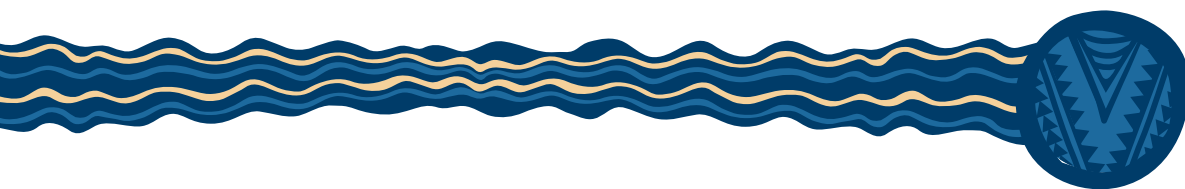




# Research Snapshot 2019



Gold Coast Health would like to acknowledge the traditional custodians of the Gold Coast, the Yugambeh speaking people, whose land, winds and waters we all now share; and pay tribute to their unique values, and their ancient and enduring cultures, which deepen and enrich the life of our community.

**We pay our respects to Elders past, present and emerging, and recognise those whose ongoing efforts to protect and promote Aboriginal and Torres Strait Islander cultures will leave a lasting legacy for future Elders and leaders.**

Artwork produced for Queensland Health by Gilimbaa.

### **Public availability statement**

An electronic copy of this publication is available at:

<https://publications.qld.gov.au/dataset/gold-coast-health-research-annual-reports>

For further information, or to request a hard copy of this publication, please contact the Office for Research Governance and Development, Gold Coast Hospital and Health Service, by phone +61 (0) 7 5687 0237 or email [researchgoldcoast@health.qld.gov.au](mailto:researchgoldcoast@health.qld.gov.au)

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ISSN 2202-4530

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# WELCOME

FROM EXECUTIVE DIRECTOR OF CLINICAL GOVERNANCE, EDUCATION AND RESEARCH AND  
DIRECTOR OF RESEARCH

## OUR VISION

We will have the best health outcomes in Australia.

## OUR PURPOSE

To be a leader in compassionate, sustainable, highly reliable healthcare

## OUR PHILOSOPHY

‘Always Care’

## OUR RESEARCH IS AN ENABLER FOR GOLD COAST HEALTH’S STRATEGY

The Gold Coast community entrusts Gold Coast Health to deliver optimum care and we do that through excellent, inclusive and collaborative services consistent with our ‘Always Care’ philosophy.

Through embedding research and evidence-based practice into health service delivery, we are able to assure the community that the health care they receive is:

- of the highest scientific merit and built on strong theoretical foundations
- respectful of consumers by including them in the co-design of research
- able to meet the anticipated needs of the community by collaborating with academic, government, not-for-profit and industry partners to deliver new technologies and innovations.

To maximise the value of existing research activities, build on our strengths, make the most of our opportunities and address areas requiring further development – four key strategies have been identified that will enable Gold Coast Health to reach its vision and strategic objectives as well as align with State and national priorities:

1. Build research capacity to support learning opportunities to use, facilitate, design and participate in research
2. Strengthen partnerships to advance innovative ideas through synergistic research with our partners
3. Embed research in health services and systems to use research and other forms of evidence to improve and innovate healthcare
4. Establish a sustainable research culture through investment in research infrastructure, engaging staff at all levels of the organisation and embedding research in operations

Throughout this document, we provide examples of how our research activities are meeting these four key strategies. We showcase our clinician researchers, our consumers and our partners, focusing on their achievements and how their research is meeting local community needs, enhancing patient outcomes, transforming service delivery, increasing efficiency in the health system and enabling innovation by challenging how we do things now.

With Gold Coast Health adopting a transformational culture that encourages agility, innovation and rapid knowledge translation, the opportunities exist now for staff at Gold Coast Health to engage in research that will enable delivery of world-class care – always, making the best use of our resources and driving future-focused change.

Thank you for joining us as we reflect on our research progress in 2019.

**Dr Jeremy Wellwood**

EXECUTIVE DIRECTOR OF  
CLINICAL GOVERNANCE,  
EDUCATION AND RESEARCH

**Dr Greta Ridley**

RESEARCH DIRECTOR





# SUMMARY

OF OUR 2019 RESEARCH PERFORMANCE

 **124**  
ACTIVE  
RESEARCH  
PROJECTS

**159** CLINICIANS  
TRAINED IN  
EVIDENCE-BASED  
PRACTICE

<b>13</b> RESEARCH COLLABORATIVES AND GROUPS 	
RESEARCH GROUP	LEAD
Allied Health Research Group	Dr Kelly Weir
Cardiovascular Research and Clinical Trials Group	Dr Rohan Jayasinghe Dr Laurie Howes
Children's Research Collaborative	Dr Kelly Weir Dr Shane George
Emergency Department Collaborative Research Group	Professor Gerben Keijzers Professor Julia Crilly
GCUH Cancer Research Collaborative	Dr Rob Mason
Infectious Diseases Group	Dr Deborah Macbeth Dr John Gerrard
Maternity and Children's Health MDT Research Group	Professor Rhona McInnes
Mental Health and Specialist Services – MH Cares	Professor Chris Stapelberg
Orthopaedic Research Collaborative	Professor Randy Bindra
Paediatric Critical Care Research Group	Dr Shane George
Patient and Family Centred Care Research Collaborative	Professor Andrea Marshall Dr Georgia Tobiano
Pharmacy Research Collaborative	Trudy Teasdale
The Aged Care Collaborative	Dr Nick Buckmaster Assoc Professor Laurie Grealish

**291**  
PUBLISHED RESEARCH  
ARTICLES AND BOOK CHAPTERS



**1078**  
PATIENTS  
RECRUITED  
TO ACTIVE  
CLINICAL  
TRIALS

**46**  
STAFF TRAINED IN  
CLINICAL TRIAL  
SKILLS AND  
REGULATORY  
REQUIREMENTS

 **94** ACTIVE  
CLINICAL TRIALS

**18** THERAPEUTIC AREAS  
RUNNING CLINICAL TRIALS

**82** CLINICAL TRIAL  
COLLABORATIONS  
(NATIONAL AND INTERNATIONAL)



**\$1.6M** FUNDING IN EXTERNAL  
COMMERCIAL RESEARCH GRANTS

**\$2.5M** FUNDING IN EXTERNAL  
NON-COMMERCIAL RESEARCH GRANTS

 **\$980,000** AWARDED TO 11 RESEARCH PROJECTS  
BY THE COLLABORATIVE RESEARCH GRANT SCHEME  
(Gold Coast Health, Griffith, Bond and Southern Cross universities and Gold Coast Hospital Foundation)



# RESEARCH WEEK SHINES SPOTLIGHT ON RESEARCH

The annual Gold Coast Health Research Week provides a platform for staff to showcase the high quality and clinically relevant research being conducted across the region.

The conference is organised by the health service in collaboration with Griffith and Bond universities.

In 2019, its third year, events ranged from a panel discussion on consumer engagement in health research and keynote presentations from special guests to talks, abstract presentations and lightning talks.

Keynote speaker Professor Paul Glasziou, the Director, the Institute of Evidence-Based Healthcare, Bond University together with Professor Adrian Barnett, researcher at the School of Public Health and Social Work, Queensland University of Technology, presented on the topic 'Improving the value, relevance and efficiency of health research'.

It was a highly informative update and provided insight into improving the value of health research and avoiding wasteful practices. With more than \$100 billion spent on medical research annually, it is vital that all clinicians and researchers are aware of the causes of research waste, including research that asks the wrong research questions, is poorly designed, has inaccessible results or biased reporting.

Gold Coast Health executives and clinicians chaired themed sessions delivering a series of talks across the areas of emergency care, critical care and trauma, end of life care, research and learning, nursing interventions, women's and family health, Allied Health and a session of mixed abstract presentations. The fast-paced lightning talks again provided a stage for researchers to present their projects in a snappy three-minute timeframe, creating audience enthusiasm and appreciation for the breadth of research being conducted by Gold Coast Health staff and collaborating partners. Posters were displayed in the main hospital foyer, allowing the general public an opportunity to view the great work being conducted by our researchers.

The conference ended with a final keynote presentation on 'The changing regulatory landscape – your responsibilities', delivered by Minter Ellison Senior Associate Kristi Geddes, followed by a series of awards.

**Research Week award winners were:**

**Valerie Slavin – Best presentation**

**Dr Shelley Roberts – Best emerging researcher presentation,**

**Sara Izwan and Karen Biggs – Best lightning talk**

**Peter Fawzy – Best poster presentation**

**Sara Izwan – People's choice poster**

The Office for Research Governance and Development would like to acknowledge Dr Caitlin Brandenburg for delivering the event with the support of staff from the research office, the Evidence-Based Practice Professorial Unit, Bond University and Griffith University students.

## IMPACT

- 68 abstract submissions
- 32 themed presentations
- 24 lightning talks



*Research Week award winners*



**ARE INTERESTED IN LEARNING ABOUT OUR  
FUTURE RESEARCH EVENTS?**

Email: [researchgoldcoast@health.qld.gov.au](mailto:researchgoldcoast@health.qld.gov.au)

# HIGH ACHIEVERS

Meet some of the champions from our workforce who have achieved research success in the past year.

## Dr Paulina Stehlik

Senior Research Fellow Dr Paulina Stehlik was recognised as a 'Rising Star' by a leading media outlet in Asia Pacific.

The Educator is a multi-media resource for the most senior educational professionals and decision makers.

Their Rising Stars list of 2020 showcases individuals across the higher education spectrum who are making waves in the industry through leadership, innovation and achievement in the early stages of their careers.

Dr Stehlik was named in the prestigious list for her work in evidence-based practice (EBP) teaching. She is Coordinator of the Evidence-Based Practice Professorial Unit.

She recently led an educational redesign of the EBP teaching delivered to Gold Coast Health staff. This included workshops, tailored to apply EBP principles to problems in different clinical areas. The workshops allowed participants to focus on research articles that best match the challenges they face in their daily work.

*"My approach to teaching has always been to show people how to think, not tell them what to think. These workshops are no different. I think that's what makes them so fun and rewarding,"* Dr Stehlik said.

In 2019, Dr Stehlik and the EBP unit trained more than 400 clinical, research and support staff as part of the highly

## Professor Julia Crilly

Professor Julia Crilly was recognised in the 2020 Queen's Birthday Honours list, being awarded a Medal of the Order of Australia (OAM) for her services to emergency care nursing.

Professor Crilly is in a joint appointment between Gold Coast Health and Griffith University as Professor of Emergency Care.

As a member of the health service's Emergency Department Collaborative Research Group and lead for the Service Delivery and Workforce research pillars, she has been instrumental in developing the research capability of staff within the Emergency Department and building the capacity of the collaborative, which has received more than \$6 million in grant funding.

Professor Crilly holds a special research interest in evaluating innovative service delivery models for vulnerable population groups who require emergency care as well as understanding and improving aspects of the emergency department workforce. With the onset of COVID-19, Julia has been actively involved in leading and supporting collaborative COVID-19 research aimed at understanding its impact on our busy EDs and informing future responses.

Professor Crilly is the fourth OAM recipient from Gold Coast Health's Emergency Departments.

## Lisa Chen

Lisa Chen was awarded the 2020 Gavin Leslie Best Nursing Paper by the Australian College of Critical Care Nurses and Australian Critical Care for her paper titled, "Lessons learnt from the implementation of same-day discharge after percutaneous coronary intervention."

The national award recognises excellence in nursing research by a college member.

Dr Chen's winning paper was an outcome of her PhD which informed a new model of care for patients with chronic coronary heart disease who come to Gold Coast University Hospital's cardiac catheterisation suite for percutaneous coronary intervention (cardiac stent).

The impact of this new model of care is multi-faceted.

Discharging patients home on the same day of their procedure streamlines the discharge process, improves patient flow, provides timely care to other cardiac patients who need care the most, reduces healthcare costs and enhances patient and family positive hospital experiences while maintaining patient safety.

Dr Chen completed her PhD through Griffith University under the supervision of Professor Andrea Marshall and Dr Frances Lin and in collaboration with the Department of Cardiology, Professor Rohan Jayasinghe and nursing lead Michelle Foster.



successful teaching program. She said being on The Educator's Rising Star list was an honour.

***"It's nice to know that people from the outside, who have peer-reviewed the work I am doing, think that it's valuable."***

Dr Stehlik holds a Bachelor of Pharmacy with first class honours; a Graduate Certificate in Pharmacy Practice; a PhD in Pharmacy Practice and most recently a Graduate Certificate of Data Science.



***"I am certainly humbled and honoured to receive this award; especially with this (2020) being International Year of the Nurse and the Midwife. To me, this award reflects the amazing team and support from people I am fortunate to have had and continue to have around me."***

Read more about the work of Professor Crilly and the ED Collaborative Research Group by visiting <http://bit.ly/gcedresearch>



Professor of Acute and Complex Care Nursing Andrea Marshall said Dr Chen's PhD work was a brilliant example of how a clinician-PhD student can value-add to the health service by undertaking doctoral studies designed to enhance care delivery in the workplace.

***"Lisa's ability to integrate her clinical and research expertise meant that a comprehensive evaluation of same-day discharge after percutaneous coronary interventions could inform practice improvements. These collaborations are definitely a win-win for the student and the organisation," Prof Marshall said.***





# OUR RESEARCH HIGHLIGHTS







# BUILD RESEARCH CAPACITY

**Our goal: To build research capacity by supporting learning opportunities to use, facilitate, design and participate in research.**

In this section, we will share the outcomes of our Collaborative Grant Scheme, how staff are engaging in evidence-based practice and how we are increasing research awareness and engagement within our clinical areas through research development and support.



