

ACRE II Project Newsletter

ImpACT Improved Assessment of Chest pain Trial

Accelerated Chest pain Risk Evaluation

July 2018

The rollout of the ImpACT protocol continues with three more sites implementing since December 2017. Interestingly, all three of these hospitals have overcome resourcing shortfalls in a unique way to introduce ImpACT.

Bundaberg Hospital has no in-house Exercise Stress Testing (EST) service but has a well-developed relationship with an external provider. They initially introduced part of the ImpACT protocol (to allow discharge of low risk patients without testing) in December last year. More recently, thanks to the dedication of Emergency Department Director **Dr Terry George**, they have negotiated the introduction of restricted hours inpatient testing to allow for acceleration of intermediate risk patients using the ImpACT protocol.

Queen Elizabeth II Jubilee Hospital has a limited capacity for inpatient ESTs, but implemented a hybrid pathway in February to accelerate low risk patients, and enable opportunistic acceleration of intermediate risk patients when a test is available. Well done to ED Staff Specialist **Dr Catharina Grobler** and all involved for working with this innovative solution, which no doubt requires some finesse around patient management in the ED.

Rockhampton

Rocky implemented ImpACT in May, and has paved the way for collaboration of two QH Clinical Excellence Division initiatives. Working with both ACRE and the state-wide **Tele-Cardiac Investigations Team** has enabled Rockhampton hospital to introduce the ImpACT protocol in full.



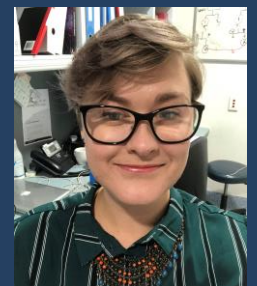
Rockhampton Stakeholders (L-R): ED Consultant Dr Motaz Bagheel, Cardiology NUM Leanne Wall, Cardiac Scientist Tim Parker, CPAS Clinical Facilitator Jackie Ryan, CPAS Nurse Jacinta Moloney, CPAS Nurse Kimberley Yewell

ESTs are locally supervised by two trained Cardiology Nurses, and the test is run by a Senior Cardiac Scientist in Brisbane with a live feed of both the ECG trace and the patient. An Advanced Trainee Cardiology Registrar is on hand to report the test straight away.

Credit must go to the Rocky stakeholders who have provided a great example of inter-departmental collaboration. A special mention to Cardiology NUM **Leanne Wall** for her very impressive organisation skills. The ACRE Team is very excited about patients in a regional hospital with otherwise limited access to testing, receiving the same or better level of care as metropolitan hospitals.

New ACRE team member

There has been an addition to the ACRE team - we have welcomed Sara Berndt as our new Project officer.



Sara comes to us from Louise Cullen's Emergency Department research team at the RBWH and is currently working on her Masters of Biostatistics. We are looking forward to Sara's contribution to ACRE.

Tele-health Stress Testing

The Tele-EST service is provided by the statewide Telehealth-Cardiac Investigations Unit, funded by the Clinical Excellence Division (CED) through the Healthcare Improvement Unit (HIU).

It is run from the Cardiac Investigation Unit (CIU) of the Royal Brisbane and Women's Hospital. CIU Director Prof Adam Scott heads the team coordinated by Senior Cardiac Scientist Alice MacDonald.

The service currently provides a range of cardiac testing to a long list of hospitals.

Follow this link for a video with more information:

<https://qheps.health.qld.gov.au/carui/telehealth/case-studies/mnhhs-telestress>

Where is ImpACT?

We now have 7 hospitals that have implemented ImpACT, with several more in planning stages. Here is the update on **“Where in Queensland is ImpACT”**

Hospital	Date Implemented
Cairns	Nov 2016
Ipswich	Jun 2017
Sunshine Coast	Jul 2017
Nambour	Jul 2017
Bundaberg	Dec 2017
QEII	Feb 2018
Rockhampton	May 2018

We have engaged with stakeholders at many additional sites and the following hospitals have commenced planning for implementation:

Gladstone, Mackay, Logan, Toowoomba, Caboolture, Townsville, Gold Coast and Robina

Research

Since November 2017 the ACRE Team has been conducting a research project in Cairns into the use of the ImpACT protocol in Aboriginal and Torres Strait Islander patients.

Funded in part by an AusHSI (Australian Centre for Health Services Innovation) Partnership Grant, patient recruitment is well underway with 134 patients recruited as we go to press.

We must acknowledge the hard work and dedication of our ACRE team members in Cairns - **Virginia Campbell** and **Karlie Proctor**, and the support of local Cairns stakeholders from ED and Cardiology departments.

With patient recruitment set to wrap up in September this year, we will keep you posted with outcomes.



The Team in Cairns - Front Row: Karlie Proctor (Research Nurse), Katrina Starmer (ED Consultant), Jonathan Buttmore (CNC Cardiac Unit), Tania Davis (Advanced Aboriginal Health Worker), Tania Phillips (CN Cardiac Investigations), Virginia Campbell (Research Nurse). **Back Row:** Robert Blauw (CN Cardiac Investigations), Deborah McDonough (CN Cardiac Investigations), Tristan Arizala (CN Cardiac Investigations)

Presentations

Conducting studies in Aboriginal and Torres Strait Islander populations introduces additional challenges to the rigorous processes around research. Prior to ethics application, the ACRE Team took steps to actively engage and seek feedback and endorsement from relevant stakeholders to ensure cultural capability.

ACRE Project Officer Laura Foran recently presented a poster on this journey which was well received, at the **Statewide Clinical Networks Collaborating for Aboriginal and Torres Strait Islander Health Forum** in Brisbane.



Collaborating through the research journey: The ImpACT story

Laura Foran, Cullen L, Graves N, McCormack L, Ashover S, Milburn T, Greenslade J, Starmer G, Stone R, Bonnin R, Starmer K, Drahm-Butler T, Davis T, Mowatt E, Proctor K, Campbell V, Parsonage W
 Statewide ACRE project, Clinical Excellence Division, Queensland Health & AusHSI, Queensland University of Technology and Cairns Hospital, Queensland Health