

ANNUAL REPORT
**2018-
2019**

HIGH IMPACT RESEARCH
TRANSFORMING EMERGENCY
HEALTHCARE

VOLUME I: HIGHLIGHTS



Through world-leading research
grant programs and capacity building
initiatives, EMF is revolutionising
emergency healthcare.

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In Volume II you will find:

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Welcome

This year, one in three Australians utilised an emergency healthcare service. Having access to timely, appropriate, and quality care is critical. Only through innovative research can we ensure all Australians receive the most effective and timely emergency healthcare.

The Emergency Medicine Foundation (EMF) is one of the very few Australian organisations awarding research grants to clinician-led studies into improved emergency healthcare. After a decade, its rigorous, impact-driven grants programs are leading to system-wide changes, and most importantly, better patient outcomes.

Launched in 2007, EMF has awarded \$17.9 million in research grants and capability building initiatives to Australian emergency healthcare clinicians. Our programs are aimed at developing new, evidence-based models of care as well as better treatments, diagnostics and services. We specifically fund clinician-led research because clinicians are the best-placed to develop workable solutions for patients and the healthcare system.

Emergency healthcare research has never had a more vital role to play than today. Our emergency healthcare providers are facing mounting pressures. In the last financial year, more than 8 million patients presented at an Australian public hospital emergency department, with demand for emergency care growing by about 2.7% per year.

Increasing patient presentations are leading to more frequent instances of overcrowding and delays in patient care. Drivers of patient demand and overcrowding are complex, often localised and not yet fully understood. Cited reasons, include population growth along with increased presentations by patients with mental and behavioural disorders, injury and poisoning, as well as the growing number of older people with complex and chronic conditions.

In a report commissioned by EMF, KPMG estimated that in 2016-17, Australian governments spent more than \$8.6 billion¹ each year on emergency healthcare — about 13.7% of the total funding for public health and hospitals. Yet government expenditure on dedicated emergency healthcare research is limited, and industry investment and philanthropic donations are almost non-existent.

The EMF Board and executive team believe EMF has a leading role to play in raising the nation's consciousness and advocating for emergency healthcare research. Only through research can Australia hope to implement robust, evidence-based, long-term and sustainable solutions for emergency healthcare.

It is a daunting, but clear challenge EMF sought to face during the reporting year. Led by the appointment of a new Board Chair and General Manager, along with a largely new Board, in the second half of the 2018-19 year, EMF began by implementing a new strategy to develop, expand and attract funding for EMF's research and capacity building initiatives. This strategy took a fresh look at the role of EMF in advocacy, leading sector-wide discussions and funding collaborations.

This annual report includes a summary of EMF's strategy, activities and financial performance and position as at 30 June 2019. It showcases the research funded through EMF, including new and completed research grants and the impact the research we fund is having on the delivery of emergency healthcare.

¹ This did not take into account patient transfer and GP costs; emergency healthcare expenditure could be considerably higher due to the undefined and unquantifiable contributions involved.

“The Emergency Medicine Foundation is one of the very few Australian organisations awarding research grants to clinician-led studies into improved emergency healthcare.”

During the reporting period, EMF’s flagship Queensland Research Program marked its tenth anniversary. Through this Program, in 2018-19, 16 grants and research capacity building initiatives worth \$1.45 million were awarded to projects led by Queensland Health emergency healthcare professionals, following \$5.3 million in applications.

Additionally, EMF awarded a Rural and Remote Research Program grant. This national program is funded via philanthropic donations.

The research activity driven by EMF grants is gaining increasing attention both nationally and internationally. During the reporting year, EMF-funded projects received nine research awards from international and Australian organisations. Our new grants attracted an additional \$2.9 million in leveraged and follow-on funding, while there were more than 20 conference presentations relating to EMF-funded research.

In an effort to further foster research activity in emergency healthcare in Queensland, in 2018, EMF expanded eligibility for its grant schemes. Historically, EMF’s grants were only open to projects led by emergency medicine specialists. From 2018-19, two new grants schemes were introduced, which were open to all Queensland Health emergency healthcare professionals engaging in direct clinical care. From 2019-20, this eligibility will extend across all EMF Queensland Research Program grants.

