

Research Annual Report 2013-2014

GOLD COAST UNIVERSITY HOSPITAL

EMERGENCY

2013 - 2014 at a glance

156

HREC applications

135

Active projects

17 million dollars

Research Grants *

230 thousand dollars

Hospital Foundation
Grants/Collaborative
Grants

283

Journal articles
published

88

Conference
presentations

* This amount also includes grants received by GCHHS staff in collaboration with others and where GCHHS is not the administrating institution.

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.



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Message from the Chief Executive

Mr Ron Calvert

We have made great progress on research since our GCHHS Board was established: new Chairs in Medicine, Orthopaedic Surgery, Infectious Disease, Acute and Complex Nursing, Allied Health, Care of the Elderly and Emergency Care to name but a few. We are determined to maximise the benefits of our relationships with our partner universities and we are now looking forward to exploiting the opportunities afforded by our stunning location and infrastructure, with \$2 billion of investment now showing in the buildings that we've opened in the last three years.

We have relationships with Griffith, Bond and Southern Cross Universities, with Bond partnership working taking place mainly on the Robina site and Griffith mainly on the GCUH site.

We now have to develop a Research Strategy to take us beyond these early steps, to ensure that our acute and community sites develop to their maximum potential.

Over the next two or three years, as we develop, refine and implement our new research strategy we shall see many benefits for our patients – in this period we shall also ensure that we plan to make the most of the opportunities afforded by the Commonwealth Games, in 2018: the athletes village is adjacent to the Griffith-GCUH campus and the potential exists, in the post Games period, to establish a Health Knowledge Technology park as an extension to our current precinct. By the time we reach that point I hope to be able to look back on this period and recognise that firm foundations were laid for a tremendous



track record of research and development to be established across the whole spectrum of our work, but particularly in the areas highlighted in our strategic plans for R&D. What follows in these pages is a snapshot of the effort we are making now to pave the way for the significant progress we expect to make in the years to come. I hope you enjoy reading about the work undertaken and feel inspired to take the vision we have for the future and help bring it about in your own field, whatever that may be.



Message from the Chair of the Research & Education Committee

Professor Allan Cripps

As a member of the Board of Governance for the Gold Coast Hospital and Health Service, it is with great enthusiasm that I chair the Research Committee of the Board. The last 18 months (2013 – 14) have shown unprecedented growth and opportunity for our Gold Coast Research Community.

Challenged with building long-term collaborations in research, education and training programs the Committee welcomed the appointment of the Senior Director of Research to the Gold Coast Hospital and Health Service in January 2014. This appointment coincided with an external review of research to guide us in developing a research strategy for Gold Coast Health. A key goal of the committee is to give research visibility, celebrate our research successes, embed a research culture throughout the organisation and improve clinical outcomes by translating research findings into best practice. While our Gold Coast Health research collaborative is relatively young, we are in a fortunate position to enable the sharing of expertise from our partnering Universities - Griffith, Bond and Southern Cross.

We have a clear vision to enhance clinical health service delivery founded on sustainable and trusting partnerships, research enquiry and a culture of learning. Such an approach will help to position the Gold Coast Hospital and Health Service as an organisation of national and international significance.

I am delighted to share our 2013 - 14 research outcomes, staff achievements and research income highlights in the following pages of this report. As our first Gold Coast Health Research



Report this includes research outputs from January 2013 – June 2014. Gold Coast Health Research has remarkable potential, and it is significant that we measure this activity to provide a base for future monitoring of growth. I trust this will give you a good flavour of the level of activity and diversity of interests being pursued by our researchers, clinicians and academics, including their passion and commitment to achieving a common goal – developing healthy communities through research.

Research Strategy

by Associate Professor
Susan Brandis



This is the first Research Report of Gold Coast Health and represents a significant milestone in the maturation for our research community. Any report relies on a team behind the scenes. The editorial subcommittee of Dr Jasotha Sanmugarajah, Dr Rachel Wenke, Dr Doug Shelton, Amanda Noonan, Tony Matheson and Steve Morris are to be commended on this production.

As the inaugural Director of Research, it has been both a busy and exciting time in developing the Research Directorate, and progressing an active research agenda on the Gold Coast. This could only be enabled by a visionary and supportive Board and

Executive for which I am eternally grateful. The strong foundation laid by Ian Pieper (former research governance officer) Vanessa Constable and Tanya Douglass in their efforts to advance research governance is notable.

The move from the Southport Gold Coast Hospital, to the Gold Coast University Hospital in 2013 was a watershed moment, and signalled the coming of age of the Gold Coast Hospital and Health Service, including Robina Hospital, Carrara Health Service and community services. Through its evolution over recent years from a busy metropolitan healthcare service to a major tertiary health provider, Gold Coast Health has acknowledged the importance of building its research capability in tandem with its clinical capability. The professional and social interaction between us and our University and Community partners has gathered momentum, with a number of shared initiatives

In February 2014 we welcomed external reviews from Dr Connor Brophy and Professor Jeffrey Lipman to provide us with their expertise and the delivery of a ***Report of Research Infrastructure and capacity at the Gold Coast University Hospital.***

This report informed the development of the GCHHS ***Research Strategy 2014-18*** which recognises research as essential to improving patient care and health outcomes. There is a growing number of research-active staff within Gold Coast Health, both within professional streams and/or areas of clinical interest. Research is used to support the evidence base for care and integrated and adaptive clinical practice, and provides an objective and defensible basis that enables us to make decisions and develop policy. We believe that

efficient transfer and application of scientific knowledge is crucial to successfully meeting the challenge of providing contemporary health and medical services for our community.

Five key research goals have been identified to focus our efforts over the coming years:

1. Embedding research as core business;
2. Building research capacity;
3. Providing effective governance and research support;
4. Strengthening partnerships; and
5. Translating research to improve health care.

A research council has been established, and this has worked at a furious pace to ensure research is visible and effective. Under the leadership of Professor Keith Grimwood, the council has been instrumental in the collation of information for this first Research Report and in establishing a vision for the future.

Our Human Research Ethics Committee has been refreshed, and I acknowledge the contribution from previous chairs Ms Karlyn Chettleburgh and Mr Simon Langston, as well as the voluntary members of the committee. A major accomplishment has been the creation of an employed chair position, which Emeritus Professor Drew Nesdale has currently filled.

Our plans for the next year include regular research futures forums, the Gold Coast Health and Medical Research Conference in December, and the enrichment of research infrastructure on the Gold Coast. With the Commonwealth Games, and further investment into the development of the Gold Coast Health and Knowledge Precinct on the horizon, the future of research is bright.



Research Council

by Professor
Keith Grimwood



The Gold Coast University Hospital (GCUH) is the first hospital in Australia to be designated a University Hospital. As such, the Gold Coast Hospital and Health Service (GCHHS) Board and its Chief Executive expect the GCHHS to be able to deliver high-quality health care, including management of complex tertiary care cases. Importantly, this care is to be based upon research-informed education, training and clinical service. The Research Council was established earlier this year as a direct outcome of these expectations. It has been charged with providing strategic and operational advice on matters relating to research. The Council is also tasked with leading the implementation of the GCHHS Research

Strategy, helping to embed research into the organisational culture and governance, as well as monitoring research performance.

The Research Council is composed of GCHHS staff and joint appointees from across disciplines and clinical streams of medicine, allied health, nursing and midwifery. Each member was appointed following a call for expressions of interest and there is a good balance between experienced academic and clinical researchers, emerging researchers, clinicians and research staff. The first meeting was held in June and it was obvious immediately that Council members are highly motivated and skilled individuals who are passionate about health research and how this translates into novel treatments, better health services and improved health outcomes.

Since June, the Research Council has met on a monthly basis and identified several priorities needing to be addressed within a strategic and operational framework. These include disseminating the GCHHS research strategy, promoting support structures for clinician researchers within the Divisions, resourcing the Research Directorate to facilitate and streamline both human ethics and site specific approval processes, developing career pathways for clinical trials staff, and to scope the development of an educational program in research methodology and biostatistics. Many of these activities will require a close working relationship with our University partners to maximise the opportunities for collaborative research, avoid duplication and to optimise available resources. As part of a national competitive process, Council members have helped prepare a submission to the NHMRC for the GCHHS and its partner universities

to be recognised as forming an advanced health research and translation centre. They have also been involved with planning the Gold Coast Health and Medical Research Conference and have been kept busy with preparing the inaugural 2013-14 Annual Research Report.

As we look forward to 2015 and start to see real progress with the various initiatives being undertaken by the Council, I would like to

acknowledge the dedication and hard work of Associate Professor Susan Brandis, the GCHHS Senior Director of Research, the important administrative role undertaken diligently by Steve Morris and to thank the Deputy Chairs, Associate Professor Julia Crilly and Dr Chris Stapelberg, as well as all Council members for their enthusiasm, advice and support during 2014.



Human Research Ethics Committee

by Emeritus Professor
Drew Nesdale



Background

The Human Research Ethics Committee (HREC) of the Gold Coast Hospital and Health Service (GCHHS) was established to oversee the ethics of research involving staff and/or patients at the Gold Coast University Hospital (GCUH) and Robina Hospital (RH). As with other HRECs in Queensland, the GC-HREC operates according to the policies and guidelines of the National Health and Medical Research Council (NHMRC) and Queensland's Research Ethics Governance Unit (REGU). While the GC-HREC operates as a stand-alone body, it also functions cooperatively within a broad network of HRECs located at other Queensland and interstate hospitals, as well as at universities, both locally (i.e., GU, Bond) and interstate.

Purpose

The GC-HREC assesses the ethics of research related to the full array of medical disciplines (i.e., from anaesthetics to urology) as well as other medical and allied health disciplines (e.g., nursing, physiotherapy, pharmacy, etc). Of particular concern is whether participants are handled with respect and care and that they participate with voluntary and informed consent. Also critical is the assessment of the risk in the research and whether it is outweighed by the potential benefits to the participants and the community. Further, to be ethically justifiable, research needs to involve the unbiased assessment of the research question(s), using acceptable experimental and/or naturalistic methods.

Functioning

The first task in refreshing the HREC was to locate a group of individuals with experience, qualifications, and competence who could respond intelligently and sensitively to the array of projects put before them and, as well, had the energy and drive to voluntarily read and evaluate an 18 cm pile of proposals each month. In addition, these individuals had to fit with the particular categories designated by NHMRC (e.g., medical and health researchers, counsellors, lawyers, pastoral carers, and laypersons). These members have been appointed to the new HREC and all have completed a training program on human research ethics. Further, the main ethical issues to be considered in relation to projects submitted for review have been identified and tabulated so as to assist members in the reviewing process.

As the chair, I have two Deputy Chairs (Dr Greg Comadira, Professor Jennifer Fenwick) to assist in leading the review process.

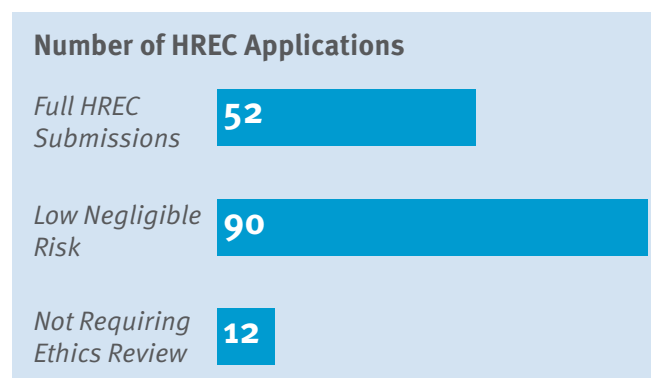
Central to the success of our HREC is the establishment of an operating method that is marked by cooperation, involvement, democracy, yet efficiency. This has been a continuing focus of the new HREC, especially given the array of projects being considered and that many require re-submissions.

