

Annual Research Report 2025

Ready, Set,
Research!

an initiative of Darling Downs Health Research



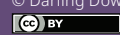
NSQHS Standard 2: Partnering with Consumers

We worked with our Darling Downs Health consumer group to create this resource for our communities.

Resource 6785.v3 | Reviewed 05.2026

Contact gddh_design@health.qld.gov.au for publishing information on this resource.

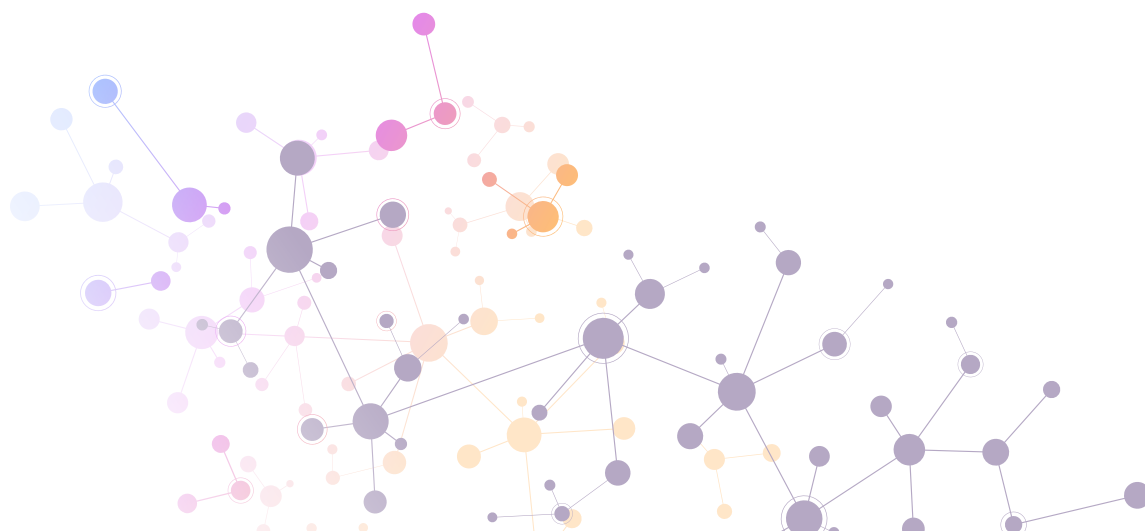
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A message from the Executive Director Medical Services and the Director of Research

2025 has been a year of continued growth, consolidation, and strategic advancement for Darling Downs Health, further strengthening our position as a leading regional hub for research and clinical trials excellence. Building on the strong momentum of 2024, we have expanded both the scale and sophistication of our research activities, reinforcing our commitment to delivering innovative, evidence-based healthcare for our communities.

A key highlight was the launch of the Ready, Set, Research! campaign - an initiative designed and led by staff actively engaged in research across the health service. This campaign has played a pivotal role in elevating the visibility of research, celebrating local achievements, and fostering a stronger sense of connection and recognition among research-active staff. By showcasing the breadth of research activity and highlighting opportunities for involvement, the campaign has contributed meaningfully to strengthening our research culture and encouraging broader participation across disciplines.

This year also saw the commencement of 9 additional clinical trials, including 2 sponsored trials in the new specialty areas of cardiology and mental health. This marks an important expansion of research into previously untapped clinical units. Alongside this growth, submissions to the Research Ethics and Governance Office increased by a further 20 applications since 2024, reflecting sustained demand and engagement across



Dr Liam Flynn & Dr Anna Tynan

the service. To support this growth and ensure continued compliance and efficiency, a Deputy Human Research Ethics Committee (HREC) Chair was appointed, strengthening leadership capacity and governance oversight.

A key strategic priority in 2025 has been aligning with the National Clinical Trials Governance Framework. This has been supported through the establishment of a Clinical Trials Advisory Committee, providing coordinated oversight, expert guidance, and a structured approach to clinical trials governance across the organisation. These developments position us strongly for ongoing accreditation and excellence in clinical trial delivery.

Our commitment to fostering a strong and sustainable research culture has remained central. The biennial Research Awards showcased a highly competitive field, highlighting the depth of talent and innovation across our workforce and providing an important platform to recognise and celebrate research excellence.

We have also continued to strengthen partnerships through active engagement with the Queensland Rural Health Innovation and Research Collaborative, working closely with local universities and health services to expand research opportunities and capacity across the region. These collaborations are critical to ensuring equitable access to research and building a pipeline of clinician-researchers in regional settings.

In 2025, our staff have achieved notable success in securing both local and external research funding. This includes strong participation in the Toowoomba Hospital Foundation Research Grants Program, continued success with National Health and Medical Research Council (NHMRC) funding, and the awarding of a Queensland Health Catalyst Grant. The Catalyst Grant recognises our strategic commitment to building research capacity and strengthening partnerships with local university collaborators.

This year's achievements reflect a maturing research ecosystem: one that is increasingly collaborative, well-governed, and embedded within clinical practice. While growth remains important, there is a clear shift toward sustainability, quality, and strategic alignment.

This report captures the progress, achievements, and ongoing opportunities that define research in 2025. The key message is clear: continued investment in governance, partnerships, and workforce capability will be essential to maintaining momentum and translating research into meaningful health outcomes for our communities.

We extend our sincere thanks to all staff, collaborators, and partners for their ongoing dedication to advancing healthcare through research. Together, we look forward to building on this strong foundation and continuing to grow a vibrant, impactful research culture into the future.



2025 Research Highlights

49

Quality
exemption
projects
approved

49

Research
projects
approved

19

Publications

\$1,175,629.52

Total grants awarded

\$281,186.21

Total in-kind funding
committed

233

Total active
research projects

50

Total number
of clinical trials

Spotlight: 2025 Research Awards

Darling Downs Health Biennial Research Awards – 2025

Darling Downs Health has been recognising staff who have achieved outstanding impact as researchers within our health service since 2016. The award focused on acknowledges staff commitment to service improvement; collaboration with external organisations; mentoring junior staff in research; research culture building and consistent contribution to research over time. This year, several well deserving and diverse nominations were received with the following results:



Researcher of the Year: Associate Professor Vikas Garg

**SS Psychiatry CCT MH,
Psychiatry Acute and
Community, Toowoomba
Hospital.**

Associate Professor Vikas Garg has led and contributed to multiple impactful mental health research projects, often working across institutions and disciplines. He has played a key role in fostering a strong research culture within his service, promoting collaboration, consistent engagement, and high-quality inquiry. Vikas is also a dedicated mentor, supporting and guiding numerous emerging researchers. His leadership has strengthened research capacity while advancing evidence-based mental healthcare across the region



Finalist: Nikki Gearon

**Allied Health Practitioner
Senior Rural, Residential
Aged Care Allied Health, Miles
Health Service.**

Nikki Gearon has led an important investigation into “life story work” in a residential aged care setting. The project explored how sharing personal histories and meaningful life experiences can strengthen relationships between care staff and residents, particularly those living with dementia. By encouraging conversations about a person’s past, life story work helps individuals feel valued, understood, and less isolated. The findings from Nikki’s research will inform the development of practical life story implementation toolkits to guide other health organisations and support further research in aged care and dementia services.



Finalist: Associate Professor Brendan Carrigan

SMO Medical, Dalby Hospital.

Associate Professor Brendan Carrigan has contributed to more than 50 research projects over the past five to ten years. His work has addressed a wide range of priorities, including adherence to clinical guidelines, of healthcare, and improving patient outcomes. Beyond generating valuable evidence, Brendan’s research efforts have strengthened the broader research culture within Darling Downs Health. His commitment to quality improvement and patient-centred care continues to enhance both clinical practice and organisational values.



A special mention is also recognised for **Sue Williams** (Advanced Occupational Therapist: Toowoomba) and **Kate Ryan** (Senior Radiographer: Warwick Hospital) who both demonstrated exceptional merit against the criteria.

1. Clinical trials

1.1 Clinical trials manager report

Clinical trials are integral to contemporary healthcare, generating high-quality evidence that underpins best practice and advances patient care. They provide access to novel investigational therapies and alternative treatment strategies, particularly for patients whose needs are not fully addressed by existing standards of care.



Abil Saj and Kerry Blacket

At Darling Downs Health (DDH), investigators are supported through the Clinical Trials Hub (CTH), which delivers coordinated, end-to-end operational and administrative support. The CTH team comprises a Clinical Trials Manager, Clinical Trials Coordinators, a Clinical Trials Pharmacist, Research Nurses, and additional support personnel, ensuring that all trials are conducted in accordance with regulatory, ethical, and quality requirements.

Further information is available at: [Clinical Trials](#)

Implementation of the National Clinical Trials Governance Framework – 2025 Update

In 2025, DDH has continued the structured implementation of the National Clinical Trials Governance Framework (NCTGF), with an increased emphasis on consumer engagement and measurement of consumer experience. The NCTGF aligns with the National Safety and Quality Health Service (NSQHS) Standards, particularly the Clinical Governance Standard (Standard 1) and the Partnering with Consumers Standard (Standard 2). Compliance with the framework remains mandatory for health service organisations and clinical trial sites, ensuring trials are conducted safely, ethically, and with a strong focus on quality and patient outcomes.

During 2025, the NCTGF Working Group was formally dissolved, and oversight responsibilities transitioned to the Clinical Trial Advisory Committee (CTAC). The CTAC now provides strategic and operational oversight of clinical trial activities across DDH, including governance, risk management, performance monitoring, and implementation of NCTGF action items. Importantly, the CTAC reports directly to the Health Care Improvement Committee (HCIC), ensuring that clinical trial governance is embedded within the organisation's broader quality and safety governance structure and aligned with clinical governance reporting pathways.

