

UNIVERSITY OF **CANBERRA**



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1. Welcome

From the Executive Director — Professor Brenda Happell



Once again I have the pleasure of introducing this, the third annual report for SYNERGY, the Nursing and Midwifery Research Centre, for ACT Health and University of Canberra.

This report provides an opportunity to reflect on our achievements and thank and acknowledge the many people who have contributed to our success.

As described in my introduction last year, 2016 was a year of 'so close.' We reached the final shortlist for a major grant and were a near miss for a National Health and Medical Research grant (NHMRC). While it was disappointing not to hit the mark, I was confident we were on the precipice of great success.

The year 2017 did not disappoint, with our most notable achievement being the successful NHMRC grant, 'Improving the cardiometabolic health of people with psychosis: The Physical Health Nurse Consultant Service.' NHMRC grants are the holy grail of research grants, with an approximate success rate of only 14 per cent, making this a very special outcome. The grant will allow us to employ a mental health nurse with specialist skills in physical health care, to provide coordination and specific interventions to improve the physical health of people using mental health services in the ACT.

The project, was developed in partnership with Mental Health Services ACT, the ACT Mental Health Consumer Network and Carers ACT and the Australian Institute of Health and Welfare as well as our university partners Australian National University, Central Queensland University, and the University of New South Wales. It will allow us to build on our strong research agenda in physical health and mental illness. Collaborations of this kind reflect the core of SYNERGY's vision—that our research is collaborative and directly relevant to practice change.

Other successes for 2017 include a tender undertaken for Queensland Health in partnership with Health Outcomes International, another healthy list of publications, and local, national and international keynote addresses. All of these achievements contribute to our profile as a centre of excellence in local and international nursing and midwifery research. I would like to extend my sincere thanks to our small and hardworking team who have contributed so much towards another wonderful year.

SYNERGY would not have attained its current success and status without the broader partnership. I wish to acknowledge ACT Health, the major financial contributor for SYNERGY, and the University of Canberra. In particular I wish to thank Ms Nicole Feely, Director General of ACT Health for supporting nursing and midwifery research, Ms Veronica (Ronnie) Croome,

who retired from her position as Chief Nurse in 2017, and Professor Diane Gibson, former Dean of Health, who has moved to a new role within the university. Thank you for the vision and hard work that provided the opportunity for SYNERGY to become what it is today, and for contributing to what it will become in the future. As a result of these departures, we warmly welcome Adjunct Professor Margaret McLeod as the Chief Nursing and Midwifery Officer and Professor Dominic Upton, Acting Dean, Faculty of Health University of Canberra. We look forward to working together to take SYNERGY to the next level.

Thank you to everyone who has contributed to the SYNERGY journey thus far. We trust we can count on your continued support in 2018 and into the future.

From the ACT Chief Nursing and Midwifery Officer — Adjunct Professor Margaret McLeod



It is a pleasure to contribute to the annual report for SYNERGY, the Nursing and Midwifery Research Centre, for ACT Health.

It is a particular pleasure as it has been my goal since starting in the role of ACT Chief Nursing and Midwifery Officer, to strengthen the relationship between research and clinical practice. I am sure that this goal has emerged from years spent in a number of clinical settings, as well as a decade spent in academic environments. SYNERGY is perfectly positioned to address the research-practice gap, by promoting, developing and fostering relationships between researchers, clinical nurses and midwives.

We have so much talent within our clinical nursing and midwifery workforce, and many of our staff are passionate about improving patient care through quality activities. However, while some nurses and midwives have the skills to advance independent research, others may need help to move from the quality space into the research space. While this can present a significant challenge, SYNERGY creates the opportunity to bring researchers and clinicians together to achieve great things. The practice development grants provided by SYNERGY are an excellent starting point for novice clinical researchers. The grants create the opportunity to secure funding, perhaps to buy out a short period of clinical time, while receiving expert guidance and support from academic mentors.

The nursing and midwifery academics at the University of Canberra have provided excellent support for our clinicians, as they work in partnership to advance the research culture within ACT Health. The collaboration is evident at every level and I am particularly mindful of the relationships that have been, and continue to be fostered by Clinical Chairs Professors Deb Davis and Karen Strickland. They are advancing the nursing and midwifery research culture through their co-joint roles within the University of Canberra and the Office of the ACT Chief Nursing and Midwifery Officer. Further, they have embraced the research endeavours of SYNERGY, thereby strengthening the existing capacity to advance nurse and midwife led research.

It would be remiss of me not to acknowledge and applaud the efforts of the Dean, Faculty of Health, University of Canberra, Professor Diane Gibson and my predecessor ACT Chief Nurse, Ronnie Croome. They worked tirelessly and in partnership for several years to advance the Nursing and Midwifery Research Centre. The baton has now been passed to Professor Dominic Upton from the University of Canberra and myself to progress research collaborations and outputs. It will be an exciting leadership challenge for us both.

Finally, I would like to sincerely thank Professor Brenda Happell, Executive Director of SYNERGY, and her team, for advancing the research agenda. I would also like to

acknowledge the significant success of the recent NHMRC grant, the leadership provided in securing the grant, and the promise of future improvements in mental health services locally, nationally and internationally.

From the Acting Dean, Faculty of Health, University of Canberra — Professor Dominic Upton



It is a pleasure to be able, for the first time, to contribute to the annual report for SYNERGY, the Nursing and Midwifery Research Centre. In particular, it gives me pleasure to comment on the positive relationship fostered between ACT Health and the Faculty of Health at the University of Canberra. I would contend that this strong relationship is one of the central foundations of SYNERGY's success. The successes of the centre are writ large in this report, and the recent award of the NHMRC grant is a pinnacle achievement. This year's successes should be celebrated widely.

However, although a brief pause for celebrations is both to be expected and to be embraced, the work continues. Indeed,

it is fair to say that this is where the work starts! Not only in completing projects, disseminating, preparing recommendations, and ultimately changing practice but also about looking forward to the next project, the next innovation and our future workforce. Whether from the clinical or the research perspective, we need to innovate, develop and share. This is where SYNERGY should continue to focus on bridging the gap between researchers and clinical practice. This gap may be small in some cases, or extensive in others. However, if there is a gap then we should try to bridge it, not only through some of the activities described in this report but also through new, innovative developments and actions. SYNERGY is excellently placed to progress these endeavours along with the other colleagues including the Clinical Chairs associated with ACT Health and the University of Canberra.

From a university perspective, we need to thank Professor Diane Gibson for her tireless work progressing the work of SYNERGY. Her vision and support for all should be acknowledged and applauded. At the university, we rely strongly on collaborations for our work and I would like to thank Ms Ronnie Croome, the previous ACT Chief Nurse, for her foresight, support and commitment to the development of SYNERGY and the partnership she strengthened. I look forward to working with the current Chief Nursing and Midwifery Officer Adjunct Professor Margaret McLeod to further all our collaborations. It is important for the university and for ACT Health but most importantly for consumers, patients and their families.