# SUPPORTING CLINICIANS TO RESEARCH GRANT SUCCESS

The Gold Coast Collaborative Research Grant Scheme supports high-quality research projects led by Gold Coast Health staff to encourage innovative, collaborative and responsive health care initiatives that benefit the Gold Coast community and optimises our system of health care. For 2019, grants of up to \$100,000 were available to support projects up to three years duration.

The Collaborative Research Grants Scheme working party was chaired by Associate Professor Laurie Grealish and had representation from Gold Coast Health, Gold Coast Hospital Foundation, Griffith University, Bond University and Southern Cross University. The grant scheme received 45 expressions of interest.

Eleven research teams from across allied health, nursing and medicine were awarded funding totalling \$976,500.

## Successful projects included:

- Development and pilot of interventions for increasing medical clinician research engagement at Gold Coast Health: A Knowledge Translation study
- Comparison of intravenous amoxycillin-clavulanate to piperacillin-tazobactam for the treatment of diabetic foot infections in adults: A pragmatic, non-inferiority, randomised trial
- The use of a supported photographic menu tool for hospital inpatients with dementia - mixed methods randomised controlled study
- Identifying knowledge translation strategies for implementing best practice in the management of acute alcohol intoxication in the emergency care environment
- Incontinence in peripartum women: Prevalence, predictors and prevention
- Developing a tool on treatment burden for the patient-physician encounter: Towards a patient-centred approach in chronic disease care
- Achieving value-based care: Development of a value framework for evaluating extended scope of practice models of care
- How planned change is enacted in a University Hospital
- The cost-effectiveness of implementing a comprehensive screening and triaging phase to the foot and ankle orthopaedic service
- Feasibility of a patient and family-mediated intervention to improve functional ability following recovery from critical illness
- A randomised trial of Nasogastric fluid Options for patients with Bronchiolitis: The NOBRO study



*“The Gold Coast Health Collaborative Research Grant Scheme brings together Gold Coast Health, the Gold Coast Hospital Foundation and the three local universities in a unique collaboration to provide funding for worthy projects. The scheme brings together university academics, clinical researchers and clinicians and provides funding, not otherwise available, to conduct important research aimed at improving the health of the Gold Coast community.”*

**Prof Sheena Reilly AM**  
Pro-Vice Chancellor (Health), Griffith University

*“The Gold Coast Collaborative Research Grants Scheme brings researchers and clinicians together to work on questions of importance to health of both the local community and the country as a whole. The scheme provides important support to develop new ideas that can lead to applications for national funding schemes.”*

**Prof Nick Zwar**  
Executive Dean, Faculty of Health  
Sciences & Medicine, Bond University

## WHERE ARE THEY NOW?

We check in with previous winners of the Collaborative Research Grants Scheme.

### Responding to domestic and family violence in the context of maternity care: Applying a trauma and violence-informed care framework to better understand how to optimise an integrated response

**Awarded \$100,000 in 2017**

Principal Investigator Dr Kathleen Baird, who has now moved on from Gold Coast Health, is working closely with the Director of Social Work and Support Services, Angel Carrasco, to complete this project.

Gold Coast Health in collaboration with Griffith University, the Gold Coast Domestic Violence Prevention Centre and the Benevolent Society have been assessing the feasibility of the Trauma and Violence Informed Care framework to evaluate the current domestic and family violence response of maternity services.

A survey of 172 healthcare staff (predominantly female nurses, midwives, medical staff and social workers) was analysed to examine staff characteristics, knowledge, perceptions and performance regarding domestic and family violence screening.

Data collected from this study identified that less than a third of staff routinely asked patients about domestic and family violence and 35% felt they did not have sufficient training to assist with domestic and family violence. Major barriers to asking patients screening questions were the presence of the partner and language issues, while written protocols and a supportive work environment were the principal enablers to screening.

The results of this study will be used to:

- plan training opportunities aimed at improving staff capacity to detect and respond to domestic and family violence
- inform policy and the public through community forums and visits to community groups
- increase knowledge in this field through multiple conference presentations and six journal publications.

### The MenGO study: Does the licenced meningococcal vaccine Bexsero® provide cross-protection against gonorrhoea?

**Awarded \$99,965 in 2018**

This study, led by Principal Investigator Dr Caroline Thng, aims to provide a better understanding of the effect of the meningococcal Bexsero® vaccine on the immune system.

Despite more than a century of research, only four gonococcal vaccine candidates have been tested in human clinical trials and none of these afforded any protection against gonorrhoea. No gonococcal vaccine antigens have progressed into human trials in the past three decades.

This study is guided by the human immune response to the vaccine mediated, non-native presentation of antigens that are common between *N. meningitidis* and *N. gonorrhoeae*.

The participants in this study (men who have sexual relations with men) who are at high risk of getting gonorrhoea infections are being vaccinated in this randomised study to identify the level, type and functional activity of Bexsero®-induced antibodies. This project will test the hypothesis that Bexsero®-induced antibodies are cross-reactive with gonococcal targets and that these antibodies have functional activity that is able to kill *N. gonorrhoeae*.

The opportunity to broaden and repurpose the Bexsero® vaccine use for the prevention of gonococcal infection is cost effective and an innovative use of a currently licenced vaccine.

“The Collaborative Research Grant has funded the Gold Coast Sexual Health Service to become the world-first to commence a trial to investigate the re-purposing of Bexsero® for the strategy against gonorrhoea. It has provided a platform for Gold Coast Sexual Health to grow its research capacity and culture, which is now actively participating in clinical trials with national and international collaborators,” Dr Thng said.



**ARE YOU INTERESTED IN FINDING OUT MORE ABOUT THE RESEARCH BEING UNDERTAKEN THROUGH THE COLLABORATIVE RESEARCH GRANT SCHEME OR ABOUT OTHER RESEARCH FUNDING SCHEMES INTERNAL OR EXTERNAL TO GOLD COAST HEALTH?**

Visit: [www.goldcoast.health.qld.gov.au/research/researchers/grants-apply](http://www.goldcoast.health.qld.gov.au/research/researchers/grants-apply)  
Email: [grantsgoldcoast@health.qld.gov.au](mailto:grantsgoldcoast@health.qld.gov.au)





*Dr Caroline Thng*

# BUILDING RESEARCH CAPACITY THROUGH PEER LEARNING

## Emerging Researcher Alliance Committee



*Kristen Jones and Joanne Hilder*



*Bernadine Romero*



*Mila Obucina*



*Kelly Dungey*



*Valerie Slavin*

The Emerging Researcher Alliance (ERA) is a multi-disciplinary community of practice, creating a peer network for novice researchers within Gold Coast Health. Through shared experience, ERA is building the research capabilities of our next generation of health researchers.

Since launching in June 2019, ERA has grown to over 100 members and meets three times a month in a combination of face-to-face and virtual meetings at Gold Coast University Hospital and Robina Hospital.

There is a mix of clinical and non-clinical staff in the group, including medical, nursing and midwifery, allied health, public health and business post-graduate students.

Some are currently completing their PhD or Master of Philosophy degree and others are actively participating in research projects within the health service or considering embarking on a research degree.

The community of practice is built on a common interest in research and supporting each other as members traverse their research journey. During meetings, members highlight their wins and share the challenges they are currently navigating. Useful tips, tricks, and resources are also shared. There is always someone at the table, or on the screen, who has had a similar experience and can offer meaningful guidance, as well as connections to someone outside the group who may be able to help.

Member Sarah Thomas said the group provides great connection.

"The meetings are full of positivity and inspiration and at the same time discuss real problems and realistic solutions," she said.

For members who are unable to attend meetings, the alliance has a bi-monthly newsletter that summarises helpful resources, training opportunities and

members' publications. Communication and sharing of resources also takes place on Microsoft Teams.

The alliance also facilitates training workshops and participates in key events such as the Gold Coast Research Week.

ERA welcomes all staff in the early stages of the research pathway to join the group.

### Janine Paul, dietitian, undertaking a PhD



My research project is to investigate if an association exists between a low carbohydrate diet, quality of life and glycaemic control in adults with type 1 diabetes mellitus (T1DM).

To date, there are no studies that have examined this association in unison.

Currently, no specific dietary guidelines exist for those with type 1 diabetes.

The outcomes of this research:

- will provide clinicians insight into an individual's quality of life when using a low carbohydrate diet and
- will give people living with T1DM an evidence based dietary strategy to manage their glycaemic control.

"ERA has been an inspiring, motivating and welcoming community of researchers who have supported me by sharing their research knowledge and strategies to navigate my PhD.

"Every ERA meeting or event I attend, I have learned helpful information to carry on in the research maze. However, if I get too lost, I always know there is someone in the ERA group who is willing to help and guide me in the right direction," Ms Paul said.

"I am so glad this research group exists because they provide tremendous support and fellowship to me on my research journey."



### FOR MORE INFORMATION

Email: [GCH\\_ERA@health.qld.gov.au](mailto:GCH_ERA@health.qld.gov.au)

# BUILDING A SUSTAINABLE CULTURE OF EVIDENCE-BASED PRACTICE

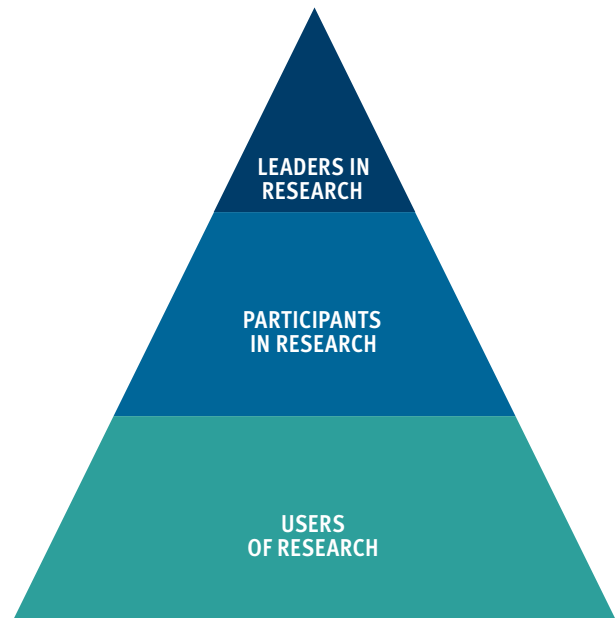
## TRAINING CLINICIANS TO BRING EVIDENCE TO THE BEDSIDE

**The Evidence-Based Practice Professorial Unit (EBPPU) supports health practitioners in developing their skills in evidence-based practice, systematic reviews, knowledge translation and research project development.**

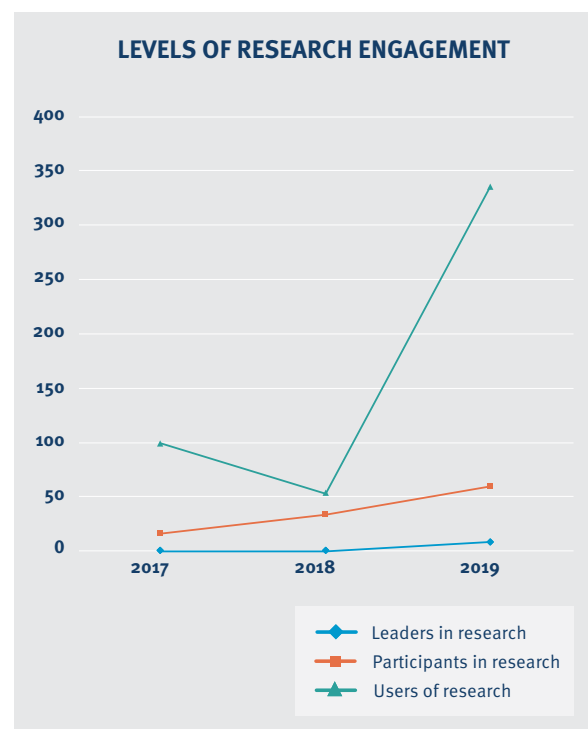
The EBPPU is a joint initiative between Bond University and Gold Coast Health and the team is made up of active researchers. In 2019, the unit significantly increased the number of workshops, tailored programs, mentoring and other teaching activities it delivered to clinicians and health staff. The unit was also actively engaged in the Gold Coast Health initiative to become a Centre for Innovation in Regional Health (CIRH) and co-organised the CIRH collaborative symposium in 2019. They also played integral roles in delivering Research Week and the Collaborative Research Grant Scheme.

Members of the EBPPU team have worked closely with Gold Coast Health clinicians on the development and delivery of several successful grant applications and major research projects, including:

- Assisting with the design of an Intervention for Appropriate Care and Treatment of older people in acute hospitals at the end-of-life (InterACT), led by Queensland University of Technology Australian Centre for Health Law Research and the Australian Centre for Health Services Innovation. Gold Coast Health is one of the major sites of project implementation and a co-sponsor of the project. The project is partly funded by the National Health and Medical Research Council.
- Engaging with Emergency Department clinicians to evaluate their use of clinical decision tools. The aim is to explore ways to improve clinicians use of evidence-based knowledge in practice and integrate this into the digital environment.
- Linking in with Speciality and Procedural Services (SAPS) to understand current patient management pathways and utilisation of surgical procedures at Gold Coast University Hospital.
- Coaching nurses at writing manuscripts and published two manuscripts with them as co-authors.
- Engaging with palliative care physicians, geriatric nursing and social work staff from Gold Coast University Hospital and Robina Hospital in the evaluation of an electronic conversation guide, development of systematic reviews and conference presentations and writing of manuscripts.



