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Message from the Executive Director

Welcome to the September issue of JBI Matters. As one political campaign closes another begins! Here in Australia we have just elected a new Prime Minister, Tony Abbott, whom we hope will live up to the nation’s expectations and lead us to a prosperous and healthy future. However, as we gear up for the much anticipated 2013 JBI International Convention, another highly political campaign begins: the campaign for getting evidence into policy. It is actually not a new campaign but rather one that we would like to revitalise and re-energise. We hope you will be able to join us to hear all the propaganda and to cast a deciding vote in October. We have some fantastic speakers on the program again this year who promise to spark your interest and ignite your passion around international issues relating to this important campaign. This is, of course, the busiest time in the JBI calendar, with training and other meetings running on both sides of this major international event. We hope you are able to join us for some or all of these events! Places are limited so please register soon.

As you will see in this issue of JBI Matters we have been as busy as ever, with the new Centre for Research Excellence swinging into gear, other research projects under way and nearing completion, students achieving great things and JBI CONNeCT+ content development as strong as ever. We thrive on a busy and exciting work program and our staff get great satisfaction from the rewards of achieving outstanding outcomes for and with those we interact with.

Our research partners, students, clinical fellows, alumni, health professionals and the general public from around the world are the lifeblood of our organisation. It is the needs of these key stakeholders that drive our business and we are always looking for new and creative ways of engaging with you. So, if you would like to provide us with feedback or ideas about the direction you would like to see us taking in a particular area of practice or interest please do contact us (jbi@adelaide.edu.au). Additionally, if you would like to submit a letter to the editor of JBI Matters (contact details on page 20), we would be happy to publish it for other stakeholders to read... you just never know who might be thinking the same thing as you!

We look forward to hearing from you and hopefully to meeting you at the Convention here in beautiful Adelaide, South Australia. In the mean time, I trust you will enjoy catching up with what has been happening around the Institute and School over the last month.

Professor Alan Pearson AM
Executive Director
Centre of Research Excellence commences operations

Chief investigators of the Centre of Research Excellence (CRE) for Translational Research in the Management of Chronic Disease in Indigenous Populations met in an inaugural research meeting on 30 Aug to discuss the way forward for the newly established CRE.

With operations to officially commence on 1 Oct, the CRE is currently forming a Leadership Group comprising all four chief investigators, Aboriginal and Torres Strait Islander community representatives and health care workers, and policy advisers.

The Centre will conduct 12 systematic reviews on topics of chronic disease that have the greatest impact on the health of Aboriginal and Torres Strait Islander peoples.

Recommendations from these reviews will be implemented (and their impact measured) in multiple Aboriginal Community Controlled Health Organisations and health care services around Australia with the aim of improving the health of Aboriginal and Torres Strait Islander peoples.

The CRE is a collaboration between the University of Adelaide’s Joanna Briggs Institute/School of Translational Health Science (JBI/STHS) (Prof Alan Pearson AM) and School of Population Health (Prof Annette Braunack-Meyer), the South Australian Health and Medical Research Institute’s (SAHMRI) Wardliparingga Aboriginal Research Unit (Prof Alex Brown), and the National Aboriginal Community Controlled Health Organisation (NACCHO) (Prof Ngiare Brown). In addition to the four chief investigators, multiple associate investigators from across all collaborating partners will be involved with the CRE.

Funding for this mammoth project from the National Health and Medical Research Council (NHMRC) was secured in August this year.

Administering of the project will be done out of JBI/STHS’s headquarters in Adelaide.
Celebration time!

Joanna Briggs Institute/School of Translational Health Science staff and visitors popped champagne in the bedecked Yash Kumarasamy Auditorium on 30 August to celebrate the move to our new offices and the establishment of the new Centre of Research Excellence (CRE) for Translational Research in the Management of Chronic Disease in Indigenous Populations (see story on page 4).

The party capped months of extensive planning and anticipation for the move and the CRE. Sunlight streaming in through the picture glass windows brought home the reality of how we survived years of being in offices almost totally devoid of sunlight!

Don’t miss out too on two interesting debates on the role of evidence in policy-making and the role JBI plays in getting evidence into policy. Plus a series of methodology workshops and also regional meetings that will give you an insight into what is going on around the world. The program will also feature over 60 concurrent presentations from speakers from across the globe. View the 2013 convention program.

See you at the Convention!