To improve the efficiency of the reviewing process, the checklist of essential documents to be forwarded has been revised and simplified. In addition, we have sought to expedite the process so as to minimise the number of days a particular project spends tied up in it. One aspect of this has involved establishing an early filtering process in which projects are categorised as ‘low or negligible risk’ (LNR) hence requiring an expedited review by a subset of the committee, or ‘medium or greater risk’ hence requiring review by the full committee. The early filtering process also involves determining whether an application comprises a

‘quality audit/improvement’ project that may not require HREC review at all but may be handled at the departmental level. Speeding up the reviewing process has involved streamlining HREC minutes and the reports provided to researchers, as well as, where possible, having amended projects checked off by the HREC Chair and/or deputy Chair(s) rather than the full HREC.

Project Reviews

Below is a summary of the research projects reviewed by the GC-HREC from January 2013 – July 2014.





- Clinical Measurement Scientists
- Dieticians
- Exercise Physiologists
- Music Therapist
- Occupational Therapists
- Orthoptists
- Pharmacists
- Physiotherapists
- Podiatrists
- Psychologists
- Radiographers
- Social Workers
- Sonographers
- Speech Pathologists

Allied Health

by Dr Rachel Wenke and
Ms Jill Mahoney

The GCHHS currently employs over 600 allied health professionals (AHPs) within 14 unique clinical professions (see left), servicing a diverse range of clinical areas. Over the past year, the GCHHS allied health workforce has demonstrated both interest and innovation in research, with opportunities to strengthen the research profile and capacity of the workforce also being identified. Approximately 37 ethically approved research projects and an additional 17 projects seeking ethical approval, are currently being led by AHPs across the GCHHS. Eighty percent of these projects are in collaboration with a university, namely Griffith, exemplifying the value AHPs place on these research partnerships. From 2013-2014, a total of over \$225,000 in competitive grant funding has been attracted by GCHHS AHPs, including \$120,000 funded by the inaugural GCHHS Improvers Grant earlier this year. Eleven journal publications, a book chapter, and 31 conference presentations were also produced during this time period by AHPs.

Of the research being conducted by AHPs, a relatively high proportion is taking place within mental health, rehabilitation, and general medicine, as well as a number of projects in the area of clinical education, child and youth services, and chronic disease management. In the last 12 months, various randomised controlled trials have also been undertaken by AHPs. These have included a trial investigating the impact of an experienced physiotherapist prescribing and administering corticosteroid and local anaesthetic injections in an orthopaedic service; a nutrition led trial investigating the effectiveness of a program for improving oral intake of patients with pressure injuries, and a speech pathology led project comparing the outcomes with high

intensity voice treatment with a traditional once weekly model in clients with functional voice disorders.

Throughout 2014, all research activity has been conducted in the absence of any allied health research or conjoint research positions within the GCHHS, with AHPs drawing on expertise from collaborations with university academics and other medical and HHS staff to undertake quality research. The enthusiasm towards research within the allied health workforce has been further evidenced by a strong attendance of 40 AHPs at an inaugural research higher degree information session hosted by Griffith University in September this year.

Into the future

The commencement of the Professor of Allied Health in 2015 is highly anticipated, as it will provide an unprecedented opportunity to offer strategic leadership in the area of research activity and culture, and research capacity building for the HHS's allied health workforce. It is anticipated that allied health research fellow positions will be recruited to shortly after the Professor's commencement to further build and foster research capacity. In August 2014, a HHS wide survey was also conducted evaluating research capacity of the allied health workforce, with results currently being used to help inform future research capacity building initiatives and strategies, in line with the GCHHS Research Strategy. Further investment into building the research capacity of allied health as part of the larger HHS workforce in collaboration with university and other external partnerships, will not only benefit the profile of the GCHHS' organisation, but will more importantly serve to improve the health outcomes and wellbeing of the public now and into the future.

Medicine

by Professor
David Ellwood



It is appropriate, at the end of our first year since the move to Gold Coast University Hospital, that the Gold Coast Hospital and Health Service (GCHHS) has produced its first research report. The three pillars of any leading health service are excellence in clinical service, education and research. As such, this publication should be seen as a vital part of our 'transition to tertiary', demonstrating to those both within and without the GCHHS, that we are a research-active organisation.

It is clear from this report that there is a significant amount of research activity, which spreads across the health professions, and in some cases is multi-professional. These are important ingredients if we are to increase our research output. Funding bodies

are interested in research that is translational, and which encourages the professions to work together in scientific endeavors, as we do in clinical practice.

Although this report is a great start there are challenges for the future. The ability to attract external funding is a mark of research maturity and the HHS must look to effective tertiary sector and industry partnerships to maximise our chances of success. There is already ample opportunity for higher degrees by research across all the health professions and this is a great way to build research capacity, but those with the ability to supervise must seek out those with the potential to complete, and encourage their enrollment. Finally, it is vital that the management of research administration and ethics approval is organised in a way that facilitates the efficient completion of projects. There is a fine balance to be achieved between effective governance and the creation of a research-friendly environment, in which researchers feel assured that research is 'core business' for this HHS.

I would like to acknowledge the extraordinary work done by those who have pulled this report together in a fairly short timeframe. The contents may not completely capture everything that is going on within our service, but there is still work to be done to develop the systems for ensuring a comprehensive audit of all research activity and outputs can be done each year. This is a firm base to begin with and we can look forward to future reports which demonstrate a steady growth in activity as the HHS continues its research development.



Nursing and Midwifery

by Professor
Anita Bamford-Wade



Nursing and Midwifery research within GCHHS is well established and supported by the Professor of Nursing and Midwifery, Dr Anita Bamford-Wade and four clinical chairs, each of whom has a joint appointment between Griffith University and the GCHHS. The clinical chairs are responsible for leading programs of research as well as building research capacity at GCHHS and supervising research higher degree students.

Dr Jenny Fenwick has been Professor of Midwifery since July 2011 and has a national and international research profile in the area of women's experience of mothering in the nursery, expectations in labour and delivery and experience of caesarean section. Her leadership in research and research collaboration is evidenced by the submission and funding of nationally competitive grants totalling \$2.376 million.

Dr Andrea Marshall leads research in nutrition in critical illness and a large component of her research work is in the area of research translation. She commenced her position as Professor of Acute and Complex Care Nursing in 2012 and since her appointment has secured over \$5 million from nationally competitive grants as a chief investigator. She is also a chief investigator with the NHMRC Centre of Research Excellence in Nursing Interventions for Hospitalised Patients which received \$2.5 million in funding in 2011.

Dr Laurie Grealish is Associate Professor of Sub-acute and Aged Care Nursing and commenced in 2014. Together with Dr Carole Rushton, Research Fellow, working in the area of subacute and aged nursing. To date, this team have been involved in securing funding from the Griffith Health Institute (\$5,700) and the Gold Coast Hospital Foundation (\$16,805). In this first year, several multidisciplinary research teams have been established in the subacute area, several in collaboration with quality and safety teams.

Dr Julia Crilly is Associate Professor of Emergency Care and commenced her position in March 2014. Dr Crilly has a strong national profile in research in emergency care and has received competitive research funding of more than \$1.8 million dollars. Her research has a strong multidisciplinary focus and is collaborating with external partners Ambulance Service and Police Service in Queensland to evaluate the effectiveness of an emergency nursing in the Watchhouse. Her collaboration with the CSIRO involves undertaking linkage of large datasets and is the basis for an upcoming NHMRC project grant application.



Our Partners



Gold Coast Hospital Foundation supports the medical services delivered at Gold Coast University Hospital, Robina Hospital and all Gold Coast Health community-based health facilities. Working with the community to raise funds for medical equipment, health education programs, and research, the Foundation is committed to ensuring the best patient outcomes for our growing community.

Awarded are between \$2000-\$10,000 and focus on improving health care delivery and treatment, as well as hospital service processes. The funding can help researchers generate high quality outputs to demonstrate the required track record to secure larger external grants, advancing their career and research impact in the health sector.



Griffith Health Institute

Co-location of the impressive Gold Coast University Hospital (GCUH) and Griffith University's state-of-the-art Griffith Health Centre creates a unique partnership capable of producing sustainable improvements in health and wellbeing. Across both teaching and research, it provides an ideal environment for collaboration, access to patients for research endeavours and training purposes of health students – our future doctors, nurses and allied health professionals.

Griffith University has a long-established collaborative relationship with the Gold Coast Hospital and Health Service. This relationship is underpinned by a formal memorandum of understanding (MOU) through which the two organisations have undertaken to work closely to develop a Gold Coast Health and Knowledge Precinct of national and international significance. Through this MOU, senior executives from both organisations meet together on the Gold Coast Health Hospital Board and the Griffith University / Gold Coast Hospital Health Service Strategic Group to identify strategic research strengths, collaborative opportunities in education, research and clinical health service delivery, and to progress joint developments.

Collaboration between the two organisations is occurring on multiple levels. There are currently 181 active research activities recorded across the GCUH and Griffith University including clinical, research, staff appointments, committee appointments, student research and teaching and learning activities.

Some notable areas of collaboration include joint staff appointments; clinical service collaborations, Griffith Health's participation in the GCUH Research Council; GCUH's participation in the Gold Coast Health and Medical Research Conference, an initiative of the Griffith Health Institute

In addition, the Griffith Health Institute/ Gold Coast Hospital Foundation Collaborative Research Grants offer researchers from both institutions the opportunity to join forces, collaborate regularly and tap into the unique environment where researchers, health professionals and patients are connected. This joint venture, which is now in its 7th year, has proven to foster better connectivity, cooperation and collaboration, and external grant incomes, all vital components to accelerating advances for improved health outcomes.



