Room with a view: the Singapore skyline by night seen from the Holiday Inn where the 9th Biennial Joanna Briggs International Colloquium was held (page 5)
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Message from the Acting Executive Director

It has been yet another busy year with significant change. As many of you may now be aware, following a discussion with Professor Lyle Palmer, the Executive Dean of the Faculty of Health Sciences, Professor Alastair Burt, has asked me to take on the role of Acting Executive Director of JBI, which I am both pleased and honoured to do. The year ahead of us will be another filled with challenges, change and excitement and I will be proud to lead JBI through this time working with the incredible team here in Adelaide but also with our collaborators, partners, students and subscribers.

The strength of the Institute has always been in its ability to forge strong relationships with like-minded groups and individuals from across the globe. Our vision and mission of improving global health outcomes through the provision of the best available evidence resonates with the international health community. This vision and mission is just as potent today as it was nearly 20 years ago when we were founded and is something that we are all collectively striving to achieve.

In 2015 we will be bold. We will undertake a strategic review of our activities and to vision the future of JBI, together with all of you. It takes courage to move forward in new directions, but I know that we have a solid foundation upon which to build and we are resolute in our determination to succeed.

In this last issue of JBI Matters for 2014 we celebrate our achievements, including a wonderful JBI Colloquium hosted by our centres in Singapore. It was an outstanding and supremely well-organised event with vibrant discussion and debate as always. Enormous thanks to our hosts for the splendid job they did.

We have been delighted to welcome many visitors from all over the world to JBI in Adelaide this year, most recently from the Czech Republic and the United Kingdom. You can read more about their experiences in this issue, along with articles from current students and our commercial partners, Wolters Kluwer Health.

We hope that you enjoy the last issue of the year and on behalf of the staff of the Institute I would like to take this opportunity to wish you a joyous and peaceful festive season spent with family and friends and a prosperous new year. We look forward to working with you all again next year.

Assoc Prof Zoe Jordan
Acting Executive Director
Season's greetings to all centres, partners, students, alumni and subscribers – from all of us at the Joanna Briggs Institute. See you in 2015!

Our offices will be closed from 22 December 2014 and will reopen on 5 January 2015.
Exploring new frontiers for healthcare

by Bianca Pilla

Rousing bagpipes welcomed the guest of honour, Assoc Prof Benjamin Ong, Director of Medical Services, Ministry of Health, Singapore, and the official party of the 9th Biennial JBI Colloquium, Singapore, themed ‘Scaling New Heights: Challenging the Status Quo’.

‘Be prepared for a lively exchange of expertise and knowledge,’ said Colloquium Co-Chair Dr Emily Ang, Director of the Singapore National University Hospital Centre for Evidence-based Nursing, who welcomed the 360 delegates from 32 countries, thanking them for their strong support of evidenced-based healthcare.

In his opening address, Assoc Prof Benjamin Ong reflected on the growth of the Joanna Briggs Collaboration from seven small centres to over 80 collaborating centres worldwide that are challenging the status quo in evidenced-based healthcare. ‘Constructing the ideal evidence-driven landscape for innovation and best practices requires an integrated approach by multi-disciplinary groups,’ he said.

Five plenary sessions, two debates, 90 concurrent sessions, four methodology workshops, one symposium and 69 posters saw delegates explore new frontiers for health care in a diverse world, challenging current policies in relation to issues around the benefits of e-health, the usage of social media to support larger numbers of patients and maximising the best evidence at the point of care, to name a few.

Concurrent sessions covered the latest research on specific health conditions and practices, including helping children with cancer find a sense of self through expressive art, sharing experiences of teenagers with Type 1 diabetes, enhancing stroke recovery through self-management, the community public health
nurse response to families experiencing domestic abuse and numerous other topics. Dr Jintana Damkliang from the Deakin School of Nursing and Midwifery took away the Best Oral Presentation prize for her presentation on 'Using evidence-based care bundle to improve Thai emergency nurses' knowledge of care for patients with severe traumatic brain injury'.

The four methodology workshops convened by JBI scientific staff were an important stage in the development and refinement of new methodologies and enabled people with like interests and goals to share ideas and network with one another. The workshops were an interactive space that afforded participants the opportunity to consider, comment upon and provide feedback and insight into the proposed methodologies. Aspects of the proposed methodologies, such as critical appraisal or data extraction, were piloted and the finer details of the objectives and applications of the particular type of review discussed.

Laughter trumps logic?
Remaining true to tradition, the two debates were equal parts comedic relief and academic discussion with the members for the negative pulling out all stops to collect a resounding win in both debates, where laughter seemed to trump logic when it came to votes.

In the first debate held on Day 2, Prof Joao Apostolo convinced delegates that 'Evidence Based Practice is a marriage of convenience that is unconsummated' in a bid to win the motion ‘Rituals have a place – don’t throw the baby out with the bathwater’.

While in the second debate, held on Day 3, Dr Rick Wiechula relied on offbeat humour when asking the audience to ‘Consider a paperless gastroenterology ward... can you tend to your needs with a tablet?’ bringing home the win for the motion ‘Paper rules! Using social media can adversely affect care’.

