What is the lived experience of carers in the late twenty-tens?

Project category	Community-based
Supervisors	Bronwyn Tarrant & Mei Krishnasamy
Project Description	To understand the lived experience of people who care for their loved ones suffering ongoing / deteriorating ill health. The qualitative data will be collected through (i) carers documenting their daily experience via photography/videography and (ii) follow-up interview based on these visual images. Students will analyse the narratives for shared and disparate themes.
What is the research question?	What is the lived experience of carers in the late twenty-tens?
Techniques/methodologies used	Qualitative; narrative analysis
Details of primary or secondary data collection and analysis, including collection site(s)	Carers will be recruited by convenience sampling. Students will visit the carers in their homes and teach the carers how to use the supplied cameras.Cameras will be returned and students will analyse the data for themes. Follow-up interviews will be audio recorded whilst the carer speaks to the images/footage they captured.
Feasibility and resources available	Resources are available and and LTi grant application is in process.
How will the student benefit from this project?	Students will: 1. learn qualitative research data collection and analysis, 2. understand the lived experience of people with complex health needs beyond the point of hospitalisation. 3. deepen their awareness of the discharge and follow-up needs of patients and their carers 4. contribute to the knowledge base of carer experience and supports 5. provide a resource that may improve the quality of nursing care and empathy provided to individuals and carers

Exploring malnutrition screening practices by nurses: A mixed-method exploratory study

Project category	University-based
Supervisor	Natasha Morris
Project Description	Over a third of adult patients admitted into hospital are malnourished and screening patients for malnutrition risk is now standard practice. In many hospital settings, nurses are required to screen patients using a validated screening tool however, the engagement and uptake of malnutrition by nurses remains suboptimal. This study aims to explore the barriers and enablers of malnutrition screening by nurses and identify strategies to improve malnutrition screening practices. This study builds on the Indigenous Australian Malnutrition Project, which explored the burden and impact of malnutrition in Indigenous and non-Indigenous Australians in the Northern Territory and Far North Queensland.
What is the research question?	To be developed by students
Techniques/methodologies used	A mixed-method study design will be used, including an integrative review exploring the barriers and enablers of malnutrition screening by nurses in the hospital setting, and an observational survey of malnutrition screening practices of nurses in three regional hospitals. The integrative review will use thematic analysis to determine barriers and enablers of malnutrition screening and identify strategies to improve malnutrition screening practices. The data for the observational audit has already been collected, but students will be required to manage the data, including data entry, cleaning, coding, and data analysis using descriptive statistics.
Details of primary or secondary data collection and analysis, including collection site(s)	The integrative review will use systematic search strategies and skills to identify studies describing barriers and enablers of malnutrition screening by nurses in hospital settings. A thematic analysis will be used analyse the results and identify strategies to promote malnutrition screening. The observational audit includes data collected as part of the Indigenous Australian Malnutrition Project, which compares malnutrition screening and referrals to

	dietitians by nurses and by the IAM project researchers.
Feasibility and resources available	As the data has already been collected for the observational audit, it is feasible that students will be able to complete the integrative review and analyse the data for the observational survey. Students will be mentored by Natasha Morris and regular supervision meetings will be held at the University of Melbourne. Data for the observational audit will be stored in a locked filing cabinet in Natasha's office.
How will the student benefit from this project?	The project offers students skills in both qualitative and quantitative study designs. The results of this study will be published in a peer-reviewed journal and students will be co-authors. Students will also be invited to disseminate the results of this study at a local nursing conference in 2018.

Understanding the knowledge and attitudes towards malnutrition screening by health providers: a mixed method study

Project category	University-based
Supervisor	Natasha Morris
Project Description	Screening patients for malnutrition risk is an important part of patient assessment during the hospital admission process. While most hospitals now screen patients for malnutrition risk within 24 hours of hospital admission, malnutrition screening by health providers remains suboptimal due to a number of barriers, including not understanding or under-appreciating the burden and impact of malnutrition in adult patients, and the perception that malnutrition screening is a role of dietitian or nutrition aide. This study aims to explore the knowledge, behaviours and attitudes of health providers where malnutrition screening was not current practice to gain insight into the potential barriers related to malnutrition screening, and an understanding of health care providers' knowledge related to malnutrition.
What is the research question?	To be developed by students
Techniques/methodologies used	This study uses mixed methods, including both qualitative and quantitative research methods. In 2015, a health provider survey was undertaken by doctors, nurses and dietitians to explore knowledge, behaviours and attitudes towards malnutrition and malnutrition screening. Three focus groups were also held, including nurses and dietitians. Students will be required to analyse the data from the survey and focus groups using both qualitative and quantitative data analysis techniques.
Details of primary or secondary data collection and analysis, including collection site(s)	This study was undertaken as part of the Indigenous Australian Malnutrition Project. The data was collected from a regional hospital in Central Australia. Data analysis will include descriptive analysis of the health provider survey and a thematic analysis of the focus groups. Data for the survey needs to be entered, cleaned and coded ready for data analysis. The focus group data has already been de-identified and independently transcribed and students will be required

	to undertake a thematic analysis.
Feasibility and resources available	As the data for this project has already been collected, it is realistic that students will be able to complete this project within the specified time-period. Students will be supervised by Natasha Morris and regular supervision meetings will be organised at the University of Melbourne. Data will be stored in Natasha Morris's office in a locked filing cabinet.
How will the student benefit from this project?	Students will gain skills in both qualitative and quantitative study methods. The results of this study will be published in a relevant peer-reviewed journal and students will listed as co-authors. Students will be also invited to submit an abstract for a local conference and if accepted, invited to present either and oral or poster presentation.