Our Partners



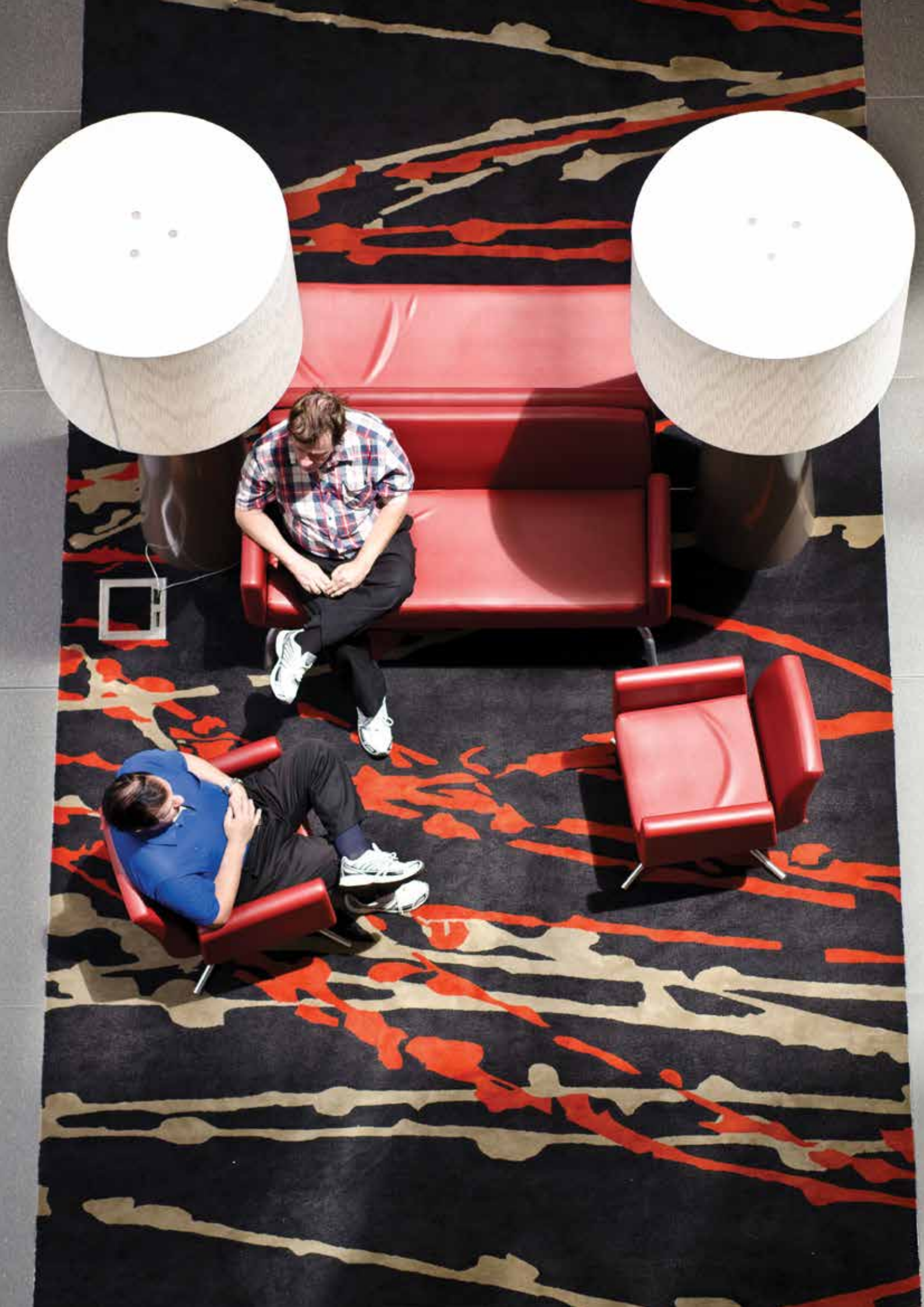
Research focusing on human health and enhancing health care systems is central to Bond University's research profile, productivity and priorities. As a relatively small university, Bond punches above its weight in terms of research investment and productivity in the fields of medicine, public health and in the emerging areas of allied health research (particularly exercise and nutrition). Much of this research is done in active partnership with the Gold Coast Health Service and the community it serves. Our research teams cover a range of current and emerging health challenges, including disease specific activity in fields such as genito-urinary cancers, multiple sclerosis, obesity, cardio-vascular disease and dementia, through to health system issues such as the problem of over-diagnosis, research waste and evidence-based health care decision making.

Bond has invested considerably over the past few years in building health research capacity amongst our own staff and amongst the health care workforce locally, through a range of well subscribed research and evidence based practice workshops. Our research infrastructure is focused and world class, so that we are well placed to collaborate with the local health system and other university researchers to address the health research challenges that impact on our local community. We are now active participants in the Gold Coast Health and Medical Research conference which provides a forum for health researchers across the region to share and collaborate around health research.

It is an exciting time to be a health researcher on the Gold Coast. We look forward to ongoing research collaboration with an eye on achieving better health care for all.



Southern Cross University expanded into the Gold Coast region with the opening of the Gold Coast-Tweed Campus in 2010. The Tweed Heads campus trains nursing, midwifery and allied health professionals and includes student led clinical health services. Southern Cross University is pleased to be developing our collaboration with the Gold Coast HHS through student clinical placements and health workforce research. The Southern Cross Business School and the School of Health and Human Sciences undertake a wide range of research activities across the full spectrum of health, pure and behavioral science, with particular strengths in health workforce development and management, nursing research and sport and exercise science. In addition, Southern Cross University covers a large regional footprint, so brings expertise in models of care to support rural and remote health, including telehealth and approaches to primary health care integration. We are excited about the expanding collaborations and maturing research activity on the Gold Coast and look forward to working closely with our partners to contribute to the culture of research excellence on the Gold Coast.



Patient Stories

Tricia Gear

Gold Coast, Australia September
2014



Tricia Gear recently took part in a trial conducted within Gold Coast University Hospital's Medical Oncology and Haematology department, which investigated the effects of MTOR inhibitors in the treatment of breast cancer. Tricia shares her story regarding her experience in participating in the trial.

It was confirmed that I had breast cancer in July 2010. I decided to have a lumpectomy and after the operation, I was advised the lymph nodes were clear but the CT Scan found a couple of tumours in my liver- now a new name to comprehend 'Metastatic Breast Cancer'. At that stage, I felt I was very lucky to have been chosen by Dr Sanmugarajah (Director of Medical Oncology) to participate in a study trial involving a new drug "Everolimus" in combination with other drugs. This began a fairly intensive regime of Chemotherapy and Herceptin and the trial drug (tablet daily). I managed to stay on this treatment for 17 months until the side effects from everything resulted in both the chemo and the trial drug treatment being stopped. Four years on, the infusion of Herceptin is still being carried out every 3 weeks. Unbeknown to myself at the time, Dr Sanmugarajah thought I only had 3 years [to live] from initial diagnosis. Thanks to the great treatment I have been receiving, especially the fact I was included in the trial (never knowing whether I was receiving the trial drug or a placebo), I believe all this has gotten me through to where I am today.

My tumours can't be seen in scans anymore – I am really happy about that. Dr Sanmugarajah, Jacob and all the nurses at the Gold Coast University Hospital are a marvellous team I cannot thank them enough. Anyone who has the opportunity of taking part in any new trial treatment – please do so.

Bruce Rutledge

Gold Coast, Australia

Aphasia research giving people their words back

Aphasia is a language difficulty that can influence the ability to understand, speak, read and write and impacts up to 10,000 Australians each year. The condition is often associated with a significant negative impact on quality of life. The GCHHS Speech Pathology Service, led by Director Melissa Lawrie, and in collaboration with Griffith University's Associate Professor Elizabeth Cardell (Head of Speech Pathology Program), are committed to researching optimal service delivery options for this population to maximise recovery. In 2014, Senior Speech Pathologist, Dr Rachel Wenke, received a Clinical Research Development Award grant from the National Stroke Foundation, to investigate the effects of treatment intensity in people with aphasia, using a combination of individual, computer and group therapy.

Ashmore resident Bruce Rutledge suffered from a stroke 18 months ago, and earlier this year received treatment for his aphasia as part of this research project.

"It's difficult to remember what I was like 18 months ago but following my treatment, I'm now becoming an active participant in life again rather than an observer," Mr Rutledge said. Mr Rutledge described that prior to his intervention he would sit alone at his local sports club, not engaging with others as a result of his aphasia. Following treatment, Mr Rutledge reported that he had increased confidence to communicate in group conversations, with friends commenting that he was becoming *"his old self"* again.

"Every day chit chat with my friends is much easier now but talking about a particular subject is still difficult and I just remember to look for the right word which is what treatment has taught me." Mr Rutledge stated.

The findings of the research project are anticipated to provide further insight into the optimal treatment dosage necessary to make meaningful changes to communication and wellbeing for people with aphasia, such as Mr Rutledge. Currently underway as an extension of this research project is the use of functional Magnetic Resonance Imaging (MRI), in collaboration with GCHHS Neuroradiologist Associate Professor Sandeep Bhuta to map brain related changes following treatment.



Research Highlights

Cancer and Blood Disorders

by Dr Jasotha Sanmugarajah

Gold Coast University Hospital is a tertiary referral center for cancer and blood disorders. Over a thousand new cancer patients are treated every year. Treatment of these patients is planned in several multi-disciplinary tumour board meetings involving physicians, surgeons, pathologist, radiologist, radiation oncologist, psychologists, specialised nurses, pharmacists and other allied health staff. We are also a major training centre for advanced training in medical oncology and haematology, junior doctors, nurses, allied health students and a major teaching hospital for two medical schools.

The Medical Oncology and Haematology department runs a large clinical trial program including multi-centre phase II and phase III trials, investigator initiated trials and several audits. Our aim in the coming year is to increase the number of clinical trials and focus on new therapies for cancer. We are also hoping to recruit a permanent full time research assistant to the research unit.



Current Clinical Trials

CatchEz

Continuous Access to advanced and metastatic renal cell Carcinoma therapy with Everolimus post pazopanib treatment.

Dr J Sanmugarajah

Foxfire

Assessment of Overall Survival of FOLFOX6m plus SIR-Spheres microspheres versus FOLFOX6m alone as first line treatment in patients with non-resectable liver metastases from primary colorectal carcinoma in a randomised clinical study.

Dr M Matos

Sirflox

Randomised comparative study of FOLFOX6m plus SIR-Spheres® microspheres versus FOLFOX6m alone as first line treatment in patients with non-resectable liver metastases from primary colorectal carcinoma

Dr M Matos

Start2

A multicenter, randomized, double-blind, placebo-controlled phase III trial of tecemotide versus placebo in subjects with completed concurrent chemo-radiotherapy for unresectable stage III non-small cell lung cancer (NSCLC).

Dr J Sanmugarajah

ENZAMET

Randomised phase 3 trial of enzalutamide in first line androgen deprivation therapy for metastatic prostate cancer.

Dr S Alan

EMR 200066_012

Phase II Randomized Double Blind Placebo Controlled Trial of Combination of Pimasertib with SAR245409 or of Pimasertib with SAR245409 Placebo in Subjects with Previously Treated Unresectable Low Grade Ovarian Cancer.

Dr M Matos

OVAR 2.21

A prospective randomized Phase III trial of carboplatin/ gemcitabine/bevacizumab vs. carboplatin/pegylated liposomal doxorubicin/bevacizumab in patients with platinum-sensitive recurrent ovarian cancer.

Dr M Matos

BRIGHTER

A Phase III Randomized, Double-Blind, Placebo-Controlled Clinical Trial of BBI608 plus Weekly Paclitaxel vs. Placebo plus Weekly Paclitaxel in Adult Patients with Advanced, Previously Treated Gastric and Gastro-Esophageal Junction Adenocarcinoma.

Dr M Matos

I3Y-MC-JPBL

A Randomized, Double-Blind, Placebo- Controlled, Phase 3 Study of Fulvestrant with or without LY2835219, a CDK4/6 Inhibitor, for Women with Hormone Receptor Positive, HER2 Negative Locally Advanced or Metastatic Breast Cancer.

Dr J Sanmugarajah

CRAD001J2301

A randomized phase III, double-blind, placebo-controlled multicenter trial of Everolimus in combination with Trastuzumab and Paclitaxel, as first line therapy in women with HER2 positive locally advanced or metastatic breast cancer.

Dr J Sanmugarajah

SABRINA BO22334

A two-stage Phase III, international, multicenter, randomized, controlled, open-label study to investigate the pharmacokinetics, efficacy & safety of rituximab SC in combination with CHOP or CVP versus rituximab IV in combination with CHOP or CVP in patients with previously untreated Follicular Lymphoma followed by maintenance treatment with either rituximab SC or rituximab IV.

Dr M Bryson



REMARC

Double blind randomized phase III study of lenalidomide (revlimid) maintenance versus placebo in responding elderly patients with DLBCL and treated with R- CHOP in first line.

Dr T Cochrane

Celgene MM-020

A Phase III, Randomized, Open-Label, 3-Arm Study to determine the efficacy and safety of lenalidomide (revlimid) plus low-dose dexamethasone when given until progressive disease or for 18 four-week cycles versus the combination of melphalan, prednisone, and thalidomide given for 12 six-week cycles in patients with previously untreated multiple myeloma Who Are Either 65 Years of Age or Older or Not Candidates for Stem Cell Transplantation.

Dr J Wellwood

CLL5

An Australasian, phase II, multicentre, randomised, dose intensification study investigating oral fludarabine, oral cyclophosphamide and i.v. rituximab (poFCivR) tolerance in previously untreated elderly (≥ 65 years old) patients with chronic lymphocytic leukaemia (CLL).

Dr J Wellwood

ALLG MM11

A Phase 3, Multicentre, Randomized, Controlled Study to Determine the Efficacy and Safety of Cyclophosphamide, Lenalidomide and Dexamethasone (CRD) versus Melphalan (200mg/m²) followed by Stem Cell Transplant in Newly Diagnosed Multiple Myeloma Subjects.

