# **Eastern Health**

## **Allied Health Research News**

**ALLIED HEALTH RESEARCH NEWS** 

> **ISSUE 66** MARCH 2024

## A Research Newsletter for **Allied Health** Clinicians

#### Inside this issue:

2023 Allied Health Research Report	1
International Women's Day 2024	2
Funding Achievements	2
Stepping into Research - applications now open!	3
How Do I: Get started with qualitative research	4-
Research Spotlight	5
PhD opening	6
Research Achievements	7
Evan's musings	7

#### Contact us

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#### Want to learn more about AHCRO?

Visit our EH Intranet Page

## The results are in! How did we do in 2023?

Every year the Allied Health been released, **Clinical Research Office** team compile a report of research activity for the calendar year. It is an exciting time for our team to sit down and reflect on the work and achievements made by Eastern Health Allied Health staff throughout the year.

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. Research achievements continue to be outstanding with 59 publications and 18 clinicians enrolled in higher degrees by research.

The full report is available on the Eastern Health website. Thanks to everyone who contributed to this report.

Our 2023 report has just

## **KEY DEVELOPMENTS**

Eastern Health and La Trobe University continue to strengthen their research partnership by appointing Prof Katherine Harding into the new role of Professor of Allied Health/Implementation Science.

Dr Annie Lewis was appointed Allied Health Clinical Research Office Manager and continues her research as Allied Health Research and Translation Fellow.

The Stepping into Research Program was successfully conducted with five participants from Social Work.

Accelerating Research Translation: The ART of Evidence-Based Care, led by Prof Katherine Harding commenced, testing an innovative new framework for translation of research evidence into practice.

Dr Made Rimayanti was awarded her PhD, completing her research on the impact of motivational interviewing on walking and physical activity after hip fracture.

The Allied Health Research Forum showcased allied health research from many disciplines. Awards were won by Sarah Osiurak (Best Presentation) and Renita Manning (People's Choice).

Allied Health was well represented at the Eastern Health Research Forum with awards given to Dr Amy Dennett (Best Long Oral Presentation) and Dr Natasha Brusco (Best Short Oral Presentation).

The 2023 Allied Health Publication of the Year was awarded to health services researcher, Dr Annie Lewis for her work evaluating implementation of the Specific Timely Appointments for Triage (STAT) model of access in an epilepsy clinic to reduce a long waitlist and waiting time.

### ACHIEVEMENTS



publications in peer reviewed iournals







new Allied Health projects approved by the Eastern Health ethics committee

Eastern Health



enrolled in higher degrees by research, including 1 PhD completion



Allied Health

projects continuing at

#### ALLIED HEALTH RESEARCH NEWS

## **Celebrating International Women's Day 2024**

#### This International Women's

Day (8 March), Eastern Health is recognizing some of the extraordinary women in our workforce. Professor Katherine Harding was nominated for leading a program of research that aims to improve access to ambulatory and community based health services. This includes development of the Specific Timely Assessment and Triage (STAT) model for managing demand in these settings.

"It's really lovely to get the recognition from within the organisation. We've been working on this program of work for a really long time, but it's not just me, there's a whole team of people. I'm really proud of the work that we've done and I think we've really been making a difference.

Prof Harding also has an active role in building research culture and capacity



among allied health professionals at Eastern Health.

"Prior to my research career, I was an occupational therapist working clinically. It was really nice to be able to make that difference day to day to individual lives. One of the nice things about doing research and having this rolling research capacity at Eastern Health, is making a difference in a broader way in how we do things. It creates the opportunity to touch a lot more people's lives; not just those now, but also people in future who will benefit from the work that we've done."

**Congratulations Katherine!** 

### MRFF funding for care workforce training to reduce hospital falls in older people



A project co-led by La Trobe Academic Research Collaborative in Health (ARCH) researchers Prof Meg Morris, Ass Prof Adam Semciw and Prof Katherine Harding that aims to reduce hospital fall injuries has received MRFF funding to foster partnerships with our hospital industry partners.

The nation-wide multi-disciplinary project led by Prof Anne-Marie Hill from UWA will shape how health professionals and patients work together to reduce hospital falls and associated injuries.

