



THE UNIVERSITY
of ADELAIDE

JB ANNUAL REPORT 2021



jbi.global

“FOR AN ORGANISATION TO ENDURE OVER 25 YEARS, AND TO REMAIN AS RELEVANT TODAY AS IT WAS AT ITS FOUNDING, IS QUITE A FEAT. TO BE MORE RELEVANT AND MORE VALUABLE TODAY IS AN HONOUR THAT GOES TO FEW.”

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2021 SNAPSHOT

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

**JBI CELEBRATES
25 YEARS**



EBP DATABASE

5,013
EVIDENCE-BASED
POINT-OF-CARE
RESOURCES

JBI EVIDENCE SYNTHESIS

+45%
INCREASE
FULL-TEXT ARTICLE VIEWS

**JBI PACES
RE-LAUNCHED**



JBI LIVE WEBINARS

21,046
YOUTUBE
VIEWS

JBI COLLABORATION

3 NEW
ENTITIES
(Czech Republic, India, Australia)

JBI EVIDENCE IMPLEMENTATION

2.548 | **32%**
IMPACT FACTOR | INCREASE



**JBI CRITICAL
APPRAISAL TOOLS**

TRANSLATED INTO
7 LANGUAGES

JBI SUMARI

7,908
ACTIVE USERS

JBI GLOBAL SOLUTION ROOM

+1,600+
PARTICIPANTS

JBI CS RTP

1,249
REGISTRATIONS
GLOBALLY

WORLD EBHC DAY

32 VIRTUAL
EVENTS | **110** COUNTRIES
ENGAGED | **21.4M**
SOCIAL MEDIA REACH

EXECUTIVE DIRECTOR'S REPORT 2021

In a year that saw COVID-19 continue to challenge the lives and livelihoods of communities across the globe, I am endlessly proud of how we achieved our strategic objectives in a turbulent global context.



Striking the right balance between 'business as usual' and pivoting to find new ways of servicing the community is an ongoing challenge for many businesses in the current climate. In 2021, JBI restructured to better capacitate programs that are important to our goals. This investment in our ongoing evolution was difficult, as change inevitably always is, but also critical to our success as we seek to innovate and expand.

Despite the uncertainties the year presented us, a highlight was having the opportunity to celebrate 25 years of promoting and supporting evidence-based healthcare with a cocktail reception at Ayers House in Adelaide.

For an organisation to endure over 25 years, and to remain as relevant today as it was at its founding is quite a feat. To be more relevant and more valuable today is an honour that goes to few.

I could not be happier that, as we celebrate this organisational milestone, JBI continues to strive towards our vision and mission, and we do so with a team committed to excellence and the delivery of high-quality products and services.

Other event highlights throughout the year were the second World Evidence-based Healthcare Day (led by JBI) and the inaugural Engaging Evidence (in collaboration with Cochrane Australia). Both events had extraordinary levels of engagement, demonstrating the appetite of the research and clinical communities for discussion and debate on critical topics related to the ultimate pursuit of improved health outcomes using trustworthy evidence.



JBI continues to foster strong international connections through our global network and in partnership with other leading organisations committed to evidence-based healthcare. Although we were unable to facilitate a face-to-face meeting once again this year due to travel restrictions, we had a vibrant online meeting with directors and staff from the JBI Collaboration, which continues to generate evidence and have impact on the global stage.

Additionally, our commercial partnership with Wolters Kluwer Health continues to strengthen and deepen, building on the complementarity of our businesses for mutual advantage. A unique collaboration of this kind requires full commitment by both partners to shared success, and we are excited about the future possibilities and what we might achieve together.



We have been fortunate that our financial position has remained steady throughout the crucible of COVID-19. This has, in turn, positioned us well to continue to remain true to our purpose and service our stakeholders as those needs rapidly evolve.

On behalf of the entire JBI senior leadership team, I would like to express our sincere and deep gratitude for the way in which the staff in Adelaide, Australia, along with our partners and collaborators across the world, have met the challenges the year presented. JBI stakeholders have demonstrated resilience and resolve to re-imagine and reorganise the strategies we utilise to achieve our goals together. Without their tireless energy and enthusiasm, we would not be where we are today.

Prof Zoe Jordan
Executive Director, JBI



Prof Zoe Jordan
Executive Director, JBI



Jacque Teggerth
Executive Assistant

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Global Relations Manager



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Partnership
Coordinator



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Admin Officer
Communications



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**A/Prof
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Director



Dr Timothy Barker
Research Fellow



Dr Danielle Pollock
Research Fellow



Jennifer Stone
Research Fellow

OUR TEAM

SYNTHESIS SCIENCE DIVISION



**A/Prof
Edoardo Aromataris**
Director



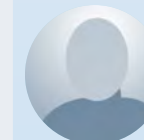
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Susan Bellman
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Judy Palmer
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IMPLEMENTATION SCIENCE DIVISION



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**Dr Lucylynn
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Research Fellow



Alex Mignone
Evidence
Implementation
Coordinator

IT OFFICE



Michael Marriott
Digital Delivery
Manager



Sahar Tehrani
Website
Developer



Sarah Silver
Information Management
Officer

STRATEGIC PLAN 2020 - 2024

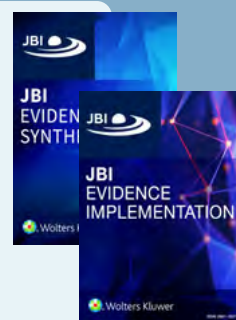
JB I New Horizons: Bigger, Better, Brighter

JB I's strategic plan aims to ensure we: generate impact by informing policy and practice and the global discourse as it relates to evidence-based healthcare (**Impact Horizon**); develop a robust strategy for continuous quality improvement of products, processes and services across all programs (**Quality Horizon**); and build a sustainable business strategy that prioritises the long-term survival of JB I and enhances our capacity to endure and remain relevant to key stakeholders (**Viability Horizon**).

The following is an overview of the ways that we have been working with and towards our strategic plan in 2021.

PRIORITY 1: Engagement and Exchange (stakeholder communication)

- Opportunities for engagement with a variety of end users is now firmly established across divisions and program areas, including, but not limited to, establishing new networks, such as the JB I Scoping Review Network and JB I Evidence Implementation Network; growing and supporting existing networks in new ways, such as the Brighter Futures Grant Program for the JB I Collaboration; revamping the JB I Evidence Synthesis and JB I Evidence Implementation journal editorial boards and the JB I EBP Database expert reference groups, scientific writers and field collaborators.
- We are seeking to extend this reach and recognise the importance of engaging with knowledge users across our programs. To facilitate this, we have established a new Knowledge User Methodology Group.
- JB I has implemented a robust digital media and online event strategy to continue to engage with both current and new key stakeholders across the world, for example the JB I gLocal Solution Room, held for the first time in 2021 and attended by 1600+ people, was a week-long series of free, local events held in 10 countries which aimed to help health professionals get research into practice.
- For the second year, JB I led **World Evidence-based Healthcare Day** in consortia with six other leading global organisations in EBHC. In 2021 this global initiative reached 21.4m people in 110 countries.



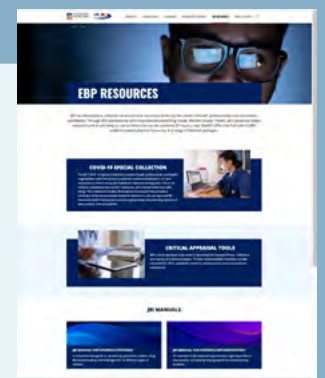
PRIORITY 2: Evidence and Empirics (scholarship and research)

- As part of our restructure in 2021, JB I established a new Evidence-based Healthcare Research Division. As well as a coveted NHMRC Investigator Grant focusing on building the first comprehensive Evidence Synthesis Taxonomy, this team has developed a robust program of contract and consultancy work with partners such as the World Health Organisation to complement and support scholarly pursuits through Category 1 grants.
- JB I's commitment to scientific development also continues to be achieved via its Methodology Groups, comprising experts from across JB I and the JB I Collaboration to examine its methodologies for the conduct of systematic reviews of different types of evidence. 2021 highlights include the Establishment of LOTE in JB I Reviews Methodology Group, translations of chapters in the *JB I Manual for Evidence Synthesis* into Chinese and Japanese and the translation of JB I critical appraisal tools into seven languages.



PRIORITY 3: Evaluation and Excellence (continuous quality improvement)

- JB I has taken great strides this year towards ensuring JB I resources are always of the highest quality. All EBP products are reviewed and updated annually and development plans have been put in place to expand and enhance content and features. This work is informed by stakeholder engagement initiatives and market research conducted both in collaboration with and independent of our commercial partners.
- The organisational restructure has also contributed to our continuous quality improvement activities, ensuring that all programs have a sharpened focus around a concentrated area of practice.
- After years of significant growth, JB I paused applications to join the JB I Collaboration while it co-actively re-invigorated its orientation program, operational framework and funding scheme to ensure it is well-placed for further imminent growth, and to support collaborating partners by remote means in the wake of COVID-19.



PRIORITY 4: Evolution and Expansion (innovation for the future)

- The JB I team continues to evolve our programs to be future ready. A significant project has been initiated this year to establish appropriate pathways to reach key global stakeholder groups and markets, both clinical and academic for the delivery of JB I's EBP products and services. This will inform future investment plans for innovation and revenue diversification.
- Our business model was, once again, reviewed this year with the JB I Executive team undertaking recruitment for the appointment of a Business Development Manager to ensure we are positioned for success.
- In 2021 JB I released a brand new version of its clinical audit and quality improvement software, JB I PACES; and numerous significant new features for its systematic review software, JB I SUMARI, including title and abstract screening.