Plenary sessions that redefine evidenced-based health care

Energising global healthcare: evidence for action

The keynote address by Prof Emerita Margaret Harrison, Director, Queen’s Joanna Briggs Collaboration for Patient Safety, Canada, was an erudite discussion on evidence-based health care, knowledge translation and the work of the Joanna Briggs Institute moving forward. Prof Harrison is a founding member and Senior Scientist with the Queen’s Practice and Research in Nursing Group (PRN), an innovative academic-practice partnership to advance practice through research at the point-of-care.

Prof Harrison posed the questions: ‘Is it possible to energise health care globally through evidence use? What form does “energising” evidence take globally?’ She looked to JBI, developing its model for evidence-based health care and its role in improving global health from their experience working with global partners in promoting and facilitating evidence-based health care across the world. In conclusion, Prof Harrison said, ‘JBI’s iconic symbol of a pebble falling into a pool creating ripples of knowledge has never been more meaningful. We are creating thousands of lights worldwide through our collaboration in
working from the ground up, getting evidence into practice and practice into evidence!"

You can read the full transcript of Prof Harrison’s keynote address in the forthcoming editorial of the JBI Database of Systematic Reviews and Implementation Reports, which will be open access and available to read in mid-December.

**E-health as an innovative method for expanding EBP and its impact on global health**

Assoc Prof Josip Car explored the challenges that countries face in crossing the chasm between possibilities that e-health provides and their translation in expanding evidenced-based practice. Assoc Prof Josip Car is an executive physician scientist and Director of Health Services and Outcomes Research Programme, Lee Kong Chian School of Medicine. ‘Evidence from research is lagging behind evidence from adoption,’ surmised Assoc Prof Car who discussed the ways that we can make research useful rather than documenting history, showcasing e-health applications that are critical for quality improvement and implementation of EBP through innovation. ‘It is important to have e-health champions and early adopters on the ground,’ he said.

Other plenary sessions delivered at the Colloquium were:

- ‘Reclaiming and redefining the fundamentals of care’ by Prof Alison Kitson, Dean of the School of Nursing at the University of Adelaide.
- ‘Evidenced based care version 2.0’ by Adj Assoc Prof Premarani Kannusamy, Chief executive Officer, Assisi Hospice, Singapore.
- ‘Patient engagement in chronic disease management’, by Dr Hanan Khalil, Director of the Centre of Chronic Disease Management.
Gala Dinner Singapore style

by Bianca Pilla

Delegates at the 9th Biennial JBI Colloquium were treated to the sights, sounds and tastes of Singapore during the spectacular Gala Dinner. Held in the Atrium Ballroom on the evening of Day 2, delegates sat down to a sumptuous eight-course Chinese banquet and a night full of local entertainment.

The highlight of the night was the opening act performed by a troupe of enthusiastic young ladies, who dazzled guests with a symphony of sounds and songs performed only with bells and symbols. Local rock star Suf Supiani also wowed guests with his reflective solo album that he wrote as an outpatient of the JBI Institute of Mental Health (Singapore) Centre for Evidence-Based Practices in Mental Health Care.
Lung cancer report cites JBI systematic review

Cancer Australia has recently published a high profile report on the risk factors for lung cancer based on a systematic review conducted by JBI which it commissioned.

In Australia, lung cancer is the fourth most common cancer in both men and women, and the fifth most commonly diagnosed cancer overall. Lung cancer causes more deaths than any other cancer, accounting for 18.9% of all cancer deaths.

A person's chance of developing lung cancer may be increased by risk factors which can include behaviours (such as tobacco smoking), chemical agents in the environment or the workplace (such as asbestos, arsenic or radon) or a family history of cancer. Some risk factors are modifiable, i.e. by changing behaviour or adopting safety measures. Other risk factors, such as age, are regarded as non-modifiable.

The overview summarises the evidence for a range of factors that are associated with a person’s risk of developing lung cancer, and is based on a systematic review which examined published research on primary lung cancer to identify any associations between particular risk factors and lung cancer, and to determine the magnitude of each risk.

Pleural mesothelioma, however, is not considered in this report as it not regarded as a malignant tumour of the lung in the current version of the international coding standards for cancer.

Staff and former staff from JBI involved in this systematic review included Emeritus Prof Alan Pearson, Assoc Prof Edoardo Aromataris, Sandeep Moola, Dr Sarahlouise White, Dr Judith Streak and Dagmara Rilitano.

Fear and anxiety when undergoing MRI scans

Fear and anxiety about undergoing an MRI (magnetic resonance imaging) scan is a very real issue among patients.

A systematic review conducted by Dr Zachary Munn, JBI Acting Director Implementation Science, sought to better understand the difficulties faced by patients when undergoing an MRI scan, and how to help ease their fears and lead to greater patient satisfaction.

Titled ‘Interventions to reduce anxiety, distress and the need for sedation in adult patients undergoing magnetic resonance imaging’, the project has received media attention, including a radio interview with Dr Munn by ABC Radio.

Train-the-Trainer program in Singapore

As part of his visit to Singapore for the 9th Biennial JBI Colloquium, Assoc Prof Craig Lockwood, JBI Director Implementation Science, conducted a very successful Train-the-Trainer program on 3–6 Nov. There were six participants (two from Australia CEBHA [Centre for Evidence-Based Healthy Ageing], one from Australia Sydney [New South Wales Centre for Evidence Based Health Care] from four from Canada Ontario [Queen’s Joanna Briggs Collaboration for Patient Safety]).

