INTRODUCTION TO JBI

October 2019
At its core, JBI is concerned with improving health outcomes in communities globally by promoting and supporting the use of the best available evidence to inform decisions made at the point of care. This work begins and ends with the needs of those working in and using healthcare services. We seek to respond to their questions and provide high quality, reliable information that is pragmatic and useful where it counts.

To achieve this, we work with Collaborating Entities from across the globe. In doing so we ensure that the research evidence we seek to synthesise, transfer and implement is culturally inclusive and relevant across the diversity of healthcare internationally. This also includes consideration of a broad range of evidence as it relates to the feasibility, appropriateness, meaningfulness and effectiveness of healthcare interventions.

In addition to this important collaborative work we offer a range of tools, resources and educational opportunities to further support those who seek to access, appraise or use research evidence. This handbook has been designed to provide you with an overview of our core activities and opportunities for you to engage with us. Connecting with you helps us to achieve our vision and mission. Connecting with you helps us provide better evidence for better outcomes and, like our logo suggests, create a ripple effect of change for a brighter future, globally.

About JBI
Founded by Professor Alan Pearson, JBI was established as a Research Institute in 1996, based at the Royal Adelaide Hospital in South Australia. JBI was established with a grant from the Royal Adelaide Hospital Research Foundation, and in acknowledgment of this the Joanna Briggs Institute (JBI) was named after Mrs Joanna Briggs, the first Matron of Royal Adelaide Hospital in 1855. As of 2010, JBI became part of the Faculty of Health and Medical Sciences at the University of Adelaide.

Since its inception JBI has strived to provide the best available evidence to inform clinical decision-making at the point of care. The JBI logo is a pebble dropping into water, and is a metaphor for the process of knowledge sharing and practice change and how a single act or piece of information can be a powerful catalyst for continuous change.
### THE JBI APPROACH

JBI's approach to evidence-based healthcare is unique. JBI considers evidence-based healthcare as decision-making that considers the feasibility, appropriateness, meaningfulness and effectiveness of healthcare practices.

The best available evidence, the context in which care is delivered, the individual patient and the professional judgement and expertise of the health professional inform this process.

JBI regards evidence-based healthcare as a cyclical process. Global healthcare needs, as identified by clinicians or patients/ consumers, are addressed through the generation of research evidence that is effective, but also feasible, appropriate and meaningful to specific populations, cultures and settings.

This evidence is collated and the results are appraised, synthesised and transferred to service delivery settings and health professionals who utilise it and evaluate its impact on health outcomes, health systems and professional practice.

Therefore, in order to provide those who work in and use health systems globally with world class information and resources, the JBI:

- considers international evidence related to the feasibility, appropriateness, meaningfulness and effectiveness of healthcare interventions (evidence generation)
- includes these different forms of evidence in a formal assessment called a systematic review (evidence synthesis)
- globally disseminates information in appropriate, relevant formats to inform health systems, health professionals and consumers (evidence transfer)
- has designed programs to enable the effective implementation of evidence and evaluation of its impact on healthcare practice (evidence implementation).

It is this unique approach that is encompassed in the JBI Model of Evidence-based Healthcare.

The JBI Model of Evidence-based Healthcare was developed in 2005 as a developmental framework of evidence-based practice, providing an overview of the complete cycle of evidence-based healthcare, from the generation of knowledge through to its implementation in practice.

The Model was revised in 2016, clarifying the conceptual integration of evidence generation, synthesis, transfer and implementation, linking how these occur with the necessary challenging dynamics that contribute to whether translation of evidence into policy and practice is successful.

The inner circle represents the pebble of knowledge while the “outer wedges” provide the Institute’s conceptualisation of the steps involved in the process of achieving an evidence-based approach to clinical decision-making.

The “outer wedges” operationalise the component parts of the model and articulate how they might be actioned in a pragmatic way. The arrows indicate that the flow can be bi-directional.

The complex and inimitable healthcare environment means that there is no single, linear approach that will work every time to move evidence into policy and practice. Indeed, evidence will not always be feasible, appropriate, meaningful or effective in a given context. As such, we propose that the overarching principles of this process are culture, capacity, communication and collaboration. In this way, issues relating to stakeholder engagement, the localisation of knowledge, responsiveness to local knowledge requirements and sustainability are acknowledged.