*'Glasziou's triangle': different levels of research engagement.*





## IMPACT

335

CLINICIANS PARTICIPATED IN  
WORKSHOPS/ACTIVITIES



29

MENTORED IN  
PROJECT METHODOLOGY,  
DEFINITION AND  
OUTCOME  
MEASUREMENTS



43

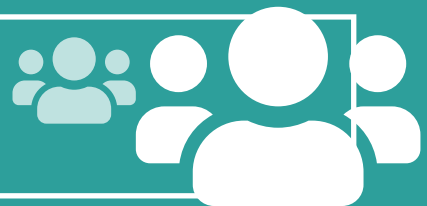
RESEARCH AND STATISTICAL CONSULTATIONS



**COLLABORATION**  
WITH CLINICIANS ACROSS GOLD COAST HEALTH

**NATIONAL**

RECOGNITION FOR WORKSHOPS REDESIGN



*Paulina Stehlik, Zoe Michaleff, Magnolia Cardona, Iris Gerke and Mark Jones.*

## Opportunities for improvement in evidence-based practice and research training in the medical workforce

A research team explored the evidence-based practice and research training requirements of 58 Australian specialist training colleges with the aim to align local evidence-based practice and research development teaching with college requirements.

The team consisted of EBPPU staff member Dr Paulina Stehlik and Institute of Evidence-Based Healthcare (IEBH) colleges Professor David Henry and Professor Paul Glasziou, Gold Coast Health Research Office and Medical Education Unit staff Dr Caitlin Brandenburg, Dr Christy Nobel, and Bond MD students Peter Fawzy and Isaac Narouz.

Dr Stehlik used big data techniques to analyse and visualize the data, including an interactive graphic.

The team identified misalignment in the learning outcomes that clinicians-in-training are intended to achieve with the teaching and assessment methods designed to best achieve these outcomes.

This was evident across all domains of research across all colleges, and between college requirements and best practice in evidence-based practice and research training.

The team published its findings in BMJ Open, and published an accompanying BMJ opinion piece.

Members were invited to present their work at the Australian Centre for Health Services Innovation Research Quality Meeting in Brisbane and internationally at the REWARD-EQUATOR Conference in Berlin as well as locally at the Gold Coast Health Research Week.

This research has national and international implications on medical workforce education. Dr Stehlik is now working with a large team of clinicians and methodologists, together with several specialty medical colleges, to further this work.

## Redesigning evidence-based practice education and training

Dr Paulina Stehlik led the redesign of the EBPPU education and training programs. A wider variety of free workshops, lectures and other teaching activities are now offered.

These include customised evidence-based practice workshops, tailored to the needs of different clinical areas allowing participants to focus on the review of articles best matched to their daily challenges.

In parallel, an e-book portfolio of learning materials was rolled out to ensure accessibility and sustainability of training. Once training is completed, staff are able to access their evidence-based practice e-book portfolio via their electronic device to help answer clinical questions at the bedside.

“It’s not about going out and telling clinicians ‘this is how you need to practice’. These workshops aim to teach clinicians how to read research and interpret it for themselves,” Dr Stehlik said.

Educational redesign of the workshops saw Dr Stehlik named a 2020 Rising Star by The Educator, Higher Education.

## JOURNAL CLUBS BUILD CONFIDENCE

The allied health research team continues to explore structured journal clubs to increase clinicians' confidence in using evidence-based practice (EBP) to inform clinical practice.

The second phase of the TREAT journal club trial, which stands for Tailoring Research Evidence And Theory, evaluated the implementation of the structured TREAT format across six journal clubs involving 83 allied health clinicians. It investigated the most effective implementation strategies across different contexts.

The project, led by Dr Rachel Wenke, is a collaboration with Bond University's Professor Sharon Micken, Dr Paulina Stehlik and Dr Jodie Wiseman as well as Gold Coast Health's Dr Ian Hughes and Dr Caitlin Brandenburg and Workforce Development Officer Katherine Richards; and included facilitation with Research Fellows Dr Kelly Weir and Dr Shelley Roberts.

Preliminary findings indicate significant improvements to clinicians' evidence-based practice (EBP) skills and their reported confidence to use EBP.

**“Clinicians also reported adopting about 25 new treatments as a result of participating in the journal club indicating important changes to practice.”**

– Dr Rachel Wenke, Project Lead

Results from the 10-month data collection point are being prepared for a journal publication in the peer-review journal BMJ Medical Education.

Results will also help to inform a future study which will aim to spread the TREAT format more widely using a web-based platform.





## LIBRARY PROVIDES SPECIALISED SUPPORT

Gold Coast Health researchers have access to a team of librarians and librarian technicians in two welcoming spaces at Gold Coast University Hospital and Robina Hospital.

The library team assists individuals and teams of researchers in all aspects of literature search and management, whether they are writing a grant application, submitting an ethics application, undertaking an audit, conducting a systematic review or writing for a publication.

They work with staff from across the health service to access and use information resources as well as provide consultations for more complex retrieval of information.

The library service continually reviews and revitalises the book collection to meet the needs of researchers and the organisation.

Gold Coast Health project manager Rosie Rocco said the value of the library was immeasurable.

**“The library provides immeasurable value to me by linking me with knowledge for education and sharing understanding of the research that supports the programs run by my team.”**

– Melanie Wells, Project manager

Project manager Melanie Wells said being a welcoming space, it created a sense of belonging and connection.

“Library (staff) create a sense of belonging and organisational empowerment that has developed a community connection providing the confidence for staff to participate in learning, education and research. “Their knowledge, practice wisdom and awesome personalities, fosters encouragement, a sense of joy and inclusion for all to feel welcomed and valued regardless of whether you are a novice or expert when you enter the library,” Ms Wells said.

Occupational therapist Mei Yi Lim said the library environment for knowledge, research and education.

“It makes me feel young again while I reminisce the friendships and fun times of the university days in the library.”



**FOR MORE INFORMATION**

Email: [GCHLibrary@health.qld.gov.au](mailto:GCHLibrary@health.qld.gov.au)





**1887**  
REGISTERED  
LIBRARY USERS IN 2019

**2276**  
JOURNAL ARTICLES  
OR BOOKS SUPPLIED



**321**  
LITERATURE SEARCHES  
COMPLETED



**936**  
ATTENDED LIBRARY  
TRAINING AND ORIENTATION

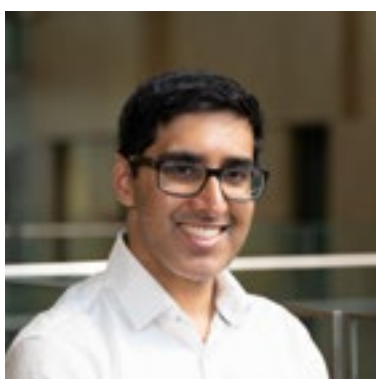


# BUILDING RESEARCH CAPACITY ACROSS THE ORGANISATION

To encourage staff to engage in research and to grow the research culture within our divisions, the Gold Coast Health Study, Education and Research Trust Account (SERTA) provided the opportunity for each of the six operational divisions to establish research development positions/opportunities that would:

- support divisions to develop research capability and capacity and strengthen areas of research
- develop activities/projects aligned with divisional research priorities and the GCH Research strategy
- show the translational benefits of research activities to the division and the health service

Meet our team of Research Development Officers working to build research capacity across our organisation.



**Karl Bagraith**

## **Division: Surgical Anaesthetics and Procedural Services (SAPS)**

Since starting in October 2019, Karl Bagraith has analysed the division's research strengths, needs and opportunities, and developed a workplan that identifies research priorities with cross-divisional relevance.

To support advancement of collaborative research, Karl will be working to establish relationships between Gold Coast Health staff and prospective partners to grow these SAPS-specific research strengths.

Building capacity is also a concurrent and central focus of the role, including supporting clinicians with the development of their research projects (for example ethics and governance approvals, data analysis and research dissemination) and engaging with junior clinicians to facilitate engagement with research studies.



**Grace Branjerdporn**

## **Division: Mental Health and Specialist Services (MHSS)**

Grace Branjerdporn is responsible for developing staff research skills and supporting the translation of research into practice.

Ms Branjerdporn has supported multi-disciplinary staff in all stages of research including protocol development, ethics and governance submissions and data analysis.

She has worked with colleagues in mental health to develop a systematic review to evaluate the effect of viral outbreaks such as COVID 19 on mental health and service provision and a grant to the Queensland Technology Future Funds, resulting in funding of \$200,000 to support Trans-Direct Cranial Stimulation.

Ms Branjerdporn's support has empowered mental health clinicians who may be novice researchers to complete research projects.



**Laetitia Hattingh**

## **Division: Diagnostic and Subspecialty Services (DASS)**

Dr Laetitia Hattingh has used several strategies to grow research areas, capacity and outputs, including:

- Forming partnerships with the School of Medical Science at Griffith University to increase enrolment and supervision of clinicians in the Master of Medical Research Program
- Establishing a Cardiology, Renal and Respiratory Research Forum between Gold Coast Health staff and Griffith and Bond universities
- Developing nine divisional research registers to monitor activity and explore potential collaborations.

In 2019, Dr Hattingh assisted staff in securing more than \$34,000 in grant funding from the Health Practitioners Research Scheme and Griffith University and the University of Queensland Quality Use of Medicines Grant Scheme.



### Kristen Jones

#### Division: Women's, Newborn and Children's Services (WNCS)

As a clinical psychologist with a professional doctorate, Kristen Jones's interest in research was cultivated during her undergraduate and postgraduate training leading to her ongoing PhD with the Trauma Service at Gold Coast Health.

Prior to commencing as the Senior Research Fellow for Women's, Newborn and Children's Services (WNCS), Dr Jones worked in the health service's acute psychology team for eight years.

A scoping analysis of research activity in WNCS resulted in the development of a divisional research program that focuses on placing the woman, child, and family at the centre of six themes.

The role has also established the WNCS Divisional Research Committee where research leaders across medicine, midwifery, nursing and allied health meet quarterly.

"I hope to see an increase in emerging researchers leading projects, research grant success, a decrease in research waste and duplication, and wide dissemination of the great research being done in WNCS," Dr Jones said.



### Dean Vuksanovic

#### Division: Integrated and Ambulatory Care Services (IACS)

Dean Vuksanovic is a clinical psychologist experienced in working with people with cancer and blood disorders.

His interest in supporting people at end-of-life led him to exciting research on helping patients create legacy documents for their loved ones, and ultimately a PhD in this area.

He said the role with research was varied and rewarding.

"It involves supporting individual staff in achieving their research goals as well as working with the IACS executive team and other research leads in achieving wider divisional research objectives. In doing this, we are closely guided by the Gold Coast Health Research Strategy 2019-2022 and the organisation's 'Always Care' philosophy," he said.

Mr Vuksanovic is also a member of the Gold Coast University Hospital Human Research Ethics Committee.



### Research Fellows

#### Division: Allied Health Services (AHS)

Allied Health Research Fellows Kelly Weir, Rachel Wenke and Shelley Roberts have been instrumental in coordinating a small grant model which allowed Allied Health staff to take time out from their clinical duties to engage in research.

Eight small projects received support, including three from nutrition and dietetics, three from physiotherapy, one from speech pathology and one interdisciplinary from the ear nose throat Allied Health First Contact Team (audiology, speech pathology and physiotherapy).

Each project had a research plan with clear benefits across two levels - improving clinician engagement in research and progressing towards improved evidence-informed clinical practice.

Multiple research outputs including publications have arisen from these projects.







# STRENGTHEN PARTNERSHIPS

**Our goal: To strengthen partnerships to advance innovative ideas through synergistic research with partners.**

In this section, we will share insights into how we are developing partnerships through the Queensland and Northern New South Wales Regional Health Collaborative and at the local level through the development of research groups and collaboratives.



# PARTNERING TO IMPROVE THE HEALTH OF PEOPLE LIVING IN REGIONAL, RURAL AND REMOTE COMMUNITIES

Gold Coast Health, in collaboration with partner organisations, is leading the Queensland and Northern New South Wales Regional Health Collaborative.

The great work of the collaborative is ongoing, pooling knowledge and resources to enable internationally competitive research to be conducted and translated into improved clinical outcomes for people living in regional and remote Australia

The regional health collaborative includes six health services (Gold Coast, Sunshine Coast, Darling Downs, West Moreton, South West and Northern NSW), six universities (Bond, Griffith, Southern Cross, Sunshine Coast, University of Southern Queensland and University of Queensland) and Gold Coast Primary Health Network and serves a diverse community of more than 1.9 million people.

Professor Allan Cripps, Interim Director of the Collaborative, is working with partner organisations to prepare a submission for accreditation as a Centre for Innovation in Regional Health, an initiative of the Commonwealth Government. These Centres, led by health services in partnership with academic and industry, are recognised for their excellence in the provision of research-based health care and training to regional and remote communities.

**“The collaborative will increase equity of access for regional and rural consumers and patients to high quality clinical trial and research opportunities.”**

– Professor Rachelle Pitt, A/Director, Research and Innovation, West Moreton Hospital and Health Service

Whilst the benefits of forming a Centre for Innovation in Regional Health are many, the collaborative will work with health services and tertiary education partners to take a collective approach to address national, state and local initiatives to improve the translation of current evidence into healthcare practices and policies.

A review of the research being undertaken by the Queensland and Northern New South Wales Regional Health Collaborative has identified key research strengths that will be the immediate focus for building collaborative opportunities. Supporting these strengths are research groups and collaboratives that have developed through clinician-academic partnerships.