Strengthened Focus on Partnering with Consumers

Consistent with the 2024 assessment outcomes, 2025 implementation activities have prioritised Standard 2: Partnering with Consumers. Key initiatives include:

- Inclusion of representation from the consumer liaison office within the CTAC structure
- Formalisation of DDH-NCTGF with the emphasis on consumer Engagement

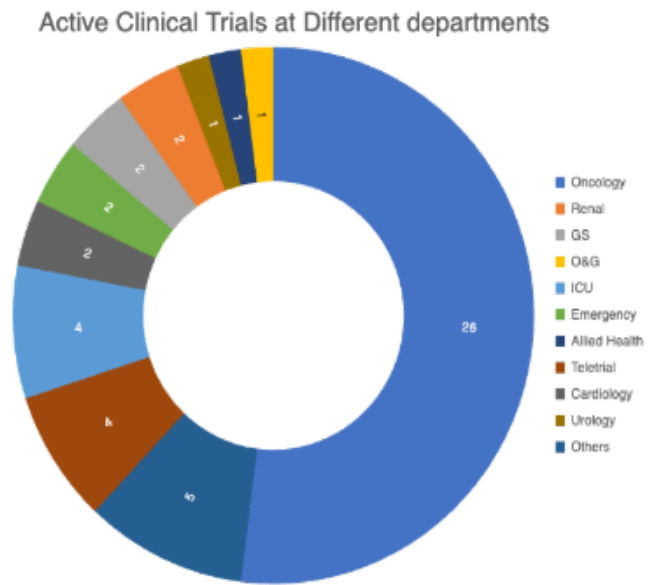
- Implementation of a Clinical Trials Consumer Experience Survey to capture participant feedback systematically
- Integration of survey findings into quality improvement cycles, with oversight by CTAC and reporting through HCIC

The Consumer Experience Survey evaluates participants’ understanding of informed consent, communication effectiveness, coordination of care, cultural safety, and overall trial experience. Survey outcomes will be analysed with improvement actions identified through established governance mechanisms.

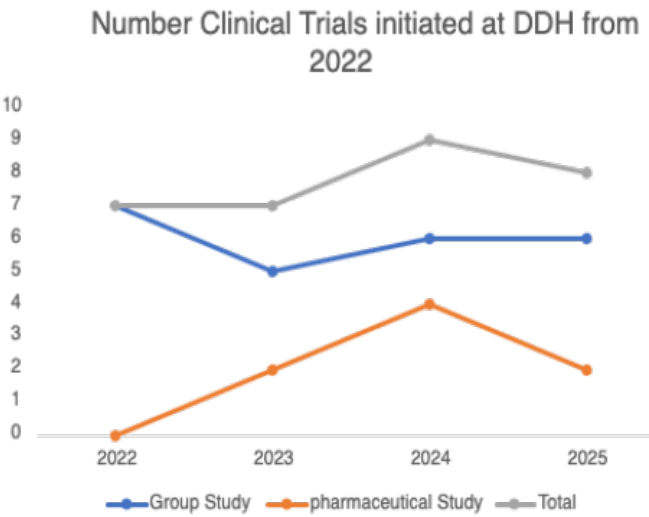
With strengthened oversight through CTAC, DDH continues to advance the maturity of its clinical trial governance systems. Ongoing monitoring, structured performance reporting, and consumer-informed quality improvement initiatives position DDH to progress toward achieving an Established System rating under the NCTGF.

Clinical Trial Activities and Growth

Currently, the Clinical Trials Hub (CTH) provides comprehensive operational, regulatory, and administrative support to clinicians delivering clinical trials across a broad range of specialties, including Oncology, Haematology, Allied Health, Emergency Medicine, General Surgery, Intensive Care, Nephrology, Obstetrics & Gynaecology, Cardiology, and Urology.



In 2025, a dedicated Cardiology Trials Unit was established, with two cardiology studies successfully initiated, representing a significant expansion of cardiovascular research capability within DDH. Substantial progress was also achieved in activating clinical trials in the Mental Health Service, marking an important milestone in diversifying the research portfolio and strengthening multidisciplinary engagement. Currently, there are about 50 active clinical trials across multiple departments, including four teletrials. These studies comprise a mix of pharmaceutical-sponsored trials, collaborative group studies, and investigator-initiated research. Detailed clinical trial metrics and activity data are presented in Tables 1, 2, and 3 on the following page.



Concurrently, DDH continues to expand its teletrial capability to improve equitable access to research for regional and rural populations. This expansion is being progressed in collaboration with the Queensland Regional Clinical Trial Coordinating Centre (QRCCC), supporting the scalable, compliant, and sustainable delivery of decentralised trial models across the region.

A key strategic objective of the Clinical Trials Hub (CTH) is to increase the proportion of pharmaceutical sponsored trials at DDH. In 2025, one pharmaceutical oncology study and one pharmaceutical cardiology study were successfully initiated. Efforts are ongoing to further strengthen industry partnerships and expand pharmaceutically sponsored research across additional specialties.

Growth of the Regional Cancer Centre Trials Unit (RCCTU)

The Regional Cancer Centre Trials Unit (RCCTU), which oversees Oncology and Haematology trials, has continued its growth in 2025. Strengthened engagement with industry sponsors and collaborative trial groups has driven a consistent increase in study activation and patient recruitment.

As a core pillar of the CTH, the RCCTU continues to expand its research footprint and operational capacity. This growth reinforces DDH's commitment to advancing high-quality cancer research, improving access to innovative therapies, and enhancing outcomes for patients across the region.

Celebrating International Clinical Trials Day

On 20 May 2025, CTH marked International Clinical Trials Day by hosting an interactive information booth in the Toowoomba Hospital foyer, alongside the half-day DDHHS Clinical Trials Conference.

The conference program featured:

- Investigator speakers
- Clinical trial coordinators
- A consumer who shared her treatment journey as a clinical trial participant

The events provided valuable engagement opportunities for staff and consumers through presentations, Q&A sessions, educational materials, and promotional resources. Participation was strong, and feedback was highly positive. Many staff reported an improved understanding of clinical trials and research activity within DDH. CTH intends



to continue this annual initiative, with plans to incorporate expanded educational and interactive components.

Looking Ahead

DDH remains committed to strengthening its clinical trial capability, enhancing governance and quality frameworks, and deepening consumer engagement across the research lifecycle. Ongoing implementation of the National Clinical Trials Governance Framework (NCTGF) will continue to underpin safe, compliant, and high-quality research delivery across the organisation.

In parallel, we will prioritise the attraction of commercially sponsored trials, broaden industry partnerships, and further expand teletrial capacity to improve equitable access for regional and rural communities. Through these strategic initiatives, DDH is well positioned to advance clinical research that delivers tangible benefits to patients and contributes meaningfully to the broader healthcare system.



Table 1 | Active clinical trials by department

Active Clinical Trials by Department	2025			
	Q1	Q2	Q3	Q4
Allied Health	0	1	1	0
Emergency Department	2	2	2	2
General Surgery	2	1	1	2
Haematology	6	7	9	8
ICU	6	6	7	4
Nephrology	2	3	3	3
Medical	0	1	1	1
Oncology	19	21	20	19
Dental	0	1	1	1
Urology	2	2	2	2
Occupational Therapy	0	1	1	1
Nursing	0	3	3	3
Cardiology	0	0	1	2
Mental Health	0	0	1	1
Medical Imaging	0	0	1	1
Total	41	49	54	50

Table 2 | Clinical trials breakdown

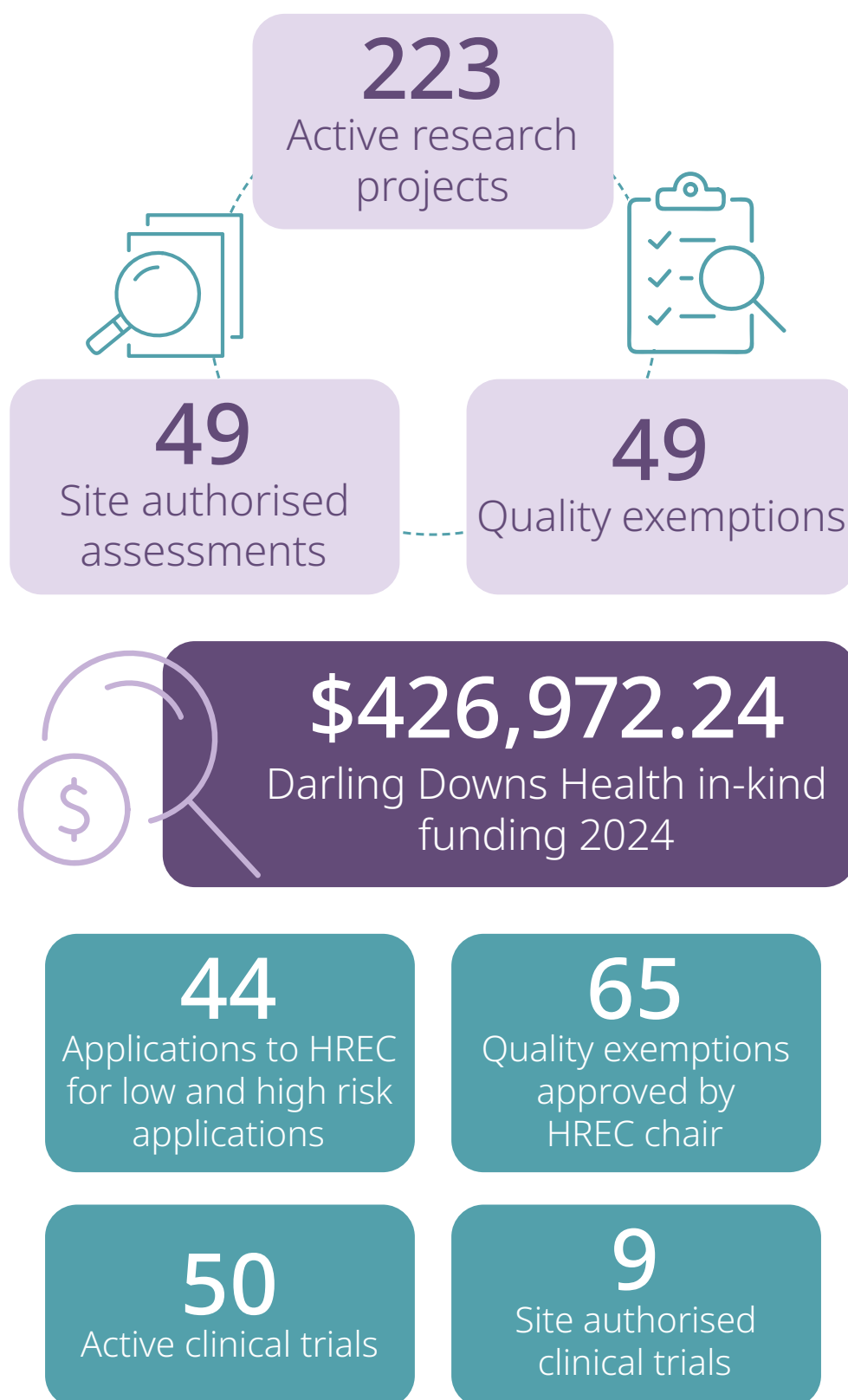
Clinical trials breakdown	2025			
	Q1	Q2	Q3	Q4
Commercial sponsor	4	5	5	6
Collaborative group	33	39	43	40
Clinician led	4	5	6	4
Phase of trial				
Phase II				
Phase III	4	5	5	6
Phase IV	33	39	43	40
Device	4	5	6	4
Other				