This change marked a key strategic shift for the organisation, which was driven by the recognition of the interdisciplinary nature of emergency healthcare delivery and the need to expand the research capability and capacity in Queensland. Encouragingly, 11 non-emergency specialists applied for grants as the Principal Investigator, including nurses, pharmacists, a paramedic, social worker, psychologist and a rural generalist in training.

EMF has a proven track-record in delivering robust evidence that is reducing current pressures on the system and enhancing patient-centric care. In this report, there is a summary of an EMF-contracted KPMG report. KPMG evaluated the value of EMF in terms of benefits it delivered for patients and the healthcare system as a whole. Importantly, this report highlights the \$44 million in economic benefits EMF-funded research is delivering each year to the Australian healthcare system. Much of this research has been only adopted in a limited capacity. If it were to be widely translated into clinical care it has the potential to deliver \$767 million in economic benefits for Australia.

Emergency healthcare is a relatively young area of medicine, but it forms an integral part of our healthcare system. Equally, EMF is only 11 years old and yet, with limited funding, it has made a significant contribution to the quality of patient care and healthcare services available across Australia. With a clear strategic focus, EMF has the ability to revolutionise emergency healthcare. To do so, it needs to unite the sector and work in partnership with government, industry and the public.

Emergency healthcare can no longer be taken for granted. It is our responsibility as a nation to ensure we create tomorrow’s world class emergency healthcare service today.



Dr Kim Hansen
EMF Chair



Dr Sonj Hall
EMF General Manager

Who we are

EMF is an Australian non-profit, funding innovative, Australian emergency healthcare research.

We are driving better emergency care to ensure patients receive quick and effective treatment. Every single Australian benefits from our research programs.

Through highly competitive and rigorous grant rounds, we invest in high-quality translational research directed at improving emergency healthcare. In addition, we help raise the profile of emergency medicine research and foster the transfer of research outcomes into real and practical benefits in medical emergencies.

Launched by Queensland doctors in 2007, EMF has invested more than \$17.9 million in 174 research grants and capacity building initiatives. Our programs have led to significant improvements in clinical practice and are associated with more than \$60 million in annual savings for the Australian healthcare system.

Milestones: EMF-funded research translated into clinical care

2013



Queensland Health rolls out Accelerated Chest Pain Risk Evaluation (ACRE) diagnostic protocol to **19 emergency departments**, leading to **\$13m** in annual healthcare benefits



Queensland Health Adopts Patient Admission Prediction Tool (PAPT) across **21 emergency departments**; estimated **\$2.5m** economic benefits yearly



2015

Standards Australia release new handwashing standard



Australasian College for Emergency Medicine revise policy on the care of elderly patients in the Emergency Department

2017



The Geriatric Emergency Department Intervention (GEDI) for people 70 years+ piloted at Ipswich and Cairns; first phase in rolling out the program regionally



Queensland metropolitan and regional emergency departments introduce nasal high flow devices to treat babies with bronchiolitis, reducing intensive care admissions by **11-25%**



Queensland Ambulance Service completes evaluation of a portable ultrasound device to rapidly diagnose internal injury and bleeding; adopted by its trauma response team, which is one of the first ambulance services globally to use the technology

2019



Queensland Health begins rolling out the intervention program, CREDIT, which reduces unnecessary cannulations in emergency departments. Potential for **\$2.5m** in annual savings



Metro North HHS adopts the 'Opioid Prescribing Toolkit' across nine emergency departments to reduce opioid prescriptions



Gold Coast Health introduces ultrasound training program to reduce failed cannulation attempts



Gold Coast Health emergency departments adopt 'buddy taping' for treating common hand injury instead of plaster



Publication in *The Lancet* leads to emergency departments internationally changing second-line medications used to treat prolonged seizures in children

2014



Gold Coast Health emergency departments no longer treat drunken patients with IV fluids; estimated saving of **\$0.6m** yearly. Royal Brisbane and Women's Hospital also adopt change

2016



The National Heart Foundation of Australia/Cardiac Society of Australia and New Zealand update their Guidelines for the Management of Acute Coronary Syndromes