Finally, I would like to thank all of the members of SYNERGY for their hard work, efforts and contributions and, in particular, Executive Director, Professor Brenda Happell, for the significant successes this year.

2. Staff



PROFESSOR BRENDA HAPPELL

Executive Director

Brenda is a Fellow and Board Director of the Australian College of Mental Health Nurses, and former Editor of the *International Journal of Mental Health Nursing*. Brenda was a member of the inaugural Queensland Mental Health and Drug Advisory Council. She was the inaugural Director of the Centre for Psychiatric Nursing at the University of Melbourne and former Director of the Institute

for Health and Social Science Research at Central Queensland University. Brenda has a strong track record in publications, obtaining competitive research funding, and the supervision of PhD and Masters students. Brenda's research interests include consumer participation in mental health services, physical health of people experiencing mental illness and mental health nursing. She has been identified as the world leader for publications in mental health nursing, consumer participation and nurse education.



MS NATHASHA MUNASINGHE

Personal Assistant to Professor Happell

Nathasha joined the SYNERGY team in 2017 with an administrative background in finance, retail and tertiary education. She has completed her professional studies with the Chartered Institute of Management Accountants (UK) and has more than five years of experience working in administration



DR KASIA BAILResearch Fellow

Kasia's primary interest is to improve sustainable acute care health delivery for an ageing population. Her research career has always been complemented by clinical roles, with experience primarily in general medical and acute palliative care. Her peer reviewed publications are well-cited (191 citations, h-index 8), and cover a range of topics including undergraduate nursing, aged care nurse

practitioners, prognosis communication, policy analysis, dementia care in hospitals and the costs of nurse-sensitive outcomes. She is dedicated to not only identifying and researching the structures and processes which impede or enable quality patient care, but also to sharing her learning and inquiry with nursing students, industry networks and professional groups.



MS JULIA BOCKING

Consumer Academic

Julia has over fifteen years of experience in advocacy roles in the ACT. She has worked in paid roles in the community sector as a consumer representative, as a project officer for at-risk youth, and as an advocate for people with intellectual disabilities. Julia has also volunteered in the sector as a Volunteer Educator for the Mental Illness Education ACT School Education Program, from

2003-2010. In 2010 she commenced working for ACT Health as a Consumer Consultant. She has represented the consumer perspective at a range of forums, including direct peer support, policy development, and designing consumer-centric programs. Her academic background is in community development and philosophy. In 2013, she received First Class Honours for her thesis 'The lived experience of nurses and consumers in a smoke-free adult mental health unit'. Julia is interested in the cause and experience of marginalisation. In 2014, she began a PhD (Public Health) under Professor Happell, exploring government peer-worker roles across Australia.



PROFESSOR DEBORAH DAVIS

Clinical Chair in Midwifery

Professor Deborah Davis (BN, MNS, PhD) is Clinical Chair and Professor of Midwifery—a joint appointment by the ACT Government, ACT Health and the University of Canberra's Faculty of Health. Professor Davis is a midwife with an extensive career in clinical practice (midwifery-led, continuity models of care), midwifery education and research. She is also active in

the profession, having served four years on the Board of Directors for the Australian College of Midwives, two of which were in the role of Vice President. Professor Davis is committed to improving maternity services for childbearing women, through midwifery education, research and service development. She has contributed chapters to pre-eminent midwifery textbooks, co-developed the world's first midwifery Massive Open Online Course (MOOC) on evidence-based practice, published extensively in scholarly journals, and plays a leadership role in service development in the ACT. Professor Davis' research interests focus on promoting wellness in childbearing women using salutogenic approaches, particularly in relation to birth environment and weight gain in pregnancy.



MR JONATHAN DAVIES Research Grants Manager

Jonathan Davies is an accomplished grant writer and research development professional. He joined the SYNERGY Nursing and Midwifery Research Centre team in 2015. With a background in neuroscience research and science journalism, he has successfully translated research proposals and findings for a diverse range of target audiences. He has helped build strategic and successful

programs of research that include projects, fellowships, awards and tenders funded by organisations, including the NHMRC, Australian Research Council (ARC), the Heart Foundation, and various state and federal government departments. Jonathan also distils his six years of expertise into practical research development and grant writing workshops for researchers at all career stages.



DR CHRIS PLATANIA-PHUNGPostdoctoral Research Fellow

Chris has a research background in psychology, the social sciences, mental health nursing and education. Chris seeks to contribute to establishing post-disciplinary studies on inequalities in wellbeing. He is committed to raising awareness of the physical health inequalities experienced by people classified as having mental illness, and the research-driven development of health

care service approaches aimed at reducing these inequalities. Moreover, Chris seeks to contribute to establishing post-disciplinary studies on inequalities in wellbeing.



DR JAMIE RANSEResearch Fellow

Jamie's research has a focus on the provision of health services in the preparedness for and response to high visibility/high consequence events. In particular this includes disaster health, and mass gathering health. Throughout his nursing career, Jamie has held various clinical, education, research and management roles, primarily within the critical care and emergency environment.

Jamie is actively engaged as a Fellow of the Australian College of Nursing, and a member of the World Association of Disaster and Emergency Medicine, College of Emergency Nursing Australasia and Australian Institute of Emergency Services. Jamie is a Research Associate of the Flinders University, Disaster Research Centre and an Associate Editor for the Australasian Emergency Nursing Journal, holding disaster portfolio, and peer-reviews for a number of national and international journals relating to disaster, emergency and primary health care.



DR BRETT SCHOLZPostdoctoral Research Fellow

Brett is a critical health psychologist passionate about social change and reducing health inequalities. His specific research interests include consumer leadership in mental health, power relations within mental health organisations, and the role of allies in the consumer movement. Driven by turning critical interdisciplinary health research into action, he is a member of the board of the

ACT Mental Health Consumer Network, editor of The Operative Word podcast, and Chief Research Officer of Spur Projects. His research has been cited in media outlets around the world, and has been used to develop national and global mental health campaigns. He has been invited to present his research in plenary and keynote addresses, and at universities in Australia and internationally. Brett's publications include qualitative and quantitative research in international, high-ranking journals, including Health Psychology, Health Expectations, International Journal of Mental Health Nursing, and Qualitative Health Research.



PROFESSOR KAREN STRICKLAND Clinical Chair in Nursing

Professor Karen Strickland is Clinical Chair and Professor of Nursing at ACT Health and the University of Canberra—an important combination of clinical, research and educational leadership. Karen was previously the Associate Head of School (Nursing and Midwifery) at Robert Gordon University in Aberdeen, where she was also a member of the key governance group leading the

development of the National Health Service (NHS) Grampian Nursing Workforce. Karen has strong clinical and research leadership experience in both the university and NHS context, as well as qualifications and experience in curriculum development. She is a Fellow of the Higher Education Academy and a Board Director of Alcohol and Drugs Alcohol Action, Aberdeen. Karen's research spans curriculum development, palliative care and clinical leadership.