Sax Institute project wrapped up

The final version of the rapid review for the Sax Institute has been submitted to the NSW Ministry of Health which has received it favourably.

‘Community grant programs targeting the reduction of risk factors for lifestyle-related chronic disease: a rapid review’ focuses on the effectiveness of community grant funded programs in reducing risk factors for modifiable lifestyle-related chronic illness.

These factors are overweight and obesity, nutrition, physical inactivity/sedentary behaviour, smoking and sexual health.

2013 International Convention

Get ready to attend the 2013 JBI International Convention, the big ticket event in our calendar where you can explore perspectives on the evidence-based healthcare movement, and on getting evidence into policy.

Don’t miss out on what will be an informative and enjoyable convention, which also includes a Welcome Reception and a wonderful night of sensational food, wine and entertainment at the Black and White Gala Dinner.
First Clinical Fellowship presentation at new premises

Eleven Clinical Fellows from SA Health presented at the maiden Clinical Fellowship presentation held at the new premises of the Joanna Briggs Institute/School of Translational Health Science (JBI/STHS) on 19 September.

Held at the Yash Kumarasamy Conference Room, the event represented the first of many more to be held at the modern and much improved facilities of JBI/STHS’s new offices, one of the many benefits for JBI/STHS stakeholders and clients.

The Clinical Fellows, who were the second group from the SA Health Clinical Fellowship program for 2013, shared the results of their projects on Criteria Led Discharge which they had been implementing over the last six months.

Lively discussions followed, paving the way for the group of leaders within SA Health to collectively drive this program back in their local settings.

ACORN nursing standards report

‘Evidence for 6 ACORN standards, a guideline and a nursing role’, a report that provides up-to-date evidence related to standards, guidelines and a nursing role for ACORN (Australian College of Operating Room Nurses) was finalised sent to ACORN on 6 September.

Feedback from ACORN on the first draft sent earlier was highly positive: ‘This is a good result and we are very pleased with the summaries overall…great work by JBI.’

The project team comprises Dr Zachary Munn, Dr Judith Streak Gomersall, Sandeep Moola and Dr Yifan Xue, Research Fellows from Translation Science.

Methods used in the project included a rigorous and transparent search strategy for evidence related to each updated and new standard, guideline and role. A critical appraisal of identified evidence to establish its internal validity, and extraction of core data related to the context and relevant findings were also conducted.
Unplanned hospital readmission

Unplanned hospital readmission rates are a leading topic of healthcare policy and practice reform, and are increasingly being used across the world as a metric of the performance or quality of hospital care or treatment.

The Joanna Briggs Institute/School of Translational Health Science completed a rapid review of international literature to identify the benefits and caveats associated with using unplanned hospital readmission rates as a key performance indicator of hospital care or treatment to reduce avoidable hospital readmissions and to improve the value and quality of acute patient care services.

The final draft of the rapid review, titled "Unplanned hospital readmission rates and their use in clinical practice and health service management", undertaken for the NSW Ministry of Health, was submitted to the Ministry on 24 September.

The key findings are:
- There is currently no universal definition of what constitutes an unplanned readmission
- A quarter of unplanned readmissions to hospital are linked to deficiencies in care
- Patient factors such as low socioeconomic status, low overall general health and age are most frequently associated with an unplanned hospital readmission
- Interventions or strategies to reduce hospital readmission rates for medical patients, patients with chronic diseases and patients considered at high risk of readmissions in general show little effectiveness.

Mental health node welcomes first ‘public’ member

The third Mental Health node teleconference of the year, held on 5 September, saw participation by Roslyn Udy, the first ever ‘public’ member of the Mental Health Expert Reference Group. This is a significant step in the realisation of Joanna Briggs Institute/School of Translational Health Science’s (JBI/STHS)’s Public Engagement initiatives.

Roslyn commended on the work of the ERG and the quality of the node’s resources. The meeting discussed ways to involve the public in developing consumer information sheets. The group also discussed psychosocial and support interventions for mental health treatment as opposed to drug interventions.