Table 3 | Clinical trial incidents

Clinical Trial Metrics	2025			
	Q1	Q2	Q3	Q4
Adverse events	0	0	0	0
Protocol breaches	0	0	0	2
Clinical incidents	0	0	0	0

2. Research Ethics and Governance

2.1 Snapshot



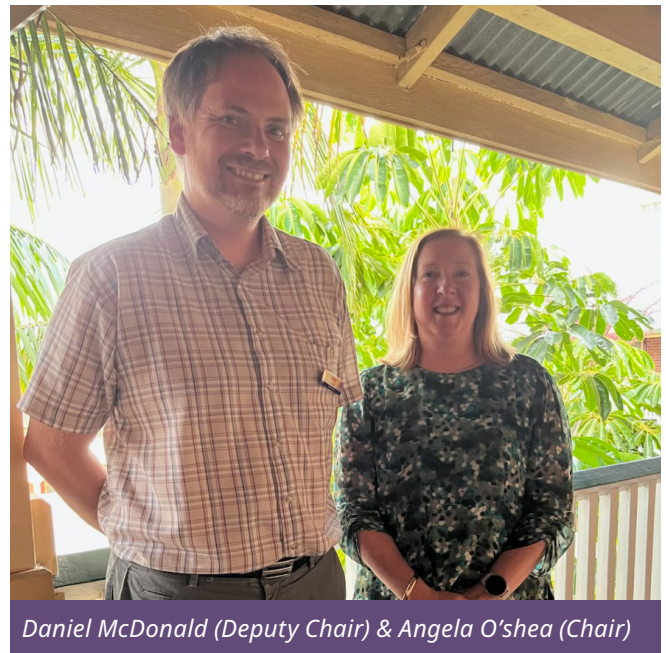
2.2 Human Research Ethics Committee (HREC)

A message from the HREC Chair and Deputy Chair

In 2025 we experienced another busy year for our DDH Human Research Ethics Committee (HREC) and once again we had many and varied research topics to review. The Committee surpassed the previous years' activity for review of exemptions, low risk and greater than low risk research with 110 applications being reviewed. We would like to say a huge thank you to the members of our HREC and Scientific Review Sub-Committee as these individuals provide significant time and expertise to reviewing these applications. Recognition should also go to our Research Ethics and Governance Officers in relation to the hard work and support they provide to the HREC and to the researchers.

Research is an ever evolving and changing landscape and in the last 12 months, the Committee has considered new and emerging topics including an increasing number of projects involving genomics and the use of Artificial Intelligence (AI) in research. These emerging research topics provide HREC members with a great opportunity to gain experience in reviewing projects in these developing areas and to consider the implications of these types of research projects while undertaking the review process. Each year we are very fortunate as a committee to have the opportunity to attend the annual Australian and New Zealand HREC Conference. Attending the conference provides a great opportunity to learn more about these developing research topics along with being exposed to many other thought-provoking conversations that occur in relation to ethics and research.

Our HREC grew in most categories of membership in 2025 as a large recruitment process was undertaken to increase the diversity and expertise of the Committee. We are grateful that members of the community and our DDH staff continue to show strong interest in joining us and our ongoing deliberations in the research and ethics space.



We look forward to another exciting year ahead as the knowledge of research and research culture in DDH continues to develop and grow.

2.3 Submissions to Research Ethics and Governance Office



*Mandy Hubbard
(Research Ethics and
Governance Officer)*



*Deborah Wainwright
(Research Ethics and
Governance Officer)*

The Research Ethics and Governance Office ensures all research conducted within the health service meets required ethical, regulatory, and governance standards. It manages approval processes, supports the HREC, and safeguards participant safety and data integrity.

In addition, the Office enables research by guiding clinicians and researchers through approval pathways, helping to ensure studies are delivered efficiently, responsibly, and with meaningful impact on patient care.

Research Ethics and Governance authorised applications have remained steady over the past few years.

Figure 2.1 provides a comparison of all authorised applications (Ethics, Governance and Exemptions) processed by the Research Ethics and Governance Office in 2025. Comparisons are made for each quarter, as well as for the type of authorisation.

Figure 2.1: Research Ethics and Governance (REGO) Authorisation per quarter and total for 2025

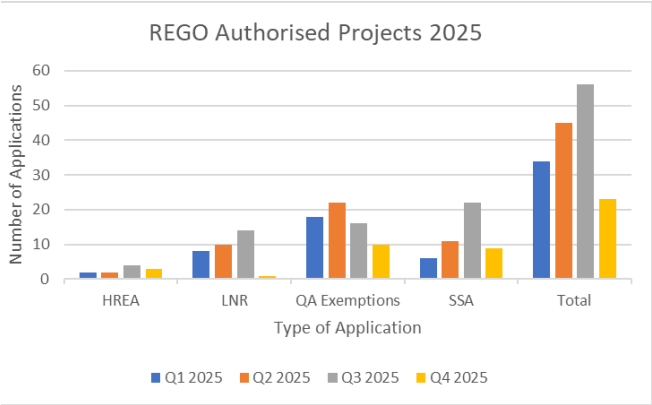
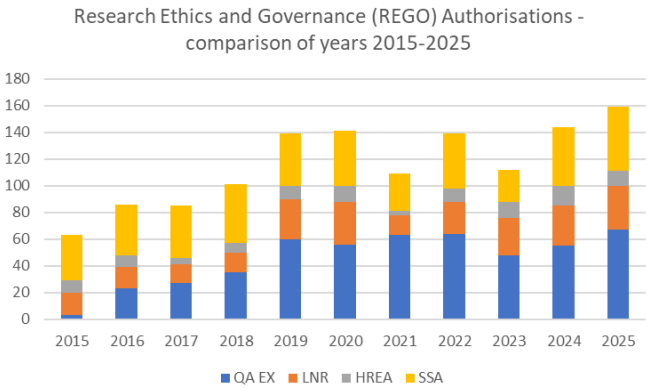


Figure 2.2 shows a comparison across the years of 2015 – 2025 for Research Ethics and Governance authorisation. Of note is the increase in complexity of site-specific assessments generated through clinical trials and increase in amendments, which is not reflected in the tables.

Figure 2.2: Research Ethics and Governance (REGO) Authorisation – comparison of years 2015-2025



Both Ethics and Governance submissions are monitored via clock days. A clock day constitutes each calendar day after a valid application has been

received and is being processed by the DDH REGO office. It excludes time taken for the applicant to respond to queries with further information or time spent processing applications at other organisations for multi-organisational projects. That is, clock days are not a measure of total time elapsed since a valid application is received but, instead, are a measure of processing time by the Health Service. Ethics uses a 60-day clock target and Governance uses a 25-day clock target. Table 2.3 shows the average response time for ethics applications and SSA applications authorised for conduct within DDH in 2025.

Table 2.3 | Average response time for Ethics applications and Research Governance applications authorised for conduct within Darling Downs Health – 2025

2025 Average response time	Days
For Ethics applications	15.2 (clock days)
For SSA applications	4.28 (clock days)

Table 2.4 lists the research projects given full authorisation for conduct within Darling Downs Health, by professional division. In the case of Darling Downs Health-led projects, this requires both ethics approval and research governance (i.e., Site Specific Assessment -SSA) authorisation. In the case of collaborations, this may mean both ethics approval and governance authorisation from Darling Downs Health or, where the study holds approval from an HREC which is signatory to the National Mutual Agreement, this may mean obtaining ethics approval from a signatory HREC, and governance authorisation (i.e., SSA only) from Darling Downs Health.

Table 2.4 | Research projects (SSAs) authorised for conduct within Darling Downs Health in 2025

Darling Downs Health		Collaborative		External projects	
Allied Health	1	Allied Health	1	Allied Health	0
Nursing & Midwifery	2	Nursing & Midwifery	3	Nursing & Midwifery	2
Medicine	12	Medicine	10	Medicine	0
Other	2	Other	11	Other	5
Total	17	Total	25	Total	7

Table 2.5 lists the total projects submitted to the HREC chair not requiring ethical review. QA exemptions means investigators who conduct quality assurance or quality improvement activities (hereafter; QA), or write case reports, to publish their findings in peer reviewed journals. Through this process quality projects are subjected to scientific review, which aims to ensure the scientific rigor of the evaluation project.

Table 2.5 | Quality exemption projects approved and authorised for conduct within Darling Downs Health in 2025

Darling Downs Health		Collaborative/External	
Allied Health	16	Allied Health	0
Nursing & Midwifery	5	Nursing & Midwifery	0
Medicine	38	Medicine	0
Other	2	Other	6

2.4 Research projects approved

Research projects approved by the HREC, both low/negligible risk and greater than low risk.

