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OF QUEENSLAND
AUSTRALIA

CREATE CHANGE

MAiC Motor Accident
Insurance Commission

RECOVER Injury Research Centre

Professor Deb Theodoros
Director

Mission Statement

“The mission of RECOVER is to **optimise** the physical, psychological, communication, social and vocational recovery of people following injury, especially when caused by road traffic crashes.

Our research focuses on developing, validating, and translating client-centred interventions to optimise recovery in acute care and active rehabilitation settings.”

RECOVER research programs

Technology-enabled rehabilitation

- **GOAL:** More effective & efficient health services supported by technology innovation
- **RESEARCH FOCUS:** Technology-enabled rehabilitation
- **PROGRAM LEADER:** Professor Deborah Theodoros

Improving health outcomes after musculoskeletal injury

- **GOAL:** More effective diagnosis, assessment and treatment of people following road traffic injury
- **RESEARCH FOCUS:** Musculoskeletal pain after road traffic injury
- **PROGRAM LEADER:** Professor Michele Sterling

Optimising recovery after compensable injury

- **GOAL:** Maximising client-centred rehabilitation goals focused on meaningful occupation
- **RESEARCH FOCUS:** Optimising participation in work and other social roles
- **PROGRAM LEADER:** Associate Professor Venerina Johnston



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Today's program

What is consumer involvement in research?

Alison Bell

Knowledge Translation Officer

Welcome

Thank you for coming!

- Consumers and community members, some who have been research participants themselves
- Representatives from community organisations
- Health professionals
- Policy makers

Today's program

- A little on consumer and community involvement in research
- Three brief presentations about the research being conducted at RECOVER
- **Group activities and discussion**
- Wrap up and lunch

Who are RECOVER consumers?

- People affected by injury and their families/caregivers
- The general community (with an interest in research activities)
- Community groups who represent consumers
- Health professionals
- Policy makers (e.g. Motor Accident Insurance Commission)
- CTP insurance providers and the National Injury Insurance Scheme (NIISQ)
- Employers and employer associations

Why involve consumers in research?

Involving consumers in research is highly recommended by the National Health and Medical Research Council as a way to make research more relevant to community needs.

Involving consumers can also increase public awareness of research and can improve the quality and reach of research findings.

Involving consumers is the right thing to do!

What is consumer and community involvement in research?

NHMRC statement on consumer and community involvement

“Consumer and community involvement is about research being carried out with or by consumers and community members rather than to, about or for them.”