The Public Engagement Framework is in an initiative by JBI/STHS to identify priority areas for involvement with the public as a key stakeholder group in our activities. It incorporates communication and public involvement strategies in systematic reviews and knowledge utilisation activities.
Our students do us proud

Three School of Translational Health Science students won School prizes at the University of Adelaide’s 7th Annual Faculty of Health Sciences Postgraduate Research Conference held at the National Wine Centre in late August. They are pictured below:

- Melissa Saliba ($500) - front row, forth from left
- Stephanie Martin ($250) - back row, sixth from right
- Kathryn Davis ($250) - back row, fifth from right

Eleven of the School’s students presented their posters, defending their protocols and reporting their review findings. The afternoon also included workshops on developing a culture of leadership, science, research and the media, and what health professionals need to know about social media.

Updates on the Renal node

Dr Zachary Munn and Dr Matthew Stephenson, Research Fellows Translation Science, attended the Safety and Quality Renal Group meeting at the Central Northern Adelaide Renal and Transplantation Service (CNARTS) on 10 September, on the invitation of one of the co-chairs for the Renal Node, Tiffany Whittington.

Dr Stephenson presented an introduction to JBI and the Renal node. There was significant interest with members suggesting topics for development of evidence-based resources.

Recruitment for the Renal Node Expert Reference Group (ERG) is now complete with 13 members making up this group. Members comprise renal nurse practitioners, dialysis coordinators, renal transplantation coordinators, and professors/associate professors in renal medicine and nursing.

Translation of resources

The Translation Science Team, together with Professor Hu Yan, Director, the Fudan Evidence Based Nursing Center: a Collaborating Centre of the Joanna Briggs Institute, Fudan University, Shanghai, recently completed auditing Chinese translation content in JBICOnNECT+. Work started in the General Medicine Node, so you can expect to be read evidence summaries in Chinese by the end of this year!

Next on the agenda is a planned approach to update materials for OVID to market.

The team is also working with Japanese translators to increase the availability of Japanese evidence summaries and recommended practices.
Insights into measurement tools

Insights into implementation measurement tools and evaluation, and a packed schedule of delivering plenary talks and workshops were the highlights of a recent three-week visit to the US and South Africa by Dr Suzi Robertson-Malt, Director Implementation Science (picture below, right).

From 19–21 Aug, Dr Robertson-Malt attended the 2013 Global Implementation Conference, themed ‘Putting implementation into practice: tools for quality and sustainability’, held in Washington, DC, USA.

Key features were a workshop focussing on Active Implementation frameworks with discussion around effectiveness of various tools which the National Implementation Research Network of University of North Carolina uses for implementing evidence into practice. She was drawn to attend the conference stream of presentations and discussion groups on Measurement Tools and Evaluation focused on the fidelity of different tools being used across health care settings.

South Africa

In South Africa, she was an invited keynote speaker at the Nurses Education Association (NEA) Conference from 2–4 September. The theme of the conference was ‘Making the journey together: education, research and practice’. Here she gave a plenary talk on JBI’s model of Evidence Implementation and ran two workshops on JBI apps, Manual Builder and Journal Club, with 400 delegates from across SA Health showing keen interest in the apps.

For the rest of her trip, she conducted a workshop at the Life Health Care headquarters in Johannesburg to 22 of their clinical and education leaders, and met with their CEO regarding Life Health Care’s application to become a JBI Implementation Science Collaborating Centre. A second workshop was given in Port Elizabeth at the Nelson Mandela University, School Of Clinical Care Sciences, to 60 academic staff from across the health care disciplines. She also discussed the possibility of the School becoming a JBI Synthesis Science Collaborating Centre.

Introducing new staff

Zifang Su joined the Institute/School on 4 September as Instructional Designer/Flexible Learning Coordinator in Communication Science.

Zifang comes with a wealth of experience in e-learning. She previously worked in the Human Resources department of Locher as a Registered Training Organisation Specialist.

At Locher, she designed, developed and customised e-learning resources, ensuring that all accredited training programs were delivered to high quality standards.
Facebook ‘likes’ keep on growing!

Since revamping the JBI Facebook page a few months ago, JBI has reached (and now surpassed) 500 likes!

Thank you to all of you for getting involved with and supporting the page. If you haven’t already, check us out.

Comprehensive Systematic Review Training Programs 2013

The JBI Comprehensive Systematic Review Training Programs (CSRTPs) are designed to prepare researchers and clinicians to develop, conduct and report comprehensive systematic reviews of evidence using the Joanna Briggs Institute SUMARI software.