3. University of Canberra research staff

Nursing

Dr Sarah Cope

Ms Lori Delaney

Dr Jane Frost

Dr Eamon Merrick

Ms Emily Molan

Dr Holly Northam

Dr Jamie Ranse

Dr Kristen Ranse

Associate Professor John Rolley

Midwifery

Ms Majorie Atchan

Associate Professor Jenny Browne

Dr Sally Ferguson

Dr Jan Taylor

Ms Rebekah Bowman

Adjunct appointments

Ms Judith Barker

Ms Ann Marie Dunk

Dr Warren Harlow

Dr Susan Hunt

Dr Chris Quinn

Dr Robert Stanton



Nursing research staff – University of Canberra

4. Publications

Journal articles

Atchan, M., Davis, D. & Foureur, M. (2017). An instrumental case study examining the introduction and dissemination of the Baby Friendly Health Initiative in Australia: Participants' perspectives. Women and Birth. doi:10.1016/j.wombi.2017.08.130

Atchan, M., Davis, D., & Foureur, M. (2017). An historical document analysis of the introduction of the Baby Friendly Hospital Initiative into the Australian setting. Women and Birth, 30(1), 51-62.

Bloomer, M. J., Endacott, R., Ranse, K., & Coombs, M. A. (2017). Navigating communication with families during withdrawal of life-sustaining treatment in intensive care: a qualitative descriptive study in Australia and New Zealand. *Journal of Clinical Nursing*, 26(5-6), 690-697

Bocking, J., Ewart, S. B., Happell, B., Platania-Phung, C., Stanton, R., & Scholz, B. (2017). "Here if you need me": exploring peer support to enhance access to physical health care. *Journal of Mental Health*, 1-7. doi:10.1080/09638237.2017.1385741

Broom, M. M., Burton, W. A., Ehrlich, L. M., Dunk, A. M., & Abdel-Latif, M. E. (2017). Developing an Australian skin risk assessment and management tool for neonates. Wound Practice & Research: Journal of the Australian Wound Management Association, 25(1), 15.

Broom, M., Dunk, A. M., Sheridan, D., & McLeod, M. (2017). Evaluation of a newly designed moisture management product for use in women giving birth at the Canberra Centenary Hospital for Women and Children.

EWMA Journal, 18(2). https://issuu.com/ ewmapublications/docs/journal_oct_2017_ site

Byrne, L., Happell, B., & Reid-Searl, K. (2017). Acknowledging rural disadvantage in mental health: Views of Peer workers. *Perspectives in Psychiatric Care*, 53(4), 259-265.

Byrne, L., Happell, B., & Reid-Searl, K. (2017). Risky Business: Lived experience mental health practice, nurses as potential allies. International Journal of Mental Health Nursing, 26(3), 285-292.

Cannon, M., Roitman, R., Ranse, J., & Morphet, J. (2017). Development of a mass-gathering triage tool: An Australian perspective. *Prehospital and Disaster Medicine*, 32(1), 101-105. doi:10.1017/S1049023X16001242

Clancy, L., & Happell, B. (2017). Being Accountable or Filling in Forms: Managers and Clinicians' views about communicating risk. *Perspectives in Psychiatric Care*, 53(1), 38-46. doi:10.1111/ppc.12135

Coombs, M., Ranse, K., Parker, R., & Bloomer, M. (2017). An integrative review of how families are prepared for, and supported during withdrawal of life-sustaining treatment in intensive care. *Journal of Advanced Nursing*, 73(1), 39-55. doi:10.1111/jan.13097

Delgado, C., Upton, D., Ranse, K., Furness, T., & Foster, K. (2017). Nurses' resilience and the emotional labour of nursing work: An integrative review of empirical literature. *International Journal of Nursing Studies*, 70, 71-88.

Delaney, L.J. (2017). When Two Worlds Collide: Patient Centred Care in a Nocturnal Healthcare Environment. Quality Primary Health Care (2017) 1:1 002

Delaney, L. J. (2017). Patient-centred care as an approach to improving health care in Australia. Collegian. doi: 10.1016/j. colegn.2017.02.005

Delaney, L. J., Currie, M. J., Huang, H. C. C., Lopez, V., Litton, E., & Van Haren, F. (2017). The nocturnal acoustical intensity of the intensive care environment: an observational study. *Journal of Intensive Care*, 5(1), 41.

Dicks, S., Ranse, K., Northam, H.L., Van Haren, F., Boer, D. (2017). Towards an understanding of the bereavement of families who were asked to consider organ donation. *Health Psychology Today Open*. doi:10.1177/2055102917742918

Dicks, S. G., Ranse, K., van Haren, F. M., & Boer, D. P. (2017). In-hospital experiences of families of potential organ donors: A systematic review and qualitative synthesis. *Health Psychology Open*, 4(2), 2055102917709375.

Ewart, S. B., Happell, B., Bocking, J., Platania-Phung, C., Stanton, R., & Scholz, B. (2017). Social and material aspects of life and their impact on the physical health of people diagnosed with mental illness. *Health Expectations*. 2017; 00:1–8. doi:10.1111/hex.12539.

Ewens, B., Hendricks, J., & Sundin, D. (2017). Implications for research and practice of the biographic approach for storytelling. *Nurse researcher*, 24(3), 19-24. doi:10.7748/nr.2017. e1396

Foureur, M., Turkmani, S., Clack, D., DAVIS, D., Mollart, L., Leiser, B., & Homer, C. S. E. (2017). Caring for women wanting a vaginal birth after previous caesarean section: A qualitative study of the experiences of midwives and obstetricians. Women and Birth, 30(1), 3-8. doi:10.1016/j. wombi.2016.05.011

Frost, J., Isbel, S., Kellett, J., & Lawlis, T. (2017). Using digital story telling to assess health students' knowledge of interprofessional roles in the care of the older adult. *BMJ Simulation & Technology Enhanced Learning*, 3(1), 5-8. doi:10.1136/bmjstel-2016-000136

Frost, J., & Reid-Searl, K. (2015). Exploring the potential of Mask-Ed[™] (KRS simulation) to teach both the art and science of nursing: A discussion paper. *Collegian*, 24 (2), 197–203

Frost J., Currie M, J., Cruickshank, M., Northam, H. (2017). Viewing NP's perceptions of patient care through the Enablement lens. *Journal of Nurse Practitioners*, 13(8): 570-576.