An observational audit of compliance with hospital blood transfusion procedures and patient survey

Project category	Hospital-based (non-lab)
Supervisor	Kaylene Bastin
Project Description	Melbourne Health transfuses approximately 1000 red cells units each month. The procedure for transfusing blood components is covered by procedure 2.9.6 Blood Component Transfusion, which is consistent with the ANZSBT guidelines. Failure to perform appropriate checks has been reported as the most common error leading to incorrect blood transfusion. Ensuring the pre-transfusion checking process is carried out in accordance with MH procedure is a vital component of patient safety for blood transfusion practice. An observational audit of the blood component administration practice and survey of transfused patients at MH is a vital component of the quality assurance process, identifies areas of non-compliance to target for improvement processes.
What is the research question?	The research question will be developed by the students. A suggested example would be Are pre-transfusion checks carried out in accordance with the MH procedure and are patient given sufficient information to give informed consent.
Techniques/methodologies used	Students will be observing practice in a clinical setting and will learn how to conduct a real time observational audit, develop and effective audit tool, document and clean audit data. Qualitative and quantitative analysis analysis will be required and various statistical tests used. Effective presentation techniques will be learnt.
Details of primary or secondary data collection and analysis, including collection site(s)	Data collection will be based on the MH procedure for blood component transfusion. The data will include patient demographics, the completion of the pre-transfusion checks as detailed in the blood component transfusion procedure, if particular details of the blood transfusion prescription has been completed, such as consent clinical indications, transfusion history and the administration rate. Patient survey should be limited to approximately ten questions. The data collection

	will include (but not limited to, the patient language spoken, if they were given enough information (in their opinion) to give consent, if they were given an opportunity to ask questions prior to consent. The data collection will be conducted at the Royal Melbourne Hospital on the all wards excluding the emergency department and the operating theatre.
Feasibility and resources available	The audit is conducted annually and is feasible for the students to complete in the timeframe. The students will be given access to the wards and the medical records on the wards, although priority must always be given to the clinical requirements and patient care.
How will the student benefit from this project?	At the completion of this project the students will have gained skills in audit development, methodological and analytical skills to complete complex research goals. They will have learnt how to organise themselves and work collaboratively in a team to meet the agreed objectives and to independently collect data. They will learnt time management skills develop coherent writing and presentation skills. This project gives the students a chance to work on a topic with genuine clinical impact that can improve patient safety. In addition to the research skills this project offers students broad learning opportunities. As this is an observational audit in the clinical setting students can observe staff interactions and clinical practice without the pressures of a clinical placement. They are able to experience a variety of clinical settings including the intensive care unit, gain an understanding of the importance of clear and correct documentation and how this relates to patient safety and can influence their future practice as nurses.

Does axillary web syndrome increase the incidence of lymphoedema after axillary node dissection in breast and skin cancer patients?

Project category	Hospital-based (non-lab)
Supervisors	Zerina Tomkins; Anya Traill; Lucy Bucci
Project Description	Secondary lymphoedema (LE) of the hand, arm and chest can develop after sentinel lymph node biopsy or lymph node dissection, commonly associated with skin and breast cancer surgery. Axillary web syndrome or cording is characterised by formation of rope-like lymphatic channels and subcutaneous thickening. It can occur along any lymphatic vessels where lymph structures are disturbed by surgery, disease progression and may be exacerbated by radiotherapy. It usually presents weeks to months after the surgery and may disappear with general recovery or may become chronic and unresponsive to treatment, especially after radiotherapy. Cording is accompanied by reduced movement and occasionally pain or feeling of tightness in the affected area. Anatomically, these palpable or visible cords are comprised of multiple scar tissue components, including fibrin clots within the lymphatic and venous channels, but unlike thrombophlebitis, these thickened cords do not respond to non-steroidal anti-inflammatory medication. It is not clear from the literature whether or not lymphoedema is associated with cording but some lymphoedema experts suggest it may be a risk factor. The aim of this study is to conduct an audit of the medical records of patients who have had axillary node biopsy or removal (breast and skin surgery) and determine whether patients with cording have higher rates of secondary lymphoedema.
What is the research question?	Do breast and skin cancer patients presenting with with axillary web syndrome in the early post-operative period have higher incident rates of secondary lymphoedema after axillary node dissection?
Techniques/methodologies used	Quantitative methodology (clinical audit), data collection, data clean-up, data analysis, prospective statistical analysis, effective presentation techniques, effective writing skills.

Details of primary or secondary data collection and analysis, including collection site(s)	Data collection, data review and analysis will be conducted at Victorian Comprehensive Cancer Centre (Peter Mac) in collaboration with the lymphoedema therapy services.
Feasibility and resources available	Students will have a full access to medical records (subject to police check clearance) and will be able to collect data in the VCCC /PMC Medical Records department. Students are expected to use the resources provided by the University of Melbourne to meet their academic requirements during this project (such as access to computer labs, statistical software, etc).
How will the student benefit from this project?	This project is aimed at nursing students with interest in cancer and lymphatic diseases specialties. At the completion of this project, the student would have a) gained methodological and analytical skills to complete a complex research goal b) learned how to self-organise and independently conduct data collection/experiments/systematic reviews etc. c) meet deadlines whilst managing their full time study load □□□developed coherent writing and presentation skills e) developed valuable networking skills and worked on a problem with direct clinical implications.

Characteristics of Mental Health Triage in the Private Sector

Project category	Hospital-based (non-lab)
Supervisors	Dr Catherine Daniel; Katherine Varas; A/Prof Lisa Stokes; A/Prof Marie Gerdtz
Project Description	The triage service at The Melbourne Clinic is a busy 7 day per week service. However this service has not been fully evaluated in terms of volume of referrals and outcomes for patients. A key consideration in the reviewing triage services is also the time taken from acceptance of referral to admission, which again is an area that has not been formally reviewed at The Melbourne Clinic. Triage services are based on principles that patients should be able to access a service that has a responsive approach with accurate advice, consistent responses regardless of the person answering the phone and high standards of accountability of decisions evidenced by documentation. The student will learn how to conduct an audit, document and clean audit data, use statistical tests to analyse data and learn effective presentation techniques. Primary data will be obtained from a database of all referral's made to triage. This data will be obtained at The Melbourne Clinic and de identified on site. Once the data is de identified the work may be conducted at The University of Melbourne. The final results will be presented to senior clinical staff at The Melbourne Clinic. Data will include the time from referral to admission, reasons for declining referrals, comparison of diagnosis on admission to discharge, reason for referral, previous admission to TMC, proportion admitted, proportion referred to OP program, time from referral to case closure, time from referral to access an inpatient bed, existing TMC psychiatrist. It is envisaged that this information will be of benefit ongoing quality improvement process to ensure best outcomes for our clients and our key stakeholders as well as being of benefit in identifying in services gaps.

