



Government of Western Australia
WA Country Health Service

WACHS Research Governance

Summaries of Approved Projects
July to December 2018

Project Summaries – July to December 2018

A research project that seeks to access a WA Health Service site, their patients, staff or data is required to obtain ethical review and approval by a WA Health Human Research Ethics Committee (HREC) or by a certified HREC under the National Mutual Acceptance Scheme (NMA). Subsequent to ethics approval, the project is required to undergo a review completed by the institution to which the project seeks to access. This is known as the research governance review or institutional review. The institution's internal review will determine whether the project can be authorised to commence at or involving that health service.

This report contains lay summaries for projects that have ethics approval from the WA Country Health Service HREC (WACHS HREC) and those that have been granted research governance approval where their ethical approval is from an alternative HREC to the WACHS HREC.

WACHS HREC Approved Projects

Project Title	RGS742 – Evaluation of the combined model haematology service in WA Country Health Service – Great Southern		
Co-ordinating Principal Investigator	Dr Kirsten Auret		
Institution	WA Country Health Service		
WACHS Region(s)	Great Southern		
Target Population	People in existing dependent or unequal relationships		
Start Date	17 August 2018	Finish Date	8 July 2021
<p>This project aims to evaluate the model of care being delivered to patients of the Regional Cancer Centre (RCC) located in Albany, approximately 400km from Perth and the nearest tertiary hospitals.</p> <p>In 2017, there was a change to the model of care from a general physician led cancer service to one led by specialists in haematology and medical oncology. The change was due to the retirement of the local general physician who had been delivering haematology and oncology care in his private rooms for over 25 years. The new model of care for haematology and medical oncology was developed based on available resources which include haematology specialists from Fiona Stanley Hospital. This model was piloted in 2017 and later audited. The audit identified an increase in demand for these services so Telehealth clinics and additional onsite consultations were introduced. An evaluation of the introduced additional services is essential to determine the suitability of this model.</p>			

Project Title	RGS977 – Clinical Yarning Education Program: Preliminary Evaluation		
Co-ordinating Principal Investigator	Dr Ivan Lin		
Institution	WA Centre for Rural Health		
WACHS Region(s)	Midwest		
Target Population	No primary participant category		
Start Date	7 August 2018	Finish Date	7 August 2021
<p>This project is a preliminary evaluation of the Clinical Yarning Education Program using mixed methods to explore the impact and processes of delivering Clinical Yarning Education to clinicians and students in Western Australia's Midwest region.</p> <p>Clinical Yarning is an education program for health care clinicians aiming to improve their skills when communicating with Aboriginal patients. The program consists of five modules and includes theory (delivered face to face or via eLearning) and practical learning activities (delivered face to face). The project also involves training WA Country Health Service Aboriginal and non-Aboriginal staff to facilitate the practical learning module so it can be delivered using local resources.</p>			

Project Title	RGS1130 – Exploring the choice to pursue rural work amongst early career doctors		
Co-ordinating Principal Investigator	Dr Denese Playford		
Institution	WA Center for Rural Health		
WACHS Region(s)	All regions		
Target Population	No primary participant category		
Start Date	29 August 2018	Finish Date	28 August 2021
<p>This project aims to assess the rationale associated with early career doctors' interest and selection of rural internships and early postgraduate rural work. More specifically, it seeks to;</p> <ol style="list-style-type: none"> 1. Ascertain the size of future recruitment pools for rural-based early career doctor jobs for the coming three year period (or to ascertain the number who intend to apply for rural work in the coming three year period); 2. Ascertain the vocational paths that interest those with rural work intentions; 3. Document the change over time of rural work intention; and 4. Explore reasons why rural intention either does or does not translate into rural work. <p>This project involves two phases; the first phase will be surveys asking early career doctors about influences associated with the selection of rural work, as well as open questions for additional discussions. The second phase will interview survey respondents to further discuss the factors that medical students and early career doctors identify as important to their career pathways.</p>			

Project Title	RGS831 – Factors affecting outcomes following unicompartmental knee replacement surgery		
Co-ordinating Principal Investigator	Dr Caitlin Chidlow		
Institution	WA Country Health Service		
WACHS Region(s)	South West		
Target Population	No primary participant category		
Start Date	28 August 2018	Finish Date	28 August 2021
<p>Total knee replacements are a major procedure and are not without risk. Unicompartmental knee replacements (UKR) may represent a cost effective alternative and also uses significantly less hospital resources. UKR also allows patients to return to daily activities faster and carrying less morbidity.</p> <p>This research will help inform surgical decision-making by providing information relevant to the Australian context, in particular by looking at outcomes specific to the Oxford Phase 3 UKR device. The data results may also help surgeons manage patient expectations by providing relevant data for specific patient subgroups as well as assist to individualise treatments. This project will compare over 300 UKRs completed at South West Health Campus over the last seven years with total knee replacements (TKR) by the same surgeon for medial compartment osteoarthritis.</p>			