JB I PACES
JB I SUMARI

“...WE CANNOT LOOK AHEAD WITHOUT
RECOGNISING THE CONTRIBUTIONS
AND DEDICATION OF EVERYONE WHO
HAS HELPED JBI ACHIEVE ITS MISSION
AND VISION. IT IS OUR HOPE THAT
THESE STORIES AND CONVERSATIONS
WILL CONTINUE TO SPARK NEW
HEIGHTS OF INNOVATION AND CLOSER
COLLABORATIONS AS WE LOOK
FORWARD TO THE NEXT 25 YEARS.”

PROF ZOE JORDAN

25 YEARS OF IMPACT

In 1996, JBI was established as a joint initiative between The University of Adelaide and Royal Adelaide Hospital. For the past 25 years, JBI has been a pioneer in redefining what is recognised as clinical evidence and advocating for the use of the best available evidence that considers the feasibility, appropriateness, meaningfulness and effectiveness of healthcare practices.

Today, JBI is a global organisation that offers unique, evidence-based information, software, education and training to access, appraise and apply the best available evidence to improve health and health service delivery.

JBI commemorated 25 years over 25 days in November 2021, celebrating 25 years of impact and, above all, the people of JBI.

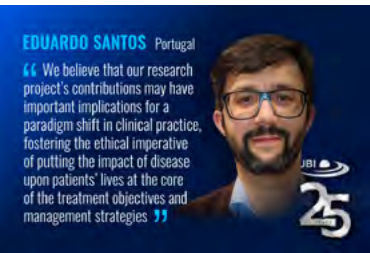
25 people and their impact stories featured in a social media campaign. The impact stories highlight how an activity, project or intervention informed by the JBI Model of Evidence-based Healthcare contributed to changes in health policy, guidelines, clinical practice or health outcomes.



In mid-November, JBI celebrated with the international JBI Collaboration during the 66th JBIC Meeting. At the end of November, JBI celebrated locally with a cocktail party. Guests of honour included the Hon. Stephen Wade MLC, Minister for Health and Wellbeing; Prof Tracy Merlin, Interim Head of School of Public Health at The University of Adelaide; and Emeritus Prof Alan Pearson AM, founding Executive Director of JBI.



Emeritus Prof Alan Pearson AM



“THIS ORGANISATION WAS FOUNDED (I BELIEVE) ON
HOPE, BELIEF AND PERSISTENCE AND IT REMAINS
THE PERVERSIVE DRIVING FORCE THAT RUNS DEEP
THROUGHOUT OUR GLOBAL BUSINESS TODAY”

PROF ZOE JORDAN



Hon. Stephen Wade MLC with Prof Zoe Jordan



JBH has developed a collection of world-class resources driven by the needs of health professionals and consumers worldwide. Through JBH's partnership with international publishing house Wolters Kluwer Health, JBH evidence-based resources are in one easy-to-use online location.

EBP RESOURCES

JBI EBP DATABASE



The JBI Evidence-based Practice (EBP) Database is a premier evidence-based point of care resource to inform and guide healthcare decision making.

Providing access to JBI’s evidence-based resources in clinical settings enables organisations to seamlessly integrate evidence-based practice and empowers clinical staff to close the quality and safety gap by using the latest evidence in clinical decision-making.

The JBI EBP Database provides up-to-date synthesised knowledge in a structured format on an extensive range of clinical topic areas. Covering a wide range of nursing, allied health and medical specialties, the JBI EBP Database includes 5000+ EBP resources that have been analysed and appraised by expert reviewers worldwide. Aligned with the evidence, best practice recommendations are provided to assist health professionals in their everyday decision-making.

Complementing the JBI Evidence Summaries are JBI Recommended Practices, which provide a clear, step-by-step description for clinical practice across a wide range of care procedures.

The integrity and quality of resources are supported by a dedicated in-house team in collaboration with external groups (expert reference groups, field collaborators and scientific writers) who assist with guiding resource development and ensuring the evidence reflects the most up-to-date best practices. At the end of 2021, 95% of the resources within the database had been updated within the past 12 months.

JBI Field Collaborators Program

JBI Field Collaborators is a new program supporting the JBI EBP Database. The purpose of the program is to create a global community where the members play an integral role in developing and reviewing evidence-based resources that sit within the JBI EBP Database. In late 2021, a call-out to the JBIC inviting members with relevant skills and expertise to apply to join the program led to three members, aligned to the fields of cancer, infection control and rehabilitation, successfully completing the trial and becoming JBI Field Collaborators. A strong focus on growing this program will occur in 2022.



Editor-in-Chief
Dr Kylie Porritt

Production Coordinator
Kim Dell

Administration Officer
Judy Palmer

Field Collaborators Program Manager
Dr Ashley Whitehorn

Scientific Writer Program Manager
Dr Matthew Stephenson

Field Editors (4)

- **Dr Matthew Stephenson**
- **Dr Ashley Whitehorn**
- **Susan Bellman**
- **Jolyn Johal**

Expert Reference Group (ERG) members	57
Field Collaborators	3
Scientific Writers (Registered)	58
Clinical Enquiries (leading to the development of resources)	13

Consultancy

A total of four consultancy projects were undertaken in 2021, resulting in the development of 19 Evidence Summaries for PR China Nanfang Nursing Centre of Evidence-based Practice: A JBI Centre of Excellence, Queensland University of Technology, Queensland Health and the Australian College of Perioperative Nurses.

RESOURCE	NEW, UPDATED IN 2021	TOTAL RESOURCES IN 2021
Evidence Summaries	New 181 Updated 2,166	3,954
Recommended Practices	New 3 Updated 388	772
Audit Criteria	188	241
Best Practice Information Sheets (BPIS) (English)	9	46

Languages Other Than English Program

The continuation and growing support for the BPIS Languages Other Than English (LOTE) Program was evident throughout 2021. A total of 19 BPIS were translated into Spanish, Italian, Turkish and Portuguese, and these were disseminated across five countries, raising awareness of JBI.

COUNTRY	LANGUAGE	NUMBER OF BPIS TRANSLATED	COLLABORATING GROUP	PUBLISHED / DISSEMINATED
Mexico	Spanish	4	University of Guadalajara	published in the ‘Revista de Salud Jalisco’
Italy	Italian	3	CECRI Evidence-based practice group for Nursing Scholarship	Published in Infermiere Oggi
Turkey	Turkish	2	Turkish Nursing Education Association	Turkish Nursing Association
Brazil	Portuguese	8	The Brazilian Centre for Evidence-based Healthcare	Revista Paulista de Enfermagem
Portugal	Portuguese	3	Portugal Centre for Evidence Based Practice	Revista de Enfermagem Referência

Highlights

The existing COVID-19 resources were updated by JBI and translated by the Southern Medical University, China.

A collaborative partnership between JBI and Nursing and Health Sciences Journal in Singapore resulted in the publication and dissemination of four BPIS across the region.

JBI EBP DATABASE

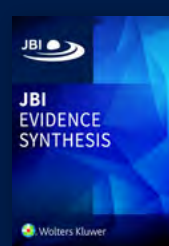
JBI EVIDENCE SYNTHESIS


24.8% INCREASE
IN SITE VISITS



“JBI Evidence Synthesis a refereed, online journal that publishes systematic and scoping reviews and protocols of healthcare research following JBI methodology.”

Assoc Prof Edoardo Aromataris
Editor in Chief




24.9% INCREASE
IN UNIQUE VISITORS


45% INCREASE
IN FULL TEXT VIEWS

KEY METRICS FROM THE JOURNAL PLATFORM

2021 visits = 479,816
(up from 384,576 in 2020; a 24.8% increase)

2021 unique visitors = 357,938
(up from 286,653 in 2020; a 24.9% increase)

2021 full-text views to articles = 361,806
(up from 248,499 in 2020; a 45% increase)

2021 Marked a significant milestone for JBI Evidence Synthesis... Selected for inclusion in the Emerging Sources Citation Index

JBI Evidence Synthesis marked a significant milestone in 2021. In June, the journal was selected for inclusion in the Emerging Sources Citation Index (ESCI), a part of the Web of Science Core Collection. This was a major achievement, and content from the beginning of 2020 is now available in ESCI.

In Volume 19, *JBI Evidence Synthesis* published 238 articles, including 39 JBI systematic reviews. Issue 4 was a special issue that aligned with International Nurses Day. Two international guest editors curated a diverse range of systematic and scoping reviews on a variety of topics facing the nursing profession.

JBI Evidence Synthesis now features video editorials on the journal website to accompany the editorial pieces published in each issue. These short videos highlight the takeaway points of the commentaries and discussion pieces displayed over impactful imagery, and offer a new way for readers to engage with our content.

“There is a widespread claim that poor adherence to antihypertensive medications increases a risk of hypertensive crisis and hypertensive emergencies. We could not support this assumption.”
Irina Benenson



“Stigma has been identified as a barrier to implementation of interventions to address overdoses.”
Dr Bernadette Pauly



Submissions

The journal received submissions from 42 countries in 2021; a slight decrease from 49 countries in 2020. Overall, there was an 18% decrease in submissions from 2020 to 2021.

