



Children's Health Queensland

# Research Impact Report 2024



**Queensland**  
Government





## Acknowledgement of Country

Children’s Health Queensland Hospital and Health Service pays respect to the Traditional Custodians of the lands on which we walk, talk, work and live. We acknowledge and pay our respects to Aboriginal and Torres Strait Islander Elders past, present and emerging. We acknowledge the historical and contemporary impacts of Queensland’s history of colonisation on the health and wellbeing of Aboriginal and Torres Strait Islander peoples. We recognise the ongoing intergenerational trauma and racism experienced by members of the community.

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# Message from the Board Chair and Chief Executive

In 2024, the Queensland Children’s Hospital (QCH) proudly celebrated 10 years of world-class care, having treated almost half a million children and young people since 2014. Throughout the past decade, research has been central to our mission — championing a culture of innovation, translating cutting-edge research into evidence-based care and delivering better health outcomes for children and young people.

The impact of Children’s Health Queensland research in 2024 is clear, with its influence continuing to spread globally through collaborations with leading institutions in 91 cities across 41 countries. These partnerships demonstrate our shared and ongoing commitment to working together to deliver the best outcomes for every child.

With 158 research projects undertaken and 657 articles published in 2024, our researchers’ commitment to innovation and exploration continues to affirm Children’s Health Queensland’s position as a national and international leader in paediatric research and knowledge translation.

This is exemplified through the application of research-driven advancements in care. For example, the QCH became the first paediatric hospital in the world to routinely use ultrasound for pre-operative assessments of blood flow in children’s brains, helping clinicians predict and mitigate potential risks. This approach to pre-operative screening is garnering international recognition, with hospitals worldwide now seeking to adopt it as standard practice.

We are translating ground-breaking research and harnessing innovation by establishing the QCH ACTION (Advanced therapies and Clinical Trials InnovatiON) Centre with the support of the Children’s Hospital Foundation. The ACTION Centre gives children living with rare diseases and complex illnesses safe and timely access to new and potentially life-changing therapies. This centre will help improve access to cutting-edge treatments, accelerate the implementation of research into life-changing care and help us further develop clinical expertise at the QCH to serve children and young people right across the state of Queensland.



Children’s Health Queensland remains committed to providing equitable healthcare for Aboriginal and Torres Strait Islander children and young people (who represent almost half of Aboriginal and Torres Strait Islander peoples living in Queensland). As part of this journey, researchers have studied a culturally adapted, co-designed screening program to help clinicians across Queensland identify Aboriginal and Torres Strait Islander infants who may have a higher chance of movement and learning concerns, allowing for earlier access to therapy supports.

We would like to congratulate and thank our clinicians and researchers for their dedication to advancing patient care through research and innovation, including making 108 new clinical trials available to Queensland children, young people, and their families in 2024. They have played a pivotal role in embedding research and education into clinical practice, ensuring the healthcare we deliver is informed by the latest evidence.

As we reflect on a decade of remarkable achievement, it’s clear that the passion and dedication of our researchers and clinical teams have created a lasting impact. With ongoing advancements in research, innovative treatments, and a commitment to equitable care for all children and young people, we are not only improving outcomes for those in Queensland but also setting a benchmark for paediatric healthcare nationally and globally.

Together, we will continue to pave the way for a healthier future, ensuring that every child has access to the life-changing care they deserve.

Heather Watson  
Board Chair

Frank Tracey  
Chief Executive

Children’s Health Queensland  
Hospital and Health Service



## 2024 at a glance

158 research projects*	266 active clinical trials
108 new clinical trials**	769 patients recruited to clinical trials
153 new projects reviewed by Human Research Ethics Committee	657 articles and book chapters published
RESEARCH GRANTS INCOME 2024	
\$5.4m grants funding awarded to CHQ	\$35.8m total grant funding awarded for projects with CHQ
\$4.1m clinical trials income	\$3.1m grants and academic income
\$2.9m philanthropic and industry income	\$10.2m total research income

Collaborated with leading institutions in

91 cities across 41 countries

\*Total projects authorised by the Children’s Health Queensland Research Governance Office.  
\*\*Total clinical trials authorised by the Children’s Health Queensland Research Governance Office.



# Message from the Director of Research and Board Research Committee Chair

Children's Health Queensland researchers continued to embrace innovation and explore new ways to advance healthcare in 2024 to improve outcomes for children and young people in Queensland and around the world.

As we celebrate 10 years of care at the QCH, we reflect on the decade of dedication from researchers who champion a culture of clinical excellence and strive to improve healthcare for children now and into the future.

In 2024, more than 760 patients were recruited for 108 new clinical trials at the QCH, and our clinical trial capacity was bolstered with the establishment of the QCH ACTION (Advanced therapies and Clinical Trials InnovatiON) Centre with funding from the Children's Hospital Foundation. In its first phase, the ACTION Centre will develop a Children's Health Queensland Advanced Therapies Program to increase clinical trial capability and capacity for novel treatments such as gene therapy and cellular therapies.