Frost, J., Currie, M., Cruickshank, M., Northam, H. (2017). The experience of enablement within NP care: A conceptual framework. The Journal for Nurse Practitioners, 13(5): 360-367. doi:10.1016/j. nurpra.2017.01.002

Frost, J., Currie, M., Cruickshank, M., Northam, H. (2017) Using the lens of enablement to explore patients' experiences of Nurse Practitioner care in the Primary Health Care setting. *Collegian*, doi:10.1016/j. colegn.2017.06.002

Happell, B., Wilson, K., Platania Phung, C. & Stanton, R. (2017). Physical health and mental illness: listening to the voice of carers. *Journal of Mental Health*, 26, 127-133.

Happell, B., Wilson, K., Platania-Phung, C. & Stanton, R. (2017) Filling the gaps and finding our way: Carers navigating the health care system to access physical health services for the people they care for. *Journal of Clinical Nursing*. doi:10.1111/jocn.13505

Kuhn, L., Page, K., Street, M., Rolley, J., & Considine, J. (2017). Effect of gender on evidence-based practice for Australian patients with acute coronary syndrome: A retrospective multi-site study. Australasian Emergency Nursing Journal. 20(2):63-68

Larkings, J., Brown, P.M., & Scholz, B. (2017). "It's often liberating": Consumers discuss causal beliefs in the treatment process. *Journal of Mental Health*. doi:10.1080/096382 37.2017.1417550

Larkings, J., Brown, P. M., & Scholz, B. (2017). "Why am I like this?" Consumers discuss their causal beliefs and stigma. *International Journal of Mental Health*, 46(3), 206-226. doi: 10.1080/00207411.2017.1304076

Marsh CA, Browne J, Taylor J, Davis D. (2017). Characteristics and outcomes of newborns entered into out-of-home care within 7days of birth in NSW, Australia. *Children and Youth Services Review*. 18, 261-267.

Marsh, C., Browne, J., Taylor, J., & Davis, D. (2017). A researcher's journey: Exploring a sensitive topic with vulnerable women. Women and Birth, 30(1), 63-69. doi:10.1016/j. wombi.2016.07.003

Payk M, Robinson T, Davis D, Atchan M. (2017). An integrative review of the psychosocial facilitators and challenges of continuous subcutaneous insulin infusion therapy in type 1 diabetes. *Journal of Advanced Nursing*. doi:10.1111/jan.13463.

Scholz, B., Bocking, J., & Happell, B. (2017). Breaking through the Glass Ceiling: Consumers in Mental Health Organisations' Hierarchies. Issues in Mental Health Nursing, 38(5), 374-380.

Scholz, B., Bocking, J., & Happell, B. (2017). How do consumer leaders co-create value in mental health organisations? Australian Health Review, 41(5), 505-510.

Scholz, B., Crabb, S., & Wittert, G. (2017).
Males Don't Wanna Bring Anything Up to
Their Doctor: Mens Discourses of Depression.
Qualitative Health Research, 27(5), 727-737.
doi:10.1177/1049732316640294

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Scholz, B., Stewart, S. J., Bocking, J., & Happell, B. (2017). Rhetoric of representation: the disempowerment and empowerment of consumer leaders. *Health Promotion International*, doi:10.1093/heapro/dax070

Stanton, R., Gaskin, C. J., Happell, B., & Platania-Phung, C. (2017). The Need for Waist Circumference as a Criterion for Metabolic Syndrome in People with Mental Illness. *Collegian*, 24(4), 387-390.

Stanton, R., Reaburn, P., & Happell, B. (2017). Body mass index is correlated to the pleasure experienced during self-selected exercise in people with depressive disorders. *Journal of Science & Medicine in Sport*, 20, e91-e92. doi:10.1016/j.jsams.2017.01.059

Stanton, R., Reaburn, P., & Happell, B. (2017). Group exercise at self-selected exercise significantly improves feeling states in inpatient mental health consumers. *Journal of Science & Medicine in Sport*, 20, e93-e93. doi:10.1016/j.jsams.2017.01.062

Stanton, R., Rosenbaum, S., Lederman, O., & Happell, B. (2017). Implementation in action: how Australian Exercise Physiologists approach exercise prescription for people with mental illness. *Journal of Mental Health*, 1-7. doi:10.1080/09638237.2017.1340627

Strickland, K. (2017) Developing an infrastructure to support clinical academic careers. *British Journal of Nursing*. 26(22): 1249-52 doi: 10.12968/bjon.2017.26.22.1249

Strickland, K., Worth, A., Kennedy, C.M (2017). The liminal self in people with Multiple Sclerosis: An interpretative phenomenological study of being diagnosed. *Journal of Clinical Nursing*. 26(11/12): 1714-1724. doi:10.1111/jocn.13593

Vafeas, C., & Hendricks, J. (2017). Applying heuristic inquiry to nurse migration from the UK to Australia. *Nurse researcher*, 24(3), 13-18. doi:10.7748/nr.2017.e1475

Books and book chapters

Bail, K. 2017. Essential quality indicators: older patients' nosocomial injury. Lambert Academic Publishers. ISBN: 978-620-2-07689-0.

Key Note Presentations and Conferences



TedX Canberra 2017

JANE FROST

Dr Jane Frost was invited to present at the 'Momentum' themed TedX Canberra 2017. In her presentation titled 'Learning through experience,' Jane spoke of the importance of kindness and compassion in medical staff and how evidence shows it leads to faster

healing, reduced pain and anxiety, and shorter hospital stays for patients. Jane also spoke about the use of MaskEd technology in nursing education for teaching communication and patient engagement strategies.



International Society of Psychiatric and Mental Health Nurses - Baltimore, United States

BRENDA HAPPELL

Professor Brenda Happell was invited to present the International Foundation Address at the Society of Psychiatric and Mental Health Nurses in Baltimore in March 2017.



Scientific Chair, 6th European Conference on Mental Health – Berlin, Germany

BRENDA HAPPELL

For the second successive year, Professor Brenda Happell was invited to chair the scientific committee of this prestigious international conference. In her opening address, Brenda talked about the value

of international communities in mental health—an area of health so often stigmatised and marginalised by other sectors. With delegates from 35 countries, there was a rich opportunity to explore both the similarities and differences in our experiences and challenges across the globe. Brenda finished with a challenge to delegates to keep service user involvement foremost in their minds, and to consider ways it could be strengthened in genuine and meaningful ways.



Metro South Health, Addiction and Mental Health Inaugural Research Symposium - Brisbane, Australia

BRENDA HAPPELL

Professor Brenda Happell delivered the keynote address for the event "Researching every day, every way and everyone, yes everyone."



Gold Coast MHS Nursing Symposium, Gold Coast, Australia

BRENDA HAPPELL

Professor Brenda Happell was invited to present the keynote address at the Gold Coast Mental Health and Specialist Services Mental Health Nursing Symposium. Brenda spoke on the importance of consumer

centred practice in mental health nursing and the physical health of mental health consumers.