Free access reviews from LMICs

JBI Evidence Synthesis continues to support research emerging from low- and middle-income countries by providing free access to systematic or scoping reviews by authors from these locations. This allows evidence synthesis from researchers in countries with fewer resources to reach a wider audience.

Editor's choice

Should I include studies from “predatory” journals in a systematic review? Interim guidance for systematic reviewers

Munn Z, Barker T, Stern C, Pollock D, Ross-White A, Klugar M, Wiechula R, Aromataris E, Shamseer L. Should I include studies from “predatory” journals in a systematic review? Interim guidance for systematic reviewers. *JBI Evidence Synthesis*. 2021;19(8):1915-23.

SEVEN VIDEOS HAVE BEEN PUBLISHED SINCE THE ‘EDITORIALS IN MOTION’ WERE INTRODUCED. THESE VIDEOS ARE ALSO AVAILABLE ON YOUTUBE, WITH 564 VIEWS FROM JULY TO DECEMBER 2021.

Collections in JBI Evidence Synthesis

JBI Evidence Synthesis offers collections of content under the following topics:

COVID-19

A free access collection of systematic reviews addressing questions relevant to the myriad of challenges raised by COVID-19 and its global spread.

Aged care

A collection of systematic reviews related to aged care in health and community settings.

Cancer

A collection of our systematic reviews that are pertinent to treatment and management of cancer.

Cardiovascular disease

A collection of systematic reviews on cardiovascular disease, which is a collective term for all diseases and conditions involving the heart and blood vessels.

Education in healthcare

A topical collection showcasing systematic reviews that cover subjects such as education and training for nurses, patients and communities

Evidence for lower-and middle-income countries

A collection of systematic reviews addressing questions relevant to lower- and middle-income countries across the globe.

Infectious disease

A collection of systematic reviews on various aspects of the prevention, screening, treatment and management of infectious diseases.

Mental health

A collection of systematic reviews tackling subjects such as anxiety, depression, phobias and general mental health issues.

Nutrition

A collection of systematic reviews on nutrition and dietary issues.

Palliative care

A collection of systematic reviews on the myriad of issues surrounding end-of-life care for patients, their families and/or carers.

Surgery

A collection of systematic reviews related to surgical services.

Women's and children's health

A collection of systematic reviews related to women, pregnancy, infants and children.

JBI EVIDENCE IMPLEMENTATION



“JBI Evidence Implementation is a refereed, online journal that focuses on evidence for implementation and closing the evidence-to-practice gap in healthcare.”

Assoc Prof Craig Lockwood,
Co-Editor in Chief

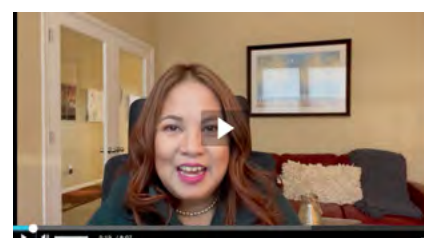


Assoc Prof Hanan Khalil,
Co-Editor in Chief



Digital commentary series

The *JBI Evidence Implementation* Digital Commentary Series engages practicing clinicians to develop audio and video commentary on the projects featured in the journal, providing additional context and relevance for a clinically-based audience. 20 videos and 16 audio commentaries have been created, hosted on the journal's website. The digital content has been downloaded 976 times so far, and in 2021 there were 1,594 visits to the video gallery.



JBI Evidence Implementation
Impact Factor score of 2.548 was released in June 2021, a 32% increase in the score, and the highest to date.

@JBI_EI Twitter Network:

By the close of 2021, the journal's Twitter audience reached 6,000 followers. The top @JBI_EI tweet in 2021 achieved 22,752 impressions and was retweeted 56 times. Throughout the year followers engaged regularly with @JBI_EI tweets, frequently sharing content and their own commentary on the topics covered. Predominately a clinical audience, the @JBI_EI Twitter account is facilitating an international network of healthcare professionals, educators, and researchers who support the JBI framework for evidence implementation, and who are interested in sharing knowledge and experience on best practices.

JBI Evidence Implementation Bulletin:

Commenced in 2021 as a supplement to the quarterly journal, the *JBI Evidence Implementation Bulletin* highlights journal content, profiles and promotes activities within the JBI Implementation Science Division, and features examples of EBHC and practice improvement submitted by followers of the @JBI_EI Twitter account. Four issues of the bulletin were released in 2021, with the URL for issue one opened 875 times. The *JBI Evidence Implementation Bulletin* is most widely accessed in Australia, the USA and UK.

THE JOURNAL RECEIVED 88 SUBMISSIONS IN 2021. THE HIGHEST NUMBER OF SUBMISSIONS CAME FROM AUTHORS IN IRAN, FOLLOWED BY THE USA AND AUSTRALIA.

EDITORS' CHOICE

TITLE	AUTHOR	ISSUE (VOLUME)
'Nutrition and hydration management among stroke patients in inpatient rehabilitation'	Mullins N	19(1)
'Nurse-facilitated reflective exercise post patient death in the ICU'	VanHorn E, Worobel-Luk P, Tanner B, Jang H	19(2)
'Sustaining evidence-based healthcare: finding the value'	Cooper AS	19(4)
'Reduction of aggressive and violent behavior toward behavioral health unit staff and other patients'	Badeaux J, Triche T, Bennett M	19(2)
'Prevention of underfeeding during enteral nutrition after gastrectomy in adult patients with gastric cancer'	Zhang W, Zhu N-N, Jiang H-J, Tao X-B, Lu W-H, Sh H-C, Wu Y-D, Li K-K, Huo R	19(2)
'Teams for sustainability of evidence implementation'	Sfetcu R, Lockwood C	19(3)

KEY METRICS FROM THE JOURNAL PLATFORM

2021 visits = 136,837 (up from 99,643 in 2020; a 27.2% increase)

2021 unique visitors = 105,975 (up from 79,096 in 2020; a 25.4% increase)

2021 full-text views to articles = 83,608 (up from 48,697 in 2020; a 41.8% increase)

27.2% INCREASE
IN SITE VISITS

25.4% INCREASE
IN UNIQUE VISITORS

41.8% INCREASE
IN FULL TEXT VIEWS

JBISUMARI SOFTWARE

JBISUMARI is an online software tool designed to provide end-to-end support for reviewers conducting systematic reviews and scoping reviews.

JBISUMARI

 **7,908**
ACTIVE
USERS

255
INSTITUTIONAL
SUBSCRIBERS

200
INDIVIDUAL
SUBSCRIBERS

JBISUMARI (System for the Unified Management, Assessment and Review of Information) supports 10 different types of reviews and incorporates reference management elements, word processor features, and statistical and qualitative analysis software all in one place.

In mid-2021, the first release of the advanced citation-screening facility was rolled out, allowing users to be able to undertake both title and abstract screening and full-text screening and selection within the software program. This facility allows reviewers to conduct screening and selection concurrently and independently, including the ability to manage conflicts between reviewers and revert decisions if required.

To enhance the citation-screening process, a number of added features were also unveiled in JBISUMARI during 2021 including:

- the ability to merge records into a single study;
- a list of standardised reasons for full-text exclusion (dependent on review type chosen) as well the ability for users to add their own reasons for exclusion;
- the ability to add notes to an individual record that can be shared with other project members;
- the option to insert a link to the full text of the document;
- the ability to highlight relevant (or irrelevant) key terms in the title and abstract of records to facilitate rapid inclusion and exclusion;
- the ability to monitor the progress of each project participant throughout each phase of the screening process and, once screening is complete, the option to export a PRISMA flow diagram (aligned to the PRISMA 2020 format);
- a project invitation management feature, allowing users to access all the projects they have been invited to, both those accepted and declined, within the system.

In July 2021, JBI launched individual subscriptions to JBISUMARI for the first time. Overall, there was a significant increase in the number of individuals and organisations actively using JBISUMARI.



To assist users with the new features, a number of video tutorials and explanations were added to the JBISUMARI Knowledge Base.

JBIPACES



SINGLE STEP SIGN ON



CUSTOMISABLE



OPERATIONAL FLEXIBILITY



VISUALLY APPEALING



VERSATILE



JBIPACES (Practical Application of Clinical Evidence System) is intuitive software that assists healthcare professionals to conduct efficient clinical audits in their local setting. The program has been developed to help improve the quality and safety of healthcare and patient outcomes.

In October 2021, JBI released a brand-new version of JBIPACES, with a number of new features and enhancements, including:

- access via JBI Single Sign On;
- more customisable and increased flexibility through:
 - direct links between evidence and audit criteria
 - the ability to create custom criteria
 - the ability to edit existing PACES audit criteria
 - flexible data entry
 - improved and flexible/tailored reporting;
- improved interoperability across JBI systems, and functional across main browsers;
- more intuitive, visually appealing and marketable interface;
- beyond conducting audit cycles/evidence implementation projects: designed also for simple research projects and outcome data.

Preparations are under way for the official launch of JBIPACES in 2022.



To support users, the JBIPACES Knowledge Base was created in 2021, which features tutorial videos and guides, and FAQs.

GLOBAL REACH

The JBIC was established alongside JBI in 1996 and for the last 25 years has contributed to driving the global EBHC movement forward, establishing JBI as a multidisciplinary global leader in this space.