‘Over the four days, not only did everyone get along really well, but we had some very engaging discussions regarding aspects of synthesis science.

‘Professor Anne Chang set the tone for a great week in her highly engaging presentation on day one, and the discussions frequently continued over coffee as we were reluctant to stop! Having a research librarian in the group was a real plus for discussions on teaching the searching content of the CSR program,’ Assoc Prof Lockwood said.

Highly accessed paper

A JBI article, ‘Establishing confidence in the output of qualitative research synthesis: the ConQual approach’, which was recently published, is now a ‘highly accessed paper’, which reflects the great impact it has made.

Published article

A JBI article, ‘Translating evidence into policy and practice’ has been published in the Nursing Clinics of North America Journal, in a special edition edited by Emeritus Prof Alan Pearson. The authors are Assoc Prof Craig Lockwood, Assoc Prof Ed Aromataris and Dr Zachary Munn.

Foray into flowers

Should flowers and potted plants be allowed in clinical settings and especially around immunocompromised patients?

Dr Matthew Stephenson, JBI Implementation Science Research Fellow, responding to this clinical request, has developed three evidence summaries on the subject. They suggest that although vase water with cut flowers often contain high bacterial counts and soil of potted plants often contains fungal species, the risk to patients in general wards appears minimal provided infection control procedures are followed. For immunocompromised patients, caution needs to be exercised and avoid the presence of flowers and potted plants given the potential pathogens they may harbour.
Visitors from the Czech Republic

Two visitors from the Czech Republic (Middle European) Centre for Evidence-based Health Care visited the JBI headquarters in Adelaide on 27 Nov. They were Dr Miloslav Klugar, Director of the Centre for Evidence-Based Health Care, and Dr Jitka Klugarova.

Dr Klugar was at JBI for only a day while Dr Klugarova stayed on for a three-week internship during which she updated her knowledge on the NOTARI methodology, developed a new systematic review protocol and studied JBI approaches and tools of evidence implementation.

Nursing student from the UK

Trawling through volumes of articles and text may not be everybody’s idea of fun, but for Elanor Parks, it’s an activity she happily did at the JBI headquarters. The third year nursing student from Chester University travelled all the way from the United Kingdom to spend two weeks at JBI in November to undertake research purely as an ‘extra-curricular activity’.

While in Adelaide, Elanor undertook a full literature review as part of her systematic review on patient and staff perceptions and experiences of nursing uniform styles, scouring the databases of PubMed, Google Scholar and ProQuest.

Elanor said she found out about JBI through the Cochrane Library, and after exchanging several emails with Assoc Prof Craig Lockwood, she found herself on the plane heading Down South. She also took the opportunity to see a bit of South Australia and the country and is planning to spend Christmas in Sydney.

Training in Melbourne

Dr Catalin Tufanaru, JBI Implementation Science Research Fellow, together with Dr Hanan Khalil, Director of the Centre for Chronic Disease Management, conducted a CSR training program at the centre in Frankston, Victoria, on 17–21 November. There were 12 participants, all of whom were from the School of Nursing and Midwifery of Monash University. The training went very well.

Last JBISRIR issue for 2014

Don’t forget to check out the last 2014 issue of the JBI Database of Systematic Reviews and Implementation Reports. The editorial, protocols and implementation reports are open access. Happy reading!
Human resources update

Dr Jeremy Swift, previously Research Fellow/ICT in Communication Science, has left JBI. He has taken up a permanent role at another organisation. Dr Swift had been with JBI for several years and had made a significant contribution to IT development during that time.

Gilli Atkinson joined JBI on 17 November in the new position of Solutions Architect.

Gilli has worked as a Solution Architect for more than 13 years, having developed and delivered solutions across a wide range of industries such as education, manufacturing, utilities, government, finance and legal. He is competent in understanding business practices and processes and providing cost-effective and robust solutions. Gilli is experienced in NoSQL persistence mechanisms, scalable architectures and applying collective intelligence techniques and has worked for organisations such as Mitsubishi Motors, Department of Humans Services, University of Adelaide, SA & NT Datalink and Ergon Energy.

ANZBA newsletter

The Australian and New Zealand Burn Association (ANZBA) included in its newsletter a public acknowledgment to their sponsor Smith and Nephew for providing access for all ANZBA affiliated burn units to resources under the Burns node in JBI COnNECT+.

Currently the Burns node has:
- 68 recommended practices
- 156 evidence summaries
- 5 systematic reviews
- 37 consumer information sheets.

Clinical Fellowship program

Eleven participants from Fudan University (Shanghai), Huadong Hospital (Shanghai), Australian Capital Territory Health and the Royal Adelaide Hospital returned to the JBI headquarters in Adelaide to attend Week 2 of JBI’s Evidence-based Clinical Fellowship Program on 8–12 December.

Participants presented the results of their projects at the end of the program.

LinkedIn group

The Joanna Briggs Institute Stakeholders group is an easy, convenient online platform to share ideas, discuss or deliberate on anything related to the translation of the best available research evidence to inform decision making at the point-of-care, or simply to stay in touch.