De-institutionalisation where is it now? Canberra, Australia

BRENDA HAPPELL

Professor Brenda Happell was a keynote speaker at the Mental Health Week event organised by the Mental Health Community Coalition. Brenda's presentation emphasised the human rights aspects of

deinstitutionalisation, where consumers of mental health services were now recognised as key stakeholders in mental health services, and not just the recipients of care. Brenda questioned the extent policy had translated to practice, with tokenism being all too common. She called on the need for equity, including recognition of disadvantage, and the need for resources to support consumer leaders and enhance their contribution to mental health services, and the education of health professionals.



Norwegian School of Sport Sciences, Physical Health and Mental Health Seminar, Oslo, Norway

BRENDA HAPPELL

Professor Brenda Happell was invited to address the inaugural seminar in physical and mental health at the Norwegian School of Sport Sciences, where she discussed "Physical health, mental illness, physical

activity, a role for nurses?"



Keynote address at the Mental Health Symposium, Canberra, Australia

BRETT SCHOLZ

Dr Brett Scholz was invited by the Mental Health Community Coalition, to deliver the keynote address "Making evidence great again" at the inaugural Mental Health Symposium held in September. He used

the opportunity to challenge researchers to partner with marginalised groups to produce more meaningful research, and to call for practitioners and policy makers to pay more attention to co-produced research.



10th Biennial Conference of the International Society of Critical Health Psychology, Loughborough, United Kingdom

BRETT SCHOLZ

Brett Scholz was invited to present a plenary session at the 10th Biennial Conference of the International Society of Critical Health

Psychology. This year, the conference was held at the University of Loughborough, United Kingdom. In the session, he challenged critical health psychologists to be better allies to the communities with which they engage in research. The session was very well-received and resulted in a high level of social media activity, leading to conversations about how researchers can better partner with particular groups including young people, people with multiple comorbidities, and gender-diverse individuals.

6. PhD completions



DR. JANE FROST

Primary health care nurse practitioners and enablement

Dr Jane Frost, an Assistant Professor (Clinical) in Nursing at the University of Canberra, is the first in Australia to graduate with a Professional Doctorate in Nurse Practitioner.

Dr Frost's thesis explored the concept of patient enablement in nurse practitioner consultations from the perspectives of patients and nurse practitioners in the primary health care setting in Australia. Patient enablement following consultations has not yet been adequately investigated among patients of Nurse Practitioners (NP) in Primary Health Care (PHC). The lens of enablement and a qualitative parallel multi-strand approach were used to explore patients' experiences and NPs' perspectives of consultations. Meta-inferences made from this study suggest NPs enable patients by creating opportunities for education and knowledge transference, and building on patients' strengths and promoting self-efficacy. Three existential components of the experience of consultations (relationality, temporality, corporality) also played a role. These findings were used to develop a conceptual framework of how patient enablement is experienced within a NP consultation.

7. Grants

SYNERGY were awarded the following grants in 2017.

Title: Improving the cardiometabolic health of people with psychosis: The Physical Health Nurse Consultant service

Funding body: National Health and Medical Research Council

Grant recipients: Happell, B., Curtis, J., Banfield, M., Goss, J., Niyonsenga, T., Stanton, R., Moon, L., Bocking, J., Platania-Phung, C., Watkins, A. & Batterham, P.

A multidisciplinary team led by SYNERGY were awarded a National Health and Medical Research Council (NHMRC) project grant to trial an innovative new approach to addressing the poor physical health outcomes of Australians diagnosed with mental illness.

Consumers of mental health services with psychosis are 2-3 times more likely to have comorbid cardiometabolic illnesses such as heart disease, diabetes or stroke, and die 10-25 years prematurely compared to the general population. Despite this, they often receive very low rates of cardiometabolic care as part of standard care.



Left to right: Theo Niyonsenga (UC), Jackie Curtis (UNSW), Brenda Happell (SYNERGY), Rob Stanton (via Skype from CQU), Jonathan Davies (SYNERGY), John Goss (UC) & Karen Bishop (AIHW) at the first team meeting in December 2018

SYNERGY have been strong advocates for action to address this significant health disparity and were involved in developing the Equally Well Consensus Statement on the Physical Health of Mental Health Consumers. Recommendations of the statement, which was launched in 2017, have been endorsed by SYNERGY. The NHMRC project grant will help SYNERGY put these recommendations into action. The project team have developed an innovative, evidence-based Physical Health Nurse Consultant (PHNC) service that is offered alongside usual mental health care. The PHNC service offers cardiometabolic assessment, risk management and care coordination, and overcomes barriers including stigma, consumer disempowerment and lack of specialist health knowledge.

Project funding will support the delivery of a trial of the PHNC service in ACT community mental health services. The service will be evaluated for its effects on burden of disease risk factors, consumer experience of care, and cost-effectiveness. The project is expected to result in a significant advance in knowledge on implementing and delivering physical health care within mental health services. These outcomes will also have a substantial impact on health policy given the National Mental Health Commission are seeking solutions for this priority issue.

Title: Review of the transition and alignment between adolescent/youth and adult mental health services in Queensland

Funding body: Health Outcomes International and Queensland Health

Grant recipients: Happell, B., Scholz, B., Platania Phung, C. & Bocking, J.

SYNERGY, in partnership with Health Outcomes International (HOI), was successful in winning a Queensland Department of Health tender to review the transition and alignment between adolescent/youth and adult mental health services in Queensland. As part of the review, HOI and SYNERGY carried out a systematic literature review to establish an evidence-base of contemporary service models and transition pathways between the following:

- adolescent and adult mental health services
- service mapping to identify the standard structure and types of public mental health services provided across hospital and health services, and
- gaps in service delivery and areas where service innovation has been implemented.

Another phase of the project involved case study consultations with stakeholders to get their views on the current range of adolescent and adult mental health services and any innovative service models that have been implemented.

Several strategies for improving the alignment and transition arrangements between adolescent and adult mental health services were proposed, in accordance with four key areas:

- service alignment
- transition arrangements
- service innovation, and
- sector development.

Title: Evaluating SmartWard at the Canberra Hospital

Funding body: Commonwealth Department of Industry Innovation and Science and SmartWard Pty Ltd

Grant recipients: Bail, K., Currie, M., Davey, R.

Funding for the 2016 SmartWard project was extended in 2017. This project is an evaluation of a digital bedside nursing chart used on a 26 bed acute medical ward. The project will use mixed methods to establish whether the technology enables nurses to spend more time with patients, creates a more accurate record of care, improves decision making in relation to clinical protocols, and reduces administrative burdens on clinical staff. Pre and post observations will include time and motion studies, quality of care and missed nursing care, patient outcome data—including length of stay and complications, and staff and patient



Dr Kasia Bail, Professor Marian Currie, Kathryn Ellis and Dawn Nusa

interviews and questionnaires regarding satisfaction. Increasing efficiencies in care is of interest at both the system level in terms of minimising cost, and reducing waste, and at the patient level in terms of improving accuracy and aligning care interventions with needs in a timely manner. This is an important and timely development in the delivery of quality nursing care.