**INTERESTED IN LEARNING MORE ABOUT THE QUEENSLAND AND NORTHERN NEW SOUTH WALES REGIONAL HEALTH COLLABORATIVE?**

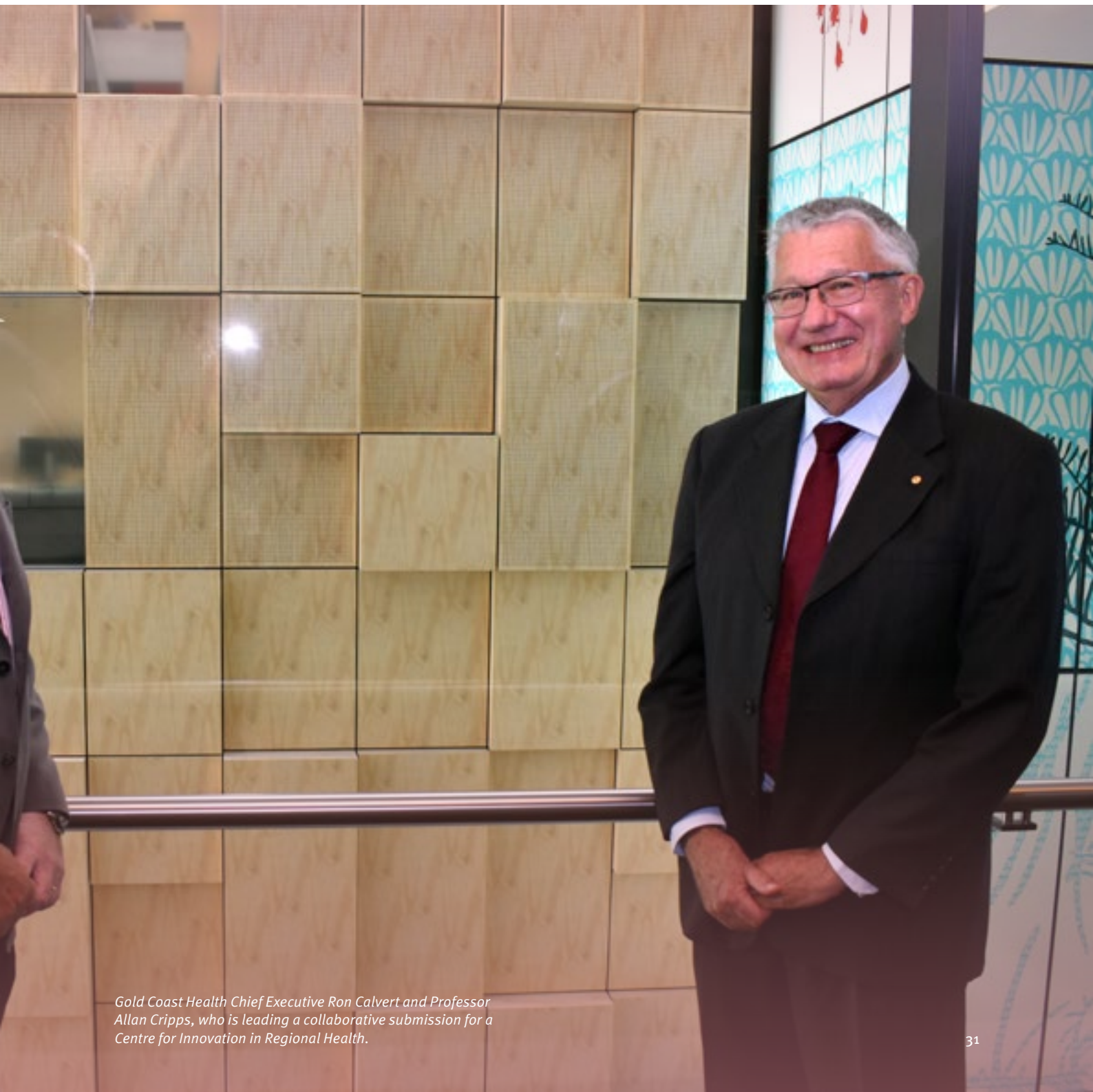
Visit: [www.goldcoast.health.qld.gov.au/regional-health-collaborative](http://www.goldcoast.health.qld.gov.au/regional-health-collaborative)  
Email: [RegionalHealthCollaborative@health.qld.gov.au](mailto:RegionalHealthCollaborative@health.qld.gov.au)



“The enthusiasm of the partners  
to the collaborative objectives is  
reassuring and highly uplifting.”

—Professor Allan Cripps (pictured below, right),  
School of Medicine, Griffith University.

Prof Cripps is also the Interim Director of the Queensland and  
and Northern New South Wales Regional Health Collaborative.



*Gold Coast Health Chief Executive Ron Calvert and Professor Allan Cripps, who is leading a collaborative submission for a Centre for Innovation in Regional Health.*



# COLLABORATIVES STRENGTHEN KEY AREAS

Forming research groups and collaboratives supports research enterprise in key areas through the bringing together of a range of professionals with different skills, talents and experience that creates a culture of continuous learning and development. Here we share with you the opportunities that research groups and collaboratives can deliver and how through forming such collaboratives, Gold Coast Health strengthens its research partnerships and in turn, its research culture.

## ADVANCING PAEDIATRIC RESEARCH

Paediatric research at Gold Coast Health focuses on diseases and disorders of childhood and seeks to evaluate and challenge treatments in the emergency and critical care setting. Engagement with the Paediatric Research in Emergency Departments International Collaborative and the Paediatric Critical Care Research Group has resulted in a number of multi-site projects across the spectrum of paediatric emergency care.

Detecting and managing severe sepsis in children is vital, given it is a leading cause of illness and death in children in the developed and developing world. Despite advances in medical technology and health care systems, there have only been very small improvements in the survival rates for severe sepsis in children. Early recognition of sepsis in children is vital to ensure that early and aggressive treatment is initiated. There is an urgent need for better tools to detect and manage sepsis in children.



*Dr Shane George*

## RAPID study

Rapid Acute Paediatric Infection Diagnosis (RAPID) - Sepsis is a collaborative project across Gold Coast Health, Queensland Children's Hospital, Townsville Hospital and Thursday Island Hospital along with the University of Queensland through the Paediatric Critical Care Research Group and Griffith University.

Thanks to the support from Emergency Medicine Foundation, the investigator team has set up a unique prospective cohort across metropolitan, regional, and remote paediatric facilities in Queensland. The study has enrolled close to 1000 children undergoing sepsis evaluation, building up a large observational paediatric sepsis cohort. The study has secured a total of almost \$3 million funding, including a 2020 Medical Research Future Fund grant. This grant will enable recruitment of up to 1500 patients. The research has used cutting-edge technology to identify signals in the gene activation of children with sepsis to help develop better tests for rapid sepsis recognition.

The investigators have engaged both the Maddie Jones Foundation and "T for Thomas" throughout the study for consumer input. Financial support has also been provided from the "T for Thomas" charity.

### PROJECT TEAM:

**Professor Luregn Schalpbach,**  
Queensland Children's Hospital

**Associate Professor Shane George,**  
Gold Coast Health and Griffith University

**Professor Keith Grimwood,**  
Gold Coast Health and Griffith University

**Dr Peter Snelling,** Gold Coast Health

**Dr Natalie Philips,** Queensland Children's Hospital

**Professor Lachlan Coin,**  
University of Queensland and University of Melbourne



## Reaching new horizons

The Horizons program is run by an interdisciplinary team caring for young people presenting with a wide range of chronic physical symptoms like pain, fatigue and neurological symptoms with no medical cause found. This group of disorders is often referred to as functional disorders. The symptoms can cause significant psychosocial distress and result in severe functional impairment including significant sleep and eating dysfunction, problems with independent mobilisation, school disengagement, and general withdrawal from relationships and social activities.

The Horizons program was developed in response to research that showed significant improvements in the health and wellbeing of young people suffering functional disorders, following the implementation of an outpatient “mind-body” rehabilitation clinic.

Staff Specialist Paediatrician Dr Penny Larcombe and Clinical Psychologist Dr Brooke Mitchell led the research and since winning a Gold Coast Health Improvers Grant in 2019, have established the Horizons program with the addition of John Kelley (Pain Physiotherapist), Cindy Bradbury (Occupational Therapist) and Dr Meagan Lang (Clinical Psychologist).

Patients who have completed the program have shown a reduction or resolution of physical symptoms and improved everyday function with 76% of young people in the program returning to school full-time. Previously, some of these young people had minimal or no school attendance.

In addition, there are cost savings for the health service with a reduction in emergency presentations and reduced length of inpatient stay by young people with functional disorders.

The Horizon program emulates the ‘Always Care’ philosophy by being compassionate about providing care for young people suffering from functional disorders as they historically have been misunderstood and marginalised in health care services.

Ongoing research will evaluate the long-term outcomes of our interventions within the Horizons program, particularly long-term mental health of our young people and their engagement in further study and work. We are also developing an education program to help disseminate our model of care to other hospital and health services.



“The (Horizons) team has been a vital part of my child’s mental and physical remission and rehabilitation. The team has helped my child to regain her physical strength, coordination and stamina, be less reactive and enjoy daily life more, sleep and eat better and ongoing they are helping her to deal with the post traumatic stressors and triggers when they arise.” – Parent of Horizons program participant



*Dr Manbir Chauhan, Senior Staff Neonatologist, is among the researchers looking to improve neurodevelopmental outcomes for premature babies.*



## **Supporting pre-term infants to have the best start in life**

The Supreme study is investigating the relationship between plasma sulphate levels and neurodevelopmental outcomes, including cerebral palsy and cognitive dysfunction, in extremely pre-term infants (<32 weeks) at 12 weeks and 24 months of age. If shown to be relevant, neonatal sulphate supplementation in place of current antenatal protocols may prove to be a simple and effective, low-cost, low-risk intervention universally available to all preterm infants to improve their chances of a normal neurodevelopmental outcome. To date, 83 babies have been recruited to the study, which is taking place at Gold Coast Health, Mater Mothers' Private Hospital and Royal Brisbane and Women's Hospital.

This project has provided research engagement opportunities for neonatal nurses, registrars and senior medical officers. The funding provided via a National Health and Medical Research Council Project Grant through Mater Mothers' has assisted in the employment of a part-time research nurse to assist with the project.

## **Extremely pre-term infant non-invasive surfactant trial (EPINIST)**

EPINIST is a randomised controlled study that will examine the feasibility of giving surfactant via a thin catheter to extremely premature infants (between 24 and 28 weeks gestation) soon after birth with the goal of avoiding mechanical ventilation in the first week after birth. The comparison arm involves surfactant being administered via an endotracheal tube and mechanical ventilation with an aim to extubate as early as possible. This approach is the standard currently being applied at Gold Coast Health. Because major complications are related to lifelong disabilities, this new non-invasive intervention may be a promising therapy for extremely pre-term infants. The study is an interstate collaborative trial led by Professor David Osborn, of Royal Prince Alfred Hospital and the University of Sydney. Gold Coast Health is actively recruiting babies for the study.

Dr Joseph Tauro, Newborn Care Unit, said the study underpins our organisational 'Always Care' philosophy, putting the best interests in our tiny little ones so that their beginnings are strong.

"We have noted that parents are very open to the idea of non-invasive breathing support and would like their baby to receive it from birth. However, they also realise the need for a robust study to show benefit of one treatment versus another."

## EMERGENCY CARE REACHING NEW HEIGHTS

The achievements of the Gold Coast Health's Emergency Department Collaborative Research Group are underpinned by the strength of the teams across its seven research pillars and their consistency to conducting research to improve patient care. In 2019, emergency care researchers were listed on \$4.6 million of grants and published 67 peer reviewed journals, illustrating the impetus of the collaborative in building research capacity in line with the overarching goals of Emergency Department research.

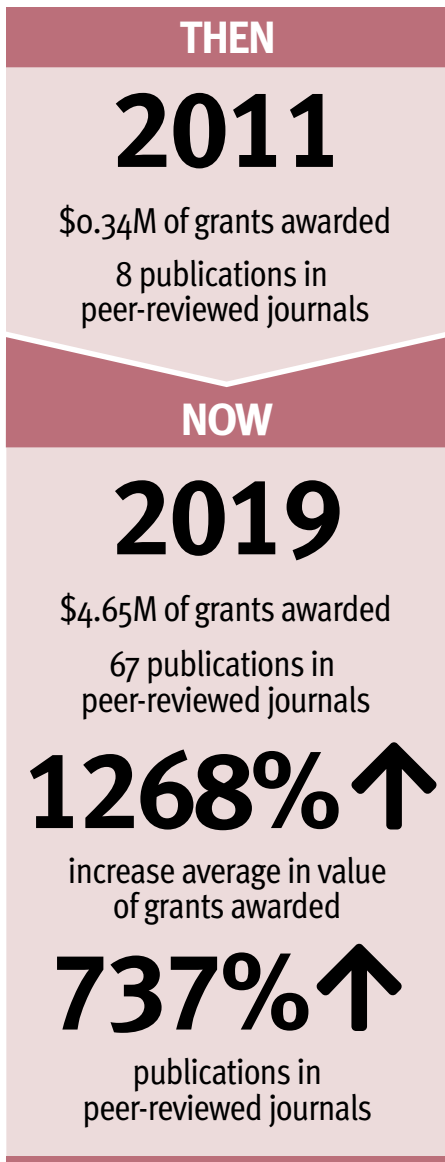
The collaborative continues to grow its media presence and in 2019 launched a website dedicated to highlighting the achievements of ED research activities.

Another highlight of the year included the announcement of a Medal of the Order of Australia for leaders Professor Julia Crilly (workforce and service delivery pillar lead) and Dr Don Campbell (trauma and pre-hospital pillar lead).



### WANT TO GET KNOW MORE?

Visit [www.goldcoast.health.qld.gov.au](http://www.goldcoast.health.qld.gov.au) and click on research areas > emergency medicine



## 7 Pillars of Gold Coast Health Emergency Department Research



Translation   Education   Service delivery



## Use of fluids in sepsis

The question of fluid volume in resuscitation has been identified as the top priority in sepsis research. Guidelines on sepsis pathways recommend an initial intravenous (IV) fluid bolus of 30ml/kg fluid for patients with sepsis and hypotension. However, research to date suggests there may be harm associated with injudicious use of fluids in sepsis. Since there is equipoise regarding this problem, a large, multicentre phase III study is required to definitively answer this question.