Within this group, there are also two ‘subgroups’, JBI Students and JBI Alumni and we invite you to join any that applies to you. However, if you are not a member of a subgroup you will still be able to link with us via the main JBI Stakeholders group and receive regular communications from us. Simply join LinkedIn and create your profile if you do not have one already and search for ‘Joanna Briggs Institute Stakeholders’. You will find the two subgroups to the right of the screen.

Join today and post any topic you wish in the discussions section. We look forward to linking with you for better evidence and better outcomes.
A model for nursing in Singapore

With three Joanna Briggs Collaboration (JBC) Evidence Synthesis Awards to its name, won in 2011, 2012 and 2013, the Singapore National University Hospital (NUH) Centre for Evidence-based Nursing: a Collaborating Centre of the Joanna Briggs Institute is poised for continued success.

As it was, its formation in 2009 broke new ground. With the signing of the Memorandum of Understanding (MOU) on 21 July of that year, NUH became the first and only JBI nursing collaborating centre in Singapore. Established by clinical nurses working in a hospital, and in collaboration with nursing academia from the Alice Lee Centre for Nursing Studies, the collaboration marked a milestone in Singapore nursing.

The establishment of the Centre was a significant step in inculcating an evidence-based culture in the health care sector. It aims to benefit patients through enhanced nursing care, to enable the nursing workforce to become competent users of research, as well as to introduce undergraduate and postgraduate nursing students to evidence-based practice.

At the signing ceremony, Ms Pauline Tan, Chief Nursing Officer of Singapore’s Ministry of Health said, ‘The efforts spearheaded by NUH to strengthen evidence-based nursing practices nationally is really outstanding and I am sure would serve as a model for nursing in Singapore.

'I am honoured to be here to witness the signing of the MOU for our very first local JBI Collaborating Centre at NUH as it certainly acknowledges the untiring efforts of our nursing leaders who have dared to push boundaries. It is through their passion and determination that today is born.’

At the time of the centre’s formation, former JBI Executive Director, Emeritus Professor Alan Pearson, had this to say: ‘NUH nurses have been working with JBI for over two years on joint training projects and their application to become a Collaborating Centre was approved because of the capacity built in NUH over this period.

From left to right: Dr Heng Bee Hoon, Director, Health Services and Outcomes Research Unit, National Healthcare Group; Mr Joe Sim, Chief Executive Officer, NUH; Emeritus Prof Alan Pearson, the then-Executive Director, JBI; and Assoc Prof Quek Swee Chye, Vice Chairman Medical Board, NUH, at the MOU event.
The centre is made up a team of eight core staff who dedicate their time to run the centre on top of their primary jobs. Dr Ang herself, a nurse by training, juggles her role as Director with that of Head of Oncology Nursing at the NUH, providing clinical, research, education and service leadership to nurses in oncology.

The full complement of the team includes one Assistant Director (Nursing), three Nurse Educators for Evidence-based Practice, one Senior Nurse Educator, one Nurse Clinician (Evidence-based Practice) and one senior nurse Clinician (Advanced Practice Nurse).

‘We carry out the tasks as part of our extra-curricular activities,’ Dr Ang said of the voluminous work of the Centre, driven primarily by the need to address the issue of patient safety in acute care settings and fundamentals of care in Singapore.

‘We identify and retrieve evidence from JBI COnNECT+ and use this knowledge for evidence implementation in areas such as falls reduction and reduction in phlebitis,’ she said.

The recent 9th Biennial Joanna Briggs International Colloquium was co-organised by NUH together with the other two JBC centres in Singapore – the Institute of Mental Health (Singapore) Centre for Evidence-based Practices in Mental Health Care, and the National Healthcare Group Health Services and Outcomes Research Collaborating Centre for Evidence Based Health Services Management.

An impressive turn-out of 360 participants from 32 countries at the Colloquium cements the role of the NUH in spearheading evidence-based practice. The centre is clearly on its way to becoming recognised as a leader in evidence-based practice in Singapore and Asia – as Dr Ang articulates as her vision for NUH.

Mr Joe Sim, Chief Executive Officer, NUH, presenting a token of appreciation to Emeritus Prof Alan Pearson, the then-Executive Director, JBI
Not just another gruelling ride

From the adrenaline rush of competitive cycling to the awe of landing in the outback via helicopter to save someone’s life – Bernd Froessler’s life is anything but dull.

In his sideline job as retrieval doctor, Bernd learnt that providing trauma rescue services required exactitude, a level head and the ability to stay cool under pressure.

Now, as Senior Staff Specialist Anaesthetist at the Lyell McEwin Hospital and simultaneously hacking away at his PhD at the School of Translational Health Science, Bernd puts those same attributes to good use.

He was with Mediflight Statewide Retrieval Service for six years, during which time he visited locations so remote he cannot even recall their names and he handled emergency cases such as drug overdoses. Though only a part time job which he no longer does, the experience has played a big role in his developing the discipline he now applies to his clinical research.

His research topic, ‘Perioperative anaemia management in abdominal surgery’, which focuses on improving patient blood management is part of a chain of activities to prove a point.

‘As a staff specialist within anaesthesia and intensive care, I have observed many blood transfusions, with a portion, in my view, performed unnecessarily.

‘Poor pre-operative workup, panic, laissez faire attitudes or strong beliefs that blood is a “good thing” has led to many transfusions, which in hindsight probably caused more harm,’ Bernd says.

This led to his involvement, in 2005, in the concept of Patient Blood Management.