Q1 2025 Approved projects
Subcutaneously anchored securement system versus a traditional sutureless securement device for prevention of Peripherally Inserted Central Catheter dislodgement: a randomised controlled trial
How do Australian health professionals working in a rural emergency department perceive patients diagnosed with a mental illness? An interview study
Evaluation of the Preferred Employment Model Pilot – Dalby Hospital and Myall Medical Practice
Safe Yarns Build Bridges
Methadone and Constipation
Qualitative Study of Patients' Perspectives on Anti Reflux Surgery Outcomes
Patient perception of modifiable risk factors prior to undergoing joint replacement in Queensland
Predicting Emergency Facilities to Suit Patients' Clinical Needs in Tele-Triage Using Artificial Intelligence
How does local knowledge inform organisational response to disaster in the rural health service?
Co-designing a new model of care to support long-term psychosocial recovery among community-dwelling survivors recovering in regional and rural Australia

Q2 2025 | Approved projects

A wellbeing program for Queensland Rural Generalist Pathway trainees and fellows: Exploring vulnerability

Intra-arterial vs. Non-invasive blood pressure monitoring in patients with septic shock in the retrieval environment

Impact of COVID-19 to the incidence, management and pathology of Quinsy in regional QLD

Pre-operative cell-based ratios for predicting periprosthetic joint infection

Traumatic Brain Injury – The Haemodynamic impact of induction agent during prehospital emergency anaesthesia for isolated traumatic brain injury

Development and Validation of the First Nations Parent Wellbeing Scale

Systems learning around wellbeing for Mental Health registrars (SLAW4MHR)

A retrospective cohort study on prolonged boarding time in ED and adverse outcomes in RACF residents

Prevalence and associated factors of micronutrient deficiency in elderly patients admitted to the Hospital in the Home – Community Aged Care programme at Toowoomba Hospital

Perioperative Management of GLP-1 Receptor Agonists (GLP-1 Ras) and GLP-1/GIP Co-Agonists (GLP-1/GIP RAs): Attitudes and Practices among Australian and New Zealand Anaesthetists

Polypharmacy and Prescribing Quality in Rural Hospitalised Older Adults: A Study of PIMS and PPOs Using STOPP/START Criteria

Post-Caesarean Pain Management in Rural Queensland Hospitals

Q3 2025 | Approved projects

Natural Language Processing for Automated Data Extraction from Synoptic Pathology Reports: A Proof of Concept Study

Outcomes and impacts of the Queensland Rural Generalist Pathway on rural workforce and trainees

Prevalence of depression and anxiety symptoms in Chronic Kidney Disease (CKD) and dialysis patients and their caregivers across different dialysis modalities

Providing Access to Cognitive Interventions in Regional Memory Clinics: Adaptation and Implementation of a Clinician Training Package

Evaluating the role of ownership, governance and multidisciplinary team care in rural and remote primary care: A natural experiment in St George, Queensland

Diffuse B-cell lymphoma in a large regional cancer centre: characterisation and impact of rurality – study protocol

Quantification of retrograde ejaculation secondary to Silodosin and Alfuzosin in adult males: a randomized, double-blinded, placebo-controlled, crossover study

Junior doctor confidence and knowledge in decision-making capacity assessment and use of relevant Queensland legislation: a mixed methods study

Associations between adherence to the FGR Care Pathway and pregnancy-related outcomes for women diagnosed with FGR

Alliance for Healthy Ageing

Q3 2025 | Approved projects

Co-designing training for residential aged care staff members on oral health assessments

Allied health professional directors and managers' perspectives on hospital pharmacy services and the role of hospital pharmacists in a regional hospital setting: a qualitative study

Does higher opioid doses lead to longer hospital length of stays and poor outcomes in over 65 years old with neck of femur fractures

A Retrospective Study of Place of Death comparing NDIS recipients with non-NDIS recipients known to a Regional Community Palliative Care Service

Navigating Sepsis: Investigating Factors Influencing Sepsis Pathway Use in Rural Queensland

Long-term outcomes in hospitalised patients with healthcare associated infections and multidrug-resistant organism colonisation

Health Economic Evaluation of the Way to Wellness Service

Q4 2025 | Approved projects

RIOT – Recycling in Orthopaedic Theatres

Characterizing the pharmacogenomic landscape of chronic disease in Australia's First Peoples

Implementing Research Frameworks in Queensland Health Hospitals and Health Services

Understanding health professionals' experiences delivering healthcare in a rural hospital to temporary migrants who have experienced gender-based violence

Developing Composite Biomarkers for Motor Neuron Disease through Transcranial Magnetic Stimulation and High-Density surface Electromyography



Research Spotlight: Co-design Stroke Recovery



Advancing Psychological Recovery in Stroke Care

Muuka “Hlupho” Dabali, Senior Clinical Psychologist at Toowoomba Hospital, is championing the integration of psychological care within the Geriatrics, Adult Rehabilitation and Stroke Service. Recognising that stroke recovery has traditionally prioritised physical rehabilitation, Hlupho identified a critical gap in addressing the emotional and psychological impacts of stroke. Through clinician-led research, Hlupho is strengthening how mental health support is embedded in stroke care. Working collaboratively with multidisciplinary teams, this research aligns closely with service improvement goals — integrating evidence-based practice into routine team meetings, professional development initiatives, and journal club discussions.

Patients have responded positively, valuing the opportunity to contribute to research that directly informs and enhances their care, as well as future service delivery.

Supported by departmental leadership and the Darling Downs Health Research Development and Engagement Unit, Hlupho’s work exemplifies how clinician-driven research can improve patient outcomes while fostering a culture of continuous learning and innovation.

2.5 Quality exemption projects approved

Non-research activities exempt from ethics review include quality assurance activities and case reports. Quality assurance activities and case reports, where there is intent to disseminate findings outside Darling Downs Health, must be submitted to the HREC Chair for confirmation of status and provision of an NRER letter.

2025 Quality exemption projects approved
An Audit on the Perioperative Management, Gastric Antral Volume, and Aspiration Events in Patients on Glucagon-Like-Peptide-1 Agonists
Antenatal Clinic Attendance in Non-English Speaking Communities and their Pregnancy Outcomes
A case report on regional anaesthesia and analgesia in an opioid tolerant pregnant patient with manubrium osteomyelitis
Splenic Flexure Volvulus: A Case Report
Pregnancy in Cystic Fibrosis with lung Transplant: A Case Report
Clinical audit of emergency theatre utilisation
An evaluation of the enquiries received by the Emergency Department pharmacy team from other health professionals in a regional emergency department

2025 | Quality exemption projects approved

A Service Evaluation of Compliance to Antimicrobial Stewardships (AMS) Approvals and Restrictions Policy at Toowoomba Hospital

Atypical Intrauterine Contraceptive Devices

A retrospective audit on regional anaesthesia and post-operative outcomes following elective shoulder surgery

An audit on the use of regional anaesthesia, and early postoperative outcomes following major limb amputations

Orthopaedic Hip and Knee Osteoarthritis Model of Care

Does pre-operative airway assessment correctly predict intubation difficulty in Toowoomba Base Hospital?

Pre-operative Anaemia Screening and Early Post-Operative Outcomes in Patients Undergoing Total Hip Arthroplasty

Survey on Sugammadex and its Implications

When Pregnancy Triggers Autoimmunity: A Rare Case of Pemphigoid Gestationis

Strengthening the Allied Health Assistant Delegation Model within a Rural Generalist Workforce

Audit of venous thromboembolism risk assessment documentation and prescribing of patients who have undergone lower limb arthroplasty

Evaluation of the Toowoomba Physiotherapy Acute Access Clinic (TPAAC)

Darling Downs Health Inpatient Medication Chart Audit

Tissue characterisation of metastatic melanoma on cardiac magnetic resonance (CMR)

Reflection on care and experience – Death by suspected community suicide

A system for patients who “Did Not Wait” (DNW) in Kingaroy Hospital Emergency Department (ED)

Cook and Connect: Empowering Rural Communities Through Food Literacy in Southwest Queensland

An Audit on Anaesthetic Practice and Morbidity and Mortality Outcomes in Emergency Laparotomy at Toowoomba Hospital: The Toowoomba Hospital Emergency Laparotomy Audit (THELA)

Toowoomba Emergency Department Waiting Room Improvements Audit

Evaluation of the frequency and underlying cause of surgical cancellations on the date of surgery at Toowoomba Hospital

Evaluation of a Clinical Trial Pharmacy Audit Tool at Toowoomba Hospital

An audit of anaesthetic and analgesic strategies and post-operative outcomes following elective anterior cruciate ligament repair

Clinical facilitators priorities to improve peripheral intravenous catheter care – identifying actions for practice change

Evaluation of postoperative opioid prescribing at discharge on surgical wards at Toowoomba Hospital in accordance with the Opioid Analgesic Stewardship in Acute Pain Clinical Care Standard

2025 | Quality exemption projects approved

An Audit on Early Postoperative Outcomes Following Total Shoulder Replacements at Toowoomba Base Hospital
Clinical audit of IVC documentation in Toowoomba Emergency Department
Distal femur replacement after catastrophic failure of knee arthroplasty: A Case Report
Audit of Sepsis Protocol Compliance in the Intensive Care Unit at Toowoomba Hospital January 2025
An Audit on regional anaesthesia use and outcomes following shoulder arthroscopy in Toowoomba Hospital
Dietetics Gestational Diabetes service model of care evaluation
Prescribing patterns and toxicity management of pneumocystic jirovecii pneumonia prophylaxis – Trends and outcomes in PJP prophylaxis and exposure (TOX-PJP)
Mucormycosis of infected caesarean wound
Chemotherapy outpatient clinic service evaluation: exploring timelines from referral, consultation and first treatment
Telehealth supported emergent tube thoracostomy
Implementation of electronic patient-directed nutrition screening in renal dialysis
Evaluation of completeness and consistency of allergy and adverse drug reaction documentation across clinical systems in Darling Downs Health
A Complex Pattern of Interference in a Patient with Imaging Confirmed Myocardial Infarction with Non-obstruction Coronary Artery Disease
Q fever in second trimester: A case report from Southern Rural Queensland
Nurse Practitioners Candidate (NPC) Service Evaluation
Evaluation of the Rural Hospital in the Home (r-HITH) Service – Patient Survey
A case report of an entire indwelling catheter location within the bladder lumen with subsequent stone formation requiring open cystostomy
Review of catch-up immunisations among newly arrived refugees in Toowoomba, Queensland, Australia
Corpus-Sparing Partial Penectomy for Distal Urothelial Squamous Cell Carcinoma with Concurrent Penile Intraepithelial Neoplasia: An Atypical Presentation
Audit of pre-, intra- and post-operative outcomes of patients undergoing procedures utilising the new robotic service within the Urology department of Darling Downs Health
Clinical Audit of Adult Asthma Emergency Presentations
Evaluation of the Pick of the Crop (POTC) Program Implementation in South West Hospital and Health Service (SWHHS)
Acute acalculous cholecystitis and dengue fever: a case report from Australia
Monitoring diet affordability and accessibility in South West Queensland
Young Adult Diabetes Clinic review