Title: Restorative practices for Aboriginal and Torres Strait Islander families/communities in the new University of Canberra Hospital: Adding healing value through intersecting yarning circles

Funding body: University of Canberra Collaborative Indigenous Research Initiative (CIRI)

Grant recipients: Northam, H., Applebee, W., Lock, M., Ivec, M., Robinson, T., Brown, R

Dr Holly Northam was awarded a grant from CIRI at the University of Canberra to undertake the project to introduce restorative health practices to give voice, accountability and healing value for Aboriginal and Torres Strait Islander families/communities in the new University of Canberra Hospital: Specialist Centre for Rehabilitation, Recovery and Research.

As part of the launch of this new project, Dr Holly Northam and a team of three Indigenous and three non-indigenous researchers travelled to Whanganui, New Zealand where Maori



Left to right: Dr Holly Northam, Ms Mary Ivec, Dr Tracy Robinson, Ms Roslyn Brown (Ngunnawal Elder), Dr Mark Lock (Indigenous researcher), Mr Wayne Applebee (Kamilaroi Elder)

health inequality is being eliminated using Restorative Practices—"a philosophy, in action" that places respectful relationships at the heart of every interaction. The trip was enthusiastically supported by Chief Minister Andrew Barr, who remarked (in a letter to Holly) that the trip was an opportunity to "build on Canberra's sister-city relationship with Wellington to become a collaboration of significant importance to the ACT".

Title: 'Heart Time': Feasibility of an Aboriginal and Torres Strait Islander Cardiac Rehabilitation program delivered in a non-Indigenous health service

Funding body: University of Canberra CIRI

Grant recipients: Freene, N. Collis, P., Burke, C., Northam, H.L. Silk, K., Jackson, A., Davy, R.

Cardiovascular disease (CVD) is diagnosed in almost half of Indigenous Australians 55 years and over, and is the largest cause of premature deaths. There is strong evidence for cardiac rehabilitation. It has been found to decrease deaths from CVD and hospital admissions, improve risk factor profiles, medication adherence and quality of life in those diagnosed with CVD.

In this feasibility study the team will evaluate the impact of:

- improved access to a cardiac rehabilitation service, guided by Indigenous voices and specifically designed for Indigenous men, and
- improved health workforce cultural safety.

8. Awards

Winner of Innovative Models of Care Award

Professor Deborah Davis, Clinical Chair in Midwifery, and SYNERGY member and her team from the Centenary Hospital for Women and Children received the Innovative Models of Care Award at the 2016 ACT Quality in Healthcare Awards, held in March 2017. The team developed a multidisciplinary intervention program to reduce the number of cases of women suffering severe trauma or tears to their perineum during labour.



Left to Right: Toni Gwynn-Jones, Margaret McLeod, Christine Fowler, Boon Lim, Raylene Garrett, Deborah Davies, Penny Maher

SYNERGY member awarded membership to European Cooperation in Science and Technology as an international partner

Assistant Professor Kasia Bail has been awarded membership as an external expert for the European Cooperation in Science and Technology (COST), an international interdisciplinary research funding programme. Dr Bail will provide expertise and critique as part of international panels evaluating research proposals funded by COST.

COST is Europe's longest-running inter-governmental framework for cooperation in science and technology. Founded in 1971, COST holds a successful history of funding science and technology networks for over 40 years, offering scientists the opportunity to embark upon bottomup, multidisciplinary cooperation across all science and technology domains.



Travel scholarship— Emerging Researchers in Ageing

Assistant Professor Kasia Bail received a travel scholarship from the Emerging Researchers in Ageing organisation, sponsored by the ARC Centre of Excellence in Population Ageing Research (CEPAR). This enabled her to travel to Griffith University and Gold Coast University Hospital to work with colleagues at the NHMRC Centre of Research Excellence in Nursing Interventions for Hospitalised Patients (NCREN).



9. Events

Service User Academia Symposium – Wellington, New Zealand

SYNERGY were once again proud to co-host this important event, led by the Department of Psychological Medicine, University of Otago—with the Centre for Psychiatric Nursing, University of Melbourne as a new co-host. The ongoing evolution of this event was apparent with the record number of 117 registrations. While Australia and New Zealand provided the greatest number of registrants, we were joined by colleagues from the United Kingdom, United States and Iceland.

The symposium was highly successful, with rich thought provoking keynote speakers, including Ms Wanda Bennetts, the winner of the inaugural Sarah Gordon award for the best presentation by a service user.

SYNERGY staff were actively involved in the program which included a World Cafe (a new event for the symposium) led by Julia Bocking. Brenda Happell and Julia Bocking presented an overview of some of the findings from the co-produced Mental Health Nursing Education (COMMUNE) project, an international project being undertaken with six European universities from five countries.



Brett Scholz presented his current work on allies of the service user movement, and their role in challenging power imbalances. Sarah Gordon (University of Otago) and Brenda Happell also presented findings from the Mental Health Consumers as Expert Researchers project. The atmosphere was supportive yet challenging, with many thought provoking comments and questions.





Julia Bocking

Ms Shannon Calvert was the winner of the second Sarah Gordon award for her presentation entitled "Compassion, Dignity and Respect: How Values Supporting Treatment Interventions Can Promote Recovery". Her presentation was described as compelling, powerful and deeply personal. We extend our congratulations to Shannon.

SYNERGY look forward to co-hosting the 8th symposium to be held in Melbourne next year. For further details see our website: http://www.synergyresearch.edu.au



Professor Brenda Happell and Dr Sarah Gordon delivering the plenary session



Ms Shannon Calvert receiving the Sarah Gordon Award from Dr Gordon

Mental Health Week 2017 – 3rd Lived Experience Showcase – Canberra

In October 2017, SYNERGY held an exciting Mental Health Week event. The 3rd Lived Experience Showcase, supported by Mental Health Australia, highlighted exemplar consumer participation across the ACT sector. It was an opportunity to highlight and celebrate high quality practice. The Minister for Mental Health, Shane Rattenbury, opened the 2017 event with a thought provoking address reiterating the value of the consumer perspective as a 'source of accountability' for services.

Presenters from the ACT Mental Health Consumer Network, Wellways, the Private Mental Health Consumer and Carer Network, ACACIA Centre for Mental Health Research (ANU), Richmond Fellowship, Australian Injecting & Illicit Drug Users League (AIVL) and SYNERGY shared their innovative practices which use consumer perspectives to improve their service offerings.



