

ALLIED HEALTH RESEARCH NEWS

Upcoming: The 2026 Allied Health Research Forum



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attendance

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2026 ALLIED HEALTH RESEARCH FORUM



7 October 2026
1:30 PM – 4:30 PM



Join us in person:
Wantima Health Lecture Theatre



Online via Teams
Meeting ID: 448 682 662 735 269
Passcode: GT7wF9ie



Onsite parking available
Refreshments provided

HESTA



Guest Speaker

DR KRISTIN CAMPBELL

Professor at the University of British
Columbia, Physical Therapist, and
Affiliated Scientist with BC Cancer
Research Centre

presents

'Moving Evidence into Practice;
lessons learned from Exercise
Oncology'

Thank you to HESTA for sponsoring the forum.

Registration for Webinars about 'super for over 60s' below

Date	Time (30 mins)	Register
Friday Oct 16	1.00pm	Book here
Wed Oct 21	12.30 pm	Book here

**The 2026 3MP
Competition is now
open for entries!**

All EH Allied Health Professionals
are invited to present a project
(proposed or completed) in 3
minutes, with prizes awarded for
the 'Best Presentation' and
'People's Choice'.



3MP Entries Close:
10 Sep 2026

The RAISE Project

Eastern Health researchers Nick Taylor, Rania Abdelmotaleb, Felicity Robson and Melissa Mitchell are part of a research team led by Ass Prof Tash Brusco that has received NHRMC Partnership Grant funding to introduce RAISE – a program that can help reduce staff injuries and patient falls by training ward staff to safely help patients move. Wards BHH 7.2, BHH 8.2, and PJC Centre will be participating in Phase 2 of the work, where contextualised training will be delivered. Our site coordinator is experienced clinician researcher Alicia Devlin.



“I will work closely with the research team, clinicians, managers, patients and families to support the implementation and evaluation of the RAISE program across three participating wards.”

— **Alicia Devlin**

Raise Site Coordinator

What is RAISE?

Nurses, midwives and care workers experience high rates of injury, especially when helping patients in hospitals move. Additionally, patient falls may occur during these activities. The Risk Assessment for moving Individuals Safely (RAISE) is a new approach to teaching staff how to assess and manage risks during movement, to protect themselves and those they care for. After nine years of successful pilot testing, this project will introduce RAISE across four Victorian health and aged care services to determine whether it reduces staff injuries, decreases patient and resident falls, improves patient and resident movement participation, and is cost-effective. We will also assess how well RAISE becomes part of everyday practice in the participating hospitals and aged care settings, and whether the program can be expanded for use across Australia. Three Eastern Health wards can participate.

EH Foundation Grant Applications Close Sept 7th!

The Eastern Health Foundation Research & Innovation Grants Program continues to make a significant impact on Allied Health research, helping clinicians turn innovative ideas into projects that improve patient care and service delivery. Between 2024 and 2026, Allied Health teams secured 14 funded projects across disciplines including physiotherapy, dietetics, speech pathology, cancer rehabilitation and pharmacy, representing between 29% and 39% of total grant funding awarded each year. This strong success rate highlights the valuable contribution of Allied Health-led research at Eastern Health and the opportunities available for clinicians to build research capability, explore new solutions and drive evidence-based practice. As the next grants round approaches, Allied Health staff are encouraged to consider how their ideas could be supported through this important funding program.

Have an idea that could improve patient care or delivery? The next 2027 grants round could help you turn it into research.

Apply by 7 September 2026.

How to: Apply for an Eastern Health Foundation Grant

Every year, the Eastern Health Foundation helps turn small research ideas into a reality, often creating a stepping-stone for larger grants. Securing a research grant can seem daunting, particularly for clinicians juggling busy workloads. The good news is that successful grant applications are rarely the result of luck. They are built on a strong research question, a clear plan, meaningful collaboration, and the ability to demonstrate impact. Here are some tips for your submission:

1. **Have a great idea!** The best grants are based on novel, and usually simple ideas that have benefits for patients receiving care at Eastern Health. Previous examples include testing prehabilitation in people having stem cell transplants, mechanical insufflation-exsufflation in patients with respiratory muscle weakness, and evaluating the FODMAP diet for irritable bowel syndrome. These grants are particularly valuable for projects involving design and/or rigorous testing of new interventions that otherwise could not be completed within usual duties.
2. **Write a good story.** The best grant applications have a cohesive and compelling story. Articulate why there is a problem, what YOU are going to do about it and what it means for patients. Use an active voice to create more impact, for example, "Our team developed the inaugural XYZ" instead of, "the program was developed by therapists at Eastern Health."
3. **Rally a multidisciplinary team.** The Foundation wants to see collaborations across the organization so tap a medical, nursing or other colleague from outside your profession on the shoulder to get a different view point or alternative source of resources.
4. **Include consumers.** Increasingly, grant bodies are looking for lived experience in applications. Collaborating with people who have experienced care at Eastern Health can help strengthen your proposal, making it relevant to those who will be affected by research outputs.
5. **Be realistic.** Eastern Health Foundation grants are up to \$30K and the project is ideally completed in a year. With this amount, you may be able to pay for consultancy, small pieces of equipment or backfill to complete project duties. Keeping a project contained with a clear, simple study design focusing on one element of a problem is much more impactful than trying to do everything.

Good luck with your application!

Researcher Spotlight: Astrid Ferreira

My name is Astrid Ferreira and I have recently joined Eastern Health as the Associate Director for Allied Health Education. I am an occupational therapist by background and am passionate about public health and working at a systems level to create clinical behaviour change that leads to improved outcomes for organisations, clinicians and clients. My PhD explored the impact of a targeted, integrated knowledge translation intervention on the uptake of evidence-based practice in the UK's National Health Service (NHS). Alongside my role at Eastern Health, I work with the Cerebral Palsy Alliance Research Institute, where my primary focus continues to be on knowledge translation, aimed at increasing evidence-based early intervention practices among allied health professionals working with infants with, or at risk of, cerebral palsy.



What first sparked your interest in research?

As an early career occupational therapist working in public mental health, I often felt that many of the clients I supported were not well represented in the available research. I also noticed a disconnect between what the evidence recommended and what was feasible within complex clinical environments. These experiences sparked my interest in understanding how we can better translate evidence into practice and ensure that our efforts lead to meaningful impact, as well as the importance of contributing to the evidence-base.

How did your clinical background shape your research approach?

The opportunity to undertake a knowledge translation PhD came at the right point in my career. While I enjoyed direct clinical work, I had become increasingly interested in influencing change at a broader systems level. The idea that knowledge translation could provide some solution to how we could work more effectively and efficiently in public health services was very exciting. Within my PhD and with subsequent research projects I have been involved in, I believe my clinical experience keeps me grounded in real-world problems. This helps ensure that research remains relevant, practical, and capable of informing meaningful change.

How has research influenced your work in allied health education?

Education is typically an important stepping stones to clinical behaviour change, so it is exciting to be leading an allied health education team. Research has strengthened my focus on outcomes and evaluation. It is helping us as a team think about how to better capture the importance and impact of education multi-systemically.

What advice would you give clinicians interested in research?

Get involved in research at a capacity that is comfortable for you. Contributing to a local quality improvement project, or even supervising student project placements, can be a great step toward developing research related skills and more research activity. Research also does not have to be separate from clinical work. Some of the most valuable research begins with everyday observations and a curiosity about how we can do things better.

Turning Evidence into Practice: Improving Frailty Care Through the ART Program

In 2025 the Allied Health Clinical Research Office took a second cohort of clinicians through the Accelerating Research Translation (ART) program, to support the translation of evidence from guidelines and research into everyday practice. ART participants identify an evidence-practice gap, develop an implementation strategy, and receive structured support to lead meaningful change within their service.

Rebecca Morris was one of our 2025 participants and is currently leading a project focused on improving the management of frailty among patients admitted to acute medical wards. The project aims to implement key recommendations from the Asia-Pacific Clinical Practice Guidelines for the Management of Frailty, ensuring that frailty is routinely identified and addressed during hospital care.

The initiative focuses on two important practice changes. First, physiotherapists are using the Clinical Frailty Scale (CFS) to screen patients and document frailty scores within the electronic medical record. Second, clinicians are incorporating frailty information into discharge communications and recommending progressive resistance training as part of ongoing rehabilitation plans for patients transitioning to community or sub-acute services.