2025 | Quality exemption projects approved

The effectiveness of TIVA compared to Sevoflurane in Preventing Post-Operative Nausea and Vomiting: A retrospective cohort analysis in a regional Australian hospital

Urachal mucinous cystic tumour of low malignant potential: Case report of a rare entity with incidental clinical presentation

Evaluation of Pharmacists' annotations and documentation of activity in accordance with the Darling Downs Clinical Service Manual

Evaluation of Pharmacological Management of Adults and Older Adults Presenting with Acute Behavioural Disturbance in an Acute Mental Health Ward at Toowoomba Hospital: A Quality Improvement Project

Epidemiology of antenatal immunisation uptake in the Darling Downs and South West Hospital and Health Service Regions

Evaluation of the SAFEST Patient Journey Home Project to increase General Medicine patient flow through Toowoomba Hospital

Development of a new application, Check-ER. Implementation of this into daily practice and evaluation of increased compliance and reduction in patient safety within units in the Patient Flow Division

Introducing a Clinical Trials Pharmacy Management Platform to improve efficiencies in clinical trial pharmacy operations

Impact of Kidney Supportive Care on Haemodialysis Patients with high symptom burden: A Retrospective Cohort Study

Too Hot: Toowoomba Hospital Hot Debrief Pilot Project

2.6 Site Specific Assessments Authorised (SSAs)

All research projects wanting to be completed at Darling Downs Health require a Site-Specific Assessment (SSA) before the research can commence. An SSA considers regulatory and professional standards; risk; impacts and legal requirements at each site. The SSA also helps a site to decide if there are enough resources available to effectively conduct the research.

2025 | Site authorised projects

Developing education and management systems that successfully support early career nurses: A longitudinal study

Healthcare-Associated Infection Tracking and Enhanced Connectivity and Health Informatics

Cluster randomised controlled trial of silver fluoride for oral health and wellbeing in aged care residents.

Determining factors during the pre-registration program of study and first year of employment that contribute to workplace capacity as a graduate registered nurse

Patient perception of modifiable risk factors prior to undergoing joint replacement in Queensland

Methadone and Constipation

Evaluation of the First Nations Immunisation Course (FNIC) for Aboriginal and Torres Strait Islander health workers and health practitioners

2025 | Site authorised projects

A randomised study of cessation of somatostatin analogues after Peptide Receptor Radionuclide Therapy in Mid, Hind-Gut and Pancreatic Neuroendocrine tumours (STOPNET)

Mapping healthcare-associated infection surveillance across Queensland public hospitals: A descriptive study to identify practice variation and practitioner experience.

The IDC-IMPROVE Project: Improving indwelling urinary catheter care in residential aged care

Lowering catheter associated urinary tract infections: a double-blind randomised control trial

A retrospective cohort study on prolonged boarding time in ED and adverse outcomes in RACF residents

Prevalence and associated factors of micronutrient deficiency in elderly patients admitted to the Hospital in the Home - Community Aged Care programme at Toowoomba Hospital

Perioperative Management of GLP-1 Receptor Agonists (GLP-1 Ras) and GLP-1/GIP Co-Agonists (GLP-1/GIP RAs): Attitudes and Practices among Australian and New Zealand Anaesthetists.

Co-designing a new model of care to support long-term psychosocial recovery among community-dwelling survivors recovering in regional and rural Australia

Impact of COVID-19 to the incidence, management and pathology of Quinsy in regional QLD

Long-Term Outcomes Data Linkage to Improve ICU Care for Critically Ill Patients in Queensland

Cannabidiol (CBD) for Clozapine Refractory Schizophrenia (CanCloz)

A Phase 2, Open-Label, Randomized Study of BGB-11673 Compared to Investigator's Choice (Idelalisib Plus Rituximab or Bendamustine Plus Rituximab or venetoclax Plus Rituximab Retreatment) in Patients with Chronic Lymphocytic Leukemia or Small Lymphocytic Lymphoma Previously Exposed to Both BTK and BCL2 Inhibitors

The Statins and prOgression of Coronary atheRosclerosis in melanomA patients Treated with chEckpoint inhibitorS (SOCRATES)

Outcomes and impacts of the Queensland Rural Generalist Pathway on rural workforce and trainees

Inter- and intra-observer reliability when measuring scaphoid geometry using computer-tomography

The Threshold for Platelets Study (T4P)

Pre-operative cell-based ratios for predicting periprosthetic joint infection

Prevalence of depression and anxiety symptoms in Chronic Kidney Disease (CKD) and dialysis patients and their caregivers across different dialysis modalities

A Randomised Controlled Trial of Early valve replacement in severe ASYmptomatic Aortic Stenosis

Performance of a low-cost purpose-designed ultrasound perfusion system to reduce still birth and perinatal hypoxic damage in rural and remote communities.

Polypharmacy and Prescribing Quality in Rural Hospitalised Older Adults: A Study of PIMs and PPOs Using STOPP/START Criteria

Junior doctor confidence and knowledge in decision-making capacity assessment and use of relevant Queensland legislation: a mixed methods study.

Safe Yarns Build Bridges

2025 | Site authorised projects

Associations between adherence to the FGR Care Pathway and pregnancy-related outcomes for women diagnosed with FGR

Post-Caesarean Pain Management in Rural Queensland Hospitals

Evaluation of the Preferred Employment Model Pilot - Dalby Hospital and Myall Medical Practice

Subcutaneously anchored securement system versus a traditional sutureless securement device for prevention of Peripherally Inserted Central Catheter dislodgement: a randomised controlled trial.

Allied health professional directors and managers' perspectives on hospital pharmacy services and the role of hospital pharmacists in a regional hospital setting: a qualitative study

Navigating Sepsis: Investigating Factors Influencing Sepsis Pathway Use in Rural Queensland

Increasing choice in food fortification in residential aged care using co-design and a novel liquid protein ingredient: a pilot study.

Does higher opioid doses lead to longer hospital length of stays and poor outcomes in over 65 years old with neck of femur fractures.

Role of Antibiotic Therapy or Immunoglobulin On iNfections in hAematoLogy Platform Trial

A Retrospective Study of Place of Death comparing NDIS recipients and non-NDIS recipients known to a Regional Community Palliative Care Service

OPTIMISE: OPTIMising the Implementation of exerciSE in public cancer care centres

Co-designing training for residential aged care staff members on oral health assessments

A Phase III double-blind, randomised, parallel-group superiority trial to evaluate efficacy and safety of the combined use of oral vicadrostal (BI 690517) and empagliflozin compared with placebo and empagliflozin in participants with type 2 diabetes, arterial hypertension and established cardiovascular disease

To evaluate the effectiveness of the Prevent Alcohol and Risk-related Trauma in Youth (P.A.R.T.Y.) Program on students, and their perceptions of risk-taking behaviour.

INCH-HD Trial

Diffuse B-cell lymphoma in a large regional cancer centre: characterisation and impact of rurality - study protocol

Australian Spine Registry Pilot

Statewide Evaluation of Jacaranda Place - Adolescent Extended Treatment Centre



3. Research Development and Engagement

3.1 The Queensland Rural Health Innovation and Research Collaborative (QRHIRC)



Lisa Seymour
(QRHIRC Co-Ordinator)

The Queensland Rural Health Innovation & Research Collaborative (QRHIRC) is a network of healthcare educators and providers with a vision to facilitate research translation to improve health outcomes for Darling Downs and South West Queensland

residents, of which DDH is a founding member. In 2025, the QRHIRC continued to strengthen its role as a catalyst for collaboration, research capability, practical innovation and translation across rural and regional Queensland. Through strategic partnerships, targeted funding, research capability development and strong sector engagement, QRHIRC has supported research that responds directly to local health challenges and delivers tangible value to clinicians, communities and health services.

The transition from the Darling Downs Health Innovation & Research Collaborative (DDHIRC) to QRHIRC reflects its expanding membership, broader geographic reach, and future focus on diverse rural communities. New partnerships, including Toowoomba and Surat Basin Enterprises (TSBE), and continued involvement with the Rural Research Collaborative Learning Network (RR-CLaN), strengthened connections across health, academic, community, and industry sectors. Engagement with 15 external organisations, along with new collaboration expressions of interest from previously

unengaged clinicians and researchers, has further expanded research opportunities and reach.

To support effective and efficient collaboration, QRHIRC introduced a standardised research agreement, reducing administrative burden and enabling more streamlined partnerships. The 2025 Research Symposium, themed Access to Health Services for Regional and Rural Communities, attracted 93 participants across clinical, academic, and community sectors. The event featured keynote presentations from rural leaders, showcased emerging talent through Rising Researcher presentations, and enabled the co-development of five new research ideas. Two of these projects were subsequently funded, including a hybrid prehabilitation program for rural patients awaiting knee replacement surgery and a co-designed mental health intervention for LGBT+ young people in the Darling Downs region.

QRHIRC continues to invest in research with clear local impact, with supported projects increasingly informing practice, workforce, and policy. This includes presentations at national conferences on pharmacist workforce challenges and the direct sharing of project findings with local pharmacies to inform recruitment and retention strategies. QRHIRC has also contributed to broader system influence, providing input into statewide research translation planning and supporting initiatives such as the Queensland Rural Alliance for Point-of-Care Infrastructure and Development.

Building research capability remains a core priority. In 2025, QRHIRC delivered 12 research skills workshops and supported five novice clinicians through the Intensive Research Training Program (IRTP), with participants progressing to ethics submissions, grant applications, and research implementation. Notably, two IRTP graduates secured Toowoomba Hospital Foundation Novice

Research Grants to progress projects in oncology pharmacy education and rural oral health. Mentorship and practical experience continue to strengthen the pipeline of rural clinician-researchers.

Community engagement remains central to QRHIRC's approach. Consumer representation is embedded within governance, and community members were actively involved in symposium roundtable discussions on healthcare access. QRHIRC's impact and activities have been recognised through external channels, including regional media and national publications, highlighting its growing role in building research capability and improving health outcomes across rural and regional communities as follows:

- Darling Downs Health News coverage of the QRHIRC Research Symposium
- An article in Partyline, the National Rural Health Alliance magazine, highlights the IRTP and its graduates: ["Growing capability, transforming health: The rural research journey"](#)

3.2 Research Support: Staff consultations



Donna Rouse
(Research Support Officer)



Kate Henning
(Research Co-Ordinator)

The Research Support Office provides support to staff for both research and quality assurance and quality improvement (henceforth QA) activities. QA activities typically include clinical audit, service development and service evaluation projects and do not require ethics approval. While these projects typically utilise simple study designs and are aimed at informing local practices, their impact on the Health Service can be considerable, often leading to

changes in clinical practices in response to findings. Support may also be provided for case reports, which, while neither research nor QA, are classified as QA for the purposes of this report.