The JBI Model of Evidence-based Healthcare

**Overarching principles**

- Culture
- Capacity
- Communication
- Collaboration

**References**


**JBI Methodology Groups**

Scientific development is an important priority for the Institute. For more than 20 years, JBI has been a world leader in providing methodological guidance for the conduct of systematic reviews and evidence implementation.

JBI achieves this via its Methodology Groups, comprising experts from across JBI and the Joanna Briggs Collaboration to examine its methodologies for the conduct of systematic reviews of different evidence types.
GLOBAL REACH

The widespread impact of the work of JBI, both in Australia and worldwide, is attributable to our local and global partnerships that ensure that activities are context specific and driven by individuals and groups that understand their specific healthcare environments.

THE JBIC

The JBI Collaboration (JBIC) is a key body that contributes to the global success of JBI in promoting and supporting the use of the best available evidence to inform decisions made at the point of care.

The JBIC has existed since the Institute’s inception in 1996 and has grown from a small group of seven Centres to more than 70 Collaborating Entities across all continents in the world.

The JBIC consists of JBI Centres of Excellence and Affiliated Groups that are driven by a united desire to contribute to improvements in the quality and outcomes of healthcare globally through the delivery of high quality programs of evidence synthesis, transfer and implementation.

The functions of the JBIC are directed toward the knowledge needs of local clinicians and consumers, with each Collaborating Entity leading evidence-based initiatives in their region, country, state or specialty.

The success of international collaborative partnerships that build on the expertise of world-class, evidence-informed scientists and academics relies heavily on building relationships that are cognizant of the values and expectations of those involved.

To foster a rich and compelling environment in which international collaboration can thrive, the JBIC recognises that approaches to delivering evidence-informed practice must be embedded within the culture and core functions of its scientific partners.

JBI prides itself on forming partnerships with mutual respect, a shared vision and true collaborative effort to ensure that all parties, irrespective of whether they belong to resource rich or resource poor settings, learn from each other so that meaningful and sustained outcomes can be achieved.

The JBIC Collaboration is the engine that drives JBI’s worldwide effort to promote and support the use of the best available evidence to inform decisions made at the point of care.

The JBIC is the largest global collaboration to integrate evidence-based healthcare within a theory-informed model that brings together academic entities with hospitals and health systems.
PHILANTHROPY AND GLOBAL IMPACT

Core to our mission and vision, JBI has a keen focus on the health of those living in disadvantaged communities

Globally, the escalating burden of disease falls disproportionately on low- and middle-income countries (LMICs) and disadvantaged communities. LMICs account for 85% of the world’s population, 92% of the global disease burden, but only 10% of global funding for health research is devoted to addressing these persistent health challenges. To address this, JBI endeavours to generate sustainable, locally driven solutions to healthcare challenges through building capacities for using evidence in policy and clinical decisions.

JBI understands that the challenges in building an evidence base and capacity to implement evidence in low resource settings are diverse and vary between countries, regions, and cultures; and that differences in economics, clinical expertise, health policy, health systems and resources often require strategies and solutions that are unique and specific to their local context.

With this in mind, JBI has a strong focus on engaging and collaborating with health professionals, academics, health facilities and universities in LMICs to determine what knowledge people need, what resources are available, and what limits constrain their choices, in order to implement long-lasting and sustainable practice change.

JBI has multitudes of philanthropic programs and networks that aim to empower healthcare professionals to implement and sustain evidence-based care in their daily practice to improve service delivery and health outcomes for marginalised communities.

Since 2012 JBI has supported 73 healthcare professionals from LMICs and Australia. Indigenous communities to travel to Adelaide and receive intensive clinical leadership training through JBI’s Evidence-based Clinical Fellowship Program. This program builds the capacity of frontline healthcare professionals to respond to communities and address their most critical areas of need and has resulted in significant improvements in patient care and patient outcomes in many low-resource communities, including HIV/AIDS, maternal and newborn care and malaria and tuberculosis.

With the generous support of national and international donors, JBI works closely with these groups to create an appropriate knowledge base to support health decisions, and to make this knowledge readily available at the point of care in their communities, mentoring them over 6 months to complete an evidence-implementation project in their hospital or health facility.