Queensland Health and NSW Health issue new clinical guidelines for nasal high flow therapy (paediatrics)



Queensland Health rolls out the Improved Assessment of Chest Pain (ImpACT) diagnostic protocol to emergency departments; potential for **\$12m** in economic benefits each year



Queensland's four trauma emergency departments first in Australia to use a point of care device to rapidly diagnosed patients with trauma-related haemorrhaging



The Princess Alexandra Hospital releases a patient instruction card for urine collection, reducing sample contamination; the card is requested internationally

2018



Publication of evidence-based, Australasian guideline for management of paediatric patients with bronchiolitis in emergency departments and general paediatric wards



Metro North HHS expands 'Hospital in the Nursing Home' program across its emergency departments; the program is saving **\$8m** per year at the Royal Brisbane & Women's Hospital



The Northern Territory Government is saving **\$21.7m** annually in reduced retrievals following its adoption of point of care testing in remote health centres



Data published confirming safety and effectiveness of Queensland Ambulance Service paramedics using droperidol to sedate violent patients; attracts international interest, with other States adopting

Strategic direction 2019-2022



Our Vision

To find solutions that revolutionise
emergency healthcare



Our Values

Visionary
Excellence
Integrity
Respect



Our Priorities

- Promote excellent, value-based, agile and sustainable emergency healthcare
- Accelerate development of new emergency healthcare interventions
- Empower and develop emergency healthcare professionals



What we do

We nurture clinician-researchers by funding emergency healthcare research and supporting capacity building



Our Purpose

We invest in the future today through emergency healthcare research and partnerships that generate new knowledge to enhance the patient experience and outcomes, save lives and promote system sustainability

Strategic priorities 2019-2023

Promote excellent, value-based, agile and sustainable emergency care

Key strategies

- Align our research programs with national and state priorities
- Provide transparent, robust, just and quality-focused grants programs
- Partner with government, industry academia and professional bodies
- Grow our EMF people: capable, motivated and passionate

Performance measures

- Become the go-to, most respected organisation for emergency care research
- EMF leadership is developed and supported to make decisions
- The EMF team works in an environment of respect, and their wellbeing actively promoted

Accelerate development of new emergency care interventions

Key strategies

- Raise EMF profile through planned advocacy, media, social media and networking
- Create support web of key stakeholders
- Problem solve and be responsive to government, industry, the community and thought leaders
- Establish and support mechanisms for early translation

Performance measures

- Identify and engage with a patron and web of supporters who advocate for EMF
- Monitor EMF's external profile and recognised value proposition
- Increased early uptake of innovation across sector and across regions

Empower and develop emergency care professionals

Key strategies

- Invest in people to meet future needs
- Strengthen system research capability and capacity
- Promote a culture which values collaboration and innovation
- Deliver professional development across geographical areas

Performance measures

- The quality, quantity and implementation of emergency care research increases
- Increased uptake of, and referral to EMF capacity building opportunities
- Become the go-to organisation for emergency clinician-researchers

Highlights 2018-19

EMF's highlights reflect the ongoing impact of our highly effective and successful research grant and capacity building programs. Thanks to EMF, Australian emergency healthcare clinicians are leading the development of evidence-based solutions for improved patient care and outcomes.

Find out more about EMF's operations in Volume II of our annual report, which can be downloaded at: emergencyfoundation.org.au/about-us/reports-and-publications



\$1.45m

invested in new grants and capacity building initiatives



18 new grants awarded

48 applications

133 clinicians & collaborators on new grants

66 active grants



42 active clinical trials

16,124 patients being recruited for these projects



5 outcomes adopted clinically

50 publications in peer reviewed journals

49 conference presentations

13 projects completed

9 research excellence awards won by EMF-funded clinician-researchers



\$44m economic
benefits for Australia from
EMF projects

\$2.9m awarded
in new linked or follow
on funding for EMF
projects



367,884
social media impressions

35,741 website views

3688 social media followers

1475 newsletter subscribers

37 attendees at research
workshop

11 media releases



5.1 EMF staff (FTE)

66 clinicians, academics
& professionals volunteered
and/or worked for an
honourarium on peer
review panels

Economic impact

The Emergency Medicine Foundation is one of the very few Australian organisations which awards research grants specifically to clinician-led studies into improved emergency healthcare.