Full program (consisting of modules 0001, 0002 and 0003):

Five days
14 – 18 October / 2 – 6 December

Individual CSRTP modules:

CSR Module 0001:
Introduction to Evidence-Based Healthcare and the Systematic Review of Evidence
One day
14 October / 2 December

CSR Module 0002:
The Systematic Review of Evidence Generated through Quantitative Research
Two days
15 – 16 October / 3 – 4 December

CSR Module 0003:
The Systematic Review of Evidence Generated by Qualitative Research, Narrative and Text
Two days
17 – 18 October / 5 – 6 December

For more information or to register your interest, email: jbieducation@adelaide.edu.au.
Collaboration Matters

Dr Rick Wiechula is the new Director of CEPSA

Dr Rick Wiechula has taken over as Director of Centre for Evidence-based Practice South Australia (CEPSA). Dr Wiechula has a long history with JBI and is currently Senior Lecturer and Post Graduate Coordinator with the School of Nursing at the University of Adelaide.

Congratulations, Dr Wiechula, and all the best to you and to the Centre! We would also like to sincerely thank outgoing Director Prof Alison Kitson for her excellent work with the Centre, and wish her all the best for the future.

Upcoming 48th Committee of Directors Meeting

The 48th Meeting of the Committee of Directors is coming up next month. This face-to-face meeting will be held on The University of Adelaide campus on 24-25 October. The agenda has been sent out and is available on the JBC intranet.

If you haven’t already, please confirm your attendance or the attendance of a proxy at the meeting with Adriana by email (adriana.turner@adelaide.edu.au). If you would like to invite others to observe the meeting and have not already contacted Adriana regarding this, please do so as soon as possible.

Finalising travel to Adelaide

If you are yet to finalise your flights to Adelaide for the JBI International Convention and Committee of Directors Meeting, and are booking your travel through JBI, please contact Adriana Turner by email (adriana.turner@adelaide.edu.au) as soon as possible. Also, please make sure to fill out the requested Traveller Profile form if you have not already done so. See you all in Adelaide soon!

Access to full systematic reviews in the JBI Library

A reminder to all users of the JBI Library: a link to the JBI Library has been provided on the JBI COnNECT+ site to enable users to access full articles of all content in the JBI Database of Systematic Reviews and Implementation Reports.

By logging onto JBI COnNECT+ and clicking on the JBI Library link in the upper right hand edge of the page, users can access complete systematic reviews and implementation reports and of course protocols, which are open access.

JBI website reminder

Please remember to update your bookmarks to the JBI website.
The JBI online Journal Club

Critically evaluate and discuss recent research literature on your particular field of practice or study. Use the JBI Journal club which is an online resource with an organised format where group of professionals or students can invite members, encourage participation and arrange for members to lead journal club sessions.

Journal Clubs are founded basically to encourage awareness of current research literature and provide an opportunity for ideas and arguments to be shared amongst others with common interests. Journal Clubs are not a new idea. They have been used by health professionals as early as the mid-1800s where practitioners would meet face-to-face and read journals. These clubs have been largely used within the field of medicine; however there is an increasing interest amongst other disciplines as it becomes more important for clinicians to gain skills in appraising aspects of their professional practice.

There are a number of large well known Journal Clubs within the health care field that operate in slightly different ways. As searching for quality articles is time consuming and can be a stumbling block for many health professionals there are different approaches that clubs take to make it easier for the body of members. Some Journal Clubs will have a body of members that read specific articles, appraise them and then send out this information to members. Others may focus on a particular journal or collection of journals and then provide information and support to practitioners who then meet together for discussions.

The JBI online Journal Club approach assists the practitioner in automating a process for starting and maintaining their own Journal Club. It requires a leader who will identify goals, organise a suitable format and invite members to participate. Members can be encouraged to lead sessions in a non-threatening engaging manner where research literature can be discussed in a constructive fashion. The online discussion board allows members to discuss articles and share their thoughts on the implications to policy and practice. The software will directly link into PubMed and can upload or link into a paper for other members to read. It also has an inbuilt critical appraisal tool and a data extraction tool, it also can generate a report that outlines the steps of critical appraisal for all types of literature.

The JBI online Journal Club is an effective tool for teaching, skills training, continuing education and for improving practice. Think about setting up your own club where you can encourage people to think and interact through experience, knowledge and common interests. We have committed to using our Journal Club within our own organisation here at JBI and the outcomes have been excellent.

