



Queensland
Government

Nursing Research and Practice Development Centre

**The Prince Charles Hospital
Australian Catholic University**

ANNUAL RESEARCH REPORT 2015

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Welcome



Professor Paul Fulbrook

On behalf of The Prince Charles Hospital (TPCH) and Australian Catholic University (ACU) Nursing Research and Practice Development Centre (NRPDC), we welcome you to our 2015 annual research report.

This report provides information about the NRPDC research activities during 2015. The report includes information about our many and varied research projects and research outputs, and acknowledges our affiliated clinicians and research students. The Centre is making significant progress, and many of our research projects have now been realised in terms of publication in peer-reviewed journals and conference outputs. We look forward to continued growth over the coming years.

The NRPDC employs two part-time research fellows and one full-time research assistant. All positions are

jointly funded between TPCH and ACU. In 2015, the NRPDC facilitated five visiting researchers from ACU, who have been involved with TPCH staff on a variety of projects. Their collaboration provides support to TPCH staff with potential and ongoing research projects, and strengthens the research training environment within both organisations. Other users of the NRPDC include ACU higher degree research students, of which the large majority is nursing staff employed within the hospital. These students are supported via the NRPDC and have on-site access to their supervisors, office facilities, and research equipment.

Publication output from the NRPDC has been excellent, with many colleagues contributing to peer-reviewed publications in high quality journals. Furthermore, research undertaken under the auspices of the NRPDC has been presented internationally, nationally, as well as locally.

The NRPDC nursing research priorities are established annually and are embedded within the NRPDC Strategic Plan 2015-2017, which is negotiated jointly between TPCH and ACU. The Strategic Plan is consistent with key performance indicators identified in the Metro North Hospital and Health Service Nursing and Midwifery Strategic Plan (2013-2017), in particular within Strategic Priority 4: Research and Evidence-Based Practice.

Our main research areas are identified as pressure injury prevention, falls injury prevention, and emergency care. Several current projects cross two priority areas. Research activity has been focused within our priority areas, and has been very productive.

The NRPDC research priorities are aligned with several of the Australian Council on Healthcare Standards, most notably National Safety and Quality Health Service (NSQHS) Standard 8 (Preventing and Managing Pressure Injuries) and Standard 10 (Preventing Falls and Harm from Falls). As well, much of our research in emergency care is relevant to Standard 2 (Partnering with Consumers).

The continuing hard work of the NRPDC staff, and the collaborations formed with clinician-researchers, have contributed significantly to our ability to conduct clinically relevant research. Although most of our research has been nurse-led, we have developed productive collaborative research partnerships with several other professional disciplines and organisations.

Messages



**Clinical Associate Professor
Cherie Franks**

Director of Nursing

Nursing Services

The Prince Charles Hospital



**Professor Michelle
Campbell**

Executive Dean

Faculty of Health Sciences

**Australian Catholic
University**

It is with great pleasure that once again I present the 2015 annual report for the Nursing Research and Practice Development Centre (NRPDC) at The Prince Charles Hospital (TPCH).

The collaboration between TPCH and Australian Catholic University was established in 2010 with the opening of the NRPDC and it has continued to grow from strength to strength over the last five years.

Research is a key element of professional practice and the NRPDC offers TPCH nurses the opportunity to increase their level of knowledge by participating in its mentoring and scholarship programs, enrolling in master's and doctoral research programs and a range of research activities to advance their clinical practice and improve patient outcomes. The contribution of TPCH nursing staff to deliver evidence based care is impressive.

I remain very proud of the achievements of the Nursing Research and Practice Development Centre team led by Professor Paul Fulbrook and our staff and continue to look forward to many years of achievements ahead.

Since its establishment six years ago, the Nursing Research and Practice Development Centre at The Prince Charles Hospital (TPCH) and Australian Catholic University's (ACU) School of Nursing, Midwifery and Paramedicine within the Faculty of Health Sciences, has grown from strength to strength. I am proud to present our achievements in 2015.

Our joint collaboration in the areas of emergency care, cardiothoracic care, falls and pressure injury prevention and management, continued to advance ACU's commitment to supporting vital research. Through our partnership, a number of staff have been awarded honorary appointments as visiting researchers within the Centre, supporting our commitment to enhance the quality of health care around key societal needs.

Committed to the values of excellence, dignity, and engagement, the faculty launched a new positioning statement and values: The Faculty of Health Sciences aims to be a world leader in its field, recognised for excellence in education, research, service and community engagement in the Health Sciences, striving to promote the dignity of all and the common good. This reinforces our shared vision for research that makes a difference in the provision of health care for the most vulnerable including the Indigenous, elderly and disabled.

This annual report is testimony of our strong partnership, and I invite you to reflect on our accomplishments and prospects.

About Us

Who we are

The NRPDC was founded in 2010, to foster change through research and encourage the implementation of evidence-based practice regarding patient care. Its overall aim is to contribute to improved clinical outcomes.

The NRPDC houses a nurse-led research team whose aim is to inspire, support, and undertake quality research within the hospital. Our current research priority areas, which are established in the NRPDC Strategic Plan 2015-2017 and are aligned with nursing priorities that are identified within TPCH Nursing Strategic Plan, are:

- falls injury prevention
- pressure injury prevention
- emergency care
- cardiothoracic care

Our aims

- To undertake research and practice development that is aligned with TPCH nursing strategy.
- To undertake research and practice development that impacts on the quality of patient care and improves outcomes.
- To extend nursing research capacity and capability, and enhance the research culture within the hospital and the university.
- To assist clinicians in research activities by providing mentorship and facilitation for research development, data collection, data analysis, and dissemination.
- To provide research ethics and governance guidance.
- To provide information regarding internal and external funding sources, and assist/collaborate with research grant applications.

- To support and co-write research articles for local, national and international conferences and peer reviewed journal publications.
- To assist clinical staff to obtain adequate funds to provide time away from their substantive roles to work on research projects.
- To support nursing staff to undertake higher degree by research (HDR) studies; supervised via the NRPDC.
- To provide HDR students with supervision, a research community, and office space and facilities to work on their research.

Governance

The NRPDC is governed by a Steering Committee, which meets to agree on and monitor the strategic direction and outcomes of the centre. Its members are:

Clinical Associate Professor Cherie Franks, Director of Nursing, TPCH; **Professor Michelle Campbell**, Executive Dean, Faculty of Health Sciences, ACU; **Belinda Faulkner**, Nursing Director, Clinical Effectiveness, TPCH; **Professor Mary Courtney**, Head, National School of Nursing, Midwifery and Paramedicine, ACU; **Clinical Associate Professor Megan Lowe**, Nursing Director, Education & Workforce, TPCH; **Associate Professor Paula Schulz**, State Head (Qld), School of Nursing, Midwifery and Paramedicine, ACU & Visiting Research Fellow, NRPDC, TPCH; **Professor Paul Fulbrook**, Nursing Director, Research and Practice Development, NRPDC, TPCH & Professor of Nursing, School of Nursing, Midwifery and Paramedicine, ACU.



The Prince Charles Hospital

Personnel



Professor Paul Fulbrook RN; PhD, MSc, PGDipEduc, BSc (Hons)

Nursing Director

Paul was appointed as Professor of Nursing at ACU in late 2004. He began collaborating with TPCH in a mid-2008. This led to his establishment in a full-time jointly funded role at TPCH in mid-2009, as Nursing Director, Research and Practice Development. He has an active role in the research life of TPCH, and is a founder member of its Research Council, and a member of the Hospital Research Ethics Committee. Paul's clinical and research background is in intensive care nursing. He is well known for his critical care nursing work, has published widely in this field and spoken at many national and international conferences.