After a decade of running rigorous, impact-driven research grant programs, EMF commissioned KPMG to evaluate the value of these programs in terms of benefits it delivered for patients and the healthcare and patient outcomes.

KPMG selected eight projects funded by EMF, which had outcomes published in peer-reviewed journals. Most of these projects have been clinically translated, predominantly in the participating hospital.

Where economic evaluations were available, KPMG updated the financial benefits to 2017-18 dollar values and, where possible, estimated the potential value if the projects were widely adopted in Queensland, as well as nationally. The results were published in a 2019 KPMG report: *The Emergency Medicine Foundation Research Investment Impact*.

Key findings from the KPMG report – *Emergency Medicine Foundation Research investment*



Improved patient experience and reduced wastage of healthcare consumables.

+

Increased research staff and research capacity in Queensland emergency departments.



Estimated **\$44 million** in economic health benefits each year across Queensland and the Northern Territory in the participating hospitals.



If only five of the projects are translated more widely across Queensland, the potential annual economic benefit for the State is **\$97 million**.

If these five projects are adopted across all Australian emergency departments, the potential nationwide annual economic benefit is **\$767 million**.

Clinical impact

Research funded by EMF is driving improvements to patient care, services and clinician training. The clinical impact of our research grants is significant and exemplifies the exceptional return on investing in emergency healthcare.

Since the launch of our first research grant program in 2008, EMF has awarded more than \$17.9 million in 174 research grants and capability building initiatives.

To date, 28 EMF grants have led to clinical improvements in patient care. A further 13 are in early translation and likely to change care over coming months.

Longer-term, the 66 research projects in progress are expected to lead to rapid, significant impact.

In 2018-19 alone, six EMF-funded projects were adopted by emergency healthcare providers.

Clinical impact metrics



28 EMF-funded projects have led to improvements in patient care and healthcare services in Australian emergency departments.

A further **13** are likely to lead to change in short-term. Long-term, **66** grants are still ongoing with the potential for significant impact.

Countering the opioid epidemic

A new toolkit is helping to reduce the overprescribing of opioids by doctors in emergency departments.

The toolkit is an educational intervention, which was trialled with funding from an EMF grant. In 2018-19 it was adopted across nine Queensland metropolitan emergency departments.

Prescription opioids such as oxycodone, morphine and codeine are commonly abused and are becoming increasingly common in drug-related deaths in Australia.

Research impact – 2018-19 highlights

Some examples of outcomes from EMF-funded projects, which are driving improved patient treatment and care. Final reports on these projects were submitted to EMF in 2018-19.



New model of emergency care for detainees in police watch houses

An innovative new model of healthcare is set to expand to Queensland watch-houses and help reduce demand on emergency departments.

Trialled on the Gold Coast, the world-first 'Watch-house Emergency Nurse' (WHEN) model supplemented in-house nurses with experienced emergency department nurses to provide onsite, 24-hour nursing care to detainees, seven days a week.

WHEN improved the quality of healthcare for detainees and helped reduce the number of transfers to the emergency department, according to Griffith University and Gold Coast Health Professor of Emergency Care, Julia Crilly.



Adrenaline inhaler device for cardiac arrest and anaphylaxis

Queensland clinicians are commercialising an inhaler with the potential to deliver adrenaline rapidly, safely and simply to patients suffering anaphylaxis or a heart attack.

With EMF funding, the clinicians developed a platform technology, which was applied to create the device called 'Epihaler'.

The intellectual property and feasibility data from the EMF-funded study was used as the basis for capital-raising for the Queensland based start-up company De Motu Cordis Pty Ltd.

De Motu Cordis founder and The Prince Charles Hospital Critical Care Research Group Director Professor John Fraser (pictured) said, "As a result of this research project we are substantially closer to getting Epihaler into practice and we have a pathway to commercialisation which will ensure access for patients and healthcare professionals in Queensland and worldwide."