Like many real-world improvement initiatives, the project has encountered challenges. A major service restructure early in the implementation phase required some adaptations to the original plan. Additional changes in key leadership positions, including staff movements and leave arrangements, created further complexity. Despite these disruptions, the project team has maintained momentum through strong communication, flexibility, and a willingness to adapt their approach.

The formal implementation phase commenced in July 2026 and preliminary data indicate that the intervention is being delivered as intended. While outcome data are still being collected, the project is progressing well and a manuscript is already being drafted for publication.

This experience highlights an important lesson from the ART program: translating evidence into practice is rarely straightforward, but with the right skills, support and persistence, clinicians can successfully navigate organisational change and lead improvements in patient care. For staff interested in making a tangible impact in their area of practice, the ART program is expected to run next in 2027 and offers a valuable opportunity to develop implementation leadership skills while driving meaningful healthcare improvement



Photos of physiotherapists from the Box Hill Hospital Emergency and Complex Acute Medicine (ECAM) team completing their Clinical Frailty Scale (CFS) training module - a key intervention strategy for the frailty ART project.





PhD Spotlight: Dr Georgia Bolt

Congratulations to Dr Georgia Bolt on conferral of her PhD in June this year!

Georgia is a Senior Clinical Neuropsychologist at the Turning Point Addiction Neuropsychology Service. Inspired by significant research and treatment gaps that exist in supporting individuals experiencing alcohol and substance addiction, her thesis centred on the refinement, development, and preliminary evaluation of mobile-delivered, personalised approach avoidance training as a novel cognitive intervention to support middle-older age Australians with hazardous/harmful alcohol use, using a mixed methods approach within the ORBIT framework.

Across three published works, findings suggest smartphone approach bias modification for middle-older age non-treatment seekers is feasible and acceptable, with linear mixed modelling showing a significant 6.9 past week standard drink reduction relative to baseline, but no significant time-by-group interactions after four weeks, despite significant reductions favouring ApBM versus sham after two-weeks. Findings take steps to drive research translation and extend the existing research landscape by offering nuanced insights that can support future intervention refinement and evaluation efforts in this at-risk cohort.

Of note, Georgia received glowing thesis feedback, with examiners noting it was “one of the most impressive” they had reviewed in some time. Her thesis was passed without amendments, which is a rare feat and a testament to Georgia’s hard work as a clinician-researcher!

Want to read more?

Bolt, G., L., Rowland, B., Piercy, H., Bradshaw, J., Lubman D.I & Manning, V. (2026). AAT-APP+: A double-blind pilot randomised controlled trials of a novel personalised smartphone intervention to reduce hazardous and harmful alcohol consumption among middle-older adults, *Addictive Behaviours*, DOI: 10.1016/j.addbeh.2025.108560

Bolt, G. L., Piercy, H., Bradshaw, J., Manning, V. (2024). Smartphone-delivered approach bias modification for reducing harmful drinking amongst middle-older age adults: Secondary analyses of a single-arm pilot. *Drug and Alcohol Review*. DOI: 10.1111/dar.13827

Bolt, G., L., Piercy, H., Barnett, A., Manning, V. (2022). ‘A circuit breaker’ – interrupting the alcohol autopilot: A qualitative exploration of participants’ experiences of a personalised mHealth approach bias modification intervention for alcohol use. *Addictive Behaviours Reports*, 16, 1-10. <https://psycnet.apa.org/doi/10.1016/j.abrep.2022.100471>

Team Achievements & Celebrations

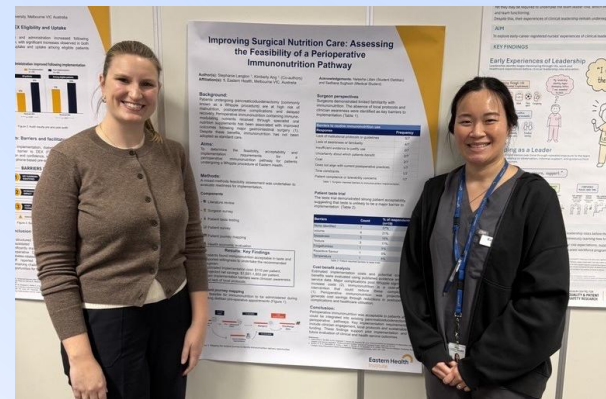
Emerging Clinical Researcher (ECR) Symposium – September 2026



Congratulations to Germaine Tan who was awarded ‘Best Presentation’ at the Eastern Health ECR Symposium.