Left to Right: Ben Matthews, Peer Services Manager, Wellways; Minister for Mental Health Shane Rattenbury; Julia Bocking, Consumer Academic, SYNERGY; Melanie Walker, CEO Australian Injecting and Illicit Drug Users League (AIVL) and Jason, Peer Worker, Canberra Alliance

10. Practice Development Scholarships

Summaries from projects completed in 2017



LOUISE BOTHA

Registered Nurse, Patient Experience Team, Clinical Safety and Quality Unit

"Nurse Managers' perceptions of simulated learning to address education and training in the clinical environment: An examination of the barriers and enablers (in ACT public hospitals)."

June 2016 – August 2017

Simulation is recognised as a safe and effective way to teach healthcare practitioners. In Australia, there has been a renewed focus in the last decade on the use of simulation as a patient safety initiative.

A qualitative study using semi-structured interviews was conducted with Nurse Unit Managers.

Three themes identified barriers to simulation in the clinical environment and relate to infrastructure and resources, realism in simulation and concern regarding the potential dangers in simulation. Three themes identified enablers that facilitate using simulation including linking to key strategic objectives, having a lead/guide and access to equipment and education.

The study provides insight into practices that promote managers to support using simulation in the public health sector and allows for an examination into obstacles encountered. These findings are important, given the region is set to expand the simulation capability within health service organisations in the next five years.

The use of simulation modalities is complex and requires a well-planned approach to the delivery of sessions together with appropriate support to do so. Establishing a link between simulation activities and the key objectives of the service relating to patient safety and patient experience would allow executives to understand benefits of these activities.



CHRISTINE FOWLER

Clinical Midwife Manager CatCH Program

"Evaluation of the Centenary Hospital for Women and Children's Antenatal Education Program"

June 2016 - November 2017

Antenatal education represents a significant effort for women and families and a significant cost to maternity services. It therefore requires careful evaluation. Most

health professionals recommend it and most expectant parents use the service. The aims, content and processes of antenatal education vary considerably, this is due to a distinct lack of widely adopted standards or guidelines, making evaluation difficult.

The Centenary Hospital for Women and Children (CHWC) has been offering antenatal education in a number of forms for many years. The goal of the current antenatal education program at the CHWC is to prepare women to achieve their best possible birth and parenting experience. However, the program has evolved over the years without clear evidence that it is achieving these goals.

This project evaluated the current program at the CHWC. The women completed two questionnaires before and after their antenatal education, and both the women and midwives participated in two separate focus groups. Feedback has been mostly positive, with a number of recommendations suggested by both women and midwife facilitators. All the data, feedback and recommendations, together with current evidence, is now being used to develop a new antenatal education program, based on salutogenic principles. Phase two of the project will see the new program evaluated in the same way.



BRETT JONES

Stroke Liaison Nurse—Neurology Department, Division of Medicine, Canberra Hospital and Health Services

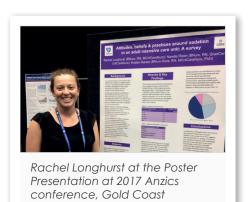
"Outcomes of a Quality Improvement Project to Implement Individualised Discharge Care Plans for Stroke Patients"

June 2016 - August 2017

The 2015 National Stroke Foundation (NSF) Acute Care Audit for our centre identified a gap in providing stroke patients with adequate care planning information on discharge. The multidisciplinary team (MDT) determined that this gap needed to be addressed to provide improved support to patients who were discharged directly from acute care to home as a matter of priority.

A telephone survey of 19 patients who had been recently discharged with stroke from our centre to home was conducted to identify gaps in education and support following discharge. With this information an Individualised Discharge Care Plan (IDCP) was developed with consumer feedback, and implemented to capture patients discharged directly from acute care to home. The IDCP would be commenced in hospital prior to discharge with the assistance of the stroke coordinator, ensuring education about stroke, lifestyle modification, community supports and personalised recovery goals.

The IDCP intervention was trialled for six months with the aim to provide it to 95 per cent of eligible patients. Post introduction of the IDCP 48 eligible patients were discharged home, 26 with an IDCP and 22 without an IDCP. Follow up telephone survey showed patients with IDCP were more confident across all questions but statistically significant for understanding recovery, knowing who to contact, receiving written stroke information and stroke education. While falling short of achieving 95 per cent of patients receiving the IDCP, the intervention did improve patient understanding of stroke, and knowing who to contact for further information after discharge.



RACHEL LONGHURST

Clinical Nurse Educator, ICU/CCU, Calvary Hospital

"Sedation practices in intensive care: Evidence vs Practice"

June 2016 - October 2017

In intensive care, ventilated patients typically receive concurrent administration of sedatives and analgesics to achieve comfort, tolerance and pain relief. Over the last ten years much research looking at sedation in ventilated

patients has been done, identifying a number of negative physiological and psychological outcomes associated with over-sedation. This had led to a shift in recommended practice towards lighter levels of sedation.

This project was undertaken to examine whether detrimental effects of sedation in ventilated adult Intensive Care Unit (ICU) patients are reflected in the attitudes, beliefs and practices of ICU clinicians in one metropolitan ICU.

A survey was circulated to a convenience sample of nursing and medical staff in one metropolitan ten-bed ICU. Data was also collected from a retrospective file audit to provide a patient and drug profile.

While staff identified that the side effects of sedation are not minimal, a belief sedation is necessary for comfort exists among staff and the facilitation of nursing and medical tasks still relies on sedation. Sedation is utilised to promote sleep routinely or occasionally (by up to 56 per cent) and in stabilising haemodynamic status. While 59.5 per cent frequently/very frequently identified turning down sedation in preparation for medical rounds, only 9.5 per cent turned down sedation in anticipation of physiotherapy. Documented communication between nursing and medical teams regarding sedation goals was also identified as an issue.

Although much research has been done in recent years, this survey suggests that the transition of research into practice is minimal, with knowledge gaps. With mismatching of short and long term goals of sedation and communication all contributing. Implications are continued high utilisation of sedation prolonging ventilation times and increasing risks to patients.

Recommendations include utilisation of communication tools for targets/goals, implementation of the A-E Bundle and ongoing education.



Wendy Mossman & Katherine Wakefield following presentation at the SYNERGY Forum

KATHERINE WAKEFIELD & WENDY MOSSMAN

Ag Director of Nursing, Division of Medicine, Ambulatory Services and Ag Assistant Director of Nursing, Ambulatory Services

"Evaluation of a Video Direct Observation Therapy for Supervising Tuberculosis Treatment"

June 2016 - October 2017

Tuberculosis (TB) requires antibiotic treatment and monitoring for 6-12 months. The World Health Organisation (WHO) recommends patients have supervised treatment to ensure adherence to treatment and prevent antibiotic drug resistance. Supervision may include directly observing patients in person taking their oral medication doses, otherwise known as direct observation therapy (DOT). This was achieved by either nurses or patients travelling every weekday to meet and conduct DOT. As demand for treatment increased, a less resource intensive intervention was required.