Simpler treatment for common hand injury

A Gold Coast Health led study into the treatment of a common hand injury is set to make a significant impact to fracture patient recovery times while also helping to ease Emergency Department demand.

In the first-ever Australasian trial of its kind, Emergency Department and orthopaedic clinicians compared plaster versus buddy taping to treat the most common type of fractured finger.

Research leader, Dr Richard Pellatt said buddy taping looked to be a more effective treatment choice for certain fractures.

“When we buddy taped, we found the patients generally spent 30 minutes less in the emergency department than plaster patients and went back to work within seven days of presenting, with some resuming normal activities straight away,” said Dr Pellatt.



Taking the guess-work out of finding difficult veins

A new training program is making it easier for emergency medicine clinicians to insert cannulas in patients with hard-to-find veins.

Cannulas are inserted into a patient’s vein, usually on their hand or arm, and are used to inject fluids and medications intravenously as well as to take bloods. While cannulation is a common procedure, clinicians struggle to find a suitable vein in up to 36% of patients.

To improve the rates of cannulation, Gold Coast University Hospital’s Dr Amy Archer-Jones trialled a program to train clinicians in using ultrasound-guided cannulation. Post-trial, the training continues to run in the Gold Coast University Hospital and Robina Hospital Emergency Departments, with plans to extend the program hospital-wide. A range of education posters and videos also have been produced to encourage patients to request ultrasound if they have previously experienced difficulties.



New treatment for children with seizures

Australian and New Zealand emergency doctors have robust new evidence to guide their treatment of children experiencing prolonged seizures.

Each year, thousands of children present to Australian emergency departments with prolonged seizures. When the seizures do not stop by themselves, it is called ‘Convulsive Status Epilepticus’ or CSE. With first line medications only stopping seizures in 40 to 60% of children, Australian and New Zealand emergency department clinicians compared the second line medication, phenytoin, with the newer anti-convulsant, levetiracetam. They found that while alone, neither drug was better, by using both drugs sequentially reduced the failure rate by more than 50%, while only adding an additional 10 minutes to treatment time, compared with giving phenytoin alone.

Study lead, Auckland Starship Children’s Hospital Paediatric Emergency Medicine Specialist, Professor Stuart Dalziel said, “This study has given us robust evidence to manage children with prolonged seizures without reverting to intubation and intensive care.”

The results from the trial were published in the prestigious medical journal, The Lancet. EMF funded the Queensland arm of this Australasian study.



Clinicians challenge standard sepsis treatment with new studies

Sepsis is a life-threatening condition, which causes 20,000 deaths every day globally. In Australia, there are more than 18,000 sepsis cases each year, with 5000 people dying from the illness.

Treating sepsis involves giving patients high doses of intravenous fluids to treat the low blood pressure associated with the illness. By artificially increasing the patient’s blood pressure, clinicians hope to prevent organ injury and death. The treatment was pioneered more than 50 years ago, but still remains a core element of the World Health Organisation’s guidelines for sepsis treatment.

A national pilot trial – in which EMF funded the Queensland arm – tested the feasibility of two sepsis treatment approaches, which they described as being at “opposing ends of a spectrum of accepted practice”: a ‘restricted volume’ approach, allowing earlier use of medications that support the pumping mechanism of the heart (vasopressors) if required, to the ‘standard volume’ approach to fluid resuscitation. At the end of the pilot, the research team concluded that a restricted fluid and early vasopressor regimen was feasible and clinically acceptable.

In a separate EMF-funded pre-clinical trial, researchers tested the standard high dose fluid treatment in a large animal model and found it led to a worsening of outcomes in septic shock.

New grants 2018-19 snapshot

EMF awarded \$1.25 million to 18 research projects in 2018-19



Impact of increasing mental ill health cases

In this study, clinicians are investigating the impact of the increasing numbers of mental health-related presentations to North Queensland emergency departments. They are interested in how the departments are responding to this critical issue.