Clinical Associate Professor Melanie Jessup RN; PhD, BN (Hons)

Research Fellow

Melanie joined the NRPDC in 2013, bringing research experience from working with multi disciplinary, multi-site teams in paediatrics, emergency department and chronic respiratory illness. Her clinical background in paediatrics reflects a family-centred focus, with a particularly qualitative strength. Melanie mentors visiting researchers, supervises higher degree research students and facilitates research in the clinical setting. A key focus is developing the research program around falls: examining causes, context, culture and potential solutions, considering the experience of both the faller and the health professional. Melanie collaborates with teams researching family-centred care in cystic fibrosis, and efficacy of emergency department processes and flow.



Sandra Miles RN, RM; BN, MN (Child & Adol), PhD candidate

Research Fellow

Sandra is a part-time member of the NRPDC who also maintains a teaching and research position in the School of Nursing, Midwifery and Paramedicine at ACU. Her role at the NRPDC is to collaborate with TPCH personnel to advance research and practice in the nursing strategic priority area of pressure injury prevention. A key aim is to increase awareness of the quality activities being undertaken at the hospital in this area, through research studies and publications. Sandra is currently working on several studies relating to this research priority, including two in a co-supervisor capacity with ACU research students.



Petra Lawrence RN; BN (Hons), PhD candidate

Research Assistant

Petra is an early career researcher and works at the NRPDC on a part time basis. Her current projects involve nurse's knowledge of pressure injury management, a literature review of interventions for critically ill immobile patients, and analysing results for her study investigating brief interventions for emergency department attendees with moderate and high psychological distress. She is currently drafting several journal articles and looking for conferences to present her study results.

Steering Committee

The NRPDC is governed by a Steering Committee, which meets to agree on and monitor the strategic direction and outcomes of the centre. It is comprised of the following members

Clinical Associate Professor Cherie Franks	Director of Nursing, TPCH	Professor Michelle Campbell	Executive Dean, Faculty of Health Sciences, ACU
Clinical Associate Professor Megan Lowe	Nursing Director, Education & Workforce, TPCH	Professor Mary Courtney	Head, National School of Nursing, Midwifery and Paramedicine, ACU
Belinda Faulkner	Nursing Director, Clinical Effectiveness, TPCH	Associate Professor Paula Schulz	State Head (Qld), School of Nursing, Midwifery and Paramedicine, ACU
Professor Paul Fulbrook	Nursing Director, Research and Practice Development, NRPDC & Professor of Nursing, ACU		

TPCH and ACU Partnership Representatives



Clinical Associate Professor Cherie Franks RN; BN, Grad Cert Health Stud (Nurs), Dip Manage

Director of Nursing, The Prince Charles Hospital

Cherie is the Director of Nursing at The Prince Charles Hospital, Metro North Hospital and Health Service. She is responsible and accountable for the provision of effective leadership, high level operational management and clinical expertise. Her passion and commitment is for clinical safety, patient outcomes and leading clinical service delivery in the provision of excellence. Cherie has a strong interest in nursing research and works collaboratively with the Nursing Director Research and Practice Development. She has a firm belief that it is necessary for nurses to use evidence base to inform improvement in care delivered and the services provided. Cherie is currently studying for her Masters in Health Administration at ACU.



Professor Mary Courtney, RN, RM; M&CHC; PhD, BA (Accounting), M Health Planning

National Head of School of Nursing, Midwifery and Paramedicine, Faculty of Health Sciences, ACU

Mary has worked in tertiary education for 24 years. She commenced as Head, School of Nursing, Midwifery and Paramedicine at ACU in January 2012, having previously worked at the University of New England, Armidale for eleven years and Queensland University of Technology for thirteen years. She recently returned to Australia after a year at the University of British Columbia, Canada. Mary is a very active researcher, and has authored over 110 refereed articles, 25 book chapters and seven books. She has also received significant funding from ARC Discovery, ARC Linkage, and NHMRC grants. Her current research interests include: quality of life and family care giving; self-management; aged care and chronic disease; and intervention studies.



Clinical Associate Professor Megan Lowe, RN; BHSc, DipAppSc (Nursing Education), MA Admin Leadership

Nursing Director, Education and Workforce, TPCH

In her current role, Megan is responsible and accountable for the provision of effective leadership, high level operational management and clinical expertise. She is involved in the planning coordination, formulation and direction of policies relating to the provision of nursing education, staff development and nursing workforce at TPCH to support excellence in clinical care. Megan has worked for Queensland Health for over 28 years and has held a number of senior nursing positions across clinical, educational and workforce fields. Over the last ten years, her interest in human error and patient safety has led to her active involvement in advocating for a just healthcare culture and teaching multidisciplinary teams about the role of system error in patient harm. Megan participated in a range of activities associated with visioning and bringing to life an interactive partnership with ACU in the development of a Clinical School.



Associate Professor Paula Schulz, RN; BA, BSci (Hons), MPsych, DPsych (Health)

State Head (Qld), School of Nursing, Midwifery & Paramedicine, ACU

Paula has worked in tertiary education for 21 years, and has held a number of academic leadership positions with the School and Faculty at ACU. She completed her PhD in 2007, investigating the efficacy of a modified Theory of Planned Behaviour that included anticipated regret as an additional variable in determining the reproductive intentions of women. Her research interests lie in the area of positive psychology and resilience, chronic illness self management and health behaviour change. Paula has been instrumental in establishing the ACU Clinical School at TPCH.

Visiting Researchers



Dr Jenneke Foottit, RN; PhD, MSocSc, BSocSc

Visiting Research Fellow

Jenneke lectures in the School of Nursing, Midwifery and Paramedicine at ACU (Brisbane). She completed her PhD in 2010. Her speciality is ageing and her research focus is on people

with dementia, particularly later stages. She is interested in issues around managing pain in cognitively impaired older adults, and the management of behaviours of concern in people with late stage dementia. Her earliest research work of people with dementia included working on a research project examining the use of case conferencing in the introduction of palliative care, systematic reviews on palliative care, use of supplements, and use of thickened fluids. She has been teaching in different levels of education in nursing: Bachelor, Diploma and Certificate III in Aged Care, and has worked in a variety of clinical settings such as; hospital, domiciliary, urban, regional, and different countries. Her personal commitment to research is due to her belief that research needs to inform the education provided to health professionals and that quality research and education are linked to good health outcomes. She believes health professionals need a strong grounding in both the

science and art of their chosen field, fostered by good teaching and supported by good ongoing research and role modelling. Jenneke is working with TPCH colleagues on projects involving the use of ECT with dementia patients who have challenging behaviours and fall prevention in cognitively impaired patients.



Alison Peeler, RN; MPhil, PGCert (Paed), PGCert (Paed Int Care), GradDip (Neonat), PhD candidate

Visiting Research Fellow

Alison is based at the NRPDC one day per week, and lectures in the School of Nursing, Midwifery and Paramedicine at ACU (Brisbane) the remainder of the week. She has over twenty five years experience as a registered nurse and has worked in many areas including education, research and management. For her Master of Philosophy degree, Alison researched parents' and nurses' experiences of respiratory support of children with respiratory distress syndrome due to acute bronchiolitis. Her PhD is in the area of paediatric emergency care, and is evaluating the new paediatric emergency department at TPCH.



Keith Skelton RN, MNurs (Leadership), MNurs (Mental Health), Grad Dip Health Science (Health Educ), BSc (Environ Stud), Crit Care Cert

Visiting Researcher

Keith is a visiting researcher to the NRPDC, and lectures in the School of Nursing,

Midwifery and Paramedicine at ACU (Brisbane) in nursing, mental health and the sociology of health. Keith worked as a clinical nurse in a variety moderate to high dependency units full time for a period of 8 years and as a nurse educator for two years before taking a position as technical officer at ACU, managing the science and clinical nursing laboratories concurrent with casual teaching and casual clinical nursing. Keith's research interests cover many areas including mental health, wound care, drug calculations for student nurses, and community engagement. He is currently working with TPCH based colleagues who are investigating patient falls and nurses' knowledge of falls prevention.