What is the research question?	Is the current triage service at The Melbourne Clinic effective?
Techniques/methodologies used	The student will learn how to conduct an audit, document and clean audit data, use statistical tests to analyse data and learn effective presentation techniques- tables/graphs.
Details of primary or secondary data collection and analysis, including collection site(s)	https://www2.health.vic.gov.au/mental-health/practice-and-service-quality/service-quality/mental-health-triage-service Here is a link to a Department of Health Guidelines on Mental Health Triage (in public sector) which is a good starting point to learn about mental health triage.
Feasibility and resources available	The Melbourne Clinic is a purpose built psychiatric hospital established in 1975, initially privately owned by a group of psychiatrists and since 1985 it has been operated by Healthscope Limited. The Melbourne Clinic is the largest and longest established private psychiatric hospital in Australia. It has 175 inpatient beds, 200 accredited psychiatrists and a multi-disciplinary team including psychiatrists nurses, psychologists, social workers, occupational therapists, dieticians, geriatricians, neuropsychologists, physiotherapists, pastoral care worker and consumer consultant. The Melbourne Clinic provides a comprehensive range of inpatient, day programs and outreach programs. The Clinic is located centrally in Richmond and is well served by various forms of public transport.
How will the student benefit from this project?	The student will learn how to address evaluating a real triage service using real data in a hospital where there is support for this project.

The pathway of care between the detox and rehabilitation programs in the Addictive Behaviour Program

Project category	Hospital-based (non-lab)
Supervisors	Dr Catherine Daniel; Katherine Varas; A/Prof Lisa Stokes; A/Prof Marie Gerdtz
Project Description	The addictions program is staffed by addiction physicians, nurses, psychologists, addiction counsellors, exercise physiologist and social workers. A consultant psychiatrist or other specialists can be called upon as required. There are two arms to the program. One being a 7-10 detox program, the other a 28 day rehabilitation program. People are admitted to either arm of the program, based on their clinical presentation at the time. Whilst people can access either of both programs (detox or rehab). No formal research has been undertaken regarding how many people transition successfully through both arms of the program and the follow up plans of people who discharge as planned verses those who discharge unplanned. Aims This research project will attempt to answer the following areas specific to the substance Withdrawal Program at The Melbourne Clinic 1. How many people in a 12 month period are admitted to the detox program only? 2. How many people in a 12 month period are admitted to the rehab program only? 3. How many people transition from detox to rehab arms of the program in a 12 month period? 4. How many unplanned discharges from both arms of the program occur within a 12 month period? 5. What is the breakdown substances cited as reason for admission within a 12 month period. It is envisaged that this information will be of benefit in ongoing quality improvement process to ensure best outcomes for our clients and our key stakeholders as well as being of benefit in identifying in services gaps

	and future service directions.
What is the research question?	What is the patient pathway and referral reason to and from the addictive behaviours program.
Techniques/methodologies used	The student will learn how to conduct an audit, document and clean audit data, use statistical tests to analyse data and learn effective presentation techniques. Primary data will be obtained from a database of all referral's made. This data will be obtained at The Melbourne Clinic and de identified on site. Once the data is de identified the work may be conducted at The University of Melbourne. Data will be managed in SPSS and excel.
Details of primary or secondary data collection and analysis, including collection site(s)	Data that will be collected will include; • Reason for referral • Referral program • Proportion admitted • Planned versus unplanned admission
Feasibility and resources available	The Melbourne Clinic will provide a contact person, desk and access to a computer with log in details while the data is being cleaned and then de identified.
How will the student benefit from this project?	At the completion of this project the student will have: An awareness of the model of care offered to clients wanting a detox and or rehabilitation program for substance use. Reasons for referral to a Substance Withdrawal program Completed a research project and report Explored how to use a stats program such as SPSS. Developed valuable networking skills and worked on a problem with direct clinical implications and report these to TMC.

Mouth care for children with vascular anomalies

Project category	Hospital-based (non-lab)
Supervisor	Zerina Tomkins
Project Description	All parents face challenges when administering mouth care to their young children. There is limited education available for new parents and they are often uncertain as to the best approach at various stages of oral and dental development. Other challenges might include poor access to pediatric dentists and dental nurses and high costs associated with dental consultations and treatments. When children are born with a vascular anomaly affecting the mouth region, there may be extra difficulties with mouth care. These vascular birthmarks often involve the lips, teeth, gums and mucosal tissues in the mouth. There can be considerable distortion of the normal oral anatomy with extreme tissue overgrowth. The tongue may be enlarged and protruding from the oral cavity. Dental development can be deranged. The vascular birthmark may be a source of recurrent fissuring, ulceration, pain, bleeding, or infection. This study will survey parents of a child born with a vascular anomaly involving the face and mouth cavity. The aim of this study is to determine the concerns and challenges faced by these parents in providing mouth care. A survey will be developed and administered online. Parents will be recruited through targeted email using the vascular anomalies parental database and recruitment through Australian-based vascular anomalies parent support networks.
What is the research question?	What concerns parents about providing mouth care to their child who is diagnosed with a vascular anomaly of the mouth?
Techniques/methodologies used	Quantitative methodology (survey), documentation and clean-up audit data, prospective statistical tests to analyse data, effective presentation techniques, effective writing skills.
Details of primary or secondary data collection and	Data collection, data review and analysis will be conducted at the Royal Children's Hospital, Melbourne In collaboration with Assoc. Prof Rod Phillips, a

analysis, including collection site(s)	paediatrician at the the Department of General Medicine.
Feasibility and resources available	Students will have a full access to required infrastructure (subject to police check and working with children check through Dr Tomkins who has an adjunct appointment with the General Medicine Department at the Royal Children's Hospital, Melbourne as the Senior Research Fellow. Students are expected to use the resources provided by the University of Melbourne to meet their academic requirements during this project (such as access to computer labs, statistical software, etc).
How will the student benefit from this project?	This project is aimed at nursing students with interest in cancer and lymphatic diseases specialties. At the completion of this project, the student will have a) gained methodological and analytical skills to develop and complete a complex research goal based on a survey methodology b) learned how to self-organise and independently conduct data collection/experiments/systematic reviews etc. c) meet deadlines whilst managing their full time study load d) □□□developed coherent writing skills e) developed valuable networking skills and worked on a problem with direct clinical implications.