The JBI training program is cognisant of localised health priorities, which differ across settings, and aims to equip health professionals with the knowledge and skills to lead change initiatives to implement evidence-based practice.

Following their Clinical fellowship, many fellows choose to further their collaboration with JBI, looking for support to scale-up activities, train colleagues etc. One avenue for this is through partnership as a formalised group in the JBI Collaboration. Three of our current JBI Centres of Excellence in Kenya and Cameroon were established by former JBI clinical fellows. These Centres of Excellence each have more than five core staff that are working with local hospitals and health clinics to implement change and deliver care based on best available evidence. They have been further supported by JBI to be trained as accredited JBI Trainers and are now delivering JBI evidence-based short courses to clinicians and academics in their communities and regions.

Every fellow has documented positive changes in the processes and outcomes of care delivered to patients, and has overcome great challenges to do so. Below are 4 examples which illustrate the broad range of projects being undertaken.

**CAMEROON**

Improvement in the overall management of children under five with uncomplicated Malaria, resulting in a 40% reduction in the number of children admitted to hospital (2016)

**KENYA**

A 100% increase in the number of hospital staff implementing a post-partum haemorrhage (PPH) protocol, resulting in a marked reduction of maternal deaths related to PPH (2017)

**MALAWI**

Educating adolescents with sickle cell disease, resulting in an increase of knowledge of self-care practices from 20% to 74% (2018)

**PAPUA NEW GUINEA**

Preparing 71 nursing graduates to reinstate within local communities and health services by equipping them with practical techniques to lead initiatives related to implementing evidence-based approaches to healthcare (2019).
GROUPS WE WORK WITH

To achieve sustainable outcomes in global health, a global commitment to the sharing of knowledge and resources through partnerships is critical.

Combining clinical and scientific expertise, global partnerships are important and necessary drivers of change, providing an opportunity to share knowledge and resources to address local and global clinical, scientific and public health questions.

JBI Adelaide GRADE Centre

The GRADE Centre in Australia and New Zealand, and was established in partnership with the GRADE Working Group, an international alliance of clinicians and researchers who have developed a leading approach to rating research quality and guideline development.

The Centre’s mission is to train, promote, disseminate and implement GRADE approaches within and across the systematic review and guideline development community globally.

The GRADE Centre offers training in GRADE methods, and consultancy services for guideline and systematic review support and development.

JBI and Covidence have a global partnership that teams JBI’s education and research network with Covidence’s next-generation systematic review platform.

The partnership recognises that people and technology need to go hand-in-hand in order to achieve JBI and Covidence’s shared mission of providing the best available evidence to inform decision making. Through this partnership, Covidence has become JBI’s recommended production platform for screening in systematic reviews and together with JBI SUMARI, ensures a productive and efficient systematic review development pathway for JBI reviewers.

JBI Endorsement is a recognition awarded to healthcare organisations that demonstrate commitment to evidence-based healthcare and an organisational-wide culture of innovation and excellence.

The JBI Endorsement Program is underpinned by quality Standards that drive the implementation of evidence-based practice and improve the quality of healthcare practices and outcomes.

The Program helps provide hospitals, nursing homes, clinics and other healthcare services with the standards required to garner status as an organisation with the highest-quality healthcare practices.

The Program enables organisations to:
• enhance their credibility to patients, clients, practitioners, and stakeholders
• demonstrate their commitment to evidence-based healthcare to their staff, clients and constituency
• strengthen their position in a competitive field
• be associated with an internationally recognised standard of evidence-based healthcare

JBI Endorsement requires an annual re-assessment to ensure that all organisations remain compliant to the JBI Endorsement Standards and criteria.
JBI offers a wide range of short courses and programs for health and educational organisations, clinicians, managers, educators, academics and students from the fields of nursing, allied health, medicine, information science and the health sciences.

**SHORT COURSES**

JBI and its Collaborating Entities offer short courses to promote and facilitate evidence-based practice in health settings globally. Short courses run from one day to six months.

