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welcome

Welcome to the 2010 NRI Annual Report

On behalf of our team we welcome you to the 2010 Nursing Research Institute (NRI) Annual Report. 2010 has been a successful year for the NRI, due to the ongoing strong support we have received from St Vincents and Mater Health Sydney (SV&MHS), the Australian Catholic University (ACU) and the continuing hard work of the NRI staff and the clinician-researchers who are engaged in research projects under the auspices of the NRI. The scope of our nursing-led multidisciplinary research is governed by a vision of generating evidence useful for clinical practice and rigorously evaluating the effect of various strategies for implementing the evidence to change clinical practice. University-clinical collaborative initiatives such as these, and the housing of a nursing-led research team within a clinical institution is essential for clinically informed research. We have now been permanently at our premises at St Vincent's for over a year and it has been a fruitful and productive 12 months.

To recognise the strong collaboration with SV&MHS in 2010 ACU conferred nine staff with honorary titles. The title of Adjunct Professor at St Vincent's Hospital was awarded to: Ms Maeve Tumulty, Director of Nursing & Patient Care and Ms Leslie Everson, Director of Operations; at the Mater Hospital: Ms Barbara Paris, Director of Nursing & Clinical Services; at St Vincent's Private Hospital: Mr Jose Aguilera, Director of Nursing & Clinical Services; Dr Julia Thompson, Practice Development Facilitator and Dr Abdullah Omari, Vascular Physician; and at St Joseph's Hospital: Mr John Geoghegan, Director of Nursing & Operations. Two clinical staff at St Vincent's Private Hospital were also conferred with the title of Clinical Fellow: Ms Edel Murray, Clinical Nurse Consultant (CNC) wound management and Ms Maria Ocampo, CNC and part-time CNC for wound management. We welcome these appointments and look forward to furthering our collaborations with these recipients.

Grant income to the NRI for 2010 exceeded \$460,000 which has allowed our important research work to continue. Some research highlights from the NRI during 2010 include the completion of data collection for the 5-year NHMRC funded Quality in Acute Stroke Care (QASC) study. We are also pleased to report that the NRI has completed an important qualitative study on the views and experiences of key stakeholders regarding outcomes, barriers and facilitators to successful clinical networks which was led by A/Professor Liz McInnes. A/Professor McInnes also led an international collaboration to update one of the most highly cited systematic reviews in the Cochrane Library 'Support Surfaces for Pressure Ulcer Prevention' and updating the Cochrane review 'Support surfaces for Treating Pressure Ulcers'. Professor Kim Walker has continued his work, with Mr Jed Duff, Clinical Research Fellow on venous thromboembolism (VTE) prevention as well as new projects around improving clinical handover and preventing inadvertent hypothermia in patients undergoing shoulder surgery.

In 2010, the NRI implemented a new model for aspiring nurse researchers where new nursing graduates were seconded one day a week from their clinical area to work in the NRI as research assistants. The first new nursing graduates to be involved in this program were Todd Allen from St Vincents Public Hospital and Merren Smith from St Vincent's Private Hospital. As a result of their experiences working at the NRI, both these staff applied for and were successful in obtaining scholarships from ACU to support them to undertake a research project at honours level in 2011. We are hoping to further expand and develop this model across the SV&MHS campuses in 2011.

In November 2010 in collaboration with Professor Jane Phillips (University of Notre Dame) and Professor Trish Davison (UTS/Curtin University), the NRI held a highly successful Quantitative Research Skills workshop in which 29 people attended from all of the SV&MHS campuses. We have run monthly research seminars at St Vincents Hospital and bi-monthly research seminars at the Mater Hospital. In terms of research development across the SV&MHS campuses, we have supported over 70 clinicians over the last two years by providing advice on developing research proposals; reviewing potential journal articles and by providing research tools. There are now four clinician-researchers accommodated at the NRI who have protected time to run their funded research projects and who are able to access expertise within the NRI and experience a research culture first hand.

This annual report informs you about the range and depth of research and related activities currently ongoing at the NRI.

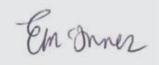


Professor Sandy Middleton

Professor of Nursing Research, SV&MHS Director, National Centre for Clinical Outcomes Research (NaCCOR), ACU

irector

Nursing Research Institute – SV&MHS & ACU



Associate Professor Elizabeth McInnes

National Centre for Clinical Outcomes Research (NaCCOR), Australia

Deputy Director

Nursing Research Institute - SV&MHS & ACU

Governance

The SV&MHS ACU Nursing Research Institute (NRI) is governed by a Steering Committee comprised of the following members.

Mr Steven Rubic	Chief Executive Officer St Vincents & Mater Health Sydney	
Professor Pauline Nugent	Dean, Faculty of Health Sciences ACU	
Professor Michelle Campbell	Head, School of Nursing, NSW & ACT ACU	
Professor Leslie Everson	Director of Operations St Vincents Hospital	
Professor Maeve Tumulty , currently on maternity leave	Director of Nursing and Patient Care St Vincents Hospital	
Ms Sally Whalen	Acting Director of Nursing and Patient Care St Vincents Hospital	
Professor Jose Aguilera	Director of Nursing & Clinical Services St Vincent's Private Hospital	
Professor Barbara Paris	Director of Nursing & Clinical Services Mater Private Hospital	
Professor John Geoghegan	Director of Nursing & Operations St Joseph's Hospital	
Professor Judy Lumby AO	Director, Joanna Briggs Institute Emeritus Professor University of Technology Sydney Adjunct Professor, University of Adelaide Adjunct Professor University of Sydney Independent Advisor	
Professor Kim Walker	Professor of Nursing (Applied Research) St Vincent's Private Hospital	

This group meets twice a year to agree on and monitor the strategic directions of the NRI as well as appraise the

In addition the SV&MHS ACU NRI is supported by a management committee comprised of:

- Jose Aguilera, Director of Nursing & Clinical Services, St Vincent's Private Hospital
- Barbara Paris, Director of Nursing & Clinical Services, Mater Hospital
- Mauve Tumulty / Sally Whalen, Director of Nursing & Patient Care, St Vincent's Hospital
- · John Geoghegan, Director of Nursing & Operations, St Joseph's Hospital
- Kim Walker, Professor of Nursing (Applied Research), St Vincent's Private Hospital
- Michelle Campbell Head, School of Nursing (NSW & ACT), Australian Catholic University
- Sandy Middleton Director, Nursing Research Institute
- Liz McInnes Deputy Director, Nursing Research Institute
- Justine Benfield Executive Officer, Nursing Research Institute

St Vincents & Mater Health Sydney & Australian Catholic University NRI Partnership



Mr Steven Rubic Chief Executive Officer St Vincents & Mater Health Sydney



Professor Pauline Nugent Dean, Faculty of Health Sciences



Professor Michelle Campbell Head, School of Nursing, NSW & ACT



Adjunct Professor Leslie Everson Director of Operations St Vincents Hospital



Adjunct Professor Maeve Tumulty Director of Nursing and Patient Care St Vincents Hospital (maternity leave 2010)



Ms Sally Whalen Acting Director of Nursing and Patient Care St Vincents Hospital



Adjunct Professor Jose Aguilera Director of Nursing & Clinical Services St Vincent's Private Hospital



Adjunct Professor Barbara Paris Director of Nursing & Clinical Services Mater Hospital



Adjunct Professor John Geoghegan Director of Nursing and Operations St Joseph's Hospital



Ms Vicki Dean General Manager St Joseph's Village



Professor Sandy Middleton

Professor Middleton was appointed as Professor of Nursing Research at St Vincents & Mater Health Sydney in March 2008. She is particularly interested in stroke research and nurse led interventions to improve patient outcomes. Her interests also cover implementation research, clinician behaviour change and evidence based practice. Professor Middleton has an active health leadership profile in Australia and sits on a number of peak bodies including: Clinical Council of the National Stroke Foundation. She is a member of the St Vincent's Clinic Foundation Board of Directors.



Associate Professor Elizabeth McInnes

A/Professor Liz McInnes has worked at the ACU NRI since February 2009 as the inaugural Senior Research Fellow. Last year she became A/Professor and Deputy Director of the Nursing Research Institute. A/Prof McInnes has 20 years of experience in conducting and co-ordinating primary research, systematic reviews and guideline development. Before coming to the NRI A/Prof McInnes worked at the

United Kingdom's prestigious National Institute for Clinical Excellence managing the development of national guidelines and systematic reviews for the National Collaborating Centre for Nursing and Supportive Care. Her research interests include systematic review methodology (qualitative and quantitative) and research focused on improving the uptake of evidence.



Professor Kim Walker

Professor Walker has a substantial career in nursing beginning in New Zealand and spanning clinical practice, senior administrative and academic roles at hospitals, colleges and universities in Victoria, Tasmania, and NSW. After completing his doctoral studies at La Trobe University, Melbourne, Kim embarked on an academic career also spending a number of years at the College of Nursing in Sydney before

taking up a senior position at St Vincent's Private Hospital where he currently works in a conjoint professorial position with Australian Catholic University. Kim's research interests are predominantly in the qualitative and philosophical domain but he also has significant experience in implementation research through a number of projects related to improving clinician compliance with best practice guidelines in VTE prevention.

SV&MHS ACU NRI



Administration Staff



Justine Benfield Executive Officer NRI

Patty Zenonos Personal Assistant to Professor Middleton

Research Staff

Nissa Allnutt Simeon Dale Therese Fletcher Elizabeth Maher

SV&MHS Clinicians

Fiona Bailey Melissa Brunner Kerry-Anne Cobbe Renatta Di Staso Asmara Jammali-Blasi Alex Joyner Pukkaporn (Fix) Sangvatanakul Sally Sutherland-Fraser

NRI ACU PhD students

Jane Allnutt (also ACU staff) Peta Drury (also ACU staff) Jed Duff Serena Knowles Rose McMaster (also ACU staff)

NRI ACU Honours students

Todd Allen Merren Smith

Nurses leading multidisciplinary research

The primary aim of the NRI is to lead high calibre patient-focused multidisciplinary research. We also aim to support clinicians who wish to pursue and develop research projects.