Germaine presented **“The cancer treatment rollercoaster: Does when you start exercise affect adherence?”**. Presenting on a systematic review and meta-regression of 176 randomised controlled trials, with the focus being on how we should be delivering cancer rehabilitation.

Further congratulations to Stephanie Langton and Kimberely Ang who were awarded ‘Best Poster’ at the Eastern Health ECR Symposium. Their poster shared a collaborative project between the Eastern Health Dietetics Department and the UGI Surgical Unit; exploring the feasibility of implementing perioperative immunonutrition for patients undergoing a pancreaticoduodenectomy (Whipple procedure) at Eastern Health.



Euan's Musings

So spring is arriving meaning I can finally look at colours and enjoy the fact it is no longer only due to the traffic light clinical demand system. Bright green is no longer the mythical “I am at capacity” colour but could actually mean the colour of leaves on trees, or whatever they put into the latest Boost juice. Bakery's now sell Christmas tarts, I can see very early Christmas decorations, and my wallet is feeling it's Christmas present related conditioned stress response. It's that time to say farewell to soccer parents and promise to catch up in the off season and then catch the cricket parents and apologise for not catching up in the off season.

The end of the year comes quickly from here. This is unfortunate news for people whose resolution was to finally get that research finished and published by the end of the year. Fear not, there's a few dodgy journals that could probably accept your article, and bitcoins, on Dec 30th. Those lovely reviewers (aka: bots) at

The International Journal of Helpful Research should be able to publish your article between the day's mealtimes for the cost of a few dollars, some of your soul and most if your research career aspirations.

But spring is a great time to think of the world outside again. Essendon supporters can look forward to doing things that don't have to wait until three quarter time, and researchers can lather the 300+ sunscreen on and venture outside into the shade. Summer is on the way, and my new colour will be red if I forget to put on my 300+ while umpiring kids' cricket.

And with that reference to colour, we have gone full circle which means I don't have to wrap up with any great advice and can now just finish the sentence.

Euan wrote and put his name to this much to the shame of his family.

Allied Health Research Achievements

Publications

Ang KYH, Stringer G, Collins J, & Barker LA (2026). Patient Experiences of Nutrition in Enhanced Recovery After Colorectal Surgery: A Systematic Review. *Nutrients*, 18(11), 1790. <https://doi.org/10.3390/nu18111790>.

Ang KYH, Hernandez S, King M, & Snowdon D. (2026) The effectiveness of group-based vestibular rehabilitation in adults with central or peripheral vestibular dysfunction: a systematic review. *Journal of Neurologic Physical Therapy*. <https://doi.org/10.1097/NPT.0000000000000579>

Dennett AM, Peiris CL, **Rimayanti MU**, Barton C, **Taylor NF**, **Harding KE**, **Tan G**, Ezzat A, Shields N. A qualitative study of cancer survivors' exercise behaviour 4 months after a telerehabilitation program. *Journal of Supportive Care in Cancer*. Accepted 14th July, 2026

Dennett AM, **Woodhead K**, **Casey P**, **Terrens F**, **Haley M**, **Cooke S**, **Williams K**, **D Simpson J**, **Thompson A**, Lawler K. Development of a clinical education pathway (PhysioSteps) to support physiotherapists' transition to specialty practice: a co-design study. *Physiotherapy*. Accepted 26th August 2026

Harding K et al (2026), Application of the STAT model for demand management to reduce specialist clinic waiting times (WaitLESS): Protocol for a stepped wedge cluster randomised controlled trial. *BMJ Open*. <https://doi.org/10.26187/deakin.33090458>

McFarlane L, & Morris K. (2026). Enhancing a speech pathologist's knowledge in laryngectomy care through an innovative e-learning package. *Journal of Clinical Practice in Speech-Language Pathology*, 1–6. <https://doi.org/10.1080/22000259.2026.2714104>