**Clinical Leadership Workshop**

This one-day workshop equips health professionals with the knowledge and tools required to be effective clinical leaders. It helps participants identify strategies that will assist in managing difficult behaviour, building productive teams and implementing change, thereby enabling effective leadership of projects and people. This workshop is based on JBI’s history over the past 20 years, together with the best available evidence regarding clinical practice in their own work environment.

**Evidence-based Clinical Fellowship Program (EBCFP)**

This six-month program involves two five-day intensive training workshops at JBI and a six-month evidence-based implementation project. The program is designed so that participants develop and engage in processes to further develop their leadership skills and strengths, conduct clinical audits, and develop and execute strategies to implement evidence-based practice in their own work environment.

**Scoping Reviews Workshop**

This 2-day workshop is designed for clinicians, public health professionals, academics, researchers and others to determine the most appropriate review methodology for their question, with a particular focus on scoping reviews. The program aims to enable participants to explore the theories and concepts relating to scoping reviews and other types of evidence synthesis. Additionally, its aims to equip participants with the knowledge and tools they need to successfully plan for and undertake a scoping review following the JBI approach.

**Tailored Training**

JBI designs and delivers workshops and courses which are tailored to specific needs and requirements and reflect JBI’s expertise as a leading international research and development institute in evidence synthesis, transfer and implementation.

All training is delivered by JBI staff who are experienced in engaging participants and empowering them with new understandings, skills and strategies for evidence-based healthcare.

**Train-the-Trainer Programs**

JBI Train-the-Trainer programs are designed to enable JBI Collaborating Entity staff to become accredited trainers, to deliver the CSRTP and EBCFP in a manner that maintains consistency in the teaching and learning processes employed, and to help ensure that trainers uphold the reputation and standing of JBI.

**COMPANIES**

**POSTGRADUATE RESEARCH DEGREES**

JBI’s Master of Clinical Science (MSc) and Doctor of Philosophy (PhD) programs are designed for busy clinicians and healthcare professionals with an interest in research relating to synthesis, transfer or implementation of best practice and who are seeking to grow or establish their careers. These programs also suit surgical trainees seeking a research degree to advance their career in medicine. JBI’s focus is on practical clinical outcomes and support for student-led publications, ensuring a relevant and impactful opportunity for each student within their chosen field of practice.

JBI offers supervision for candidates wanting skill development in:

- searching for, appraising, extracting and synthesising evidence;
- conducting systematic reviews;
- implementing evidence into action in health policy and clinical practice.

JBI’s focus is on practical clinical outcomes and support for student-led publications, ensuring a relevant and impactful opportunity for each student within their chosen field of practice.

JBI staff supervise PhD students from across the health disciplines with an interest in evidence review and synthesis, evidence implementation and organisational change; evidence utilisation and safety and quality.

**EDUCATION**

JBI’s AIM IS TO EMPower STUDENTS TO EFFECTively MAKE CHAnGE IN ALL ASPECTS OF THEIR WORK, BECOMING LEADERS, IMPLEMENTING BEST PRACTICE AND CHANGING POLICY AND PRACTICE
RESEARCH CONSULTANCY

JBI offers expert, customised services that help agencies to develop and maintain evidence-based policies, clinical guidelines, and evidence-based systems and practice change.

Services
JBI’s research consultancy services are dedicated to promoting better health outcomes through synthesising evidence, translating evidence into action, and developing an evidence-based culture in healthcare.

JBI performs independent, rigorous evidence reviews; deliver education and training in evidence-based healthcare; and conduct evidence-based assessments, and evaluations of health, aged and social services and policies.

The team has extensive experience in teaching, research, evaluation and conduct evidence-based assessments, and evaluations of health, aged and social services and policies.

Clients are local, national and international groups and organisations, which have included:

- World Health Organization (WHO)
- South Australian Health and Medical Research Institute (SAHMRI)
- Australian Government Department of Health
- Department for International Development UK
- Australian Commission on Safety and Quality in Healthcare
- Renal Society of Australasia
- Australian Health Practitioner Regulation Agency.

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JBI has developed a collection of world-class resources driven by the needs of health professionals and consumers worldwide to establish, monitor and maintain evidence-based healthcare.

JBI Evidence-based Practice Database
Through JBI’s partnership with international publishing house, Wolters Kluwer Health, JBI’s evidence-based software and resources are in one easy-to-use location that can be accessed 24 hours a day.