Throughout the year, Children's Health Queensland prepared for its inaugural assessment under the National Clinical Trials Governance Framework. This framework aims to embed clinical trials into the provision of healthcare, ensuring the QCH maintains the highest standards in clinical research and healthcare delivery.

We are grateful for the ongoing support and collaboration of our precinct partners as we continue to undertake pioneering research: The University of Queensland, the Queensland University of Technology, Translational Research Institute and the Children's Hospital Foundation. The impact of our research in advancing paediatric care and treatment continues to be recognised with considerable successes in grant schemes. In 2024, Children's Health Queensland research was supported by more than \$5.4 million in grant funding, often in partnership with our precinct partners and others from interstate and internationally. We acknowledge and congratulate all clinicians who were awarded fellowships or grants this year to progress their respective research.



In addition to commending the outstanding contributions of our researchers, we extend our appreciation to members of our research committees and advisory groups for generously contributing their time and expertise (see page 21). Their continued support plays a vital role in supporting Children's Health Queensland's reputation as a world-class health service committed to excellence in research and innovation.

As we embark on the next decade of discovery, collaboration, and excellence, we remain committed to delivering groundbreaking solutions and compassionate care. With the launch of new research initiatives, expanded clinical trial capacity, and strengthened collaborations across the sector, Children's Health Queensland is in a strong position to lead life-changing care for children and young people – for a healthier tomorrow.

**Associate Professor Andy Moore**  
Director of Research

**Professor Simon Denny**  
Board Research Committee Chair

## Our strategy

Children's Health Queensland's research strategy is driven by our vision to lead life-changing care for children and young people — for a healthier tomorrow.

### Children's Health Queensland Research Strategy 2023-2025

Our research strategy aims to mobilise and empower the Queensland paediatric research community to lead ground-breaking research and translate new knowledge into better health outcomes for children and young people across Queensland and the world.

#### Our research enablers



##### Workforce

We aim to build our research workforce at all career stages, increasing the number of Children's Health Queensland staff leading and collaborating on research across all areas.



##### Clinical excellence

We strive to increase and improve access to clinical trial activity across Queensland, with a strong focus on Aboriginal and Torres Strait Islander children and young people and those from culturally and linguistically diverse (CALD) backgrounds.



##### Partnerships

We collaborate broadly with clinical and non-clinical partners from academia, industry and the community.



##### Technology and critical infrastructure

We leverage Children's Health Queensland's clinical infrastructure, people, systems and data as well as statewide services to answer clinically important questions, inform new research initiatives and implement research findings into practice.

#### Indicators of success

We aim to increase the number of Children's Health Queensland staff as lead investigators on research grants and publications, and have more clinicians enrolled in and completing high degrees by research (HDR) and supervising HDR students.

We strive to see more paediatric clinical trials open and accessible to all children, young people and their families across Queensland, as well as a greater volume of research studies across the spectrum.

The research we lead and collaborate on will improve clinical practice, quality, innovation, and service.

We are also committed to increasing consumer engagement in research.



# Empowering families to manage bronchiectasis effectively

Children's Health Queensland researchers have developed and implemented the world's first paediatric Bronchiectasis Action Management Plan to help children and their families manage the condition.

Bronchiectasis (non-cystic fibrosis) is a condition in which the airways are damaged due to chronic inflammation or infection, leading to a build-up of excess mucus.

Recent total healthcare costs of bronchiectasis in Australian children are estimated to be \$27.74 million per year, with increasing recognition of the complexities for paediatric patients.

Managing flare-ups of the condition is a known priority for parents of children with bronchiectasis, prompting Queensland Children's Hospital (QCH) researchers to develop an action management plan designed specifically for children.

The Bronchiectasis Action Management Plan includes information about the condition, relevant medications, physiotherapy, and other management tips, making it an important tool to help parents understand their child's needs.

A randomised controlled trial involving 194 children, primarily from QCH, was conducted over 12 months to assess whether this action management plan could improve clinical outcomes compared to standard care.

Associate Professor Julie Marchant, clinician researcher at QCH and Queensland University of Technology's (QUT) Cough Asthma and Airways Research Group based at the Centre for Children's Health Research (CCHR), said despite the impacts of COVID-19, there were some positive findings.

"Sub-analysis of data pre-COVID-19 lockdown showed a 37 per cent reduction in doctor visits for flare-ups in the children given the action management plan, compared to the control group," Assoc Prof Marchant said.

"There was also a 203 per cent improvement in the timely uptake of the annual influenza vaccine, which was included as a reminder in the plan.

"Early detection and effective treatment can halt or even reverse bronchiectasis in children.