Dr J Wellwood

CLL11 (BO21004)

An open-label, multi-center, three arm randomized, phase III study to compare the efficacy and safety of RO5072759 + chlorambucil (GClb), rituximab + chlorambucil (RClb) or chlorambucil (Clb) alone in previously untreated CLL patients with comorbidities.

Dr M Bryson

ALLG NHL26

A Phase 2 Study of patients treated for relapsed Follicular Lymphoma: with Revlimid® consolidation added to Rituximab maintenance therapy in those remaining PET positive (RePLY).

Dr T Cochrane

POLLUX

Phase 3 Study Comparing Daratumumab, Lenalidomide, and Dexamethasone (DRd) vs Lenalidomide and Dexamethasone (Rd) in Subjects With Relapsed or Refractory Multiple Myeloma.

Dr Keane

Gold Coast Cardiovascular DNA Biobank – Cardiology Department

by Dr Rohan Jayasinghe

Gold Coast Cardiovascular DNA biobank is a unique molecular biology resource at the Gold Coast University Hospital. Established in 2006 with Ethics committee approval, this DNA biobank already has over 2000 genetic and epigenetic material of consenting adult donors. The biobank also has the unique data resources of clinical information and the coronary angiograms of the contributors. This resource has attracted over \$100,000 in grant money and produced several peer-reviewed publications and research higher degrees. Last year a Genome-Wide Analysis Study (GWAS)

undertaken by the DNA biobank in collaboration with Griffith University identified two unique genetic markers significantly associated with severe coronary disease as defined by angiography. This remarkable finding is in the publication pipeline currently. The Gold Coast DNA biobank is a unique resource that would establish Gold Coast University Hospital right at the forefront of cutting edge research into cardiovascular genetics. This will help discover novel genetic diagnostic tests and therapeutics in the future and enable collaboration with the world's leading centres.



Child Development and Behaviour Services

by Dr Doug Shelton

Fetal Alcohol Spectrum Disorder (FASD) is the most common non-genetic preventable cause of mental disability in the western world. Its prevalence is between 2-5% in societies, however from 2000-2013, having assessed approximately 13,000 children, the CDABS service did not diagnose a single child with FASD despite being the primary provider of child development services for a population of 520,000. This under diagnosis of the disorder is widespread across Australia. To assist with the identification of FASD, Queensland Health supported the training of seven clinicians (psychologists, speech pathologists and paediatricians) in Vancouver Canada at the end of 2013 to establish the first multidisciplinary FASD diagnostic team in Australia. The Child Developmental and Behavioural Service led by Dr Doug Shelton is currently researching the impact

of this diagnostic service in conjunction with Prof Sharon Dawe at GU and a PhD student. This research includes exploration of self-regulation frameworks for investigating core deficits, the use of mindfulness-based therapies and adaptation of the Parents Under Pressure (PUP) Program for children with associated fetal alcohol exposure. The newly developed service has currently diagnosed 16 children with FASD in the past eight months. The long term goal of the research and establishment of the centre will be to spread local training, using the Gold Coast team as a training hub to develop other centres. By spreading expertise across the country in FASD, the research will ultimately lead to better health outcomes for children with FASD.



Emergency Department

by Associate Professor
Julia Crilly

The past 12 months has seen considerable change and growth within the Gold Coast Hospital and Health Service Department of Emergency Medicine research environment. We have grown in our strategic linkages with external organisations and our collaborations with local, national and international partners is proving successful in terms of the quality and quantity of grants and publications being produced.

Dr Gerben Keijzers (ED Staff Specialist) continues to Chair the Queensland Emergency Research Collaborative, teach 4th year Medical Students from Griffith and Bond Universities (with Dr Lauren Stephenson), and was awarded his PhD in June 2014. In March 2014, Dr Julia Crilly commenced in a joint appointment position as Associate Professor Emergency Care with the GCHHS and Griffith University. Nerolie Bost is Acting Nurse Researcher supporting our part-time Research Nurse which this year has enabled several secondments from ED clinical staff and provided an opportunity to work as a researcher. Our involvement in investigator led research, for the 2013-2014 period, has resulted in grant attainment amounting to \$512,127 and 21 publications. These projects (funded and unfunded) enable a variety of persons to be involved in research and include: ED staff from GCHHS (e.g. enrolled nurses, registered nurses, registrars, consultants, pharmacists, physiotherapists), other staff from within GCHHS (e.g. ICU, orthopedics, trauma, medicine), ED staff from other hospitals (across Queensland,

Australia and Internationally), undergraduate students from Griffith University and Bond University, Masters and HDR students from Griffith University, staff from Universities (including Griffith, Queensland University of Technology, Bond, University of Queensland, James Cook University, The University of Adelaide, Karolinska Institutet, Uppsala University, Universiti Brunei Darussalam, Free University of Amsterdam and the London School of Hygiene and Tropical Medicine) and staff from other external collaborating organisations (such as the CSIRO, Queensland Ambulance Service, Queensland Police Service). Our collaborations have strengthened with the CSIRO, Griffith University, Bond University and the Queensland Ambulance Service, and extended for new and upcoming projects to include the Queensland Police Service, University of the Sunshine Coast, University of Gothenburg. Active engagement with the Queensland Emergency Medicine Research Foundation will see the establishment of a Research Support Network that encompasses 7 full time positions to further support research capacity within Queensland EDs.

Whilst our work is heavily measured in terms of outputs that pertain to grants, publications, collaborations and impact on policy and practice, for us, a key aspect imperative in our ability to produce these outcomes to the extent which we have, is the support, wisdom and advice we receive from our colleagues. For this we are grateful.



Intensive Care Unit (ICU)

by Dr Brent Richards and Professor Andrea Marshall

The last 12 months has seen significant growth in the research capacity of the Intensive Care Unit both in terms of the number of research projects, collaborations and partnerships both internal and external.

This year the Critical Care Research Group (CCRG) was established to provide operational advice regarding the research activities undertaken within the Gold Coast University Hospital Intensive Care Unit (GCUH ICU) and to review research proposals and ongoing opportunities within the GCUH ICU. The CCRG also develops strategies to promote the integration of clinical research activities throughout the GCUH ICU.

The ICU is currently actively participating in commercial, clinical and investigator led research activities.

Our collaborations include the Australian and New Zealand Intensive Care Society Clinical Trials Group (ANZICS CTG) with whom we are actively participating in 3 clinical trials: the Transfuse, Adrenal and Spice trials.

The investigator led research activities include the Rotem research being led by Dr James Winearls. This research has attracted significant grant approvals and international interest.

The ICU has this year formed a partnership with the School of Medical Science Heart Foundation Research Centre, Griffith University and currently has 3 Honours students conducting research with Dr Winearls.

Prof Andrea Marshall from the Nursing and Medical Education and Research Unit has a program of interdisciplinary research and has seven studies currently being conducted in the ICU across areas focusing on nutrition, sedation, and communication. Each of these studies aims to improve the care of critically ill patients and their families.

Of note this year the ICU is participating in a pilot project with the Griffith University School of Medicine. This project gives the opportunity for 2nd year medical students to participate in a research project of their choice in partnership with clinical units. This year the ICU has 5 medical students undertaking research projects within the ICU.

Medical Education Unit (MEU)

by Dr Christy Noble

The MEU is leading the way in significantly engaging in medical education research and contributing to the evidence base in best practice medical education through attracting research funding. This year we were successful in attracting over \$40,000 in funding for two inter- professional research projects.

The first research project, funded by HWA (Qld) (\$31500), aims to examine an interprofessional co-supervision model where pharmacists will co-supervise junior doctor prescribing. There is limited research examining interprofessional models of supervision. The overall intention of the project is to improve patient safety through improved prescribing practices, knowledge and skills deficit recognised in the National Standards.

The second project, also an interprofessional project funded by the GC Foundation 2014 (\$9950), aims to identify the facilitators and barriers to implementing the Care of the Dying pathway (CoDP). The findings from this study will inform an effective implementation plan. This is significant because, while research supports the benefits of using the CoDP, there is a risk that its implementation can result in unintended and undesirable outcomes as evidenced in the Liverpool project in the United Kingdom.

The MEU is also participating in the MD Pilot project at Griffith University. Dr Christy Noble with Dr Sid Sharma and Dr Fahid Hashem are supervising a second year medical student who is exploring the factors at the Gold Coast Hospitals which enable or hinder junior doctors engagement in research.

Principal Medical Education Officer Dr Christy Noble was recently awarded her PhD, from the University of Queensland, titled - *Becoming pharmacists: how does the pharmacy curriculum enable professional identity formation?*

Principal Medical Education Officer Lorna Davin is in the final stages of completing her PhD at the University of Queensland titled - *Unpacking Affective Learning - A Longitudinal, Qualitative Study Exploring How Junior Doctors Learn to Express Compassion in a Complex Community of Clinical Practice.*

Mental Health and Integrated Care

by Dr Chris Stapelberg

The Mental Health and Integrated Care (MHIC) Directorate comprises diverse services, ranging from mental health services, the alcohol and other drugs service (AODS) through to rehabilitation and palliative care services. This broad range of services presents a unique opportunity for research into chronic illness, integrated care themed research and research in both inpatient and outpatient settings. Furthermore, unique opportunities are presented for cross-disciplinary research and for research translation. The diversity of services in our directorate has highlighted the need for widely consultative research governance. In addition, our clinical service delivery to especially vulnerable groups of patients, such as those with terminal medical conditions and mentally ill people, have underlined the importance of consumer consultation processes as an integral component of research governance.

The Mental Health and Integrated Care Research Committee

The Mental Health and Integrated Care Research Committee was established in 2013 to report to the MHIC Executive on research governance, including site specific assessment, for all research projects within the MHIC directorate.

The operational protocols and terms of reference were based upon those existing for the Gold Coast Mental Health Research Committee, which was established in 1997. The transition to an MHIC-wide research committee saw the recruitment of several new members from the various divisions within the MHIC. The MHIC Research Committee has also undertaken a revision of its terms of reference and operational procedures in 2014 to closer align itself with HHS-wide research governance, as well as national guidelines for research governance. In addition, the research committee has retained a commitment to consumer consultation as part of its governance framework.

Research Activity

The Gold Coast Mental Health Research Committee, which reconvened as the MHIC Research Committee in 2013, maintains a register of submitted research projects. The number of research projects submitted to the MHIC research committee in 2013 and 2014, is shown in Figure 1. Historical data is presented from 2006 to 2013 as a comparison, although projects from 2006 through to 2013 originated within the division of mental health only. Figure 2 shows a breakdown of these submitted research projects by professional discipline.