Dr Roger Lord, PhD, BAppSc, Assoc.Dip.App.Sc, ARCPA

Visiting Research Fellow

Roger is a registered clinical biochemist with a background in both clinical biochemistry and immunopathology. He is a university academic, lecturer (Medical Sciences), attached to the School of Science, Australian Catholic University and

a Visiting Research Fellow with the NRPDC. Roger serves on two advisory committees, (Advisory Committee for the Safety of Medicines (ACSOM) and the Therapeutic Goods Committee (TGC – pharmaceutical standards) that report to the Therapeutic Goods Administration (TGA) and Federal Minister for Health. He was made an Associate of the Royal College of Pathologists of Australasia (ARCPA) in 2014. During his research career, he has made significant contributions to the development of vaccines against Plasmodium falciparum (malaria) and in immunological

mechanisms involved in liver transplantation tolerance. Roger is currently involved in the emerging science of proteomics and treatment strategies for chronic wound healing. Roger's main project at TPCH is titled A double blind trial of the application of 0.2% glyceryl trinitrate (Rectogesic) for the healing of chronic venous leg ulcers. Earlier studies suggested that the application of Rectogesic will have a significant effect on increasing the healing rates of these wounds. This confirmation will be a critical step towards larger studies involving both manipulation vasodilator concentration in concert with an immunomodulatory agent. The study has received support from several commercial partners including Care Pharmaceuticals, 3M Corporation, Coloplast and Radiometer Pty Ltd. This translational medicine approach for chronic venous ulceration has potential to change the current medical management of a disease which is common in elderly members of society and likely to become more prevalent given Australia's aging population.



Sandra Hyde, RN; Mental Health Practitioner, MAdvPrac (Mental Health), MA (Educ & Work), BAppSci (Adv Nurs), PhD student

Visiting Researcher

Sandra is a Visiting Researcher to the NRPDC, and has been involved in several mental health research studies. Her

main role is Lecturer in the School of Nursing, Midwifery and Paramedicine at ACU (Brisbane). Sandra has worked in adult mental health in the acute and community settings, mental health consultation liaison, with clients who have a dual diagnosis in an acquired brain injury unit and in the Mental Health Information Unit as a Clinical Indicator Coordinator, and continues to collaborate in clinical mental health partnerships. She also has extensive experience in general medical surgical nursing. Sandra's areas of research interest include examining and enhancing the care of the consumer in the acute care setting, and the early detection and treatment of depression and anxiety in the general population.

Associate Researchers



Alissa Anderson, RN; BA, BN, Grad Cert

Intensive care nurse researcher

Alissa is a registered nurse currently working in the adult intensive care unit (ICU) at TPCH. She holds a Graduate Certificate in intensive care nursing and has worked in this area for five years. She is currently undertaking a mentored research project via the NRPDC, which is

systematically investigating the research evidence surrounding the prevention of pressure injuries in critically ill and highly immobile patients, especially those receiving extracorporeal membrane oxygenation (ECMO). Alissa is also the successful recipient of a TPCH Foundation Novice Research grant with Professor Fulbrook as her mentor. The first phase of her research evaluated the validity and reliability a recently developed and validated Spanish pressure injury risk assessment tool, the COMHON Index, which has been developed specifically for intensive care patients. The second phase, is investigating its predictive validity.



Damian Williams RN; BNSc, Grad Cert Clin Nsg, Cert IV WPAT N

Wound care researcher

Damian Williams is a Registered Nurse and has been directly involved in delivering advanced wound management services for over 16 years. His current position is Clinical Nurse Consultant for Wound Management at TPCH. Damian is actively involved in gaining

knowledge and promoting best practice wound management. He holds post graduate qualifications in wound management and is currently undertaking a Masters of Nurse Practitioner Studies. He conducts regular wound management education and has presented at conferences at a state, national and international level. Damian has held committee positions on both the Australian Wound Management Association (now Wounds Australia) National Committee and Queensland Committee, and is a past President of the Queensland Committee and is a current committee member. Damian is collaborating on several research projects with the NRPDC. He received a TPCH Foundation Novice Researcher grant for his first project, which is comparing two different dressings for use with skin tears. Professor Fulbrook is research mentor for this project. He is also a co-researcher in Dr Lord's project, investigating the use of glyceryl trinitrate ointment for the treatment of venous leg ulcers. Recently, with Professor Fulbrook, he obtained a grant to investigate the use of a prophylactic sacral dressing to prevent pressure injuries in elderly patients.



Stephanie Gettens, RN; BN

Internal Medicine/Quality Effectiveness Support Team nurse researcher

Stephanie is clinical nurse at TPCH and works in the Early Medical Assessment Unit and the Quality Effectiveness Support Team. She is the project officer for falls prevention and has worked on several projects with Professor

Fulbrook. Stephanie was awarded a Novice Research grant from TPCH Foundation, with Professor Fulbrook as her mentor, to investigate 'fear of falling' and its relationship to clinical outcomes, such as hospital length of stay. Her study on falls is highly relevant to TPCH and will provide valuable data that will help to provide the basis for practice development and will form the foundation for further larger studies. Stephanie has enrolled in a Master of Philosophy degree at ACU through which she is continuing her research regarding falls prevention. Her supervisors are Professor Paul Fulbrook, Professor Nancy Low Choy and Dr Melanie Jessup.

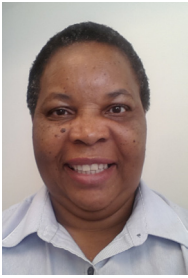


Catherine Saxon RN

Respiratory care researcher

Cathy is a Clinical Nurse in Endoscopy and Procedural Services at TPCH and a nursing research student with the Australian Catholic University. She has completed the study, "What are high risk respiratory patients' experiences in bronchoscopy with 'cautious'

sedation and analgesia; a qualitative study". To help fund this project she received a grant from The Prince Charles Hospital Foundation in 2014. Cathy has presented preliminary results from her study at the Australian Gastroenterology Week in October 2014 and described her nursing research journey at a Gastroenterological Nurses College of Australia education evening in November 2014. Final study results and analysis will be submitted for publication and presentation in a journal and two in 2016. Cathy is also working on a systematic review, of randomised controlled trials, that have collected data pertaining to patient experience in bronchoscopy with various forms of sedation and analgesia. The review is in the data collection and screening stage, but the aim is to submit the review for publication next year. Both the study and review will contribute to the completion of Cathy's Masters in early 2017.



Vainess Mbuzi, RN, BN, MN (Primary Health Care), MN Advanced Practice (Health Professional Education), Grad Dip (Intensive care Nursing), PhD candidate

Critical care researcher

Vainess is a Clinical Nurse currently working in the Adult Intensive Care Services at TPCH. She has over 30 years of experience as a registered nurse and has worked in a variety of areas, including education and management, overseas and in Australia. She holds a graduate diploma in intensive care nursing, Master of Nursing in Primary Health Care, and Master of Advanced Practice in Health Professional Education. Vainess is a PhD candidate and is investigating Indigenous peoples' experiences of acute cardiac care. Her research includes a qualitative study of

Indigenous cardiac patients' and their relatives' experiences and a metasynthesis of Indigenous peoples' experiences of hospitalisation. She is a successful recipient of TPCH Foundation New investigator grant, with Professor Fulbrook as her mentor.