"This action management plan supports effective treatment by empowering children and their families to manage the condition and know when to contact their primary care provider for help," she said.

The Bronchiectasis Action Management Plan is now available worldwide, providing a clear, evidence-based plan to improve outcomes for children, particularly for those living in areas with limited access to expert medical advice.

The development and implementation of the Bronchiectasis Action Management Plan was funded by the Children's Hospital Foundation (CHF), with support from Menzies School of Health Research.

*Pediatric Bronchiectasis: Priorities, Precision Medicine, and Transition to Adult Care. American Journal of Respiratory and Critical Care Medicine. 2024 Jul 1;210(1):4-5. doi: 10.1164/rccm.202402-0423ED.*

Early detection and effective treatment can halt or even reverse bronchiectasis in children.



# World-first screening practice for heart surgery

**The Queensland Children's Hospital (QCH) is the first in the world to routinely use ultrasound for pre-operative assessments of blood flow in children's brains, helping clinicians predict and mitigate potential risks.**

Children who undergo heart surgery or rely on Extracorporeal membrane oxygenation (ECMO), a form of life support that effectively acts as a temporary heart and lung bypass, can experience complications during procedures if the blood around their brain is not circulating as normal.

A loop of arteries called the Circle of Willis circulates blood around the brain, but in some children this 'circle' is incomplete or underdeveloped.

At the QCH, children who are scheduled to or have potential to require heart surgery or ECMO now undergo a transcranial Doppler ultrasound to assess the function of their Circle of Willis.

This screening allows clinical teams to implement neuroprotective measures for children with an incomplete Circle of Willis, reducing the risk of complications, such as stroke, during surgery.

The risk reduction impact is already evident, with 720 children screened at QCH between July 2019 and June 2024, and no major adverse events reported.

Dr Prem Venugopal, QCH Deputy Director of Cardiac Surgery, said the introduction of this assessment as standard practice in 2022 has led to significant benefits for paediatric patients.

"This screening provides us with lifesaving information, allowing us to adjust surgical strategies, for example, cannulating the aorta instead of the carotid artery," Dr Venugopal said.

"By using an ultrasound, we can provide a real-time assessment at the bedside, offering more accessibility than an MRI and without the radiation used in CT scans.

"Strong collaboration between QCH's cardiac surgery team, radiologists, and sonographers drives these procedural advancements, ultimately improving patient care for children and young people in Queensland," he said.

QCH's approach to pre-operative screening is garnering international recognition, with hospitals worldwide now seeking to adopt it as standard practice.

*Pre-operative transcranial Doppler ultrasound assessment of cerebral collateral circulation in children undergoing veno-arterial extracorporeal membrane oxygenation or cardiac surgery. Journal of Medical Radiation Sciences 2024 Dec 13. doi: [10.1002/jmrs.845](https://doi.org/10.1002/jmrs.845)*

Ultrasound screening provides surgeons with lifesaving information, allowing them to adjust surgical strategies.



# Co-designed screening program enhances care for vulnerable First Nations infants

**A culturally adapted, co-designed screening program is helping clinicians identify Aboriginal and Torres Strait Islander infants who may have a higher risk of developmental concerns.**

Infants born prematurely, with low birth weight, or requiring neonatal support are at a greater risk of delays in motor and cognitive development, making early interventions essential for them to thrive.

However, accessing these early supports can be challenging for Aboriginal and Torres Strait Islander infants and their families due to barriers like inequitable access to specialised services and culturally safe healthcare.

Dr Carly Luke, Children's Health Queensland senior research physiotherapist and postdoctoral research fellow at The University of Queensland (UQ), has explored new ways to enhance the early detection of developmental concerns and improve access to healthcare, ensuring Aboriginal and Torres Strait Islander children have the best possible start in life.

A total of 156 Aboriginal and Torres Strait Islander infants across Children's Health Queensland, Townsville and Cairns and Hinterland hospital and health services participated in LEAP (Learning through Everyday Activities with Parents), a culturally adapted developmental screening program.

This program is led by UQ researchers Dr Katherine Benfer and Professor Roslyn Boyd and was co-designed with Aboriginal and Torres Strait Islander peoples (led by UQ PhD student Leeann Mick-Ramsamy), focusing on improving engagement and access, offering flexibility in appointments, the use of culturally validated tools and building the workforce capacity of Aboriginal and Torres Strait Islander clinicians and health workers.

"As part of the LEAP screening program, we filmed infants to assess their early spontaneous movements and used detailed scoring tools to distinguish between babies developing as on track and those with a higher chance of movement and learning concerns, who would benefit from extra support," Dr Luke said.

"We used a validated Aboriginal and Torres Strait Islander screening tool (ASQ-TRAK) to identify the babies' strengths and highlight any potential developmental areas of concern."

"Hands-on assessments were also used to evaluate movement, posture, and learning development," she said.

