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Kevin O’Shaughnessy is a Clinical Nurse with Emergency Department experience and expertise. He has broad nursing, research, operational and administrational knowledge, a deep passion for nursing and compassion for the patients, families and co-workers he has engaged with. Kevin has been instrumental in the establishment of Emergency Department nurse-led research within the Royal Adelaide Hospital over the last 5 years. Kevin is currently involved in course writing and teaching within the University of South Australia, and is in the final stages of his PhD candidature. Kevin is involved in the supervision of a number of Honours students including Emergency Department nurses and their projects.

Research interests

- Nurse led research
- Emergency Department nursing
- Supportive care
- Palliative care
- Prostate cancer, men’s health
- Cancer survivors and their families
- Men and cancer
- Exercise and cancer
The ResearchED Unit focusses on collaborative projects between the University of South Australia, School of Nursing and Midwifery and the Royal Adelaide Hospital Emergency Department.

**BACKGROUND**

Over the past 5 years there has been an ongoing collaborative effort between the School of Nursing and Midwifery at the University of South Australia and the Royal Adelaide Hospital Emergency Department to facilitate nurse-led research in an Emergency Department setting. This process has been championed by Kevin O’Shaughnessy, and supported by Professor Adrian Esterman and Professor Carol Grech.

Kevin has focused on engaging and mentoring many emergency nurses into a variety of projects to try and establish and grow a vibrant, challenging and engaging research culture within the Royal Adelaide Hospital Emergency Department. As part of establishing a research culture, many forms of investigation have been encouraged. Small projects have been supported, as well as larger research projects have been instigated. A number of Emergency Department nurses have been, and are currently, undertaking postgraduate research including Honours research degrees and PhD study.

This has been a planned, unfunded organic process that is now starting to produce tangible results. This publication will outline some of the ResearchED unit’s achievements to date, as well as providing our vision for the future. Summarised herein are a number of projects that are currently being undertaken and supported as well as outlining some of the plans for the short to intermediate term.

**University of South Australia, School of Nursing and Midwifery**

The University of South Australia School of Nursing and Midwifery is one of the largest schools of its type in Australia and provides a range of undergraduate, postgraduate and higher degree programs. The School has a substantial program of multidisciplinary research that addresses issues related to clinical practice, health, safety and quality, teaching and learning. As part of this research, the School accepts Honours, Masters and PhD students seeking to have an outstanding research education under the supervision of experienced academic staff.

**Royal Adelaide Hospital Emergency Department**

The Royal Adelaide Hospital (RAH) Emergency Department is the main trauma hospital for South Australia. The RAH ED treats over 70,000 patients per year with an admission rate of around 40%. The current Emergency Department was opened in May 2003. At the time of opening, it was the largest and most advanced ED in Australia, with 46 patient cubicles, and 4 separate resuscitation areas.

As the only professorial ED in SA, there is a strong academic focus and an active research program. For medical staff, education is tailored to all levels with an emphasis on preparation for both parts of the FACEM examination. In Nursing, there is particular emphasis on post-graduate study with many of the Emergency Department Registered Nurses undertaking the Graduate Diploma of Nursing Science (Emergency Nursing). Professional affiliation with the College of Emergency Nursing Australasia (CENA) is encouraged within the department to assist in developing professional and educational standards for Emergency Nursing practice as well as promoting a high standard of emergency health care.
‘Had I the heavens’ embroidered cloths, Enwrought with golden and silver light, The blue and the dim and the dark cloths, Of night and light and the half-light, I would spread the cloths under your feet: But I, being poor, have only my dreams; I have spread my dreams under your feet; Tread softly because you tread on my dreams’.

William Butler Yeats (1865-1939), Aedh wishes for the cloths of Heaven

OUR VISION
ResearchED will establish, guide and foster a strong and vibrant emergency nurse-led research culture.

MISSION STATEMENT
Our ResearchED Unit will be a collaborative relationship between the University of South Australia, School of Nursing and Midwifery and the Emergency Department of the Royal Adelaide Hospital; and any other relevant stakeholders. We endeavor to cultivate research, to build knowledge and support clinicians in developing their research skills and knowledge. This will enable them to independently drive research and to translate this knowledge, to improve patient-centered care.