Claire Burl RN

Geriatric care researcher

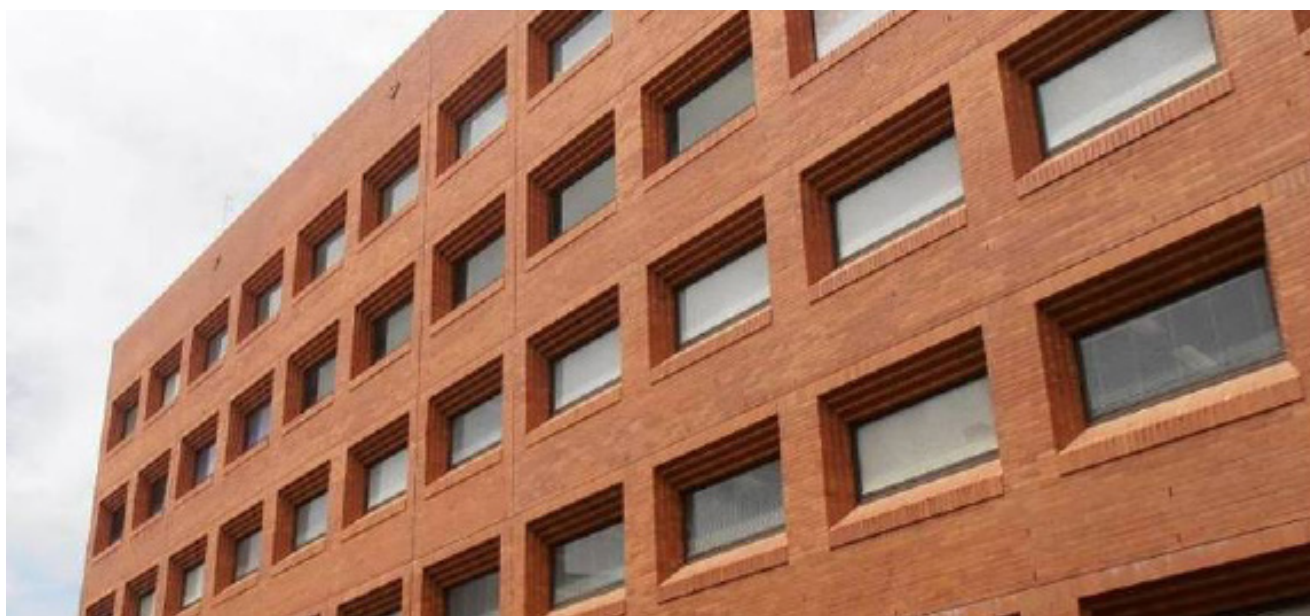
Claire is a clinical Nurse working in the GEM (Geriatric Rehabilitation and Management) unit at TPCH. She has worked in the area for five years, and was previously working in aged care for many years. The objective her research study is to determine what types of clinical activities are occurring when a patient falls, and to identify changes to existing practice that may reduce the number of falls, as well as possible impacts on the staff member was caring for the patient that fell

Research Collaborators

Collaborators	University and other organisations
Dr Emma Bosley	Director, Information Support, Research & Evaluation, Queensland Ambulance Service
Dr Justin Boyle	Australian E-Health Research Centre, CSIRO
Marc Colbeck	Senior Lecturer, Paramedicine, ACU
Dr Aaron Conway	Research Fellow, Queensland University of Technology
Dr Michelle Davison	Paediatric Emergency Specialist, Department of Emergency Medicine, TPCH
Professor Gerard FitzGerald	Director, Centre for Emergency & Disaster Management, Queensland University of Technology
Dr Usha Gurunathan	Senior Staff Specialist Anaesthetist, TPCH
Professor Kwon Fung	Heart & Lung Institute, TPCH
Dr Frances Kinnear	Emergency Specialist, Department of Emergency Medicine, TPCH
Associate Professor Liz McInnes	Deputy Director, Nursing Research Institute, St. Vincent's Hospital, Sydney
Professor Nancy Low Choy	Professor of Physiotherapy, ACU and TPCH
Dr Colin Myers	Department of Emergency Medicine, TPCH
Dr Jeffrey Rowland	Director of Physician Education, Internal Medicine, TPCH
Associate Professor Shawn Somerset	School of Public Health, ACU
Professor Linda Shields	James Cook University
Professor David Thompson	Faculty of Health Sciences, ACU
Associate Professor Kerriane Watt	James Cook University
Professor Nereda White	Institute for Positive Psychology and Education, ACU
Associate Professor Ian Yang	Consultant Thoracic Physician, TPCH

Post Graduate Research Students

2015 Post Graduate Research Students			
Research Student	Degree	Supervisors	Thesis title
^α Sandra Miles	Doctor of Philosophy	^α Prof. Paul Fulbrook Debra Mainwaring-Magi	Able-Bodied Children: Development and Education
^α Petra Lawrence	Doctor of Philosophy	^α Prof. Paul Fulbrook Assoc. Prof. Shawn Somerset ^α Assoc. Prof. Paula Schulz	A randomised controlled trial of a psychosocial brief intervention for emergency department attendees with moderate psychological stress
^β Vainess Mbuzi	Doctor of Philosophy	^α Prof. Paul Fulbrook Prof. Nereda White ^α Clin. Assoc. Prof. Melanie Jessup	Indigenous people's experiences of acute cardiac care
^α Alison Peeler	Doctor of Philosophy	^α Prof. Paul Fulbrook Assoc. Prof. Karen-Leigh Edward ^β Dr Frances Kinnear	Evaluation of a paediatric emergency department
Kodchanipa Phonpruk	Doctor of Philosophy	Prof. Karen Flowers ^α Prof. Paul Fulbrook Prof. Geraldine Naughton Dr George Mnatzaganian	Discharge information provided to parents whose child has attended the paediatric emergency department
^β Stephanie Gettens	Master of Philosophy	^α Prof. Paul Fulbrook ^β Prof. Nancy Low Choy ^α Clin. Assoc. Prof. Melanie Jessup	Psychosocial implications of sustaining a fall while in hospital
^β Cathy Saxon	Master of Nursing (Research)	^α Prof. Paul Fulbrook Assoc. Prof. Chantal Ski ^β Prof. Kwun Fong	Patients with chronic respiratory disease: experiences of bronchoscopy



Clinical Sciences Building TPCH

^αNRPDC ^βTPCH

Completed Research Projects

PRESSURE INJURY PREVENTION

Validity and reliability of a pressure injury risk assessment tool for intensive care patients (NSQHS Standard 8)

^aPaul Fulbrook, ^bAlissa Anderson

The incidence of pressure injuries is a key clinical indicator of the standard and effectiveness of care. However, in the intensive care setting, despite interventions aimed at their prevention, their incidence is relatively high. The aim of this study was to evaluate the application of the a new pressure injury risk assessment tool, designed specifically for intensive care: the COMHON index. The objectives are to: evaluate the validity and reliability of the COMHON Index within an adult Australian ICU population; compare the appropriateness of the COMHON Index with three commonly used – but non-ICU-specific - internationally used scales i.e. Waterlow, Braden, and Norton scales; and identify common risk factors of PI development in adult ICU patients. The results demonstrate the the COMHON Index possessed the best inter-rater reliability and was strongly correlated with both the Braden and Norton scales. Dissemination: the study has been presented at several conferences and has been published in the Journal of Advanced Nursing.

EMERGENCY CARE

Implementation and evaluation of an emergency department 'Navigator' role to improve timely delivery of patient care (NSQHS Standard 2)

^aPaul Fulbrook, ^bFrances Kinnear, ^aMelanie Jessup

Delayed treatment in the emergency department (ED) is a major healthcare issue. Over a twenty week period a new nursing role was implemented in the ED. This novel role was to troubleshoot factors contributing to patient delays. The results indicate that the Navigators significantly reduced average ED length of stay by around five minutes per patient, and contributed to reduced times at all stages of the ED patient's journey. The role was evaluated using mixed methods and staff were found to be supportive. Further analysis is being performed and it is intended to undertake a cost-effectiveness analysis of the role. The study was funded by a research grant from the Australian Centre for Health Services Innovation.