JBI's global collaborative evidence network, the JBI Collaboration (JBIC), spans 70+ universities, hospitals, health facilities and NGOs in 38 countries who each lead evidence-based initiatives in their community or region, directed by the knowledge needs of local clinicians and consumers. The JBIC consists of JBI Centres of Excellence and Affiliated Groups that are driven by a unified purpose 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 JBIC harnesses the diverse strength of its members to benefit and connect members in new and innovative ways, empowering them to work together, communicate and share knowledge, while leveraging existing resources to tackle large and complex problems in healthcare globally using JBI's approach to evidence-based healthcare.

For members of the JBIC, 2021 continued to be a challenging year, with many colleagues continuing to focus their efforts on addressing the challenges of the COVID-19 pandemic, including the development and implementation of evidence-based methods, strategies and approaches to COVID-19. Many JBIC activities, however, began to resume. In particular, the delivery of JBI short courses by remote (online) delivery. As a global Collaboration, the JBIC maintained its strength and its willingness to share and collaborate with colleagues from around the world in the promotion and support of evidence-based healthcare.

The 66th JBIC Meeting was held virtually (for the second time) in November, where we met with 156 JBIC directors, convenors, deputies and staff across three days and five regions to plan the way forward for 2022.

We welcomed three new Affiliated Groups to the JBIC in 2021: from Olomouc, Czech Republic; Amrita, India; and Adelaide, Australia. Given the exponential growth of the JBIC over the past five years, and the new systems required to support partners by solely remote means, we paused applications to join the JBIC until July 2022. We are proud to acknowledge 38 Centres of Excellence and 40 Affiliated Groups as a part of the global JBI family.

3

NEW GROUPS

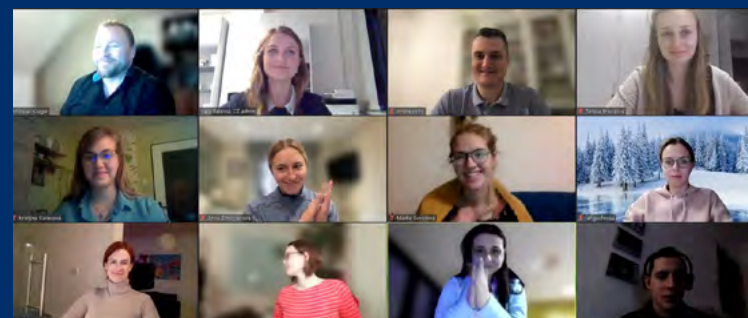
38

CENTRES
OF EXCELLENCE

40

AFFILIATED GROUPS

THE JBIC HARNESSES THEIR DIVERSE STRENGTH TO BENEFIT AND CONNECT MEMBERS IN NEW AND INNOVATIVE WAYS



AFRICA

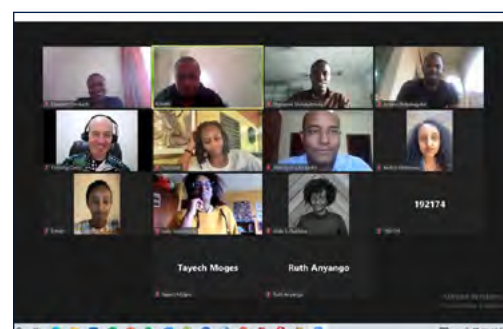
The JBI African region consists of eight JBI Centres of Excellence and Affiliated Groups in five countries.

Africa Entities

Cameroon	Yaounde Bamenda
Ethiopia	Jimma Addis Ababa
Ghana	Kintampo
Kenya	Nairobi
Rwanda	Kigali
South Africa	Johannesburg

Regional JBIC Activity Matrix Outputs

- Trained 149 participants in JBI's Comprehensive Systematic Review Program and nine participants in JBI's Evidence Implementation Training Program
- Four JBI systematic reviews were accepted for publication in *JBI Evidence Synthesis*
- One Implementation Report accepted for publication in *JBI Evidence Implementation*
- Mentored one prospective JBI Collaborating Entity in Ethiopia
- Contributed to six JBI Methodology Groups



8
COLLABORATING
ENTITIES

AMERICAS

The JBI Americas region consists of 18 JBI Centres of Excellence and Affiliated Groups in seven countries.

Americas Entities

Brazil	São Paulo
Canada	Halifax, NS Kingston, ON Saint John, NB St. John's, NL Victoria, BC
Costa Rica	San José
Peru/Colombia/Chile	Lima
USA	Downers Grove, IL New Orleans, LA Newark, NJ Hammond, IN Henderson, NV Chicago, IL Fort Worth, TX San Francisco, CA Jackson, MS Stanford, CA

Regional JBIC Activity Matrix Outputs

- Trained 228 participants in JBI's Comprehensive Systematic Review Training Program and 19 participants in JBI's Evidence Implementation Training Program
- 16 JBI systematic reviews were accepted for publication in *JBI Evidence Synthesis*
- Four JBI implementation reports were accepted for publication in *JBI Evidence Implementation*
- Mentored two JBI Affiliated Groups and prospective JBI Collaborating Entities in two countries
- Contributed to eight JBI Methodology Groups

18
COLLABORATING
ENTITIES



ASIA

23

COLLABORATING ENTITIES

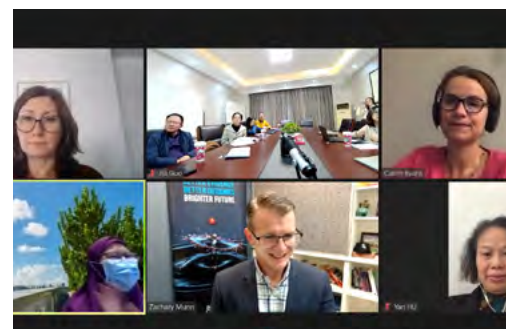
The JBI Asia region consists of 23 JBI Centres of Excellence and Affiliated Groups in eight countries.

Asia Entities

India	Amrita
	Andhra Pradesh
	Gujarat
	Kerala
Japan	Chiba
	Osaka
	Otamae Hyogo
Korea	Seoul
Myanmar	Yangon
PR China	Beijing x2
	Changsha
	Guangdong
	Guangzhou x2
	Qingdao
	Shanghai x2
Singapore	Singapore x2
Taiwan	Taipei
Thailand	Chiang Mai
	Udon Thani

Regional JBIC Activity Matrix Outputs

- Trained 441 participants in JBI's Comprehensive Systematic Review Training Program and 34 in JBI's Evidence-based Clinical Fellowship Program
- Four JBI systematic reviews were accepted for publication in *JBI Evidence Synthesis*
- Seven JBI implementation reports accepted for publication in *JBI Evidence Implementation*
- Contributed to seven JBI Methodology Groups



AUSTRALASIA

9

COLLABORATING ENTITIES

The JBI Australasia region consists of nine JBI Centres of Excellence and Affiliated Groups.

Australasia Entities

Australia	Adelaide x2
	Alice Springs
	Brisbane
	Newcastle
	Perth x2
	Sydney
	Wollongong

Regional JBIC Activity Matrix Outputs

- Trained 71 participants in JBI's Comprehensive Systematic Review Training Program
- Three JBI systematic reviews accepted for publication in *JBI Evidence Synthesis*
- One JBI implementation report accepted for publication in *JBI Evidence Implementation*
- Mentored two prospective JBI collaborating entities in India
- Contributed to five JBI Methodology Groups



EUROPE

The JBI European region consists of 20 JBI Centres of Excellence and Affiliated Groups in 16 Countries.

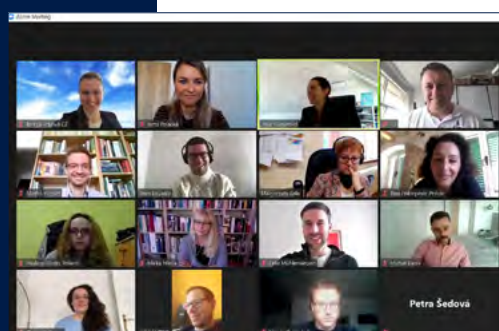
Europe Entities

Belgium	Leuven
Czech Republic	Brno Olomouc
Denmark	Aarhus
England	London Nottingham Plymouth
Finland	Helsinki
Iran	Tabriz
Ireland	Dublin
Italy	Rome
Norway	Ås
Portugal	Coimbra
Romania	Bucharest x2
Scotland	Aberdeen
Spain	Madrid
Switzerland	Lausanne
Switzerland/Germany	Luzern
Wales	Cardiff

Regional JBIC Activity Matrix Outputs

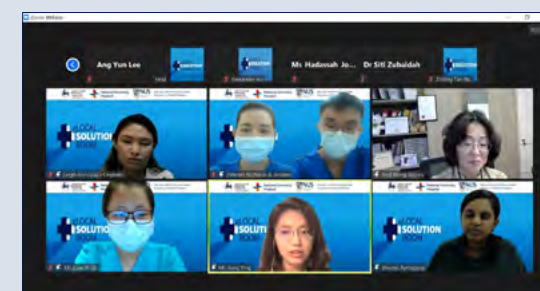
- Trained 152 participants in JBI's Comprehensive Systematic Review Training Program and 11 in JBI's Evidence-based Clinical Fellowship Program.
- Nine JBI systematic reviews accepted for publication in *JBI Evidence Synthesis*
- Five JBI implementation reports accepted for publication in *JBI Evidence Implementation*
- Mentored two prospective JBI Collaborating Entities in two countries
- Contributed to 8 JBI Methodology Groups

20
COLLABORATING
ENTITIES



JBI GLOCAL SOLUTION ROOM

Finding local solutions for implementing global evidence into local settings



In 2021, JBI launched a new global initiative, the JBI gLocal Solution Room.