Estimating the incidence of secondary lymphoedema in head and neck cancer patients

Project category	Hospital-based (non-lab)
Supervisor	Zerina Tomkins
Project Description	Secondary lymphoedema of the head and neck can develop after lymph node biopsy or removal of the local lymph nodes, or after radiotherapy treatment, procedures associated with head and neck cancer surgery. Worldwide, head and neck cancer accounts for more than 550,000 cases annually. Head and neck lymphoedema (HNL) after surgical and/or radiotherapy treatments for head and neck cancer is a common and often debilitating side effect which can have a significant impact on the patient's quality of life. Though likely poorly identified and under-reported, rates of HNL as high as 75% have been reported in patients who have received surgery and/or radiotherapy. Head and neck lymphoedema (HNL) is a swelling condition that occurs in the head, face and/or neck region. Treatment for HNL can provide significant improvements in symptoms management and in QOL. Whilst HNL management principles are in line with other lymphoedemas (extremities, trunk and genitals), HNL is a complex condition with a variety of presentations. The aims of this study are: 1. To conduct an audit of the medical records of patients who have undergone surgery and/or radiotherapy for to determine the incidence of HNL in this patient population at Peter MacCallum Cancer Centre. 2.To determine what percentage of patients have been referred for treatment of HNL to lymphedema services.
What is the research question?	1) What is the incidence of secondary lymphoedema in the head and neck cancer population at Peter MacCallum Cancer Centre? 2) What percentage of PMCC patients are being referred for HNL treatment?
Techniques/methodologies used	Quantitative methodology (clinical audit), documentation and clean-up audit data, prospective statistical tests to analyse data, effective presentation techniques, effective writing skills.
Details of primary or secondary data	Data collection, data review and analysis will be conducted at Victorian Comprehensive Cancer Centre

collection and analysis, including collection site(s)	(Peter Mac) in collaboration with the lymphoedema therapy services.
Feasibility and resources available	Students will have a full access to medical records (subject to police check clearance) and will be able to collect data in the VCCC /PMC Medical Records department. Students are expected to use the resources provided by the University of Melbourne to meet their academic requirements during this project (such as access to computer labs, statistical software, etc).
How will the student benefit from this project?	This project is aimed at nursing students with interest in cancer and lymphatic diseases specialties. At the completion of this project, the student will have a) gained methodological and analytical skills to complete a complex research goal b) learned how to self-organise and independently conduct data collection/experiments/systematic reviews etc. c) meet deadlines whilst managing their full time study load □□□developed coherent writing skills e) developed valuable networking skills and worked on a problem with direct clinical implications.

Defining expertise in cancer nursing practice

Project category	Hospital-based (non-lab)
Supervisors	Mei Krishnasamy; Donna Milne; Jac Mathieson
Project Description	Despite robust investigation of constructs of advanced nursing practice (1), there has been little empirical investigation of the concept of nursing expertise (2), as defined by practising nurses. This descriptive, exploratory study sets out to survey cancer nurses working in the Victorian Comprehensive Cancer Centre to generate a body of knowledge to help inform workforce planning and profiling; mentorship, education and training requirements of nurses, and inform professional development opportunities. A randomly selected, stratified sample of nurses will be invited to take part in focus groups to generate in-depth description and cameos of expert practice. A focus group with consumer advocates will also be undertaken to elicit patient/carer descriptions of nursing expertise. Ethics approval will be secured prior to students commencing to maximise time for data collection, analysis and report writing. There will an expectation that students prepare a manuscript for publication (supported by the supervisors) and opportunity to submit abstracts to present at the Cancer Nurses Society of Australia Annual Conference. 1. Gardner G, Duffield C, Doubrovsky A, Adams M. Identifying advanced practice: A national survey of a nursing workforce. Int J Nurs Stud. 2016 Mar;55:60-70. 2. Dickson CAW, McVittie C, Kapilashrami A. Expertise in action: Insights into the dynamic nature of expertise in community-based nursing. J Clin Nurs. 2017 Jul 5. doi: 10.1111/jocn.13950. [Epub ahead of print]
What is the research question?	How is expertise defined by cancer nurses and consumers?
Techniques/methodologies used	This mixed methods study will use an online survey and focus group methodologies. Students will learn how to conduct robust online surveys; how to develop the online survey, how to manage online data collection; data confidentiality and anonymity; how to analyse survey data and use appropriate statistical tests to analyse and report data. Students will learn how to develop focus group interview scripts and how to

	undertake a focus group and analyse qualitative, audio-recorded data. Students will also be exposed to essential co-design principles through engaging with consumers to elicit their perceptions of nursing expertise. Students will learn how to prepare a manuscript for publication and prepare an abstract for presentation to a national nursing conference.
Details of primary or secondary data collection and analysis, including collection site(s)	Data collection will be via online survey and face to face focus groups. Students will be supported to develop the online survey and focus group questions. Data analysis frameworks for the quantitative and qualitative data sets will be developed by the supervisors ahead of ethics submission but students will be supported to apply appropriate statistical and qualitative data analysis approaches. Data collection will take place at the Peter MacCallum Cancer Centre (PeterMac).
Feasibility and resources available	Ethics approval to undertake the study will be secured ahead of the students commencing to ensure feasibility of completing the study within the timeframe. Students will be supported to secure honorary contracts at PeterMac to enable computer login, access to work at and manage data collection/focus groups in the organisation, access to relevant software e.g nvivo, space to work in the building.
How will the student benefit from this project?	At the completion of the project, students will have: 1. Gained methodological and analytical skills to complete a mixed methods study 2. Gained an appreciation of essential features of co-design methodology and the power of working with consumers 3. Learned how to self-organise and independently conduct data collection, analysis and preparation of a study report 4. Learned how to manage study timelines to ensure timely completion 5. Developed an appreciation of key manuscript and conference abstract preparation elements 6. Developed valuable networking skills and worked on a problem of relevance to nursing practice and workforce development.