<https://www.nhmrc.gov.au/guidelines-publications/s01>

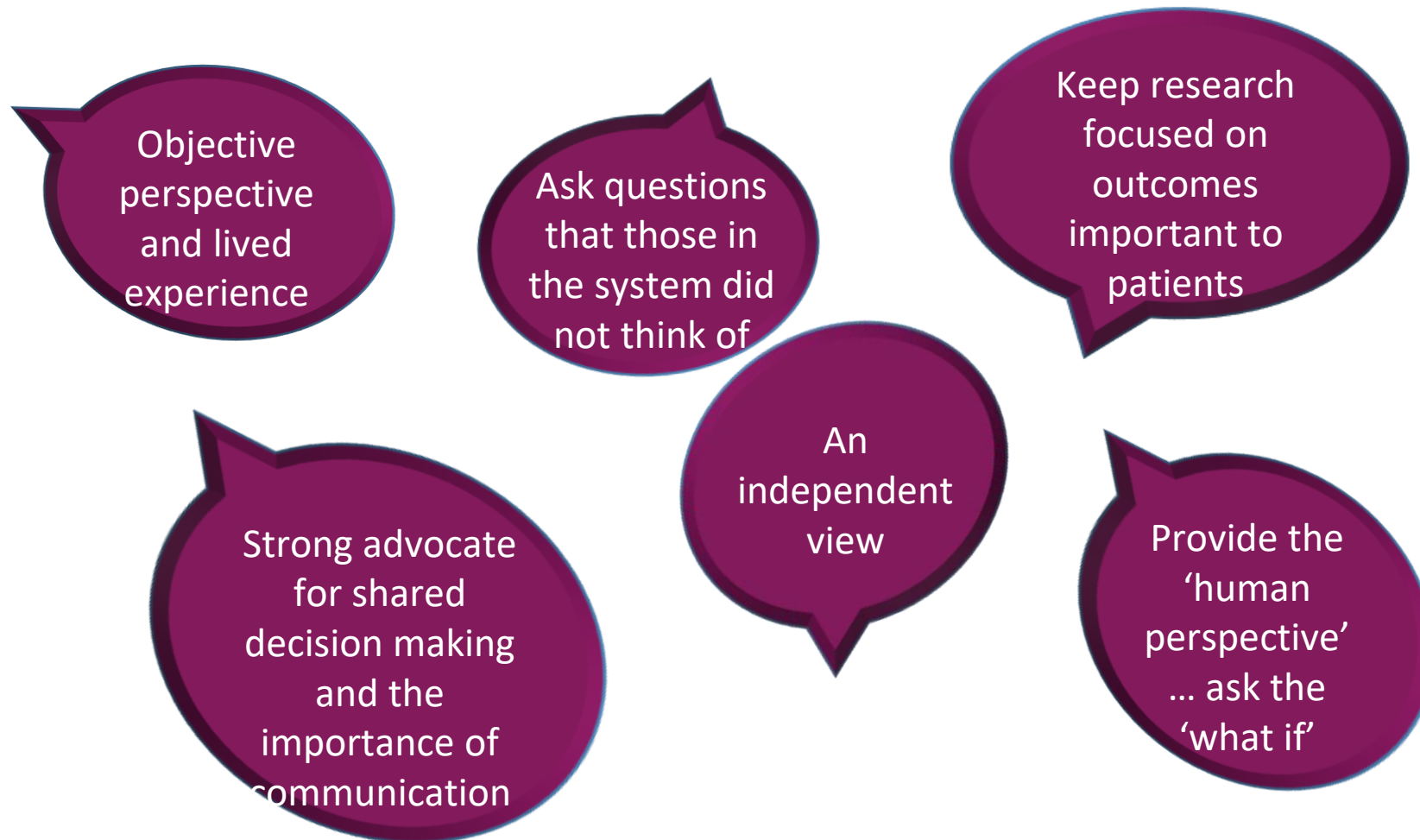


What do consumer representatives do?

- Keep health consumers at the centre
- Raise consumer concerns
- Speak beyond the clinical perspective – emotional, spiritual, cultural, geographical, financial perspectives
- Speak up
- Be connected
- Provide feedback



What consumers bring to the discussion



Engagement (partnership) spectrum



We just need to tell people about something.

We want to gather new ideas, or we are seeking feedback on an issue.

We need in-depth discussion with people about an issue.

We want to develop a solution in equal partnership with people.

We want consumers to generate the solution and manage the process.

Consumer involvement at RECOVER Injury Research Centre

Our goal is to involve consumers via three main ways

1. Forums and workshops
2. Website portal 'Get Involved'
3. A consumer engagement advisory group

At RECOVER we would like consumers to be more than just participants in our research. We would like to involve consumers in all phases of the research process.

Technology-enabled rehabilitation

Technology-enabled Rehabilitation

“Using various technologies to deliver rehabilitation services”



How do we do this?