To assist clinicians interested in research we provide the following:

- · Advice on all aspects of the research process from developing a research objective and choosing a research design; data collection; analysis and write-up
- Giving advice and feedback on ethics applications; research proposals and funding applications
- Advice on sources of research funding and support for grant writing
- · Advice on report and journal writing and advising on appropriate journals for publication
- · Review of conference abstracts
- ACU Supported Honours program for SV&MHS nurses who are within 5 years of completing their BN
- Secondments to the NRI for clinical staff who are working on a research project
- · Research higher degree supervision for clinical staff enrolled at the ACU

As well as one to one advice and support, we also organise the following events:

- Monthly nursing research seminars at St Vincent's campus
- Bi-monthly nursing research seminars at the Mater Hospital
- Bi-annual Nursing Research Symposium
- Annual Research Skills Workshops
- Annual ACU/SV&MHS research seminar half-day where doctoral students presented research to SV&MH and ACU staff

Research Skills Workshop

The Research Skills Workshop, held on 19th November 2010 was a joint initiative between The SV&MHS & Australian Catholic University NRI, Curtin University and the University of Notre Dame. The program for the day was based on an online learning needs survey which was sent out to all SV&MHS clinicians and promoted on the St Vincents intranet site. Professors of Nursing Sandy Middleton (NRI), Trish Davidson (Curtin/UTS), Jane Phillips (Notre Dame), Kim Walker (NRI) and A/Professor Liz McInnes (NRI) facilitated the sessions. This popular event was attended by 29 participants from St Vincents Hospital, St Vincent's Private Hospital, Mater Hospital, St Joseph's and

Sacred Heart Hospitals. The participants came from a diverse range of departments and clinical positions within these organisations including: nursing (clinicians, educators), drug counselling, quality clinical risk, occupational therapy, clinical education, midwifery and dietetics.

Each participant was contacted to determine their specific research needs and encouraged to bring a research idea with them to work on. On the day, they worked together to complete a workbook provided by adding information to their initial idea and developed a plan of action for progressing their research further.



Rotating work stations



A/Professor Liz McInnes

Date



Monthly research seminars were held at St Vincent's, to disseminate research and promote discussion amongst clinicians. The topics and speakers were from a variety

Title of Session





Professor Patricia Davidson

Speaker

of areas to encourage research ideas, allowing presentation skills to be practiced and increasing knowledge.

Serena Knowles, Doctoral Candidate,

Australian Catholic University

John Rihari-Thomas, Clinical **Emergency Response Systems CNC**

	February	Systematic literature searching – what is it and why is it important	Caroline Yeh, Walter McGrath Library
	March	Searching efficiently – forming a searchable question and finding what you need	Caroline Yeh, Walter McGrath Library & Liz McInnes , SV&MHS ACU Nursing Research Institute
	April	Quality improvement and implementation research – what is the difference?	Jed Duff , Clinical Research Fellow, SVPH
	May	Reading a meta-analysis – what do the results tell me for clinical practice?	Liz McInnes , SV&MHS ACU Nursing Research Institute
	June	Doing research at SV&MHS: the Perioperative pressure ulcer prevention project	Sally Sutherland-Fraser CNC, SVH Peri Operative & Interventional Services (PAIS) Operating Suite
	July	Home Heart Walk Study - Considerations in setting up a randomised controlled trial.	Hui Yun Du, Doctoral Candidate, Curtin University of Technology
	August	Humanities and nursing practice: methods in historical and philosophical research	Graeme Curry, Registered Nurse/ Quitline Advisor, Alcohol and Drug Services, St Vincent's Hospital

Implementing the evidence – results from

a study in ICU

The PACE Project

NRI staff shown in bold

September

October

NRI Research Seminar series for 2010

Research Grants

Ongoing grants awarded in previous years

(NRI staff shown in bold)

Chan D. K. Y, Levi C, **Middleton S**, Chen J. X. C, Cordato D, Pollack M. Project grant. Health Services Research: A Randomised Controlled Trial to evaluate a Model of Comprehensive Stroke Care. National Health and Medical Research Council. 2008: \$173,150; 2009: \$213,150; 2010: \$113,150. Total funds awarded: \$499,450.

Ingham J, Phillips J, **McInnes E**, Mohamudally A. Systematic review of the pain and symptom literature to determine suitable tools for screening and assessment and measure intervention outcomes of cancer patients. NSW Cancer Institute. 2009-2010: \$30,000.

Middleton S, Elmes T, Burke V, Sheehan M, **Sutherland-Fraser S**. Pressure Ulcer Prevention Program (PuPP) in perioperative care: Evaluation of a

nursing behaviour change education intervention. Friends of the Mater Foundation. 2008: \$16,000.

Middleton S, Levi C, Griffiths R, Grimshaw J, Ward J, D'Este C, **Dale S.** Managing fever, hyperglycaemia and dysphagia post-stroke: Measuring clinician behaviour change following evidence implementation. College-Consortium Fund. College of Nursing. 2007: \$30,009.

Middleton S, Marcus R, Faux S, O'Loughlin G, **Dale S.** Improving management of fever, hyperglycaemia and swallowing dysfunction in acute stroke at St Vincents Hospital. St Vincents Clinic Foundation. 2009: \$50,000.

Middleton S, McInnes E. GMCT Scoping Study: What makes successful clinical networks? Sax Institute 2009: \$30.000.

Grants awarded in 2010

(NRI staff highlighted)

BBailey F, Middleton S, McInnes E, Elliott D. Management of medication incidents at St Vincent's Hospital. St Vincents Clinic Foundation. \$25,000.

Brunner M, Markus R, **McInnes E, Middleton S,** Trudinger C, Van Vliet P. Coordinated Multidisciplinary Circuit Therapy Class. St Vincent's Clinic Foundation. \$25,000.

Castaldi P, Elliott E, Scott A C, **Middleton S,** Craig J, D'Este, Paul C, McElduff P, Pollock C. Organisational change in healthcare: Determinants of Effective Clinical Networks. ARC Linkage Grant. 2010 \$660,982. NOT ACCEPTED as obtained NHMRC funding also. LP100100300.

Cheung W, Campbell L, Fulcher G, **Middleton S**, Pollock C, Watt H, McElduff P. Health Economics of Diabetes Case Detection Through Hospital Emergency Admissions. Australian Diabetes Society. \$19,685.

Haines M, Redmond S, ,Castaldi P, D'Este C, Craig J, Elliott E, Sanson-Fischer R, Scott A. Associate Investigators: Yanos S, Pollock C, Needham K, **Middleton S**, Paul C, McElduff P. Determinants of Effective Clinical Networks. National Health and Medical Research Council Partnership Grant. \$338,850. Grant ID 571447.

Knowles S, Middleton S. Multidisciplinary implementation of an evidence-based practice: Collaborative quality improvement in Intensive Care Unit (ICU) patient care. The Curran Foundation. \$15,000.

McCluskey A, Ada L, **Middleton S**, Goodall S, Grimshaw J, Kelly P. The Out-and-About Trial: Improving quality of life by increasing outdoor journeys after stroke.

National Health and Medical Research Council Project Grant. 2010: \$221,675; 2011: \$221,675, 2012: \$133,250. Total funds awarded: \$576,600. Project Grant ID 632721.

McInnes E, Middleton S, Quoyle C, Gould D. Improving hand hygiene practice: identifying behavioural, attitudinal and organisational factors using an error typology framework. St Vincent's Clinic Foundation Research Grant. \$25,000.

Middleton S, McInnes E, Drury P, Dale S, Levi C, D'Este C. Measuring context of care in NSW acute stroke units. Faculty Research Grant \$15000.

Middleton S. Research Infrastructure Grant. Australian Catholic University. \$22,117.

Middleton S, Dale S. The Quality in Acute Stroke Care Project. The Curran Foundation. \$25,000.

Middleton S, Paris B, **Joyner A, McInnes E,** Elliot D. Examining the causes of reported medication incidents at the Mater Hospital. Friends of the Mater Hospital. \$15,000.

Sutherland-Fraser S, Middleton S, McInnes E. Pressure Ulcer Prevention
Project. NSW Operating Theatre
Association grant. \$10,000.

Walker K, Aguilera J. To fund the establishment of a Centre for Evidence-Based Patient Care at SVPH. The Elizabeth and David Curran Foundation. \$100,000.

Walker K. Patient-Centered care: Exploring the Rhetoric and Reality at SVPH. SV&MHS Nursing Research Grants Scheme. \$10,549.

Walker K. Nurse ethical decision making and further healthcare planning. Curran Foundation. \$10,943

Walker K, Duff J, Omari A, Middleton S, McInnes E. Improving venous thromboembolism (VTE) prophylaxis in medical patients using educational outreach visits: Peer on peer education (PoPE) for better VTE prophylaxis: The PoPE study. St Vincent's Clinic Foundation. \$25,000.

Webster S, Allnutt J, Boss P, Guy J. 2010. Delivering a leadership capacity building program for mental health nursing in Vanuatu. Australian Leadership Awards (ALA) Fellowships Program, AusAID. \$58,840.

Zwar NA, **Middleton S,** Reddel H, van Schayck O, Crockett A, Dennis S. Project Grant. A cluster randomised trial of management by a practice nurse - GP team of patients newly diagnosed with COPD. National Health and Medical Research Council Project Grant ID 630421. 2010: \$419,750; 2011: \$221,325; 2012: \$153,200. Total funds awarded: \$794,275.