Staff comments

“It has raised an awareness of the breadth of an organisation’s concerns by looking at the broader range of research than you normally would. It gets people who have knowledge in certain areas to speak and share it with others.”
“It encourages debate and discussion to compare and contrast and explore new methodologies. The discussions bring about lessons that can be useful and applied to our everyday work.”

“You can learn from every topic and it can directly improve your work and the whole organisation. It opens up your eyes and mind to new knowledge and to things that never get discussed in our daily routines and they are important issues that affect the way we do things.”

To find out more on how to access the JBI online Journal Club please contact Ovid Technologies at: support@ovid.com
A word from your Postgraduate Coordinator

It is your postgraduate Program Administrator here, filling in for our HDR Postgraduate Coordinator, Assoc Prof Craig Lockwood, who is currently overseas on JBI-related business. To those of you who enjoy reading his monthly contribution, I pass my deepest sympathy as you’ll need to satisfy yourself with my far less interesting, and considerably less ‘academic’, contribution!

It seems there’s a lot of practical advice floating around for the HDR student, such as don’t stress, don’t delay work, stay healthy, know your research librarian, meet regularly with your supervisor, read everything, don’t read everything… and so on! Quite likely, there’s value in each of these, depending on what sort of student you are. Nonetheless, I’ve narrowed it down to a few pieces of advice.

A successful HDR student must learn to not take everything so seriously. Keep things in perspective and learn to have a sense of humour about yourself, and your work. This is critical to avoid the inevitable emotional crisis or mental breakdown, which I’ve already been witness to. It is not worth the compromising of your health, and as health professionals you should know that better than anyone. You need to laugh at frustrating situations, and at your own mistakes. Humour is crucial to higher degree survival because inevitably you will encounter difficulty after difficulty, and you may fail several times before achieving your final objective.

The way I see it, you enter the HDR program as a novice but with a view to developing expertise. If you know everything already, you must not be doing it right, yes? You’re attempting to develop an original thought; how can this be achieved if you already know what you’re doing?? Resign yourself to the fact early that making mistakes is a frequent and common part of the HDR game, but every step in the right direction brings you closer to achieving your outcome. It’s a journey, so learn to enjoy the process. You can’t wait for the end to be satisfied with your efforts; that might be months or years away. Not everything you do will be an amazing success immediately. Take a punt on something interesting, a radical methodology, and celebrate even if it doesn’t work out. Being accustomed to failure and success myself, I’ve learnt these principles well. Where I’ve never struggled is the ability to pick myself up again and try something new, with a fresh and positive attitude. We’re here in this life to be challenged, not to float comfortably through. I think Sinatra nailed the sentiment best: ‘I’ve been up and down, and over and out, but I know one thing, I’ll be back on top, back on top in June’… or October for those of you anticipating Annual Review. Don’t ever be so confident or self-righteous that you can’t cope with failure. That’s life, my friends. A lack of ability to cope with failure will only impede the likelihood of success further. Take it on the chin and get back to work. You’ll get there, but all good things take time and hard work, and none of this is easy. If it was, we would all have PhDs and masters degrees, which would make for a boring world!

Always remember, your supervisors are there to help you along your journey, so any critical feedback they provide is not a personal stab, but rather view it as constructive criticism to help you achieve your goals.

Students, I appreciate the expectations being placed on you are extraordinarily high. But no matter how much you’ve read over your work, you will make mistakes. Still, JBI doesn’t subject any of its students to public humiliation, and more often than not, you’re the only one that remembers the error. Let it go! You might feel dismayed when your supervisor tears your work to shreds, work you’ve put your heart and soul into. One of the main goals of the JBI Higher Degree program is to force you to think about things in a
new way, so it should be expected that supervisors may tell you to reconsider your position, or to ask different questions of your evidence. Also, your supervisors are just people too, and each will deliver feedback in a different way, some slightly more sensitively than others. If you’ve received some harsh feedback, have a cup of tea (or perhaps a wine!). Then start over, reflect on their comments. In all seriousness, you require humour and good graces to become a resilient thinker and effective researcher. By finding the humour and joy in failure, making mistakes will allow you to lower your expectations and develop resilience. Perspective is key. If I can offer you any assistance beyond the administration of this program, it is this: don’t allow your ego to take a battering, and know that you’re here because you’re already exceptional.

Be good to your Program Administrator.