CORE VALUES
➤ We value partnership and trust
➤ We value a positive attitude in our work
➤ We maintain accountability for what we do
➤ We value our colleagues and professional excellence
➤ We want our research to make a difference in the lives of others
OVERVIEW PROJECTS — CURRENT

An exploration into TPPP nurses transition to advanced practice within an Emergency Department
Owens S ², Pelentsov LJ ¹, O’Shaughnessy PK ¹, ², Phillips C ¹

Exploring the cancer survivor’s perceptions of exercise therapies;
Healey L ², Jones Lee ³, O’Shaughnessy PK ¹, ², Pelentsov LJ ¹, Esterman AJ ¹

What are the supportive care needs of patients diagnosed with first presentation psychosis;
Davies E ², Pelentsov LJ ¹, O’Shaughnessy PK ¹, ², Fielder A ¹, ⁴, Esterman AJ ¹

OVERVIEW PROJECTS — COMPLETED

2011
Exploring the concept of desensitisation to violence and aggression in the nursing workforce of an Emergency Department
Henrys D ², Whaites K ³, Henderson B ¹, Pelentsov LJ ¹, O’Shaughnessy PK ¹, ²

Nurse-led Emergency Department research; A description of the establishment of three nurse led projects in a large metropolitan hospital
O’Shaughnessy PK ¹, ², Baulis H ², Clarke C ¹, Henderson B ¹, Henrys D ², Wake M ², McCutcheon H ⁵

2010
Australian men’s long term experiences following prostatectomy: A qualitative descriptive study
O’Shaughnessy PK ¹, ²

OVERVIEW — MANUSCRIPTS IN-PROGRESS

2014
What are the supportive care needs of prostate cancer survivors and their partners?
O’Shaughnessy PK ¹, ²

2013
Investigating the screening, testing and treatment of prostate cancer
Ireland C ¹, ²

2012
What are the supportive care needs of parents caring for a child diagnosed with Ectodermal Dysplasia: A rare genetic disorder?
Pelentsov LJ ¹

Exploring the use of audio visual communication strategies in an emergency waiting room to improve patient and staff satisfaction
Baulis H ², Montagu A ², Davies E ², Wake M ², Deuter K ¹, McCutcheon H ⁵, O’Shaughnessy PK ¹, ²


Henrys D ², Moorcraft L ², Pelentsov LJ ¹, O’Shaughnessy PK ¹, ², (2014) ‘Nurse-led Ketamine and Fentanyl protocol for pain management in the Emergency Department setting (in-progress).

Davies E ², Pelentsov LJ ¹, O’Shaughnessy PK ¹, ², Fielder A ¹, ⁴, Esterman AJ ¹ (2014) ‘A literature review of the supportive care needs of patients diagnosed with first presentation psychosis’, Journal of Mental Health Nursing (to be submitted).

Healey L ², Jones Lee ³, O’Shaughnessy PK ¹, ², Pelentsov LJ ¹, Esterman AJ ¹, (2014) ‘A review of the literature investigating cancer survivors perceptions of exercise therapies’ (to be submitted).
OVERVIEW - PUBLICATIONS IN-PRESS

As of March 2014 the unit project leader has been involved in producing eight Journal Articles and fourteen conference presentations whilst, as part of the ResearchED Unit or related to their post graduate studies. Some examples are listed below.

2014

Journal Articles


Ireland C, O’Shaughnessy PK (2014) ‘Screening, testing and treatment of prostate cancer, a call for further research’, Australian Journal of Cancer (Accepted for publication Dec 2013).

2013

Journal Articles


Conference Abstracts


2011

Conference Abstracts


2010

Journal Articles


Conference Abstracts


Affiliations

1 University of South Australia, School of Nursing and Midwifery, South Australia
2 Royal Adelaide Hospital, Emergency Department, South Australia
3 Sloan-Kettering Cancer Centre, New York, USA
4 Duke University, North Carolina, USA
5 Kings College, Florence Nightingale School of Nursing and Midwifery, London, UK
6 Flinders University, School of Medical Sciences, South Australia
7 Duke University, Urology Centre, North Carolina, USA
8 Flinders University, School of Nursing and Midwifery, South Australia
PROJECT 1

Provisional title of project
Time seen by a nurse is a time not to be forgotten

Project type
Department-based study; producing an article for publication

Researchers involved
Anthea Morrissett 2, Adam Montagu 2, Craig Robinson 2, Lemuel Pelentsov 1 and Kevin O’Shaughnessy 1, 2

About the project
A key performance indicator for Australian Emergency Departments is the percentage of patients seen within their prescribed Australasian Triage Scale (ATS) category time. The ‘time to treatment’ described according to each Australasian Triage Scale (ATS) category refers to the maximum time a patient in each category should wait for assessment and treatment.