This free, global event comprises a series of dynamic and interactive, locally held events in various languages. Each event is designed to help decision-makers and clinicians find pragmatic solutions to the challenges of implementing global evidence in their unique local settings.

Eleven JBI Collaboration Entities in diverse regions hosted local events for the inaugural JBI gLocal Solution Room, held during 17 to 23 May.

More than 1,600 healthcare professionals, policymakers and academics participated across the globe.

Every local event featured experts who formed a 'think tank' to use their collective expertise to respond directly to participants' questions about their unique contexts. Videos, reports and other resources from local events were made publicly available to facilitate knowledge exchange.

The success of the JBI gLocal Solution Room has ensured that it will continue in 2022.

 **GLOCAL**
1,600
PARTICIPANTS

JB I ENDORSEMENT



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



Four health facilities including Zhongshan Hospital, Fudan University in Shanghai (China); Nanfang Hospital, Southern Medical University in Guangdong Province (China); Lausanne University Hospital in Lausanne (Switzerland); and University Hospital of São Paulo in São Paulo (Brazil) maintained their JBI Endorsement status in 2021, following a reassessment of their compliance to JBI Standards and Criteria.



All four organisations have robust processes for undertaking evidence implementation activities for quality improvement, an engaged workforce and a strong leadership team committed to promoting a learning and supportive culture. In 2021, the JBI Endorsement unit worked closely with these organisations to move towards a programmatic approach to quality improvement, with clear hospital-wide operational requirements and parameters to ensure sustainable improvements.



GROUPS WE WORK WITH

In 2021, JBI played an active role in creating partnerships, collaborating with leading global organisations and leading a series of regional groups and organising committees internationally

JBI Adelaide GRADE Centre



The JBI Adelaide GRADE Centre is the first 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.

Three GRADE workshops were conducted remotely for a total of 44 participants in 2021. The JBI Adelaide GRADE Centre publishes the 'Australian GRADE Newsletter' in collaboration with the Melbourne GRADE Centre. Subscribers to the newsletter grew by almost 10% during 2021.

World Evidence-Based Healthcare Day



World Evidence-based Healthcare Day, held on 20 October, is led by JBI. World Evidence-based Healthcare Day aims to raise awareness of the need for better evidence to inform healthcare policy, practice and decision-making to improve health outcomes globally.

In 2021, official partners with JBI were Cochrane, Campbell Collaboration, Institute for Evidence-Based Healthcare, GIN, Centre for Evidence-based Health Care, NICE and CADTH. In 2021, the principal sponsor of World Evidence-based Healthcare Day was Wolters Kluwer Health.

Engaging Evidence 2021



JBI partnered with Cochrane Australia, Cochrane New Zealand, GIN ANZ, JBI Adelaide GRADE Centre and Melbourne GRADE Centre to host Engaging Evidence 2021 from 9 to 11 November 2021.

The three-day, online conference led by Cochrane Australia focused on exploring recent developments in evidence synthesis and evidence implementation through a national and regional lens.

Engaging Evidence 2021 attracted almost 500 attendees based in Australasia, and featured guest speakers including Dr Karla Soares-Weiser, Cochrane's Editor-in-Chief; Hon. Dr Andrew Leigh MP, Prof Julian Elliott and Prof Davina Ghersi, Australian Commissioners for the Global Commission on Evidence to Address Society Challenges; and Eloise Hudson from the COVID-19 Clinical Evidence Taskforce.

GIN



JBI facilitates the ANZ Regional Group of GIN. In 2020, the Group established the ANZ Guideline Network, which comprises researchers, academics and professionals with a common interest in improving the health of Australians and New Zealanders through the development and implementation of evidence-based guidance and guidelines.

Currently, there are 419 members of the ANZ Guideline Network. JBI manages the administration of the Network, publishes quarterly newsletters and develops webinars. The ANZ GIN webinar series has been a popular addition, with four webinars in 2021, which attracted over 550 registrations. ANZ GIN was a partner organisation of Engaging Evidence 2021. In 2021, Assoc Prof Zachary Munn was the chair of this group and Dr Danielle Pollock was the secretary. From December 2021 onwards, Dr Pollock became vice-chair of the network and Assoc Prof Munn an ordinary member of the regional community steering group.



PHILANTHROPY

Improving the capacity of healthcare professionals to stem the spread of COVID-19 in Kenya

To help sustain the provision of safe reproductive, maternal and child health (RMCH) services during the pandemic, JBI's Centre of Excellence in Kenya, Afya Research Africa (ARA), worked with JBI to develop an innovative strategy to stem the spread of COVID-19 using the latest evidence from JBI's COVID-19 Special Collection and JBI's approach to evidence-based practice.

The project focused on improving the capacity of RMCH healthcare professionals to implement and sustain evidence-based infection prevention and control measures, in order to prevent workplace transmission of COVID-19 among healthcare workers and patients in the provision of RMCH services.

The DREAMIN Foundation funded the project, which was led by JBI Centre of Excellence Director, Dr Clifford Mwita. JBI Clinical Fellows (past participants of the Evidence Implementation Training Program) facilitated the development and execution of the project in family planning clinics, antenatal clinics, care during childbirth/labour, postnatal care, as well as child immunisation clinics in urban, rural and remote settings across Kenya.

At the core of the project was the delivery of the JBI Evidence Implementation Training Program (EITP) to multidisciplinary health professionals in nine RMCH facilities in four counties in Kenya: Nairobi, Nandi, Homa Bay and Uasin Gishu.

The EITP participants across the nine RMCH facilities developed and led evidence-based implementation projects that were aligned with the project's overall aim (i.e. to promote evidence-based practice in the prevention of workplace transmission of COVID-19 among healthcare practitioners providing maternal and child health services).

One project, nine study sites

Using the JBI Practical Application of Clinical Evidence System (JBI PACES) and the Getting Research into Practice approach (GRiP), the participants' projects were designed to:

- assess compliance with evidence-based infection prevention and control measures for the prevention of workplace transmission of COVID-19 in their clinical settings;
- determine barriers to and facilitators of compliance with evidence-based infection prevention and control measures for the prevention of workplace transmission of COVID-19 in their clinical settings;
- determine the impact of health facility context on compliance with evidence-based infection prevention and control measures for workplace transmission of COVID-19 in their clinical settings.

The projects involved the use of audit and feedback as a framework for the promotion of evidence utilisation in each workplace, comprising three phases: stakeholder engagement and baseline audit; designing and implementing strategies to improve practice (GRiP); and a follow-up audit.

Follow-up audits demonstrated that there was improvement in nine out of 10 audit criteria across all sites.

Healthcare-worker competence in the use of personal protective equipment and the application of standard infection prevention and control precautions had the highest compliance in the follow-up audit (96% compliance; criterion 9). The most improved criterion, 'patients presenting to a healthcare facility suspected of COVID-19 are triaged', had 17% compliance at baseline and 81% compliance at follow-up (criterion 5).



Project sustainability

The sustainability of each evidence-based project was critical for the project trainers, facilitators and participants.

This project will be sustained by pro-actively selecting and addressing problem areas in a bottom-up manner, where all staff are involved in identifying challenges, possible solutions and implementing them as cost effectively as they can.

Dr Jedidah W. Kiprop,
Uasin Gishu County Hospital

Project success

The success of the project is reflected in the influence of the nine clinicians who have become agents of change by promoting evidence-based strategies in daily practice for infection prevention and control. Their colleagues, even those outside their own areas, are now applying evidence-based strategies to stem the spread of COVID-19.

As a result of this program, we have seen a big increase in clinicians wanting to participate in, and learn more about, evidence-based practice, and the nine clinicians that participated in this program are already making plans for their next clinical audit. It is great to see them willing and able to sustain and build on the skills that they gained in this program.

Dr Clifford Mwita,
JBI Centre of Excellence Director
and Project Coordinator.

Australia awards in PNG midwifery reintegration: JBI Clinical Leadership Workshops

JBI delivered its Evidence-based Clinical Leadership Workshop as part of the Australia Awards in Papua New Guinea (PNG) Midwifery Reintegration Workshop by remote attendance in March 2021.

Building on from the Clinical Leadership workshops conducted in PNG in 2019 and 2020, the workshop was a tailored version of the one-day JBI Clinical Leadership Workshop presented over two days for 55 Australia Awards Midwifery Reintegration participants. The workshops aimed to build the capacity of participants to manage, actively lead and facilitate change in their workplace, including skills such as conflict resolution, negotiation, communication and building workplace culture based on current best practice.

The workshops were structured in an interactive way, planned to draw out experiences and examples from the participants and enable them to reflect on their context, practice and leadership abilities. There were also role play activities to develop skills in addressing conflicts and resolving issues.