2010 Peer reviewed publications

Allnutt J, Allnutt N, McMaster R, O'Connell J, Hillege S, Middleton S, Della P, Gardner G, Gardner A. Clients' understanding of the role of Nurse Practitioners in Australia. Australian Health Review 2010; 34: 59-65. (ERA Ranking: C)

Cadilhac D, Lannin N, Anderson C, Levi C, Faux S, Price C, Middleton S, Lim J, Thrift A, Donnan G. Protocol and pilot data for establishing the Australian Stroke Clinical Registry (AuSCR). International Journal of Stroke 2010; 5 (3): 217-226. (ERA Ranking: C)

Chiarella M, McInnes E. Who to turn to? 'Knowing the ropes' in an underbounded health care system. Contemporary Nurse 2010; 36(1/2):10-20. (ERA Ranking: C)

Chiarella M, Salvage, J, McInnes **E.** Celebrating connecting with Communities: Co-production in global Primary Health Care. Primary Health Care Research & Development 2010; 11:108-122. (ERA Ranking: C)

Davis DL, Walker K. Case-loading midwifery in New Zealand: Making space for childbirth. Midwifery 2010; 26: 603-608 (ERA Ranking: A*).

Davis D, Walker K. The corporeal, the social and space/place: exploring intersections from a midwifery perspective. Gender, Place and Culture: A Journal of Feminist Geography 2010; 17: 3, 377-391. (ERA Ranking: A).

Davis D, Walker K. Re-discovering the material body through an exploration of theories of embodiment. Midwifery 2010; 26: 457-462 (ERA Ranking: A*).

Duff J, Walker K. Improving the safety and efficacy of warfarin therapy in a metropolitan private hospital: A multidisciplinary quality improvement project using statistical process control. Contemporary Nurse 2010; 35(1) 35(2): 234-244 (ERA Ranking: C).

Gardner G, Gardner A, Middleton S, Della P, Doubrovsky A. A snapshot of Australian nurse practitioners' extended practice activities. Nurse Practitioner Series 2010; 3 (1): 8-15. (ERA Ranking: C)

Gardner G, Gardner A, Middleton S, Della P, Kain V, Doubrovsky A. The work of nurse practitioners: Findings from a national work sampling study. Journal of Advanced Nursing 2010; 66; (10): 2160-2169. EDITORS CHOICE. (ERA Ranking: A*) Gardner G, Gardner A, **Middleton S,** Gibb

M, Della P, Duffield C. Development and validation of a novel approach to work sampling: a study of nurse practitioner work patterns. Australian Journal of Advanced Nursing 2010; 27 (4): 4-12. (ERA Ranking: C)

Knowles S, Rolls K, Elliott D, Hardy J, Middleton S. Patient care guidelines: A telephone survey of intensive care practices in New South Wales. Australian Critical Care 2010; 23: 21-29. (ERA Ranking: A)

Li F, Walker K, McInnes E, Duff J. Testing the effect of a targeted intervention on nurses' compliance with best practice mechanical venous thromboembolism prevention. Journal of Vascular Nursing 2010; 283: 92-96 (ERA Ranking: A).

McCluskey A, Middleton S. Increasing delivery of an outdoor journey intervention to people with stroke: A feasibility study involving five community rehabilitation teams. Submitted to Implementation Science 2010; 5: 59. (ERA Ranking: C)

McCluskey A, Middleton S. Delivering an evidence-based outdoor journey intervention to people with stroke: Barriers and enablers experienced by community rehabilitation teams. BMC Health Services Research 2010; 10: 18. (ERA Ranking: B)

McInnes E. Cochrane reviews - in their own words: support surfaces to prevent pressure ulcers. Cochrane review. Journal of Evidence Based Medicine 2010; 3:132. (ERA Ranking: A)

McInnes E, Cullum NA, Jammali-Blasi A, Bell-Syer SEM, Dumville JC. Support surfaces for treating pressure ulcers. Cochrane Database of Systematic Reviews 2010 (ERA Ranking: A*, 8th most accessed Cochrane review 2009)

McInnes E, Jammali-Blasi A, Cullum NA, Bell-Syer SEM, Dumville JC. Support surfaces for pressure ulcer prevention. Cochrane Database of Systematic Reviews 2010 (ERA Ranking: A*)

McMaster R, Hawley R, Fletcher T, Middleton S, Gillet W, McDermott S. Evaluation of a Housing Support Program for people who are at risk of homelessness: The perspective of people who refer clients to the program. Journal of Social Distress and the Homeless 2010; 19 (3-4); 18-46. (ERA Ranking: A)

Middleton S, Gardner G, Gardner A, Della P, Gibb M, Millar L. The first Australian nurse practitioner census: A protocol to guide standardised collection of information about an emergent professional group. International Journal of Nursing Practice 2010; 16: 517-524. (ERA Ranking: A)

Sangvatanakul P, Hillege S, Lalor E, Levi C. Hill K, Middleton S. Setting stroke

research priorities: The consumers' perspective. Journal of Vascular Nursing 2010; 28 (4): 121-131. (ERA Ranking: A)

Walker K, Middleton S, Rolley J, Duff J. Nurses report a healthy culture: results of the practice environment scale (PES-AUS) in an Australian hospital seeking magnet recognition. International Journal of Nursing Practice 2010; 16 (6): 616-623. (ERA Ranking: A)

Webster S, Lopez V, Allnutt J, Claque, L, Jones D, Bennett P. Undergraduate nursing experiences in a rural clinical placement. Australian Journal of Rural Health 2010; 18; 194-198. (ERA Ranking: B)

Foreword for a book

Middleton S. Stroke Services in Australia in Perry L, Williams J, Watkins C. Acute Stroke Nursing: Evidence-Informed Practice. Blackwell Publishing Ltd. Chichester, UK 2010...

2010 Published Abstracts (peer reviewed)

(NRI staff highlighted)

Cadilhac D, Lannin N, Anderson C, Levi C, Faux S, Price C, Paice K, Middleton S, Donnan G. The Australian stroke clinical registry: formative evaluation. International Journal of Stroke 2010; 5; S1: 7.

Drury P, Levi C, Griffiths R, Ward J, Grimshaw J, D'Este C, Cheung W, McElduff P, Hardy J, McInnes E, Middleton S. Routine practices for fever, hyperglycaemia and dysphagia management in NSW acute stroke units. International Journal of Stroke 2010; 5; S1: 26. (ERA Ranking: C).

Jammali-Blasi A, McInnes E, Markus R, Faux S, O'Loughlin G, Dale S, Middleton S. 90-day outcomes for a cohort of patients admitted to a metropolitan acute stroke unit. Smart Strokes 2010, 6th Australasian Nursing and Allied Health Stroke Conference. 5-6 August

Jammali-Blasi A, McInnes E, Markus R, Faux S, O'Loughlin G, Dale S, Middleton S. Death, dependency, disability and health status of stroke patients 90-days post acute stroke unit care. International Journal of Stroke 2010; 5; S1: 12. (ERA Ranking: C).

McInnes E. The synthesis of qualitative health research: synthesis methods and analytical techniques. The 16th Qualitative Health Research Conference, Vancouver 3-5th October, 2010. Book of abstracts, p84.

McInnes E, Middleton S, Gardner G, Haines M, Haertsch M, Paul C, Castaldi P. What makes successful clinical networks? A qualitative study of stakeholder views. Network to Network 2010. The inaugural Australasian Clinical Networks Conference, Melbourne 17-19th March, 2010. Book of Abstracts.

McMaster R, Hawley R, Fletcher **T, Middleton S.** An evaluation of a community housing support program. Community and Primary Health Care Nursing Conference, Royal College of Nursing Australia. Alice Springs, 24 - 26 October 2010. Book of Abstracts, P51.

Schurr K, Middleton S. Evidence-based practice: Is it stuck in the 'too hard' basket? Smart Strokes 2010, 6th Australasian Nursing and Allied Health Stroke Conference. 5-6 August 2010. Terrigal, NSW. P.18. (One and a half hour workshop).

Sutherland-Fraser S, McInnes E, Maher **E, Middleton S.** 'Behind the Research: What does the literature tell us about perioperative pressure ulcers? Annual Conference of the N.S.W. Operating Theatre Association Inc. (NSW OTA) Newcastle, 11-13 March.

Sutherland-Fraser S, Middleton S, McInnes E, Maher E. 'Building a strong future from research on pressure ulcer risk management' National Conference of the Australian College of Operating Room Nurses (ACORN) Perth, 19-22 May.



Reports and Monographs

(NRI staff highlighted)

McInnes E, Gardner G, Middleton S. What do stakeholders say are the benefits of clinical networks? Final Report. November 2010. Pages 96.

McInnes E, Maher E, Gardner G, Middleton S. GMCT: How do Stakeholders Construe Desirable Outcomes and Determinants of Success of Clinical Networks? A Qualitative Study. Interim Report: Participant Descriptors and Keywords. February 2010.

McInnes E, Middleton S. GMCT Scoping Study: What makes successful clinical networks? Report for Sax Institute.

Mohamudally A, Phillips J, McInnes E, Ingham J. Determining suitable instruments for screening and assessment of multiple physical symptoms in a generic cancer population. Report submitted to Cancer Institute NSW. The Cunningham Centre for Palliative Care, Darlinghurst: NSW.

Guideline Development

Middleton S. National Stroke Foundation. Clinical Guidelines for Stroke Management. Melbourne: National Stroke Foundation, 2010. Member of the Expert Working Group. (NHMRC endorsed).

