

**School of Public Health and Community  
Medicine  
and associated  
Research Centres**

**Successful Grant Applications  
for 2005**

## NHMRC Project

### **The role of non-GP staff in chronic disease management in general practice** (\$768,000 - 3 years)

M. Harris, J. Proudfoot, J. Beilby, P. Crookes, G. Meredith, D. Black (Centre for General Practice Integration Studies, SPHCM)

Summary: This study aims to critically examine whether involving non-GP practice staff in establishing practice-based systems and organisational processes for chronic disease care will improve quality and health outcomes. The study is a controlled trial involving practices randomised to receive training and support for practices with managers or nurses. The intervention will consist of two components:-  
i) education and briefing sessions for groups of GPs, practice nurses, receptionists and managers; ii) structured practice visits to profile the practice's existing systems and processes for chronic disease management and to provide guidance for extending the roles of non-GP staff. Assistance will also be provided for the establishment of Plan-Do-Study-Act quality improvement cycles and team meetings within each practice.

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### **Longitudinal treatment outcomes for methamphetamine dependence: a treatment cohort study** (\$709,500 - 4 years)

R. Mattick, R. Ali, R. McKetin, J. Ross, D. Lubman (National Drug and Alcohol Research Centre, SPHCM)

Summary: The aim of this study is to examine treatment outcomes and mental health among a cohort of methamphetamine users receiving treatment within a community setting. The study consists of a longitudinal follow-up of 400 methamphetamine users over a one-year period. The study will provide much needed information on (a) the prevalence of mental health disorders among methamphetamine users receiving drug treatment, and (b) the effectiveness of treatment provided in reducing drug use and improving health and well being.

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### **A multi-component intervention for smoking cessation among Australian male prison inmates** (\$546,250 - 3 years)

R. Richmond, T. Butler, A. Wodak, K. Wilhelm, I. Anderson, A. Falconer (SPHCM, NSW Justice Health, St. Vincent's Clinical School)

## **Awards to conjoint academics**

### **A survey of the sexual behaviour and sexual health of Australian prisoners** (\$583,500 - 3 years)

T. Butler, J. Richters, B. Donovan, T. Falconer (NSW Justice Health, National Centre in HIV Social Research and SPHCM)

Summary: Forty per cent of female prisoners and 24% of male prisoners in New South Wales (NSW) report that they have been diagnosed with a sexually transmitted infection at some time in the past. Prisoners are normally excluded from community surveys based on household sampling such as the Australian Study of Health and Relationships. The project proposed aims to repeat and extend the ASHR survey among a representative sample of prisoners in two Australian states. By interviewing prisoners this project will fill a significant gap in our understanding of the sexual health, sexual attitudes and sexual health needs of some of the most marginalised and stigmatised of Australians.

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### **A randomised controlled falls prevention trial of long-distance glasses in elderly multifocal wearers** (\$487,000 - 3 years)

S. Lord, M. Haran, I. Cameron, R. Ivers, J. Simpson (Prince of Wales Medical Research Institute and SPHCM)

**Summary:** One-third of people over 65 years of age fall annually and 52% of this group use multifocal glasses only. A cohort study in the elderly suggests that using multifocal glasses is associated with greater rates of falls due to the blurring of distance, visual contrast, and depth perception when looking through the lower part of the multi-focal lens. This is likely to be most relevant in unfamiliar outdoor situations for the elderly and gait impaired. This study uses a novel harm minimisation strategy to reduce the falls epidemic in the elderly.

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## **NHMRC Capacity Building**

**Addressing injury in a population health framework: an integrated approach to prevention, acute care and rehabilitation** (\$2,351,750 – 5 years)

C. Finch, M. Stevenson, R. Norton, A. Zwi, L. Lord, A. Williamson, I. Cameron (NSW Injury Risk Management Research Centre, George Institute for International Health – U Sydney, SPHCM, Prince of Wales Medical Research Institute – UNSW, Rehabilitation Studies Unit – U Sydney)

**Summary:** In Australia, injury is the leading cause of death and disability in people aged under 55 years. It is also a major cause of morbidity and mortality in older persons and, overall, accounts for a substantial proportion of acute hospital services and long-term rehabilitation needs. This grant will build an internationally competitive research team focused on reducing the public health burden of injury.

## ARC Discovery

### **Anchoring preventive health care to positive learning: an exploration of local methods of organising and improving clinical services** (\$365,000 - 3 years)

R. Iedema, J. Braithwaite, L. White, K. Williams (Centre for Clinical Governance Research in Health, SPHCM)

Summary: Safe health care is the most important treatment factor for patients and families. This project focuses on how clinical professionals achieve quality and safety in their daily practices, by investigating their team processes and communications. The project produces methods and approaches for enhancing the social, organisational and clinical conducts that best realise high quality and safe care.