Nurses contribute significantly to the assessment and treatment of patients within busy Emergency Departments. There is an assumption that clinical outcomes of patients may be affected by delays to assessment and treatment beyond the recommended times, and that treatment and assessment does not rely on a doctor alone.

Aim
This study explores the barriers and enablers to improving ‘time to be seen’ by ED nurses.

Tasks/skills required undertaking this project
> Project management skills
> Searching and critically reviewing literature
> Dissemination strategies
> Quantitative research skills and SPSS data analysis
> Interpretation and generating of findings and writing recommendations for different stakeholders
> Developing an oral presentation
> Writing for publication

PROJECT 2

Provisional title of project
Evaluating the effectiveness of Nurse-led Fentanyl and Ketamine pain protocol use in a busy metropolitan Emergency Department

Project type
Department study; Producing an article for publication

Researchers involved
Ms Deb Henrys 2, Mr Luke Moorcraft 2, Mr Lemuel Pelentsov 1 and Kevin O’Shaughnessy 1, 2

About the project
In the RAH ED, Fentanyl Pain Protocol (FPP) is the first line of defence against moderate to severe pain – a nurse led process by which sliding scale Fentanyl is carefully titrated to patient needs. An audit of case-notes indicated nurses were hesitant to use the protocol to its full potential; worried they were going to overdose the patient and cause harm. This was addressed through bedside teaching and formal re-education, reinforcing the safety of the protocol when followed. On occasion, despite the protocol being followed appropriately, it was insufficient to produce analgesia in some patients. For example those suffering chronic pain and/or long term users of opiates.

We noticed a growing trend of combining small bolus doses of Ketamine as an adjunct to opiate use amongst various Aeromedical Retrieval Services and Medical Consultants affiliated with Retrieval services who work in our resuscitation rooms. The Ketamine Fentanyl Cocktail (KFC) protocol was developed as a second line defence against severe, intractable pain. A potent combination of drugs in a single syringe, easily administered on a sliding scale, based on the existing FPP. The similarity of both protocols makes it simple for the clinician to confidently and safely transition seamlessly from FPP to KFC.

Aim
To describe the role new pain protocol using Fentanyl and Ketamine can play in allowing Emergency Nurses to deliver timely and effective pain control in a busy metropolitan Emergency Department.

Tasks/skills required undertaking this project
> Interpretation and generating of findings
> Writing recommendations for different stakeholders
> Developing an oral presentation
> Writing for publication

Affiliations
1 University of South Australia, School of Nursing and Midwifery, South Australia
2 Royal Adelaide Hospital, Emergency Department, South Australia
3 Sloan-Kettering Cancer Centre, New York, USA
4 Duke University, North Carolina, USA
5 Kings College, Florence Nightingale School of Nursing and Midwifery, London, UK
6 Flinders University, School of Medical Sciences, South Australia
7 Duke University, Urology Centre, North Carolina, USA
8 Flinders University, School of Nursing and Midwifery, South Australia
EXPANDED PROJECTS — IN-PROGRESS

PROJECT 3

Provisional title of project
An exploration into TPPP nurses transition to practice within an Emergency Department

Project type
UniSA Bachelor Health Sciences (Honours) degree project
February 2014 – February 2016

Researchers involved
Simon Owens 1, Lemuel Pelentsov 1 and Craig Phillips 1

About the project
A large Emergency Department can be an intimidating environment for many nurses. Junior nurses who are part of a Transition to Professional Practice Program (TPPP) require additional supports. Nurses are expected to acquire specialised skills and strategies within this environment. Few studies have examined the effectiveness of programs designed to help newly graduated nurses in this busy environment.

Aim
The aim within this project is to ascertain the views of TPPP students and of senior Registered Nurses within the Emergency Department of the Royal Adelaide Hospital regarding the transition to practice of TPPP students within an Emergency Department.