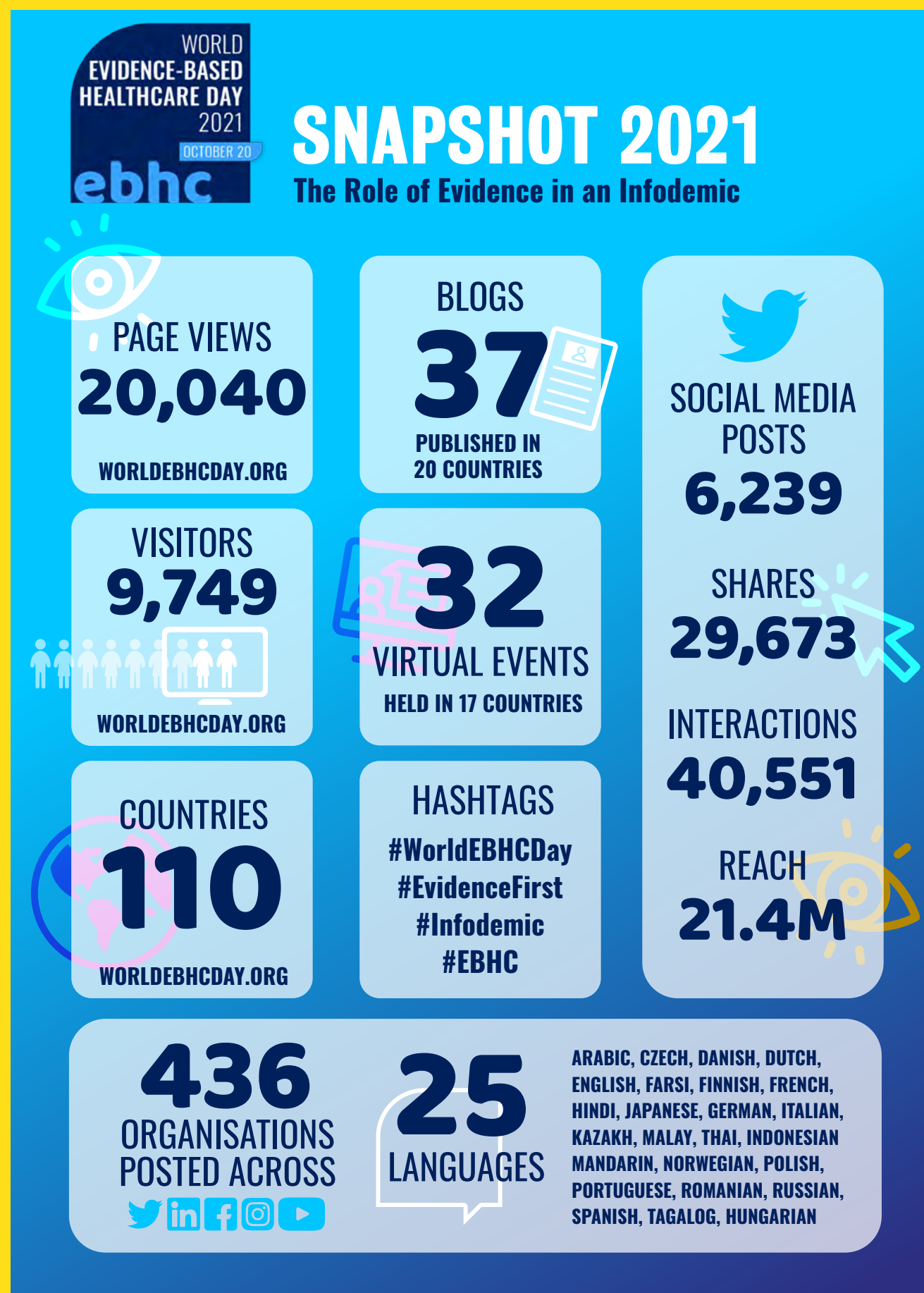


I think I found all aspects of this course most useful because, when I go back to my setting, it will help me to be a great clinical leader in improving change and motivating people to work together in providing effective care to patients.

[Participant]

All the topics presented were useful because every topic presented are key to life situations which we face in the health care system.

[Participant]



WORLD EBHC DAY

World Evidence-based Healthcare (EBHC) Day is a JBI initiative that launched in 2020 with a view to raising awareness of the need for better evidence to inform healthcare policy, practice and decision-making to improve health outcomes globally.



Bianca Pilla,
World EBHC
Day Chair

World EBHC Day was held on 20 October 2021, led by JBI in partnership Cochrane, Campbell Collaboration, GIN, NICE, Centre for Evidence-based Health Care, Institute for Evidence-Based Healthcare and CADTH. The principal sponsor for World EBHC Day in 2021 was Wolters Kluwer Health.

Theme

In 2021, World EBHC Day campaign explored the 'role of evidence in an infodemic' and aimed to contribute to the World Health Organization's efforts to manage the COVID-19 infodemic.



The global evidence community responded, reflecting and sharing their experiences on infodemic management in blogs, through events and on social media. Their responses were guided by Infodemiologist Gunther Eynsenbach's work on infodemic management.

Evidence Ambassadors

In 2021 the 'Evidence Ambassadors' program was introduced. This initiative aimed to drive engagement and was a great success.



Almost 100 Evidence Ambassadors supported the World Health Organization's efforts to combat misinformation by actively participating in World EBHC activities.

Feedback from Evidence Ambassadors was overwhelmingly positive.

I, with my friends from the project, would like to thank you all for all your support and help with the whole process. This is, for us, so important that we are taking part in this extraordinary activity. We are impressed with the scale and quality of your event. Congratulations for all what you, and the whole community, have been doing. This is really how science and academics need to contribute to peoples' health and wellbeing. We have been learning from you.

Evidence Ambassador

World EBHC activities

Thirty-seven blogs from 20 countries were selected for publication on the World EBHC Day website. Each blog addressed at least one of the four pillars of infodemic management: i) facilitate accurate knowledge translation; ii) knowledge refinement, filtering and fact checking; iii) build eHealth literacy; iv) monitoring, infodemiology, infoveillance and social listening.

Patient-partners, researchers, clinicians and policymakers also explored the role of evidence in an infodemic by hosting and participating in a range of events held globally. Thirty-two events were held across 17 countries.

The headlining event in 2021 was the webinar, 'Science communication in a pandemic', organised by the official partners of World EBHC Day and sponsored by Wolters Kluwer Health.

Engagement across digital media

The global evidence community engaged in World EBHC Day on social media. There were 21.4 million views of posts related to World EBHC Day across social media. Four hundred and thirty-six organisations posted about World EBHC Day in 25 languages.



- 6239 posts using #WorldEBHCDay (>20% increase)
- 29,673 post shares (>100% increase)
- 40,551 social media interactions (posts, likes, comments, shares; >100% increase)
- 436 organisations (>117% increase)
- 25 languages (>95% increase)

Website

Over three months, the World EBHC Day website had 9749 visitors, a 40% increase from 2020. There were 20,040 page views from 110 countries.

JBIs education and training programs are practical, international in scope, and reflect our expertise as a leading international research and development organisation in the fields of evidence synthesis, transfer and implementation.

EDUCATION



JB I SHORT COURSES

For the first time in 2021 the Scoping Review Workshop was offered by JBI Collaboration Entities, and the Evidence Implementation Workshop was offered by JBI Adelaide.

 **EITP** 59
FELLOWS

SCOPING REVIEW REGISTRATIONS 2021

WORK SHOP 154 

ONLINE COURSE 51 

CS RTP TOTAL 1249
ATTENDEES
COMPREHENSIVE SYSTEMATIC REVIEW TRAINING PROGRAM

INCREASE OVER 2020
20%



Comprehensive Systematic Review Training Program

The Comprehensive Systematic Review Training Program (CS RTP) trains clinicians, policymakers and decision-makers in healthcare how to critically appraise research and report high-quality systematic reviews in order to provide the strongest possible evidence to inform decision-making or clinical guideline development in healthcare. In 2021, there was a 20% increase in registrations for the CS RTP compared with 2020.

CS RTP ATTENDEES

JB I Adelaide	147
Australia CEP SA	31
Australia CRH NT	12
Australia EBHC NSW	32
Australia Nursing Midwifery QLD	9
Australia Wollongong NSW	18
Belgium BICEP Leuven	9
Brazil EBHC São Paulo	58
Cameroon EBHC Yaounde	6
Canada Aligning Health NS	26
Canada Queens Ontario	31
Canada UNB Saint John	9
Canada Uni Victoria BC	24
Czech Republic CEBHC Brno	13
England EBHC Nottingham	23
England IHSC Plymouth	27
Ethiopia EBHC Jimma	51
Finland EBHC Helsinki	30
Japan EBP Chiba	20
Japan EBP Osaka	30
Japan Otemae Hyogo	6
Kenya ARA Nairobi	28
Myanmar EBHC Yangon	52
Portugal EBP Coimbra	11
PR China Peking Uni BJ	93
PR China Southern Guangzhou	90
Romania Nursing Bucharest	7
Scotland EBMPP Aberdeen	23
Singapore NUH	2
South Africa Wits JHB	64
Switzerland BEST Lausanne	12
Taiwan EBP Taipei	35
Thailand EBHC Chiang Mai	113
USA LSUHSC Louisiana	4
USA NEST New Jersey	36
USA PRESCISE Chicago	2
USA Touro Nevada	13
USA TR Texas	13
USA UMMC Mississippi	25
Wales EBC Cardiff	14
Total CS RTP registrations 2021	1249

Evidence Implementation Training Program

The six-month Evidence Implementation Program (EITP) fulfils a critical role in assisting health professionals from around the world to become effective clinical leaders in their communities by equipping them with the knowledge and skills to lead change and implement evidence into practice.