- A. Using technologies to deliver services into the home via the internet - Telerehabilitation
- B. Creating new technologies for use in rehabilitation



Delivering services into the home via the internet

Videoconferencing

Smartphones

- Apps
- Audio recording
- Video recording

Email

Instant messaging

Monitoring devices



Be Clear Online project



Participant opinion

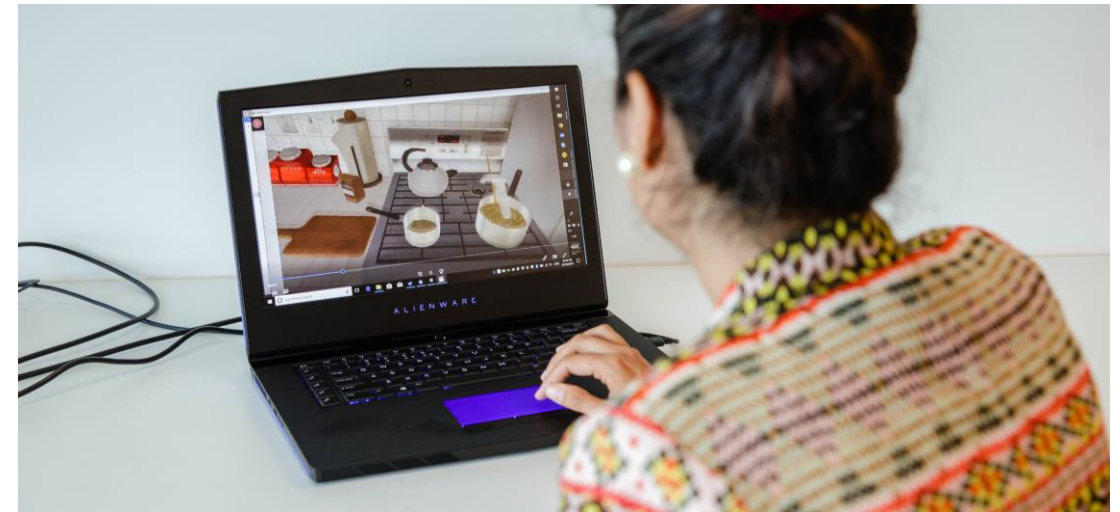


Creating new technologies for use in rehabilitation

Using innovative technologies to create real-world environments

- Need for people undergoing rehabilitation to practice their walking and speaking strategies that they have learned in therapy in situations that are similar to the real-world

Virtual reality applications



What will we be doing in the future?

- Continue to develop new technology-enabled interventions for

- Physical
- Psychological
- Communication

difficulties experienced by people following motor vehicle crashes

- Develop technology platforms to facilitate rehabilitation
- Implement these interventions in health services
 - Surgical Treatment and Rehabilitation Service (STaRS)
 - Other rehabilitation facilities



How can you be involved?

- Provide us with advice on what **you think** would be a **good idea/helpful** to explore in the technology area
- **Try out** some of the technologies & interventions that we develop before we start a research trial
 - **Tell us** what you liked about these and what you did not like
- **Tell us** what you think about a proposed research protocol/idea
 - Does it make sense to do this?
 - Will the assessments take too long?
 - Is the whole process too difficult, time-consuming, or just not doable for some people?
 - What are **your suggestions** to make this work better?