A review of the literature revealed video technology for DOT had been used internationally but there was limited documentation of its use in Australia. Video direct observation therapy (VDOT) was introduced into the service model, and the change of practice was evaluated via pre and post interviews with patients, interviews with nurses and a time-analysis.

Interview data demonstrated that both nurses and patients preferred VDOT and most identified time efficiencies as the main advantage. Patients found it more convenient and less disruptive to lifestyle. A saving of 70 minutes in nursing time per day was identified, enabling nurses to devote more time to other growing TB clinical duties. VDOT has enabled nursing services to provide an alternate DOT delivery, saving nurse and patient time.



SHANNON WOODWARD

Nurse Practitioner, Canberra Sexual Health Centre

"Is vaginal sensitivity and culture necessary to confirm suspected vulvovaginal candidiasis or bacterial vaginosis?"

June 2016 – August 2017

This study investigates the accuracy of a point of care diagnosis in patients attending a sexual health clinic with vaginal discharge, and whether microscopy culture

and sensitivity (MCS) testing is necessary. Current management of suspected vulvovaginal candidiasis and bacterial vaginosis at our metropolitan sexual health clinic includes confirmatory MCS testing.

A total of 747 medical records of women diagnosed in-house with vulvovaginal candidiasis and/or bacterial vaginosis were examined with in-house testing compared to pathology based MCS test results. In-clinic point of care testing was accurate in 88 per cent of cases of vulvovaginal candidiasis and 91 per cent of cases of bacterial vaginosis. It suggests therefore that MCS testing to confirm in-clinic diagnosis may be unnecessary.

Scholarship Recipients 2017

Primary Applicant	Other Applicants	Work Area	Project Title	Academic Mentor
Wendy Alder	Alison Porteous	CMC Birthing, WY&C, Centenary Hospital for Women Youth and Children	Postpartum Haemorrhage (PPH) DR-Stemming the Flow	Margaret McLeod – ACT Chief Nurse & Midwifery Officer, Canberra Hospital
Esther Lam	Megan Taylor, Monica King, Leah Martin	CALD Liaison Nurse Women's Health Service, Canberra Hospital	Women's Health Service RCT to Assess the impact of innovative Privacy cover: The (WRAP) study	Margaret Broom – Neonatal Research Nurse, Centenary Hospital for Women and Children
Julianne Nissen	Christine Fowler	Maternity Outpatients, Centenary Hospital for Women and Children, Canberra Hospital	Centenary Hospital for Women and Children childbirth education: new curriculum design. Implementation and evaluation.	Sally Fergusson – Midwifery Discipline Lead, University of Canberra
Dale Reading	Sophie Williams	Calvary Emergency Department	The implementation of a structured approach to emergency nursing assessment to improve accuracy of assessment	Kate Curtis - Professor of Trauma and Emergency, Sydney Nursing School Clinical Nurse Consultant, ISLHD Belinda Munroe - Clinical Nurse Consultant, ISLHD Emergency Services,

Clinical Senior Lecturer, Sydney Nursing School, University of Sydney



2017 PDS recipients with SYNERGY's Professor Karen Strickland, Dr Kasia Bail, Dr Brett Scholz and Ms Nathasha Munasinghe

Practice Development Forums

Month	Presenter's Name	Work setting	Title
February 2017 Presenter one	Julie King	Clinical Development Nurse, HITH/Medical Day unit	Safe and effective continuous intravenous antibiotic administration, delivered via peripheral intravenous cannula and an elastomeric infusor with hospital in the home
February 2017 Presenter two	Prof Deborah Davis and Asst. Prof Jamie Ranse	SYNERGY Nursing & Midwifery Research Centre	Practice Development Scholarship 2017 Information Session
March 2017 Presenter one	Dawn Sheridan	Project Nurse	Improving skin care for maternity patients through product testing and qualitative assessment in clinical settings
March 2017 Presenter two	Dr Margaret Broom and Jasmine Song	SYNERGY Nursing and Midwifery Research Centre Neonatal Nurse NICU	Predicting Neonatal Skin Injury: Comparison of the Canberra NICU Skin Assessment and Management Tool and Braden-Q Scale
June 2017 Presenter one	Cheryl Jannaway	Clinical Nurse Consultant for Stomal Therapy, Belconnen Health Centre	Storytelling in Stomal Therapy
June 2017 Presenter two	Karen Butcher	Registered Nurse Cardiac Rehabilitation, Cardiology Department Canberra Hospital	Summary of the Nicotine Addiction and Smoking Cessation Course and the creation of a Smoking Cessation Clinic for Cardiac Rehabilitation Patients

Month	Presenter's Name	Work setting	Title
July 2017 Presenter one	Vicki Kelly	Health and Home CNC, Hospital in the Home, Calvary Hospital	Continuous antibiotic infusion via peripheral cannula as conducted by Hospital in the Home
July 2017 Presenter two	Melissa Parker	Endometriosis Coordinator and Researcher, Canberra Endometriosis Centre, Centenary Hospital for Women and Children	MDOT and PIPPA go to the World Congress on Endometriosis, Vancouver May 2017 (WCE2017)
August 2017 Presenter one	Louise Hawkins	School Immunisation Coordinator, School Health Team, Division of Women, Youth and Children Community Health Programs	Increasing School Immunisation uptake rates in the ACT
August 2017 Presenter two	Louise Botha	Deputy Patient Experience Leader, Clinical Safety and Quality Unit	Nurse Managers' perceptions of simulated learning to address education and workforce issues in the clinical environment
September 2017 Presenter one	Brett Jones	Stroke Liaison Nurse, Stroke Unit	Individual discharge care plans for acute stroke patients
September 2017 Presenter two	Shannon Woodward	Nurse Practitioner, Canberra Sexual Health Centre	Is vaginal sensitivity and culture necessary to confirm suspected vulvovaginal candidiasis or bacterial vaginosis at Canberra Sexual Health Centre
October 2017 Presenter one	Raelene Garret	Maternity Educator, Centenary Hospital for Women & Children	International Confederation of Midwives (ICM) Congress 'Midwives making a difference in the world' – In retrospect

Month	Presenter's Name	Work setting	Title
October 2017 Presenter two	Kerry Taliaferro	Clinical Nurse Consultant, Intravenous Access Team, Canberra Hospital	Development of an Intravenous Access Team Credentialing Package
November 2017 Presenter one	Christine Fowler	Clinical Midwife Manager CatCH, Centenary Hospital for Women and Children	Centenary Hospital for Women and Children's Antenatal Education Program Evaluation
November 2017 Presenter two	Leanne Ehrlich	Clinical Support Nurse, Department of Neonatology, Centenary Hospital for Women and Children	Highlights from the 2017 Australian College of Neonatal Nursing Conference- Shaping Neonatal Care from Past to Future
December 2017	Margaret McLeod	ACT Chief Nurse and Midwifery Officer, Canberra Hospital	Annual Address for all Nurses and Midwives





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