‘Beginning in my own institution, I conducted a research project analysing current transfusion practices. The results showed that current standards were not ideal and we disseminated the findings at a local level which resulted in a change of practice at my institution.’

Practically an ‘old hand’ in championing best practice now, Bernd completed his Master of Clinical Science in 2013 and his systematic review illustrated a lack of evidence in the form of randomised controlled trials. ‘Pilot data encouraged me to conduct our own study, which has become my PhD project.’
Born and raised in a country town near Cologne in Germany, Bernd attended Medical School in Cologne and took anaesthesia training in two teaching hospitals affiliated with the University of Cologne. His ‘first Australian experience’ occurred in 1987, when he spent five months at Concord Hospital in Sydney as part of his final year. Ten years later, he chanced upon an international job advertisement by the University of Adelaide for specialist anaesthetists. The rest is history.

Bernd says the lack of knowledge translation has always bothered him. ‘The translational approach is vital and I hope I can engage the medical community to a larger extent.’

Of his postgraduate education, Bernd says: ‘I feel comfortable in the JBI environment. I have always enjoyed the diversity of students at JBI and hearing about their projects.’

But the accelerated rigour required of a PhD has been interesting and challenging. ‘Balancing family, work, research and the PhD can be tricky at times. Hopefully I can finish within another year or so,’ he says.

When you consider that endurance sport such as running and triathlons has been part of Bernd’s life for decades, one can see why he has thrown himself into his PhD with the same intensity.

In addition to the almost daily commute on his bike to work, he enjoys the occasional competition, such as the Alpine Classics in Victoria, to name one. He also likes spending time with his family, travel and good food. And he loves baking his own bread. Is there much that is not within the grasp of this anaesthetist?

Ever-active Bernd riding in the Adelaide Hills (above) and holidaying with his family in Japan (left)
Evidence-Based Clinical Fellowship Program

Learn about clinical leadership and how to implement evidence in practice to improve patient outcomes.

The Evidence-Based Clinical Fellowship Program is a six-month work place, evidence-based, implementation program involving two five-day intensive training workshops in the Joanna Briggs Institute, and a workplace evidence implementation project in the intervening months. Dates for 2015 are now available:

**March intake**
Week 1: 16 –20 March
Week 2: 17–21 August
Enrol by 30 January

**May intake**
Week 1: 11–15 May
Week 2: 12–16 October
Enrol by 27 March

**June intake**
Week 1: 15–19 June
Week 2: 16–20 November
Enrol by 1 May

**July intake**
Week 1: 2–6 March
Week 2: 4–8 May
July intake
Week 1: 6–10 July
Week 2: 7–11 December
Enrol by 22 May

**Clinical Leadership Program**

The Clinical Leadership Program is open to all clinical leaders and leaders-to-be in all health care disciplines. Dates for 2015 are now available for this one-day program delivered by Proteus Leadership:

**March intake**
Tuesday 17 March
Enrol by 30 January

**May intake**
Tuesday 12 May
Enrol by 27 March

**June intake**
Tuesday 16 June
Enrol by 1 May

**July intake**
Tuesday 7 July
Enrol by 22 May

For information on these two programs and to enrol contact jbieducation@adelaide.edu.au.

Comprehensive Systematic Review Full Training Program (Modules 1, 2 and 3)

Five days
Learn how to conduct reviews using qualitative and quantitative data.

Program dates for 2015:
2–6 March
4–8 May
20–24 July
7–11 September

For information and to enrol contact jbieducation@adelaide.edu.au
CSR Module 1: Introduction to Evidence-Based Healthcare and the Systematic Review of Evidence

One day (Mandatory pre-requisite for Modules 2 and 3)

Program dates for 2015:
2 March
4 May
20 July
7 September

CSR Module 2: The Systematic Review of Quantitative Data from Experimental and Non-experimental Studies

Two days

Program dates for 2015:
5–6 March
7–8 May
23–24 July
10–11 September

CSR Module 3: The Systematic Review of Evidence Generated by Qualitative Research, Narrative and Text

Two days

Program dates for 2015:

5–6 March
7–8 May
23–24 July
10–11 September

Off-site Comprehensive Systematic Review Training Programs

Brisbane, Australia

2–6 February 2015

The Queensland Centre for Evidence Based Nursing and Midwifery will be conducting Modules 001-003 of the JBI Comprehensive Systematic Review Training during the week 2–6 February 2015.

Module 001 is mandatory for all students undertaking JBI systematic review training, and must be completed before any other module. Once registered for Module 001, you can then choose to undertake Modules 002 and/or Module 003 at the same time or at another time.

These Modules are titled as follows:

Module 001: Introduction to Evidence Based Health Care and the Systematic Review of Evidence (1 day)

Module 002: The Appraisal, Extraction and Pooling of Quantitative Data for Reviews of Effects (2 days)

Module 003: The Appraisal, Extraction and Pooling of Qualitative Data and Text (2 days)

If you are interested in enrolling in any or all of the modules, could you please indicate which ones; if you have previously undertaken Module 001 then you do not need to undertake this module again before undertaking either Module 002 or Module 003.
The costs are as follows:

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<th>Non-member</th>
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*JBI membership covers staff working within an organisation that is a member

The training will be held in a venue at Mater Health Services in South Brisbane. If you have any students/staff interested in undertaking this training, could you please request that they register their interest early as places are limited.