The project has strong partnership links with industry partners Northern Health (led by La Trobe's Associate Professor Adam Semciw), Healthscope (led by Professor Meg Morris) and **Eastern Health** (led by **Professor Katherine Harding**).

It will provide a foundation for effective delivery of patient fall prevention education by working with older people, their families, staff and health professionals. Aligning with La Trobe's Care Economy Research Institute (CERI), the nation-wide research team will train the care workforce and patients in optimal methods to reduce hospital falls in order to improve patient safety and outcomes.

#### **Congratulations to EH Foundation Research and Innovation Grant Recipients 2024**

- Chief Investigators: Haley MN, Lawler K, Webber S, Taylor NF, Terrens F, Edvardsson D, Shields N, Speed V, Snowdon D, Brusco NK, English D. Stepping Up Support: evaluating the feasibility of a stepped care model of family involvement for adults in a Geriatric Evaluation and Management unit. \$19,753
- 2. Chief Investigators: Dennett A, Harding K, Taylor N, Shields N, Barton C, Peiris C, Lynch L, Parente P. TeleCaRe: Implementation of Cancer Rehabilitation via Telehealth in community health. \$29,848
- 3. Chief Investigators: Marriott A, Hernandez S, Taylor N, Buntine P, Dewey H, Choi P, Hezekaih D. Development and implementation of the Interdisciplinary Vestibular (In-Vest) competency package for doctors and physiotherapists in the emergency department to improve adherence to the GRACE-3 guidelines. \$23,036

## **"Stepping into Research"** Allied Health Research Training

The Stepping into Research Training Scheme at Eastern Health is about to kick off in 2024 and we are looking for **enthusiastic clinicians** with a **burning clinical question** and passion to improve practice to join the program!

## 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, but participants need to demonstrate 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.

#### Stuck for a topic?

Some of our mentors have a range of review questions waiting to be answered that align with current topics of concern at Eastern Health or fit within a broader program of research. Please head to our Intranet for a list of questions.

### 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 hour group training sessions (Thursday afternoons: 18th July, 8th August, 29th August, 19th 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 for participants and mentors on Thursday 17th October.

Applications now open for 2024!

## Expectations & Outcomes

At the conclusion of the program, participants are expected to have written a systematic review of the evidence for a clinical question 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.

### **Did You Know?**

In the past, about **4 out of 10** of SIR have published their reviews, achieving a first author publication and about **1 in 10** have gone on to enrol in 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.

For more details and to obtain an application form, please visit the Allied Health Clinical Research Office Intranet Page <u>here</u> Any questions, please contact <u>Annie Lewis</u> (9091 8874) **Applications close Friday 31st May.** Places will be limited.

## HOW DO I ...

## Get started with qualitative research?

Qualitative research can be a great way to dig deeper into research findings and explain phenomena that can't be captured by quantitative data (numbers and statistics) alone.

The most common qualitative data we conduct at Eastern Health includes interview data from patients and clinicians to explore their experiences in a way surveys cannot. Qualitative research might be used to explore indepth attitudes toward participating a new intervention or service, barriers and facilitators to providing care, and even to design new research or services.

Qualitative research can appear more fluid and open to interpretation than quantitative methods. However, qualitative research still must be designed with repeatable processes in place to ensure data is robust and trustworthy. Below are some steps to conducting qualitative research and analysis to help get you started.

#### 1. Choose your data collection method

Define who your participants are and how you need to collect your data. This is usually done using semistructured interviews (A base set of questions that can be developed throughout the research) 1-on-1 or in a focus group. Having a flexible interview guide will help you explore different topics bought up by participants as they arise, helping you develop a rich data set. Sometimes the method will be determined as a pragmatic decision based on how much resource you have. For example trying to get 10 doctors in a room at the same time can be challenging so you might prefer to interview them individually. However, sometimes it may be important to capture a group dynamic (e.g. participants of a rehab group) and therefore a focus group might be preferred

#### 2. Choose your research paradigm

Multiple theories can guide qualitative research. This includes grounded theory, interpretive description and phenomenology. Each has a different purpose when planning your research. Most health services research takes an interpretive description approach. This flexible method can address complex experiential questions while producing practical outcomes.