In 2021, the following articles were published on the Evidence Implementation Training Program (formerly known as the Evidence-based Clinical Fellowship Program).

Lizarondo L, McArthur A, Lockwood C, Munn Z. Facilitation of evidence implementation within a clinical fellowship program: a mixed methods study. International Journal of Evidence-Based Healthcare. 2021;19(2):130-41. doi: 10.1097/xeb.0000000000000252

McArthur A, Munn Z; Lizarondo L, Porritt K, Stephenson M, Stern C, Lockwood C, Moola S, Pearson A, Jordan Z. The ripple effect of evidence implementation: a descriptive evaluation of JBI's Evidence-based Clinical Fellowship Program. JBI Evidence Implementation. 2021;19(2):142-8. doi: 10.1097/XEB.0000000000000258

EITP ATTENDEES

JB I Adelaide	12
Czech Republic CEBHC Brno	28
Japan EBP Osaka	3
Spain EBNHC Madrid	16
Total EITP registrations 2021	59

Scoping Review Workshop

The one-day Scoping Review Workshop (SRW) equips participants with the knowledge and tools required to successfully plan for and undertake a scoping review. In 2021, JBI Collaboration Entities offered the Scoping Review Workshop for the first time.

SRW ATTENDEES

JB I Adelaide	125
England EBHC Nottingham	21
Scotland EBMPP Aberdeen	8
Total SRW registrations 2021	154

Scoping review online course

The online scoping review course, 'Undertaking a scoping review', which is presented by JBI and available through The University of Adelaide, saw a slight increase in registrations in 2021 to 51, compared with 45 registrations in 2020.

DIGITAL LEARNING

JBI continued to extend its reach globally in 2021 by releasing Instagram reels to reach new audiences.

"JBI LIVE"
21,046
TOTAL VIEWS

"Ask JBI"
10,846
YOUTUBE VIEWS

POSTGRADUATE
RESEARCH DEGREE
SEMINARS 8,493
VIEWS

SCOPING REVIEW
INSTAGRAM REELS
3,553 VIEWS

JBI LIVE

Launched in June 2020, the free JBI LIVE webinar series continued in 2021 and featured special guests presenting on their areas of expertise:

Assoc Prof Andrea Tricco, Shannon Kell, Prof Janet Curran, Linda Wilhelm:
'Rapid living evidence: challenges and opportunities with a focus on COVID-19'

Dr Lucylynn Lizarondo, Dr Cindy Stern:
'The JBI approach to mixed methods systematic reviews'

Dr Tamara Lotfi:
'Collaboration and communication in EBHC'

Dr Sharon Straus:
'Sustaining knowledge translation interventions'

A/Prof Craig Lockwood:
'Qualitative synthesis: bringing experience to action'

A/Prof Zachary Munn:
'Predatory publishing in systematic reviews'

On average, more than 100 participants attended each live webinar.

Recordings of JBI LIVE webinars published on YouTube in 2021 attracted 2,172 views (as of 31 December 2021).

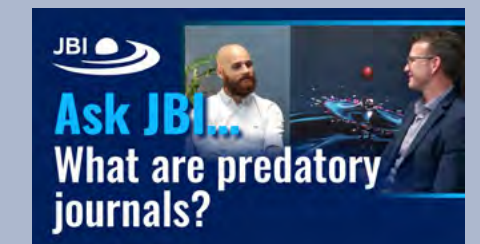
Total views of all JBI LIVE webinars to 31 December 2021 is 21,046.



Ask JBI

'Ask JBI' is a series of short videos that feature JBI staff members who respond to FAQs on topics relating to evidence synthesis.

Since its release in late 2020, the series has attracted 10,846 views to 31 December 2021.



Postgraduate Research Degrees Seminar Series

Five recorded presentations comprise the Postgraduate Research Degrees Series. The presentations were delivered during Research School to students in JBI's Master of Clinical Sciences and PhD programs. The five videos have attracted 8,493 views as of 31 December 2021.

JBI Model of EBHC series

Six videos comprise the JBI Model of EBHC playlist on YouTube. The six videos provide an explanation of the JBI Model of EBHC in six languages:

- English
- Danish
- Finnish
- French
- Mandarin
- Spanish

Instagram reels

To extend JBI's reach of JBI methodological approaches online, four micro videos were created on scoping reviews for Instagram reels in 2021. These reels have been viewed 3,553 times.

POSTGRADUATE RESEARCH DEGREES

7

NEW
STUDENTS
ENROLLED

6

STUDENTS
COMPLETED
THEIR PROGRAMS

12,215

RESEARCH SCHOOL
SEMINARS VIEWED
ON YOUTUBE

JBI offers the Master of Clinical Science (MSc) and Doctor of Philosophy (PhD) programs. Seven new students enrolled in 2021, and six students graduated from the program.

Completions

Ashish Vaska: Outcomes after hernioplasty utilising low-cost mesh in low- and middle-income countries: a systematic review

Jeanette Collins: Adult patient and/or their carer experiences of hospital discharges after major trauma event: a qualitative systematic review

Michael Musker: Circulating leptin levels in patients with myalgic encephalomyelitis chronic fatigue syndrome and/or fibromyalgia: a Systematic Review

Brett Ritchie: The diagnostic test accuracy of serum procalcitonin compared to C-reactive protein for bone and joint infection in children and adolescents: a systematic review and meta-analysis

Hilding Hanna: Experiences of learning, development and preparedness for clinical practice among undergraduate paramedicine students, graduate/intern paramedics and their preceptors: a qualitative systematic review

Katie Martin: Interventions to control children's screen use and their effect on sleep: a systematic review and meta-analysis



Research School seminars

Two one-week Research Schools were held for all current Postgraduate Research Degree students and The University of Adelaide academic staff. The objective of JBI's Research Schools is to create a forum for health professionals and researchers to pursue their degree within a multidisciplinary context, and to achieve a depth of learning and experience that is more comprehensive than a singular focus on their own topic area and methods.

In addition to JBI academic staff- and student-led presentations, the 2020 Research Schools featured guest presenters, including:

Assoc Prof Eng Ooi: Head of Otolaryngology Head and Neck Surgery, Flinders Medical Centre, Southern Adelaide Local Health Network
Research in surgery

Dr Dora Lang: Nurse Manager, National University Cancer Institute, Singapore
Post-PhD life

Dr Rick Wiechula: Senior Lecturer, HDR Coordinator, Honours Coordinator, Academic Integrity Officer, Adelaide Nursing School, University of Adelaide
History and development of synthesis science

JBI METHODOLOGICAL PROGRAM

The JBI Scientific Committee is responsible for the development and oversight of JBI’s methodologies and materials that guide the conduct of evidence synthesis, transfer and implementation.



JBI Scientific Committee Members

- A/Prof Edoardo Aromataris (Chair)
- Prof Zoe Jordan
- A/Prof Craig Lockwood
- A/Prof Zachary Munn
- Dr Kylie Porritt
- Bianca Pilla
- Dr Cindy Stern
- Alexa McArthur
- Dr Lucylynn Lizarondo
- Dr Matthew Stephenson
- Dr Timothy Barker
- Dr Danielle Pollock
- Prof Hu Yan
- Dr Richard Wiechula
- Prof Anne-Sylvie Ramelet
- Prof Patricia McInerney
- Dr Hanan Khalil
- A/Prof Andrea Tricco
- Amanda Ross-White
- Sarah Ravesteyn (Minutes)

2021 Highlights

- Establishment of LOTE in JBI Reviews Methodology Group
- Translations of chapters in the *JBI Manual for Evidence Synthesis* into Chinese and Japanese
- Translations of JBI critical appraisal tools into seven languages
- Eight publications on JBI methodology

JBI Manual for Evidence Synthesis

The *JBI Manual for Evidence Synthesis* provides authors with a comprehensive guide to conducting JBI systematic reviews. There has been ongoing interest across the globe to make the information in the Manual more accessible to international audiences. Over 2021, various chapters of the Manual have been translated into both Chinese and Japanese.

JBI Predatory Publishing Practices Group

JBI’s Predatory Publishing Practices Group was established in 2020 and continued operating in 2021. Its aim is to review emerging literature relating to the inclusion of studies from predatory journals in systematic reviews, to develop guidance for systematic reviewers and to conduct research into predatory publishing practices.

JBI Critical Appraisal Tools and Risk of Bias

Various JBI critical appraisal tools have been translated into seven different languages: Italian, French, Turkish, Slovenian, Korean, Swedish and Norwegian. Members of the JBI Methodology Group for Reviews of Effectiveness launched a project to review all of the JBI critical appraisal tools for analytical quantitative studies. Over 2021, this work focused on aligning the signalling questions of our current suite of tools to recognisable domains of bias.

Languages other than English in JBI reviews

This group was established in 2021 to develop guidance for authors of JBI reviews on how to manage studies published in multiple languages in their reviews. The scope of work has ranged from how to best identify these studies, tools and mechanisms to help authors translate publications in other languages, and also implications for analysis and presentation in the review.

JBI Methodology Groups

The JBI Methodology Groups, are made up of experts from across JBI and the JBI Collaboration who examine its methodologies for the conduct of systematic reviews of different types of evidence.