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### **Investing in the future of children in multicultural Australia - cultural competence in Families First** (\$405,000 - 3 years)

M. Eisenbruch, G. Vimpani, G. Alperstein, H. Phung, G. Flores, V. Nossar (Centre for Culture and Health, SPHCM)

Summary: Healthy start to life - Discovering how to use valuable parenting knowledge of parents from culturally different backgrounds will help us to draw on them and achieve their childrens' potential (National Agenda for Early Childhood initiative). Preventive healthcare - Knowing how to use cultural resources will help us to promote parenting in culturally appropriate ways, and strengthen capacity for children to grow in best health (Focus on Prevention Initiative). Strengthening Australia's social fabric - The results will help to ensure that child services strengthen local community cohesion, and families can make culturally acceptable choices to better look after their children (National welfare reform and participation agendas).

## ARC Linkage

### **Examination of the relationship between accreditation and clinical and organisational performance** (\$461,943 - 4 years)

J. Braithwaite, R. Iedema, J. Westbrook, W. Runciman, S. Redman, M. Pawsey, C. Jorm (Centre for Clinical Governance Research in Health, Institute for Health Research, SPHCM)

Summary: Accreditation of organisations involves assessing organisations against pre-defined standards. This is a highly significant issue because of the millions of dollars of investment in accreditation. We do not know if we achieve value for money or whether positive change is associated with accreditation. Few studies have examined this in detail. We will examine organisational and individual performance associated with accreditation status in order to illuminate the process and uncover any associations between accreditation and organisational culture, consumer participation and clinical (individual) performance indicators.

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### **A randomised trial of early childhood sustained home visiting in a disadvantaged community** (\$450,000 - 3 years)

E. Harris, C. McMahon, S. Matthey, G. Vimpani, T. Anderson, V. Schmied (Centre for Health Equity Training, Research and Evaluation, SPHCM)

Summary: Home visiting programs comprising intensive and sustained professional home visits over the entire first two years of life (SPHV) show promise as interventions to promote child health and family functioning, and ameliorate disadvantage. This study is the first Australian randomised trial to determine the impact of a comprehensive SPHV program commencing antenatally in a population group living in an area of known disadvantage. As such this trial is a best-practice demonstration model for professional home visiting in Australia, with significant implications for the development of early childhood policy and strategy throughout Australia.

## ARC Awards to conjoint academics

### **Chronic disease prevention and treatment - a cost-benefit model systems to assist with priority setting.** (\$542,000 – 4 years)

Butler J, Colagiuri S, Walker A. (South Eastern Sydney Area Health Service, SPHCM)

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### **Novel early warning system for hypoglycaemia** (\$240,000 – 2 years)

Nguyen H, Ghevondian N, Colagiuri S, Aston R. (South Eastern Sydney Area Health Service, SPHCM)

## Faculty Research Grants

### **Peace Mapping tool development** (\$12,000 - 1 year)

A. Bunde-Birouste, A. Zwi, J. Ritchie, N. Grove (SPHCM)

Summary: Research indicates that impacts of violence can be addressed through health sector and health promotion action and that health programs can provide some platforms for peace-building. This project aims to: develop a tool to determine the extent to which health programs contribute to building the peace in war-torn societies; pilot application of the tool in two countries; assess the initial application; and prepare competitive research proposals and an ARC International Linkage Grant to apply the revised tool in post-conflict settings in Asia-Pacific. The project is significant in that a clear framework for assessing the peace-building aspects of health work has not yet been developed.

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### **Equity of access to quality diabetes care: a case study using the 2002/3 NSW Health Survey** (\$13,000 – 1 year)

E.J. Comino, E. Harris, A. Zwi, M. Harris (Centre for Health Equity Training, Research and Evaluation, SPHCM)

Summary: There have been few population-based studies that examine how people with type 2 diabetes mellitus access health services for diabetes care. The aim of this research is to undertake a secondary analysis of the 2002 and 2003 NSW Health Survey Data to identify potential indicators of access to quality diabetes care and to explore the factors that predict access to quality care for survey participants with type 2 diabetes mellitus.

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### **The identification and management of symptomatic and non-symptomatic non-valvular atrial fibrillation (NVAf): examining the evidence** (\$20,000 - 1 year)

M. Gattellari, N. Zwar, J. Worthington, S. Middleton (SPHCM and South West Sydney Area Health Service)

Summary: This nationwide, representative survey aims to explore and assess gaps in GPs' knowledge and practice concerning the detection and management of patients with symptomatic and asymptomatic non-valvular atrial fibrillation. The results of this study will comprise a needs assessment upon which to base an educational intervention to bridge the knowledge-practice gap in this area of GP management of stroke risk factors.