Project Title	RGS1155 – How do partners support extended breastfeeding?		
Co-ordinating Principal Investigator	Dr Deborah Ireson		
Institution	Edith Cowan University		
WACHS Region(s)	South West		
Target Population	No primary participant category		
Start Date	1 November 2018	Finish Date	1 November 2021
<p>Breastfeeding can be challenging for some women in the months after childbirth, and without effective support women can easily interrupt or cease breastfeeding entirely. Families in remote or regional areas of Australia have less available professional support than urban families and much load is placed on partners/fathers and family members to provide support. Even so, many women in the South West do successfully breastfeed for extended periods, including time when returning to work.</p> <p>The aims of this project are to explore the lived experience and behaviours of the partners who have supported women to breastfeed for an extended period. Information gained will be used to inform current knowledge and guide future intervention based projects to improve education and practice development strategies to sustain healthy breastfeeding families.</p>			

Project Title	RGS695 – Evaluating the outcomes of the introduction of the Safety II clinical review program in WACHS Wheatbelt		
Co-ordinating Principal Investigator	Mr Joseph Cuthbertson		
Institution	WA Country Health Service		
WACHS Region(s)	Wheatbelt		
Target Population	No primary participant category		
Start Date	8 November 2018	Finish Date	8 November 2021
<p>The aim of this project is to evaluate the outcomes of the introduction of the Safety II clinical review program in WACHS Wheatbelt.</p> <p>The project will investigate the effectiveness of root cause analysis which identifies factors that deliver high quality care. It will also map and identify components of clinical reasoning and decision making that influence high quality patient care in Wheatbelt hospitals.</p>			

Project Title	RGS1336 – A clinical audit of pharmacotherapy in schizophrenia: WA Country Health Service Midwest area		
Co-ordinating Principal Investigator	Ms Michell Palmer		
Institution	WA Country Health Service		
WACHS Region(s)	Midwest		
Target Population	People with a cognitive impairment, an intellectual disability or a mental illness		
Start Date	27 November 2018	Finish Date	27 November 2021
<p>Schizophrenia is a chronic psychiatric condition affecting how the person interprets and interacts with the world around them. The symptoms include psychotic experiences such as hallucinations and delusions (also known as positive symptoms) and negative symptoms such as low motivation, social isolation, speech and motor difficulties, and trouble expressing emotion. The two subtypes of antipsychotics, typical and atypical have affinity and attraction to different neurological receptors which can assist in reducing the various symptoms of the illness. Typical antipsychotics are more effective in relief of positive symptoms and atypical antipsychotics have been known to reduce both positive and negative symptoms. Further understanding about the incidence of augmented medication regimes and examination of the clinical decisions around polypharmacy may assist in reassessment of the risk and benefits of this practice. This study will therefore aim to investigate the prevalence of polypharmacy in the treatment of schizophrenia in 2018 for the WACHS Midwest community. It will also evaluate the clinical rationale and current clinical practice for the medication regime which will inform on possible improvements in clinical care.</p>			

Project Title	RGS1312 – Spinal precaution adherence in a rural setting		
Co-ordinating Principal Investigator	Ms Natalie Rudling		
Institution	WA Country Health Service		
WACHS Region(s)	Great Southern		
Target Population	No primary participant category		
Start Date	27 November 2018	Finish Date	27 November 2021
<p>All WACHS great southern adult cervical spinal injured patients are treated at Albany Health Campus (AHC) unless requiring transfer to Perth. Documented practice guidelines inadequately cover all patient nursing care requirements. Patients and nurses in rural areas have less access to appropriately qualified and timely multidisciplinary support. All of which have an effect on the confidence of nursing staff when providing care to spinal injured patients. A nursing staff quality improvement spinal precaution knowledge survey of spinal injured patients revealed improvements are needed particularly with regards to nursing care. Collar care, skin integrity, and urinary tract infections are recognised areas for potential complications. Research supports the concept that patient knowledge enhances compliance and supplements patient care. The research objectives are to identify nursing and patient knowledge gaps and understand patients' experiences while being restricted with spinal precautions to improve patient comfort and enhance nursing care within AHC. The results of the study will be used to develop a staff education program and to ascertain the most effective means for patient education</p>			