#### 3. Collect the data

Qualitative data from interviews usually involves analysing transcripts obtained from audio or video recordings. These recordings may be transcribed manually (That's right, you listen to the recording and type out the words!) or special software can be used to speed up the process. While labour-intensive, manual transcription can be a great way to help you become familiar with the data, especially for novice researchers.

#### 4. Immerse yourself in the data

This involves listening to recordings, making and reading fieldnotes and reading transcripts repeatedly to get a sense of what participants are trying to say.

#### 5. Code the data

Coding organises data into a manageable form so you can make connections with the data to form a scaffold for your analysis. Codes identify a feature of the data and may arise from the data itself (inductive) or be predetermined (deductive). You will make a codebook to explain what the codes mean. You may do this on many occasions, refining your codes as they reappear. It is not a linear process and can be time consuming but don't fret, its all part of the process!!

#### 6. Search for themes

After you have a list of codes you can identify patterns and put them into meaningful groups. You might use tables or mind-maps to support this process.

#### 7. Reviewing the themes

After you have found some themes, you may discuss this with another researcher to check the themes and refine them further. You will go back to your data on multiple occasions until you agree on a main theme/s. It is important you are not just paraphrasing. Identify the story developing from the data and how it fits with the broader research story. Consider the theme itself and how it fits with other themes.

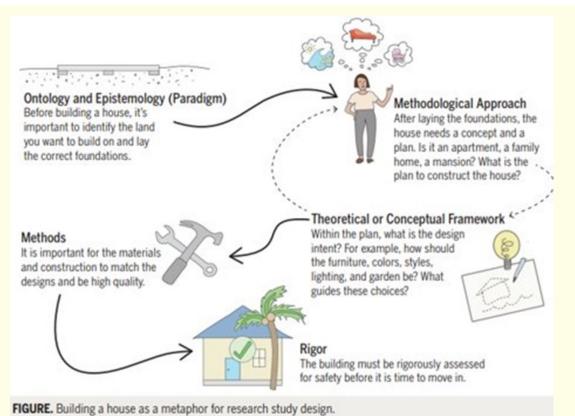
If it doesn't, you need to keep refining.

#### 8. Write the report

A good piece of qualitative research will argue your results in relation to the research question. All themes should cohere around a central concept with evidence of themes by using vivid quotes in your manuscript and supplementary data. A figure can be a good way to explain how your themes all link together to tell the story.

Qualitative research can be challenging and time consuming at first, but there are some great resources available to help you understand the process. Some helpful papers can be found <u>here</u>. Qualitative research can really challenge your creative brain and produce some really valuable insights from participants so hang in there! Don't forget to reach out to <u>one of our team</u> if you think this methodology might work for one of your projects.

### **Getting started with qualitative research**



Klem et al. Demystifying Qualitative Research for Musculoskeletal Practitioners Part 2: Understanding the Foundations of Qualitative Research. Orthop Sports Phys Ther 2021;51(12):559-561. doi:10.2519/jospt.2021.0113

## **Research Spotlight: Denise O' Driscoll**

Denise O'Driscoll is the Chief Sleep Scientist at Eastern Health and an Adjunct Clinical Associate Professor at Monash University. She completed her PhD at the University of London (Imperial College, 2006) investigating the cardiovascular response mechanisms to arousal from sleep (waking up that is!). Upon returning to Melbourne she was awarded two successive fellowships to complete her post-doctoral studies in paediatric sleep at Monash University. Her postdoc was noteworthy for work showing children with Down Syndrome have a compromised acute cardio-respiratory response in sleep apnoea placing them at increased risk for cardiovascular complications.

Denise's research program now focuses on the cardio-metabolic consequences of sleep apnoea in adults, in the settings of obesity and ethnicity. In addition, her research examines sleep in hospitals, pain and sleep, and technical aspects of how to measure sleep. Working at Box Hill Hospital has

aided her sleep and ethnicity research program. Using mathematical modelling of signals measured during a typical sleep study, her research demonstrated Chinese patients with sleep apnoea have a more collapsible upper airway, but less sensitive ventilatory control suggesting that different treatment approaches might be needed – one size access to sleep disorder management does not fit all!