Further information and registration

The Centre for Evidence-Based Initiatives in Healthcare
6, 12, 13, 18 and 19 February 2015
10am–4pm
Room G04, University of Wollongong
Southern Sydney Campus, Loftus
An introduction to evidence based healthcare and the systematic review of evidence (6 February) – $150
The systematic review of evidence generated by quantitative research (12–13 February) – $300
The systematic review of evidence generated by qualitative research, narrative and text (18th–19th February) – $300
RSVP by 25 January 2015 to: gayle.netto@sesiahs.health.nsw.gov.au

The University of West London Centre for Evidence Based Health Care for JBI
Mon 23 February – Fri 27 February 2015
Comprehensive Systematic Review Training Course
(5-day intensive course):
Modules included:
An introduction to evidence based healthcare and the systematic review of evidence (1 day)
The systematic review of evidence generated by quantitative research (2 days)
The systematic review of evidence generated by qualitative research, narrative and text (2 days)

Venue:
Brentford Campus, Paragon House, Boston Manor Road, Brentford, Middlesex, TW8 9GA
Cost:
£850
For further information please contact: Meg Morse meg.morse@uwl.ac.uk
Tel: +44 (0)208 209 4145

The JoAnna Briggs Institute
A word from the Chief Nurse

2014 has ended on a good note for the relationship between Wolters Kluwer and the Joanna Briggs Institute. Wolters Kluwer remains deeply committed to the mission and vision of the Joanna Briggs Institute and its Collaboration. We know it is through the combined work of JBI and the Collaboration that evidence is derived and then developed into point of care, clinical decision support resources and tools to improve patient outcomes.

In November we were the platinum sponsor of the 9th Biennial Joanna Briggs International Colloquium in Singapore. We would like to thank the staff of Singapore’s three Joanna Briggs Institute Collaboration Centers for organizing and hosting an outstanding meeting:

- The National Healthcare Group Health Services and Outcomes Research (HSOR) Collaborating Centre for Evidence Based Health Services Management
- The National University Hospital (NUH) Centre for Evidence-Based Nursing

As I reflect upon the Colloquium’s theme, Scaling New Heights: Challenging the Status Quo, I believe it should resonate with every healthcare practitioner across the world. While many healthcare institutions say they are evidence-based, the only way to determine whether they are using evidence in practice is to have a view into outcomes and impact data. In 2014, we have begun working collaboratively with the Impact of Evidence and Quality of Evidence groups to ensure that JBI’s evidence is of the highest quality and is improving patient outcomes. In addition, over the past year we have produced seven additional electronic books, six in the Lippincott/JBI series and one on Burn Rehabilitation.

At Wolters Kluwer, we share your understanding that to improve patient outcomes, evidence information and tools must be embedded into the healthcare professional’s workflow in a language they can understand. We are working with JBI to make evidence summaries in the general medicine node available in simplified Chinese and Japanese in 2015.

In addition, Wolters Kluwer has ensured that all countries, regardless of their economic status, have access to JBI’s information through the World Health Organization HINARI initiative. Global health can only be improved if healthcare professionals have access to the best available evidence, if it is embedded into their workflow, and if they have access to tools that evaluate whether interventions have made an impact on outcomes. The Joanna Briggs Institute and its Collaboration are leading evidence translation and implementation worldwide and Wolters Kluwer is proud to be your partner, helping ensure that your message is heard around the globe.

On behalf of the entire team at Wolters Kluwer, we offer our best wishes to all of you for a happy and healthy 2015.

Dr Anne Dabrow Woods
Chief Nurse, Wolters Kluwer, Medical Research
51st meeting of the Committee of Directors

The annual face-to-face meeting is always a wonderful opportunity for the JBC to come together and work through strategy and direction for JBI, and to forge new partnerships amongst the JBC for further collaboration in evidence-based health care. The 51st meeting was held in Singapore on 13–14 November, following the successful three-day Colloquium. There was robust and fruitful discussion about the future and strategic direction of JBI, with a presentation from Wolters Kluwer on exciting plans and opportunities for JBI tools and products, and discussion about the redevelopment of SUMARI and JBI short courses.

Directors’ Challenge – literally scaling new heights

Hosted at the state-of-the-art National University Hospital Singapore, the Joanna Briggs Collaboration Committee of Directors were treated to local Singapore cuisine and faced a series of challenges around the theme ‘scaling new heights’ in the fight for the coveted Directors’ Challenge Cup.

Using marshmallows to represent evidence-based health care, Directors were required to build a tall structure with a strong foundation out of limited resources in order to lift evidence-based health care to new heights. Elbows were out in the fight for glory, and while Assoc Prof Zoe Jordan’s team won the first challenge with the tallest structure, it was Dr Rick Wiechula’s team that took home the Directors’ Cup, thanks to their elaborately decorated balloon device that represented a strong cohesive evidence-based practice team.
A big thank you to our Singapore hosts for such a wonderful and inspiring evening!