Determining parent and young person self-reported rates of adherence to oral anticoagulant therapy

Project category	Hospital-based (non-lab)
Supervisors	Fiona Newall; Hollie Gilmore; Sophie Jones
Project Description	Very little is known regarding rates of medication adherence in children and young people requiring oral anticoagulant therapy. Poor adherence to anticoagulant therapy in adult populations has been associated with an increased rate of adverse events, including new and recurrent thrombosis. The only population of children in whom adherence to anticoagulant therapy has previously been determined is children diagnosed with pulmonary embolism, which is a relative rare event in childhood. The majority of children requiring oral anticoagulant therapy do so due to an underlying cardiac defect that confers an increased risk of thrombosis - the majority have never had a thrombosis, but requires oral anticoagulant therapy to reduce this risk.
What is the research question?	Students to develop research question as a group. The research aim of this project will be to provide novel data regarding adherences rates or oral anticoagulant therapy in the population of children to whom these agents are most commonly prescribed. The projects' findings will inform future strategies aimed to optimising adherence rates to oral anticoagulant therapy in children.
Techniques/methodologies used	This project will employ an on-line survey design using a validated questionnaire. The electronic survey will be sent to parents with a child who's oral anticoagulant therapy is managed by the Clinical haematology department at RCH AND to young people (>12 years) who's oral anticoagulant therapy is managed by this same team.
Details of primary or secondary data collection and analysis, including collection site(s)	Data collection, data review and analysis will be conducted with the supervisors support at the RCH.
Feasibility and resources	Students will have a full access to required infrastructure (subject to police check and working with children check

available	through Nursing Research at the Royal Children's Hospital. Students are expected to use the resources provided by the Nursing Research team at The Royal Childrens Hospital and University of Melbourne to meet their academic requirements during this project (such as access to computer labs, statistical software, etc).
How will the student benefit from this project?	Students will learn skills related to taking questions from clinical practice and, using a research framework, generate novel findings that can readily inform strategic service improvement initiatives. In addition to growing their understanding in a very specific field of paediatric practice (Anticoagulant therapy in childhood) the students will develop skills in inter-disciplinary engagement, protocol development, quantitative research methods and knowledge translation. The students will be invited to present at an RCH Nursing forum (Tuesday @2) and asubmit an abstract for the 2018 Nursing Research and Clinical Innovations Symposium at the RCH.

Nurses' perception of therapeutic holding during procedures in paediatrics

Project category	Hospital-based (non-lab)
Supervisors	Stacey Richards; Elise Baines
Project Description	In paediatric nursing 'therapeutic holding' is often seen as necessary intervention, to keep the child still enough to complete procedures. This type of holding may be carried out by parents or nursing staff, with verbal or implied consent and may distress the child. There is a fine line between 'therapeutic holding' and restraint with little guidance available to support paediatric nurses' to practice this safely. 'Therapeutic holding' can also be a source of moral distress for families and nursing staff who are balancing the cognitive understanding of the child to hold still and the need to complete procedures for the greater good.
What is the research question?	Students to develop research question as a group. This project aims to examine paediatric nurses perceptions related to 'therapeutic holding.' This project will provide insight into paediatric nurses' opinions and practice of 'therapeutic holding' at the RCH. The findings will inform future strategies to improve the care and experience provided during procedures at RCH and will form the basis for further exploration of this topic.
Techniques/methodologies used	An electronic survey would be developed by the students with support from their mentors and will be sent to nursing staff on identified wards at RCH.
Details of primary or secondary data collection and analysis, including collection site(s)	An electronic survey would be developed by the students with support from their mentors and will be sent to nursing staff on identified wards at RCH.
Feasibility and resources available	Data collection, data review and analysis will be conducted with the supervisors support at the RCH.
How will the student benefit from this project?	Students will learn skills related to taking questions from clinical practice and, using a research framework, generate novel findings that can readily inform strategic service improvement initiatives. In addition to growing their understanding of concepts and ethics involved in paediatric nursing the student's will develop skills in

inter-disciplinary engagement, protocol development, quantitative research methods and knowledge translation. The students will be invited to present at an RCH Nursing forum (Tuesday @2) and asubmit an abstract for the 2018 Nursing Research and Clinical Innovations Symposium at the RCH.

Safe sleeping - what do parents know?

Project category	Hospital-based (non-lab)
Supervisors	Stacey Richards; Ayla Deans
Project Description	Unwell infants frequently require nursing care and positioning in hospital which is outside of the SIDS safe sleeping recommendations, such as sleeping in a prone position to improve ventilation and lung mechanics. Whilst in hospital this practice is safe as these infants will have continuous cardio-respiratory monitoring and constant nurse observation, it is important that when an infant is well enough they are transitioned to sleep in line with the safe sleeping recommendations and that parents are provided with education to ensure safe sleeping at home after discharge. RCH has a guideline to support nurses to appropriately educate families prior to discharge. RCH safe sleeping guideline states that "it is imperative that nurses teach and model recommended infant sleep practices before discharge to reduce the incidence of SIDS and fatal sleep accidents" but little is known about what parents know about safe sleeping at home and what education is provided by paediatric nurses.
What is the research question?	Students to develop research question as a group. The aim of this project is to provide a point in time snap shot of parental knowledge at RCH regarding safe sleeping and nursing education associated with this.
Techniques/methodologies used	The project will utilise a survey designed by the students with the support of mentors which will be distributed to parents of children less than 1 year across inpatient wards at RCH. This project will provide data regarding parental understanding of safe sleeping at home and nursing education provided related to this. The findings will inform future strategies aimed to optimising nursing safe sleeping education and resources to parents.
Details of primary or secondary data collection and analysis, including collection site(s)	Data collection, data review and analysis will be conducted with the supervisors support at the RCH.
Feasibility and	Students will have a full access to required infrastructure