Other highlights of the last few years include the Sleeping Well Trial - a multicentre randomised controlled trial, which supported weight-loss interventions within six-months of starting continuous positive airway pressure therapy (CPAP). She also led a key editorialised publication on hypertensive risk of sleep apnoea in REM sleep in a large clinical population - this started out as a Covid lockdown project for a junior scientist. This year she is embarking on a funded trial of time restricted eating in sleep apnoea.

Professionally she has served as a Board Director for the Australasian

Sleep Association, and Thoracic Society of Australia and New Zealand and is currently an Associate Editor for the journal SLEEP Advances. However, she is most proud of being a representative panel member on the Australian Parliamentary Inquiry into Sleep Health in 2019 where she advocated for better for all Australians.



## **Calling all EH researchers!**

### Have you used the EH Short Notice Assessment Checklist Tool?

With the implementation of the National Clinical Trials Governance Framework (NCTGF), the Office of Research and Ethics has recently provided information about Short Notice Accreditation Assessments and a Short Notice Self-Assessment Checklist Tool to support the EH Research Workforce. All EH researchers are encouraged to use the Short Notice Self-Assessment Checklist Tool to assess each clinical trial that is carried out in your department. Please aim to complete self-assessments for all of your clinical trials by 31 March 2024.

**Next Steps:** In the coming weeks you may receive an **audit request email** from the Office of Research and Ethics. This will be an opportunity for you to work side by side with the Office of Research and Ethics to ensure your department is ready for Short Notice Assessment.

The **Short Notice Self-Assessment Checklist Tool** is <u>available here</u>. For further information, please view the <u>Short Notice Accreditation Assessments Fact Sheet</u>.

If you have any questions at all in the meantime, please contact the Office of Research and Ethics <u>ethics@easternhealth.org.au</u>



AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE



## Seeking a PhD Candidate!

#### Towards Building a Sustainable, Resilient and Fit for Purpose Allied Health Care Hospital System

Australia's public hospital system is experiencing alarming rates of Allied Health workforce shortage, with difficulty recruiting and retaining Allied Health staff leading to high staff turnover. Existing Allied Health staff have been grappling with reduced capacity to manage patient caseloads, which can lead to poor staff and patient outcomes. Optimising existing Allied Health hospital workforce capacity via innovative workforce design is vital to ensure that patient care is not compromised.

This PhD project will work towards future-proofing the Allied Health workforce and ensuring it is fit for purpose via 3 complementary streams:

- 1. Understand the current Allied Health public hospital workforce capacity;
- 2. Quantify the impact of current capacity on staff and patient outcomes; and
- 3. Explore the utility of innovative workforce design on current capacity limitations.

## We are seeking a candidate with a background in an Allied Health profession, health care, health services research, or other relevant discipline/background.

The PhD project is based at The Alfred Centre (99 Commercial Rd, Melbourne). The successful candidate will be supervised by the Project Lead (A/Prof Julia Gilmartin-Thomas - joint role between La Trobe University and Alfred Health) and co-supervisor (Prof Nicholas Taylor- Eastern Health/La Trobe University) and work in collaboration with their wider network of Professors and Associate Professors of Allied Health, who are based at Melbourne Health, Eastern Health and Northern Health.

Please contact Julia for further information: j.gilmartin-thomas@latrobe.edu.au https://www.latrobe.edu.au/research/graduate-research/fees-and-scholarships/scholarships/project

#### ALLIED HEALTH RESEARCH NEWS

### Allied Health Research Achievements

#### **Publications**

Brusco N,...**Taylor NF...Lawler K.** Reforming allied health service provision in residential aged care to improve the rehabilitation reach: a feasibility study. Australian Health Review. 2024; 48(1):66-81.

**Osiurak S, Taylor NF, Albiston T, Williams K,** Collyer TA, Snowdon DA. Interactive Clinical Supervision Training Added to Self-Education Leads to Small Improvements in the Effectiveness of Clinical Supervision of Physiotherapists: A Randomised Trial. Journal of Physiotherapy. 2024;70(1):33-39.