Conference participation 2010

(NRI staff highlighted)

Ahearn T, Gardner A, Gardner G, Middleton S, Della P. Evaluation of interrater reliability of telephone interviewers using self-rated health status measures. The 6th INP/APNN Conference, 8-11 September, Brisbane Convention and Exhibition Centre, Brisbane, QLD.

Brunner M, Markus R, McInnes E, English C, **Middleton S.** Coordinated Multidisciplinary Circuit Therapy Class: An Evaluation. Smart Strokes 2010, 6th Australasian Nursing and Allied Health Stroke Conference. 5-6 August, Terrigal, NSW. Poster.

Cadilhac D. Lannin N. Anderson C. Levi C. Faux S, Price C, Paice K, Middleton S, Donnan G. The Australian stroke clinical registry: formative evaluation. Stroke Society of Australasia 21st Annual Scientific Meeting. 1-3 September, Melbourne, VIC.

Cadilhac D, Lannin A, Anderson C, Levi C, Faux S, Price C, **Middleton S**, Donnan G. on behalf of the AuSCR Consortium Partners. The Australian Stroke Clinical Registry: achievements in the first year. XIX European Stroke Conference, 25-18 May, Barcelona, Spain. Poster.

Drury P, Levi C, Griffiths R, Ward J, Grimshaw J, D'Este C, Cheung W, McElduff P, Hardy J, McInnes E, Middleton S. Routine practices for fever, hyperglycaemia and dysphagia management in NSW acute stroke units. Stroke Society of Australasia 21st Annual Scientific Meeting. 1-3 September 2010 Melbourne, VIC.

Duff J Changing Practice. Invited presentation, Sanofi-Aventis VTE Champions Weekend. 11-12 September, Crown Casino, Melbourne, VIC.

Duff J., Cubitt J. The Perioperative Nursing Workforce Project Update: A partnership between the NSW Operating Theatre Association and the NSW Department of Health. The NSW Operating Theatre Association Annual Conference. March 11-13, Newcastle, NSW.

Duff J, Walker K, Omari A. Translating venous thromboembolism prevention evidence into practice: A multidisciplinary evidence implementation project. Vascular 2010- the annual scientific meeting of the Australian and New Zealand Society for Vascular Surgery. Oct 1-3, the Gold Coast Convention and Exhibition Centre, Gold Coast, OID.

Duff J, Walker K, Lee J & Stratton C. St Vincent's Private Hospital venous thromboembolism prevention project: Analysis of reduced cost and improved clinical outcomes [Poster]. International Society for Pharmacoeconomics and Outcomes Research 4th Asia-Pacific Conference. September 5-7, Hilton hotel, Phuket Thailand.

Haines M, Haertsch M, Castaldi P, Elliott E, Middleton S, Redman S. Clinical Networks as enablers of healthcare innovation - but what do they do? Academy Health's Annual Research Meeting (ARM), Boston, June 27-29, Poster.

Jammali-Blasi A, McInnes E, Markus R, Faux S, O'Loughlin G, **Dale S, Middleton S.** 90-day outcomes for a cohort of patients admitted to a metropolitan acute stroke unit. Smart Strokes 2010, 6th Australasian Nursing and Allied Health Stroke Conference. 5-6 August, Terrigal, NSW.

Jammali-Blasi A, McInnes E, Markus R, Faux S, O'Loughlin G, Dale S, Middleton S, Death, dependency, disability and health status of stroke patients 90-days post acute stroke unit care. Stroke Society of Australasia 21st Annual Scientific Meeting. 1-3 September, Melbourne, VIC.

McCluskey A, Middleton S. Community occupational therapists and physiotherapists delivered 15% more evidence-based outdoor journey sessions to people with stroke after audit and feedback about their practice. XIX European Stroke Conference, 25-18 May, Barcelona, Spain. Poster.

McInnes E. Challenges in conducting systematic reviews of qualitative research: methods and analytical techniques. Qualitative Health Research Conference, 3-5 October Vancouver, Canada.

McInnes E, McMaster R, Jammali-Blasi, **A.** Research workshop presented at Mental Health Consultation Liaison Nurses' Association of NSW and ACT 10th Annual Conference; Friday 12 November , North Sydney Harbourview Hotel, Sydney, NSW.

McInnes E, Middleton S, Gardner G, Haines M, Haertsch M, Paul C, Castaldi P. What makes successful clinical networks? A qualitative study of stakeholder views. Network to Network 2010 - The Inaugural Australasian Clinical Networks Conference, March, Melbourne, VIC, P.5.

McInnes E, Seers K, Tutton E. Challenges in conducting meta-ethnography: implications for synthesis. Nordic Interdisciplinary Conference on Qualitative Methods in the Service of Health, 3-4 May, Uppsala, Sweden. (Unable to present).

McMaster R, Hawley R, Fletcher T, Middleton S. An evaluation of a community housing support program. Community and Primary Health Care Nursing Conference, Royal College of Nursing Australia. 24 - 26 October, Alice Springs, NT.

Middleton S, Gardner A, Gardner G, Della P. Australian Nurse Practitioner Study (AUSPRAC). The 6th INP/APNN Conference, 8-11 September, Brisbane Convention and Exhibition Centre, Brisbane, QLD.

Middleton S, Levi C, D'Este C, Dale S, Griffiths R, Grimshaw J, Ward J, Evans M, Quinn C, Cadilhac D. 90-day mortality and morbidity post acute stroke in New South Wales, Australia: Pre-intervention results from the Quality in Acute Stroke Care (QASC) cluster trial. Smart Strokes 2010, 6th Australasian Nursing and Allied Health Stroke Conference. 5-6 August. Terrigal, NSW. Poster.

Middleton S, Levi C, D'Este C, Dale S, Griffiths R, Grimshaw J, Ward J, Evans M, Quinn C, Cadilhac D. 90-day mortality and morbidity post acute stroke in New South Wales, Australia: Pre-intervention results from the Quality in Acute Stroke Care (QASC) cluster trial. XIX European Stroke Conference, 25-18 May, Barcelona, Spain, Poster,

Polga T, Gardner A, Gardner G, Middleton S, Della P. Telephone interviewer interrater reliability for a national study of nurse practitioner patient outcomes. RCN International Nursing Research Conference, 11-13 May, Sage, Gateshead, UK.

Schurr K, Middleton S. Evidence-based practice: Is it stuck in the 'too hard' basket? Smart Strokes 2010, 6th Australasian Nursing and Allied Health Stroke Conference. 5-6 August, Terrigal, NSW. P.18. (One and a half hour workshop).

Sutherland-Fraser S, McInnes E, Maher E, Middleton S. Building a strong future: Research on pressure ulcer risk management. Australian College of Operating Room Nurses (ACORN) National Conference Westward bound. 19-22 May, Perth, WA.

Sutherland-Fraser S, Middleton S, McInnes E, Maher E. Behind the Research: What does the literature tell us about perioperative pressure ulcers? NSW Operating Theatre Association 2010 Annual Conference, 11-12 March, Newcastle, NSW.

Walker K. Concurrent paper: St Vincent's Private Hospital Venous Thromboembolism (VTE) Prevention Project: Improving clinician compliance with evidence based guidelines. International Forum on Quality and Safety in Health Care, 20-23 April, The Acropolis, Nice, France.

Walker K. Concurrent paper: The Holy Grail of Nursing Excellence: Magnet Recognition as Strategy for Sustainable Success. The National Australian Conference on Evidence-based Clinical leadership, Joanna Briggs, November 22-24, Adelaide, SA.

Walker K. Invited Keynote: Holistic care, evidence-based practice and ethics: Exploring the tensions. The Leading Edge: Essentials in medical and surgical nursing care. Ausmed Conferences Ltd, August. 2, Sydney, NSW.

Walker K, Casey V. Concurrent paper: Courage at the forefront: leadership strategies to create and strategically sustain a culture of excellence. Magnet: A culture of caring. ANCC National Magnet Conference, 13-15 October, Phoenix, Arizona, USA.

Zwar N, Middleton S, Marks G, Comino E, Wilson S, Vagholkar S, Hermiz O, Hasan I, Xuan W. A cluster randomised controlled trial of nurse and Family Physician partnership for care of Chronic Obstructive Pulmonary Disease. 38th North American Primary Care Research Group Annual Scientific Meeting. 13 to 17 Nov 2010. November, Westin Seattle, Seattle, USA.

Invited lecture, seminar or workshop presentation

Invited lecture, seminar or workshop presentation

S Middleton

Middleton S. Thinking about Sampling and Recruitment. Research Skills Workshop. St Vincent's & Mater Health Sydney. 19 November 2010.

Middleton S. Developing and conducting an audit. Agency for Clinical Innovation Stroke Services NSW Snowball Program Session 1. Ryde Education Centre, Macquarie Hospital, 27 October 2010.

Middleton S. Experiences from a medical expedition to a remote Himalayan village. 2010 St Vincent's Hospital Medical Alumni Conjoint Dinner. Cruising Yacht Club, Australia, 22 June 2010.

Middleton S. Invited Presenter. Fellowship. College of Nursing Fellow's Reception. Burwood, Sydney, 25 March 2010.

Middleton S. Invited Presenter. Quality in Acute Stroke Care Project, Aged Care -Towards Better Care Conference. Bankstown-Lidcombe Hospital, Sydney 30 April 2010.

Awards 2010

Awards received by NRI staff and secondees included the 2010 Australian College of Operating Room Nurses' (ACORN) Excellence in Perioperative Nursing Award. This award was presented to Sally Sutherland-Fraser, CNC for Perioperative Practice Development, for her research on improving pressure ulcer prevention and treatment in the perioperative setting which was conducted at St Vincents Public Hospital and the Mater.