Tasks/skills required undertaking this project
- Project management skills
- Searching and critically reviewing literature
- Designing a survey
- Developing an ethics proposal consistent with NHMRC and HREC guidelines including relevant reporting, data management and storage
- Designing a web-based survey and testing for validity, reliability and consistency
- Dissemination strategies
- Quantitative research skills and SPSS data analysis
- Interpretation and generating of findings and writing recommendations for different stakeholders
- Developing an oral presentation
- Writing for publication

PROJECT 4

Provisional title of project
Exploring the cancer survivors perceptions of exercise therapies

Project type
UniSA Bachelor Health Sciences (Honours) degree project
June 2013 – June 2015

Primary Researcher
Leigh Healey

Research Supervisors
Lemuel Pelentsov 1, Kevin O’Shaughnessy 1, 2, Professor Lee Jones and Professor Adrian Esterman 1

About the project
Contemporary evidence within the literature suggests physical activity may be used as an adjunct therapy to cancer treatment and assist with the recovery from some cancer treatments. The concept of exercise in oncology is relatively new, and many cancer survivors do not receive evidence-based education with regards to the positive role that exercise can play in reducing mortality rates, when combined with current cancer treatments.

The use of exercise as an additional therapy to cancer treatment has recently been evolving at an exponential rate. There has been considerable research into this theorem; however there are many questions that remain to be asked of exercise use in oncology.

The aim within this pilot study is to ascertain whether cancer patients are willing to participate in physical activity as an adjunct therapy to cancer treatment.

Tasks/skills required undertaking this project
- Project management skills
- Searching and critically reviewing literature
- Designing a survey
- Developing an ethics proposal consistent with NHMRC and HREC guidelines including relevant reporting, data management and storage
- Designing a web-based survey and testing for validity, reliability and consistency
- Dissemination strategies
- Quantitative research skills and SPSS data analysis
- Interpretation and generating of findings and writing recommendations for different stakeholders
- Developing an oral presentation
- Writing for publication
PROJECT 5

Provisional title of project
Investigating the supportive care needs of patients presenting with Psychosis for the first time.

Project type
UniSA Bachelor Health Sciences (Honours) degree project June 2013 – June 2015

Primary Researcher
Ellen Davies 1, 2

Research Supervisors
Lemuel Pelentsov, Kevin O’Shaughnessy 1, 2, Dr Andrea Fielder1 and Professor Adrian Esterman 1

About the project
Summary of the proposed research project
People who present to emergency departments and/or other health services travelling with drug-induced psychosis are typically adolescents or young adults. Despite similar rates of hospital presentation and hospital length of stay periods between people with drug-induced psychosis and schizophrenia, it has been found that people with drug-induced psychosis are significantly more likely to lose contact with community services post discharge. Given that acute drug-induced psychosis can become chronic if substance use and abuse is continued, it is important that good follow-up care is provided for this group of people. It is therefore vitally important that their own support networks are assisted through this period of time to prevent further drug induced psychotic episodes. There is little knowledge in the literature regarding support for families of people with drug-induced psychosis. There is also little recorded about the best type of follow-up care in the community for people with co-morbid mental illness and substance dependence.

This project will utilise a mixed-methods approach to ascertain the level of support that people with drug-induced psychosis have post discharge from a tertiary hospital setting and how well their families feel supported. A range of health professionals involved in the care of people with drug-induced psychosis will be asked what assistance is currently provided and what they believe can be further done to assist this group of people.

Aim
To explore the views regarding supportive care needs of people who have had a first presentation and diagnosis of psychosis.

Tasks/skills required undertaking this project
› Project management skills
› Searching and critically reviewing literature
› Designing a survey
› Developing an ethics proposal consistent with NHMRC and HREC guidelines including relevant reporting, data management and storage
› Dissemination strategies
› Qualitative research skills including analysis
› Interpretation and generating of findings and writing recommendations for different stakeholders
› Developing an oral presentation
› Writing for publication

Affiliations
1 University of South Australia, School of Nursing and Midwifery, South Australia
2 Royal Adelaide Hospital, Emergency Department, South Australia
3 Sloan-Kettering Cancer Centre, New York, USA
4 Duke University, North Carolina, USA
5 Kings College, Florence Nightingale School of Nursing and Midwifery, London, UK
6 Flinders University, School of Medical Sciences, South Australia
7 Duke University, Urology Centre, North Carolina, USA
8 Flinders University, School of Nursing and Midwifery, South Australia
ResearchED UNIT MENTORS

Our ResearchED Unit would not be possible without the ongoing support, and mentorship of Professor Carol Grech and Professor Adrian Esterman.