Among the 156 infants screened, 44 per cent were classified as developmentally 'on track,' 46 per cent had a high chance of movement and learning concerns, and 10 per cent had a high chance of cerebral palsy.

By effectively identifying babies with developmental concerns, more support can be provided during this critical period of brain development.

Dr Luke's study also explored whether engagement with follow-up appointments for Aboriginal and Torres Strait Islander families could be improved through the use of the co-designed, culturally adapted program.

"Prior to the LEAP program, we did an audit at key recruitment sites to see the engagement rates for Aboriginal and Torres Strait Islander families at their routine neonatal follow-up clinics," Dr Luke said.

"Initial engagement rates were around 50 per cent, but after implementing the culturally adapted screening program, we observed that rate rise to 86 per cent."

"Improving engagement with Aboriginal and Torres Strait Islander families in a culturally safe way and offering earlier access to these critical supports has been the most significant impact of this research," she said.

The study was funded by the Cerebral Palsy Alliance, with support from UQ.

*Relationship between early infant motor repertoire and neurodevelopment on the hammersmith infant neurological examination in a developmentally vulnerable First Nations cohort, Early Human Development. 2024 May; 192:106004. doi: 10.1016/j.earlhumdev.2024.106004.*





# Study paves the way for safer invasive devices

A study has found nearly 80 percent of paediatric inpatients have at least one invasive device and a high rate of associated complications, highlighting an opportunity to enhance patient safety.

A total of 285 paediatric inpatients were audited at random across the Queensland Children’s Hospital, Royal Children’s Hospital Melbourne, and Perth Children’s Hospital to investigate the use of invasive devices.

Of this cohort, 78.2 percent had at least one invasive device, which was monitored across a three-day period.

The study led by Children’s Health Queensland clinical nurse and The University of Queensland Postdoctoral Research Fellow Dr Mari Takashima found that about 1 in 3 devices had complications, and 1 in 10 devices failed.

“We also found that certain types of devices, particularly vascular access devices like IV lines, had higher complication rates than others, which provided us a clear direction for improvement efforts,” Dr Takashima said.

“What stood out was the high number of devices some children needed for their care – up to 13 devices in a single patient. This really highlighted the complexity of care required for some of our sickest children,” she said.

These findings offer an opportunity to improve monitoring and implement more effective strategies to minimise risks and enhance patient safety.

“This research is the first step in making medical devices safer and more effective for children in our hospitals,” Dr Takashima said.

“By understanding how often complications occur and which devices are most likely to cause problems, we can develop better ways to prevent these complications.

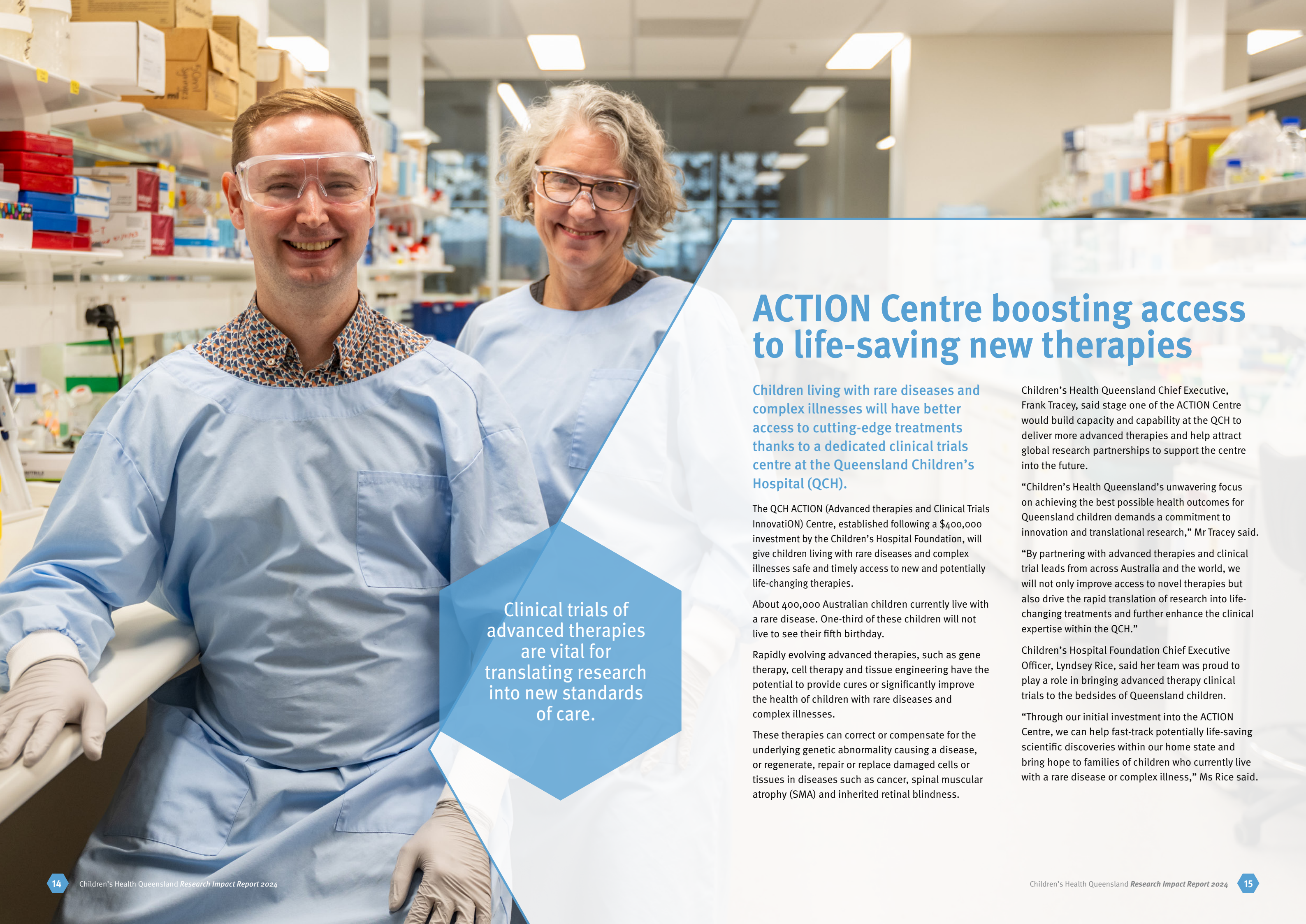
“Our goal is to reduce device-related complications and improve the hospital experience for Queensland children and their families,” she said.