Sally Sutherland-Fraser receives her ACORN award

Jed Duff (Clinical Research Fellow and NRI PhD candidate) was awarded \$1500 for professional development as part of the St Vincent's Clinic Excellence Award for a Clinical Researcher-Emerging Researcher. Serena Knowles (NRI PhD candidate and ICU RN at St Vincent's Private Hospital) was acknowledged with a 'Highly Commended' researcher award by the St Vincent's Clinic.

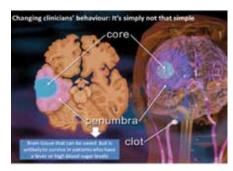
At the St Vincent's Clinic Excellence Awards, as well as the above awards, A/Professor Liz McInnes and Professor Sandy Middleton received a grant of \$25,000, for research into 'Improving hand hygiene practice: identifying behavioural, attitudinal and



Associate Professor Liz McInnes, Professor Sandy Middleton, Professor Kim Walker, Ms Serena Knowles and Mr Jed Duff at the St Vincent's Clinic Excellence Award

organisational factors using an error typology framework'. In addition Professor Kim Walker and Jed Duff were awarded a grant of \$25,000 for study into 'Improving Venous Thromboembolism (VTE) prohylaxis in medical patients using educational outreach visits. Peer on Peer Education (PoPE) for better VTE prophylaxis: The PoPE Study.

We were delighted that Peta Drury (NRI PhD candidate and ACU SoN Lecturer) received third place in the very first highly contested ACU Three Minute Thesis Contest for her presentation on 'Behaviour change intervention aimed at changing clinician behaviour in management of fever and high blood sugar levels in stroke'. National Stroke Guidelines exist for management of these three physiological parameters. Baseline care was found to be sub-optimal, and so a new behaviour change intervention was implemented aimed at changing clinician behaviour in this area. Follow-



Peta Drury's slide from her 3 minute thesis presentation.

up research will determine the success of the intervention in a cluster randomised controlled trail

The competition is an exercise in developing researchers' communication skills. The six finalists had three minutes to present their PhD research topic in clear, engaging and concise terms to a nonspecialist audience.

Asmara Jammali-Blasi was awarded a Smart Strokes Scholarship to attend the Smart Strokes 6th Australasian Nursing and Allied Health conference where she presented her paper '90-Day Outcomes for a Cohort of Patients Admitted to a Metropolitan Acute Stroke Unit'. This was Asmara's first conference presentation and she gave a very professional and interesting presentation which was well received. Asmara also received a St Vincent's Clinic Grant to attend the 2010 Stroke Society of Australasia Annual Scientific Meeting held in Melbourne at the beginning of September where she also presented her study findings.



Asmara presents at the Smart Strokes

Contribution to the profession

S Middleton

Member, St Vincent Clinic Board of Directors, 2008 to present.

Member, National Stroke Foundation. Clinical Council. June 2010 to present.

Chair, Australian Clinical Stroke Registry Steering Committee. October 2008 to present.

Member, National Institute of Clinical Studies Emergency Department Stroke and TIA Care Bundle Evaluation Project Advisory Committee (A Section 39 committee under the NHMRC Act.) May 2010 to present.

Member, Australian Stroke Coalition. Workforce Training and Professional Development Working Group. October 2008 to present. Royal College of Nursing Australia representative

Member, Steering Committee, Thrombolysis Implementation Plan for Stroke(TIPS). NHMRC funded Cluster randomized controlled trial. July 2010 to present.

Chair, Ethics Committee, College of Nursing. 2005 to present.

Member, St Vincent's Clinic Foundation. Medical Grant Review Panel, 2007 to present.

Chair, Quality in Acute Stroke Care Project Advisory Group. 2004 to present.

Chair, Outcomes Committee. AVERT Trial. A multi-site NHMRC-funded randomized controlled trial of early mobilization following stroke. November 2006 to present.

Chair, Scientific Committee. Smart Strokes Australasian Nursing and Allied Health Stroke Conference Scientific Committee. 2005 to present.

Member, Greater Metropolitan Clinical Taskforce Stroke Co-ordinating Committee. August 2005 to present.

Member, Greater Metropolitan Clinical Taskforce Stroke Research Working Group. Sept 2004 to present.

E McInnes

Editor, author and peer-reviewer for Cochrane Wounds Group;

Member, International Editorial Advisory Board and peer reviewer for World-views in Evidence Based Nursing (Impact factor 1.944 – number one nursing journal as of June 2010):

Peer-reviewer: International Journal of Evidence-based Healthcare; International Journal of Nursing Studies; Medical Journal of Australia;

Peer reviewer for NHMRC project grants Associate of Cochrane Qualitative Methods Group;

Member of Association for Qualitative Research

Member, Health Services Research Association of Australia & New Zealand Member of Advisory Committee for UK-based study Meta-ethnography on Chronic Pain Management (NIHA Health Service Research Board Funding)

K Walker

Editorial Committee, Aporia: bi-lingual journal (French/English) inaugurated by the University of Ottawa.

Advisory Editorial Board, Contemporary

Manuscript Review: Nursing Inquiry, Contemporary Nurse, Nursing Philosophy, Journal of Clinical Nursing, Aporia

J Duff

Chairman, NSW Therapeutic Advisory Group (TAG) Drug Use Evaluation Support Group

Assistant treasurer, NSW Operating Theatre Association

Facilitator, NSW Health and NSW Operating Theatre Association Perioperative Nursing Workforce Project

A Jammali-Blasi

Author and Reviewer Cochrane Wounds Group



Researchers working at the NRI

Professor Sandy Middleton

In addition to mentoring clinicians and supervising PhD students on projects profiled later in this report, Professor Middleton collaborates on the following research projects:

Health Services Research: A Randomised Controlled Trail to evaluate a Model of Comprehensive Stroke Care. Chan DKY, Levi C, Middleton S, Chen JXC, Cordato D, Pollock M.

Funding Source: National Health and Medical Research Centre (NHMRC)

Total funds awarded: \$499,450 - 2008: \$173,150; 2009:213,150; 2010: \$113,150.

A cluster randomised trail of management by a practice nurse – GP team of patients newly diagnosed with COPD. Zwar NA,

Middleton S, Reddel H, van Schayck O, Crockett A, Dennis S. Funding Source: NHMRC Project Grant

Total funds awarded: \$794,275 -2010:\$419,750; 2011:\$221,325; 2012:\$153,200.

The Out-and-About Trial: Improving quality of life by increasing outdoor journeys after stroke. McCluskey A, Ada L, Middleton S, Goodall S, Grimshaw J, Kelly P.

Funding Source: NHMRC Project Grant Total funds awarded: \$576,600 -2010:\$221,675; 2011:\$221,675, 2012:\$133,250.

Setting Stroke Research Priorities: The Clinicians Perspective. Middleton S, Allnutt N, McInnes E, Rowley J, Hillege S, Lalor E, Levi C, Hill K.

Funding Source: Unfunded

Projects in Progress

Profiles of Research and

NRI Researchers shown in bold

Researchers NRI

Associate Professor Elizabeth McInnes

Title

What makes successful clinical networks? A qualitative study of stakeholder views of the preconditions for and outcomes of successful networks

Researchers

McInnes E, Middleton S, Haines M, Paul C, Haertsch M, Castaldi P, Elliott E, Needham K, Maher E.

Research Design

Qualitative study

Aim

To identify stakeholder views on the outcomes of successful clinical networks and the barriers and facilitators of effective clinical networks

Methods

A sample of 27 participants from four stakeholder groups were interviewed using semi-structured face-to-face audiotaped interviews. Interview data were thematically analysed to generate themes relating to the study aims.

Results

The factors identified by participants as important preconditions for the establishment of successful clinical networks: building relationships; effective leadership; strategic evidence-based workplans; adequate resources; able to implement and evaluate. Two major themes summarised the main outcomes thought to be associated with successful outcomes: connecting and engaging, and

improving quality of care and optimising health outcomes.

Conclusions

This study adds new knowledge to the body of literature on clinical networks. Identifying the preconditions for the establishment of successful clinical networks from an insider's point of view, provides information on those factors likely to be influential and amenable to modification. A journal article is currently being prepared.

Title

The effectiveness of support surfaces for treating pressure ulcers

Researchers

McInnes E, Jammali-Blasi J, Dumville J, Bell-Syer S, Cullum N.

Research Design

Systematic Review (Cochrane Review)

Aim

To undertake a systematic review of the effectiveness of pressure relieving support surfaces in treating pressure ulcers.

Method

Randomised controlled trials, published or unpublished, which assessed the effects of support surfaces in treating pressure ulcers (of any grade), in any patient group, in any setting compared to any other support surface. Details of eligible studies were extracted and summarised by two review authors using a data extraction table. The methodological quality of each trial was assessed by two authors using the Cochrane risk of bias tool.

Results

Eighteen eligible trials were identified. There is limited evidence of the effectiveness of air-fluidized devices and some low-air-loss (low-tech) devices as treatment for established pressure ulcers. There was no conclusive evidence to support the superiority of alternatingpressure devices, low-air-loss therapy or continuous low-pressure supports in the treatment of existing pressure ulcers

Conclusion

The evidence base requires improving by undertaking robust trials to ascertain which support surfaces are most effective for the treatment of pressure ulcers.

Publications listed under heading 'Peer reviewed publications'

Title

The effectiveness of support surfaces for pressure ulcer prevention

Researchers

McInnes E, Dumville J, Jammali-Blasi J, Bell-Syer S, Cullum N.

Research Design

Systematic Review (Cochrane Review)

Aim

To undertake a systematic review of the effectiveness of pressure relieving support surfaces in the prevention of pressure ulcers.

Method

Details of eligible studies (RCTs) were extracted and summarised by two review authors using a data extraction table. Trial quality was assessed by two authors using the Cochrane risk of bias tool.