Project Title	RGS1374 – The prevalence of chronic wet cough in young		
Co-ordinating Principal Investigator	Ms Pamela D'Sylva		
Institution	Perth Children's Hospital		
WACHS Region(s)	Kimberley		
Target Population	No primary participant category		
Start Date	30 November 2018	Finish Date	30 November 2021
<p>Respiratory illness is the most common reason for hospitalisation of Aboriginal children. Chronic wet cough in children is the earliest sign of chronic respiratory disease, specifically chronic suppurative lung disease that leads to irreversible lung damage. Unfortunately chronic wet cough is often normalised in Aboriginal children. Normalisation of symptoms prevents timely medical health seeking behaviour and appropriate treatment that could prevent long term lung damage. Experience and evidence suggest that chronic wet cough is highly prevalent amongst Aboriginal children in regional and remote Australia. This project aims to determine the prevalence of chronic wet cough in young Aboriginal children in two remote communities in the Kimberley.</p>			

Project Title	RGS1395 – Alternative pathway to the National Bowel Cancer Screening Program (NBCSP) for Indigenous Australians: A cluster randomized trial or implementation models		
Co-ordinating Principal Investigator	Professor Gail Garvey		
Institution	Menzies School of Health Research		
WACHS Region(s)	Great Southern, Wheatbelt and Pilbara.		
Target Population	Aboriginal people		
Start Date	17 December 2018	Finish Date	17 December 2021
<p>Indigenous Australians have significantly poorer survival outcomes after a diagnosis of bowel cancer than other Australians. They also have lower participation rates in the National Bowel Cancer Screening Program (NBCSP). A number of pilot studies conducted by state/territory cancer screening programs between 2010 and 2014 have shown that an alternative pathway via Indigenous Primary Health Care Centres (IPHCCs) may help increase Indigenous participation in the NBCSP.</p> <p>This pilot study will allow IPHCCs to distribute NBCSP kits directly to patients aged 50 to 74, helping to address many of the barriers to bowel screening. IPHCCs will be offered either; low intensity support (group A) or a high intensity support (group B) in preparing to offer the alternative pathway to patients. IPHCCs in group A will receive the same resources as those in group B with the addition of one face to face training session, access to regional training workshops and phone or email support from a Menzies project team member. The project aims to assess whether an 'Alternative Pathway' to bowel screening through IPHCCs can increase screening participation rates, and what level of support given to IPHCCs was most effective and sustainable.</p>			

Project Summaries for WACHS Research Governance, authorised to commence between July to December 2018

Project Title	RGS 2296 – South Metropolitan Pregnancy and Emotional Wellbeing Study		
Co-ordinating Principal Investigator	Professor Megan Galbally		
Institution	Murdoch University		
WACHS Region(s)	South West, Midwest and Goldfields		
Overseeing HREC	South Metropolitan Health Service HREC		
Target Population	Women who are pregnant		
Start Date	6 July 2018	Finish Date	1 January 2020

Mental illness in pregnant women is associated with poorer outcomes for their children. What is not known is how exposure in pregnancy to maternal mental illness impacts the subsequent development of children and the role treatment plays in reducing this risk. This study will be a comprehensive investigation to understand these mechanisms and modifiers to improve both women with mental illness in pregnancy and also their unborn children's outcome within southern metropolitan and country regions of WA. It will examine psychological, genetic, and hormonal factors related to pregnancy, childbirth and breast feeding, and their role in emotional wellbeing and the developing relationship between a mother and a baby. This study will build on previous work conducted initially in the Victorian Psychotropic Registry; and then further developed within the Mercy Pregnancy and Emotional Wellbeing Study. The proposal is to recruit two new samples comprising women from the South Metropolitan region of Perth and the Women and Newborn Health Service catchment area, and another sample of women living in regional, rural and remote WA regions both with a modified study design.. This project's primary aim is to examine factors that may raise or lower a new mother's risk of mental illness, support her adjustment to pregnancy and motherhood, and influence the developing relationship between her and her infant.