To inform the larger trial, a bi-national multi-site prospective observational study of fluid administration in (suspected) sepsis and hypotension was undertaken in 70 Emergency Departments of Australia and New Zealand hospitals. Key coordinating centres included Gold Coast Health led by Professor Gerben Keijzers, Royal Perth Hospital, the Centre for Clinical Research in Emergency Medicine (CCREM), Monash University and the Australian and New Zealand Intensive Care Society Clinical Trials Group (ANZICS CTG).

A total of 591 participants were recruited to the study. Overall, the study showed that current resuscitation practice in patients with sepsis and hypotension varies widely. Since the study results have been published, the Medical Research Future Fund has granted \$2.3 million to conduct the large, 1100-patient, multicentre randomised controlled trial (RCT). Consumer representatives, including sepsis survivors, were engaged in the development of this study.

## Delivering healthcare in the custodial environment

Focusing on healthcare delivery in the custodial environment and within the Emergency Department (ED), particularly for those arriving by police (short custodial sentence in police watch-house), has been prompted by the increase in chronic and mental health illness in detainee and prisoner populations. Professor Julia Crilly is leading research on understanding and evaluating service delivery for this vulnerable population. Results to date have shown that:

- People who arrive to the ED by police are diagnosed with mental health and toxicology-related illnesses in higher proportions when compared to people arriving by other means.
- People who arrive to the ED from the watch-house reflect 'physical health emergencies' whereas presentations arriving via police from other locations reflect 'behavioural health emergencies'.
- When there was a 24/7 nursing presence in the watch-house, fewer transfers occurred from the watch-house to hospital.

This research is being extended to other sites across Queensland to further understand the different outcomes that exist based on arrival to ED, what health care strategies are delivered in other watch-house settings, and what are the perspectives of emergency care staff responsible for people arriving via police.

Many organisations are engaging in this research, including Griffith University, Queensland Police Service, Queensland Ambulance Service, the University of Melbourne, Queensland University of Technology, Metro North Hospital and Health Service and more recently, Cairns Hospital, Royal Melbourne Institute of Technology and University of California San Diego.



*Members of the ED Collaborative Research Group*



## Using simulation to diagnose system and team performance

Gold Coast Health Simulation Service has developed a high-performance strategy that uses simulation as a diagnostic tool for the exploration and investigation of system and team performance. Performance may be affected by barriers to efficiency (improving delivery of trauma care, embedding occupational therapy into handovers), safety threats (looking at unsafe practices and environment, COVID-19 practices) and how we relate to each other. In the case of the latter, Dr Victoria Brazil and Darren McLean are leading a study that examines the relationships, interactions and culture within health service staff involved in the after-hours care of deteriorating patients, including Medical Emergency Team (MET) calls, to inform and implement strategies to enhance those relationships and improve patient care.

The Simulation Service, under Dr Brazil's directorship, is linked with the Bond University Translational Simulation Collaborative. The service leads Australia in terms of healthcare simulation research, particularly in exploring relationships between teams

in healthcare. The team collaborates with a range of groups including Mater Education, Queensland Children's Hospital, Sunshine Coast University Hospital and Lismore Health service. Simulation education also forms one of the seven strategic pillars of the Emergency Department's research strategy.

"Healthcare can be quite a tribal industry. We tend to aggregate around our own 'tribes' - nurses, paramedics, emergency physicians, etcetera. Simulation training can be effective in breaking down those barriers, by improving the integration of communication between the various departments in a hospital. Simulation needs to be goal directed, not just training for the sake of it.

"We need to determine what are the educational outcomes that we are looking to develop, or what are the patient outcomes that we are aiming to improve. In the example of trauma care, we can use goal-directed simulation to specifically target the rapid transfer of a patient to the operating theatre."

*Dr Victoria Brazil on one of the clinical simulation learning scenarios. (Image courtesy of Bond University)*



## ENACTING THE PRINCIPLES OF PATIENT AND FAMILY-CENTRED CARE

The Patient and Family-Centred Care Research Collaborative's vision is for the Gold Coast community to be supported by and engaged in interdisciplinary research that is truly patient and family-centred, to align with our Professional Practice Model and improve health outcomes.






In patient and family-centred care, clinicians possess the skills to enact the following principles:

- Respect for patients as unique individuals
- Relationship-building with patients and their families/friends/carers
- A biopsychosocial perspective towards health
- Openness to environmental design, including social climate, policies and procedures, physical design, and care systems and processes.

To achieve the collaborative's vision, our research teams work with stakeholders to develop, test and implement patient-centred interventions across our programs of research including:

- Nutrition
- Acute and complex care
- Older people with cognitive impairment
- Health communication
- Patient safety.

Partners range from local and international agencies and institutions including the Gold Coast Health Consumer Advisory Group, Menzies Health Institute Queensland, Griffith University, Queensland University of Technology, Bond University, Royal Brisbane and Women's Hospital, Queen's University, Clinical Evaluation Research Unit Kingston, Marquette University, Princess Alexandra Hospital and Logan Hospital.

				
NUTRITION	ACUTE AND COMPLEX CARE	OLDER PEOPLE WITH COGNITIVE IMPAIRMENT	HEALTH COMMUNICATION	PATIENT SAFETY
Dr Shelly Roberts and Professor Andrea Marshall lead a program of research into nutrition for hospitalised patients. Their research employs patient and family-centred care approaches and knowledge translation methodologies.	Professor Andrea Marshall leads a program of research into Acute and Complex Care. Her research interests include intensive care nursing practice. She has specific expertise in undertaking research underpinned by knowledge translation and implementation science methodologies.	Associate Professor Laurie Grealish leads a program of research into improving the experiences of older people in hospital, focusing on older people with cognitive impairment. She has specific expertise in undertaking research using work-based learning and implementation science methodologies.	Dr Georgia Tobiano leads a program of research into engaging patients and their families in health communication, particularly during transitions of care (i.e. handover and discharge).	Professor Brigid Gillespie and Dr Sharon Latimer lead a program of research into the following patient care areas: pressure injuries, surgical wounds, the operating room, medication safety.

## Workforce partners with families to improve care for critical patients

Improving partnerships with family members of critically ill patients is the primary aim of the IMPACT trial, led by Professor Andrea Marshall.

In this first-ever clinical trial of a family-mediated intervention, strategies were introduced to empower family members to work collectively with health professionals.

Participant families were randomly allocated to either a nutrition therapy or decision support intervention.

The intent of the trial was two-fold; first, through partnerships with families we were looking to see whether the interventions could enhance nutrition intakes or improve shared decision-making.

Second, we were looking to see whether this type of family engagement would improve family satisfaction and experience.

There are two concurrent and complimentary studies to the IMPACT trial.

In the first we are exploring patient, family and health provider beliefs, attitudes and perceptions towards family engagement in the delivery of care in the Intensive Care Unit (ICU).

In the second, we are developing and testing a Family Engagement Survey to help determine the levels at which family members are wanting to participate in the care delivery in the ICU.



## Meet Margaret Shapiro, Consumer representative on the Patient and Family-Centred Care Research Collaborative

“I am a consumer representative on the Patient and Family-Centred Care Research Collaborative, led by the talented nurse researcher, Dr Georgia Tobiano. Participating as a consumer representative has given me a great deal of satisfaction and opportunity for consumer-led healthcare improvement. The research team includes me as an equal member of the team, and my input is always valued.

In one clinical handover project, Georgia created the opportunity for consumer input right from the start, which resulted in implementation of a survey for patient perceptions of their involvement in clinical handover. We also have a partnership tool which assesses the ongoing effectiveness of the partnership. It's been useful to explore how involved each team member feels. We now have a monthly lunchtime research meeting where we discuss literature, additional research, potential conference presentations and publications.

My experience is a great example of productive research partnerships with consumers. Our partnership success has led to further projects. We are now developing a clinical handover training video led by Kim Jenkinson who is a Clinical Nurse Consultant. The learning health care system that we have at Gold Coast Health encourages and supports strong consumer partnerships throughout the whole research journey. I strongly encourage anyone considering including consumer representatives in research to do so – the benefits and learning from both the consumer and clinician / researcher perspective are well worth the effort.”



### **Discharge medication communication strategies –What is the patient’s role?**

This study is aimed at understanding how engaged patients are in discharge conversations about their medicines.

Researcher Dr Georgia Tobiano leads a team made up of consumers, doctors, nurses and pharmacists who have recorded and observed 200 discharge conversations at Gold Coast Health.

Ms Tobiano travelled to Canada to learn Medicode, an analysis method for coding healthcare conversations. She is currently analysing these 200 conversations.

**“I can’t wait to see the results from this study, and work with consumer and inter-disciplinary partners to find new ways to maximise patient involvement in hospital communication. Patients are the one constant in their care and if we can better partner with them about their medicines, we can support our Always Care philosophy.”**

### **Putting the patient with dementia first**

The SIMPLE Project led by Associate Professor Laurie Grealish aims to establish the feasibility of a person-centred care package for a patient living with dementia, that will enhance communication between family carers and staff. It also aims to develop a staff education program and support in improving person-centred care to the patient living with dementia in an acute care setting.

The patient’s personal profile is being established using the ‘This is Me’ tool which has been adopted by some United Kingdom hospitals. Using the This is Me tool, a nurse sits down with the family member when a patient is admitted to hospital and finds out a little bit more about the person so that they understand what’s important to them, such as, how they like their meal, or that cup of tea. The intent is to create a relationship between nurses and the family that is based on mutual interest of the patient. A co-design approach whereby the researchers work closely with the clinicians and the consumers is being used to implement and monitor this tool.

The staff education program involves online learning, case discussion with experts and simulation and is being introduced to four Gold Coast Health wards that support the care of elderly patients. The program aims to increase hospital staff knowledge and understanding about dementia and improve staff self-report of person-centred care, as well as their capacity to provide care for people living with dementia in an acute care setting. The SIMPLE Project study is funded through Clinical Excellence Queensland.





#### **STRATEGY 1:**

Consumer, family/friend/carer engagement in care and research

#### **STRATEGY 2:**

Technology to support patient-and-family-centred care

#### **STRATEGY 3:**

Health literate information-sharing and education tailored to patient and family/friend/carer needs

#### **STRATEGY 4:**

Facilitation of healthcare that is well co-ordinated and allows continuity



# EMBED RESEARCH IN HEALTH SYSTEMS AND SERVICES

**Our goal: Embed research in health services and systems to use research and other forms of evidence to improve and innovate healthcare.**

Limited time and resources can make embedding research in health systems and services challenging. In this section, we will showcase examples of how research has been successfully implemented, leading to changes or improvements in clinical practice, health service delivery and patient care in the community. We also focus on the consumer and the importance of engaging consumers in all aspects of the research process, including having a voice on committees involved in decision-making processes.



# TRANSLATING PRESSURE INJURY PREVENTION RESEARCH TO THE BEDSIDE

Increasing patients' knowledge about preventing pressure injuries can help reduce these adverse events.

Funded by the National Health and Medical Research Council in 2014, an international team of multidisciplinary researchers, led by Professor Wendy Chaboyer, developed and tested a patient pressure injury prevention education care bundle consisting of six-minute videos, posters and brochures. Available in nine languages, the bundle delivers three simple strategies that patients can easily incorporate into their daily care – keep moving, look after your skin, and eat a healthy diet.

In 2019, Dr Sharon Latimer, a Senior Research Fellow in a conjoint position with Griffith University, led a team of nurse researchers and clinicians in implementing this patient education care bundle across the Gold Coast University Hospital.

The intervention was uploaded onto the GCUH Patient Entertainment System and 80 patients were recruited to the study.

Researchers found patients' knowledge of preventing pressure injuries increased following engagement with the education care bundle and they were very satisfied with the intervention quality and clear messaging.

## Change to practice:

Pressure injury prevention education care bundle is now easily accessed by patients via the bedside Patient Entertainment System and is a valuable resource for clinicians to use when educating inpatients.

## Adding negative pRESSure to improve healing: the DRESSING trial

A team of researchers, including nurses, obstetricians, a statistician and health economist, have recently completed a randomised controlled trial comparing negative pressure dressings with standard surgical dressings in obese women having caesarean births.

The \$2.28 million multi-site trial led by Professor Brigid Gillespie was funded by the National Health and Medical Research Council. The Griffith University and GCUH-based team includes Professors Wendy Chaboyer, David Ellwood and Dr Anne Sneddon.

The trial is the largest in its field and closed in December 2019. Over the five-year period of the trial, 2035 women took part. Data analysis is underway. Results, once implemented, will contribute to improving clinical practice.



## INTERESTED IN THIS RESEARCH?

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## INTERESTED IN THIS RESEARCH?

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# PROMOTING CONFIDENT BODY, CONFIDENT CHILD IN THE COMMUNITY



Lyza Norton

Children as young as five may experience poor body image, awareness of dieting and a desire for thinness - attitudes that can lead to unhealthy eating patterns, excessive weight and/or eating disorders.

Parents play a key role in the development of children's body attitudes and eating patterns.

Confident Body, Confident Child (CBCC) is a program designed for parents of young children and includes resources (books, leaflets, poster, website) and parent workshops and has been shown to improve parenting skills in promoting healthy body image and eating patterns with their children.

A multi-disciplinary team of researchers, allied health professionals and child health nurses worked together to adapt the program so that community-based Child Health Nurses could deliver it in their clinics.

With 30,000 consultations a year, Child Health Nurses have the potential to improve the lives of many patients and families through targeted eating disorder prevention via the Confident Body, Confident Child Program, in line with Gold Coast Health philosophy - Always Care.

Evaluation of the program's implementation showed that child health nurses used Confident Body, Confident Child in around two-thirds of appointments with parents of 2-6-year-olds.