The Team



Prof Deb Theodoros



Dr Ati Vaziepour



Danielle Aldridge



Dr Louise Cahill



Dr Brooke-Mai
Whelan



Return to everyday life and work

Research program: Optimising recovery after compensable injury



Associate Professor
Venerina Johnston



Dr Charlotte Brakenridge

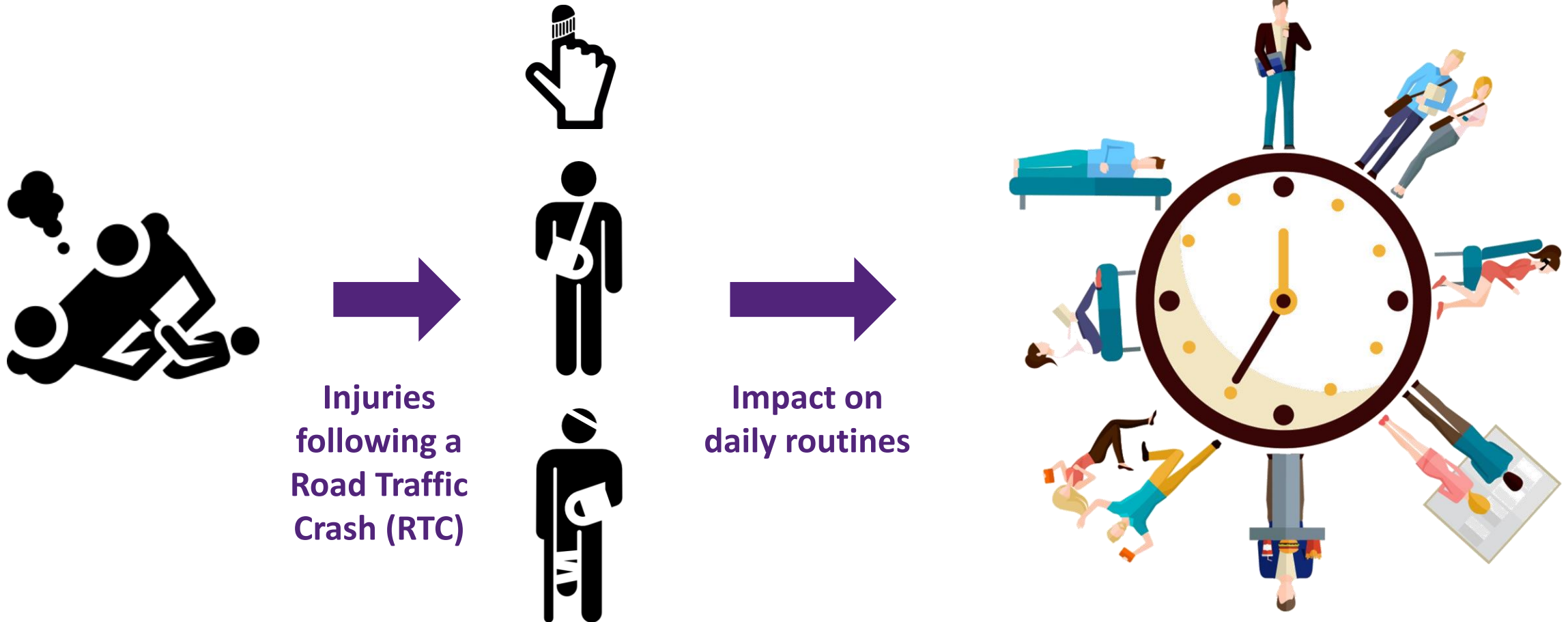


Dr Nicole Andrews



Dr Esther Smits

INTRODUCTION

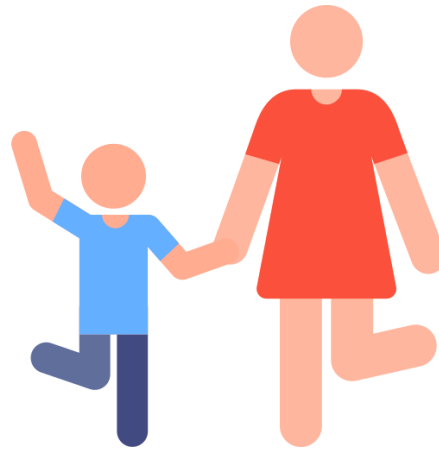


INTRODUCTION

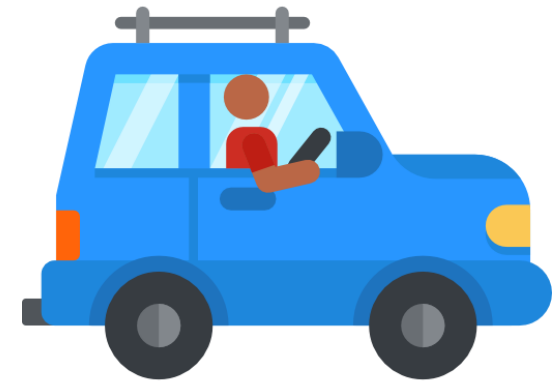
- Normal daily life activities could be difficult or impossible after injury, for example:



Household tasks



Playing with children



Icons made by Freepik from www.flaticon.com

Driving to work

- These changes are expected
- Changes are temporary in most cases

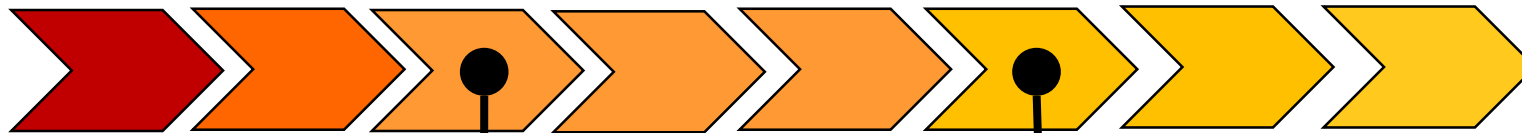
RECOVERY



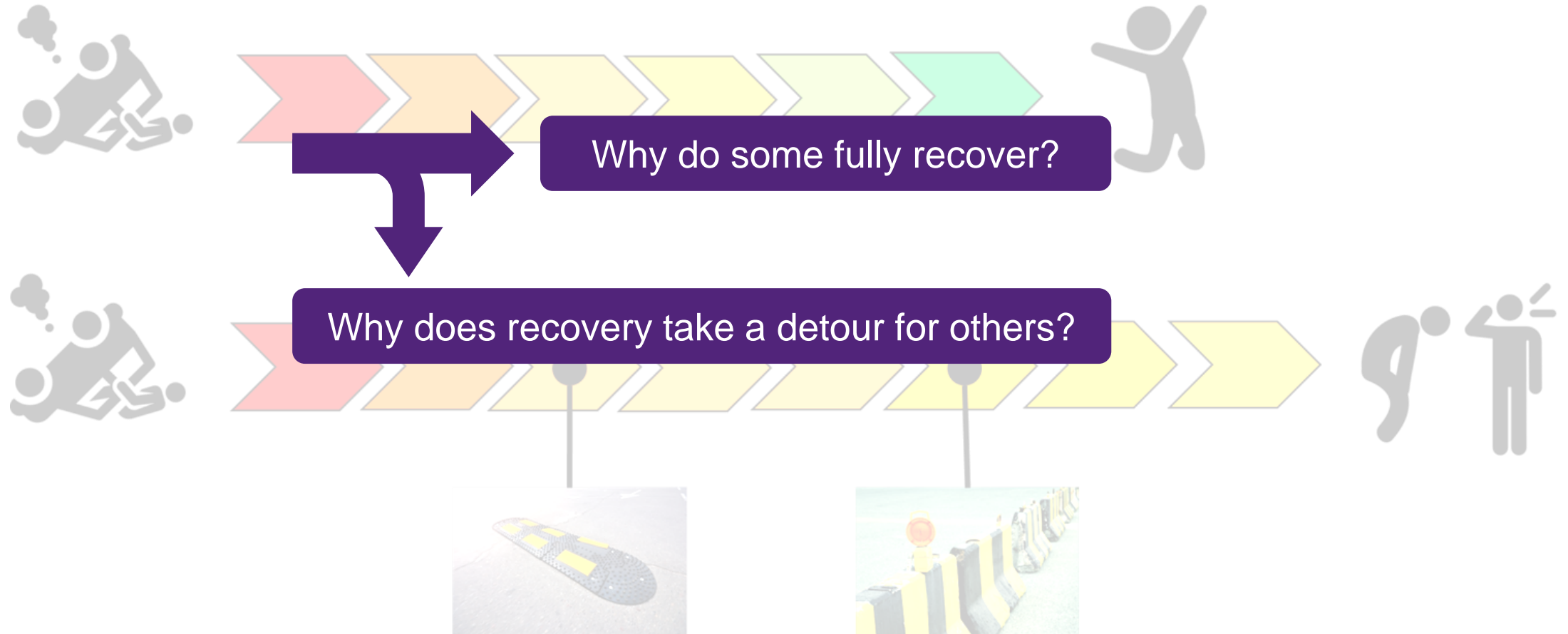
Most people will have a full recovery



For some, recovery will not go as expected (takes longer or have a less good outcome)