Provision of a new paediatric service: an investigation of staff's perceptions and experience of the transition from an adult emergency department

^aAlison Peeler, ^aPaul Fulbrook, ^bFrances Kinnear

This research studied the opening of a separate paediatric emergency department at TPCH from the viewpoint of the staff directly affected. It is using quantitative and qualitative analysis of data from a combination of surveys and interviews. These examined readiness, progress and effects (real and perceived) of the change process at different stages i.e. before, during and after the new department was opened. The surveys were administered widely to staff affected involving different levels and different disciplines. The interviews were conducted with a more limited number of staff representatives of the different groups. The information obtained may help guide the process and should also be of use in planning future similar changes here and elsewhere. A research article is under review..

CARDIAC/THORACIC CARE

Indigenous people and their families' experiences of cardiac care in a hospital setting (NSQHS Standard 2)

^bVainess Mbuji, ^aPaul Fulbrook, Nereda White, ^aMelanie Jessup

This project employed a qualitative design. A purposive sample of Indigenous cardiac patients and their family members were interviewed. The aim was to understand how Indigenous people experienced acute cardiac care, in order to inform the provision of culturally sensitive care. It is part-funded by a research grant from TPCH Foundation. Dissemination: two articles are currently being prepared for peer-reviewed publication.

High risk respiratory patient's experiences of bronchoscopy with cautious sedation and analgesia: a qualitative study (NSQHS Standard 2)

^bCathy Saxon, ^aPaul Fulbrook, Chantal Ski, ^bKwun Fong

Sedation for bronchoscopy is dependent on the preferences of the physician. Sedation is used to alleviate

negative symptoms associated with bronchoscopy such as anxiety, amnesia, pain, cough and dyspnoea and has been associated with the patients' willingness to repeat the procedure. Analgesia is often combined with sedation due to its analgesic and antitussive effects. Cautious sedation/analgesia is provided to patients with respiratory disease who are at higher risk during bronchoscopy. A clinical problem has been identified when the nurses assisting with patient airway management during bronchoscopy observe patients' distress due to discomfort. Although there have been many studies that have investigated bronchoscopy with cautious sedation, none have investigated the patients' experience qualitatively. The aim of the project was to understand the lived experience of high risk patients that undergo bronchoscopy with cautious administration of sedation and analgesia. The findings will be used to inform bronchoscopy practice. A research article is under preparation.

MENTAL HEALTH CARE

Use of a comfort room for distressed people in acute mental health settings: a thematic analysis of perspectives from consumers and staff (NSQHS Standard 2)

^aSandra Hyde, ^aSandra Miles, ^aPaul Fulbrook

This study investigated implementation of a comfort room as an alternative to seclusion in an Australian mental health setting. The processes of implementing a chill-out or comfort zone, otherwise known as a comfort room, were explored from the perspectives of staff and consumers. Thematic analysis of interview transcripts revealed four themes, including the purpose, safety, ownership of, and access to, the comfort room. While staff and consumers agreed on the benefits of implementing a comfort room, a contradiction emerged regarding the purpose and ownership of the room. Where consumers

wanted to use the room as desired to participate in their own self-management, staff wanted to identify patients who needed to use the room and thus control access to the room. It is clear that the purpose of a comfort room needs to be identified by a facility's staff and patients prior to implementation to avoid clashes of ownership. Developing a decision making framework or guidelines around the use of the comfort room is recommended. Dissemination: Several conference papers have been presented and a peer-reviewed journal article is in preparation.

OTHER RESEARCH

Perioperative changes in elderly patients undergoing hip fracture surgery

^βUsha Gurunathan, ^βChris Stonell, ^aPaul Fulbrook, ^βBernadette Brown

The main aim of this study was to assess the perioperative changes in patients undergoing surgery for proximal femoral fractures. The secondary aims are to: calculate the prevalence of hypothermia in patients on arrival to the post anaesthetic care unit; and evaluate the association between occurrence of hypothermia and post-operative length of stay in the recovery room. 87 patients were included in this study. A significant drop in body temperature (0.730C, 95% CI: 0.58- 0.88, p<0.001) occurred from their arrival at the operating theatre until their arrival at the recovery room. One third of the patients were noted to be hypothermic when they arrived at recovery room. A significant drop of 0.240C (95% CI: 0.11-0.36, p<0.001) was observed at the holding bay area. These results indicate that despite the use of active warming methods for most patients, significant hypothermia was still an issue. Further improvement is necessary to prevent hypothermia in this high-risk group of patients. Several conference presentations given and a research article is in preparation.

Current Research Projects

PRESSURE INJURY PREVENTION AND WOUND MANAGEMENT

Systematic review of interventions to reduce pressure injury in immobile critically ill patients (NSQHS Standard 8)

^βAlissa Anderson, ^αPetra Lawrence, ^αPaul Fulbrook

Pressure injury (PI) prevention in critically ill patients features prominently in current research literature, as it is a key clinical indicator of the effectiveness of care; critically ill adults are often at higher risk than other patients. The impetus for this review arose from clinical concerns about the relatively high incidence of occipital PI in TPCH extra-corporeal membrane oxygenation (ECMO) patients, due to their being immobile and supine for prolonged periods of time. Thus, the initial inquiry via the research literature was focused on risk factors and methods of PI prevention for this group. However, the first search revealed an absence of research on this topic. The search remit and terms were therefore expanded to cover PI risk and prevention in all immobile critically ill patients. Thus, the aim of this review is to critically evaluate the effectiveness of interventions aimed at preventing PI in immobile critically ill patients.

Nurses' knowledge of pressure injury prevention and management (NSQHS Standard 8)

^αPetra Lawrence, ^αPaul Fulbrook, ^αSandra Miles

Building upon a previous research study that was conducted across the health service district, this study will investigate TPCH nurses' knowledge levels. A proportional, stratified sample of nurses is being recruited and surveyed using the Pieper Zulkowski Pressure Ulcer knowledge Tool (PZ-PUKT).

Adhesive silicone foam dressing versus meshed silicone interface dressing for the management of skin tears: a comparison of healing rates, and patients' and nurses' satisfaction (NSQHS Standard 8)

^βDamian Williams, ^αPaul Fulbrook, ^αSandra Miles

Point prevalence audits within TPCH between 2009 and 2011 have yielded skin tear prevalence results between 5.38% and 12.59% and 95% of skin tears were on patients over the age of 65. The main goal of this study is to compare two standard dressings in terms of their skin tear healing times. Secondary goals are to assess nurses' satisfaction with the dressings (fit for purpose) and patients' satisfaction (comfort et cetera). This will also enable a cost-benefit comparison to be made.

Application of 0.2% glyceryl trinitrate ointment for the healing of chronic venous leg ulcers (NSQHS Standard 8)

^αRoger Lord, ^βDamian Williams, ^αSandra Miles, ^αPaul Fulbrook, ^βEwan Kinnear, ^βJeffrey Rowland

A small study by Roger Lord showed that glyceryl trinitrate, the active ingredient in rectogesic ointment, increased production of nitric oxide in venous leg ulcers. This resulted in vasodilation and immune system activation at the wound site, helping to clear bacterial load and promote wound closure. This new study will recruit a larger sample to reach statistical significance. Consenting patients with venous leg ulceration, confirmed with the use of transdermal oxygen sensors, will be randomly allocated to a control (usual treatment) or experiment (application of 0.2% glycerol trinitrate) group. Planimetry will be used for baseline measurements of ulcer size and to ascertain healing rates at weekly visits over four to six weeks, to monitor whether treatment is having an effect.