The nurses stated, "This program is highly useful, valuable and easy to put in practice, and we have experienced increased awareness of child body image and improved confidence addressing such issues with our clients".



**Lyza Norton, Paediatric Dietitian, Gold Coast Health**

**Vicki Attenborough and Narelle O'Connor, Child Health Nurse managers, Gold Coast Health**

**Susan Moloney and Françoise Butel, Paediatricians, Gold Coast Health**

**Shelley Roberts, Research Fellow, Griffith University**

**Laura Hart, program creator, La Trobe University**



**INTERESTED IN THIS RESEARCH?**

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# IMPROVED ASSESSMENT PATHWAYS FOR PATIENTS REQUIRING AUDIOLOGY SERVICES

*Director of Audiology Jennifer Eakin performing a hearing test on Summer Parry*



Audiology services has been involved in providing assessment services as part of a new model of care, known as the Multidisciplinary Ear Nose and Throat Allied Health Primary Contact Assessment Service.

Audiologists deliver the model of care in collaboration with speech pathologists and physiotherapists and are engaging in research evaluating the implementation of this pathway.

The model involves triaging non-urgent Ear Nose and Throat referrals to an allied health assessment pathway and initiating further relevant assessments while patients are on the Ear Nose and Throat medical specialist waiting list.

Audiology has two pathways within this program: an audiology-led retrocochlear pathway for adult patients with asymmetrical sensorineural hearing loss, unilateral tinnitus, or dizziness and a paediatric Glue-ear (Otitis Media) pathway.

Patients engaged in the new model of care experienced significant reductions in waiting times for assessment with a reduction of 383 days (over one year on the waitlist) for adults on the retrocochlear pathway.

Waiting times for children on the Glue-ear pathway reduced by 163 days compared to children who were referred before the new model existed. Most patients (98%) were either satisfied or very satisfied with their service.

Director Jennifer Eakin is leading her team in their research endeavours and presented on this research to the 10th Australasian Newborn Hearing Screening Conference as well as being co-author on an article published in the Clinical Otolaryngology journal.

This publication was undertaken with colleagues Christopher Payten (speech pathologist), Tamsin Smith and Vicky Stewart (physiotherapists), Cate Madill (University of Sydney) and Kelly Weir (Allied Health conjoint appointment between Gold Coast Health and Griffith University).



**FIND OUT MORE ABOUT THIS PROJECT**

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# SPEECH PATHOLOGY USES RESEARCH TO STRIVE TOWARDS OPTIMAL PATIENT CARE

The Speech Pathology Service continues to build a sustainable research culture with 16 staff actively involved as principal investigators on research teams and about 40 staff supporting data collection for ethically approved research projects. The service also had two international journal publications and six national conference presentations.

Changes to patient safety as a result of recent research undertaken include a 50% reduction in texture-modified diet-related errors across two hospital wards in patients who took part in the INTENDED research study. This knowledge translation research, led by Assistant Director of Speech Pathology Marie Hopper, was a successful partnership with clinicians and researchers from Speech Pathology, Dietetics and Nursing - Dr Shelley Roberts, Dr Rachel Wenke, Zane Hopper, Leisa Bromiley, Chelsea Whillans and Prof Andrea Marshall.

Providing crucial evidence to inform clinical guidelines regarding oral feeding for infants and children on high-flow nasal cannula oxygen was the focus of a body of research led by Angie Canning and colleagues Rachel Fairhurst and Dr Kelly Weir. Ensuring clinical guidelines are supported by research will optimise the care for this vulnerable patient group.

In the current COVID-19 pandemic, many instrumental assessments of voice, including laryngoscopy, are being limited to high priority cases due to their high risk for viral droplet exposure. A new Speech



Pathology Ear Nose Throat (ENT) Telehealth Service has been established to help manage and triage patients with symptoms of a voice disorder.

Advanced Speech Pathologist Christopher Payten, as part of his PhD studies, is evaluating this new model of care to identify what parts of a case history and non-instrumental voice assessment completed by telehealth can predict the urgency for a diagnostic laryngoscopy and ENT assessment.

The outcomes of this study will help inform the development of a multicentre clinical trial of the telehealth approach as a way of managing services during the current and future pandemics.

If successful, the new model has potential to be applied in rural and remote areas where access to specialist ENT services may be limited.

Other key investigators on this study are Dr Kelly Weir (Gold Coast Health/Griffith University), Associate Professor Catherine Madill and Dr Daniel Novakovic (University of Sydney).

The proposed telehealth model and associated evaluation has been presented at two international scientific virtual conferences as well as a webinar coordinated by the Dr Liang voice program, which attracted an audience of more than 1300 people from 36 countries.



**FIND OUT MORE ABOUT THESE PROJECTS**

Email: [AlliedHealthResearchGCH@health.qld.gov.au](mailto:AlliedHealthResearchGCH@health.qld.gov.au)



# GOLD COAST LEADS THE WAY IN SUICIDE PREVENTION

Suicide is the leading cause of death among Australians aged 15-44 and kills twice as many Australians as road accidents.

Helping suicide attempt survivors at this critical moment in their lives and understanding what works best for whom has led to a collaboration between Gold Coast Health and Bond University on world-class research to develop treatments that will prevent suicide.

Professor Chris Stapelberg leads a study which will focus on patients presenting through emergency departments and community health services with suicidal thoughts and behaviours.

Federal Government and Bond University funding of \$704,305 has been awarded to the team to conduct the research over three years. It is one of the first teams nationally to be funded under the National Suicide Prevention Research Fund, building on the success of the aspirational Zero Suicide strategy adopted by the Gold Coast Mental Health and Specialist Services.

Clinical Director Dr Kathryn Turner said the funding would provide a great opportunity to assess important additional specific psychological interventions for people who present with suicidal crises, therefore improving the care of people who present to hospital and health services with a risk of suicide.

**“This research will help our service and many services across the country and internationally to understand the best future investments to make in terms of psychological interventions for suicide prevention.”**

## **Focus on the consumer – innovative, evidence-based care**

Consistent with the Always Care philosophy, Dr Stapelberg and his team are developing innovative evidence-based interventions.

An evaluation is currently under way of two interventions, the Attempted Suicide Short Intervention Program and Cognitive Behavioural Therapy that are being delivered to patients following a suicide attempt, in addition to the standardised clinical care approach, to determine whether these additional interventions improve the outcomes for this patient group over a two-year period.

If the outcomes are positive, training of clinicians in these interventions is very feasible in a large and busy health service, allowing for rapid translation into standard clinical practice.

## **The study team**

### **Gold Coast Mental Health and Specialist Services:**

Professor Chris Stapelberg; Dr Kathryn Turner; Dr Sabine Woerwag-Mehta; Dr Sarah Walker; Dr Ian Hughes; Dr Carla Patist; Vicki Green; Dr Anja C. Gysin-Maillart; Mia Delos; Tamara Hageman; Kim Fullerton Smith; Ravikumar Krishnaiah; Heidi Van Engelen; Sigi Gutjahr; Hitesh Joshi; Sarah McDowell; Allison Cameron; Trudy-Lee Scales;

### **Lived Experience Committee investigators:**

Michelle Edwards; Angela Davies; Cherie Dillon, Titta Gigante, Cindy Heddle, Natalie Mudge, Anne Zappa.

### **External partners:**

A/Professor Dr Anthony Pisani (University of Rochester, United States); Emeritus Professor Dr Konrad Michel (University Hospital of Psychiatry, Switzerland)



## **INTERESTED IN THIS RESEARCH?**

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# COMMUNITY PARTNERS WORKING TOGETHER TO COMBAT OBESITY

Gold Coast Health is taking preventive action to reduce the serious health issue of obesity in our community, a major risk factor for a range of chronic and preventable conditions.

Staff from Public Health and Strategic Planning and Assets are working closely with the universities and consumers to develop a tool that supports our health service in making evidence-based decisions on the most appropriate interventions for tackling obesity.

Following two initial workshops, a set of evidence-based interventions has been developed that appears feasible to implement. These interventions will be tested using the 'multistate life table' to analyse how people change in health status over time in response to intervention.

We will be able to estimate the impact of these interventions on obesity and its associated health outcomes, as well as their relative cost-effectiveness, so we can make better decisions to reduce the burden of obesity on our community and identify high-value interventions for agencies to implement.

Consumers are closely involved in this work, helping to inform the model and selection of interventions to test. Our community partners include City of Gold Coast, Gold Coast Primary Health Network, Kalwun Development Corporation, Multicultural Communities Gold Coast, National Heart Foundation, Diabetes Queensland and Education Queensland.

Preliminary results were completed in October, with more work to come on refining the model, deciding on implementation and monitoring the impact on local efforts to address obesity and its drivers.

This work is funded by the 2018 Gold Coast Health and Gold Coast Hospital Foundation Research Grants Scheme.



## INTERESTED IN THIS RESEARCH?

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# CONSUMER VOICES AT FOREFRONT OF HEALTH SERVICE PLANNING, DELIVERY, RESEARCH AND INNOVATION

“Our engagement activities move the main healthcare question of ‘what’s the matter with you?’ to ‘what matters to you?’ as we strive to empower Gold Coasters to be the captains of their own healthcare team.”

- Ian Langdon, Gold Coast Health Board Chair

Gold Coast Health has a *Consumer and Community Engagement Strategy 2020-2023* which sets the tone for how we partner with consumers and community to deliver the best possible healthcare. The engagement goal is to achieve authentic connections and partnerships with the community so that the health service accurately reflects and responds to the needs and perspectives of everyone they serve. A key focus point is shared decision-making where patients are empowered to be actively involved in their care, be it clinical or research.

There are a variety of ways current and past consumers can have a say in the future of healthcare:

- Join the Consumer Advisory Group
- Provide feedback directly to staff, or through the patient liaison service
- Complete a survey to share your views on a topic of interest
- Connect with us on social media
- Engage in research



## Consumer engagement in promoting an older person friendly care

Research studies into falls prevention in older people living with cognitive impairment, such as delirium or dementia, suggest that family involvement in care can help nurses anticipate patient needs.

A recent interventional study led by Associate Professor Laurie Grealish investigated a range of learning strategies to enhance individual and group reflection on how to effectively include families in the care of people living with dementia. In particular, using simulation as a technique for translating evidence, offers new opportunities for nurses to reflect on and develop their practice.

Leading change to promote older person friendly care has attracted a range of stakeholders, including consumer members of the Gold Coast Health Consumer Advisory Group, allied health, medical and nursing professionals and hospital leaders.

Establishing a shared vision for quality health services for older people has provided a clear guide for high-value research.



## INTERESTED IN THIS RESEARCH?

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## CONSUMER ADVOCACY DRIVES VALUABLE OUTCOMES

The Gold Coast Health Consumer Advisory Group (CAG) is focused on research excellence and creating safe evidence-based healthcare with the patient's best interests at the forefront.

One of its main roles is consumer advocacy – bringing important consumer expectations, experiences and voices to the health service to drive healthcare improvements. This can be achieved through committee membership which is the case for Noela Baglot who sits on the Research Council.

“I have encouraged discussion about this environment of caring and it has had a positive response. With this encouragement, consumers can be sure they will have hospital staff who always care.”

Bob Lee is a past patient who is now a CAG member and sits on a number of committees, including the Human Research Ethics Committee and Consumer Advisory Working Groups.

“In 2005, I was diagnosed with Non-Hodgkin's Follicular Lymphoma and transferred to palliative care at Gold Coast Hospital. There, I met a young haematologist, Dr Jeremy Wellwood, who informed me of a new treatment which I agreed to try. After successfully completing this treatment, I was later admitted to a Brisbane hospital for stem cell harvesting. In 2008, following a relapse, I was provided the opportunity to participate in a Phase III double blind placebo-controlled trial of an investigational product. My rationale for participating in the 'new' treatment and the Phase III trial was simple. I was going to do everything I could do to survive or make a difference whilst trying to survive. As a result of the care and treatment opportunities provided to me, I knew I wanted to give something back to the health service.”

There is increasing awareness that consumers and patients are often the experts missing from research and that they have so much to offer, from the formulation of research ideas through to the outcomes. Researchers are encouraged to involve consumers and patients who have the ability to add much to studies and to enhance the translation of research evidence in so many ways.

CAG Chair Margaret Shapiro said: “We are focused on a future of research with consumer partners, rather than research on consumers. It's a subtle but important shift.”



## Consumers helping the UPLIFT program reach new heights

Gold Coast Health physiotherapists, academics and patients have developed a new approach to managing chronic low back pain, the single greatest cause of disability.

Of all patients who started the UPLIFT program, a group-based, evidence-informed biopsychosocial approach for people with persistent pain, consisting of weekly group sessions over five weeks, half experienced a substantial, clinically meaningful recovery at the end of the program. Further, that was maintained at six-month follow-up, despite having significant comorbidities and 67% were unemployed.

Consumer involvement has been a key element of the UPLIFT program development and delivery, with four consumers engaged throughout the research and 'expert patients' assisting in the rollout of the program by sharing their experiences with participants.

Consumer representative Bev Stripp said: "I have been involved in delivering the UPLIFT program (with allied health) for the past three years. The physios and uni staff always ask for my opinion and feedback about how the project will look and how it's running. I was part of the UPLIFT program as a patient four years ago. Being able to give back by being part of the research is very important to me. This program changed my life and it continues to help so many people, because the program and research are shaped by people like myself who actually have persistent pain; not just physios who know the facts but haven't walked the talk themselves. The research is shaped by people in pain for people in pain. That's important to me and patients in the group."

In 2017, physiotherapists and partners established the UPLIFT weekly group education and physical activity sessions. Each session involves 60 minutes of interactive education and 30 minutes of a physical activity and exercise.

In 2018-2019, the team received a Small Project Grant from the Gold Coast Health and Gold Coast Hospital Foundation for a cohort study of patients enrolled in the UPLIFT program.

