



Government of **Western Australia**  
Department of **Health**

# Department of Health Western Australia Human Research Ethics Committee

**Project Summaries for Approved Proposals**

April to June 2017 Quarter

## Project summaries for proposals approved by the Department of Health Human Research Ethics Committee – April to June 2017 quarter.

The material contained in this document is made available to assist researchers, institutions and the general public in searching for projects that have ethics approval from the Department of Health Human Research Ethics Committee (DOH HREC). It contains lay description/summaries available for the April to June 2017 quarter.

<b>Project Title</b>	<b>Royal Flying Doctor Services Data Linkage Project</b>		
<b>Principal Investigator</b>	Doctor Stephen Langford		
<b>Institution</b>	Royal Flying Doctor Services		
<b>Start Date</b>	14 April 2017	<b>Finish Date</b>	Ongoing
<p>The Department of Health Western Australia (DOHWA) and Royal Flying Doctor Services (RFDS) signed a Memorandum of Understanding on the 27 June 2016 to release demographic and service data from the RFDS to the Data Linkage Branch (DLB). This is for the purpose of making RFDS records available for linkage to information held by the DOHWA and other datasets held by other organisations. This process is designed to facilitate research to support service evaluation, quality improvement and planning, with data being accessible to external approved researchers.</p>			

<b>Project Title</b>	<b>Gynaecological Cancer in Western Australia: A Program of Research</b>		
<b>Principal Investigator</b>	Dr Aime Powell		
<b>Institution</b>	Notre Dame University		
<b>Start Date</b>	26 June 2017	<b>Finish Date</b>	31 December 2024
<p>The purpose of this study is to investigate the treatment/management, health outcomes (disease recurrence, patterns of care, utilisation of health services etc.) and overall survival for gynaecological cancer patients in Western Australia. This information is currently limited and further studies are required. By using Western Australian population-based linked data we can link together many aspects of patient health data which will allow us to add to the limited body of research available.</p>			

<b>Project Title</b>	<b>A ten-year evaluation of community treatment orders on mental health and forensic outcomes</b>		
<b>Principal Investigator</b>	Professor Steve Kisely		
<b>Institution</b>	University of Queensland		
<b>Start Date</b>	14 June 2017	<b>Finish Date</b>	31 December 2017
<p>This project will use a controlled before and after design (CBA), an example of a non-RCT designs recognised by the Cochrane Collaboration. CBA studies incorporate a non-randomised control group; data are collected on the intervention and control groups before and after the introduction of an intervention. We will compare lengths of stay (LOS) &amp; admission rates for patients placed on CTOs prior to the CTO introduction compared with annual LOS &amp; admission rates after introduction. We will also assess a wider range of outcomes other than just health service use including mortality and morbidity as measured by routinely administered standardised instruments and recorded in the Mental Health Information System. We will identify all patients discharged or ordered to community treatment in Western Australia. We will refer to the date of first placement on an order as the “index date”.</p> <p>These subjects will be compared with controls drawn from administrative data and matched on clinical and demographic variables including prior hospitalisation (voluntary &amp; involuntary). Anonymised information on both groups will be extracted from administrative data covering up to 5 years prior to and after the index date. We will initially compare patients placed on CTOs with controls from and evaluate the impact of CTOs on the health and legal system in terms of a range of outcomes. We will also compare the characteristics of patients placed on CTOs in the community with those placed on CTOs on discharge. For all analyses we will adjust for potential confounders such as demographics, rurality and prior health service use.</p>			

<b>Project Title</b>	<b>Effects of HPV vaccination on the development of cervical abnormalities for Aboriginal women: A Western Australian study</b>		
<b>Principal Investigator</b>	Dr Aime Powell		
<b>Institution</b>	The University of Notre Dame		
<b>Start Date</b>	12 April 2017	<b>Finish Date</b>	31 December 2018
<p>The purpose of this study is to investigate the treatment/management, health outcomes (disease recurrence, patterns of care, utilisation of health services etc.) and overall survival for gynaecological cancer patients in Western Australia. This information is currently limited and further studies are required. By using Western Australian population-based linked data we can link together many aspects of patient health data which will allow us to add to the limited body of research available.</p>			

<b>Project Title</b>	<b>Government Data Custodians and Decision-Making: Release of Personal Information for Research</b>		
<b>Principal Investigator</b>	Professor Judy Allen		
<b>Institution</b>	The University of Western Australia		
<b>Start Date</b>	19 May 2017	<b>Finish Date</b>	31 December 2018
<p>This project will investigate the factors that impact on the decision to release, or not release, information from the point of view of data custodians. Data custodians will identify a range of factors that impact on the decision to release or not release information for research including legal, cultural and policy factors.</p> <p>We will explore what changes might improve the decision-making process for data custodians and make it more timely and transparent for researchers, for example, by developing and publishing criteria for decision-making.</p>			