Lead institution: Cairns Hospital



Caring for skin infection locally in the Torres Strait

A local research project is under way in the Torres Strait to see if a type of bacterial skin infection, known as cellulitis, can best be managed by health workers and nurses in community. Currently, patients are flown to Thursday Island for intravenous antibiotics.

Lead institution: Thursday Island Hospital



Securing cannulas in children

New medical grade superglue and a dressing securement product are being trialled to prevent cannula failure and complications in children and babies. Cannulas are routinely used by emergency clinicians; however, one in four currently fails, causing increased trauma and healthcare costs.

Lead institution: Logan Hospital



Fewer needles for children

In this multicentre trial, researchers are investigating whether children in the emergency department can be sedated with a single injection. Their focus is on determining the best outcome for the child.

Lead institution: Gold Coast University Hospital



Improving blood culture collections in emergency

Clinicians are trialling an educational intervention designed to improve the quality of blood cultures collected in the emergency department. During the trial, they are also providing tips to reduce contamination rates and improve practice to a wider clinical audience via social media.

Lead institution: Royal Brisbane and Women's Hospital



Understanding why aged care residents are transferred to emergency

Residents from aged care facilities account for a large proportion of older patients arriving at emergency departments. In this study, researchers are studying the decision processes used by nursing staff when considering the medical needs of residents.

Lead institution: Caboolture Hospital



New emergency department model to improve patient flow

A Wide Bay Emergency Department is trialling a new model of care for regional hospitals, with the aim of significantly reducing patient length of stay. The model uses junior doctors (PHO/registrar level) to triage patients.

Lead institution: Hervey Bay Hospital



Fibrinogen Early In Severe Trauma studY II (FEISTY II)

Following a successful Queensland pilot trial, the FEISTY team is running an international, multi-site study comparing two fibrinogen replacements – a new fibrinogen concentrate and the standard cryoprecipitate – to stem bleeding in severe trauma patients.

Lead institution: Gold Coast University Hospital



Pollen allergy & asthma

Queensland researchers are looking at the link between pollen exposure and asthma in patients presenting to two emergency departments. The findings could lead to the better management of pollen allergies, reducing the need for emergency healthcare.

Lead institution: The Prince Charles Hospital



Impact of new program on aged care facilities

The Geriatric Emergency Department Intervention (GEDI) is an innovative, nurse-led program designed to improve emergency care of frail older persons who develop an acute medical problem. In this study, the researchers are examining the impact of GEDI on aged care facilities.

Lead institution: Sunshine Coast University Hospital



Understanding how emergency departments are treating sepsis

To understand 'real world' clinical practice in treating adults with suspected sepsis, clinicians are running a study across emergency departments in Australia and New Zealand. The study, known as the ARISE Fluids study, aims to provide more insight into the current practice of fluid administration in suspected sepsis cases.

Lead institution: Gold Coast University Hospital



Treating babies with respiratory illnesses in remote Queensland

Weipa-based clinicians are leading a trial in remote Queensland healthcare centres to see if nasal high flow (NHF) therapy can be safely and effectively used to improve health outcomes for infants with bronchiolitis. The study could mean more babies are treated locally rather than being transferred to major emergency departments.

Lead institution: James Cook University



Improving survival rates for children with sepsis

In this pilot clinical trial, the research team is trialling a new treatment regime for children presenting to emergency departments with sepsis—a potentially life-threatening illness. The new treatment includes low volume fluids, inotropes (medication that strengthen the heart beats), vitamins and steroids.

Lead institution: Gold Coast University Hospital



Developing a digital tool to measure the patient experience

The aim of this project is to develop an online tool for measuring and valuing patient experiences in Queensland emergency departments. It will provide a proof of concept for an Australia-wide development, valuation and knowledge transfer study.

Lead institution: Gold Coast University Hospital



Impact of Commonwealth Games on Gold Coast emergency departments

To improve preparations for emergency departments in cities hosting major events, clinicians are assessing the impact of the 2018 Commonwealth Games on emergency healthcare and the lessons learnt from pre-event planning and training exercises for emergency departments.

Lead institution: Gold Coast University Hospital



Creating an electronic registry for chest pain clinical data

To provide an easily accessible database for chest pain research, a digital process is being developed to automatically extract clinical data from emergency department electronic records. Currently, data from Queensland emergency department patient health records can be only accessed manually, which is time consuming and expensive.