The collaborative project, funded by a Nursing and Midwifery Research Fellowships grant (Novice Researcher Fellowship), provided valuable insights to improve device management in paediatric healthcare and highlighted the need for standardised care practices across different healthcare settings.

*Pediatric invasive device utility and harm: a multi-site point prevalence survey.*  
Pediatric Research. 2024 Jul;96(1):148-158. doi: 10.1038/s41390-023-03014-1.

By understanding how often complications occur and which devices are most likely to cause problems, we can develop better ways to prevent these complications.





# ACTION Centre boosting access to life-saving new therapies

Children living with rare diseases and complex illnesses will have better access to cutting-edge treatments thanks to a dedicated clinical trials centre at the Queensland Children’s Hospital (QCH).

The QCH ACTION (Advanced therapies and Clinical Trials InnovatiON) Centre, established following a \$400,000 investment by the Children’s Hospital Foundation, will give children living with rare diseases and complex illnesses safe and timely access to new and potentially life-changing therapies.

About 400,000 Australian children currently live with a rare disease. One-third of these children will not live to see their fifth birthday.

Rapidly evolving advanced therapies, such as gene therapy, cell therapy and tissue engineering have the potential to provide cures or significantly improve the health of children with rare diseases and complex illnesses.

These therapies can correct or compensate for the underlying genetic abnormality causing a disease, or regenerate, repair or replace damaged cells or tissues in diseases such as cancer, spinal muscular atrophy (SMA) and inherited retinal blindness.

Children’s Health Queensland Chief Executive, Frank Tracey, said stage one of the ACTION Centre would build capacity and capability at the QCH to deliver more advanced therapies and help attract global research partnerships to support the centre into the future.

“Children’s Health Queensland’s unwavering focus on achieving the best possible health outcomes for Queensland children demands a commitment to innovation and translational research,” Mr Tracey said.

“By partnering with advanced therapies and clinical trial leads from across Australia and the world, we will not only improve access to novel therapies but also drive the rapid translation of research into life-changing treatments and further enhance the clinical expertise within the QCH.”

Children’s Hospital Foundation Chief Executive Officer, Lyndsey Rice, said her team was proud to play a role in bringing advanced therapy clinical trials to the bedsides of Queensland children.

“Through our initial investment into the ACTION Centre, we can help fast-track potentially life-saving scientific discoveries within our home state and bring hope to families of children who currently live with a rare disease or complex illness,” Ms Rice said.

Clinical trials of advanced therapies are vital for translating research into new standards of care.



# Innovative research advancing spinal care for children

A unique partnership between spinal orthopaedic surgeons and medical engineers is driving global advancements in the prevention and management of spinal disorders in paediatric patients.

In 2024, the Biomechanics and Spine Research Group (BSRG), a collaboration between the Queensland Children's Hospital (QCH) and QUT, continued improving paediatric spinal care through several studies.

One study focused on identifying adolescents at higher risk of worsening scoliosis, by comparing outcomes between patients whose condition progressed, and those who remained the same.

The progressive spinal changes of 36 girls at the QCH with a specific type of spinal curve (Lenke 1 AIS curves) were analysed.