In 2019 the program received the Gold Coast Health 'Improving Clinical Performance' award. Also in 2019, the volunteer 'expert patients' were finalists at the Gold Coast Volunteer of the Year awards.



The next step for UPLIFT is to seek funding for a randomised controlled trial to evaluate the program's clinical efficacy and cost-effectiveness.

If proven effective, this Gold Coast Health-developed intervention can be implemented at other neurosurgery and orthopaedic physiotherapy screening clinics across Queensland.

**Hayley Thomson, Jonathon Dearnness, John Kelley, Kylie Conway - Physiotherapy, Gold Coast Health**

**Professor Michel Coppieters, A/Professor Leanne Bisset, Dr Kerrie Evans - Griffith University**

**Professor Pim Cuijpers, A/Professor Wendy Scholten-Peeters - Vrije Universities**

**Bev Stripp - Consumer representative**



### INTERESTED IN THIS RESEARCH?

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## Co-researcher and expert patient in the ATHENA program

Consumers have played a key role in the development of a resource for physiotherapists and dietitians providing services for women with urinary incontinence across the world.

Consumer Heidi Townsend was a co-researcher and expert patient in the allied health research team which investigated 'Feasibility of An exercise Training and Healthy Eating group program (ATHENA) for overweight and obese women with urinary incontinence: an effectiveness-implementation hybrid study.'

The team also included lead researcher Zara Howard, pelvic health physiotherapists, dietitians, research fellows and university academics.

Ms Howard said Heidi provided invaluable contributions throughout the research cycle from developing the ethics application, intervention program and workshop manuals, helping patients and researchers during the implementation of the treatment, evaluating the program and as a co-author for four publications (under review) arising from the research.

The ATHENA program manual, written using evidence gained from the investigation, will soon be available for practitioners.



### FOR MORE INFORMATION:

Visit the Community and Consumer engagement section of our website:  
[www.goldcoast.health.qld.gov.au](http://www.goldcoast.health.qld.gov.au)  
Email: [goldcoasthealth@health.qld.gov.au](mailto:goldcoasthealth@health.qld.gov.au)

**“Never underestimate the power of having your say – different perspectives are vital to us understanding and meeting the healthcare needs of everyone in our community. One voice can have a massive ripple effect.”**

- Janice Burt, External Engagement Officer



*The Trauma Service team.*

# FROM ROADSIDE TO RECOVERY: TRAUMA RESEARCH IN ACTION

The Gold Coast Health Trauma Service continues to participate in several national and international clinical research trials in alignment with the six pillars of trauma research as defined in their research strategy 2017-2024. The pillars are Prevention, Pre-Hospital/Emergency Care, Acute Care and Critical care, Rehabilitation, Post Discharge and Registry. The research pillars align with the health service 'Always Care' philosophy – putting the patient and families at the heart of all that the trauma service does.

The Trauma Service is collaborating with the Queensland Ambulance Service, The Alfred Hospital, the National Trauma Research Institute and the Royal North Shore Hospital to enhance clinical partnerships, whilst academic partnerships with Bond University, Griffith University and University of Queensland continue to mature, with medical and occupational therapy students engaging on trauma research projects as part of their placement.

The past 12 month has yielded several publications, aligning with the Royal College of Surgeons requirements to be a Level 1 Trauma Centre, showcasing our work within the follow areas:

## **Surgical rib fracture stabilisation:**

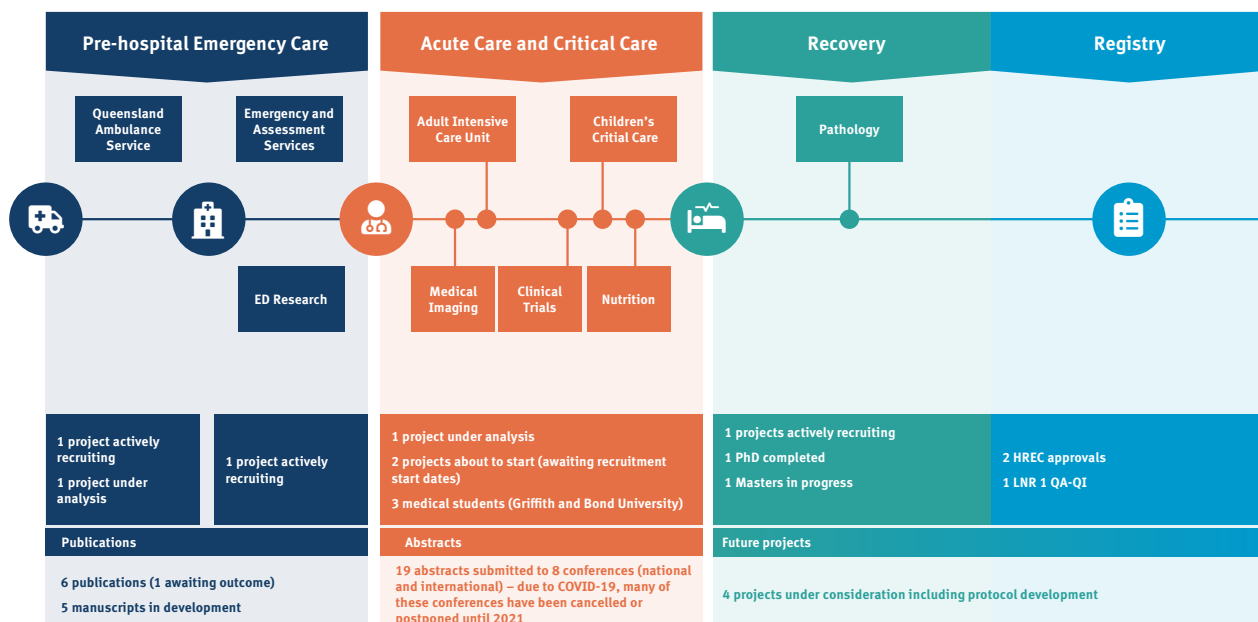
- Surgical stabilisation of unstable thoracic spine and rib fractures
- Novel case of emergency room to operation theatre for management of blunt chest wall injury

## **Critical bleeding management and hypofibrinogenemia and the use of rotational thromboelastometry (ROTEM) technology:**

- Targeted cryoprecipitate use in severe traumatic haemorrhage
- Targeted fibrinogen concentrate use in severe traumatic haemorrhage

## **Consumer evaluation of the trauma service delivery and trauma team relationship analysis**

- Evaluation of a trauma service: patient and family perspectives
- Doing our work better, together: a relationship-based approach to defining the quality improvement agenda in trauma care.



“Our vision is to improve health through translational research that is innovative, collaborative, regionally responsive and globally informative at an individual, population and system level.

Our team strives to improve our patients’ quality of life outcomes by engagement and collaboration of research and clinical teams towards this goal.”

- Professor Martin Wullschleger



#### INTERESTED IN THIS RESEARCH?

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# ESTABLISH A SUSTAINABLE RESEARCH CULTURE

**Our goal: Establish a sustainable research culture through investment in research infrastructure, engaging staff at all levels of the organisation and embedding research in operations.**

In this section, we talk about how we are investing in clinical trials, offering patients the opportunity to receive the newest treatments and to receive additional care and attention from the clinical trials staff. We share how we are innovating the research approval process and how we have used research to inform and evaluate contemporary and innovative practices to improve health service delivery and clinical outcomes. We also acknowledge the importance of receiving Magnet recognition, providing our consumers with the highest quality of care supported by research and evidence-based practice.



# CLINICAL TRIALS DELIVERING HIGH QUALITY, SUSTAINABLE HEALTH SERVICE

“We are focused on developing experience, knowledge and skill.”

- Kristof Boot, Assistant Director, Clinical Trials Service



## CLINICAL TRIALS – THE HEART OF ALL MEDICAL ADVANCES

Our health service established the Clinical Trials Service in 2019 with two objectives.

The first objective was to grow the number of clinical trials across the health service and secondly, to ensure more streamlined and centralised governance over clinical trial activities.

The growth strategy involved establishing a core group of clinical trial personnel capable of supporting trials from any department. This team began with one clinical trial coordinator supporting a study in mental health and has since grown to 11 staff supporting more than 50 trials from 32 principal investigators across all operational divisions within Gold Coast Health.

Now established, the service can manage and coordinate commercial and investigator-driven research projects. Departments across Gold Coast Health are continually becoming involved with the service, including cardiothoracic surgery, gastroenterology, anaesthetics and orthopaedics.

It operates alongside other specialist trials groups at Gold Coast Health including oncology and haematology, trauma and intensive care and is working towards the same goal of providing access to clinical trials as part of the hospital journey.

The second objective has been to streamline and centralise governance over clinical trials across the service. This objective was the result of two major changes influencing the clinical trials industry.

The first was the introduction of the Good Clinical Practice Inspections Program by the Therapeutic Goods Administration.

Gold Coast Health volunteered to be audited as part of the pilot program which resulted in very favourable review by the Therapeutic Goods Administration, with no critical or major findings being noted.

The Clinical Trials Service has established a Good Clinical Practice training program integrated with Learning On-Line that allows all staff at Gold Coast Health to access this essential training for conducting clinical trials.

Providing a robust system of monitoring and training of staff on Good Clinical Practice will ensure that Gold Coast Health will be in an “audit ready” state at all times.

Another major change saw the pilot of the National

**“Fantastic initiative with great leadership – highly experienced team who genuinely understand how to successfully conduct clinical trials. The team have been a huge enabler for increasing capacity and development of a research culture.”**

- Dr Caroline Thng, Principal Investigator (Sexual Health)



“The Clinical Trials Service has been a greatly appreciated initiative. It provides a specialised team with a unique skill set to support clinicians to undertake high quality research. The team has strong leadership and governance with meticulous attention to detail. This supports translational research to enable clinicians to provide world class health care.”

- Dr Shanthi Sarma, Principal Investigator (Mood Disorders)

Clinical Trials Governance Framework. Any health service conducting clinical trials is required to be compliant with the framework as it is assessed as part of the Australian Health Service Safety and Quality Accreditation Scheme.

The Clinical Trials Service is working with stakeholders across the divisions and members of Clinical Governance to develop policies, procedures and reporting systems that guarantee trials at Gold Coast Health are not only governed appropriately but that they are run with a focus on the end consumer, our patients.



## STUDIES BY DEPARTMENT



### INTERESTED IN CLINICAL TRIALS?

Email: [GCHClinicalTrialServices@health.qld.gov.au](mailto:GCHClinicalTrialServices@health.qld.gov.au)

## PROMISE STUDY



Research activity within the cancer and blood disorder services continues to grow, particularly within clinical trials which use novel therapies across medical oncology and clinical haematology.

These offer therapeutic options not normally available to our Gold Coast community through standard of care treatment.

The Cancer Clinical Trials Unit runs a large program including multicentre and investigator-initiated trials from phase 1 (first in human) through to phase 4.

Dr Jasotha Sanmugarajah, Director of Medical Oncology and Associate Professor of Medicine, Griffith University, is one of the chief investigators in a \$2 million grant from Cancer Council Queensland.

The grant is for a study titled PROMISE: Patients-Reported Outcome Measures in cancer care – a hybrid effectiveness-Implementation trial to optimise Symptom control and health service Experience.

The research is being conducted by Professor Penelope Webb from the QIMR Berghofer Medical Research Institute and Gold Coast Health is one of three study sites in Queensland. Queensland University of Technology and the University of Queensland are also partners in the study.

PROMISE involves evaluation of the implementation and effectiveness of using electronic patient-reported outcome measures (e-PROM) in routine cancer care to improve patient outcomes.

It is hypothesised that compared to usual care, patients randomised to use an e-PROM tool will have fewer unplanned hospital presentations/admissions and report better health-related quality of life and greater satisfaction with their care and that the e-PROM tool will be cost-effective compared to usual care.



### INTERESTED IN THE PROMISE STUDY?

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### LEARN MORE ABOUT ONCOLOGY RESEARCH

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## CARDIOLOGISTS HAVE THEIR ‘FINGER ON THE PULSE’ OF RESEARCH

Our cardiology research includes both hospital and community health-based projects. This involves acute and sub-acute care, clinical measurements, and evaluation of diagnostic and interventional services.

Studies conducted during 2019 were pioneered through cardiologists Professor Rohan Jayasinghe, Professor Laurie Howes, Professor Jonathan Chan, Assoc/Professor Kuljit Singh, Dr Robert Park and Dr Atifur Rahman with support of the clinical trials nurses.

Research projects included collaborative projects with Griffith, Bond and Southern Cross universities and the University of Adelaide.

The Cardiology Research group is particularly strong in clinical trials, with the Cardiology Clinical Trials Unit coordinating both investigator-driven and commercial studies.

Brian Tant was a participant in a multi-national study to compare the effectiveness of the combination of two medicines, sacubitril-valsartan to valsartan only, in patients with heart failure.

“I have been privileged to participate in the Emperor trial at the cardiology research department at Gold Coast University Hospital. I have been astounded by the care and professionalism of all staff from the front desk to the head of research, Professor Howes. I believe in this research and the incredible team which will bring benefits to all those with cardiovascular problems in the future. I have nothing but love and respect for this great team,” Mr Tant said.

## The potential for gout medicine to assist in the medical management of heart attack patients

Associate Professor Kuljit Singh, a coronary and valvular interventional cardiologist, is the Gold Coast Health primary investigator of the Colchicine for Coronary Plaque Modification in Acute Coronary Syndrome study, referred to as the COCOMO study.

This multicentre national study is funded through an NHMRC grant, led by Dr Peter Psaltis from the South Australian Health and Medical Research Institute.

The phase 2, double-blind, placebo-controlled randomised study evaluates the effect of colchicine, a medicine used in the management of gout, on coronary atherosclerotic disease burden.