Lead institution: Logan Hospital



Capacity build grant extension – Royal Brisbane and Women's Hospital

The Royal Brisbane and Women's Hospital Emergency and Trauma Centre was awarded a third-year extension to its EMF Capacity Building grant. The department has appointed a conjoint senior nurse research role to coordinate research activities.

Lead institution: Royal Brisbane and Women's Hospital



Capacity building grant extension – The Prince Charles Hospital

This grant provides a “third-year” extension of funding as part of a 2011 EMF Capacity Building grant awarded to The Prince Charles Hospital Emergency Department. With the Capacity Building grant, the Department has engaged in more than 20 research projects.

Lead institution: The Prince Charles Hospital

EMF Board



Dr Kim Hansen

MBBS (Hons I) MBA, FACEM

**Chair & ACEM Board nominee
November 2018 – ongoing**

Dr Kim Hansen was appointed EMF Chair in March 2019. Dr Hansen is an experienced Emergency Consultant with a passion for Safety and Quality in healthcare. Dr Hansen is the Queensland Faculty Chair for ACEM (Australasian College for Emergency Medicine), a member of ACEM's Council, a member of the ACEM Quality and Patient Safety Committee and is the inaugural Chair of the IFEM's Quality and Safety Special Interest Group. Dr Hansen is the Director of St Andrew's Hospital Emergency as well as a Senior Staff Specialist at The Prince Charles Hospital Emergency Department.



Dr Shane George

BSc, MBBS, MPH, FACEM

**Director, ACEM Board nominee
November 2018 – ongoing**

Dr George is a paediatric critical care physician working in paediatric emergency medicine and paediatric intensive care at Gold Coast University Hospital. He is the clinical lead of children's critical care research for Gold Coast Health, and is a Senior Lecturer with the University of Queensland and Griffith University. Dr George is an early career researcher and a member of the Paediatric Research in Emergency Departments International collaborative (PREDICT), and the ANZICS Paediatric Study Group.



Dr Jeremy Furyk

MBBS, MPH&TM, MSc, FACEM

**Director, ACEM Board nominee
November 2018 – ongoing**

Dr Jeremy Furyk is a senior emergency physician at the University Hospital Geelong, in Victoria and an Adjunct Associate Professor at James Cook University. Previously, he was a senior emergency physician and active clinical researcher at The Townsville Hospital in North Queensland for more than 10 years. Dr Furyk has been on the Australasian College for Emergency Medicine (ACEM) Clinical Trials Group for several years and was recently appointed to the ACEM Research Committee.



Dr Andrew Spiller

BSc, MBBS (Hons), FRACGP, FACEM

**Director, ACEM Board nominee
March 2019 – ongoing**

Dr Andrew Spiller is an Emergency Medicine physician working in the Emergency Departments at both the Greenslopes Private Hospital and Logan Hospital, where he is Deputy Director. Dr Spiller has been a member of the EMF Strategic Grants Committee since 2017 and is involved in coordinating the research group at Logan Hospital. He is also a member of the Queensland Australasian College for Emergency Medicine (ACEM) Faculty and Queensland Ambulance Medical Advisory Committee. He has previously worked as a General Practitioner and a Medical Officer for the Royal Australian Navy as well as spending a year working in Emergency Medicine in Iceland.



Ms Cathy Montesin

BBus (Hons), GradDipAppFinInv, ACA

**Director
September 2018 – ongoing**

Ms Montesin is a skilled director appointment for EMF and the Chief Financial Officer with Affinity Education Group. Prior to joining Affinity, Cathy was a Director at InterFinancial Corporate Finance. Ms Montesin spent 15 years in the Transaction Advisory Services teams at PwC and Ernst & Young in Brisbane, Sydney and San Francisco. During this time, she was the Queensland representative on the National Business Valuation Special Interest Group of the Institute of Chartered Accountants in Australia. More recently, Cathy led the Financial Planning and Analysis team at Cleanaway Waste Management Limited. Cathy has also spent time in the credit restructuring team at NAB, and worked as the CFO of a property company working towards an IPO.