resources available	(subject to police check and working with children check through Nursing Research at the Royal Children's Hospital. Students are expected to use the resources provided by the Nursing Research team at The Royal Childrens Hospital and University of Melbourne to meet their academic requirements during this project (such as access to computer labs, statistical software, etc).
How will the student benefit from this project?	Students will learn skills related to taking questions from clinical practice and, using a research framework, generate novel findings that can readily inform strategic service improvement initiatives. In addition to growing their understanding of a very specific consideration of paediatric care and discharge education, the students will develop skills in inter-disciplinary engagement, protocol development, mixed research methods and knowledge translation. The students will be invited to present at an RCH Nursing forum (Tuesday @2) and asubmit an abstract for the 2018 Nursing Research and Clinical Innovations Symposium at the RCH.

Paediatric pain and intravenous opioid management

Project category	Hospital-based (non-lab)
Supervisors	Sharon Kinney; Joahnne Robson; Cindy Cameron; Abbey Lee
Project Description	Within paediatric practice, pain assessment and management is complicated by the varying developmental ages and stages of children coming into hospital and being exposed to painful stimuli. Opioid infusions may be used for the management of moderate to severe pain. Effective management of acute pain is of vital importance as is the safe administration of an opioid infusion. Patients receiving opioid infusions require close observation of sedation score, respiratory rate, heart rate, pain score and pulse oximetry. Many of these patients will have continuous cardio-respiratory monitoring or pulse oximetry monitoring. These observations should be completed and documented more frequently following a bolus of an opioid infusion.
What is the research question?	Students to develop research question as a group. The aim of this retrospective audit is to establish nurses' adherence to the clinical guidelines for observation of patients receiving an opioid infusion or intravenous opioid bolus and determine the frequency of adverse events that required the administration of naloxone, an opioid antagonist.
Techniques/methodologies used	The data will be extracted from the Electronic Medical Record (EMR) at RCH and additional review of individual patients via the EMR will be required. Findings from this project will inform education strategies and any revisions to the opioid guidelines to help ensure effective and safe management of intravenous opioids.
Details of primary or secondary data collection and analysis, including collection site(s)	Data collection, data review and analysis will be conducted with the supervisors support at the RCH.
Feasibility and resources available	Students will have a full access to required infrastructure (subject to police check and working with children check through Nursing Research at the Royal Children's Hospital. Students are expected to use the resources provided by the Nursing Research team at The Royal

	Childrens Hospital and University of Melbourne to meet their academic requirements during this project (such as access to computer labs, statistical software, etc).
How will the student benefit from this project?	Students will learn skills related to taking questions from clinical practice and, using a research framework, generate novel findings that can readily inform strategic service improvement initiatives. In addition to growing their understanding of pain managment, recording patient obervations in paediatric care, the students will develop skills in inter-disciplinary engagement, protocol development, quantitative research methods and knowledge translation. The students will be invited to present at an RCH Nursing forum (Tuesday @2) and asubmit an abstract for the 2018 Nursing Research and Clinical Innovations Symposium at the RCH.

Reviewing the current subcutaneous immunoglobulin (SCIG) home training program through a patient survey in order to implement change and improve the program

Project category	Hospital-based (non-lab)
Supervisors	Sharon Kinney; Ben Van Dort
Project Description	Subcutaneous immunoglobulin (SCIG) is a method of administering patients immunoglobulin rather than intravenously. This method was implemented by the immunology department at RCH back in 2010, however it is only in the last couple of years that the number of patients on this treatment has really increased. The majority of patients on this treatment are patients who suffer from a primary immunodeficiency in which they do not produce adequate amounts of immunoglobulins. This means these patients are extremely susceptible to infection if not treated with immunoglobulin replacement. Prior to SCIG the only method to administer immunoglobulins was intravenously. This method requires an inpatient stay once a month on the day medical unit and often takes multiple hours to complete an infusion. Patients receiving IVIG often feel flat and lethargic when they are due for their next infusion and are at greater risk of infection as there IgG levels will be at their lowest. After utilising the experience of overseas centres it was decided that implementing a SCIG program to train parents to administer immunoglobulin at home would be extremely beneficial. SCIG is given as a weekly infusion, rather than monthly which means IgG levels remain stable and the risk of infection is minimised. Parents are trained over a minimum of three sessions, one session per week in hospital by the immunology CNC. Once the parents are deemed competent and they feel comfortable, they are able to continue this treatment at home. The number of patients on SCIG has really increased over the last few years and this treatment ids being utilised by multiple departments within the hospital.
What is the research question?	Students to develop research question as a group. This project will aim to assess the current SCIG training program in order to implement change and provide the best service to families.

Techniques/methodologies used	This porject will be done through a paper survey given to all families who have taken part in the SCIG program. The survey will include yes/no questions, number scales and open ended questions in order to get the most relevant information.
Details of primary or secondary data collection and analysis, including collection site(s)	Data collection, data review and analysis will be conducted with the supervisors support at the RCH.
Feasibility and resources available	Students will have a full access to required infrastructure (subject to police check and working with children check through Nursing Research at the Royal Children's Hospital. Students are expected to use the resources provided by the Nursing Research team at The Royal Childrens Hospital and University of Melbourne to meet their academic requirements during this project (such as access to computer labs, statistical software, etc).
How will the student benefit from this project?	Students will learn skills related to taking questions from clinical practice and, using a research framework, generate novel findings that can readily inform strategic service improvement initiatives. In addition to growing their understanding of immunology and family centred care in paediatrics, the students will develop skills in inter-disciplinary engagement, protocol development, mixed research methods and knowledge translation. The students will be invited to present at an RCH Nursing forum (Tuesday @2) and asubmit an abstract for the 2018 Nursing Research and Clinical Innovations Symposium at the RCH.