Alex Mignone  
HDR Program Administrator

Call me a nerd

Call me a nerd, but I remember reading the old written children’s encyclopaedia books when I was seven or eight. In particular, there was this one about solving problems and fun riddles. I used to get frustrated when I couldn’t figure things out but I persisted, enjoying the challenge of working through these brain-teasers! It’s pretty much the same story, as a 34-year-old, with how I’ve experienced the systematic review process so far – an enjoyable (and sometimes frustrating) process of problem solving.

In my case, as is probably common across HDR students, issues (or learning opportunities, to frame it positively) come along consistently in ebbs and flows. For me, the learning opportunities fall into one or two categories – they are either about the systematic review process or personal growth/life.

I’m investigating a topic that is embedded in my everyday life as a researcher and also a mother of two young children – how responsive parenting influences children’s language development. So my biggest personal challenge has probably been to practise what I preach, closely followed by keeping in check my feelings of guilt! Guilt if I am not with my children because I am studying, and guilt if I am not studying because I am with my children! The predominant practical issue I have faced is managing a large and diverse data set. This was an unexpected issue, not identified by preliminary searches at the protocol phase.

I strongly believe that whatever the issue we face, whether practical or personal, there is always an opportunity to learn something new or consolidate a prior learning. I also believe that the way we think about it will lead to either enjoying the process or getting seriously frustrated! I came into the Masters degree with a strong motivation to learn, and a determination to see the topic of my research translated into practice. These factors, along with being highly organised, doing a bit each day, and having a very supportive family network, enable me to experience HDR problem-solving as a generally positive thing.

Melissa Saliba  
Master of Clinical Science candidate  
Speech pathologist
Well worth the ‘responsible risk’

My decision to apply for the Masters program towards the end of 2011 was not undertaken lightly. Once my enrolment was accepted, I spent the next few months on somewhat of an emotional rollercoaster.

As an already busy working mum with two primary school children, I experienced some anxiety and self-doubt, not just about my ability to cope with the intellectual demands but also how my family would cope and how I ever fit it all in. One day I was talking through my concerns with my husband when my eight year old daughter asked me what was wrong. When I told her I was taking on something new and was feeling a bit scared, she said, “At school, my teacher says when you are trying something new that you are worried about, just take a deep breath and give it a go.” At school they call it taking a responsible risk. So with the wise words of an eight year old resonating in my head, I decided to stop the worry and go with it.

On my first day of research school, I was quickly reassured by the many friendly faces and people juggling similar demands. Craig’s introduction immediately put me at ease, acknowledging that we were all busy people with many different responsibilities outside of our study life and that completing the masters within the given time frame was manageable.

I struggled with bedding down my question for many months. I knew the general area of interest but kept finding recent systematic reviews or a lack of primary research. I spent night after night scouring databases for leads and hassled colleagues and research-minded connections. Eventually I gave myself a deadline and the question crystallised. Having a clearly defined question allowed the rest of the process to unfold and helped me realise that I could achieve this.

I’m now at a stage where the thesis is submitted and waiting for feedback. I think peer support has been a catalyst in making progress, keeping positive and on track. Our 2012 cohort Facebook page has allowed us to stay in touch, find or maintain motivation and share good and challenging times. It’s an amazing world where you can post a question and within a few minutes receive a response. It can be guaranteed that if you are hitting a hurdle then someone else is in a similar situation or has an idea of where to find the solution. The JBI HDR Facebook page which came online last year has proved to be a similar support so finding ways to keep in contact with your fellow students, I believe, is a priority.

For me, having a goal-oriented approach with clear time frames (set with supervisors’ commitments in mind as well) has been vital. I think as a working parent that’s how I have survived under non-study conditions and how I have now managed to keep my head above water. It’s not only thinking about the current step but what comes next, and planning and pre-empting how to organise yourself and your time. My protocol was only finished by hiding in the car with the computer for several hours on a large extended family Easter holiday.

When I consider all that I have achieved, I feel proud and privileged to have been given this opportunity to extend myself and to take new skills back into the workplace and beyond. Looking back now my ‘responsible risk’ was well worth it.

Stephanie Martin
Master of Clinical Science candidate
Three wishes

A graduate student, a doctorate student and a professor are walking through a city. At a park they find an antique oil lamp. They rub it and a genie comes out in a puff of smoke.