OUR RESEARCH



OUR RESEARCH - EXAMPLES

Understand Return to Work patterns



12 months

Understand challenges when returning to everyday life and work



Develop tools to identify risk of poor recovery or not-returning to work



WHAT IS NEXT?

- **What does recovery mean to the injured individual?**
- **Improve and develop treatment options**
 - Shorter recovery process
 - Better recovery process
 - Faster return to work and other social roles
- **Self-management**
- **Test the developed tools that identify risk of poor recovery**
 - Do they lead to better treatment?
 - Do they lead to better or faster recovery?

Thank you

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<https://recover.centre.uq.edu.au>

 [Facebook.com/recoverinjuryresearch](https://www.facebook.com/recoverinjuryresearch)

 [Twitter.com/RecoverResearch](https://twitter.com/RecoverResearch)

 [Linkedin.com/company/recovery-injury-research-centre](https://www.linkedin.com/company/recovery-injury-research-centre)



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Improving Health Outcomes After Musculoskeletal Injury

Improving Health Outcomes after Musculoskeletal Injury: *Knowledge Gain and Translation*



*What happens within
the body:
musculoskeletal injury
and following
treatment?*

Brain

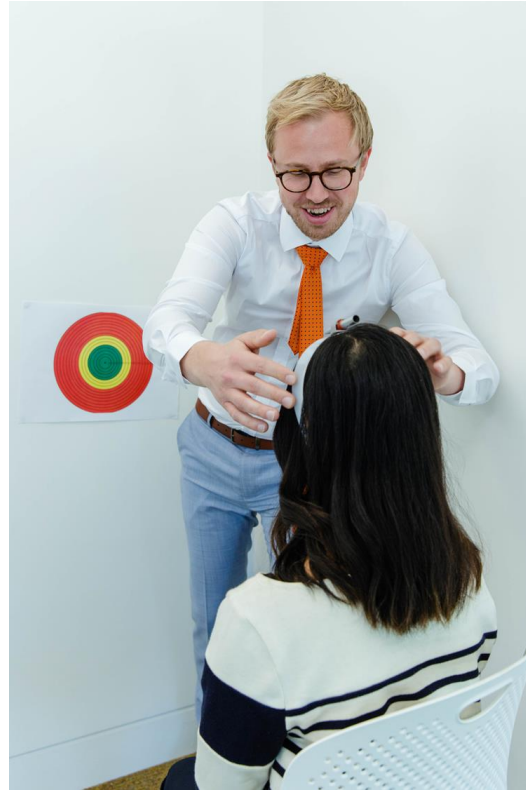
Local and distal pain

How stress/distress interfere
with recovery



What are the best ways to identify injury severity and what are optimal treatments?

