence-based Social Work, 2023* and is available online at

<https://www.tandfonline.com/doi/abs/10.1080/26408066.2022.2118006>

#### ABSTRACT

**Purpose:** The use of recovery-oriented practice (ROP) in mental health is increasing globally. This study explored attitudes of peer workers about ROP's implementation.

**Method:** A narrative approach embracing the principles of co-production and using semi-structured questions in a focus group setting was used. Data were analyzed for themes and content from eight participants.

**Results:** Themes indicated structural and individual barriers and facilitators. Power imbalances, organizational structure, stigma and inequity prevented the ease of implementation. On an individual level, there was a need for active listening, positive regard, and recognition of uniqueness in peer workers, recognizing them as experts in their own lives. Some of the supportive values that were identified were hope, inclusive practice, and collaboration.

**Discussion:** In terms of implementing ROP, organizations, and clinicians need to embrace a holistic approach, practice inclusiveness, and recognize the uniqueness of lived experienced employees. Organizations need to address culture, stigma, wage disparity, role definition, and the biomedical framework that seems to pervade public mental health. These ideas are reflected in the literature.

**Conclusions:** The lived experience of peer workers contribute to a service's implementation, and clinician uptake, of ROP. The study contributes to increasing evidence that encourages the adoption of peer workers in mental health services.

## Have you done your Good Clinical Practice Training?

Good clinical practice (GCP) training aims to educate healthcare professionals, research staff, and clinical trial sponsors on the ethical, legal, and regulatory requirements for conducting clinical research.

GCP training is designed to ensure that clinical trials are conducted in a safe, ethical, and scientifically valid manner, by ensuring that everyone involved in the clinical trial process is aware of the requirements and able to adhere to them.

GCP Training is highly recommended for anyone involved in research, and mandatory for some research funding bodies or research institutions. The training typically covers topics such as:

- Origins, rationale and principles of good clinical practice
- Responsibilities of individuals involved in research
- Record keeping and accountability
- The role of ethical committees and regulatory bodies
- Monitoring, reporting and closing projects

GCP training can be completed through real time courses (online or face to face) or as online modules. Some courses are free and others provided for a small fee. Some options for completing GCP Training include:

- [Monash Partners](#): 6 hours face to face full training, or a 2 hour refresher course (free to Eastern Health staff)
- [RET Program](#): Online self paced modules, approx. 4.5 hours. (\$40 for EH staff)
- [Genesis Research Services](#): 2-4 hours, self paced modules. (\$10 course fee including downloadable study guide)

### Seeking Expressions of Interest:

#### Allied Health Research and Translation Fellow

##### Allied Health Clinical Research Office

##### Short term backfill for long service leave (Gr 3 or 4, Full time, 8 weeks)

The Allied Health Clinical Research Office are seeking expressions of interest from internal allied health staff with research experience to backfill a period of long service leave for our Allied Health Research and Translation Fellow in July/August 2023.

Duties will include Supporting the continuing operation of existing trials and projects and coordinating research training and promotion activities such as the Allied Health Research Forum and Stepping into Research Training Scheme, in collaboration with the Allied Health Clinical Research Office team.

Given the short term nature of the role, research experience is essential. Remuneration will be commensurate with current role/experience.

To express your interest, please email [Katherine.harding@easternhealth.org.au](mailto:Katherine.harding@easternhealth.org.au) or phone 0420 939 008. EOI closes 7th April 2023



## Euan's Musings

*Euan Donley (PhD) is a social worker who likes to distract himself from real work by spouting a lot of rubbish for the Allied Health Research Newsletter*

Distractions can be hard to deal with and.... Ooooh look, a bird.

Anyway, as a researcher distractions can be self-imposed or from other sources. So this issue I thought I'd discuss... hang on, a text message, probably something important...

..Nope, need to get milk on the way home.

So anyway, distractions can easily be managed by switching off... hang on, the phone is ringing. I am sure it will be important this time...

...Nope, someone calling to offer me solar. I said no yesterday.

Anyway, sometimes.. Just a sec...someone at my office door and probably urgent....

....Nope. Apparently Brad is leaving and now I just gave away my last \$10 cash for a guy I met once during his 5-months here to give a handover to. Yes, I did an ISOBAR. Someone should come up with a matrix as to how long people should be here comparable with how nice they are and how much, if any, money we should donate.

I guess to get straight to the point, distrac.... Eeep, and e-mail marked urgent. Just a sec....

....nope, apparently there is an unplanned outage for some IT system I am yet to hear of and can't help but think they send messages out with made up names just to laugh at us.

Well, I'm at my word limit. I hope you are inspired. You're welcome.

## Allied Health Research Achievements

### Publications

Harding KE, Lewis AK, Taylor NF. (2023) 'I just need a plan!': Consumer perceptions of waiting for healthcare. *J Eval Clin Pract.* (Epub ahead of print)

Thomas S, Cotroneo S, Pham D, Kalogeropoulos R, Tyler J and Arunogiri S. (2023), Social work in alcohol and other drug service navigation: supporting social complexity in dual diagnosis, *Advances in Dual Diagnosis*, (Epub ahead of print)

Collins, J, Porter, J. (2023) Quantifying waste and its costs in hospital food services. *Nutrition & Dietetics.* (Epub ahead of print)

Benjamin DR, Frawley HJ, Shields N, Peiris CL, van de Water ATM, Bruder AM, Taylor NF. Conservative interventions may have little effect on reducing diastasis of the rectus abdominus in postnatal women: A systematic review and meta-analysis. *Physiotherapy.* 119: June, 54-71

Janice (Jaz) Chisholm & Melissa Petrakis (2023) Peer Worker Perspectives on Barriers and Facilitators: Implementation of Recovery-Oriented Practice in a Public Mental Health Service, *Journal of Evidence-Based Social Work*, 20:1, 84-97

Lewandowski PA, Barker L, Howard, A, Collins J. (2023) Packaged hospital food appears safe and feasible to reuse. *Nut Diet.* (Epub ahead of print)

Peiris CL, Gallagher A, Taylor NF, McLean S. Behavior change techniques improve adherence to physical activity recommendations for adults with metabolic syndrome: a systematic review. *Patient Preference and Adherence* (in press)

### Conference Presentations

Cook N, Parra D, Theil C, Collins J. How to design, conduct and analyse a food waste audit. *CleanMed 2023*, May 23-35, Pittsburg, USA.

Harding KE. What are we waiting for? A new approach to managing demand for outpatient and community services. *12th Australia Healthcare Week*, Sydney, 15-16th March 2023 (invited presentation)

## Allied Health Research Committee

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Amy Dennett  
Annie Lewis  
Anne Thompson (L&T)  
Danielle Griffiths (Pod)  
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