<b>Project Title</b>	<b>WARDA participation in an international project: The Comprehensive CA-CP Study: Combining congenital anomaly (CA) and cerebral palsy (CP) data for a comprehensive investigation into opportunities for prevention</b>		
<b>Principal Investigator</b>	Ms Linda Watson		
<b>Institution</b>	King Edward Memorial Hospital		
<b>Start Date</b>	10 May 2017	<b>Finish Date</b>	31 December 2018
<p>Cerebral palsy (CP) is a life-long neurological condition that affects movement and posture, and its causes are often unclear or unknown. We do know that 15-40% of children with CP will also have a birth defect (congenital anomaly). These defects may occur in the brain and be the direct cause of CP; in the brain and not be the cause of CP; physically near the brain (e.g. cleft palate); or far away from the brain (e.g. kidney abnormality). The relationship between CP and birth defects is still poorly understood.</p> <p>This research project brings together researchers who have a strong interest in CP causation, with a view to prevention. They will combine information from CP and birth defects registers from ten regions of Europe and Australia: Western Australia, South Australia, Victoria, Sunderland (England), Norway, Funen (Denmark), Western Sweden, Grenoble (France), Portugal and Zagreb (Croatia) to create the largest data set of people with CP and congenital anomalies that has ever been put together. This will enable researchers to investigate:</p> <ol style="list-style-type: none"> <li>1. Which birth defects are common in different types of CP</li> <li>2. The outcomes for children with CP and particular types of defects</li> <li>3. The risk of CP for children with particular defects</li> <li>4. Which defects that cause CP have possibilities for prevention.</li> </ol>			

<b>Project Title</b>	<b>Is risk-based licensing an effective intervention for reducing alcohol-related harms</b>		
<b>Principal Investigator</b>	Dr Ashlee Curtis		
<b>Institution</b>	Deakin University		
<b>Start Date</b>	26 June 2017	<b>Finish Date</b>	30 June 2018
<p>The study aims to determine whether the introduction of risk- based licensing has been an effective intervention for reducing emergency department presentations. The project will use time series autoregressive integrated moving- average (ARIMA) models to determine the impact of the introduction of risk based licensing in Victoria, New South Wales, Australian Capital Territory and Queensland. Western Australia will be used as a control site, given it has not introduced a risk based licensing scheme. For Western Australia, general trends over time will be examined, as well as the impact of any other interventions implemented during the study period.</p>			

<b>Project Title</b>	<b>Long-term outcomes after bariatric surgery in Western Australia 2007 – 2016.</b>		
<b>Principal Investigator</b>	Associate Professor Kwok Ho		
<b>Institution</b>	St John of God Subiaco Hospital		
<b>Start Date</b>	19 May 2017	<b>Finish Date</b>	31 December 2021
<p>The original study examined several short- and intermediate-term physical and mental health outcomes after bariatric surgery across all Western Australia. Given the rapidly changing nature of bariatric surgery the authors now wish to look at the incidence of bariatric surgery over the last decade (2007 - 2016) and longer term (up to 5 years) physical and mental health outcomes after bariatric surgery for the 2007 - 2011 cohort . Furthermore, the authors have noticed a rise in the number of patients undergoing second and third bariatric operations and wish to explore the long-term need for weight reduction re-operations. Given that obesity is more common in lower socio-economic communities and that the majority of bariatric surgery is undertaken in the private healthcare system, the investigators also wish to research the impact of socio-economic and remote/distance factors on bariatric surgery service provisions in WA.</p>			

<b>Project Title</b>	<b>Secondary falls prevention in older people presenting to the emergency department with a fall: A multi-centre randomised controlled trial of efficacy, cost-effectiveness and acceptability of the RESPOND program</b>		
<b>Principal Investigator</b>	Associate Professor Glenn Arendts		
<b>Institution</b>	The University of Western Australia		
<b>Start Date</b>	22 June 2017	<b>Finish Date</b>	1 November 2019
<p>The aim of the RESPOND project is to drive knowledge translation through implementation of an evidence-based patient centred falls prevention program for older people presenting to ED following a fall. The research plan is a mixed methods evaluation and comprises a series of 3 interlinked evaluations that are underpinned by the following objectives:</p> <ol style="list-style-type: none"> <li>1. To undertake a multicentre RCT to investigate the impact of the RESPOND program on fall, fall injury and ED representation rates in older people presenting to the ED with a fall (Study 1);</li> <li>2. To undertake a detailed program evaluation to assess participation, acceptability and feasibility of the RESPOND program, and to identify critical success factors and barriers to effectiveness and sustainability (Study 2); and</li> <li>3. To undertake a multilevel economic evaluation to assess the cost effectiveness of the RESPOND program compared to standard usual care, via an analysis of all ED presentations and hospitalisation admissions (Study 3).</li> </ol>			

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