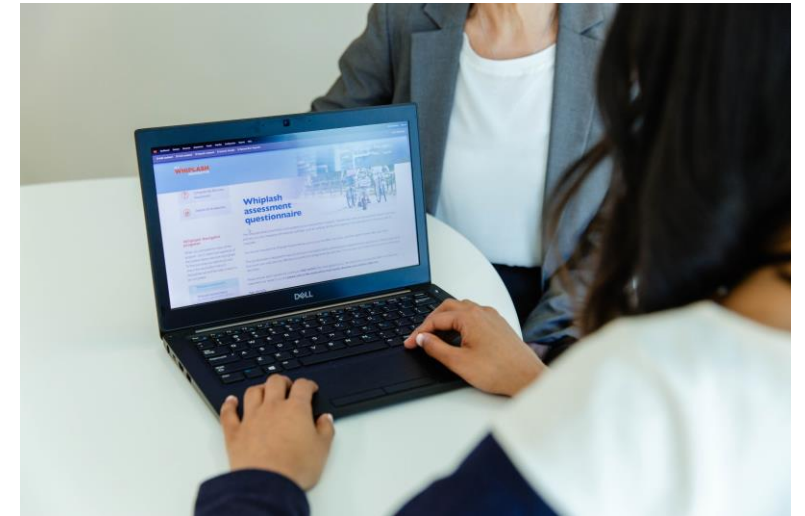
Integrated Care



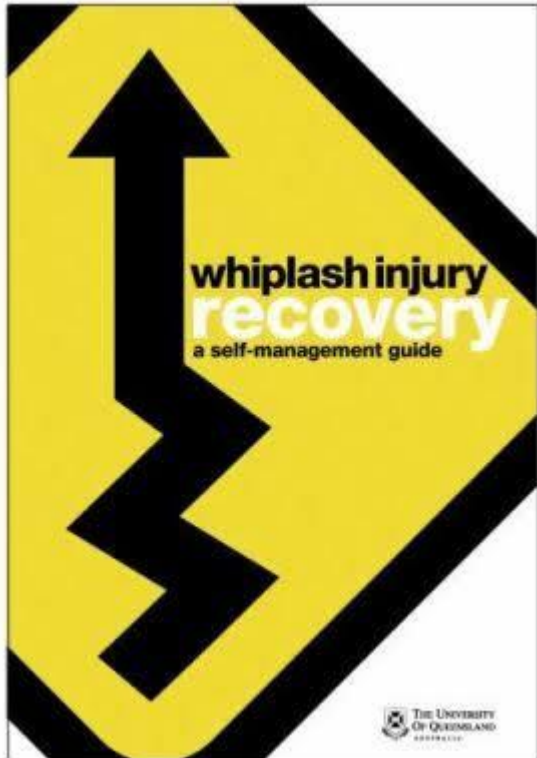
Extending the role of Physiotherapists



Early identification



*Engaging consumers
to facilitate optimal
recovery and help
explain and expand
our research*



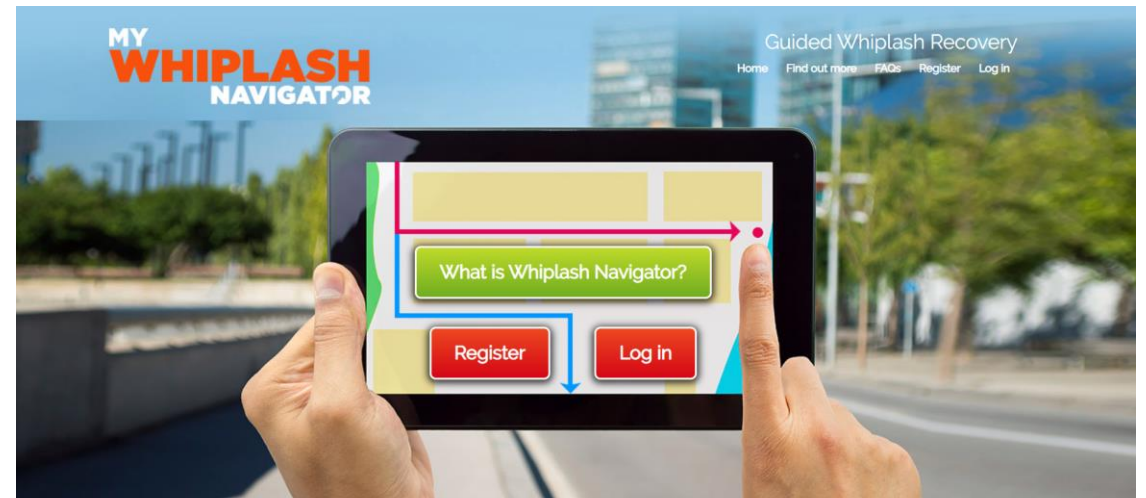
Welcome!