Medicines optimisation in home nursing for older people at high risk of adverse events

Project category	Community-based
Supervisors	Snezana Kusljic; Cikie Lee; Rohan Elliott; Judy Lowthian
Project Description	Please note, this project is designed for a group of maximum 6 students. Medication errors and adverse medication events (AMEs) are common in older people referred to a large, non-profit Melbourne-based community nursing service. Previously we piloted a new model that integrated a formal role for clinical pharmacist working within community nursing service (RDNS). The model aimed to improve medicines safety and reduce risk of AMEs for community nursing clients. The pharmacist's main role was to provide medicines management support for community nurses, clients and carers, and facilitate medicines management between community nurses, GPs, community pharmacists and specialists. The model was successfully developed and implemented between September 2014 and December 2015, and has created a positive outcome that influenced changes in medication practice. This new project (2017-2018) will replicate and scale up the new model, and implement it into practice in the eastern region of Melbourne within the Eastern Melbourne Primary Health Network catchment areas. The implementation will use a before and after design controlled trial. Evaluation will involve a mix method (quantitative and qualitative) data collection comprising: prospective and retrospective audit of community nursing records, and interviews and/or focus groups with participating clients, carers and health professionals. Prospective and retrospective audit This component will involve extracting RDNS clients' medication data via a manual audit process, for both the intervention group and the matched control group. This process will require: i) manual retrieval of clients' medication histories (and health service utilisation) stored within RDNS records; ii) retrospective review of clients' medication histories (and health service utilisation); and iii) manual transcription and entry of data into a statistical software program (SPSS) in de-

	identified form for data analysis. A minimum of 100 clients for each group (intervention and control, minimum total 200 clients) will be required for the data collection (exact number for the sample size to be confirmed). The purpose of this audit is to examine the use of medications (and health service utilisation) in the intervention group, and compare this with the control group to ascertain whether the study intervention (RDNS Pharmacist model) has made any impacts on changing medication use and/or health service utilisation for RDNS clients between the two groups.
What is the research question?	What are the medication issues identified and resolved by clinical pharmacist for home nursing clients who are referred for a clinical pharmacy review by their community nurses?
Techniques/methodologies used	Clients' medication data will be collected by student(s) from multiple sources via an auditing process. These sources include: clients' medication histories stored in RDNS records and documentations generated by nurses and pharmacists such as nurses' referral forms, pharmacists' medication review reports, pharmacist-reconciled medication lists and client survey administered by the pharmacist. The auditing process will involve the student(s): a) retrieving clients' medication data from these multiple sources; b) retrospective review of clients' medication data; c) manual transcription of clients' medication data into a database (in de-identified form) to facilitate data analysis; and d) classification of clients' medication data and findings based on previously published criteria. The student(s) will be supervised by the research team and will be provided with training, support and guidance to collect, extract, enter and classify the data.
Details of primary or secondary data collection and analysis, including collection site(s)	The student(s) will be required to work at the research institute at RDNS to undertake the data collection. Type of data that the student(s) will collect and analyse include: Primary data collection and analysis: • Type of potentially inappropriate medicines prescribed for clients (classification will be based on previously published criteria)

	• Number of medications prescribed for clients Secondary data collection and analysis • Type of medication-related problems identified and resolved by the clinical pharmacists (classification will be based on previously published criteria) • Type of medication discrepancies/errors identified and resolved by the pharmacists (classification will be based on previously published criteria) • Pharmacists' recommendations acted on by clients' prescribers (e.g. medication changes implemented by the prescribers that are directly related to the medication issues reported by the pharmacists) • Complexity of clients' medication regimen (e.g. number of dose-times per day, or using previously published criteria) • Clients' risk of experiencing adverse drug reaction (ADR)- related hospitalisation (using previously published criteria) • Clients' responses on their attitudes towards deprescribing (will be collected from client survey)
Feasibility and resources available	The student(s) will be required to work at the research institute at RDNS to undertake the data collection. Resources required by the student(s) to undertake the data collection will be provided by the RDNS Institute research team including laptop, login accounts and password to access RDNS system. The student(s) will be supervised by the RDNS researchers to undertake the work. Regular contacts will be made with the student(s) initially such as weekly meetings to report on data collection progress and also other issues/difficulties experienced by the student(s) and then followed by less frequent meetings once the student(s) become familiar with the work.
How will the student benefit from this project?	The proposed work will provide student(s) with experience, skills and knowledge of the following: • Conducting a clinical audit on medication use and medication management • Conducting research using evidence-based

practice knowledge

- An in-depth understanding of medication management for high risk older people like the home nursing/RDNS clients, and how this impacts on the care delivered by their health providers (e.g. community nurses, GPs, community pharmacies, specialists)

- An in-depth understanding of how research is used to inform clinical practice (e.g. identifying gaps in medication practice) and how the research is translated into practice (e.g. developing and implementing new interventions to address the gap, and evaluating the impacts of the interventions)

- Stimulate student(s)' interest in undertaking further research work

Investigating the appropriateness of clinical glove use by healthcare workers

Project category	Hospital-based (non-lab)
Supervisor	Louise Hobbs
Project Description	The use of gloves has become routine in the delivery of health care, often for procedures which they are not required and their use my increase the risk of cross contamination. If gloves are worn according to the principles of standard precautions during the delivery of clinical care but not removed at the points in care indicated by the five moments of hand hygiene then their use will increase the risk of infection transmission. Further, a recent patient survey found that patients found reported being uncomfortable with healthcare workers wearing gloves for some personal tasks such as assisting to shower and dress. The appropriateness of glove use has not been integrated into the Hand Hygiene Australia audit tool and one which requires further examination. This project will investigate if a previously published clinical glove use audit tool can be integrated into the existing hand hygiene Australia audit tool to assess the appropriateness of glove use by healthcare workers.
What is the research question?	To investigate the use of gloves by healthcare workers and their potential for cross-contamination
Techniques/methodologies used	The nurse students will be required to attend a full-day hand hygiene auditing training day to become qualified hand hygiene auditors. Observational audit of clinical staff practice at The Royal Melbourne Hospital using a published audit tool will be undertaken to capture a minimum of 350 hand hygiene/glove moments in five clinical areas.
Details of primary or secondary data collection and analysis, including collection site(s)	Data will be analysed according to Hand Hygiene Australia (HHA)methodology. HHA requires 350 moments to be collected per area to provide a valid sample of clinical practice. Individual HH auditors are required to collect a minimum of 100 moments to be recognised as accredited by HHA. The modified HH/glove audit tool will undergo inter-ratter auditor reliability testing prior the commencement of auditing by conducting observations by interchanging pairs of auditors until a 90% agreement is achieved.