Evaluation of a silicone gel adhesive hydrocellular foam dressings for the prevention of sacral pressure injuries in hospitalised elderly patients (NSQHS Standard 8)

^αPaul Fulbrook, ^βDamian Williams, ^αSandra Miles, ^βJulia Strothers

The primary aim of this study is to compare the effect of a shaped silicone gel adhesive hydrocellular foam dressing to standard care on the development of sacral pressure injury in at risk elderly patients in a sub-acute hospital ward. The secondary aims are: to evaluate dressing comfort from the patient's perspective; to evaluate dressing utility from the nurse's perspective; and to quantify the direct costs associated with use of the foam dressing. The design is an open label randomised observational study of patients admitted the Geriatric Evaluation Medicine (GEM) unit at TPCH. Data collection is in progress.

Waiting time in the emergency department and hospital acquired pressure injury: a matched control study (NSQHS Standards 2 and 8)

Elyse Fitzpatrick, ^αPaul Fulbrook, ^αSandra Miles

The overall intent of this project is to examine the effect of emergency department (ED) waiting times to identify risk factors associated with pressure injury development during the early stages of a patients episode of care. Building on a previous study, this project will examine the relationship between ED LOS and the presence of PI in hospitalised patients by conducting a retrospective chart audit. Initially,

the medical records of patients admitted to hospital via the ED in the three months before and after the implementation of the NEAT, that subsequently developed a PI during their hospital stay, will be examined. These cases will then be matched with patients who were also admitted to hospital via the ED during this period but did not sustain a PI (controls) during their episode of care. The medical records of both cases and controls will be compared to identify factors associated with PI development.

The presence of pressure injury in patients admitted to the emergency department via ambulance: pilot descriptive study (NSQHS Standards 2 and 8)

^αPaul Fulbrook, ^αSandra Miles, Elizabeth McInnes, ^βFrances Kinnear, Fiona Coyer

The study aim is to determine the prevalence of pressure injury (PI) presence in adult patients arriving at an emergency department (ED) by ambulance. The objectives of this study are to: describe the relationship between the presence and stage of PI identified on presentation to ED and the presence and grade of PI identified when patients are admitted to the wards; examine the association between various factors (patient-related; pre-ambulance arrival condition; length of ambulance journey; patient position in ambulance; stretcher surface) and the presence of PI; and examine the association between PI presence on admission to the ward and various timed events (ambulance call; ambulance pick up; ambulance arrival in ED; length of stay in ED).

Assessment of pressure injury risk and intervention planning for hospitalised patients: a comparison of nurses' clinical judgement with and without use of a standardised pressure injury risk assessment tool (NSQHS Standard 8)

^αPaul Fulbrook, ^αSandra Miles, ^βTracy Nowicki

Pressure injuries are a usually preventable adverse outcome of hospitalisation, which may cause a patient pain or increase their hospital length of stay and, in severe cases, may lead to death. Nurses plan interventions to prevent pressure injuries, using their own judgement or a formal tool to assess risk for each patient. The aim of this study is to compare nurses' use of a structured risk assessment tool versus unstructured clinical judgement to determine which results in the most effective planned interventions to prevent pressure injury.

FALLS INJURY PREVENTION

Patients' experiences of sustaining an in-hospital fall: how is confidence affected? (NSQHS Standards 2 and 10)

^βStephanie Gettens, ^αPaul Fulbrook, ^αMelanie Jessup, ^βNancy Low Choy

The aim of this study is to investigate the lived experience of patients who have fallen while in hospital. Through greater understanding of how a fall affects the confidence of the person experiencing this phenomenon - not only physically but also emotionally - it is intended to glean an approach to falls prevention that is more central and individualised to each patient. People who have fallen may provide health professionals with a deeper understanding and a broader knowledge of how living with the risk of falling affects their day to day life. This qualitative study will utilise a hermeneutic phenomenological framework. Together with the results from the previous study, this study will provide valuable information that may lead to a different approach to fall prevention strategies for the hospital inpatient. Data collection is in progress.

Falls knowledge survey (NSQHS Standard 10)

^αKeith Skelton, ^αMelanie Jessup, ^βNancy Low-Choy, ^αJenneke Footitt J, ^βStephanie Gettens S

The aim of this project is to conduct a district wide survey on the topic of falls to ascertain health professionals' current knowledge of falls: their impact and prevention. A questionnaire is being developed to identify potential gaps in knowledge and to inform further research and education. Funded by a research grant from TPCH Foundation.

Clinical care in relation to falls (NSQHS Standard 10)

^βClaire Burl, ^αJenneke Footitt, ^αMelanie Jessup

The aim of this study is to determine what clinical care and activities are occurring at the time of a patient fall. It utilises a process of mapping patient and staff location and activity at the time of an inpatient fall, utilising this data in focus groups in which staff consider how practice can be modified to minimise falls. Qualitative interviews with the staff member assigned to care for the patient who fell will deliver insight in to the potential impact of a patient fall. The study is funded by a TPCH Foundation research grant. Data collection is in progress.

EMERGENCY CARE

Efficacy of a brief intervention for emergency department attendees with moderate to high psychological distress (NSQHS Standard 2)

^αPetra Lawrence, ^αPaul Fulbrook, ^αPaula Schulz, Shawn Somerset, ^βCathy Boyle, ^βFrances Kinnear

This study is investigating the efficacy of a brief intervention (motivational interview) in terms of health outcomes for emergency department (ED) attendees who present with moderate to high psychological distress. The Kessler Psychological Distress Scale is being used to screen for distress. Participants are being followed up for one year. Data collection is complete and analysis is in progress.

An investigation of the provision of discharge information to parents to care for their child post-discharge from the emergency department: A mixed methods study (NSQHS Standard 2)

Kodchanipa Phonpruk, Karen Flowers, Geraldine Naughton, ^αPaul Fulbrook, George Mnatzaganian

Presenting to an Emergency Department (ED) can be an anxious time for children and their families, as the need for treatment is urgent. The overall aim of this study is to investigate parents' perceptions of, and responses to discharge information to assist in managing their child post discharge from the ED. The objectives are to explore: factors in the ED setting that impact on parents' understanding of discharge information; ED nurses' perceptions of enablers and barriers to parents' understanding of discharge information; and parents' perceptions of the discharge information they received from the ED. This study employed mixed methods, gathering data from various sources, including document review, non-participant observation, survey and a focus groups. Data collection is nearly complete.

On the right track for falls prevention: implementation and evaluation of a nurse-led emergency department pathway involving screening, interdisciplinary assessment and referral of patients for community-based support following a fall (NSQHS Standard 10)

^αPaul Fulbrook, ^αMelanie Jessup, ^βStephanie Gettens, ^βAndrew Carter, ^βAmanda Tully, ^βNancy Low Choy, ^βFrances Kinnear, ^βJeffrey Rowland

The overall aim of this project is to demonstrate the feasibility and effectiveness of streamlining the processes

of assessment and early management of ED presentations of fallers utilising an integrated ED Falls Pathway. Falls are extremely common and represent a major health problem for older people; 30-40% of people over 65 and half of those over 80 will have a fall in one year, often with major health complications. Most people who present to an emergency department (ED) following a fall do not require hospitalisation; however, of those discharged home, around 20% will represent to hospital within 3 months. This project will implement and evaluate a nurse-led program in the ED to identify and screen people who have fallen, so that an individual and in-depth assessment by key health professionals can be provided followed by relevant referrals for community support services on discharge home. It is anticipated that this program will help to reduce the risk of further falls and representations to hospital. Currently seeking funding to support this project.

CARDIAC/THORACIC CARE

Family-centred care in cystic fibrosis (NSQHS Standard 2)

Linda Shields, ^αMelanie Jessup, Tonia Douglas

This study is investigating the implementation and applicability of family-centred care as a model of care for families in which a member with cystic fibrosis (CF), to determine if what has come to be acknowledged as an ideal model is a) implemented in CF care in Australia, and b) relevant and applicable in that care delivery, particularly for those families living in remote settings. A qualitative component complemented by a set of validated and trialed tools are being used.