Miller J, Nguyen E, Lam AYH, **Brann P**, Innes S, Buntine P, Broadbear J, Hope J. Experiences of consumers, carers and clinicians during borderline personality disorder presentations to the emergency department-An integrative review. Journal of Psychiatric and Mental Health Nursing. 2023 Dec 18.

Davidson G, **Allchin B**, Blake-Holes K, Grant A, Lagdon S, McCartan C, Maybery D, Nicholson J, Reupert A. Supporting Service Recipients to Navigate Complex Service Systems: An Interdisciplinary Scoping Review. 2023. <u>doi.org/10.1155/2023/8250781</u>

Von Doussa H, **Hegarty M**, **Sanders B**, Cuff R, **Tivendale K**, McLean SA, Goodyear M. Peer support for children of parents with mental illness (COPMI) in Australia: responses from children, parents and facilitators of the CHAMPS peer support program. Advances in Mental Health. 2023; 21(1):55-56.

Lee C, Dennett AM, Pinson J, Lewis AK. Caffeine consumed prior to cardiac stress testing may affect diagnostic accuracy of nuclear medicine myocardial imaging of myocardial ischemia: A systematic review and meta-analysis. Journal of Medical Imaging and Radiation Sciences, 2024 (early online)

Lewis AK, Taylor NF, Carney PW, Bryson A, Sethi M, Ooi S, Tse GT, Harding KE. Sustainability of an intervention to reduce waiting for access to an epilepsy outpatient clinic. Heliyon. 2023; 10(1):e23346.

**Gould D, Taylor NF** Do occupational therapy and/or physiotherapy interventions improve activity and participation function for children and adolescents with functional neurological disorder? A systematic review. International Journal of Therapy and Rehabilitation. (in press).

Hyland S, Hawke LJ, Taylor NF. Benign paroxysmal positional vertigo without dizziness is common in people presenting to falls clinics. Disability and Rehabilitation (in press)

**Sullivan R, Harding KE,** Skinner I, Hemsley B. "We don't look too much into the communication disability": Clinicians' views and experiences on the effect of communication disability on falls in hospital patients with stroke. Disability and Rehabilitation (in press)

Joy A, Carey L, Neilson C, Lockwood K, **Harding KE**. Online learning for allied health knowledge translation: A systematic review. Journal of Evaluation in Clinical Practice (in press)



## **Euan's Musings**

Euan may change his mind. Hang on. No he won't.

#### Allied Health Research Committee

Nick Taylor Katherine Harding Amy Dennett Annie Lewis Anne Thompson (L&T) Benjamin Munt (Pod) CK Yao (Dietetics) Rebecca Nicks (OT) Kate Morris (SP) Sofie Hatzipashalis (SW) Sabrina Hernandez (PT) Rachael Starbuck (Mental Health)

#### Allied Health Clinical Research Office

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Follow us on Twitter! @EH\_Research

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

#### Changing your mind

So I have discovered that changing your mind is a sign of growth and the ability to adapt one's decisionmaking when new evidence comes to light. It is a mature state of mind and not at all related to initial rushed decision-making and poor initial planning.

For example, it used to be that Star Wars references were the best way to be hip and communicate with the young crowd. Now, however, as the years have passed I have changed my mind on that. I realize now I can talk all things Mandolorian to keep relevant with the millennials. I think this shows a sense of evolution and I'm sure you'll agree.

At least 7 times each day I will change my mind as to what constitutes proper time spent parenting. This can be due to new information, new circumstances, if they want to do something I want to do, a new Reacher series I'd rather watch, and whether or not I have reached my caffeine intake limit for the day.

Changing your mind in research is OK too. Just keep it timely and

make sure that you are driven by your data, or access to data. This may change how you seek information, how you gather it, who you gather it from, and even if you have to amend your initial ethics due to circumstances out of your control. You may have had a theory or hypothesis but changed it when met with data you did not expect. I think that's a sign of a mature methodology, one that does not just support what you think, but may take you on a journey elsewhere.

At least I think so. Maybe not.