Feasibility and resources available	A hand hygiene auditor training session will be provided by the Infection Prevention and Surveillance Service (IPSS) at The Royal Melbourne Hospital. The Masters of Nursing Students will be required to attend this one day program to understand how to undertake a hand hygiene audit according to the five moments of hand hygiene. The IPSS team will provide support while students are auditing in clinical areas. It is estimated that data collection will be achieved over a 4 week period.
How will the student benefit from this project?	Students will gain an understanding of the importance of hand hygiene and when gloves should be used to comply with standard precautions to prevent the transmission of infection.

Establishing therapeutic

Project category	Hospital-based (non-lab)
Supervisor	Sally Lima
Project Description	In August 2013 a UK doctor began the "Hello My Name Is..." campaign. With a diagnosis of terminal cancer and experiencing care as a patient, Kate made a stark observation: very few healthcare staff introduced themselves before delivering care. Kate viewed such introductions as being crucial to the formation of trusting, therapeutic relationships. Very little research exists about how therapeutic relationships are formed and what is important to patients and their families beyond the simple act of introductions. In early 2017, a group of University of Melbourne Masters of Nursing Science students conducted a study at the Royal Children's Hospital, to assess the extent to which to which hospital staff and volunteers establish therapeutic relationships from patients' and families' perspectives. It is proposed to replicate that project in an adult setting.
What is the research question?	to assess the extent to which to which hospital staff and volunteers establish therapeutic relationships from patients' and families' perspectives.
Techniques/methodologies used	Exploratory descriptive prospective study with survey design
Details of primary or secondary data collection and analysis, including collection site(s)	Data will be collected as a point prevalence survey over one day across all inpatient units at Bendigo Health. Data analysis will primarily be descriptive statistics with the possibility of some inferential statistics being done.
Feasibility and resources available	The supervisor of this project has supervised many student groups, including the group who conducted the same project at the Royal Children's Hospital and as such knows the project is feasible and all resources are available. The supervisor is able to meet the students in Melbourne and via teleconferencing to minimise the students' needs to travel to Bendigo.

Measuring the impact of a permanent stoma on quality of life for rectal cancer survivors

Project category	Hospital-based (non-lab)
Supervisors	Mei Krishnasamy; Carolyn Atkin; Karla Gough
Project Description	In 2017, approximately 16,682 Australians will be diagnosed with colorectal cancer [1] and 4,144 people will die from these diseases (colon, rectum and recto-sigmoid junction cancer). Stoma formation may be necessary after bowel surgery, but if the cancer is very low in the rectum, a permanent colostomy is created. Stoma creation involves diversion of the bowel to the skin, where the gut contents are emptied into a bag. Living with a stoma can have wide-ranging health-related quality of life (QOL) impacts, including altered body image, sexual and relationship issues, and can impact on activities of daily living [2,3]. In 2016, Thyø et al, published a paper entitled "The colostomy impact score: development and validation of a patient reported outcome measure for rectal cancer patients with a permanent colostomy. [4]. The authors concluded that their 22 item questionnaire was valid for the assessment of the impact on QOL from having a permanent colostomy in a Danish rectal cancer population, but that it required validation in non-Danish populations The aim of this study is to distribute the 22 item patient reported measure to a cohort of Australian rectal cancer patients who have undergone surgery with formation of a permanent stoma at the Peter MacCallum Cancer Centre. Data will inform nurse-led interventions to address modifiable QoL impacts for survivors of rectal cancer and will be shared with the Dutch group to add to their international validation data set.
What is the research question?	What is the impact of a permanent stoma on quality of life of a cohort of Australian rectal cancer survivors?
Techniques/methodologies used	Online or hard copy surveys will be distributed to a randomly selected cohort of rectal cancer survivors who underwent formation of a permanent stoma at the Peter MacCallum Cancer Centre between 2014-2016. Students will learn the essentials of rigorous survey data collection, management and analysis. They will gain an appreciation of the importance of rigorous patient recruitment; confidentiality and anonymity of data

	collection, management and reporting.
Details of primary or secondary data collection and analysis, including collection site(s)	The 22 item colostomy impact score measure will be distributed to a randomly selected cohort of rectal cancer survivors along with the EORTC Quality of Life Questionnaire, replicating the Thyø et al (2016) methodology. Descriptive statistics will be used to describe the characteristics of the study cohort. Where available, QoL data from the study sample will be compared with population norms (people without cancer) and with people who have undergone a temporary stoma for cancer surgery. A full data analysis plan will be developed to explore relationships between the EORTC QoL data and the 22 item stoma impact scale for the study cohort, and associations between key variables of interest (to be determined) examined. Data will also be returned to the Dutch team for validation purposes.
Feasibility and resources available	Ethics approval will be gained prior to students commencing the study. Students will be supported by an experienced caner nurse researcher, an advanced practice cancer stomal therapy nurse, and health services statistician to develop survey methodology, data collection, management, and analysis skills. The advanced practice stomal therapy nurse and the colorectal cancer team at the Peter MacCallum Cancer Centre are supportive of the study and will facilitate recruitment to the study. NB: students will not be expected to approach potential participants. The approach will come from the PeterMac team with the students supported to distribute, collect , manage and report study data.
How will the student benefit from this project?	Students will develop survey methodology, data collection, management, quantitative analysis and project reporting skills. They will also learn best practice principles with regard to approaching and recruiting patients, as well as gain an appreciation of the value and importance of patient-reported outcome data to informing and enhancing excellent patient care. Students will be supported to publish their work with

the project supervisors on completion of the project.