Mildred H, Coulton T, Allison L, Harris N, Jenkins P, Innes S, **Brann P** (2026). Evaluation of an innovative youth mental health service model - bridging the service gap. *Australas Psychiatry*. <https://doi.org/10.1177/10398562261458931>

Shiell G, Speksnijder CM, Fernandez C, **Dennett AM** (2026). An International Survey of Physiotherapy Practice in Oncology: Service Provision, Education, and Research Needs from World Physiotherapy Member Organisations. *Rehabilitation Oncology*. <https://doi.org/10.1097/01.REO.0000000000000425>

Snowdon DA, Wang YT, Callisaya ML, Collyer TA, Jolliffe L, Johns N, Brusco NK, Vincent P, Pragash N, **Lawler K**, Gelaw A, **Taylor NF** (2026). Staying Active with Multimorbidity In Acute hospital settings (StAMInA) trial: a feasibility randomised controlled trial of allied health assistant mobility rehabilitation for patients with multimorbidity. *Age and Ageing*. Accepted 17 August 2026.

Yip H, Wu J, Gleeson J, Tan W, Wong ZY, Holden S & Barbour L (2026). "Promoting Planetary Health, One Bite at a Time: Examining the Efficacy and Feasibility of a Dietary Behaviour Change Intervention", *Health Promotion Journal of Australia* 37, no. 4 (2026): e70224. <https://doi.org/10.1002/hpja.70224>

Presentations

Ang KYH, Stringer G, Collins J, & Barker L.A. Exploring Patient Experiences of Nutrition in Enhanced Recovery After Colorectal Surgery: A Systematic Review. [Poster Presentation] ERAS World Congress 2026, Singapore, 14–16 May 2026.

Berner M. 'Dietary alterations in patients with acute severe ulcerative colitis influence clinical outcomes: findings from a retrospective multi-centre study'. [Oral Presentation] Australian Gastroenterology Week Conference, Perth, August 2026.

Chau C, **Brann P**, Mildred H, **Innes S**, & **Pavlis A**. The Presence of ADHD in a Complex, Tertiary Mental Health Service: A Longitudinal Examination. [Poster] 9th AADPA Conference - ADHD: Embracing Change for Every Mind, Melbourne, 25 – 26 July 2026.

Chau T, **Brann P**, **Mildred H**, **Innes S**, **Pavlis A**. The Presence of ADHD in a Complex, Tertiary Mental Health Service: A Longitudinal Examination. [Poster Presentation] Australasian ADHD Professionals Association (AADPA), Melbourne, July 2026

Cousins R. Enhancing engagement through responsiveness to learning needs: The EH Psychology Educator Experience. [Oral Presentation] Australia and New Zealand Association for Health Professional Educators (ANZAHPE), Christchurch, Aotearoa New Zealand, June 30 – July 2, 2026.

Haley M. What works in implementing the World Falls Guidelines in clinical practice? [Symposium] World Falls Congress, Manchester, June 2026

Haley M, Sherrington C, **Lawler K**, **Harding K**, Lord M, Williams S, **Taylor NF**. Falling short on implementation of fall prevention guidelines [Platform Presentation] World Falls Congress, Manchester, June 2026

Langton S, Allen A, Cvetkovski B, Trakman G, Furness K. Prepared, Informed, Supported? Exploring Patient Experience After ERAS Implementation [Poster Presentation] ERAS World Congress 2026, Singapore, 14–16 May 2026.

Nesci J, **Donald F**, Kasiviswanathan K, Broadbear J, Chan C & Rao S. Challenging but worthwhile: A qualitative study of consumer experiences of mentalization-based treatment (MBT). Oral presentation, RANZCP Congress, May 2026

Nesci J, **Mottram A**, **Potter A**, Beatson, J., & Rao, S., Helping systems to reflect: Secondary consultation to support working with complexity. Oral presentation, RANZCP Congress, May 2026

Pavlis A, Abou-Sinna A, Blencowe P, Corless K, & Browning L. Behaviours of Concern (BOC) associated with Neurodevelopmental Conditions: where, when and who in a large Australian metropolitan health service. [Poster] Conference of the Australasian Society for the Study of Brain Impairment (ASSBI) and the New Zealand Special Interest Group for Neuropsychology (NZSIGN). Christchurch, Aotearoa New Zealand, 7 – 9 May 2026.

Allied Health Research Committee

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