The burden is assessed by optical coherence tomography at baseline and following 12 months of treatment in participants with coronary artery disease who have presented with a heart attack (an acute coronary syndrome due to non-ST-elevation myocardial infarction, NSTEMI).

The outcomes from this trial will be used to inform the future management of patients who suffered from a heart attack.

The trial is making a difference to participants.

“It was a pleasure to be part of such a talented and friendly team. I really enjoyed the experience and dare I say, look forward to being in hospital again to see you all,” one participant wrote.



### Informing the future management of patients with heart failure

Professor Laurie Howes is the Gold Coast Health investigator for the Prospective Comparison of Angiotensin Receptor Neprilysin Inhibitor With Angiotensin Receptor Blocker Global Outcomes in HFpEF, abbreviated as the PARAGON-HF study. The outcomes from this study will inform future research on medicine management of patients with heart failure.



## PALLIATIVE CARE PUTS RESULTS INTO PRACTICE

A commitment to delivering the best possible care to patients and their families underpins the ethos of the Supportive and Specialist Palliative Care Research Team. Projects led by our clinicians in 2019 included Phase 4 Pharmacovigilance trials and the PEARL trial, a randomised phase 3 trial of palliative care early in advanced lung cancers, led by Professor Linda Moleskin from Peter McCallum Cancer Centre.

This multi-centre, international trial is a collaboration between the Australian Lung Cancer Trials Group, Palliative Care Clinical Studies Collaborative and NHMRC Clinical Trials Centre. It will evaluate whether early referral to palliative care improves health-related quality of life, overall survival and use of health care resources in patients with recently diagnosed, advanced thoracic malignancies.

The team is also investing in research into the use of subcutaneous patient controlled analgesia (PCA) in a palliative care unit, deprescribing, community access to palliative care medications, over-treatment at the end of life, and the use of local telehealth services to treat patients at home.



### INTERESTED IN PALLIATIVE CARE RESEARCH?

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## MEDICINAL CANNABINOIDS ON TRIAL

Palliative Care is working in collaboration with the Mater Research Institute and University of Queensland on a world-first randomised blinded placebo controlled clinical trial, to rigorously evaluate the efficacy, safety and acceptability of medicinal cannabinoids for symptom relief in advanced cancer patients receiving palliative care. This research is funded by the Medical Research Future Fund. The trial commenced in March 2019.

The trial is testing several combinations of medicinal cannabinoids to see which symptoms can be targeted and which variety of cannabinoids provide the most effective symptom relief for more than 200 terminally ill south-east Queensland patients.

Information from this study is urgently required to inform future prescribing practices, research and health policy.

Professor Janet Hardy, research team leader from Mater Research Institute said many patients who came to the clinic asked for cannabis, due to the public perception around its beneficial effects.

**“This is the first trial with a holistic patient approach, trying to address all of the symptoms to see if we can reduce the burden.”**

- Professor Janet Hardy, Research Team Leader

# STREAMLINED APPROVAL PROCESS PAYING OFF

Research is conducted within Gold Coast Health only after it has been reviewed through the Research Ethics and Governance pathway implemented by Queensland Health, which considers the scientific quality, ethical acceptability and safety of the research. This review includes both ethics and site-specific approvals processes, ensures compliance with a broad range of regulations, legislation and codes of good practice to achieve and continuously improve research quality across all aspects of healthcare by:

- Safeguarding the dignity, rights, safety and well-being of participants
- Protecting and promoting the integrity of research and investigators
- Enhancing ethical and scientific quality
- Minimising risk
- Monitoring practice and performance and
- Promoting good practice.

Ethics approval and research governance authorisation are two separate processes, undertaken sequentially. However, at Gold Coast Health we saw an opportunity to streamline the process.

When a researcher submits an application to the Research Office, the project is allocated to a research ethics and governance officer (REGO) who facilitates the review of the project through both ethics and research governance, and who provides the applicant with feedback, advice and support through the approval process.

This has removed the duplication of administrative review by both the Human Research Ethics Administrator and the Research Governance Officer, provides research governance information to the applicant within days of their HREC submission, minimises uncertainty about site specific requirements and most importantly, provides the researcher with one point of contact for the entire ethics and governance review.

This innovation in process has proved very popular with researchers because there is now a collaborative approach to the approval and authorisation of a research project, resulting in faster approvals and therefore, start-up times.

“The new parallel review process brought in by research ethics has been a fantastic initiative. It has simplified the ethics and research governance processes and I have found it much easier to have a single point of contact who can answer questions. I have noticed that as the reviewer processes the application, they are able to flag something that may have been overlooked in my Site Specific Assessment Application so that I am able to address this straight away, rather than waiting until the ethics application has been approved. I think the study approvals seem to be coming through faster. I like that I can help keep the research office review processes simplified from my end by submitting my applications in parallel. Hopefully, it frees up some of their time so that they can continue to assist other emerging researchers, like me, develop and submit their important work.”

- Therese Gardiner, Clinical Nurse Research, Nursing and Midwifery and Education

# IMPROVING HEALTH CARE THROUGH INNOVATION

EFFICIENCY, QUALITY,  
SUSTAINABILITY, SAFETY  
AND AFFORDABILITY

The Centre for Health Innovation (CHI), initially a joint venture between Gold Coast Health and Griffith University, has shaped the future of health care by leading and supporting multiple project initiatives to develop contemporary and innovative practices to improve clinical outcomes. This centre is now part of the Transformation and Digital Division.

The projects that have been undertaken by CHI fall under three distinctive pillars: Reform, a health service challenge requiring time-limited attention or support; Redesign, more substantive projects which reconsider organisation processes or ways of working across a service area; Innovation, projects which look more broadly at changing the way care is delivered to address current and future health care needs.

The project team comprises researchers and professionals from a range of specialist areas who employ design-thinking principles, and work with others in the organisation, to create innovative, integrated patient-focused models of care and systems.

CHI has been demonstrating these design principles by leading the development of the Gold Coast Integrated Care Allied and a shared governance 'proof of concept' initiative.





## **Integrated Care Alliance – delivering seamless coordinated care for patients in the community**

The Integrated Care Alliance, led by Director Christina Wicker, is a partnership between Gold Coast Health and Gold Coast Primary Health Network to deliver more seamless coordinated care for patients in the community through the Gold Coast Integrated Care program.

Evolving over time the program is now largely focused on supporting people with chronic disease and assisting them to remain in the community as much as possible.

Delivery of the chronic disease program was always intended as a mix of face-to-face and virtual care models to be assimilated over time. However, the onset and impacts of COVID-19 provided an opportunity to expedite and learn from some of these planned innovations.

To inform the next steps for a virtual model of care, the Centre for Health Innovation (CHI) has conducted research which looks at activity and performance data and the experiences of both patients and staff in the delivery of a virtual care plan.

Learnings from the experience of COVID-19 include adapting to the nature of communications online and the types of support required for patients and staff.

**“It might have been opportunistic research but it has been quite positive – there have been some really practical recommendations as to how the program can now evolve into the future.”**

– Rachael Smithson, Research Director,  
Centre for Health Innovation.

An evaluation of the Gold Coast Integrated Care Alliance is about fine tuning it and making sure it is working and evolving over time. Assessing immediate and long-term outcomes, Key Performance Indicator (KPIs) monitoring and patient experience will serve to benchmark the Gold Coast Integrated Care Alliance against other integrated care programs around the world. From a research perspective, it will be about sharing lessons learned, publishing, presenting and partnering with international networks and learning from them as well.

## **Shared Governance – empowering units to be accountable in their decision-making**

The Shared Governance project grants increased financial and HR delegation for senior clinical leaders and empowering them to take greater responsibility and accountability for decisions that affect their unit or department.

Two clinical departments at Gold Coast Health has been part of a ‘proof of concept’ initiative designed around shared governance or earned autonomy. If successful, the initiative will be extended to other departments within Gold Coast Health.

Supported by the CHI project team, orthopaedics was the first clinical department to test the concept working with a set of KPIs captured in a Memorandum of Understanding between the health service and the operational unit. The outcomes have been positive. Through a series of KPIs, new approaches to work have been identified and decisions are made within their own unit with the inclusion of people in the team.

In parallel, a capability framework self-assessment tool is being tested where participating staff and teams continually measure themselves against five core capabilities:

1. Safety and quality
2. People and culture
3. Finance and assets
4. Strategy and planning
5. Governance

Drawing on an evaluation and lessons learned with the orthopaedics pilot, the Centre for Health Innovation has been able to support the Shared Governance initiative within the Intensive Care Unit.

CHI Research Director Rachael Smithson said: “We can now identify the key components of what shared governance is and what is important to the success of the initiative.”

If the ‘proof of concept’ is deemed successful, barriers to success will be identified and the centre will track lessons learned to help teams to strengthen mutual understanding of the requirements to devolve accountability, what the indicators of success are and how they will be measured.

Shared governance in orthopaedics and ICU are no longer projects externally driven by CHI, but are now priority areas internally driven.

# MAGNET RECOGNITION –ULTIMATE BENCHMARK IN CLINICAL CARE



Nursing and Midwifery at Gold Coast Health has been internationally recognised through the US-based Magnet Recognition Program which is the highest national honour for nursing excellence and provides consumers with the ultimate benchmark for measuring quality of care.

Whilst primarily a nursing and midwifery program, Gold Coast Health has taken an interprofessional whole-of-hospital approach to the program, becoming the first full health service in Australia to receive Magnet recognition.

In addressing the elements of research, evidence-based practice and innovation, our organisation provided 78 exemplars related to a nursing intervention that provided quality improvement directly related to care with improved patient outcomes.

Professor of Nursing and Midwifery Dr Anita Bamford-Wade has led the journey to Magnet recognition over four years with the support and efforts of all disciplines of the health service and 300 Magnet ambassadors (Gold Coast Health staff and managers), to reinforce that Magnet is what we do every day.

“It is something I have always believed in and seen as a great vehicle for providing a structure to move an organisation forward in terms of evidence-based practice, person-centred care, professional development, career aspirations for nurses and a safe working environment for all.”

– Dr Anita Bamford-Wade,  
Professor of Nursing and Midwifery



# CLOSING STATEMENT

FROM THE CHIEF EXECUTIVE AND  
THE CHAIR OF THE RESEARCH COMMITTEE

The 2020 Research Snapshot has three aims. Firstly, it introduces you to the wide range of research activity being undertaken across our health service. What is also clear from the Research Snapshot's content, is that embedding research and evidence-based practice into health service delivery and patient care is helping our clinicians to deliver world-class care – a key objective of Gold Coast Health's strategic plan. Finally, it is apparent that our Always Care philosophy is front-of-mind during the design and implementation of research.

The approaches being undertaken to 'Build research capacity' continue to evolve and, in the case of the Emerging Researchers Alliance, there is clear evidence of staff using their own initiative to develop a Community of Practice and create a peer network for novice researchers. In addition, the opportunity provided through the Study, Education and Research Trust account to engage research development staff across the organisation to build research capacity has positively increased staff awareness of the research opportunities available to them and also helped the clinical areas to focus on key research strengths. It is pleasing to see that the collaboration between GCH and the Institute for Evidence-Based Healthcare at Bond University continues, with the number of GCH staff trained in evidence-based practice increasing each year.

Our ongoing commitment to the Queensland and Northern New South Wales Regional Health Collaborative ensures we are meeting our goal of 'Strengthening partnerships'. This collaboration is a key pillar in our ambition to drive future-focused-change through forming strong local, national and international relationships that build healthier communities through research, education and innovation in health services. Our research groups and collaboratives continue to evolve and mature, demonstrating that our clinician researchers understand the value of working collaboratively with each other and our partners to support the research enterprise. Front of mind in this process is the voice of the consumer bringing us back to our Always Care philosophy.

The challenge of 'Embedding research in health services and systems' is clearly being achieved both within the health service and externally within the community. Patients and their carers are included in our research from the design stage through



to delivering the outputs of research. Further, researchers are delivering on projects that optimise patient care by training clinicians in new interventions, using research to validate clinical guidelines, evaluate new service assessment pathways and, most importantly, to empower patients and their families to be engaged with the care that they receive. There are a range of opportunities for consumers to be involved in research and the Consumer Advisory Group are very focused on making this happen.

Gold Coast Health is 'Establishing a sustainable research culture' through building research infrastructure, reducing barriers to streamlining research and using research to inform and evaluate contemporary and innovative clinical practices. These qualities are reflected through our investment in a fully functioning Clinical Trials Service that has seen the expansion of clinical trials into new areas. They are also reflected through the Gold Coast Integrated Care Alliance established to deliver seamless coordinated care for patients in the community. In addition, receiving Magnet Recognition for our organisation as a whole provides consumers with the ultimate benchmark for measuring quality of care and ensures our staff incorporate the elements of research, evidence-based practice and innovation in the delivery of clinical care.

With the publication of the new 2020-2024 Strategic Plan to guide our organisation in delivering the best health outcomes in Australia and an aligned research strategy and roadmap enabling this to happen, Gold Coast Health is progressing in its goal to deliver world-class care – always.

We would like to thank all our staff, consumers and partners who are engaging in research at different levels and in different ways to improve the care we provide. The future is bright for research at Gold Coast Health.



**Ron Calvert**

CHIEF EXECUTIVE

**Helen Chenery**

CHAIR OF THE RESEARCH  
COMMITTEE



# ACKNOWLEDGEMENTS

This document was prepared by Jan Wayland (Senior Research Support Officer), Rowena Smith (Communications Officer – Clinical Governance, Education and Research), Dr Greta Ridley (Director of Research), Laura Strange (Graphic Designer/Multimedia Coordinator, Strategic Communication and Engagement) in collaboration with the people featured.

We would like to thank all of the staff and consumers who gave up their time to contribute to the writing of this report.