Foam alternatives to the standard hospital foam mattress can reduce the incidence of pressure ulcers in people at risk. The relative merits of alternating and constant low pressure devices are unclear. Pressurerelieving overlays on the operating table reduce postoperative pressure ulcer incidence, although two studies indicated that foam overlays resulted in adverse skin changes. Pooled analysis of three trials indicated that Australian standard medical sheepskins prevented pressure ulcers. There is insufficient evidence to draw conclusions on the value of seat cushions, limb protectors and various constant low pressure devices as pressure prevention strategies.

Conclusion

Higher specification foam mattresses rather than standard hospital foam mattresses should be used in people at high risk of pressure ulcer development. Organisations might consider the use of some forms of pressure relief for high risk patients in the operating theatre.

Publications listed under heading 'Peer reviewed publications'

Title

Improving hand hygiene practice: identifying behavioural, attitudinal and organisational factors using an error typology frameworks

Researchers

McInnes E, Middleton S, Quoyle C, Gould D, Maher E.

Research Design

Survey and semi-structured interviews

Aim

To identify behavioural, attitudinal and organisational factors that facilitate or

inhibit hand hygiene best practice across clinical disciplines at St Vincent's Hospital (SVH).

Method

Clinicians will be randomly selected to participate in an online survey on the barriers and facilitators of hand hygiene best practice. Senior executives will be interviewed for their views on the organisational and cultural barriers to best practice hand hygiene.

Study Progress

Ethics application is currently being prepared.

Title

Determining suitable instruments for screening and assessment of multiple physical symptoms in a generic cancer population

Researchers

Ingham J, Phillips J, **McInnes E,** Mohamudally A.

Research Design

Critical review

Aim

To review suitable instruments for screening and assessment of multiple symptoms and for measurement of intervention outcomes of cancer patients in a generic cancer outpatient population.

Methods

A critical review of literature was undertaken of relevant studies relating to the study aim.

Study Progress

A journal paper is currently being drafted.

Title

Systematic review and synthesis of qualitative health research: current debates and methodological developments

Researchers

Tong A, Fleming K, McInnes E.

Research Design

Critical review based on experiences of authors using methods of qualitative synthesis

Aim

To present methodological issues surrounding the use and practicalities of qualitative synthesis methods such as meta-ethnography and critical interpretive synthesis and propose strategies for addressing some of these

Method

Critical review based on the literature and authors' experiences

Study Progress

A journal paper is currently being drafted.

Title

What influences older people's acceptance of falls prevention interventions: a metaethnography of qualitative studies

Researchers

McInnes E, Seers K, Tutton E, **Jammali-Blasi** A.

Research Design

Meta-ethnography

Aim

To synthesise qualitative studies of older peoples' views and preferences for falls prevention interventions

Method

Data sources. Electronic databases were searched 1999-2011. Reference lists of relevant articles were screened for eligible papers.

Review Methods. Eleven qualitative research articles were identified. Key themes and concepts were extracted and synthesized using the techniques of metaethnography.

Study Progress

The evidence base is being update and a journal article is currently being drafted.

Title

Research goals, research support needs and factors affecting participation in research by Mental Health Consultation Liaison Nurses

Researchers

McMaster R, Jammali-Blasi A, Andersson-Noorgard K,Cooper K, **McInnes E.**

Research Design

Cross Sectional Survey

Aims

To investigate the factors that affect participation of mental health consultation liaison nurses (MHCLN) in research and to understand the research goals of MHCLNs and the support they require to undertake research in a clinical setting.

Method

A semi-structured self-administered anonymous survey consisting of openended and closed responses was distributed at the beginning of a workshop at the 2010 Mental Health Consultation Liaison Nurse Conference. Frequencies of the closed responses will be calculated using SPSS. Open-ended responses will be transcribed verbatim to produce narrative text which will in the first instance be aggregated using qualitative analysis software. This process will enable a summary of the textual data and support identification of common, recurring and unique themes.

Results/Study progress

Data analysis currently underway.

Professor Kim Walker

Title

The temperature and Comfort study (TaCS)

Researchers

Walker K, Draper N, Di Staso R, Cobbe K, **Duff J, Middleton S**, Tan S, Lam L.

Research Design

A 2 x 2 factorial randomised controlled trail examining an intervention to prevent inadvertent hypothermia in patients undergoing arthroscopic shoulder surgery in the day surgery unit.

Aim

To investigate the effect of preoperative warming and/or warmed irrigation fluid on temperature, thermal comfort, and post-anaesthetic recovery time in patients undergoing elective arthroscopic shoulder surgery.

Method

Elective arthroscopic shoulder surgery patients who meet the study's inclusion criteria will be randomised to receive one of four treatments: 1) Preoperative warming, 2) warmed irrigation fluids, 3) preoperative warming and warmed irrigation fluid, or 4) usual care. All participants will receive active intraoperative warming which is standard treatment.

Participants' temperature, thermal comfort, and total post anaesthetic recovery time are the key outcome measures. Temperature will be measured using a tympanic thermometer and a self reported thermal comfort scale will be used to assess participants' thermal comfort.

Study Progress

To date 20 patients have been enrolled in the study

Honours Students

The ACU Faculty of Health Sciences provides a competitive scholarship scheme for eligible registered nurses to undertake an honours degree for one year full-time. Successful candidates work on existing or new research projects with researchers at the Nursing Research Institute SV&MHS ACU. All of the

supported honours students to date have had their work published in peer-reviewed journals. Both Todd Allen and Merren Smith profiled below were successful in their applications for the Faculty Supported Honours Scheme.



Todd Allen

Shortly after commencing the new graduate nurse program at St Vincent's Public Hospital, I started working as a research assistant one day per week at the NRI. In 2011, I will be joining the NRI full time. I will continue to work as a research assistant 3 days per week and as an honours student 2 days per week. My honours project will be the first two phases of a larger project on ethical

decision making in future health care planning.

Becoming a member of the NRI has allowed me the opportunity to capitalize on the collaboration between ACU and SV&MHS. The research that I have been involved in has informed and complemented my clinical practice. In the year to come, I look forward to developing my ability as a researcher.



Merren Smith

I am an early career RN, having recently completed my new graduate year with St Vincent's Private Hospital. I am embarking on a Bachelor of Nursing Honours project at ACU which will focus on concepts and delivery of Patient & Family Centred care, as well as continuing to work in the clinical field. I hope to develop my research skills in order to better integrate critical thinking into my nursing practice.

I gratefully acknowledge the financial & academic support given to me by ACU & SVPH and the ongoing scholarly advice and camaraderie of the NRI. I look forward to being part of a stimulating research environment that is at the forefront of advancing the nursing profession.

Research Assistants



Asmara Jammali-Blasi



Nissa Allnutt



Therese Fletcher



Liz Maher



Jane Allnutt

I became involved in researching Nurse Practitioner services soon after I came to Australian Catholic University in 2005. A research team from ACU (Professor Sandy Middleton, Rose McMaster, Sharon Hillege and myself) received internal and external funding to investigate the clients perceptions of the role of the Nurse Practitioner. I enjoyed the experience and found the research very rewarding so I was encouraged in 2008 to venture into a PhD at ACU titled 'Exploring the Nurse Practitioner Service in NSW'. I was awarded an ACU Outside Study Program scholarship for Semester 1, 2010 to progress my PhD studies.

Exploring the Nurse Practitioner Service in NSW

Researchers

Allnutt J, Hawley R, Gardner G, Gardner A, Della P, Middleton S.

Research Design

Case study - mixed methods

To investigate the role of the Nurse Practitioner (NP) Service in New South Wales (NSW).

Method

The 'case' under investigation is the Nurse Practitioner Service in NSW focusing on the uniqueness of the Nurse Practitioner Service. The multiple sources of information used were: NP observation; face-to-face interviews with i) Nurse Practitioner's, ii) associated health professionals and iii) patients; and retrospective medical audit for patients that were seen by the Nurse Practitioner.

Study progress

In progress



Fiona Bailey

I have always had a keen interest in patient safety and quality. I was motivated to undertake a project in this field as I have been a member of the St Vincents Health Medication Incident Review Committee for over 12 years; and during this time I have become aware that the management of medication incidents does not always lead to practice change. I was delighted therefore to be given the opportunity to undertake this project in the NRI. Professors Doug Elliott, Sandy Middleton and Associate Professor Liz McInnes have assisted me undertaking this research project with their expertise and supervision. I am looking forward to completing the data analysis and undertaking further research in this field.

Title

Examining the management of reported medication incidents in an acute care hospital

Researchers

Bailey F, Middleton S, Elliott D, McInnes E, Welch S, Berry M.

Research Design

Multi-Methods

Aim

To gain an understanding of how medication incidents are managed St Vincent's Hospital and to identify strategies to improve their management.

Method

A retrospective design using content analysis of the descriptions of investigations, findings and resulting actions as reported

in the RiskMan electronic incident reporting system was conducted from 1 January to 31 December 2009. This enabled exploration of the management of medication incidents. Semi-structured interviews and a focus group were conducted with clinicians to ascertain factors that influence their willingness to report medication incidents. Semi-structured

interviews and a focus group were also conducted with Nursing Unit Managers to gain an understanding about their role in managing medication incidents.

Study Progress

Data collection has been completed and data analysis is in progress.



Melissa Brunner

At the Smart Strokes conference in 2008, we noticed that there had been several studies looking into a circuit class style of therapy. Most of the studies had been done in the context of rehabilitation and predominantly within the realms of physiotherapy and motor deficits. We were keen to look at whether it was feasible to do this style of service provision within the acute stroke unit as a multidisciplinary team. We also wanted to see whether this had an effect on patient outcomes and satisfaction, as well as investigating team satisfaction with the change in service provision.