Dr Peter Isdale AM

PhD, BA (Hons), MAICD

**Director
September 2015 – September 2019**

Dr Isdale is the Managing Director of Intergyre Pty Ltd; Chairman of the Innovation Centre Sunshine Coast Pty Ltd; Deputy Chairman of Suncare Community Services Ltd; a non-executive Director of the Australian Medical Association (Qld); Chairman of the Advisory Board for the Medical Engineering Research Facility, Queensland University of Technology (QUT); a Member of the Advisory Committee for the Institute for Future Environments at QUT; a Commercialisation Strategy Advisor for the University of the Sunshine Coast; and holds an Adjunct Professorship in the School of Chemistry, Physics & Mechanical Engineering at QUT. He has held directorships on boards in Australia, Asia and the Pacific Rim for 30 years.

Retiring Board Members

Dr Anthony Bell

MBBS, MBA, MPH, FACEM, FRACMA

February 2017 to May 2019

Mr Jason Currie

BSc, LLB, MIP, MBA, GCPA

April 2016 to July 2018; September 2010 to March 2014

Associate Professor Ed Oakley

MBBS, FACEM

November 2014 to November 2018

Dr Michael Sinnott

MBBS, FRACGP, FACEM

September 2015 to September 2018; October 2007 to November 2013

Dr David Spain

MBBS, FRACGP, FACEM

October 2015 to November 2018;
May 2007 to February 2012

Dr John Wakefield PSM

MBChB, MPH (research), FRACGP, FACRRM, FRACMA

March 2016 to February 2019

EMF team



Dr Sonj Hall

Harkness Fellow, PhD, MPH, FACHSM, GAICD
EMF General Manager

Dr Hall was appointed EMF General Manager in February 2019, with the mandate to grow the organisation and increase its funding sources. Dr Hall has extensive experience in healthcare, including executive and consultancy appointments with the RAND Corporation, CSIRO, the Queensland Productivity Commission, and the Australian Department of Health, ACT Health and the NSW Bureau of Health Information. Dr Hall has had academic appointments with The University of Western Australia and Curtin University and Professorships at Central Queensland University and Bond University, and has sat on numerous Boards and Committees. Currently, Dr Hall holds an Adjunct Professorship at QUT, is Editor-in-Chief for the Australian Health Review, and is an International Correspondent on Healthcare Policy for The Commonwealth Fund (New York) as well as serving on Human Research Ethics Committees for Bellberry Limited.



Beth Chapman

BBus, CPA
Company Secretary and
Chief Financial Officer



Dr Hong Nga 'Angie' Nguyen Vu

MA, PhD
Research Manager



Julia Renaud

BSc Agr (Hons I), PGradDip J
Communications Manager



Dee Tierney

Grants Officer



Jody Tregidgo

Office Administrator





Help make research happen

Whether you are an individual, small or large organisation, or a government department, EMF is your proven partner for investing in emergency healthcare research.

EMF is a trusted and highly respected organisation. By working with us, you can drive research focused on helping Australians receive the right care, at the right time and at the right place.

Thanks to our lean operations, we can promise that more than 80% of your investment will go directly to fund and manage research.

Sponsor or donate to a target research area—small or large, EMF can ensure your investment goes to a specific area of research. We can award grants in memory of loved ones or colleagues or in the name of an organisation or family.

Create a scholarship for an emergency healthcare clinician to engage in a nominated research area—EMF will promote the scholarship and select the foremost recipient through a competitive, peer-reviewed process. We can name the scholarship in memory of a loved one, colleague or in the name of an organisation or family.

Fundraising—play a direct role in finding better ways to save lives in an emergency by raising money for research; make your next charity event in aid of EMF-funded research.

Workplace Giving— gives employees a smarter, tax-effective way to give through voluntary, automatic donations from pre-tax pay. Companies can enhance the impact of this program by matching employees' donations and demonstrating their commitment to this important cause.

Your investment is tax deductible. EMF is a non-profit organisation with charitable, health promotion and deductible gift recipient (DGR) status.

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