During this reporting period 363 consultations were provided by the Research Support Office to staff. Figure 3.1 provides a comparison of consultations by professional stream. The 'Other' category consisted of consultations by Public Health Unit, Clinical Governance, Office of the Chief Executive, Division of Mental Health, Toowoomba Hospital, Rural General Practice, and interprofessional teams.

Proportion of consultations by professional stream, 2025

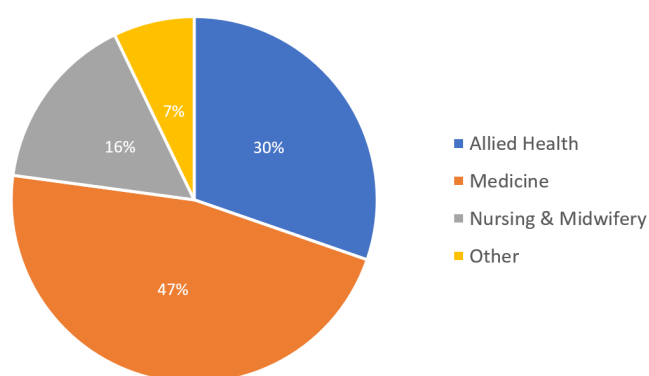


Figure 3.1: Comparison of consultations by professional stream.

Note: Allied Health n=110; Medicine n=170; Nursing and Midwifery n=57; Other n=6.

Most consultations were from staff based in Toowoomba (85.7%). Rural consultations comprised staff from Western Cluster (3.9%), South Burnett Cluster (6.1%), Southern Cluster (3.6%), and outside the Darling Downs (less than 1%).

3.3 Education

This section represents pre-arranged opportunities to provide research education to Darling Downs Health staff. The research education provided by the Research Development and Engagement Unit includes those events provided by external partners.

Table 3.2: Education sessions, 2025.

Month	Topic	Darling Downs Health Attendees
January 2025	RTBC* - Aims Objectives and Outcome measures - recorded lecture	14
	RTBC* - Aims Objectives and Outcome measures - TUTORIAL	3
February 2025	RTBC* - Study design - 2 recorded lectures circulated	14
	RTBC* - bias and validity - 1 recorded lecture circulated	14
	RTBC* - study design and bias and validity - tutorial	3
March 2025	Getting started in research	30
	RTBC* - Qualitative research- 3 recorded lectures circulated	14
	RTBC* - Qual research- 3 tutorial	5
April 2025	RTBC* - Stats lecture no.1	33
	RTBC* - Stats tutorial no.1	8
May 2025	Research	8
	RTBC* - Stats lecture no.2	33
	RTBC* - Stats tutorial no.2	6
	Research and quality activities	6
June 2025	RTBC* - Stats lecture no.3	33
	RTBC* - Stats tutorial no.3	3
July 2025	RTBC* Ethics and governance - lecture*	13
	RTBC* Ethics and governance - workshop	1
August 2025	Risk and Harm	12
	Getting started in research	20
	Surveys – lecture*	13
	Surveys - workshop	0
September 2025	RTBC* Qualitative data analysis - lecture	13
	RTBC* Qualitative data analysis - workshop	1
October 2025	Recruiting, screening and Consent	12
	RTBC* Disseminating research	13

*Note. RTBC = Research Training for Busy Clinicians flipped classroom training package delivered as pre-recorded lectures followed by face-to-face tutorials

3.4 Projects

The following are projects that have been completed outside of business-as-usual activities. They are outlined according to the [Darling Downs Health Research Strategy 2023-2028](#). This provides an interim update as aligned with the Darling Downs Health Integrated planning framework.

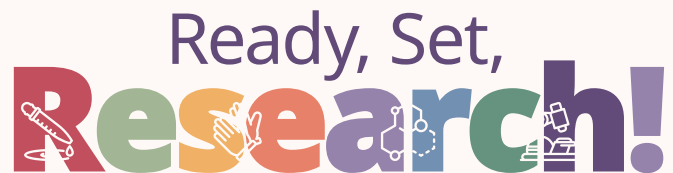
1. Grow and sustain our own research experts

Launch of the Ready, Set, Research! campaign

In 2025, Darling Downs Health launched *Ready, Set, Research!* as the overarching campaign to deliver the Research Strategy (2023–2028) priority to Foster a Vibrant Research Culture. Developed through the Research Advisory Committee (RAC) Research Culture Working Group and staff consultation, the campaign positions Darling Downs Health as a research-active health service and provides clear pathways for staff to engage in research. Key activities included:

- **International Clinical Trials Day (20 May)**
Awareness booth at Toowoomba Hospital and an inaugural Clinical Trials Showcase at the Jeff Preble Theatre featuring clinicians, research governance representatives and a consumer perspective.
- **Research Rural Roadshow**
Outreach visits to Warwick, Chinchilla and Kingaroy, including presentations on getting started in research, promotion of existing programs, and one-on-one consultations with rural staff.
- **Promotional Videos**
Campaign videos developed to raise awareness of research opportunities and supports across the service.
- **Research Skills Training.**
Official roll out of the research training for busy clinicians' program

Together, these activities establish *Ready, Set, Research!* as the coordinated, service-wide approach to strengthening research culture at Darling Downs Health.



2. Enable environments, systems, and processes to support the expansion of research activity.

- Official Launch of Statewide Instance of RedCAP for Darling Downs Health
- Appointment of assistant business manager research to centralise oversight of research funding.

3. Develop our clinical trials capability.

- Expanded Clinical Trials to 2 new Units (Mental Health and Cardiology).
- Documents developed and published related to the implementation of the National Clinical Trials
- Governance Framework:
- PROC-0347 Research management – [Research Ethics and Governance Office fees](#)
- Negotiation of extension of QRCCC funding to continue an advanced clinical trials coordinator at a higher level for 9 months. This role has been instrumental in uptake of tele-trials and expanding trials to new units.

4. Strengthen our research partnerships.

- The University of Southern Queensland Statistical support for Darling Downs Health extended
 - » There is an agreement between UniSQ and DDH to extend the current agreement for 2 years until June 2027. The program has allowed our clinicians gain expert statistical advice for their research project.
- Review and update of research templates to enable consumers to be considered at the start of research projects (i.e. DDH Research Protocol and prompts)



4. Research grants awarded

4.1 Toowoomba Hospital Foundation and Pure Land Learning College Research Grants 2025

Each year the Toowoomba Hospital Foundation through generous support from Pure Land Learning College hold two Research Grant rounds for Darling Downs Health staff. The research grants enable Darling Downs Health staff who are novice or experienced researchers access to funding to support their research endeavours. This year, a total of \$153,106.66 was awarded to 7 research projects.

Details of the recipients are as follows:

Round 1 Recipients — April 2025

Primary investigator	Dr Ehsan Shandiz – Novice researcher
Team	Dr Leo Liu, Dr David Tay, Dr Asborn Gaskell
Research	<i>Establishing Normal Values of Tibial Compound Muscle Action Potential (CMAP) from Medial Gastrocnemius Muscle</i>
Grant	\$19,690.00
Synopsis	Nerve Conduction Study (NCS) is the main tool in evaluating the nerves in the upper and lower limbs. NCS is a crucial study in diagnosis of several neuromuscular disorders such as neuropathies, muscular disorders, motor neuron disease and sciatica. This study will try to formulate the normal values of tibial CMAP from the gastrocnemius muscle. The results of the study will help clinicians in assessing the lower limb nerves when there is physical limitation in performing the conventional NCS.

Primary investigator	Mrs Ashleigh Smith – Novice researcher
Team	Erin Jessen, Dr Billy MacAskill (Rural Medical Education Australia)
Research	<i>Exploring Haematological Cancer Patient's Experiences of Pharmacist-Led Education when commencing a new anti-cancer treatment in an outpatient setting</i>
Grant	\$15,294.37
Synopsis	Haematological cancer patients who are starting on a new treatment or experience a change in treatment are often prescribed medications to treat their cancer or treat the side effects of prevent complications of their treatment. On the first day of treatment, patients can feel overwhelmed with information and can become confused regarding new medicines, or changes to their existing medicines. This study aims to assess the impact tailored pharmacist intervention can have to patients' medication understanding and identify patients more likely to require additional support. The study will explore patient preferences for information and support provided by pharmacy and ways in which the service can address their needs and optimise their outcomes.

Primary investigator	Dr Parvati Dadwal – Novice researcher
Team	Tanya Archinal, Dr John Ridler, Craig Smith, Dr Chris Wall
Research	<i>Patient perception of modifiable risk factors prior to undergoing joint replacement in Queensland</i>
Grant	\$9,010.00
Synopsis	Total hip (THR) and knee (TKR) replacements are commonly performed procedures for patients with end-stage hip and knee osteoarthritis. Prosthetic joint infections following joint replacements is linked to substantial costs, mortality and morbidity. Modifiable risk factors such as smoking, excessive body weight, and poorly controlled diabetes can increase the likelihood of prosthetic joint infections. Currently, numerous efforts are being undertaken by a variety of healthcare professionals to optimise the management of these risk factors pre and post operatively. However, successful behaviour modification requires active patient engagement. This prospective cohort study uses a survey to understand patient

Cath Rogers (THF Research Grants Committee Chair) and Dr John Ridler

Primary investigator	Mrs Kesaobaka Seledi – Novice researcher
Team	Dr Anna Tynan, Professor Jeroen Kroon (Griffith University), Dr Leah East (UniSQ)
Research	<i>Parental knowledge, experience, and perception of dental caries in children aged 4-to-12-years-old in rural Darling Downs</i>
Grant	\$4,150.00
Synopsis	This study aims to explore parents' knowledge, experience, perception, and awareness of dental caries in their children and their perceived barriers to appropriate management of the disease. Free child and adolescent oral health services are not adequately utilised by the rural and remote communities, therefore dental caries prevalence continues to stay high in children aged 4-12. One of the possible reasons for the low uptake of these services could be the lack of knowledge, experience and awareness among parents about dental caries.