Through a grant from St Vincent's Clinic Foundation I had the opportunity to work with the Nursing Research Institute in order to gain clinical research skills and experience, as well as to strengthen partnerships with the aim of continuing further multidisciplinary health services research down the track.

Melissa took maternity leave during 2010, since then work on this project has been undertaken by Pukkaporn (Fix) Sangvatanakul..





Professor Sandy Middleton, Melissa Brunner, Pukkaporn (Fix) Sangvatanakul and Rebecca Errey (Stroke Unit coordinator at the Sacred Heart Centre) with the 'Co-Ordinated Multidisciplinary Circuit Therapy Class' Poster at the 2010 Smart Strokes Conference.

Pukkaporn (Fix) Sangvatanakul

After completing my honours degree, I have been working casually at the NRI to gain more research skills and experience whilst also working as a nurse on the Stroke ward at St Vincents Hospital. The NRI has provided a supportive environment and resource in which I have been able to develop research skills in project coordination, database management and recruitment of participants.

Title

Coordinated multidisciplinary circuit therapy class: an evaluation.

Researchers

Brunner M, Markus R, McInnes E, English C, Sangvatanakul P, Middleton S.

Research Design

Before and after prospective study.

Aim

To determine the feasibil ity of conducting

multidisciplinary therapy in a group circuit class on the acute stroke care unit.

Method

This before and after prospective study will compare process and outcome measures for acute stroke patients receiving standard multidisciplinary therapy with those participating in multidisciplinary circuit classes. It will examine overall (mean) treatment time, patient satisfaction and team satisfaction. A sample of consecutive patients admitted to the acute stroke unit over a six month period will be recruited (n=20).

Study progress

Recruitment of participant is still in process.

Publications

A poster was presented at the Smart Strokes Conference 2010.



Simeon Dale

I continue to work on the publications resulting from the Quality in Acute Stroke Care (QASC) Project. I have been working on this project since 2005 and we have finished patient recruitment and are now bringing together all the results into manuscripts for publication. I am also commencing work on a follow on project titled 'Measuring context of care in NSW acute stroke units' for which we were awarded an ACU Faculty of Health Sciences Research Grant at the end of 2010. This will involve returning to all the stroke units involved in the QASC Project to interview the nursing managers and survey registered nurses to explore the contextual factors that influence the successful implementation of treatment protocols across these 19 NSW Acute Stroke Units. It will also involve getting ethical approval at all these sites. The challenges going forward will include wrapping up the QASC project and becoming involved in more projects within the NRI.

Title

Cluster Randomised Controlled Trial of a Multidisciplinary, Team Building Intervention to Manage Fever, Sugar & Swallowing in Acute Stroke: The Quality in Acute Stroke Care (QASC) Project

Researchers

Middleton S, Levi C, Griffiths R, Grimshaw G, Ward J.

Research Design

Cluster randomised controlled trial

Aim

To evaluate a standardised, multidisciplinary team building intervention (Fever, Sugar, Swallowing (FeSS) Intervention) for the management of fever, hyperglycaemia and swallowing dysfunction following acute stroke.

Hypothesis

At 90-days post-hospital admission, patients treated in acute stroke units (ASUs) allocated to receive the FeSS Intervention will have: i) lower death and disability (Modified Rankin Score ≥ 2); ii) lower mean dependency score (Barthel Index); iii) higher health status (SF-36) when compared with patients treated in ASUs that do not receive this intervention.

Method

NSW Category A and B ASUs have been randomised to the intervention or control group. Intervention ASUs received the FeSS Intervention comprised of an evidence-based treatment pathway (FeSS Pathway) for the management of fever, hyperglycaemia and swallowing dysfunction in the first 72 hours following admission to an ASU; treatment protocols; and a multi-disciplinary team building intervention. Control group hospitals received an abridged version of the Acute Stroke Management Guidelines for fever, hyperglycaemia and swallowing dysfunction.

Study Progress

Nineteen NSW Category A and B Stroke Units have agreed to participate (including St Vincents Hospital) (95% participation rate) and baseline data have been collected at all of the sites (n=723 patients). Stroke units were randomised to either Intervention (n=10) or Control (n=9) groups. The intervention was implemented at those hospitals randomised to the intervention arm of the study. Recruitment of patients to the follow up cohort has also been completed (1135 patients). We continue to audit patient medical records.

Publications

Middleton S, Levi C, D'Este C, Dale S, Griffiths R, Grimshaw J, Ward J, Evans M, Quinn C, Cadilhac D. Death, dependency and health status 90-days following stroke in NSW: Preliminary results from the Quality in Acute Stroke Care (QASC) Project. Internal Medicine Journal in press Accepted manuscript on line 30 July 2010. (ERA Ranking: C)

Middleton S, Levi C, Ward J, Grimshaw J, Griffiths R, D'Este C, Dale S, Cheung W, Quinn C, Evans M, Cadilhac D. Fever, hyperglycaemia and swallowing dysfunction management in acute stroke: A cluster randomised controlled trial of knowledge transfer. Implementation Science 2009; 4; 1: 16. (ERA Ranking: C)

Conference Presentations: Seven to date.



Peta Drury

I am currently conducting a cluster randomised controlled trial of a behaviour change intervention that has been designed to improved the management of fever, hyperglycaemia and swallowing dysfunction in acute stroke patients. I commenced this project in 2006 and I envisage that the results of this large trial will become available by the end of this year. To-date this project has been awarded more than \$50,000 in research grants and I was awarded the Australian Catholic University Post-graduate Award in January 2010.

Title

The QASC Cluster Randomised Controlled trial of an intervention to improve management of fever, hyperglycaemia and swallowing dysfunction in acute stroke: Did clinician behaviour change?

Researchers

Levi C, D'Este C, Dale S, Griffiths R, Grimshaw J, Ward J, Evans M, Quinn C, Cadilhac D, Cheung W, McElduff P, McInnes E, Hardy J, Middleton S.

Background

Fever, hyperglycaemia and swallowing dysfunction post-stroke are associated with poor outcomes. Using a cluster randomized control trial design I have evaluated the effect of a behaviour change intervention to improve management of these factors after acute stroke.

Method

19 acute stroke units (ASUs) in NSW, Australia have been randomized. Intervention ASUs received 3 evidence-based clinical treatment protocols for the management of fever (temperature ≥37.5 C), hyperglycaemia (glucose >11mmol/L) and swallowing dysfunction for the first 72 hours; multidisciplinary team building workshops; a standardised education program; and engagement of local stroke coordinators. Control ASUs received an abridged copy of the Australian acute stroke guidelines relevant to fever, hyperglycaemia and swallowing management. Participants were those with ischaemic stroke or intracerebral haemorrhage prospectively admitted to within 48 hours of symptom onset. Patients' medical records have been audited for all instances of fever, hyperglycaemia and swallow screen. Intention to treat analysis is currently being conducted adjusting for baseline data and clustering.

Study progress

Data are being analysed

Publication

Drury P, Levi C, Griffiths R, Ward J, Grimshaw J, D'Este C, Cheung W, McElduff P, Hardy J, McInnes E, Middleton S. Routine practices for fever, hyperglycaemia and dysphagia management in NSW acute stroke units. International Journal of Stroke. 2010; 5; S1: 26. (ERA Ranking: C)

Renatta Di Staso & Kerry-Anne Cobbe

Renatta and Kerry-Anne are both perioperative nurses who work in the Day surgery unit at St Vincent's Private Hospital. They have a keen interest in improving patient outcomes, particularly in the recovery area, through the use of evidence-based practice. Renatta and Kerry-Anne have been instrumental in the design, development and management of the St Vincent's Private Temperature and Comfort Study.

Title

Preventing inadvertent perioperative hypothermia in elective arthroscopic shoulder surgery: A study protocol for a randomised controlled trial

Researchers

Di Staso R, Cobbe K, Duff J, Walker K, Perrin N, Tan S, Halliday E, Middleton S, Lam L.

Research Design

2 x 2 factorial randomised controlled trial.

Background

Inadvertent perioperative hypothermia, defined as a core temperature below 36 degree Celsius, is commonly seen in patients undergoing arthroscopic shoulder surgery and has been linked to adverse patient outcomes such as myocardial ischaemia, surgical site infection, and coagulopathy. Warming patients'

Researchers

preoperativly with a forced air warming device or using warmed irrigation solutions may prevent Inadvertent Perioperative Hypothermia (IPH) and have a beneficial effect on patient outcomes.

Aim

To investigate the effect of preoperative warming and/or warmed irrigation fluid on temperature, thermal comfort, and post-anaesthetic recovery time in patients' undergoing elective arthroscopic shoulder surgery.

Method

Elective arthroscopic shoulder surgery patients' who meet the study inclusion criteria will be randomised to receive one of four treatments; preoperative warming, warmed irrigation fluids, preoperative warming and warmed irrigation fluid, or usual care. All participants will receive active intraoperative warming. Participants' temperature, thermal comfort, and total



Renatta Di Staso, Kerry-Anne Cobbe with Jed Duff present their work at the Nursing Research Seminar (February 2011)

post anaesthetic recovery time are the key outcome measures. Temperature will be measured using a tympanic thermometer and a self reported thermal comfort scale will be used to assess participants' thermal comfort.

Study progress

The first participant was recruited on the 3rd September 2010 and 120 participants are needed in total. This is expected to take to take approximately 12 months.



Jed Duff

I am currently the Clinical Research Fellow at St Vincent's Private Hospital and a PhD student with the Australian Catholic University. My passion for patient safety and quality in healthcare has led me to undertake a PhD in the science evidence implementation, particularly in the area of Venous thromboembolism (VTE) protection.