Professor Carol Grech is the Head of School at UniSA, School of Nursing & Midwifery. Professor Grech has extensive experience as a nurse clinician and is a nationally recognised leader in the field of critical care nursing education.

Her involvement in research, education and practice in critical care has led to a number of conference presentations and workshops for senior nurses throughout Australia on the topic of clinical performance assessment including the evaluation of advanced practice for nurse practitioners. She is an editor for the Australian Critical care journal and a long term member of the Australian College of Critical Care Nurses (ACCCN).

Carol is research active with over 30 peer reviewed publications, 21 international and national conference presentations and 13 Keynote Address presentations. Carol’s particular area of research is in the area of investigating hospital deaths from adverse medical events by the South Australian Coroner and whether coronial recommendations from such deaths are implemented in practice.

Professor Adrian Esterman is regarded as one of Australia’s leading biostatisticians. In 2005 he took up his current appointment as Foundation Chair of Biostatistics at the University of South Australia. Professor Esterman is a Foundation Member of The Australasian Epidemiological Association (AEA), and has twice been elected to AEA Council, the first time as Treasurer and the second as Vice-President. He is also a member of the International Epidemiological Association, The International Society for Clinical Biostatistics, and the Clinical Oncology Society of Australia.

Professor Esterman is on the Editorial Board of three scientific journals and a reviewer for many others, including Statistics in Medicine, the Medical Journal of Australia and the Australia & New Zealand Journal of Public Health. He has approximately 200 publications (20 in 2010) most in the area of environmental health, evidence-based practice and cancer epidemiology, and many in high impact journals. He has an H-Index of 23.

He is a grant reviewer for NHMRC including Project Grants, Career Development Awards, and NHMRC Fellowships, and also reviews grants for the Health Research Council of New Zealand, Healthway Western Australia and the Cancer Council of NSW.

ResearchED ACCOUNTABILITY

Researcher O’Shaughnessy will prepare 6 monthly reports on the research unit’s current projects, activities/outcomes (papers conferences etc), proposed research, ethics applications and any financial matters (grants etc).
Abstract

Parenting a child with a rare genetic disorder has special difficulties, because diagnosis may be delayed or undetermined, support groups may be small and geographically scattered, and healthcare skills and resources limited. Ectodermal dysplasia (ED) is a life-limiting condition of the central and peripheral nervous systems. It is associated with significant infant morbidity and mortality, with risks greatest in the first two years of life. For parents caring for a child with ED, this period is often a time of stress and uncertainty. Currently, there is a dearth of literature which reports on the experiences and support needs of parents caring for a child with ED. The aim of this study was to provide an in-depth account of the experiences and supportive care needs of parents caring for a child with ED. Methods: A mixed methods design was employed which used focus group data to aid in the development of an internationally distributed internet survey. Results: 126 parents from 14 countries responded to the survey. Five themes were identified; the need for early diagnosis, breastfeeding difficulties in mother carriers with ED, parental decision making, relational impacts and social support issues. Discussion: To our knowledge, this is the first study which identified and examined the experiences and support needs of parents within this rare genetic disorder. Further research into the areas outlined in this study is warranted to expand the knowledge and awareness gaps.

Keywords: Supportive care, parenting, ectodermal dysplasia, family support, rare genetics

Introduction

Ectodermal dysplasia (ED) is a rare genetic disorder with an incidence of 1 per 100,000 live births worldwide (1-3). It is a life-limiting condition of the central and peripheral nervous systems affecting tissues and organs of the ectoderm; skin, hair, nails, teeth and sweat glands (4). ED is associated with
SEXUALITY AND CHRONICALLY ILL CLIENTS

Impaired sexual function and prostate cancer: a mixed method investigation into the experiences of men and their partners

Peter K O’Shaughnessy, Colin Ireland, Lemuel Pelentsov, Laws A Thomas and Adrian J Esterman

Aims and objectives. To explore issues related to sexual function and relationships, for men and their wives or partners, following diagnosis and treatment for prostate cancer.

Background. A diagnosis of prostate cancer and subsequent treatment result in a significant number of men experiencing some impairment to their sexual function. There is scant research into the impact of changed sexual function on these men’s masculinity, sexuality, intimate relationships and their needs regarding counselling and supportive care.