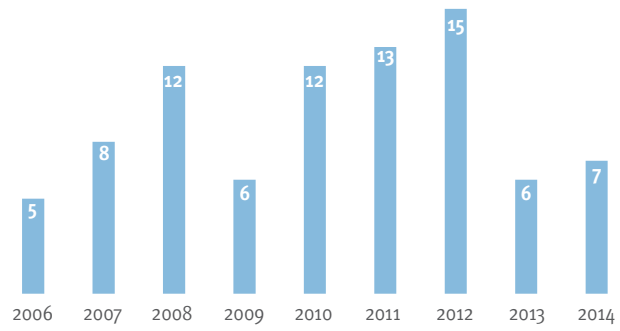


Figure 1: Number of Research Project Applications to the Mental Health Research Committee (2006-2013) and MHIC Research Committee (2014)

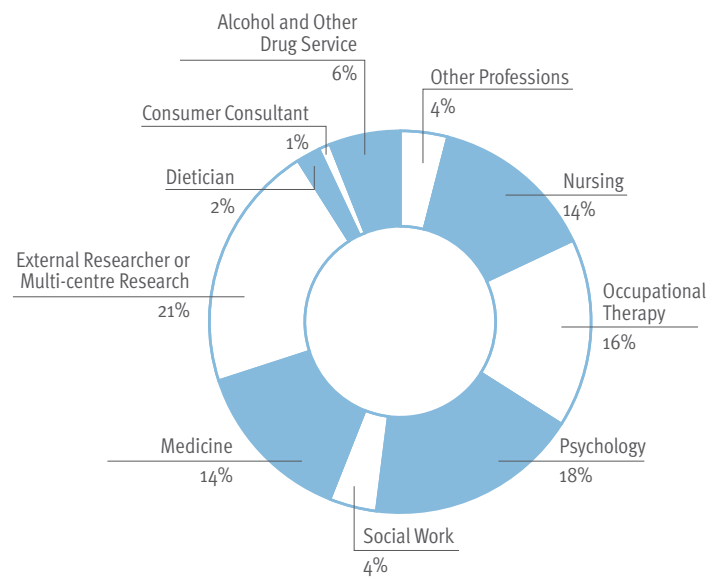


Figure 2: Number of Research Project Applications to the Mental Health Research Committee by Profession (2006-2013)

Building Research Capacity

Under the leadership of Dr Kathryn Turner, Clinical Director MHIC, Ms Karlyn Chettleburgh, General Manager MHIC and Dr Chris Stapelberg, a strategic research planning project was undertaken in 2013 to assess research capacity in the MHIC directorate and to make recommendations and formulate a roadmap towards a research strategic plan for the directorate.

This plan saw the first large-scale survey of research activity in a directorate within the Gold Coast HHS conducted in January 2014. The survey had 103 respondents from a number of professions and served to highlight challenges facing researchers in the Gold Coast MHIC Directorate and areas where further engagement would be required, especially around building research capacity within the directorate.

The MHIC research survey served to inform an MHIC-wide planning day, which was held on the 7th of February, 2014. Several of the identified research issues were “workshopped” at the planning day and input was sought on the development and implementation of strategies and goals which would culminate in a strategic research plan for the MHIC Directorate.

A research report, titled “*A Mid Year Gold Coast Mental Health and Integrated Care Report on Research*”, authored by Dr Chris Stapelberg, was distributed on the 1st of June 2014. The report was written in consultation with Associate Professor Susan Brandis, Senior Director of Research, Dr Kathryn Turner, Clinical Director MHIC and the MHIC Research Committee. Key goals and recommendations, arising from the report, are listed below, along with progress achieved to date.

MHIC Research Goals

1) Ongoing information gathering

A key goal was to gather further information about current research within the MHIC and how this can be further supported. This process is ongoing and is also being collated with information being collected at HHS level.

2) Building research capacity

A research interest group has been founded in mental health to promote the cross-fertilisation of research knowledge and to enable new researchers using a practice-based learning paradigm. Such work is also being used to establish new research streams where this is feasible. Seed funding is also being sought to assist in building research capacity.

3) Information flow and education initiatives

The MHIC research committee is undertaking to improve the framework for reporting research outcomes, such as publications, for inclusion in a research register. The mental health education committee now receives a regular update on research, and it is hoped that such feedback can be facilitated in other MHIC services.

4) Development of an MHIC Research Strategic Plan

These steps are all contributing towards the development of an MHIC Research Strategic Plan which can be successfully vertically integrated into HHS-wide research governance structures and operation.

We look forward to a productive year ahead in terms of research activity within the MHIC, as well as ongoing research collaboration. We aspire to expand our research base and build further research capacity, particularly with the advent of mandatory research activities for some medical specialist trainees as well as some medical students. We welcome closer collaboration with our University partners and together with other GCHHS directorates aspire to creating a world class service which integrates clinical excellence with research and teaching.

Student Stories

Dean Vuksanovic
Clinical Psychologist,
Cancer Services, Gold Coast
Health and PhD Candidate,
Griffith University

As part of my work in the Cancer Services, I was also privileged to be seeing patients at the Palliative Care Ward, which in 2009 was located across the road from the old Gold Coast Hospital in Southport. Seeing patients near the end of their lives was a profound and humbling experience for me at the time. I found that one of the ways I could contribute to patient care was to simply listen to their stories and validate aspects of their lives that were actually not disease related at all.

After some time, I started to explore ways that we could help patients record their life stories and special messages for their families. This eventually led us to the exciting new research on Dignity Therapy, whose primary aim is to help patients create a legacy document for their loved ones. Our initial informal trials of Dignity Therapy were quite successful and, with the support of Dr Rohan Vora and Simon Langston, I decided to commit to a PhD in this exciting area of Palliative Medicine and Psychology.

I am happy to report that my PhD journey is progressing well and is on track for completion in about 3 years time, despite the significant challenges and issues I have encountered on the way. This is largely



thanks to the valuable precious time that so many patients and their families or carers have gifted to us over the last 3 years as part of their participation in our study. This kind of work remains as humbling as ever and this, more than anything, is an indicator of being on the right track. Thank you for the opportunity to share this journey.

Adil Ryan Lahreche
Master of Health Services
Management student
(Griffith University)



Having worked many years in the Medical Imaging sector and Clinical Management in Germany, I decided to continue my studies by undertaking a health services management degree at Griffith University.

As a postgraduate student in Public Health at Griffith University, I had the chance to join the Policy Improvement Project team at the Gold Coast University Hospital prior to the move from Southport.

Several tasks were allocated to me including assisting with the review of procedures for accreditation, however the most exciting was developing a Multicultural Framework for the GCHHS.

Joining Gold Coast Health was a great opportunity to practice what I learnt at University, and also for gaining an insight into the Australian Health Care System and its services.

It gave me the chance to be part of a supportive and motivating team. Following graduation, I was given the opportunity to work within the accreditation team – a big plus for my career pathway.

In addition, I am proud to say, that I was the category three winner of the GCHHS Improvers Awards. I have been able to explore the medical tourism concept and how it may be harnessed within the GCHHS. Gold Coast Health has encouraged me to give more, learn more, and more importantly see every challenge as an opportunity.

Saman Latif

Master of Health Services
Management (advanced)
student (Griffith University)

During the last semester of studying for a Masters in Health Services Management (advanced) from Griffith University I was placed at the Research Directorate, GCUH. During my 13 weeks placement I was under the supervision of the director and worked on “Identifying research priorities/themes for the GCHHS”.

I had an extraordinary experience while working in this department. This experience has helped me a lot in progressing both professionally as well as personally. I was honoured to work in such a professional as well as friendly environment.

Being an international student, this was my first experience of working in an Australian working environment. This experience gave me the opportunity to work among professionals that gave me the motivation to work hard for my future. The difference I see in my personality both professionally as well as personally is all because of the support and co-operation that I had received from my colleagues and my workplace supervisor.

I will be always thankful to my University for providing me this opportunity.



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Research Grants

2013-2014

Researchers	Project Title	Granting Body	Total Grant
Heyland, D., Marshall, A.P., Dhaliwal, R., Cahill, N.	OPTimal Nutrition by Informing and Capacitating Family Members of Best Practices. The OPTICs Feasibility Study	Abbott Nutrition	\$39,617.00 *USD\$35,061
Fenwick J, Schmied V, Davis D, Jones E, Montana-Hoyos C, Jasper M	Mothering by design: theorizing the relationships between neonatal intensive care environments, maternal subjectivity and mothering practices	ARC Discovery	\$347,000
Bucknall, T., Chaboyer, W., Hutchinson, A., McMurray, A., Botti, M., Marshall, A., McTier, L., Gillespie, B. & Rawson, H.	Engaging patients in communication at transitions of care	The Australian Commission on Safety and Quality in Health Care	\$219,861
Grimwood K, Lambert S, Ware R, Sloots T, Nissen M, Wang D.	Burden of respiratory infection in the first 2 years of life: a birth cohort study of emerging respiratory pathogens.	Australian National Health and Medical Research Council	\$1,110,625 *
Chang A, Morris P, Robertson C, Grimwood K, Van Asperen P, Wilson A, O'Grady KA, Sloots T, Torzillo P.	Multicentre, randomised controlled trial to improve the management of exacerbations in children with bronchiectasis.	Australian National Health and Medical Research Council	\$1,148,522 *
O'Grady KA, Chang A, Grimwood K, Morris P, Smith-Vaughan H, Mulholland K, Torzillo P, Cripps A, Wood N, Revell A.	A multi-centre, double blind, randomised controlled trial to evaluate the efficacy of 10 valent- pneumococcal-Haemophilus influenzae-Protein D conjugate vaccine in reducing respiratory exacerbations in children aged >18 months with chronic suppurative lung disease.	Australian National Health and Medical Research Council	\$1,122,492 *
Wainwright CE, Grimwood K, Sly P, Tiddens H, Hugenholtz P, Massie R, Robertson C, Cooper P, Byrnes C, Vidmar S.	Clinical and psychosocial changes over late childhood and adolescence and early life determinants of long-term clinical outcomes in cystic fibrosis.	Australian National Health and Medical Research Council	\$1,135,570 *
Chang AB, Brown NJ, Mulholland EK, O'Grady KF, Grimwood K, Morris PS, Leach AJ, Upham JW, Torzillo PJ, D'Antoine H.	Centre for Research Excellence in Lung Health of Aboriginal and Torres Strait Islander Children.	Australian National Health and Medical Research Council	\$2,498,845 *
R Jayasinghe	For the purchase of a data system for the Cardiovascular DNA Bio Bank	Bond University Research Grants	\$50,000



Researchers	Project Title	Granting Body	Total Grant
Levesque RC, Brinkman F, Cantin A, Hancock RE, Winstanley C, Tucker N, Turton J, Heeb S, Stephenson A, Bell SC, Kidd T, Rainey P, Grimwood K, Aaron S, Rousseau S, Nguyen D, Yves B, Boyle B, Laroche J, Maaroufi H, Jeukens J, Nisole A, Burns J, Comeau A.	Clinical exploitation of genomics data produced by the Pseudomonas International Consortium.	Canadian Cystic Fibrosis Foundation	\$689,430 *CAD\$670,000
Cochrane	Data Manager	Cancer Council Queensland	\$5,148
Makaela Steel , Melissa Lawrie, Marissa Corcoran, Rachel Wenke, Elizabeth Cardell (GU)	Cough Reflex Testing: Developing a clinical pathway.	GCHHS Improvers Grant 2014	\$20,000
Alan Spencer, Mandy Tallott, Nicky Murphy, David Pearson, Prof. Andrea Marshall,	An examination of the levels of agreement between three measures of energy expenditure	GCHHS Improvers Grant 2014	\$50,000
Katherine O'Shea, Aleksandra Karwaj, Prof. Laurie Grealish (GCHHS/GU)	Upper limb retraining after stroke with the Saebo Arm System	GCHHS Improvers Grant 2014	\$50,000
Adil Ryan Lahreche	Develop a Business Plan that explores the potential and benefits of adopting the concept of Medical Tourism within the health service	GCHHS Improvers Grant 2014	\$20,000
Heena Kumar, Jack Cross, Trudy Teasdale. Dr Gary Grant (GU) Sohil Khan (GU)	Investigation of the impact of stewardship on antibiotic use in ICU	Gold Coast Hospital Foundation Collaborative Research Grant 2013	\$19,700
Ezekiel Tan, Belinda Beck (GU)	Whole body vibration to improve rehabilitation outcomes following osteoporosis-related hip fracture surgery: A Phase I clinical trial to examination of safety, feasibility and acceptability.	Gold Coast Hospital Foundation Collaborative Research Grant 2013	\$19,594
Vinay Garbharran, Lara Farrell (GU), Alison Waters (GU), Harry McConnell (GU), Evelin Tiralongo (GU)	Novel treatment for Paediatric OCD: Improving client access and outcomes	Gold Coast Hospital Foundation Collaborative Research Grant 2013	\$19,850