Researchers found specific, initial measurements were greater in the group that later showed more severe progression, and over time the differences in measurements between the two groups increased.

These findings suggest the initial differences in specific spinal measurements indicate a greater likelihood of scoliosis progression, providing valuable management insights for clinicians caring for patients with adolescent idiopathic scoliosis (AIS).

Adjunct Professor Geoffrey Askin, QCH Director of Orthopaedic Surgery and BSRG Collaborative Research Director, said the research was important for improving care for children and young people worldwide.

"Our research translates directly to patient care, ensuring children and their families have access to innovative, evidence-based treatments that will achieve the best outcomes," Adj Prof Askin said.

This innovation, driven primarily to improve patient care, and with a foundation in evidence-based scientific methods, is a unique opportunity for the group, including Principal Fellow in Spine Research and QUT Associate Professor, Paige Little, to see impact for their research.

"We are privileged to use our research to create real impacts, through the QCH team," Assoc Prof Little said.

"There's a mutual desire from everyone not only to see academic outputs, but to see a genuine improvement in care for Queensland children," she said.

In 2024, the BSRG received several accolades for its contributions to improving paediatric spinal care, including winning the Embracing Research and Innovation category in the 2024 Queensland Health Awards for Excellence and receiving the Best Paper Award and Clayton Adam Award at the Australian Spine Society 35th Annual Scientific Meeting.

Dedicated to dreaming big, the group is investigating new ways to deliver care closer to home for regional and remote Queensland kids through emerging technologies like smartphone applications.

The BSRG remains at the forefront of paediatric spinal care with funding support from several industry partners, including the QCH, CHF, Medtronic, Queensland X-Ray and Sealy Australia.

*Assessing progressive changes in axial plane vertebral deformity in adolescent idiopathic scoliosis using sequential magnetic resonance imaging.* European Spine Journal. 2024 Feb;33, 663–672. doi: 10.1007/s00586-023-08004-9

We understand the complexities of a child's spine and can apply our research to pioneer solutions that address complex clinical challenges.



# Translating research into action for mental health

Researchers and subject matter experts from Children's Health Queensland have provided valuable insights into how trauma can impact infants, children and young people, offering solutions to help prevent trauma and improve support for future generations.

The Queensland Mental Health Commission invited experts from Children's Health Queensland to inform the *Queensland Trauma Strategy 2024-2029*, specifically through the lens of trauma in infants, children and young people in Queensland.

Catherine Rawlinson, statewide Service Development Leader at the Queensland Centre for Perinatal and Infant Mental Health (QCPIMH), contributed insights into the impacts of trauma during pregnancy and early parenting. This consultation paper highlighted how untreated historical and intergenerational trauma can create barriers for parents in accessing services, and the need to address trauma during the perinatal period to help parents provide the best care.

A second paper submitted by Dr Elisabeth Hoehn, QCPIMH Medical Director, and Dr Alexandra De Young, QCPIMH researcher, explored the impacts of trauma experienced by infants and young children, and offered options for reform. These included engaging families in trauma-informed policy design, promoting culturally safe support for vulnerable communities, and investing in social determinants of health to improve outcomes.

Finally, a submission by Child and Youth Mental Health Service researchers Professor James Scott and Julie Blake, focused on trauma in adolescents and young people. This submission highlighted the need for targeted health initiatives to mitigate harmful factors such as violence and alcohol consumption among adolescents, while strengthening protective factors to support wellbeing.

These three submissions ensured the *Queensland Trauma Strategy 2024-2029* was evidence-based, aligned with best practices, and adapted to the diverse needs of Queensland children and young people.



# Awards and prizes

The impact of the work of Children’s Health Queensland researchers was recognised with a variety of awards and honours in 2024.

## Industry awards

### Professor James Scott

#### Clarivate Highly Cited Researcher

Prof James Scott has published more than 300 peer reviewed papers and is a 2024 Clarivate Highly Cited Researcher, placing him in the top one percent of researchers by citations around the world. Prof Scott’s research into child and youth mental health prevention and intervention strategies continues to advance care for young people across the country and internationally.



Prof James Scott

### Associate Professor Leanne Johnston

Leanne Johnston was recognised for her contributions to the work ‘Child-Led Goal Setting and Evaluation Tools for Children with Disabilities: A Scoping Review’, examining tools and approaches to help children with disabilities or developmental delays set and evaluate their own goals. This work was acknowledged as one of the Top 10 Most Accessed Papers in Developmental Medicine and Child Neurology in 2024. <https://doi.org/10.1111/dmcn.15959>



A/Prof Leanne Johnston

### Associate Professor Andy Moore

A/Prof Andy Moore’s contributions to ‘Childhood cancer survival and avoided deaths in Australia, 1983-2016’ were acknowledged, with the work recognised as one of the Top 10 Most-Cited Papers in Paediatric and Perinatal Epidemiology in 2024. <https://doi.org/10.1111/ppe.12895>

### Dr Neil Paterson, Dr Mark Trembath and Associate Professor Paul Lee-Archer

Dr Neil Paterson, Dr Mark Trembath and A/Prof Paul Lee-Archer were recognised by the Australian and New College of Anaesthetists (ANZCA), receiving the Harry Daly Research Award for their research into the mental health of anaesthetists.