Project Title	RGS 739 – Allied Health Rural Generalist Education Program (AHRGEP) Evaluation		
Co-ordinating Principal Investigator	Associate Professor Caryn West		
Institution	James Cook University		
WACHS Region(s)	Kimberley		
Overseeing HREC	Townsville Hospital and Health Service HREC		
Target Population	No primary participant category		
Start Date	27 September 2018	Finish Date	31 December 2019

People in rural and remote areas face a disproportionate burden of illness and often have much poorer access to health services than their city counterparts. As a result, health professionals working in rural and remote areas often require a broader range and more unique skills in contrast to health professionals in metropolitan areas. They are often required to manage diverse and complex caseloads, with limited resources and in diverse cultural and geographical contexts. Health professionals in rural and remote areas often face challenges in relation to access to training and professional development, as well as insufficient supervision and professional isolation. The Allied Health Rural Generalist Education Program (AHRGEP) is the formal education component of the Queensland Health (QH) Allied Health Rural Generalist Pathway (AHRGP) initiative. The AHRGP initiative seeks to improve health outcomes for rural and remote communities by improving allied health service access, effectiveness and efficiency and workforce capability, sustainability, flexibility and responsiveness in rural and remote areas. The AHRGEP, offered as the 'Rural Generalist Program (RGP)', is a two-level program from entry level to proficient rural generalist practice. The aim of this project is to evaluate the implementation of the RGP. The evaluation seeks to identify successes, challenges, barriers and enablers and will make recommendations regarding implementation, viability and sustainability of the AHRGEP.

Project Title	RGS 1181 – The Australasian Resuscitation in the Sepsis Evaluation: FLUID or Vasopressors In Emergency Department Sepsis observational study		
Co-ordinating Principal Investigator	Professor Gerben Keijzers		
Institution	Gold Coast Hospital and Health Service		
WACHS Region(s)	Great Southern, South West, Goldfields and Kimberley		
Overseeing HREC	Gold Coast Hospital and Health Service HREC		
Target Population	People highly dependent on medical care who may be unable to give consent		
Start Date	15 November 2018	Finish Date	1 September 2019

The question of fluid volume in resuscitation was identified as the top priority in sepsis research in a recent editorial authored by leading sepsis experts. Guidelines and sepsis pathways recommend an initial intravenous (IV) fluid bolus of 30ml/kg isotonic crystalloid for patients with sepsis and hypotension. However, there is a lack of evidence from clinical trials to support this. Both observational data as well as randomized studies suggest harm associated with liberal use of fluids in sepsis. Since there is equipoise regarding a more liberal or restricted fluid volume resuscitation as first line treatment for sepsis-related hypotension, the researchers conducted the multicenter REstricted Fluid REsuscitation in Sepsis-associated Hypotension (REFRESH) trial. The data from REFRESH is informing the present study – ARISE FLUIDS. Within the routine care group of REFRESH clinician practice varied significantly in patients with suspected sepsis and hypotension with regards to timing, amount and type of fluids given as well as timing, route and type of vasopressor support provided. This anecdotal evidence of practice variation is further supported by an Australia and New Zealand wide survey amongst members of the Australasian College for Emergency Medicine (ACEM) in January 2018. Of the 407 respondents, 41% stated they generally complied with the Surviving Sepsis Campaign recommendations for fluid volume, and 55% stated they did not routinely do so. This present study aims to provide more insight into current practice by conducting a bi-national multi-site prospective observational study of fluid administration in (suspected) sepsis and hypotension in the Emergency Departments of Australia and New Zealand hospitals.

Project Title	RGS 584 – The SToP (See, Treat, Prevent) Skin Sores and Scabies Trial: A cluster randomised, stepped-wedge trial for skin disease control in remote Western Australia		
Co-ordinating Principal Investigator	Dr Asha Bowen		
Institution	Telethon Kids Institute		
WACHS Region(s)	Kimberley		
Overseeing HREC	Child and Adolescent Health Service HREC		
Target Population	Aboriginal people		
Start Date	2 August 2018	Finish Date	31 December 2022
<p>Skin health has been identified as one of the health priorities by communities and health services in the Kimberley. A number of healthy skin activities are currently underway. The SToP trial aims to strengthen and build on these existing practices to improve the awareness, detection, and treatment of skin infections (including impetigo, scabies, and crusted scabies) in the Kimberley. The SToP trial study will implement several activities aimed at Seeing (S), Treating (T), and Preventing (P) skin infections. The primary objective of this project is to reduce the prevalence of impetigo by 50% in school aged children between 5 and less than 10 years of age. The secondary objectives are; 1) to document the impact of reduced skin infection burden on other child health indicators. 2) To monitor antimicrobial resistance of bacterial skin pathogens with increasing cotrimoxazole use. 3) To determine the economic burden of skin infection in school aged children of remote communities and to evaluate the cost-effectiveness of the SToP activities.</p>			