Researchers	Project Title	Granting Body	Total Grant
Jane Hancock, Andrea Marshall, Nadia Hartzenberg, Michelle Foster, Lin Francis (GU), Wendy Chaboyer (GU)	Using Change Laboratory method to transform intensive care unit nursing teamwork during hospital relocation – a pilot study	Gold Coast Hospital Foundation Collaborative Research Grant 2013	\$19,999
Bajee Krishna Sriram, Allan Cripps (GU)	Nontypeable Haemophilus Influenzae in Lung Cancer	Gold Coast Hospital Foundation Collaborative Research Grant 2014	\$19,500
Brigid Gillespie, Andrea Marshall, Teresa Withers, Teresa Gardiner	Improving safety in surgery: implementing the WHO Surgical Safety Checklist	Gold Coast Hospital Foundation Collaborative Research Grant 2014	\$18,685
Kevin Tang, Alfred Lam (GU), Ekua Weba Brenu (GU), Ali Salajegheh (GU), Vinod Gopalan (GU), Sandra Ramos (GU) Sonya Marshall-Gradisnik (GU)	A retrospective investigation of the histological and molecular features of the small intestines in chronic fatigue syndrome	Gold Coast Hospital Foundation Collaborative Research Grant 2014	\$17,777
Peter Davoren, Indu Singh (GU), Alfred Lam (GU), Abishek Santhakumar (GU)	Anthocyanins: possible antiplatelet alternative for aspirin resistant diabetic population	Gold Coast Hospital Foundation Collaborative Research Grant 2014	\$19,836
N Murphy	Nursing Rounds Study	Gold Coast Hospital Foundation Grant 2013	\$7,880
Leanne Bissett, Alan Spencer	Completing an observation study to assess the impact of combined malnutrition and surgical delay on patients admitted to GCH with hip fractures.	Gold Coast Hospital Foundation Grant 2013	\$9,631.50



Researchers	Project Title	Granting Body	Total Grant
L Hutchinson	Evaluating the innovative collaborative efforts of gr8 Start and the C.H.I.L.D.S Team to address developmental vulnerability amongst Gold Coast preschool-aged children	Gold Coast Hospital Foundation Grant 2013	\$9,786
Lorraine Bublitz	Narrative survey of renal nurses to determine how well they are prepared and skilled in addressing dialysis patients re: End of Life decision	Gold Coast Hospital Foundation Grant 2014	\$7,560.00
Laurie Grealish	A study on the older patients journey through ED. MAU and hospital	Gold Coast Hospital Foundation Grant 2014	\$9,245.00
Mark Baker	A study to determine how men in nursing engage in and motivate patients to self-care in inpatient rehabilitation	Gold Coast Hospital Foundation Grant 2014	\$2,100.00
Nerolie Bost	Study to evaluate the impact of the Qld school leavers holiday period on health care resources for GCHHS, ED & QAS	Gold Coast Hospital Foundation Grant 2014	\$9,928.90
Jasotha Sanmugarajah	A study on whether a regular exercise program is helpful in preventing joint pains that affect quality of life and cause reduced compliance with treatment.	Gold Coast Hospital Foundation Grant 2014	\$9,835.00
Devini Ameratunga	Study to implement strategies to address the emotional, sexual and social aspects involved with living with endometriosis	Gold Coast Hospital Foundation Grant 2014	\$8,875.00
Susan Moloney	High flow nasal cannula treatment for viral bronchiolitis in infants, a randomised trial to investigate a reduction in tertiary hospital admission	Gold Coast Hospital Foundation Grant 2014	\$10,000.00
Julia Crilly	Study to evaluate the impact of implementing a Watch House Emergency Nurse model of care	Gold Coast Hospital Foundation Grant 2014	\$9,300.00



Researchers	Project Title	Granting Body	Total Grant
Wendy Simpson	Study on Handover from operating theatres to ICU	Gold Coast Hospital Foundation Grant 2014	\$9,937.60
Michaela Cartner	Study to enable collaboration between Critical Care and Royal Brisbane and Women's Hospital in the effort to more effectively treat the future victims of cerebral aneurysms.	Gold Coast Hospital Foundation Grant 2014	\$9,884.00
Aden McLaughlin	Effective management and care for patients with aneurysms in the blood vessels supplying the brain	Gold Coast Hospital Foundation Grant 2014	\$10,000.00
Jessica Taylor	Study of ROTEM platelet test that can be carried out at the bedside to assess a patient's risk of bleeding and the underlying cause of the bleeding within 10 minutes	Gold Coast Hospital Foundation Grant 2014	\$9,000.00
Christy Noble	Study on End of Life Care strategy	Gold Coast Hospital Foundation Grant 2014	\$9,960.00
Ben Chen	Addressing the literature gap for Sarcopenia patients 65 years and older entering inpatient rehab	Gold Coast Hospital Foundation Grant 2014	\$9,917.53
Rohan Jaysinghe	Establishing a biobank and database for cardiovascular diseases	Gold Coast Hospital Foundation Grant 2014	\$6,000.00
Lin F, Chaboyer W, Gillespie B, Marshall A, O'Callaghan F, Morressey S, Morley N	Implementing evidence based surgical wound management clinical practice guidelines: a pilot knowledge translation study	Griffith Health Institute Centre for Health Practice Innovation	\$14,000 *
Ingham T, Camargo C, Jones B, Cormack D, Kirman J, Davies C, Crane J, Grimwood K. Whiti Te Ra	Bronchiolitis disparities among Maori and Pacific children.	Health Research Council of New Zealand	\$1,027,845 *NZD\$1,027,845

Researchers	Project Title	Granting Body	Total Grant
Melissa Lawrie, Rachel Wenke, Penny Stabler, Leah Coman, Chloe Walton, John O'Neill (ENT-GCHHS), Deborah Theodoros (UQ), Elizabeth Cardell (GU)	A comparison of standard and intensive voice therapy in functional voice disorders.	HP Research Scheme 2013	\$30,000
Jill Mahoney, Trudi Epple	Evaluating the organisational structure of a health service.	HP research Scheme 2014	\$18,000
Flenady V, Ellwood D, Sneddon A	My Baby's Movements	National Health and Medical Research Council	\$1,364,274
Homer C, Ellwood D	Birthplace Australia: a prospective cohort study	National Health and Medical Research Council	\$790,175
Fenwick J, Gamble J, Creedy D, Buist A, Sneddon A	Reducing childbirth fear: effects of a midwifery-led psycho-education intervention	National Health and Medical Research Council	\$454,000
Sullivan EA, Peek M, Knight M, Ellwood D, Jackson-Pulver L, Homer C	Australian Maternity Outcomes Surveillance System: Improving the safety and quality of maternity care	National Health and Medical Research Council	\$780,000
Flenady V, Ellwood D	Investigating causes of stillbirths: a prospective cohort study examining the use and effectiveness of a comprehensive investigation protocol	National Health and Medical Research Council	\$554,506
Rachel Wenke, Melissa Lawrie, Elizabeth Cardell	Efficient and effective subacute therapy for people with aphasia: How much therapy is enough?	National Stroke Foundation Grant 2014, Clinical Research Development Award	\$30,000
Alan Spencer, Samantha Clayton, Lauren Williams, Connie Mather, Julie Jenkins, Shelley Roberts, Zane Hopper. Prof. Andrea Marshall and Prof Laurie Grealish	ParticiPATE study.	Private Practice trust Fund	\$48,932
R Jayasinghe	For the employment of a research statistician for Cardiac research department.	Private practice trust fund	\$125,128
J Andersen	PHO Research Position	Private practice trust fund	\$140,512

Researchers	Project Title	Granting Body	Total Grant
D Shelton, Francoise Butel, Megan Free, Shelli Hastings, Kim LeGros, Erin More, Robyn Plowman.	Foetal Alcohol Spectrum Disorder	Private practice trust fund	\$22,484
R Jayasinghe	For the employment of a Research Fellow for the Gold Coast Cardiovascular DNA Bio Bank	Private practice trustfund	\$144,041
J Winearls	Ex Vivo lung perfusion	Private practice trust fund	\$80,000
A Sneddon, Wendy Chaboyer (GU)	Negative Pressure Trials	Private practice trust fund	\$20,000
M Roberts	Enhancing OCC Therapy	Private practice trust fund	\$8,671.40
T Cochrane	Research Nurse	Private practice trust fund	\$103,724
Keijzers G (PI), Crilly J, Stapelberg C, Marshall A, Baker M, Young J. (AIs)	Survey of Research amongst Health Professionals	Private practice trust fund 2014	\$8,250
Bell C	Pilot study: High Flow Nasal Cannula (HFNC) Therapy in Infants with Bronchiolitis, a Randomised Controlled Trial in Regional Emergency Departments.	Queensland Emergency Medicine Research Foundation 2013	\$69,924
Chu K (PI), Keijzers G, Furyk J, Eley R. (Co Invests).	Subarachnoid haemorrhage	Queensland Emergency Medicine Research Foundation 2013	\$268,600 *
Green D, Crilly J, Wallis M. (PIs) O'Dwyer J, Scuffham P, Enraght-Moony E, Chaboyer W	Evaluation of the Emergency Department ambulance offload nurse in Queensland	Queensland Emergency Medicine Research Foundation 2013	\$40,553
Keijzers G (PI), Kelly A, Kinnear F, (Co Invests), May C, Martin S, Ryan A, Stone R, Furyk J, Rosengren D, Thom O, Orda U, Morel D, Eley R, Thone J. (AIs)	Australia & New Zealand Dyspnoea in Emergency Department Study	Queensland Emergency Medicine Research Foundation 2014	\$96,000

Researchers	Project Title	Granting Body	Total Grant
Campbell D PI), Winearls J, Keijzers G, Bulmer A, Pearson D (Co Invests), Bryson M, Clark F, Singh I, Shuttleworth M, Wurm V (AIs).	Critical Evaluation of a Targeted Point of Care (POC) ROTEM and Multiplate Guided Coagulation and Haemostasis Management Programme in Severe Trauma and Critical Bleeding	Queensland Emergency Medicine Research Foundation 2014	\$69,263
Bell C	High Flow Nasal Cannula Treatment for viral Bronchiolitis, a randomised controlled trial	Queensland Emergency Medicine Research Foundation 2014	\$50,757
Sloots TP, Nissen MN, Lambert SL, Grimwood K.	Molecular microbiology and epidemiology of respiratory infections in children.	RCH Foundation	\$2,250,000 *
Boyle F, Flenady V, Wilson P, Horey D, Khong Y, Ellwood D	Information and communication about autopsy following stillbirth: meeting the needs of parents	Stillbirth Foundation Australia	\$55,495
Gardner G, Flenady V, Eddwood D, Wojcieszek A, Boyle F, Vlack S	My Baby's Movements: a Mobile phone tool to reduce stillbirth	Stillbirth Foundation Australia	\$33,658
Fantino E, Sly P, Grimwood K, Kappler U, Sloots T.	Immune recognition of upper airway microbiota in early life: viral – bacterial interactions	The University of Queensland Australian Infectious Disease Research Centre Clinical-Basic Science Grant	\$50,000 *
Total Grant Funds			\$17,569,683

* This amount also includes grants received by GCHHS staff in collaboration with others and where GCHHS is not the administering institution.

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O

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P

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R

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- S**
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T

Thistlethwaite JE, Forman D, Matthews LR, Rogers GD, Steketee C, Yassine T (2014) Competencies and frameworks in interprofessional education: a comparative analysis. *Academic Medicine*. 89(6), 869-875.