The National University Hospital (NUH) Centre for Evidence-Based Nursing

The National Healthcare Group Health Services and Outcomes Research (HSOR) Collaborating Centre for Evidence Based Health Services Management

The JBI Institute of Mental Health (Singapore) Centre for Evidence-Based Practices in Mental Health Care
PhD students and supervisors beginning a qualitative research project

On Friday, 31 October 2014, the School of Translational Health Science hosted a presentation by Dr Peter Willis, speaking on topic: ‘PhD students and supervisors beginning a qualitative research project’.

Dr Peter Willis is Adjunct Senior Lecturer in education at the University of South Australia specialising in philosophical and psychological approaches to human learning and education. He spent a decade of his young adulthood in community development with Aboriginal people in the East Kimberleys of Western Australia. His book, ‘Patrons and Riders’, explores Christian missions’ attempts to engender indebtedness among the Aboriginal people through gifts and rides in their trucks and the Aboriginal people’s ambiguous acceptance of these invitations. His later book, ‘Inviting Learning’, explores the lived experience of different forms of adult education and learning pursued over forty years.

Dr Willis has had a long time interest in forms of phenomenological inquiry around the human practices of social and personal life. His main research areas at present concern transformative learning among adults and the relationship between the human quest for meaning and well-being, humanism and civil society. He is currently the Acting Director of the Australian Centre for Convivial Backyard Civilisation.

Dr Willis writes: “It is difficult for people who have not done a qualitative, interpretative research degree to comprehend how prolonged the struggle can be for students to find a coherent answer to two questions. Firstly, ‘what do I want to do in this higher degree enterprise; what captures my imagination and moves my heart?’ Secondly, ‘how do I plan and manage this research enterprise?’ This early period of uncertainty can be called existential drift because students are uncertain where to put their life energy, unclear as to what appeals to them as an interesting and worthwhile project which, when they get a clear and detailed plan, is actually within their intellectual and personal capability. There are thus two phases: Courtship, when students keen to connect, dwell on possible projects and try to imagine themselves engaged in work related to these for some or several years, and Planning, when students create an actual down-to-earth detailed plan of what the project is going to entail.

Setting up a focussed interpretative research proposal can be understood as a kind of ‘courtship’. Would-be scholars who want to do research consciously or unconsciously are dwelling on how they feel in various roles and pursuits and seeking for some kind of affirmation that will bring them down to earth and on track with enthusiasm for the prolonged, almost obsessive, engagement in the specific work of their clarified research. This is sometimes called mythopoetic dwelling where holding back from a firm choice, the student allows the deeper ‘mythic’ part of the psyche to emerge in positive or negative feelings of appropriateness. It is sometimes referred to as a ‘gut’ feeling but according to Jonathon Haidt, it is the foundation of a huge amount of human decisions. Regardless of the reasons offered, the gut reaction is pivotal. The student needs to be caught up in strong interest and enthusiasm.

The supervisor is privy to some of this struggle but may or may not be aware of the existential depth and turmoil that some students can experience. The following is a set of questions which are designed to assist you clarify what you are doing, what you want to do and what is actually possible in terms of your capacity and the circumstances of your project.”
Planning the project: ten questions

Students embarking on qualitative research projects into human service practices such as healing, educating, nursing, counselling and related works of social care can craft their proposal by producing a sequence of five general characteristics which can be developed in the answers to questions linked to each stage.

Qualitative research projects need to be precipitated by an issue, positioned in a particular social and theoretical context, planned in methodology and method, propped up by appropriate resources and presented in the most appropriate textual form.

**PRECIPITATED:**
1. Issue driven: What issue generated the question and what is the question?
2. Set as an answer to a question: What is the specific question, why is it important, what are its implications?
3. Filling a gap: What research has been done already around this question?

**POSITIONED**
4. Personally situated: What characteristics and interests does the researcher bring to the project?

**PLANNED**
5. Socially situated: What are the physical and social circumstances surrounding the activities being researched?
6. Theoretically situated: What information relevant to the research question being pursued can be gained from existing theoretical approaches and research?

**PROPPED:**
7. Underpinned: On what conceptual framework or methodology is your inquiry based?
8. Implemented: What methods – practical processes and techniques are to be followed in data gathering, academic processing and professional completing?

**PRESENTED IN TEXTUAL FORM**
9. Resourced: What resources are required for the proposed project?
10. Represented: How will the results of the inquiry be presented textually?

Evaluating candidates for February 2015 intake

The School of Translational Health Science is currently reviewing candidate applications for its February 2015 Intake. Whether it is an international or domestic applicant, the application process is straightforward to enter the Masters in Clinical Science and full details regarding this process can be obtained directly through the school, or by contacting the Adelaide Graduate Centre.

Academic credentials and professional experience will determine a candidate’s eligibility to the Master’s program, with the alignment of an applicant’s interests with an area of research as a primary consideration of the school. It is recommended that candidates familiarise themselves with the research methodologies used by the School of Translational Health Science before submitting their application for program.
A word from completing HDR student Joanna Sutherland

Joanna Sutherland recently submitted her hardbound thesis to the Adelaide Graduate Centre, satisfying all the requirements of her Master’s degree. Joanna’s supervisory panel are extremely happy with the completed thesis, which will now join the JBI Database of Systematic Reviews and Implementation Reports along with the thesis work of all student alumni of the School of Translational Health Science. Joanna will be part of the Adelaide University Graduation Ceremony in April 2015.