The genie says, 'I usually only grant three wishes, so I'll give each of you just one.'

'Me first! Me first!' says the graduate student. 'I want to be in the Bahamas, driving a speedboat with a beautiful woman at my side.' Poof! He's gone.

'Me next! Me next!' says doctorate student. 'I want to be in Hawaii, relaxing on the beach with a professional hula dancer on one side and a Mai Tai on the other.' Poof! He's gone.

'You're next,' the Genie says to the professor.

The professor says, 'I want those guys back in the office after lunch.'

HDR Annual Review

The February 2013 HDR intake will be sitting their Annual Review during October. Assoc Prof Craig Lockwood and Alex Mignone are busy making arrangements to conduct those sessions with student’s supervisors.

HDR July 2013 intake

All students within the current July intake are progressing extremely well completing their core component requirements, and it is anticipated that all will be ready for their academic panel in October, as scheduled:

3 October
Stephen Walters

8 October
Anna Cowan
Judith Hocking

10 October
Stephanie Newell
Peter Hallett
Heath White
Jennifer Costi

HDR Feb 2014 intake

There have been many enquiries regarding the Masters in Clinical Science. Assoc Prof Craig Lockwood and Alex Mignone have been extremely busy following up on enquiries and meeting with prospective candidates directly. Several applications for the next intake have already been submitted.

School blog

Don’t forget to visit the School of Translational Health Science blog to read the latest news, events and important information to students, supervisors, Faculty members and the general community.

Note that the blog does not replace the current HDR Facebook page, which is a ‘closed group’ to active students and supervisors.
**Evidence implementation**

The development of Joanna Briggs Institute Evidence Implementation Centres (EICs) provides the Institute with an opportunity to engage with the Collaboration in more depth around knowledge/evidence translation, to create opportunities to further develop the Institute’s method and methodology for evidence translation, and to provide a stronger footprint internationally and build the Institute’s reputation in this field.

EICs also provide an avenue/pathway to engage with end users and key stakeholders (as we have done with JBI System for the Unified Management, Assessment and Review of Information [SUMARI]) and encourage them to learn about and work with the JBI Practical Application of Clinical Practice Evidence System (PACES) via the OvidSP platform.

The formalisation of evidence implementation can occur in a variety of ways dependant on an organisation’s available resources and skills:

1. Evidence Implementation Group (EIG): these entities are made up of clinicians, quality managers or other personal wanting to formalise their organisation’s process of ensuring that their systems and processes of care are grounded in the best available evidence.

2. Evidence Implementation Network (EIN): a consortium of EIGs who share a common clinical interest (i.e. cardiovascular care or oncology) and therefore can collaborate on their evidence implementation projects/initiatives – benchmarking across individual EIGs.

3. Evidence Implementation Centre (EIC): one of the four core opportunities available for an organisation to become an official JBI Collaboration centre with the other three being:
   - Synthesis Science Centre
   - Evidence Transfer Centre
   - Evidence Translation Centre.

**JBI clinical fellows in the news**

Presentations by two Joanna Briggs Institute/School of Translational Health Science (JBI/STHS) clinical fellows, Natasha White and Kay Johnston from Flinders Medical Centre, on 9 August were featured in the August edition of *The Nursing and Midwifery Office Communique*, the newsletter of the Nursing and Midwifery Office of SA Health. They presented on their final ‘Criteria led discharge’ projects.

The remaining SA Health Clinical Fellows presented their projects on 19 September at the new premises of the JBI/STHS in Adelaide (see story on page 6).

SA Health Chief Nurse Lydia Dennett Lydia Dennett was in attendance at these presentations, provided an opportunity for further ongoing stakeholder engagement and collaboration between JBI/STHS and SA Health.
Reminder: Alumni Breakfast

Here is a reminder that you are invited to:

The Joanna Briggs Institute Alumni Breakfast
7.00–8.30am, Tuesday 22 October 2013
(Day 2 of the JBI International Convention)
Banksia Room, InterContinental Adelaide
North Terrace, Adelaide.

Assoc Prof Susan Neuhaus, Executive Committee Member, Military Surgery Section, Royal Australasian College of Surgeons, will speak at the breakfast.

Alumni Facebook Group

If you haven’t already, please join our Facebook Group exclusive to Alumni members: it’s a great way to keep in touch, network, receive support and advice from JBI Staff on any projects you might be involved in, and much, much more!