The JBI EBP Database is available via OvidSP and covers a wide range of medical, nursing, and health science specialties and tailored packages for academics, clinicians, policy makers and students.

There are currently 4,000+ organisations from 60+ countries accessing JBI resources via Wolters Kluwer Health. Low-middle-income countries have free access to JBI resources via the World Health Organization’s Hibar Access to Research for Health Programme.

The unique suite of information available in the Database has been analysed, appraised, and prepared by expert reviewers at JBI so that health professionals can integrate the world’s best evidence into practice. The complete evidence-based practice content set includes:

- Evidence Summaries
- Evidence-based Recommended Practices
- Best Practice Information Sheets
- Consumer Information Sheets
- Technical Reports

Specialties
The JBI EBP Database is indexed by specialties enabling users to easily undertake a specific search of specialty healthcare or practice areas Specialties include:

- Aged Care
- Burns Care
- Cancer Care
- Cardiovascular Care
- Chronic Disease
- Diagnostic Imaging
- Emergency & Trauma
- General Medicine
- Health Management & Assessment
- Infection Control
- Mental Health
- Midwifery Care
- Pediatrics
- Rehabilitation
- Surgical Services
- Wound Healing and Management.

Expert Reference Groups
Each speciality of the JBI EBP Database is supported by a JBI academic lead, an Expert Reference Group (ERG) and a Corresponding Reference Group (CRG).

ERGs consist of national and/or international members with experience and expertise in a JBI EBP Database Specialty. Entry is by invitation, either by the Chair or JBI. Expert Reference Groups meet up to four times per year via teleconference, and provide review/feedback on database content prior to publishing in the JBI EBP Database.

ERGs are responsible for ensuring content is relevant, represents “best practice” and is applicable internationally.

Scientific Writing
Each item of evidence-based content in the JBI EBP Database is flagged for update 12 months after it is published. Scientific Writers are health professionals and medical writers who have applied to work externally with JBI.

Scientific Writers collaborate with JBI to learn methods for searching, study selection, quality appraisal and data extraction in order to assist JBI with update of EBP content. The Writers are mentored and guided through the write up process to ensure each evidence summary is given a high quality, reliable update based upon the most recently available research.

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The JBI Database of Systematic Reviews and Implementation Reports (JBISRIR) publishes 12 issues in each annual volume. Content includes systematic review protocols and systematic reviews of healthcare research that follow JBI review methodologies and implementation reports that present the findings of projects that seek to improve healthcare processes by implementing the best available research evidence in practice.

The journal also publishes editorials and commentaries on issues related to evidence synthesis and the use of evidence in healthcare practice, as well as research addressing methodological issues in evidence synthesis and implementation.

The JBISRIR is currently indexed in MEDLINE (NLM), Embase and Scopus (Elsevier), PsycINFO (APA), CINAHL (EBSCO) and other citation databases.

International Journal of Evidence-based Healthcare (IJBHC)

The International Journal for Evidence-based Healthcare is a fully refereed journal that publishes manuscripts relating to evidence-based medicine and evidence-based practice. It publishes papers containing reliable evidence to assist health professionals in their evaluation and decision-making, and to inform health professionals, students and researchers of outcomes, debates and developments in evidence-based medicine and healthcare.

JBI Software

SUMARI

The System for the Unified Management of the Assessment and Review of Information (SUMARI) is JBI’s software for the systematic review of literature. SUMARI (pronounced ‘summary’) is designed to assist researchers and practitioners appraise and synthesise evidence of feasibility, appropriateness, meaningfulness and effectiveness, and to conduct economic evaluations of activities and interventions.

PACES

The Practical Application of Clinical Evidence System (PACES) is the primary software to support implementation of best practice. PACES is used by groups and individuals who want to implement evidence, improve the quality of care using evidence-based standards and evaluate the impact of practice change that they lead.

PACES makes it easy for health professionals to conduct efficient, time-saving audits in healthcare settings to achieve better outcomes for patients and healthcare consumers.

The tool consists of an online database for the collection of data on clinical activities based on the clinical audit process, an online generic work plan related to problem identification, action planning and action taking, and an online facility to compare individual results with the industry average.