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Toohill, J., Fenwick, J., Gamble, J., Creedy, D. Buist, A., Turkstra, E., Ryding, E-L (2014) A randomized controlled trial of a psycho-education intervention by midwives in reducing childbirth fear in pregnant women. *Birth*. Accepted 24.8.14

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U

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V

Van Eldere J, Slack MPE, Ladhani S, Cripps AW. (2014) Non-typeable *Haemophilus influenzae*, an under-recognised pathogen. *The Lancet Infectious Diseases*. 2014(July), S1473-3099.

Vosgha H, Salajegheh A, Smith RA, Lam AK (2014) The important roles of miR-205 in normal physiology, cancers and as a potential therapeutic target. *Curr Cancer Drug Targets*. 14(7), 621-637.

W

Waldon, A., Plank, A., & Middleton, M. (2014). Analysis of online and offline head and neck image-guided radiation therapy. *Journal of Medical Imaging and Radiation Sciences*, 45(2), 79-84.

Wenke, R., Lawrie, M., Hobson, T., Comben, W., Romano, M., Ward, E., & Cardell, E. (2014). Feasibility and cost analysis of implementing high intensity aphasia clinics within a sub-acute setting. *Int J Speech Lang Pathol*, 16(3), 250-259.

Wenke, R. J., Stabler, P., Walton, C., Coman, L., Lawrie, M., O'Neill, J. Cardell, E. (2014). Is More Intensive Better? Client and Service Provider Outcomes for Intensive Versus Standard Therapy Schedules for Functional Voice Disorders. *J Voice*.

Wong, M. S., Boucek, R., Kemna, M., Rutledge, J., & Law, Y. (2014). Immune cell function assay in pediatric heart transplant recipients. *Pediatr Transplant*.

Y

Yarnall AJ, Breen DP, Duncan GW, Khoo TK, Coleman SY, Firkbank MJ, Evans JR, Rowe JB, Mollenhauer B, Kruse N, Hudson G, Chinnery PF, O'Brien JT, Robbins TW, Wesnes K, Brooks DJ, Barker RA, Burn DJ (2014) Characterizing Mild Cognitive Impairment in Incident Parkinson's Disease: The ICICLE-PD Study. *Neurology*. 82(4), 308-316.

Young MK, Nimmo GR, Cripps AW, Jones MA. (2014) Post-exposure passive immunisation for preventing measles. *Cochrane Database Syst Rev*. 2014 Apr 1, 4, CD010056.

Conference Presentations 2013

A

Allomes, T., Bassett, L. Working with parents experiencing mental health issues. Occupational Therapy Symposium. Gold Coast, Australia.

Alsaleh AN, Whiley DM, Bialasiewicz S, Lambert SB, Ware RS, Sloots TP, Grimwood K. The influence of suboptimal swab sample collection and transport for community-based studies of respiratory viruses. Australian Society for Microbiology, Adelaide, Australia.

B

Bridgland, M. Interpreting the value of music therapy with a globally impaired child: A look through the lens of the novice clinician. Australian Music Therapy Association National Conference. Melbourne, Australia.

Burston, S; Chaboyer, W; Gillespie, B; Carroll, R; The effects of a transforming care initiative on nurse-sensitive indicators in acute surgical units: a time series study. RCN, Annual International Nursing Research Conference 20-22 March 2013 Belfast.

Brandis, S. Ministry for Health, Intermediate and Long Term Care, Quality Festival, "Swimming Between the Flags – flags for safety and quality", invited International Keynote, Speaker - Singapore Ministry for Health, Singapore

Brandis, S. "Quality Improvement in Community Rehabilitation Services" invited International Keynote, Speaker; for the Singapore Ministry for Health, Intermediate and Long Term Care, Quality Festival, Singapore.

Brandis, S. "Assessing and planning safety interventions for quality care" - focus on falls, pressure injuries and nutrition. St Andrews Community Hospital, Chengri Campus, Singapore

Brandis, S. "Monitoring and assessment for quality care" – focus on outcome evaluations, development of KPIs and scoreboards. Bright Vision Community Hospital, Singapore General Hospital, Singapore

Brandis S. "GCUH – Accreditation and Safety in a New Facility" invited speaker The Institute of Hospital Engineering, Australia (IHEA), Qld branch conference.

C

Campbell, K., McMahon, E., Manafi, M., Johnson, D. The challenge of building a dietetic service to meet the needs of chronic kidney disease patients: CKD Nutrition Study. Dietetics Association of Australia, Canberra, Australia.

Cannon, S., Lawry, K., Bissett, L., Rees, R., Brudell, M. Appetite for change: Behavioural weight management program. Griffith Medical Conference, Gold Coast, Australia.

Collier, L., Craig, A., Tighe, K., Winstanley, J., Woodhouse, S Past, Present and Future of Hospital Social Work; Is Research Imperative? Social Work Symposium, Gold Coast, Australia.

Coman, L., Wenke., R., Walton., C., Stabler, P., Lawrie, M., O'Neill, J, Cardell, E., Theodoros, T. A comparison of standard and high intensity voice treatment for functional dysphonia: Perceptual

& acoustic outcomes. Poster presented at Speech Pathology Australia Conference, Gold Coast, Australia.

Coyne, E, Grafton, E., Reid, A., Marshall, A.P. Oncology nurses use of family assessment in the acute care setting. European Cancer Congress 2013, Amsterdam, 27 September – 1 October 2013.

Coyne, E., Grafton, E., Reid, A., Marshall, A.P. Oncology nurses' family assessment processes: an investigation of current practices. Cancer Nursing Society of Australia Winter Congress. 25 July 2013, Brisbane, Australia.

Cripps, A.W. Current Challenges in Mucosal Immunology. Robert Clancy Farewell, February 2013, Newcastle, Australia.

Cripps, A.W. Immune Mechanisms in the Middle Ear. 7th Extraordinary International Symposium on Recent Advances in Otitis Media, June 12-16, 2013, Stockholm, Sweden.

Cripps, A.W. Immunisation against non-typeable Haemophilus influenzae mucosal infections. 12th European Meningococcal Disease Society, September 17-19, 2013, Bad Loipersdorf, Austria.

Cripps, A.W. Impromy, inflammation and diet induced obesity. Chemmart Stay Hungry Conference, October 27-31, 2013, Sentosa, Singapore.

Crowe, N Who offers the best supervision? Advances in Clinical Supervision: Innovation and Practice. Sydney, Australia.

D

Davies, J., Williams, J., Wenke, R, Working with Dementia Populations in Group Settings: Barriers and Facilitators for Speech Pathology Practice. Poster Presented at Speech Pathology Australia Conference, Gold Coast, Australia

G

Gabrielle, V, Williams, P., Lloyd, C Giving Voice: A consumer led research project. The Mental Health Services Conference, Melbourne, Australia

Goodwin, S. Evaluation of a physiotherapy service delivered to post-acute community rehabilitation clients through a Transition Care Program. Australian Physiotherapy Association Conference, Melbourne, Australia

Goyal V, Marchant J, Masters IB, Grimwood K, Chang A. Does poor response to antibiotics in children with chronic wet cough predict the presence of bronchiectasis on a chest high resolution computerized tomography (HRCT) scan? Thoracic Society of Australia and New Zealand, Annual Scientific Meeting, Darwin, Australia

Grimwood K. 10th Intracolon diversity of commonly shared *Pseudomonas aeruginosa* strains over time. Australasian Cystic Fibrosis Conference, Auckland, New Zealand.

Grimwood K. Acute lower respiratory infections in children. International congress of Pediatrics Melbourne, Australia

Grimwood K. Advocating to advance immunisation in the developing world. International Congress of Paediatrics 2013, Melbourne, Australia

Grimwood K. Antibiotics, treatments and emerging infections in cystic fibrosis. Thoracic Society of Australia and New Zealand Annual Scientific Meeting, Darwin, Australia

H

Hare KM, Smith-Vaughan H, Grimwood K, Valery P, Leach AJ,

Morris PS, McCallum G, Cheng AC, McDonald M, Chang AB. Respiratory bacterial carriage and resistance in Australian Indigenous children with bronchiectasis from an azithromycin versus placebo randomized controlled trial (RCT). The 8th World Congress of the World Society of Pediatric Infectious Diseases, Cape Town, South Africa.

Hare KM, Smith-Vaughan H, Leach AJ, Grimwood K, Cheng AC, Chang AB. Upper and lower airway bacteriology in Australian Indigenous children with bronchiectasis. Thoracic Society of Australia and New Zealand, Annual Scientific Meeting, Darwin, Australia

Hobson, T., Wenke, R., Lawrie, M., Comben, W., Romano, M., Ward, E., Cardell, E Cost efficiency and clinical feasibility of intensive aphasia clinics in a Queensland Health setting. Poster presented at Smart Strokes Conference. Brisbane, Australia

J

Jayasinghe, Rohan, Khan AA Clinical course, management and outcomes of patients with acute stress cardiomyopathy, Annual Scientific Sessions of the Turkish Society of Cardiology – Antalya, Turkey

K

Kennedy, H Interdisciplinary Persistent Pain Management Program: a twelve month review. National Allied Health Conference, Brisbane, Australia

Kidd TJ, Knibbbs LD, Johnson G, Kattenbelt JA, Ramsay KA, Wood M, Beevers A, O'Rourke PK, Wainwright CE, Grimwood K, Sly P, Morawska L, Bell SC. Viability of *Pseudomonas aeruginosa* (Pa) in cough aerosols from adult cystic fibrosis (CF) patients. Thoracic Society of Australia and New Zealand, Annual Scientific Meeting, Darwin, Australia

L

Lenaghan, D., Bowe, P.,. Extended Scope of Physiotherapy Emergency Department. National Allied Health Conference, Brisbane, Australia

Lin, F., Marshall, A.P., Chaboyer, W., Hartzenberg, N., Hancock, J., Herve, L. Using Change Laboratory method to transform intensive care unit nursing teamwork during hospital relocation – a pilot study. Gold Coast Health and Medical Research Conference, 28-29 November 2013, Gold Coast, Australia

Lloyd, C, Williams, P., Waghorn, G. Personal Information Management Plans in Vocational Rehabilitation: assisting individuals to maintain control over their information to reduce internal and external stigma. The Mental Health Services Conference, Melbourne, Australia Lloyd, C., Machingura, T., Williams, P (August 2013) Sensory Approaches – Integrating sensory approaches into the culture of an acute psychiatric setting. Process and Outcomes: The Mental Health Services Conference, Melbourne, Australia

M

Marshall, A.P. Family centred care in the ICU: controversies and conundrums. ANZICS/ACCCN Intensive Care Annual Scientific Meeting, 17-19 October, 2013, Hobart, Australia

Marshall, A.P. Gut Decontamination and Nutrition: The Nurses' Role. 14th Annual Meeting of the Institute of Continuing Education, Australian College of Critical Care Nurses, Melbourne, 1-2 June 2013 Australia

Marshall, A.P. Pecha Kucha: Nutrition therapy in ICU. ANZICS/ACCCN Intensive Care Annual Scientific Meeting, 17-19 October, 2013, Hobart, Australia

Marshall, A.P. Strategies to assist implementation of nursing research into practice. 13th Annual Meeting of the Institute of Continuing Education, Australian College of Critical Care Nurses, Melbourne, 1-2 June, 2013. Australia

Marshall, A.P. The Knowledge Translation Continuum in ICU: Scientific Discovery to Improved Patient Outcomes. ANZICS/ACCCN Intensive Care Annual Scientific

Meeting, 17-19 October, 2013, Hobart, Australia

McDonald, J.M, Cripps, A.W., Smith, P., Smith, C., Xue, C., Golianu, B. The effects of acupuncture on mucosal immunity in perennial allergic rhinitis: a randomised, subject-and-assessor-blinded, sham-controlled clinical trial. World Federation of Acupuncture-Moxibustion Societies (WFAS), November 2-4, 2013, Sydney, Australia.