OTHER RESEARCH

Pilot study of waist circumference as a predictor of major post-operative adverse outcomes following elective non-cardiac surgery

^βUsha Gurunathan, ^βKate Hallinan, ^βIvan Rapchuk, ^βPeter Baker, ^βGemma Duncan, ^αPaul Fulbrook

The main aim of this risk-adjusted cohort study of surgical patients is to estimate the ability of waist circumference to predict major operative adverse outcomes. Secondary aims are to: compare the predictability of waist circumference with body mass index to predict post-operative adverse events; to evaluate the role of surrogate markers (waist:hip ratio, body mass index, neck circumference) to predict post-operative adverse events; and to estimate the length of stay and costs incurred during the primary hospital admission as predicted by waist circumference.

Publications

Peer Reviewed Publications

Brown, C., Baker, M., ^αJessup, M., & Marshall, A. P. (2015). EN2RN - transitioning to a new scope of practice. *Contemporary Nurse*, 50(2-3), 196-205.

Conway, A., McCarthy, A. L., ^αLawrence, P., & Clark, R. A. (2015). The prevention, detection and management of cancer treatment-induced cardiotoxicity: a meta-review. *BMC Cancer*, 15(1).

Coombs, M., ^αFulbrook, P., Donovan, S., Tester, R., & deVries, K. (2015). Certainty and uncertainty about end of life care nursing practices in New Zealand Intensive Care Units: A mixed methods study. *Australian Critical Care*, 28(2), 82-86.

Crilly, J., Boyle, J., ^αJessup, M., Wallis, M., Lind, J., Green, D., & Fitzgerald, G. (2015). The implementation and evaluation of the Patient Admission Prediction tool: assessing its impact on decision-making strategies and patient flow outcomes in 2 Australian hospitals. *Quality Management in Health Care*, 24(4), 169-176.

^αFulbrook, P., & ^αLawrence, P. (2015). Survey of an Australian general emergency department: estimated prevalence of mental health disorders. *Journal of Psychiatric and Mental Health Nursing*, 22(1), 30-38.

^αFulbrook, P., ^αLawrence, P., & Watt, K. (2015). Validity of the Paddington Alcohol Test in an Australian emergency department. *Alcohol and Alcoholism*, 50(4), 407-412.

^βGettens, S., & ^αFulbrook, P. (2015). Fear of falling: association between the Modified Falls Efficacy Scale, in-hospital falls and hospital length of stay. *Journal of Evaluation in Clinical Practice*, 21(1), 43-50.

^αJessup, M., Crilly, J., Boyle, J., Lind, J., Green, D., Wallis, M., & Fitzgerald, G. (2015). Users' experiences of an Emergency Department patient admission predictive tool: a qualitative evaluation. *Health Informatics Journal*. doi: 10.1177/1460458215577993

^αJessup, M., Douglas, T., Branch-Smith, C., Priddis, P., & Shields, L. (2015). Parental experience of information and education processes following diagnosis of their infant with cystic fibrosis via newborn screening. *Journal of Pediatric Nursing*, 31(3), e233-e241.

^αLawrence, P., & ^αFulbrook, P. (2015). Protocol for a pragmatic randomised controlled trial to evaluate effects of a brief intervention for emergency department attendees who present with moderate or high levels of non-specific psychological distress: a pilot study. *Pilot and Feasibility Studies*(1).

^αLawrence, P., ^αFulbrook, P., & ^αMiles, S. (2015). A survey of Australian nurses knowledge of pressure injury/pressure ulcer management. *Journal of Wound, Ostomy and Continence Nursing*, 42(5), 450-460.

^αPeeler, A., ^αFulbrook, P., & Kildea, S. (2015). The experiences of parents and nurses of hospitalised infants requiring oxygen therapy for severe bronchoillitis: a phenomenological study. *Journal of Child Health Care*, 19(2), 216-228.

Williams G, ^αFulbrook P, Kleinpell R, Schmollgruber S, Alberto L (2015). Critical care nursing organizations and activities: A fourth worldwide review. *International Nursing Review*, 62(4), 453-461.

Publications in press 2015

Fulbrook, P., & Anderson, A. (In-press). Pressure injury risk assessment in intensive care: comparison of inter-rater reliability of the COMHON (Conscious level, Mobility, Haemodynamics, Oxygenation, Nutrition) Index with three scales. *Journal of Advanced Nursing*.

Published Abstracts (peer-reviewed)

^αFulbrook P (2015). Pressure injury risk assessment. *Connect: The World of Critical Care Nursing* 9(4), 136.

^αFulbrook P (2015). Publishing strategies. *Connect: The World of Critical Care Nursing* 9(4), 132.

Journal Articles Under Review or in Preparation

Under review

Brown C, ^αJessup M, Marshall A. EN2RN: Transitioning to a new scope of practice.

Conway A, Sheridan J, Maddicks-Law J, ^αFulbrook P, Ski CF, Thompson DR, Doering LV. Depression and pain in heart transplant recipients: an observational study.

^βDavison M, ^βKinnear F, ^αFulbrook P. Evaluation of a structured simulation exercise to prepare emergency staff for the opening of a new department.

^αJessup M, Douglas T, Branch-Smith C, Priddis P, Shields L. Information needs of parents of children newly diagnosed with cystic fibrosis via newborn screening.

^αLawrence P, ^αFulbrook P. The Kessler Psychological Distress Scales (K10): factor structure in a clinical sample of Australian emergency department patients.

In preparation

Conway A, Sheridan J, Maddicks-Law J, ^αFulbrook P, Ski C, Thompson D, Doering L. Accuracy of anxiety and depression screening tools in heart transplant recipients.

Conway A, Sheridan J, Maddicks-Law J, ^αFulbrook P. Pilot testing a model of psychological care for heart transplant recipients.

Fitzpatrick, E., ^αMiles, S., & ^αFulbrook, P. A descriptive study of the relationship between length of stay in the emergency department and hospital acquired pressure injury.

^αHyde, S., ^αMiles, S., & ^αFulbrook, P. The experience of seclusion: a thematic analysis of perspectives from consumers and staff.

^αHyde, S., ^αMiles, S., & ^αFulbrook, P. Use of a comfort room for distressed people in acute mental health settings: a thematic analysis of perspectives from consumers and staff.

^αJessup, M., ^αFulbrook, P., & Kinnear, F. Implementation and evaluation of an emergency department Navigator role to improve timely delivery of patient care.

^αJessup, M., ^αFulbrook, P., Kinnear, F., Trudgen, K., & Beasy, K. Navigator role in the emergency department: an insider' view.

^αJessup, M., Li, A., ^αFulbrook, P., & Bell, S. Passage to parenthood: The experience of men and women with cystic fibrosis.

^αLawrence, P., & ^αFulbrook, P. Factor structure of the K10 in a sample from the emergency department.

^αLawrence, P., & ^αFulbrook, P. One month follow up of a pragmatic randomised controlled trial to evaluate effects of a brief intervention for emergency department attendees who present with moderate of high levels of non-specific psychological distress: a pilot study.

^αLawrence, P., & ^αFulbrook, P. Three month follow up of a pragmatic randomised controlled trial to evaluate effects of a brief intervention for emergency department attendees who present with moderate of high levels of non-specific psychological distress: a pilot study.

^αLawrence, P., ^αFulbrook, P., & Anderson, A systematic review of interventions to reduce pressure injury in immobile critically ill patients.

^αLawrence, P., ^αFulbrook, P., Sommerset, S., & Schulz, P. Meta analysis and systematic review of motivational interviewing as a pre treatment for people with psychological problems.

Mbuzi, V., ^αFulbrook, P., ^αJessup, M., & White, N. Strategies to improve Indigenous cardiac health: a systematic review.