Design. Internet-based survey.

Methods. Focus groups and couple interviews were used to improve validity for questionnaire items designed to provide insight into men’s experiences of prostate cancer in areas such as sexual function and relationships. The questionnaire included both closed and open-ended questions and had the option for the wife or partner to complete a section.

Results. Qualitative research revealed 17 specific categories within three key themes: sexual dysfunction, loss of libido and masculinity. The questionnaire found, unexpectedly, the majority of men said that they had sufficient emotional and psychological support. Wives/partners confirmed cancer had impacted on their partner’s feelings of masculinity (71%), compared to 42% of men who felt that this was the case. Predictors of loss of libido, erectile dysfunction and ‘feeling less of a man’ were developed. Univariate predictors included hormone therapy, regrets about treatment choice, cancer having impacted on masculinity and distress during the last week.

Conclusions. Men are not able to clearly identify the challenges prostate cancer brings especially changes to their masculinity.

Relevance to clinical practice. The findings strongly suggest that for men with prostate cancer, nursing assessments of men’s sexual health be augmented by information gained from their partners; further, these assessments should be augmented with a careful exploration of these men’s psyche guided by the knowledge that masculinity influences perceptions of self (being a man) and help seeking.

Key words: counselling, couples, erectile dysfunction, Facebook, Internet, loss of libido, masculinity, nurses, nursing, prostate cancer, regret, relationships, sexual function, sexuality, survey questionnaire, wives

Accepted for publication: 31 October 2012

Background

Cancer of the prostate is a significant health problem and is currently the second most common cause of cancer death in men (Jemal et al. 2008). According to Dall’Era et al. (2008), the USA, Northern Europe and Australia have a higher incidence of prostate cancer than other countries.

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Nurse led emergency department research; a description of the establishment of three nurse led projects in a large metropolitan emergency department

Peter ‘Kevin’ O’Shaughnessy1∗, Hannah Baulis2, Chris Clarke2, Bridget Henderson2, Deb Henrys2, Megan Wake2, Helen McCutcheon1

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2 Emergency Department, Royal Adelaide Hospital, North Terrace, Adelaide, SA 5000, Australia

Keywords: Emergency department; Emergency nursing; Research; Empathy; Communication; Trauma; Violence; Aggression; Nurse led research

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Background: Conducting nurse led research in an emergency setting is often conducted by nurses and academics from outside the departments in which research is undertaken. Barriers to research being conducted by nursing staff within an emergency department include a lack of time, lack of funding, lack of academic support and expertise. This paper describes the processes involved in establishing three nurse led projects within a major metropolitan emergency department. These processes included an open, inclusive recruitment campaign, a collaborative approach to identifying projects to be undertaken, the co-operation and support from the University of South Australia School of Nursing and gaining the approval and support of ‘gatekeepers.’

Aims and objectives: The aim of this research was to provide emergency nurses with the opportunity to establish and contribute to nurse led research within a major metropolitan emergency department. The major objectives related to this aim are to:
- Identify and reduce the barriers to creating nurse led emergency department research.
- Design, implement and evaluate at least one project that emergency nurses believed was of significance to them.
- Provide an open opportunity for ED staff to directly impact their practice.
- Describe the processes involved in establishing nurse led research in an emergency department.

Methods: A description of the processes involved in establishing the three projects including; qualitative data from semi structured individual interviews with key informants and focus group data collected from nurses involved in the research; quantitative data from pre and post project surveys.

Conclusion: It is anticipated the findings from this study will provide some insight for the future development of research projects in emergency departments by emergency department nurses.

doi:10.1016/j.aenj.2011.09.068

A new ED & new model of care: A patient centred approach

Karen Taurima, Noelene Herbert, Leeanne Trenning∗
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The emergency department at the Princess Alexandra Hospital in Brisbane is a tertiary referral centre specialising in emergency and trauma care. It sees over 45,000 patients per year, with a substantial percentage of acute presentations, Category 1, 2 and 3. The decision to establish a new department in 2005 afforded an opportunity to review the model of care being offered at PA. This occurred at a time when it had been clearly identified that care was less than optimal, with the demand for service steadily increasing. Following a review of the literature and benchmarking process investigated current approaches; a new model of care was developed with the specific goals of improving patient flow through the department and achieving enhanced patient outcomes and satisfaction.