Project Title	RGS 852 – The success of research implementation strategies on evidence based decision making by allied health managers: A randomised controlled trial		
Co-ordinating Principal Investigator	Dr Jenni White		
Institution	Monash University		
WACHS Region(s)	Great Southern, South West and Midwest		
Overseeing HREC	South Metropolitan Health Service HREC		
Target Population	No primary participant category		
Start Date	13 November 2018	Finish Date	31 December 2019
<p>There is a need to improve the use of research evidence in healthcare decision-making. Evidence-based' or 'evidence-informed' decision-making encompasses the complex process of considering the highest quality available evidence, in context of a broad range of information from multiple sources when delivering health services. Healthcare policy-makers and managers consider research evidence, organisational factors, available resources, political climate, community views, and context specific evidence when making resource allocation decisions. These competing interests need to be prioritised due to the current resource scarce healthcare environment. If balanced appropriately, evidence-informed decision-making can deliver the best possible health outcomes to communities in the most cost efficient manner. Together with doctors and nurses, allied health practitioners are regarded as the third pillar of health care providers in Australia. Allied health professionals comprise 18% of the total health workforce in Australia, and provide an estimated 200 million services annually; providing interventions that are vital to the functioning of an efficient and effective health system (AHPA 2013:10). However it is unclear how these resources are best allocated across the health system. This study is a cluster randomised controlled trial that aims to compare and evaluate the effectiveness of two research implementation strategies for promoting evidence-based weekend allied health resource allocation decisions by allied health managers in hospital settings.</p>			

Project Title	RGS 849 - RGS 849 – WA Trauma Training and Education Unit – Training needs analysis 2018		
Co-ordinating Principal Investigator	Ms Hannah Solomon		
Institution	WA Trauma Training and Education Unit		
Overseeing HREC	Sir Charles Gairdner and Osborne Park Health Care Group HREC		
WACHS Region(s)	Great Southern, South West, Midwest, Wheatbelt, Goldfields, Pilbara and Kimberley		
Target Population	No primary participant category		
Start Date	12 October 2018	Finish Date	8 April 2019

Trauma is a major cause of mortality and morbidity globally (WHO). It is in fact, the leading cause of death amongst people aged 44 years or younger, and the third most common cause of death among people of all ages in industrialized societies (Pfeifer, Tarkin, Rocos, & Pape, 2009). It is projected to be the leading cause of years of life lost by 2020. Trauma is further projected to be the third leading cause of mortality with over 6 million deaths by 2030 (WHO). According to the Australian Institute of Health and Welfare (2015), during 2011 - 2012, 454,031 people were hospitalised for severe injuries. Most of these injuries were the result of falls and transport accidents. Land transport accidents were reported to be the ninth leading cause of premature death in Australia in 2010 - 2012, claiming over 1200 lives. Over the years, there have been significant improvements in trauma deaths. Although trauma care may be of a relatively high standard in developed countries such as Australia, to ensure continuity of this, staff must be trained and prepared for their role in the management of trauma (Carter & Cumming, 2014). Indeed training does not finish once a trainee accomplishes the required training outcomes. Competence and performance must be demonstrated in an on - going basis in the correct setting (Barker, 2003). The purpose of this training needs analysis (TNA) is to review the current provision of trauma education across the state of Western Australia, and to assess the staff desires for future trauma training and education.

Glossary

Co-ordinating Principal Investigator

The individual who takes overall responsibility for the research project and submits the project for ethical and scientific review for multi-centre projects. They are responsible for ongoing communication with the Human Research Ethics Committee and passing on any such communications to the Principal Investigators. For single-centre research, the CPI and Principal Investigator's roles are synonymous.

Institution

The organisation that the Coordinating Principal Investigator is associated with.

WACHS Regions

Goldfields; Great Southern; Kimberley; Midwest; Pilbara; South West; Wheatbelt

Target Population:

According to Chapter 4.1 of the National Statement on Ethical Conduct in Human Research 2007, in addition to the ethical considerations pertaining to all research participants, specific issues arise in the design, conduct and ethical review of research involving the following primary participant categories:

- Women who are pregnant and the human foetus;
- Children and young people (i.e. <18 years);
- People in dependent or unequal relationships;
- People highly dependent on medical care who may be unable to give consent;
- People with a cognitive impairment, an intellectual disability or a mental illness;
- People who may be involved in illegal activities;
- Aboriginal and/or Torres Strait Islander peoples;
- People in other countries;
- People whose primary language is other than English.