^αMiles, S., ^αFulbrook, P., & Mnatzaganian, G. Effects of a group sensory motor approach intervention on academic performance of young children in a school setting: A one year randomised, pragmatic, clustered, unblinded, controlled trial.

^αMiles, S., ^αFulbrook, P., Mnatzaganian, G., & Mainwaring-Magi, D. Psychometric and feasibility properties of standardised instruments measuring academic achievement in early school years' children for use in research: a systematic review.

Ward D, ^αFulbrook P. Nursing strategies for effective weaning of the critically ill mechanically ventilated patient.

Williams, D., & ^αMiles, S. A seven-year review of skin tear characteristics, prevalence and management in an Australian general hospital.

Conference Presentations

International

^αFulbrook P (2015). Pressure injury risk assessment in intensive care: interrater reliability and construct validity of the COMHON Index. World Federation of Societies of Intensive and Critical Care Medicine World Congress, Seoul, South Korea. 29 August – 01 September 2015.

^αFulbrook P (2015). Writing for publication. World Federation of Societies of Intensive and Critical Care Medicine World Congress, Seoul, South Korea. 29 August – 01 September 2015.

^αJessup, M., ^αFulbrook, P., & ^βKinnear, F. (2015b). Nurse Navigators in the emergency department: implementation and evaluation of the role. Paper presented at the 13th International Conference for Emergency Nurses, Brisbane, October 7-9.

National

^βGurunathan U, ^βStonell C, ^αFulbrook P (2015). Perioperative temperature changes in elderly patients undergoing hip fracture surgery. Australian Society of Anaesthetists and New Zealand Society of Anaesthetists Combined Scientific Congress 2015. Darwin, 12-15 September 2015.

^βKinnear, F., ^αFulbrook, P., & ^αJessup, M. (2015). Implementation and evaluation of an emergency department (ED) nurse navigator (NN) role: a controlled observation study utilising mixed methodology. Paper presented at the The 32rd Annual Scientific Meeting of the Australasian College for Emergency Medicine, Brisbane, 22-26 November 2015.

^βMbuzi V, ^αFulbrook P, ^αJessup M, White N (2015). Indigenous cardiac patients' experience of hospitalisation. Indigenous Health Conference. Cairns, 1-3 December 2015.

^βSpooner A, ^βAnstey C, ^βHollis G, ^βMcCormack P, ^αFulbrook P, ^βMcKay P, ^βMoore J, ^βOystein T, ^βCaruana L, ^βNowicki T, ^βStonestreet J, ^βFraser J, ^βDunster K, ^βMullany D, ^βCorley A (2015). Examining microvascular skin perfusion to identify patients at risk of developing pressure injuries in the intensive care unit. Australian Wound Management Association. Brisbane 3-5 September 2015.

Local

^αFulbrook P, ^βGettens S (2015). Psychosocial impacts of sustaining an inpatient fall. Key to the Future: Unlocking Nursing and Midwifery Leadership and Workforce conference. Brisbane, 11-12 May 2015.

^αFulbrook, P. & ^αJessup, M. (2015). Implementation and evaluation of an emergency department 'Navigator' role to improve timely delivery of patient care. Paper presented at the Key to the Future: Unlocking Nursing and Midwifery Leadership and Workforce Conference, Herston, 11-12 May 2015.

^αJessup, M., ^αFulbrook, P., & ^βKinnear, F. (2015a). Implementation and evaluation of an emergency department 'Navigator' role. Paper presented at the The Prince Charles Hospital 7th annual Health Discoveries Research Forum, Brisbane, 5-6 November 2015.

^βMbuzi V, ^αFulbrook P, ^αJessup M, White N (2015). Indigenous cardiac patients and their families' hospital experience. Health Discoveries Forum, The Prince Charles Hospital, 05-06 November 2015.

Research Grants

ML010: Ambulance retrieval: What factors are involved in the decision to transport an emergency patient to hospital

^αPaul Fulbrook, ^βFrances Kinnear, ^αMelanie Jessup, Justin Boyle, Emma Bosley, Gerard FitzGerald, Marc Colbeck
Queensland Health SEED Grant, \$87,790

NI2015-119: High flow nasal cannula (HFNC) treatment for viral bronchiolitis: a randomised control trial to investigate the effect on carbon dioxide (CO₂) levels

^βMichelle Davison, ^αPaul Fulbrook
The Prince Charles Hospital Foundation, \$6,494.07

NI2015-115: Implementation and evaluation of new method of obtaining a urine specimen in non toilet-trained children in the emergency department

^β Jeannette Probyn, ^αPaul Fulbrook
The Prince Charles Hospital Foundation, \$3,189.53

NI2015-127: Is waiting time in the emergency department associated with hospital acquired pressure injury?

Elyse Fitzpatrick, ^αPaul Fulbrook
The Prince Charles Hospital Foundation, \$9,162.20

Hospital ethics approvals

HREC/15/QPCH/70: Discharge information for parents in the Children's Emergency Department

HREC/15/QPCH/75: Survey: Nurses' knowledge of pressure injury prevention

HREC/15/QPCH/83: Ambulance emergency department destination: case study and decision analysis

HREC/15/QPCH/140: Recruiting palliative patients into clinical trials

HREC/15/QPCH/185: Patient's experience of sustaining an in-hospital fall

HREC/15/QPCH/308: Falls Prevention and Management Survey

HREC/15/QRBW/100; SSA/15/QPCH/196: Introduction of the Safewards program in Queensland public hospital acute settings



Emergency Department TPCH

^αNRPDC ^βTPCH

TPCH ACU

Esteem Indicators

Editorship

Paul Fulbrook

- Emeritus Editor, Connect: The World of Critical Care Nursing

Editorial boards

Paul Fulbrook

- Nursing in Critical Care

Journal referee

Paul Fulbrook

- Journal of Clinical Nursing
- Nursing in Critical Care

Melanie Jessup

- Journal of Pediatric Nursing
- Journal of Qualitative Health Research

Sandra Miles

- Australian Critical Care
- Neonatal, Paediatric and Child Health Nursing Journal

Roger Lord

- Cytokine

Research indices

Paul Fulbrook

- 2015 h-Index: 21
- 2015 i10-Index: 35

Melanie Jessup

- 2015 h-Index: 5

Sandra Miles

- 2015 h-Index: 4

Petra Lawrence

- 2015 h-Index: 3

Professional roles and affiliations

Paul Fulbrook

- Adjunct Professor, School of Health Sciences, University of Tasmania

- President, World Federation of Critical Care Nurses
- President (Queensland), Australian College of Critical Care Nurses
- National Board Member, Australian College of Critical Care Nurses
- Honorary Ambassador, World Federation of Critical Care Nurses
- Honorary Fellow, European Federation of Critical Care Nursing Associations
- Member, Research and Research Training Committee, School of Nursing, Midwifery and Paramedicine, ACU
- Member, TPCH Research Council.
- Member, TPCH Hospital Research Ethics Committee
- Member, TPCH Emergency Department Research Group
- Member, TPCH Nursing Advisory Committee

Melanie Jessup

- Member, TPCH Falls Injury Prevention Committee
- Member, Statewide Falls Prevention Collaborative Committee
- Member, European Cystic Fibrosis Society
- Member, International Nurse Specialist Group - Cystic Fibrosis
- Member, Australian and New Zealand Cystic Fibrosis Nurses Group

Sandra Miles

- Member, Australian College of Children and Young People's Nurses
- Academic Branch Vice President, National Tertiary Education Union

Petra Lawrence

- Member, Australian College of Nursing
- Nurse Leader, Honor Society of Nursing, Sigma Theta Tau International
- Member, Australian College of Mental Health Nurses
- Member, Research and Research Training Committee, School of Nursing, Midwifery and Paramedicine, ACU
- Member, Australian College of Nursing

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Published by
Australian Catholic University