

MachSR Future Leaders Fellowship Program

Case studies



Dr Tim Chittleborough
Colorectal, General
and Trauma Surgeon,
Royal Melbourne
Hospital and Royal
Women's Hospital

Tackling the post covid waiting list headache at the Royal Melbourne Hospital: Expansion of same day surgery models of care

During this project to address long surgical waitlists it was identified that RMH underutilises day surgery. A study was designed and implemented to identify surgical procedures that the evidence indicated could be safely performed as day surgery and change these procedures to day surgery as default. With appropriate exclusion and discharge criteria in place, the day surgery rates for laparoscopic cholecystectomy and inguinal herniorrhaphy were successfully increased, followed by the roll out of default day surgery for an additional four procedures during the fellowship period, with further planned for 2024. Dr Chittleborough acted as the Clinical/Surgical lead on the project, supported by Planned Surgery Recovery & Reform Program appointed staff. Activity undertaken during this fellowship has resulted in bed day savings, expedited patient flow, and the sharing of knowledge and resources across the West Metro Health Services partnership.

“The fellowship position and dedicated time allowed me to really champion the project in my health service, which has assisted in uptake among clinicians.” - Tim

Remote symptom monitoring and automated treatment plans in children with Cystic Fibrosis

Time and skills afforded by the fellowship enabled the design and commencement of a pilot RCT to implement and evaluate an intervention that rapidly identifies exacerbations in CF patients without increasing frequency of patient reviews. In the first 3 months of the study 9 exacerbations were detected and semi structured interviews with staff and patients indicated acceptability of the remote monitoring system and the potential for it to increase patient engagement. Awards of a CF Australia grant and a Centre for Health Analytics Clinical Data Champion position furthered the progress of the project. The innovative digital model trialled will inform other disease areas, improving early identification of high-risk patients with minimal burden on the health service.



Jen Corda
Senior Respiratory
Physiotherapist, Royal
Children's Hospital

“The fellowship fostered new networks and connections with experts and peers both internal and external to my organisation. These connections have been crucial to the success of the project and have opened up future collaborative opportunities both in developing my own research journey but also those of my hospital.” - Jen



Dr Anne Harrison
Physiotherapy
Manager, Werribee
Mercy Hospital

Attitudes, barriers and enablers to consumer engagement with the patient/carer-activated escalation process (for clinical concerns about patient deterioration): a mixed methods exploratory study

The REACH (Recognise, Engage, Act, Call, Help) process at Mercy Health aims to empower patients and carers to escalate a concern about clinical deterioration and supports three of the National Safety and Quality Health Service Standards. A review indicated that both awareness of and engagement with the process was low. During the fellowship a two-part mixed methods study was co-designed with consumers and key stakeholders, and surveys to explore the awareness and perceptions of nursing staff and patients/carers of the REACH process were completed. Recommendations from the surveys will inform the Standard 8 Committee to improve to the escalation process. The findings of this project are directly relevant to other health services, with benchmarking from six public hospitals also indicating low rates of engagement with their escalation processes.

“The fellowship has been beneficial to my health service as I have been able to lead a piece of work to address a gap identified by our Standard 8 - Recognising and responding to acute deterioration committee.” - Anne

Virtual clinics as a platform to deliver values-based healthcare for Inflammatory Bowel Disease

In a landscape of escalating IBD prevalence and associated economic burden across Australia this project assesses values-based healthcare as a model to deliver quality care through the use of virtual biologics clinics. A dual-site pilot parallel cohort study was designed during the fellowship and the protocol ranked number one priority study at ANZ IBD Consortium 2022. Recruitment has commenced and funding secured from Janssen Pharmaceuticals for the procurement of a novel electronic patient reported outcomes platform. Virtual biologics clinics are anticipated to reduce costs of IBD care, but the findings of this study will identify the impact on healthcare utilisation and value of healthcare delivery, in addition to informing the evaluation of values-based healthcare as a model of care for other chronic diseases.



Patrick Hilley
Clinical Pharmacist,
Austin Health

“My knowledge in HSR was limited prior to enrolment and I learned so much. The health economics lectures and tutorials became a significant part of my final study protocol. I have developed a passion for research.” - Patrick