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### **Sexually transmissible infections in HIV-positive homosexual men: prevalence and risk factors** (\$20,000 - 1 year)

A. Grulich, G. Prestage, F. Jin, P. Rawstone (National Centre for HIV Epidemiology and Clinical Research, SPHCM and National Centre in HIV Social Research)

Summary: Sexually transmitted infections (STIs) are an important risk factor for HIV transmission. This study will determine the prevalence and risk factors for syphilis, gonorrhoea, chlamydia, hepatitis A, B and C, in a cohort of HIV-positive homosexual men in Sydney. These data will be used in the development of guidelines for the prevention and screening for STIs in HIV-positive men.

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**A project to examine peer support in six hospital-based health care professions (\$20,000 - 1 year)**

D. Long, J. Travaglia (Centre for Clinical Governance Research in Health, SPHCM)

Summary: Using ethnographic-based qualitative methodologies (participant-observation, individual interviews and focus groups) this project aims to undertake exploratory research into patterns, behaviours, practices and strategies of peer support among six hospital-based health care professions: medical, nursing, occupational therapy, physiotherapy, pharmacy and laboratory officer.

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**Sharing decision making: helping GPs to work with patients who have diabetes in planning their care (\$20,000 - 1 year)**

S. McKenzie, T. Shortus, J. Proudfoot, M. Harris (Centre for General Practice Integration Studies, SPHCM)

Summary: People with chronic and complex illnesses are best managed using a structured systematic approach, often in a multidisciplinary context. Recent primary health care reforms aim to support coordinated multidisciplinary care planning, however there is little to guide patients and providers in the decision-making process. This study aims to define a set of competencies for multidisciplinary care planning for patients with diabetes that incorporate the theories of shared decision making (SDM). This theoretical framework will lead to the design of instruments to facilitate and measure the process and outcomes of this model of care.

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**The relationship between selective cyclo-oxygenase-2 (COX2) inhibitor prescribing and hospitalisation and mortality rates for acute gastrointestinal and cardiovascular events (\$20,000 – 1 year)**

S. Pearson, A. Mant, W. Hall, R. Day (SPHCM)

Summary: Much debate surrounds the benefits and risks associated with selective cyclo-oxygenase-2 (COX 2) inhibitor use. This population-level study examines the relationship between trends in the prescribing of COX 2 inhibitors and other non-steroidal anti-inflammatory (NSAID) drugs and hospitalisations for acute gastrointestinal and cardiovascular events. Given the multi-billion dollar expenditure on prescriptions medicines each year, it is important for health care payers and the public to know if the health outcomes observed in controlled trials of medications translate into longer-term field effectiveness. To date, there are few studies that examine these issues in the Australian health care setting.

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**Barriers and facilitators to compliance with playground safety standards (\$20,000 - 1 year)**

S. Sherker, J. Ritchie (NSW Injury Risk Management Research Centre and SPHCM)

Summary: A telephone survey of all municipal councils in NSW will be carried out to assess compliance by councils of playground safety within their jurisdictions. It is anticipated the results will prompt an increase in compliance and thus a subsequent reduction in playground-related injuries among young children.

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**The impact of an electronic medication chart on communication patterns and error rates during medication administration (\$20,000 – 1 year)**

M. Williamson, A. Ampt (Centre for Health Informatics, SPHCM)

Summary: There is evidence to suggest that electronic medication charts are successful at reducing prescribing errors in hospitals. However there is little evidence regarding the effectiveness of these systems to reduce administration errors or about how the use of these systems changes communication patterns between staff, and staff and patients. This controlled before and after study will evaluate the

impact of an electronic medication chart on medication administration error rates and communication patterns on two medical wards in a Sydney teaching hospital.

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## Other grants

Australian Rotary Health Research Fund

**Mental health literacy and barriers to utilisation of mental health services among Chinese Australians** (\$40,500 – 1 year)

M. Eisenbruch, I. Blignault, V. Ponzio (Centre for Culture and Health, SPHCM, South-Eastern Sydney Area Health Service)

Summary: The aims of this collaborative project, which will use qualitative methods, are threefold: (1) to describe the mental health knowledge, attitudes and practices among Chinese Australians (specifically people born in mainland China), (2) to identify the barriers that prevent them from accessing mental health services and (3) to make recommendations for overcoming these barriers.