Dr Neil Paterson, Dr Mark Trembath and A/Prof Paul Lee-Archer

Associate Professor Honey Heussler and Dr Mick O’Keefe Life Memberships of the Australasian Society for Developmental Paediatrics.

## Mary McConnel Career Boost Program for Women in Paediatric Research Children’s Hospital Foundation

### Dr Natacha Omer

Natacha Omer’s research focuses on natural killer cell immunotherapy in paediatric sarcomas. Her groundbreaking work aims to advance treatment options for young cancer patients.

### Dr Anna Francis

Anna Francis is dedicated to decreasing mortality and morbidity in children with chronic kidney disease, researching new ways to make improvements in paediatric nephrology.

### Dr Sophie Wen

Sophie Wen is researching ways to optimise clinical antimicrobial trials in children with bloodstream infections, aiming to enhance the effectiveness of treatments for serious infections.

## Children’s Health Queensland Awards

### Associate Professor Leanne Sakzewski

#### CHQ Excellence Award for Research

A/Prof Leanne Sakzewski was recognised for her research in upper limb motor rehabilitation, function and participation for children with cerebral palsy, and its important clinical application for patients and their treating clinicians.



A/Prof Leanne Sakzewski and Dr Vikas Goyal

### Dr Vikas Goyal Associate

#### CHQ Excellence Award for Research

Dr Vikas Goyal was recognised for his clinical research that’s improving the lives of children with chronic pulmonary diseases, including his pioneering work around the management of bronchiectasis.

### Professor Megan Simons

#### CHQ Dignan Stephens Award

Prof Megan Simons received this award for research excellence in allied health, including recent research into improving trauma-informed care in a paediatric burns setting.

### Associate Professor Helen Irving

#### CHQ Medal of Distinction

A/Prof Helen Irving is a pioneering researcher in children’s oncology and palliative care, with internationally renowned expertise in the management of solid tumours, such as neuroblastoma. A/Prof Irving established the first formal palliative care service for children, including a 24-hour support line, and has been a strong advocate for telehealth.



A/Prof Helen Irving

## Conference awards

### Karen Mistry and Dr Joanne George

2024 Gayle Arnold Award for Best Paper (American Academy of Cerebral Palsy and Developmental Medicine 78th Annual Meeting) for research into how neonatal structural MRI scores are associated with 6-year motor outcomes in infants born very preterm. <https://doi.org/10.1016/j.nicl.2024.103725>

Ishani Perera, Leanne Johnston, Lisa Bellamy, Ben Whitehead, Vanessa Cobham, Bronwyn Thompson, Georgina Clutterbuck (UQ)

Joint New Zealand Rheumatology Association (NZRA) and Australian Rheumatology Association (ARA) Annual Scientific Meeting, best oral presentation: ‘The feasibility of a physiotherapist and psychologist-led, peer-group sports intervention for children with Juvenile Idiopathic Arthritis (JIA)’.

### Maree Izatt

Spine Society of Australia’s 35th Annual Scientific Meeting, best paper award: ‘Perception Matters: Severity of cosmetic deformity in adolescent idiopathic scoliosis cannot be subjectively assessed (unpublished)’  
Co-authors: Suresh S, Perera P, Stubbs A, Izatt MT, Labrom RD, Askin GN, Little JP.

### Dr Karissa Ludwig

Australia and New Zealand Society for Paediatric Endocrinology and Diabetes 2024 Annual Scientific Meeting. Best free paper for research aimed at identifying intronic variants causing PHEX mis-splicing in patients with X-linked hypophosphatemic rickets (XLH). <https://doi.org/10.1210/clinem/dgae785>

### Professor James Scott

The Royal Australian and New Zealand College of Psychiatrists Julian Katz Oration, Faculty of Child and Adolescent Psychiatry 2024 Conference. For presenting on national surveys informing child and youth mental health policy and practice.

### Rebecca Greenslade

Australasian Rehabilitation Nurses Association Conference 2024. Best research paper for her work to inform clinical research investigating sleep for children with acquired brain injury. <https://www.doi.org/10.33235/jarna.26.3.51-63>

### Dr Geoffrey Askin, Maree Izatt

Biomechanics and Spine Research Group (Children’s Health Queensland and QUT). Embracing Research and Innovations Award, Queensland Health Awards for Excellence: ‘Innovative Solutions for Impossible Surgeries in Complex Paediatric Patients’.