Joanna writes: ‘The best inspiration for actually completing the writing was a thesis-writing email – (title: “Need to get some writing done? Here’s how”), designed for students who had “thesis block” – and suggested that a target for a certain number of words per day be set and adhered to, and logged with the University support crew. I didn’t subscribe to the project – but I did set myself a weekly target, and that helped me get started. The advice was that it’s better to write something – anything! – and then improve on it, rather than delaying and procrastinating. And I have found that sometimes I can let the “perfect” be the enemy of the “quite good enough”!

Having delivered my perfect baby thesis at full term, the examiner’s report came as quite a surprise. I was actually required to make some changes. After some initial disbelief (=denial), and then more than a little frustration (=anger), I decided the easiest way to cycle through the grief process was to make the recommended changes, and resubmit (=acceptance). Et voilà! A beautiful green book with gold lettering has now appeared.

It feels like an anti-climax to have finished the thesis and I am now contemplating graduation. I vaguely remember this sensation from my undergraduate days (a few years ago now) – in the immediate aftermath of an exam – all the preparation and obsession, the intense focus, and then… nothing much.’

School blog

Don’t forget to visit the School of Translational Health Science blog to read the latest news, events and important information. Note that the blog does not replace the current HDR Facebook page, which is a ‘closed group’ to active students and supervisors.
A Word from the President

Hello my fellow Fellows. I will begin with the reflection of the JBI international colloquium held in Singapore this month in November. The event was a credit to the JBI executive team and staff of the three Collaborating Centres in Singapore: Dr Emily Ang, Director, Singapore National University Hospital Centre for Evidence-Based Nursing; Ms Samantha Ong Bee Cheng, Director of Nursing, Institute of Mental Health; and Dr Heng Bee Hoon, Director, National Healthcare Group health Services and Outcomes research Collaborating centre for Evidenced based health Services management.

The clinical fellows Alumni held its Colloquium Breakfast on the second day to allow the opportunity for fellows that were attending the conference to meet and greet, discuss the AGM for the coming year, and table any ideas and concerns over current alumni business. We were privileged to receive a presentation from one of the clinical fellows in Singapore: Poh Chee Lien JBI Clinical Fellow, Director, JBI-IMH (Singapore) Centre for Evidence-Based Practices in Mental Health Care, who gave us the lived experience of being a clinical fellow in Singapore. The presentation resonated with many of us in the room, and the evidence for us was clear that there is much more work for our army of evidence based soldiers (fellows) to go on with. At this time, I had the privilege of meeting the new group of inductees to the fellowship, and together with Assoc Prof Zoe Jordan we welcomed them in to the clinical fellows alumni and presented them with their medallions.

Alumni business: during the discussions over the breakfast meeting, we identified that the business of being a clinical fellow of the JBI has its barriers to maintaining effective productivity to utilising and implementing ‘best practice’.

One of the issues that has been talked about is the charging of fees for membership to the Alumni. At the last AGM it was passed that alumni will be charged a flat fee of AUD$50.00 for developed countries and $25.00 for developing countries. I have had many discussions with Trish McReynolds (Vice-President) and others in regards to the support needs of fellows and from this I have made a proposal to the JBI Executive that the fees be utilised to support the fellows in gaining access to the OVID database and JBI tools and resources. This discussion will be on my agenda when I next meet with the JBI Executive, and from all accounts they are happy to support the negotiation and plan.

If you can cast your minds back to the last meeting it was decided to expand the JBI Clinical Fellows Executive Committee to assist and support the alumni members globally. The following alumni members were voted into the Executive committee as representatives of their various regions:

- Katherine Trowbridge – Australia
- Timothy Panga and Richard Mangwi – Africa
- Ying Gu – Asia
- Loendi Westhuizen – Middle East

Our new expanded executive is ready to engage you and soon these details will be on the JBI portal and LinkedIn site that has been established this year. I encourage all fellows to at least send a message to your region’s representative and introduce yourself and your needs. They are keen to see the Alumni grow and the role of clinical fellows become an established and credible asset to any healthcare service.

The new JBI LinkedIn Alumni page is up and running and I would encourage all of you members to please register yourselves and get access to the best communication tool available for us to use as global colleagues. This Alumni...
LinkedIn page will allow us to share ideas, experiences and see the projects and issues on the table for EBHC and implementation science. Please send me some feedback on this as I am keen to hear the Alumni response.
drew.dwyer@adelaide.edu.au

In closing I would like to say that there is much afoot for the future of the Alumni and the Clinical Fellows in particular. JBI is moving forward, and those of you who did attend the Colloquium, it was obvious that the time is right for ‘scaling new heights’, setting new directions and moving old boundaries. As the President of the Clinical Fellows Alumni, I have a passion for offering diversity and ideas to the think tank, and believe that the Alumni should have a motto… I recommend the Latin word “NOVO”. Look it up and tell me what you think. I also appreciate the support I have been receiving from some of you.

Since this is the last JBI Matters for the year I will end with a very Merry Christmas and a safe and prosperous New Year to you all, be good and be well, stay focused and strong in your pursuit for implementing and supporting evidence based health care.

Drew Dwyer
President, JBI Alumni Association

2014 Colloquium

We were very pleased to see a good representation of clinical fellows at the 2014 JBI Colloquium with many presenting posters. Singapore provided a wonderful learning platform and JBI is certainly set to ‘scale new heights’.