Primary investigator	Dr Sally Havers – Experienced researcher
Team	Professor Claire Rickard (UQ), Emma Baker, Tricia Kleidon (UQ), Dr Jessica Schults (UQ), Professor Joshua Byrnes (Griffith University), Daner Ball (UQ), Dr Evan Alexandrou (University of Wollongong), Dr Bertrand Drugeon (UQ), Professor Andrew Martin (UQ)
Research	<i>Subcutaneously anchored securement system versus a traditional sutureless securement device for the prevention of Peripherally Inserted Central Catheter dislodgement: A randomised controlled trial</i>
Grant	\$49,704.16
Synopsis	This randomised control trial will investigate whether securement of central lines with a SASS securement device decreases the risk of catheter dislodgement (partial or total) compared to securement with SSD in adult patients. We will determine clinical, and cost-effectiveness of SASS compared to standard dressing and securement for adults requiring insertion of PICC lines. Decreased dislodgement of these devices will improve care and minimise impact of dislodgement on DDH patients including our more rural and remote patients receiving cancer care.
 Emma Baker and Cath Rogers (THF Research Grants Committee Chair)	
Primary investigator	Dr Ashwita Vanga – Novice researcher
Team	Dr Ahmed Kassab, Dr Jerome Mayers
Research	1) <i>Pregnancy in Cystic Fibrosis with Lung Transplant: A Case Report</i> 2) <i>Atypical Intrauterine Contraceptive Devices</i>
Grant	\$2,600.00
Synopsis	These two case reports have been accepted to be presented as ePosters at the Royal College of Obstetricians and Gynaecologists Congress held in London this year. By presenting the first case report, we are adding a unique case of successful pregnancy in cystic fibrosis to the body of literature for complicated pregnancies thus promoting care for obstetrically complex pregnancies. By presenting the second case report, it will highlight Darling Downs Health in contributing to the global body of literature towards awareness around atypical contraceptive devices.



Round 2 recipients – September 2025

Primary investigator	Dr Devang Desai – Experienced researcher
Team	Dr Benjamin Huang, Dr Matthieu Mo, Dr Lachlan Boyce, Dr Samaar Alva
Research	<i>Quantification of retrograde ejaculation secondary to Silodosin and Alfuzosin in adult males: a randomized, single-blinded, placebo-controlled, crossover study</i>
Grant	\$52,658.13
Synopsis	The aim of this project, run as a clinical trial, is to quantify and compare retrograde ejaculation as a side-effect of two different Alpha-blocker medications: Silodosin and Alfuzosin. This study involves consenting participants, being otherwise healthy men, who would typically be prescribed one of these medications for their urination difficulties. All participants will rotate through three phases of the study, each being administered a placebo, Silodosin and Alfuzosin at some stage of the study. Semen and urinalysis performed in each stage will provide data for analysis. This study is important for the Darling Downs, as this region has one Urology department which sees approximately 1500 patients with an enlarged prostate every year.



*Cath Rogers (THF Research Grants Committee Chair),
Dr Devang Desai &
Dr Benjamin Huang*

4.2 Other research grants awarded 2025

A number of other research grants were awarded to Darling Downs Health Staff in 2025 totalling \$1,022,523.66. Details of these grants are as follows:

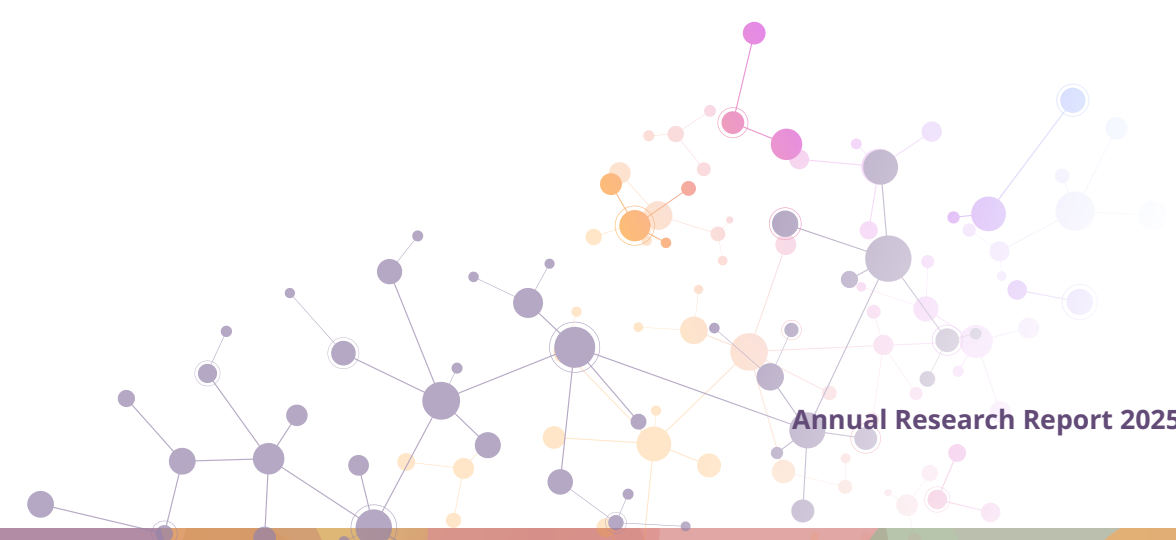
Grant Name	NHMRC 2024 Collaborations in Health Services Research grant
Project	“REBUILD: Reducing the Burden of Healthcare Associated Infection Using a Learning Health Systems Approach.”
DDH Investigator	Dr Sally Havers CNC Infection and Prevention Control, Darling Downs Health
Team	CIA - Doctor Jessica Schults CIB - Professor Claire Rickard CIC - Doctor Sally Havers CID - Professor Philip Russo CIE - Mrs Belinda Henderson CIF - Professor Joshua Byrnes CIG - Mrs Sarah Smith CIH - Professor Lisa Hall CII - Professor Clair Sullivan CIJ - Doctor Nicole White
Grant	\$999,040.80
Synopsis	1 in 10 people admitted to hospital develop an infection as a complication of their healthcare. These infections lead to significant patient suffering and unnecessary deaths. Current methods for infection prevention and control are complex, inefficient and costly. In partnership with Queensland Health services and patients, we will develop state-of-the-art systems and knowledge translation solutions that inform infection control programs and combat rising infection associated death rates.

Grant Name	Queensland Health Catalyst Award Research Excellence Showcase
Project	The SIMPLE Hub (Sustainable Industry Manufacturing Planning for Long-term Ecosystems) Medical Materials & Technologies (MMT) arm.
DDH Investigators	A/Prof Chris Wall & Dr Vivek Shridhar (orthopaedics), Dr Tom Arthur & Dr Damien Fry (general surgery), A/Prof Doogie Whitcombe & Dr David Wedgwood(anaesthetics)
Team	University of Southern Queensland Led.
Grant	\$3,500.00
Synopsis	The SIMPLE Hub (Sustainable Industry Manufacturing Planning for Long-term Ecosystems) is a visionary approach to collaborative research and circular economies. The project was initiated in the regional centre of Toowoomba and is funded by the Australian Government's Department of Education Regional Research Collaboration Program for \$3.35 million initiative—of which nearly \$900,000 supports Medical Materials & Technologies (MMT) research and commenced in 2023. Several small circular economies visioned projects have commenced including the bone model project which transforms agricultural waste into 3D printed bone scaffolds

Grant Name	Queensland Rural Health Innovation and Research Collaborative (QRHIRC)
Project	Feasibility and impact of a hybrid model for delivery of a prehabilitation program for rurally located patients awaiting knee joint replacement surgery at Darling Downs Health Service
DDH Lead	Craig Smith. Assistant Director Physiotherapy
Team	Professor Venerina Johnston (UniSQ); Lucinda Cheke (DDH); Dr Chris Wall (DDH); Dr Lorraine Teece (Consumer); Dr Melanie Fuller (UniSQ)
Grant	\$9,988.04
Synopsis	This project aims to answer the research question“Is a 12-week individualized health optimization program delivered in hybrid format, feasible and effective in improving weight and function in obese patients with end stage knee osteoarthritis booked for knee arthroplasty at a regional public hospital?”



Grant Name	Queensland Rural Health Innovation and Research Collaborative (QRHIRC)
Project	Rainbow Minds: Co-developing a mental health group intervention for LGBT+ high school aged young people within the Darling Downs region'
DDH Lead	Amber Johnson. Senior Mental Health clinician
Team	Dr Amy Mullens (UniSQ); Dr James Fowler (UniSQ); Dr Vikas Garg (DDH); Dr Karen DeNooyer (DDH); Tarra Excell (UniSQ); Jordanne Green (CConsumer); Dr Renee Ireland (UniSQ); Dr Lorelle Burton (UniSQ)
Grant	\$9,994.82
Synopsis	This project is guided by two distinct research questions: RQ1: What is the current knowledge, attitudes, and skills of mental health clinicians in supporting LGBT+ young people? This will be explored in Stage 1: Mental Health Clinician Survey RQ2: What do mental health clinicians feel are important psychological concepts and content to include within a manualised group therapy program for LGBT young people? This will be explored in Stages 2: Focus Groups and Stage 3: Integration of Finding. Answers to these questions will inform the design of the Rainbow Minds program and will integrate clinical and community perspectives to develop a tailored and novel program.