Principal features of the new model of care include: a streamlined triage process, improving time-to-treatment and placing patient to the appropriate treatment area. In addition efficient risk management strategies were introduced ensuring all patients receive a secondary assessment within 15 min of arrival to the department. As a component of the secondary assessment, all patients also receive observations, analgesia as required and timely referrals to allied health clinicians. Further strategies including an increased staff to patient ratio relative to the acuity of the patient; increased staffing numbers in the resuscitation area thereby ensuring that dedicated staff is available improve safe and timely management of trauma patients upon arrival.

The new model of care has been in place for the past four months and is already demonstrating its effectiveness. Early data analysis has indicated a marked decrease in ambulance redirections, emergency department length of stay, time to be seen and patient representations. This has been achieved at a time when we have seen an unprecedented 15.3% increase in total presentations and a 23% increase in Queensland Ambulance presentations.

Differences in self-reported outcomes of open prostatectomy patients and robotic prostatectomy patients in an international web-based survey

Peter ‘Kevin’ O’Shaughnessya,b,c, Thomas A. Laws a, Carol Pinnock c,d,e, Judd W. Moul f,g, Adrian Estermana

a School of Nursing and Midwifery, University of South Australia, City East Campus, North Terrace, Adelaide, South Australia 5001, Australia
b Royal Adelaide Hospital, Adelaide, South Australia, Australia
c Urology Unit, Repatriation General Hospital, Daw Park, South Australia, Australia
d School of Medicine, Flinders University, Adelaide, South Australia, Australia
e Division of Surgery, Adelaide University, Adelaide, South Australia, Australia
f Duke Prostate Center, Duke Cancer Institute, Durham, NC, USA
g Division of Urology, Department of Surgery, Duke University, Durham, NC, USA

A B S T R A C T

Objectives: To compare patient reported outcomes between robotic assisted surgery and non-robotic assisted surgery.
Methods: This was an international web-based survey based on a qualitative research and literature review, an internet-based questionnaire was developed with approximately 70 items. The questionnaire included both closed and open-ended questions.
Results: Responses were received from 193 men of whom 86 had received either open (OP) or robotic (RALP) surgery. A statistically significant (p = 0.027), ranked analysis of covariance was found demonstrating higher recent distress in the robotic (RALP) surgery group. Although not statistically significant, there was a pattern of men having robotic (RALP) surgery reporting fewer urinary and bowel problems, but having a greater rate of sexual dysfunction.
Conclusions: Men who opt for robotic surgery may have higher expectations for robotic (RALP) surgery, when these expectations are not fully met they may be less likely to accept the consequences of this major cancer surgery. Information regarding surgical choice needs to be tailored to ensure that men diagnosed with prostate cancer are fully informed of not only short term surgical and physical outcomes such as erectile dysfunction and incontinence, but also of potential issues with regards to masculinity, lifestyle and sexual health.

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Introduction

Radical prostatectomy (RP) or removal of the prostate by surgery is the most frequently received treatment for localised prostate cancer in Australia, Europe and the United States of America (Cooperberg et al., 2004; Jemal et al., 2010; ACS, 2010; Chambers et al., 2008). Prostatectomy involves the removal of the entire prostate gland, seminal vesicles, sections of the vas deferens and in many cases the bladder neck (Walsh and Donker, 2002; Rozet et al., 2004). There has been much recent discussion regarding the benefits of robotic assistance in prostate surgery (Chambers et al., 2008; Lowrance et al., 2010; Schroack et al., 2012).

There are two open (OP) types of surgery: the retropubic radical prostatectomy (RP) and the radical perineal prostatectomy (RPP) as well as the laparoscopic radical (LRP) prostatectomy, the first laparoscopic surgery being performed in the early 1990’s (Schuessler et al., 1997; Rozet et al., 2007). Bolenz et al. (in press) detail how this minimally invasive alternate approach to the previous open surgical approach is becoming standard practice.

Robotic assisted laparoscopic radical prostatectomy (RALP) was introduced in the early 2000’s to provide surgeons with technical advantages, such as better magnification, computer elimination of tremor, and an end of wrist instrument with seven degrees of range of freedom in its range of motion when undertaking LRP (Joseph et al., 2005). There has been a steady increase in the use of robotic assisted surgery since its initial introduction (Joseph et al.,
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