Venous thromboembolism (VTE) prevention in hospitalised patients: Development and evaluation of two targeted interventions to improve clinician compliance with evidencebased VTE guidelines.

Researchers

Duff J, Middleton S, Walker K, Omari A, McInnes E.

Background

Venous thromboembolism (VTE), the umbrella term given to deep vein thrombosis and pulmonary embolism, has been identified internationally as a leading patient safety issue as it results in significant mortality, morbidity, and resource expenditure

Aim

The development and evaluation of two targeted interventions to improve clinician compliance with evidence-based VTE guidelines.

- 1. Develop and evaluate a patient-focused intervention to increase VTE prophylaxis in hospitalised patients
- 2. Increasing VTE prophylaxis in hospitalised medical patients using **Educational Outreach Visits**

Research Design

Mixed method

Method

The United Kingdom Medical Research Council recommendations for the developing and evaluation of complex interventions will provide the methodological framework for the studies. The MRC recommend using a phased approach to develop and evaluate complex interventions.

Phase one: Develop a theoretical understanding of the intervention

Phase two: Model the component parts of the intervention

Phase three: Pilot the intervention

Phase four: Conduct the definitive trial (not included in this proposal)

Phase five: Monitor sustainability (not included in this proposal)

Results/study progress

Phase one will commence in Jan 2011



Alex Joyner

I am the Staff Development Manager at the Mater Hospital and have been a member of the Mater Hospital Drug Committee for a number of years. During this time I became aware of the number of medication incidents related to the "5 rights" of medication administration. It was in 2009 that I started thinking more seriously about research and what I could do. I have a passion for medications, in particular the safe administration of them. At the time the Mater Hospital was building their profile in research with the help of Professor Sandy Middleton and Associate Professor Liz McInnes we decided to apply to the Friends of the Mater Foundation for a grant. I feel very grateful to have this opportunity to pursue my project and hope that it will assist more clinicians in getting involved in research at the Mater Hospital. It is a very exciting time for me to be involved in research and be able to work so closely with other researchers at the NRI.

Title

Examining the causes of reported medication incidents at the Mater Hospital

Researchers

Joyner A, Middleton S, Paris B, McInnes E, Bailey F, Elliott D.

Research Design

Mixed methods

Aims

- 1. To identify and quantify medication incidents arising from failure to comply with the 'five rights' of safe medication administration at the Mater Hospital.
- 2. To identify barriers and facilitators to compliance with the 'five rights' of safe medication administration.

Method

Phase 1: RiskMan audit

The investigators will request an electronic copy of RiskMan medication incident data for the Mater hospital from 1 January 2010 to 31 December 2010 will be exported to an excel spreadsheet. All medication errors reported during this period will be included. Those that relate to nurses and the five rights will be analysed.

Phase 2: Qualitative data collection Results of the audit will be presented to nurses in an hour long focus group. The focus group will explore participant views on:

- potential contributing factors to medication incidents occurring at the Mater Hospital;
- · barriers and facilitators to compliance with the five rights of safe medication administration;
- possible systemic and local strategies for reducing medication errors.

Study progress

Ethics approval granted February 2011.



Serena Knowles

With over 10 years of intensive care nursing experience, when it came time to conceptualise a research project for my PhD, it was only natural that my topic would have an intensive care focus. Concurrently to this process, bowel management was being identified by my peers in the ICU as an area for practice improvement. I have been

fortunate that during my candidature time at Australian Catholic University a link with St. Vincent's Hospital has been forged, with the development of the Nursing Research Institute. This alliance has provided me with invaluable support for my project within the clinical setting and led to the successful securing of a number of competitive research grants and scholarships. As a novice nurse

Researchers

researcher, the NRI offers a hub of research culture to foster growth and interest in research in the clinical setting.

Improving Clinical Practice in Intensive Care: Implementation of an evidence based practice guideline

Researchers

Knowles S, McInnes E, Wright R, Breeding J, Storer K, Welch S, Middleton S, Hardy J, Oliver E.

Research Design

Mixed methods

Study 1: To identify current guidelines and informal procedures in NSW public Intensive Care Units (ICUs) and High Dependency Units (HDUs) for 11 practice areas including bowel management.

Study 2: To identify nursing and medical clinicians' knowledge of, attitudes, beliefs and behaviour intention in relation to bowel management practices for intensive care patients.

To identify any predictors of nursing and medical clinicians' behaviour intention related to three behaviours around bowel management for intensive care patients To identify any changes in the above variables after the implementation of a new Bowel Management Protocol (BMP)

Method

Study 1: A telephone survey of NSW ICUs and HDUs was conducted

Study 2: Three linked phases conducted at St. Vincent's Hospital and St. Vincent's Private Hospital ICUs.

Phase One: Self-administered survey of nursing and medical staff in the study units. Phase Two: Targeted implementation of the new BMP.

Phase Three: Re-administration of the staff survey to evaluate the impact of the implementation strategy on clinicians.

At the project's completion, we aim to have developed an evidence-based bowel management protocol (BMP), designed a targeted implementation strategy, improved patient outcomes related to bowel management, and improved clinicians' use of evidence in practice and their uptake of new practices in the form of protocols.

Results

The telephone survey has been completed (response rate 93%) (Study 1) and published. Further data analyses currently are being undertaken.

Publications

Articles

Knowles, S, Rolls, K, Elliott, D, Hardy, J, Middleton, S. (2010). Patient care guidelines: A telephone survey of intensive care practices in New South Wales. Australian Critical Care, 23(1), 21-29. doi:10.1016/j. aucc.2009.10.001 (ERA Ranking: A)

Published abstracts

Knowles, S, Rolls, K, Burrell, A, Kowal, D, Hewson, K, Elliott, D, Hardy, J, Middleton, S. (2006). Use of guidelines: a survey of NSW ICU practices demonstrated varied existence and implementation. Australian Critical Care, 19(4), 156. (ERA Ranking: A)

Conference participation

Knowles, S, Rolls, K, Burrell, A, Kowal, D, Hewson, K, Elliott, D, Hardy, J, Middleton, S. (2006). Use of guidelines: a survey of NSW intensive care unit (ICU) practices demonstrated varied existence and implementation. Paper presented at the Australian and New Zealand Annual Scientific Meeting on Intensive Care, October 2006

Knowles, S, Rolls, K, Burrell, A, Kowal, D, Hewson, K, Elliott, D, Hardy, J, Middleton, **S.** (2006). Use of guidelines: a survey of NSW intensive care unit (ICU) practices demonstrated varied existence and implementation. Poster at the Australian and New Zealand Annual Scientific Meeting on Intensive Care, October 2006



Rose McMaster

I am continuing with my PhD studies entitled "The experiences of people involved in housing and maintenance support programs for people at risk

of being or who are homeless". I have completed the first part of my studies and am now starting the second phase and evaluating a support centre for women who are homeless or at risk of

homelessness. I have also established collaboration with the Mental Health Consultation Liaison Nurses at St Vincent's Hospital, which will continue in 2011. I am a senior lecturer at ACU and was awarded a NaCCOR secondment for the first Semester in 2010 and an ACU Outside Study Program scholarship for Semester 2, to work within the NRI on this project.

Title

Evaluation of a day-time drop-in support centre for women who are homeless or at risk of homelessness.

Researchers

McMaster R, Hawley R, Middleton S. **Research Design**

In-depth interviews and survey.

Aim

To evaluate the support centre from the perspectives of the clients, the healthcare providers and case managers and the volunteers of this organisation.

Method

A mixed method approach will be undertaken. There are 3 phases. Phase 1 and 2 will use face-to-face interviews to explore the experiences of the centre's clients, healthcare providers and case managers. Phase 3 will use a survey to explore the experiences of the volunteers of the centre's program.

Study progress

Awaiting Ethics approval from the ACU Human Research Ethics Committee.



Sally Sutherland-Fraser

My research interests are focused on nursing knowledge and clinical practice in the perioperative environment. The opportunity to work in the Nursing Research Institute, under the supervision of experienced and practising researchers has developed my research skills and given me a passion for enquiry. Balancing the demands of clinical practice and a research project has been challenging, but it has also been incredibly rewarding.

Pressure ulcer prevention program (PuPP): Evaluation of a nursing behaviour change education intervention.

Researchers

Sutherland-Fraser S, McInnes E, Maher E, Middleton S.

Research Design

Pre-post intervention study

Aim

The aims of the study were twofold: to determine the effect of an educational intervention on perioperative nurses' knowledge of pressure ulcer risks and pressure ulcer prevention strategies for patients in the operating suite; and to determine the effect of an educational intervention on perioperative nurses' practice with pressure ulcer risk assessment and pressure ulcer prevention strategies for patients in the operating suite.

Method

This research is a descriptive, pre-post intervention study of knowledge transfer being conducted within the perioperative services of 2 hospitals.

Outcome measures

- 1. Knowledge: Nurses in 2 hospitals were invited to participate in a survey to examine knowledge of pressure ulcer risks and prevention strategies (n=150). The survey was self-administered before and 1 month after the PuPP education intervention. Focus groups were held to obtain key informants' views on priority areas arising from baseline analysis of the survey to be addressed in the educational intervention.
- 2. Behaviour: Retrospective medical record audits were conducted to determine nurses' compliance with documentation of pressure ulcer risk assessments and use of pressure prevention strategies and devices. The PuPP Education Intervention comprised a 30 minute PowerPoint presentation and the display of reminder posters with key points from the presentation.

Study progress

The pre-intervention and post-intervention surveys have been completed. Retrospective medical record audits have been completed for the pre-intervention time period of February 2009 (n=89) and post-intervention of February 2010 (n=84). Data analysis is currently underway and we expect to submit a paper for publication in 2011.