You and your patient can work together to facilitate their recovery

This is the online version of WhipPredict, a clinical prediction rule for whiplash. This is a research-generated tool for physiotherapists to predict the likelihood of their patients developing moderate/severe disability or experiencing full recovery following whiplash injury.

If you are already familiar with WhipPredict, please press Start and let your patient complete the questionnaire.

- How to use this tool
- More information about WhipPredict
- Start**



Future Research

Understanding Mechanisms and Processes

- Using mobile technology (e.g mobile phone apps, ambulatory measures) to allow a micro view of recovery from very soon after injury in the ED to 12 months post injury
- Investigating the co-development of health outcomes (e.g pain, disability, mental health) from very soon after injury
- Brain function, Immune function, Physiological function
- Aiming to understand why some people recover very well and others do not

Assessment-Prognosis-Treatment

- Early identification of risk and how we can improve clinical tools to increase accuracy
- Very early treatments in ED and primary care e.g. combined treatments of medication & physiotherapy; physiotherapy & psychology delivered by physiotherapists
- The development of mobile health applications to empower injured people to drive and manage their recovery
- The development of technologies so that injured people can communicate more effectively with their health care providers (GPs and Allied health)
- Understanding how clinicians and injured people make decisions about their treatment
- Clinical pathways of care and how to effectively implement these into primary care and ED
- Exercise and physical activity – what is the best type/dose/intensity of exercise for people with acute or chronic pain after MVC

Research Translation

- On-line interactive modules: physiotherapists, injured people
- Key outcomes

Our Team

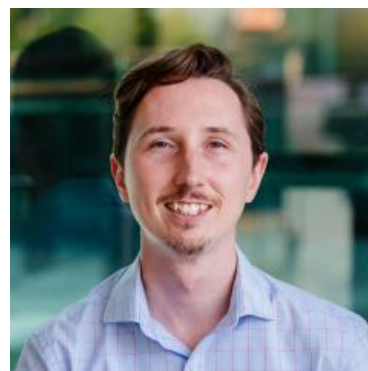
RECOVER



Professor Michele
Sterling



Dr Nigel Armfield



Dr Scott Farrell



Dr Carrie Ritchie

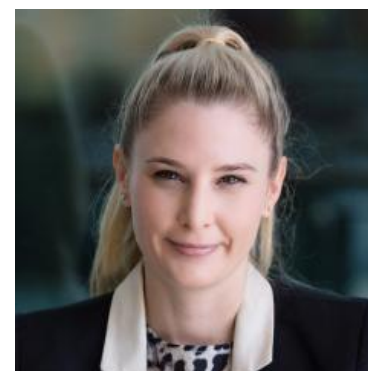


Ms Sarah Robins

NHMRC CRE Recovery Following Road Traffic Injuries



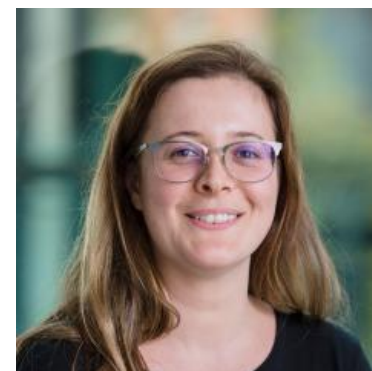
Dr Rutger de Zoete



Dr Rachel Ephinston



Assoc Prof Jane
Nikles



Ms Simone Scotti
Requena



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Group activity

Group activity

- Break into groups by table
- Each table to nominate a scribe and a spokesperson
- We will pose four questions designed to uncover some of your views about research at RECOVER
- Approximately 15 minutes to respond to each question
- Each table then shares a key response with the whole group

Question 1

What did you learn about RECOVER from the presentations that you did not know before today?

Question 2

What has been your previous experience with research?

Question 3

What topics would you like to see researched by RECOVER?

Question 4

What has been your previous experience with research?



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Thank you

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