# Spreading the word

The work of Children's Health Queensland researchers is contributing to better care, and health and wellbeing outcomes for children across Australia and internationally.

**3,987**  
total mentions across  
academic, online and social  
media platforms

Media  
**403**  
news items  
across **22** countries



**3,477**  
social media mentions

Team data

**136** staff with  
higher degrees

**78** staff who  
supervised

**107** higher  
degree students

**657**  
articles and  
book chapters published



Leading journals published in:

- *Nature*
- *The Lancet*
- *Nature Genetics*
- *Nature Medicine*
- *PLoS One*
- *Lancet Oncology*
- *Cochrane Database of Systematic Reviews*
- *JAMA Pediatrics*



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# Committees and governance

## Children's Health Queensland Research Committee

The Children's Health Queensland Research Committee oversees and advises the Children's Health Queensland (CHQ) Board on strategies to foster long-term research collaborations and improve clinical service delivery through sustainable partnerships. By developing expertise and guiding engagement, the Committee aims to establish CHQ as a leading health service of national and international prominence.

### Members

**Prof Simon Denny**, Chair, CHQ Board Member  
**Heather Watson**, Chair CHQ Board  
**Cheryl Herbert**, CHQ Board Member  
**Kara Cook**, CHQ Board Member (until Dec 2024)

### Attendees

**Adj Prof Frank Tracey**, Health Service Chief Executive, CHQ  
**A/Prof Steven McTaggart**, Executive Director Medical Services, CHQ  
**A/Prof Leanne Johnston**, Executive Director Allied Health, CHQ  
**A/Prof Andy Moore**, Director Clinical and Biomedical Research  
**Lyndsey Rice**, CEO, Children's Hospital Foundation  
**Prof Craig Munns**, Director, Children's Health Research Centre, Faculty of Medicine, University of Queensland (UQ)  
**Dayna Williamson**, Senior Manager Research Services and Partnerships

## Queensland Children's Research Collaborative Council

In partnership with academic institutions UQ and Queensland University of Technology (QUT), along with the Children's Hospital Foundation (CHF), Children's Health Queensland established the Queensland Children's Research Collaborative Council (Council). The Council advised the CHQ Board on the creation of a dedicated Queensland Children's Research Alliance to further progress paediatric research for Queensland children. The Council concluded in December 2024 with the CHQ Board approving a proposed phased approach to commencing the Queensland Children's Research Alliance which was developed by the Council.

### Members

**Prof James Angus AO**, Independent Chair  
**Heather Watson**, Chair CHQ Board  
**Adj Prof Frank Tracey**, Health Service Chief Executive, CHQ  
**Prof Patsy Yates**, Executive Dean, Faculty of Health, QUT  
**Prof Danielle Gallegos**, Faculty of Health, QUT  
**Prof Geoff McColl**, Executive Dean, Faculty of Medicine, UQ  
**Prof Craig Munns**, Children's Health Research Centre, Faculty of Medicine, UQ  
**Lyndsey Rice**, CEO, CHF  
**Dr Jane Black**, Board Chair, CHF

## Children's Health Queensland Research Council

The Children's Health Queensland Research Council serves as an advisory body, enabling senior research clinicians to contribute to and support the delivery of strategic research priorities aligned with the broader health service strategy. Chaired by Associate Professor Andy Moore, Children's Health Queensland's Director of Research, the Council comprises 102 senior clinician researchers from across all clinical services and departments, along with members of the executive leadership team.

## Human Research Ethics Committee

Children's Health Queensland's Human Research Ethics Committee (HREC) reviews the ethical and scientific validity of proposed research within the Children's Health Queensland Hospital and Health Service and in partner agencies across Australia. The HREC is certified with the National Health and Medical Research Council to conduct paediatric clinical trials (Phases I to IV), involving drugs and devices, interventional research, other health and medical research, mental health, justice health and paediatric population health research.

### Members

**Prof Alan Isles AM** (retired Chair May 2024)  
**Ms Rebecca Doyle** (Acting Chair from Oct 2023)  
**Ms Michelle Bond**  
**Dr Helen Buntain**  
**Ms Michelle Carr**  
**Ms Bobbie Gadsden**  
**Mr Graham Hyde OAM PHF**  
**A/Prof Paul Lee-Archer**  
**Prof Craig McBride**  
**Mr Hugh Miller**  
**Ms Natalie Oaten**  
**Mrs Paula Penfold AM** (retired April 2024, member since 1980)  
**Dr Helen Petsky**  
**Dr Sainath Raman**  
**Reverend Robert Rogers**  
**Ms Ann-Maree Russo**  
**Ms Sonya Stacey**  
**Dr Mari Takashima**  
**Mrs Amanda Smith** (HREC Coordinator)  
**Ms Ashleigh Fielding** (HREC Support Officer)



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