Meppem, P & Schuurs, A. Goals, quality of life and participation. Outcomes of a multidisciplinary community-based rehabilitation program for adults living with acquired brain injury, SmartStrokes, Brisbane, Australia

N

Nel, J, Nicholas F , Provision of contemporary health promotion to patients admitted to the acute wards of the Gold Coast Health Service (GCHHS), through the implementation of an innovative and cost neutral sustainable student led service, National Occupational Therapy Conference, Adelaide, Australia

Ngo, C., Thornton, R.B., Cripps, A.W., Massa, H.M. Otopathogenic biofilms in Australian urban children undergoing ventilation tube insertion. Gold Coast Health and Medical Research Conference, November 28-29, 2013, Gold Coast, Australia.

O

O'Shea, K., Nell, J, Design of a Quality Improvement Framework to Revolutionise Quality in a Busy Occupational Therapy Department. National Occupational Therapy Conference. Adelaide, Australia

O'Shea, K., Nell, J , Design of a Quality Improvement Framework to Revolutionise Quality in a Busy Occupational Therapy Department. National Allied Health Conference. Brisbane, Australia

P

Parkinson, J., Buckley, T., Gullick, J., Marshall, A.P., Alchin, D. An evaluation of peripheral vascular access site complications following cardiac angiography and percutaneous coronary intervention (PCI). Cardiac Society of Australia and New Zealand Annual Scientific Meeting, Gold Coast, 8-11 August 2013. Australia

Parkinson, J., Buckley, T., Gullick, J., Marshall, A.P., Alchin, D. An evaluation of peripheral vascular access site complications following cardiac angiography and percutaneous coronary intervention. Central Coast Local Health District Nursing and Midwifery Research and Innovation Conference. 14 May 2013 Gosford, Australia

R

Roberts, S., Chaboyer, W., Leveritt, M., Banks, M., and Desbrow, B. Nutritional intakes of patients at risk of pressure ulcers in the clinical setting. National Pressure Ulcer Advisory Panel Biennial Conference, The Woodlands, Houston, Texas USA

Rockett R, Bialasiewicz S, Lambert SB, Whiley DM, Nissen MD, Grimwood K, Sloots TP, WU, KI, MCV polyomavirus infection in the first two years of life. 5th International Conference on Polyomaviruses and human diseases, Stresa, Italy,

S

Sheridan SL, Davis CA, McCall BJ, Hull B, Selvey C, Ware RS, Grimwood K, Lambert SB. Absolute effectiveness of acellular pertussis vaccine and relative effectiveness in comparison to whole-cell vaccine during epidemic years in Queensland. Communicable Diseases Conference, Canberra, Australia

Sheridan SL, Davis CA, McCall BJ, Hull B, Selvey C, Ware RS, Grimwood K, Lambert SB. Absolute effectiveness of acellular pertussis vaccine and relative effectiveness in comparison to whole-cell vaccine during epidemic years in

Queensland. 31st annual Meeting of the European Society for Paediatric Infectious Diseases, Milan, Italy.

Sorensen, R., Fitzgerald, A., Avery, M., Booth, J, Brandis, S., Caza, B., Eljiz, K., Fisher, R., Gapp, R., Marshall, A.P., Mason, V., McPhail, V., Rice, J. Culture, Transformation and Performance: A case study examining staff sentiment in hospital relocation. Health Management Research Alliance Miniconference, Gold Coast, 22 Nov 2013 Australia

Stabler, P., Wenke, R., Coman, L., Walton, C., Lawrie, M., O'Neill, J., Cardell, E., Theodoros, D . Is more intensive better? Intensive versus standard therapy for functional dysphonia. Poster presented at National Allied Health Conference, Brisbane, Australia.

Sterling, V The implementation of a sustainable student led role in an acute setting: A review, National Allied Health Conference, Brisbane, Australia.

W

Walsh, S., Wenke, R., Lawrie, M., Hobson, T., Comben, W., Romano, M., Ward, E., Cardell, E. Clinician's Perspective of Delivering Intensive Aphasia Treatment Barriers and Facilitators. Paper Presented at Speech Pathology Australia Conference, Gold Coast Australia.

Walton, C., Wenke, R., Lawrie, M., Stabler, P., Coman, L., O'Neill, J., Theodoros, T., Cardell, E. Is more intensive better? A comparison of standard and high intensity voice treatment for functional voice disorders: Satisfaction and functional outcome measures. Paper presented at Speech Pathology Australia Conference, Gold Coast, Australia.

Wenke, R, Lawrie, M., Hobson, T., Comben, W., Romano, M., Ward, E., Cardell, E Embedding High Intensity Aphasia Clinics into Queensland Health: Cost effectiveness and clinical feasibility. Paper presented at Speech Pathology Australia Conference, Gold Coast, Australia.

West, N.P., Horn, P.L., Pyne, D.B., GebSKI, V.J., Lahtinen, S.J., Fricker, P.A., Cripps, A.W. A daily single strain and double strain probiotic supplement for respiratory and gastrointestinal health in healthy physically active individuals. 11th International Society for Exercise and Immunology Symposium, September 9-12, 2013, Newcastle, Australia.

Y

Young, M.K., Cripps A.W., Nimmo, G, & Faddy, H. Passive immunisation with normal human immunoglobulin: A review of current international practice. The Communicable Disease Control Conference, March 19-20, 2013, Canberra, Australia

Conference Presentations 2014 (as of June 30)

A

Andelkovic V, Pathamanathan S, Mahani A, Owens C, Sanmugarajah J. Early Discontinuation rates of Aromatase Inhibitors due to musculoskeletal adverse effects. Oral presentation, Medical Oncology Group Annual Sessions

B

Bloomfield, L., Woodhouse, S., Collier, L., Morley, A., Graham, G., Nelson, A., Boddy, J Past and present impacting the future. Moving to a decentralised model of social work [Poster presentation] Joint World Conference on Social Work, Education and Social Development, Melbourne, Australia.

C

Cripps, A.W. Promotion of pneumonia journal. 9th International Symposium on Pneumococci and Pneumococcal Diseases, Hyderabad, India, Mar 9-12, 2014

Cripps AW, Grimwood K,* Kyd JM, Owen S, Massa H. Vaccination against respiratory *Pseudomonas aeruginosa* infections. Ninth World Congress on Vaccines, Immunisation and Immunotherapy, April 29-30, 2014, Genova, Italy

Cripps A.W. Promotion of pneumonia journal. American Thoracic Society Annual Conference, San Diego, USA May 16-21, 2014

E

Eljiz, K., Rice, J., Fitzgerald, A., Sorensen, R., Avery, M., Booth, J., Brandis, S., Caza, B., Fisher, R., Gapp, R., Marshall, A., Mason, V., and McPhail, R. Employee satisfaction in a health care

setting: a call for fairness and equity to enhance the workplace environment. Paper presented at the 9th Biennial International Conference, Organisational Behaviour in Health Care (OBHC), Copenhagen, Denmark. 23-25 April 2014.

Eljiz, K., Gapp, R., Sorensen, R., Fitzgerald, A., Avery, M., Booth, J., Brandis, S., Caza, B., Fisher, R., Marshall, A., Mason, V., McPhail, R., and Rice, J. Moving from normal to new normal: relocating an acute public referral hospital to a Greenfield site. Paper presented at the 9th Biennial International Conference, Organisational Behaviour in Health Care (OBHC), Copenhagen, Denmark. 23-25 April 2014.

G

Goodwin, S Gold Coast Health - Embracing Disinvestment: A Multidisciplinary Approach to TCP Clients with a Total Knee Replacement. Transition Care Conference, Melbourne, Australia.

Grimwood K, Cripps AW, Kyd JM, Owen S, Massa H. Vaccination against respiratory *Pseudomonas aeruginosa* infections. The Ninth World Congress on Vaccines, Immunisation and Immunotherapy. (WCVII 2014 Italy) Genoa, Italy.

Grimwood K. Antibiotic management of chronic wet cough. Australasian Society for Infectious Diseases Annual Scientific Meeting, Adelaide, Australia

Grimwood K - Macrolides and their uses in infectious diseases: benefits and risks. 37th European

Cystic Fibrosis Conference, Gothenburg, Sweden. 2014.

I

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J

Jayasinghe R, Lalji A, Hyasat K, Prophylactic use of novel anticoagulants in prosthetic heart valves and pregnancy, Pregnancy and heart diseases Conference, Venice, Italy.

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M

Marshall, A.P., Dhaliwal, R., Weisbrodt, L., Lemieux, M., Spencer, A., Heyland, D.K. OPTimal nutrition by Informing and Capacitating family members of best practices: The OPTICS feasibility study. Poster presented at the American Society of Parenteral and Enteral Nutrition Clinical Nutrition Week, Savannah, Georgia, USA 18-21 January 2014

Marshall, A.P. Optimal nutrition and critical illness: Families as part of the team. ANZICS/ACCCN Intensive Care Annual Scientific Meeting, 9-11 October, 2014, Melbourne, Australia.



Marshall, A.P. The Hitchhikers' (Clinicians') Guide to KT. 23rd Annual Royal Brisbane and Women's Hospital Healthcare Symposium. Brisbane, Australia.

P

Parkinson, J., Buckley, T., Gullick, J., Marshall, A.P., Alchin, D. An evaluation of peripheral vascular access site complications following cardiac angiography and percutaneous coronary intervention (PCI). Presented at EuroPCR, Paris, France 20-23 May 2014.

Purcell, A., Marshall, A.P., Moyle, W., Buckley, T., King, J. EMLA cream as a primary dressing on painful chronic leg ulcers: a pilot study. Paper presented at the Australian Wound Management Association National Conference, Gold Coast, Australia

R

Roberts, S., Chaboyer, W., Leveritt, M., Banks, M. and Desbrow, B. (May, 2014) Nutritional intakes of patients at risk of pressure injury in the clinical setting. Australian Wound Management Association National Conference, Gold Coast, Australia, Poster presentation. Note: received Australian Wound Management Association National Conference KCI Best Poster Award for Translation.

S

Sheridan SL, Ware RS, Grimwood K, Lambert SB. Five cases of 19A breakthrough disease occurring January-June 2013 occurring in children with three 13-valent pneumococcal conjugate vaccine doses in Queensland, Australia. 32nd Annual Meeting of the European Society for Paediatric Infectious Diseases, Dublin, Ireland.

Sheridan S, Ware R, Grimwood K, Lambert S. Nine cases of 19A breakthrough disease in <2-year-olds vaccinated with three 13-valent pneumococcal conjugate vaccine doses in 2013 in Queensland. Public Health Association of Australia 14th National Immunisation Conference, Melbourne, Australia.

Sinclair, A. Grocery shelf stacking: Not just at the supermarket! Introduction of a functional assessment tool pre and post pulmonary rehabilitation. TSANZ Conference, Adelaide, Australia.

V

Vukanosovic, D., Dignity Therapy: An Overview. Palliative Medicine Conference, Gold Coast Australia

W

Wells, M., Bloomfield, L., Whelan, A., Young, K. We've got SWAGER (Social work and groups enhancing rehabilitation). Joint World Social Work, Education and Social development conference, Melbourne, Australia

West NP, Horn PL, Pyne DB, Gebiski VJ, Lahtinen SJ, Fricker PA, Cripps AW. Probiotics for respiratory and gastrointestinal illness in healthy individuals. Vitafoods Europe, May 6-8, 2014, Geneva, Switzerland.



“Foundation funding helps produce research results that show the possible cause of a disease. This initial seed funding allowed us to attract further funding and now be competitive on a national scale.”

Professor Sonya Marshall-Gradisnik, Griffith University

“We’ll never forget those 10 weeks in intensive care and are so grateful for the vital resuscitation equipment that was available to our twins. Our healthy baby girls, now five months old, bring joy to our hearts every day.”

First-time parents, Matthew and Emma Marshall

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