Spotlight: Research Success 2025

SIMPLE Hub – Queensland Health Catalyst Award Winner

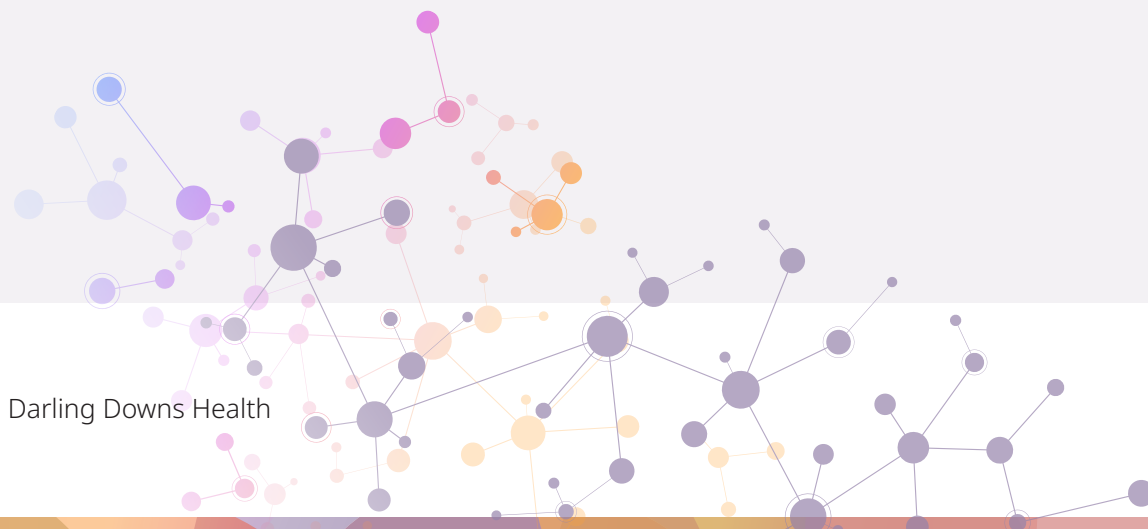
The SIMPLE Hub (Sustainable Industry Manufacturing Planning for Long-term Ecosystems) was announced as the Queensland Health Catalyst Award winner, selected from strong nominations across the state in recognition of its outstanding contribution to building a thriving research culture. Established in Toowoomba in 2023, the \$3.35 million Australian Government-funded initiative (of which nearly \$900,000 supports Medical Materials & Technologies (MMT) research) brings together the University of Southern Queensland, The University of Queensland Rural Clinical School, and Darling Downs Health clinicians and cross-sector industry partners. The Hub exemplifies bold interdisciplinary collaboration, uniting biomedical science, engineering, sustainability and clinical practice to develop innovative, circular-economy solutions. Projects include 3D-printed scaphoid fracture models integrating imaging and computational modelling; sustainable bone scaffolds created from agricultural waste; a novel aloe-based wound hydrogel incorporating First Nations knowledge; and hospital waste reduction initiatives to improve environmental sustainability in healthcare.



Dr Doogie Whitcombe accepting his award in Brisbane

Beyond research outputs, the SIMPLE Hub is strengthening regional research capability. PhD and Master's candidates are embedded in project leadership, conjoint research positions have been established for the medical workforce, and biomedical and medical students are engaged in applied research training. Innovations such as a hand exoskeleton for stroke rehabilitation and low-cost clinical skills training tools made from recycled materials further demonstrate the Hub's commitment to practical, socially responsive outcomes.

Winning the Catalyst Award against teams from across Queensland highlights the SIMPLE Hub's transformative impact on research culture in a regional health service and its leadership in sustainable medical innovation.



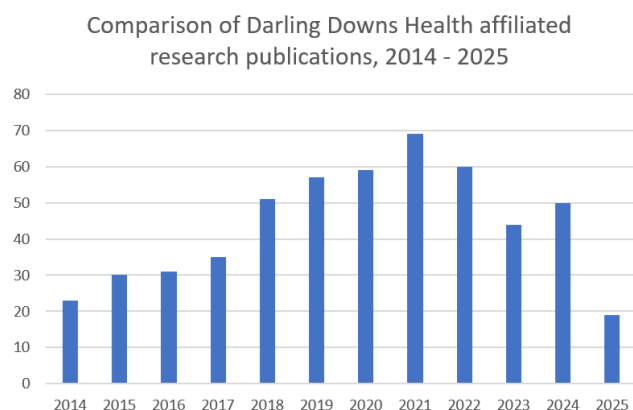
5. Research outputs

5.1 Publications

Nineteen new research publications with Darling Downs Health author affiliations were identified as published this year, comprising 14 research reports, 4 reviews (e.g., systematic, scoping), and 1 case report.

Medical Staff authored 9 publications, Allied Health authored 5, and Nursing and Midwifery 2. The 'Other' category includes staff from Library services, Research Development and Engagement, Queensland Rural Medical Services, and Clinical Governance, and covered 9 publications. (This adds up to 25 publications, as 5 publications had authors from more than one discipline.) Figure 5.1 provides a comparison of publication numbers since 2014.

Figure 5.1 Comparison of publications with Darling Downs Health author affiliation, 2014-2025



Publications identified for the year are listed below with Darling Downs Health affiliated authors in bold type. Where it can be ascertained, the professional division of the Darling Downs Health authors is recorded in parentheses following the reference; specialty is included where known

Journal Articles

(Note this includes conference presentations which are subsequently published in a scientific journal.)

Akosile, W., McDonald, D., Aghanwa, H., & Ola, B. (2025). A Systematic Review of the Prevalence of Substance Abuse in the South Pacific Region. *Psychoactives*, 4(4), 42. doi:10.3390/psychoactives4040042 [Medicine/Psychiatry; Library]

Aston, B., & Powell, B. (2025). Telehealth-directed emergency tube thoracostomy. *Journal of Telemedicine and Telecare*(Early online). <https://doi.org/10.1177/1357633X251372248> [Medicine/Emergency]

Bennetts, M., Furness, L., & Tynan, A. (2025). Implementation of occupation-centred practice by occupational therapists in acute adult physical settings: A mixed method study in a regional and rural health service. *Australian Occupational Therapy Journal*, 72(2), e70002. doi.org/10.1111/1440-1630.70002 [AH/OT; Research]

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Unpublished conference papers

Thirteen Conference presentations this year included 12 by Medicine and one by Allied Health.

Bloomfield, J., Xu, G., Gill, J., Lee, C. (2025, 2-6 May). Does peripheral nerve blockade improve early postoperative pain in total knee arthroplasty when added to periarticular local anaesthesia: A retrospective pilot study from a regional referral hospital. Australian and New Zealand College of Anaesthetists Annual Scientific Meeting, Cairns, Australia. Paper No. 74. (*Poster*) [Medicine/Anaesthetics]

Clarke, L., & Lee, W. R. (2025, 21-23 February). Reduced parathyroid frozen section demand following introduction of intraoperative PTH monitoring at Toowoomba Hospital. Pathology Update 2025, Melbourne. (*Poster*) [General Medicine]

Gill, J., Bloomfield, J., Xu, G., Lee, C. (2025, 2-6 May). Early postoperative outcomes following total knee arthroplasty in patients receiving spinal versus general anaesthesia – a retrospective pilot study in a regional hospital. Australian and New Zealand College of Anaesthetists Annual Scientific Meeting, Cairns,

Australia. Paper No. 190. (*Poster*) [Medicine/Anaesthetics]

Gill, J., Tosswill, H., Sunder Raj, D., Fernando, M., **Lee, C.** (2025, 2-6 May). Analysis of rurality and interhospital transfers on mortality outcomes at a regional referral centre following emergency laparotomy: a retrospective study. Australian and New Zealand College of Anaesthetists Annual Scientific Meeting, Cairns, Australia. Paper No. 189. (*Poster*) [Medicine/Anaesthetics]

Kim, M., **Williamson, S., Gupta, P. & Gluer, R.** (2025, 14-17 August). Diagnostic yield of routine echocardiography for clozapine induced cardiomyopathy in an Australian regional context. 73rd Annual Scientific Meeting of the Cardiac Society of Australia and New Zealand, Brisbane, Australia. (*Poster*) [Medicine/Cardiology, Psychiatry]

Lee, C., Choo, W., **Prasad, L.** (2025, 2-6 May). Evaluation of gastric residual volume using point-of-care ultrasound in patients with and without semaglutide: A retrospective pilot study. Australian and New Zealand College of Anaesthetists Annual Scientific Meeting, Cairns, Australia. Paper No. 115. (*Poster*) [Medicine/Anaesthetics]

Lee, C., Jain, S., Loh, N., Chan, K. (2025, 2-6 May). Bedside Ultrasound Measurements of Ocular Nerve Sheath Diameter and Ophthalmic Artery Flow Velocity for Assessment of Intracranial Pressure and Cerebral Perfusion Pressure - A Retrospective Proof-of-Concept Study. Australian and New Zealand College of Anaesthetists Annual Scientific Meeting, Cairns, Australia. Paper No. 263. (*Poster*) [Medicine/Anaesthetics]

Lee, C., Tosswill, H., Gill, J., Sunder Raj, D., Fernando, M. (2025, 2-6 May). A Comparison of Three Different Machine Learning Ideologies in Predicting Intensive Care Unit Admissions after Emergency Laparotomy: A Retrospective Study from a Regional Referral Hospital. Australian and New Zealand College of Anaesthetists Annual Scientific Meeting, Cairns, Australia. Paper No. 191. (*Poster*) [Medicine/Anaesthetics]

Lee, L., Shirley, A., Bolster, S., Hoskin, S., Jain, A. (2025, 2-6 May). Regional Anaesthesia and Analgesia in an Opioid-Tolerant Pregnant Patient with Osteomyelitis of the Manubrium - A Case Report. Australian and New Zealand College of Anaesthetists Annual Scientific Meeting, Cairns, Australia. Paper No. 118. **(Poster)** [Medicine/Anaesthetics]

Vanga, A. & Kassab, A. (2025, 23-25 June). Pregnancy in cystic fibrosis with lung transplant: A case report. RCOG World Congress 2025, London, England. **(Poster)** [Medicine/O&G]

Vanga, A. & Mayers, J. (2025, 23-25 June). Atypical intrauterine contraceptive devices. RCOG World Congress 2025, London, England. **(Poster)** [Medicine/O&G]

Williams, S. (2025, 11 July). Research in Action: delivering specialist hand therapy through a rural generalist lens. Qld Hand Therapy Network Conference, Brisbane. **(Poster)** [AH/Occupational Therapy]

Xu, G., Bloomfield, J., Gill, J., Hendry, E., Lee, C. (2025, 2-6 May). Impact of anaemia on postoperative outcomes and readmission rates in total knee arthroplasty – a retrospective study from a regional referral hospital. Australian and New Zealand College of Anaesthetists Annual Scientific Meeting, Cairns, Australia. Paper No. 227. **(Poster)** [Medicine/Anaesthetics]



