

CAHE Journal Club Summary

Journal Club evolution

Over the years many different Journal Club formats have been trialled and unfortunately have not seem to last the distance due to a wide variety of reasons. CAHE has explored a wide range of Journal Club formats to ascertain the inherent weakness and have created a Journal Club methodology that addresses and remedies these limitations.

CAHE has structured a Journal Club system that evolves; provides strong initial support and guidance which gradually reduces to enable the Journal Club to establish and maintain independence and provide the framework for future growth.

At the commencement of a new Journal Club (JC) it is important to delegate a JC Leader or Facilitator.

The Facilitator undertakes basic training in literature searching, hierarchy of evidence, critical appraisal, and interpretation of stats. CAHE currently offers a one-day workshop encompassing these areas, which provides practical skills that help the JC move forward.

Thirdly the JC needs to define its purpose and parameters, such as:

- ◆ Is the JC single discipline or multidisciplinary?
- ◆ What types of literature are JC members interested in reading (RCTs, qualitative, epidemiological etc)?
- ◆ What are the skills of the JC members?
- ◆ What is the commitment of the JC to uptake of evidence (how possible is it for members of the group to change practice if they read something that challenges what they already do etc).

Once these parameters have been established CAHE then provides sample papers to the JC over a two to three month period. These initial papers have already been critically appraised to enable the JC to:

- ◆ Practise interpreting the critical appraisal scores
- ◆ Discuss the statistics
- ◆ Focus on what the papers have to offer in terms of uptake of evidence.

In doing this we try to relieve the burden of finding, reading and critiquing papers from the Journal Club in the initial stages. CAHE encourages the JC to concentrate accessing the outcomes of the research and determining its applicability to the local clinical environment.

As the Journal Club becomes more experienced, CAHE then encourage members to set search strategies to find papers in areas that are relevant to the parameters of the JC, and that meet the interests of JC members. Search strategies are reported to CAHE, who then find an appropriate paper which is then critically appraised and returned to the Journal Club.

This process continues until the Journal Club indicates they are ready take on paper search/finding and the subsequent critical appraisal. This evolution enables CAHE to gradually withdraw, and allow the Journal Club independence, with the knowledge that CAHE staff are always available to provide support and feedback as required by the individual clubs.

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Aims of Journal Club

Improve Quality of Care

- ◆ To encourage reflection upon individuals current clinical practice
- ◆ To have an impact on clinical practice
- ◆ To keep up with the current literature
- ◆ To provide staff with the opportunity to reflect on their teaching and learning practices in relation to educational literature

Knowledge Acquisition

- ◆ To teach critical appraisal skills
- ◆ To learn about current research
- ◆ To provide a supportive environment for staff to develop skills in presentation and research

The Processes: CAHE JC Algorithm

- ◆ Please see following page

The Plan

- ◆ The Club
 - Club to be held once a month
 - Each session has a Presenter and Facilitator
 - Facilitators have basic critical appraisal skills and oversee the JC
 - Presenters will be decided in advance of each JC, and the role should rotate through the group
- ◆ CAHE and the Club
 - Facilitators will be trained by CAHE if required
 - Regular communication between JCs and CAHE,
 - CAHE assists with identification of articles, critical appraisal, interpretation of statistics, and interpretation into practice
 - Manages the JC website on www.unisa.edu.au/cahe

The Benefits

The Patient

- ◆ Reinforcement of EBP within treatment regimes, i.e. potentially improved outcomes

The Clinician

- ◆ A tangible tool to narrow the gap between research and practice
- ◆ Promotion of EBP within the clinical setting
- ◆ Gradual up skilling of clinicians in critical appraisal skills
- ◆ Potential to improve evaluation techniques and develop auditing skills

The Hospital

- ◆ Versatility to be used as both discipline specific or multiD
- ◆ A supplementary source of CPD with measurable outcomes
- ◆ A tool to assist the evaluation of clinical practices, reading behaviours, appraisal skills,
- ◆ Potential to develop more cost effective treatment strategies

CAHE

- ◆ Develop closer relationship between stakeholders of health care and bridge gap between research evidence and clinical practice

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The Processes: CAHE JC Algorithm

Development of a clinical scenario to reflect issues in current clinical practice

Example
 Are exercises more effective than arthroscopies in reducing knee pain for osteoarthritis knee?

Modifying the clinical scenario to an answerable clinical question

Participant Adults – Osteoarthritic knee
Intervention Exercises
Comparator Arthroscopies
Outcome Pain

Facilitator liaises with CAHE with clinical question and scenario

Facilitator emails CAHE working party members with the clinical scenario and question. A suitable search strategy is formulated based on the relevant clinical question.

CAHE systematically searches, accesses and critically evaluates the best available evidence addressing the clinical questions and findings returned to the facilitator

CAHE systematically searches available health sciences databases for an appropriate (high level, high quality) research publication which informs the clinical question.

 CAHE critically appraises the retrieved publication and the findings along with a copy of the publication is sent to the facilitator in preparation for the journal club

Research publication and appraisal presented to the health service journal club by facilitator and presenter

Key processes at the local health service

- Facilitator and presenter discuss the finding prior to the journal club meeting
- The presenter tables the publication at the meeting
- Collaboratively, the facilitator and the presenter discuss with members of the journal club the findings from the research publication, its methodological quality, implications for clinical practice and implementation.

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