Umbrella Reviews
 Assoc Prof.
 Edoardo Aromataris



Text & Opinion
 Alexa McArthur



Effectiveness
 Dr Timothy Barker



Implementation
 Dr Kylie Porritt



Qualitative
 Assoc Prof.
 Craig Lockwood



Information Science
 Amanda Ross-White



Mixed Methods
 Prof. Heather Loveday



Psychometrics
 Dr Matthew Stephenson



Effectiveness & Prevalence/
 Incidence, Risk & Prognosis
 Assoc Prof. Zachary Munn



Scoping Reviews
 Dr Andrea Tricco

Publications

Barker TH, Migliavaca CB, Stern C, Colpani V, Falavigna M, Aromataris E, Munn Z. Conducting proportional meta-analysis in different types of systematic reviews: a guide for synthesisers of evidence. *BMC Medical Research Methodology*. 2021;21(1):189.

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CONSULTANCY

In 2021, JBI conducted research and consultancy projects, both commissioned and collaborative, for government and non-government organisations.

New projects



World Health Organization Global Malaria Programme

In 2021, we collaborated with the Vector Control and Insecticide Resistance Unit, within the Global Malaria Programme of the World Health Organization. The project consists of three systematic reviews focusing on various aspects of residual insecticide surface treatment as a measure to prevent malaria. This work is ongoing and will take us into 2022, with the potential for additional projects following the completion of the current work.

The Evidence Synthesis Taxonomy Initiative

In line with our focus on EBHC scholarly work and development, an NHMRC Investigator Grant formally commenced at the start of 2021 to advance the science of evidence synthesis. This was approved towards the end of 2020, with funding of \$645,205 over five years awarded to JBI. This project is envisaged as a collaborative initiative, with key stakeholders across many scientific fields, to establish an online, interactive and scalable evidence synthesis taxonomy wiki. A significant amount of meta-research (including scoping reviews), surveys, validation studies and Delphi approaches will be required to determine the current approaches, methodologies and methods in the field of evidence synthesis and to generate a taxonomy for guidance purposes.

Consultancy work

JBI continues (largely through our GRADE Centre) to act as methodologists and advisors for a number of guideline development projects. Currently, we are supporting the following groups/projects with their guideline development.

Australian Extracorporeal Membrane Oxygenation Guidelines



Australian Foetal Alcohol Spectrum Disorder Diagnostic Criteria Guidelines



Society of Obstetric Medicine of Australia and New Zealand Hypertension in Pregnancy Guidelines



Australian recommendations for older adults' physical activity and sedentary behaviour during hospitalisation for an acute medical illness



Australian Whiplash Guidelines



Continuing Projects

CIHR E-Covid RecMap

The Canadian Institutes for Health Research funded project COVID-19 Living Evidence and Recommendations.

The Minderoo Foundation

The impact of plastic chemical exposure on human health.

Australia's National Research Organisation for Women's Safety (ANROWS)

What works to reduce and respond to violence against women: evidence synthesis, methods and communication project.

Completed projects

Contextualised strategies to increase childhood and adolescent vaccination coverage in South Africa

Commissioning organisation: South African Medical Research Council and Cochrane South Africa.

GIN Multimorbid Guidelines Group

Comparative study of guideline methodologies on multimorbidity.

St Vincent's Health Network

Hypertension in pregnancy.

Flinders University

Recommendations for older adults' physical activity and sedentary behaviour during hospitalisation for an acute medical illness.



ORAL PRESENTATIONS BY JBI STAFF

PRESENTERS	ORAL PRESENTATION TITLE	EVENT
Aromataris E	Ecosystem of evidence	Online Opening plenary, 6th Congress on Nursing Research of Ibero-American and Portuguese-speaking countries
Aromataris E, Stern C	Languages other than English in JBI systematic reviews	Online 67th JBIC Meeting
Barker TH, Aromataris E	JBI SUMARI: Software to fast track the systematic review process (workshop)	Online Engaging Evidence Conference
Barker TH, Munn Z, Dias M, Porritt K, Tufanaru C, Stern C, Aromataris E, Wiechula R, Brennan S, Schunemann H	Use of GRADE in Australian clinical practice guidelines	Online GIN Conference
Barker TH, Munn Z, Migliavaca CB, Stern C, Colpani V, Falavigna M, Aromataris E	Proportional meta-analysis: a guide for synthesisers of evidence	Online Engaging Evidence Conference
Barker TH, Munn Z, Stern C, McArthur A, Stephenson M, Pilla B	The JBI Comprehensive Systematic Review Training Program: improves participant knowledge of the SR process	Online Engaging Evidence Conference
Barker TH, Munn Z, Stone J, Aromataris E	The future of JBI tools for assessment of risk of bias	Online Engaging Evidence Conference
Jordan Z	COVID-19: a public Health Response	In person Health Matters Lecture Series, Adelaide
Jordan, Z	Excellent leadership facilitates the leap from evidence to clinical practice	Online Asia Nursing Forum, Shanghai, China
Jordan Z	Global Collaboration for EBHC: an evolution of ideas	Online Chungnam National University 50th Anniversary, South Korea
Jordan Z	Global evidence, local solutions	Online and in person JBI gLocal Solution Room, Adelaide
Jordan Z	Introducing JBI: turning the EBHC ‘flywheel’	In person Research School, Adelaide
Lizarondo L, McArthur A, Lockwood C	Operationalising the JBI Evidence Implementation Framework to improve delirium practices	Online Engaging Evidence Conference
Lizarondo L, Stern C	The JBI approach to mixed methods systematic review	Online JBI Live Webinar
Lockwood C	Evidence-based clinical decision making: knowledge types, strategic needs	Online College of Paramedics’ Annual International Research Conference
Lockwood C	Evidence-based clinical decision making: knowledge types, strategic needs	Online School of Nursing, Fudan University, 3rd Fudan Symposium on Evidence-based Nursing ‘Scientific evidence promotes clinical decision-making’
Lockwood C	Evidence-based practice: clinical decision-making in the organisation and practice of clinical care delivery	Online Queens University School of Nursing and Midwifery postgraduate student research school
Lockwood C	Mapping the literature and programmatic research: how, when and why to do a scoping review	Online Chiang Mai University School of Nursing and Midwifery postgraduate student seminar
Lockwood C	Mapping the literature and programmatic research: how, when and why to do a scoping review	Online Yonsei Evidence-Based Nursing Centre and the Yonsei College of Nursing seminar

Lockwood C	Perspectives of implementation science in changing contexts: the JBI story thus far...	Online Health Translation SA Centre Research Symposium
Lockwood C, McArthur A, Mignone A, Lizarondo L, Khalil H, Sfetcu R	JBI implementation case studies: the role of education and training as an implementation strategy	Online Engaging Evidence Conference
McArthur A, Jordan Z, Florescu S, Cooper A, Yan H, Klugarova J, Stannard D, Pearson A	JBI’s approach to systematic reviews of textual evidence: narrative, expert opinion or policy	Online Engaging Evidence Conference
McArthur A, Jordan Z	Innovations in textual evidence synthesis	Online 67th JBIC Meeting
McArthur A, Lizarondo L.	JBI Clinical Leadership Webinar	Online Australia Awards in PNG
McArthur A, Lizarondo L.	JBI Evidence Implementation short courses: what’s new?	Online 67th JBIC Meeting
McArthur A, Munn Z, Lizarondo L, Lockwood C	JBI PACES: a software tool to support evidence implementation	Online Engaging Evidence Conference
Munn Z	What do we mean by science communication and infodemic?	Online World EBHC Day 2021 official event: Communicating Science in a Pandemic webinar
Pilla B	Collaboration during a pandemic	Online 67th JBIC Meeting
Pilla B	Introduction to the JBI Collaboration	Video and Online Karaganda Medical University Republic of Kazakhstan Collaboration in EBHC Webinar Series
Pollock D, Alexander L, Munn Z, Peters MDJ, Khalil H, Godfrey CM, McInerney P, Synnot, A, Tricco AC	Stakeholder engagement in scoping reviews: moving from consultation to co-creation	Online Engaging Evidence Conference
Pollock D, Alexander L, Munn Z, Peters MDJ, Khalil H, Godfrey CM, McInerney P, Tricco AC	How to conduct and report a scoping review workshop	Online Engaging Evidence Conference
Pollock D, Alexander L, Munn Z, Peters MDJ, Khalil H, Godfrey CM, McInerney P, Tricco AC	How to conduct and report a scoping review workshop	Online GIN Conference
Pollock D, Tricco AC	Stakeholder engagement in scoping reviews	Online 67th JBIC Meeting
Porritt K	Evidence implementation: the key challenges	Via video: 6th Congress on Nursing Research of Ibero-American and Portuguese-speaking countries Panel II at the International Symposium on Evidence-Based Health Care
Stern C, Lizarondo L, Carrier J, Godfrey C, Rieger K, Salmond S, Apostolo J, Kirkpatrick P, Vandyk A, Borges Dos Santos K, Loveday H	Common pitfalls in undertaking mixed methods systematic reviews	Online Engaging Evidence conference
Whitehorn A, Porritt K, Lockwood C, Xing W, Zhu W, Hu Y	Reporting standards and quality assessment tools for evidence summaries: a scoping review	Online Engaging Evidence conference

PUBLICATIONS BY JBI STAFF

Editorials/Commentaries/Letters

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van Zelm R, Lockwood C. Process evaluation: evidence-based quality indicators in clinical practice, scholarship and pedagogy. *JB1 Evidence Implementation*. 2021;19(1):1-2. doi: 10.1097/XEB.0000000000000273

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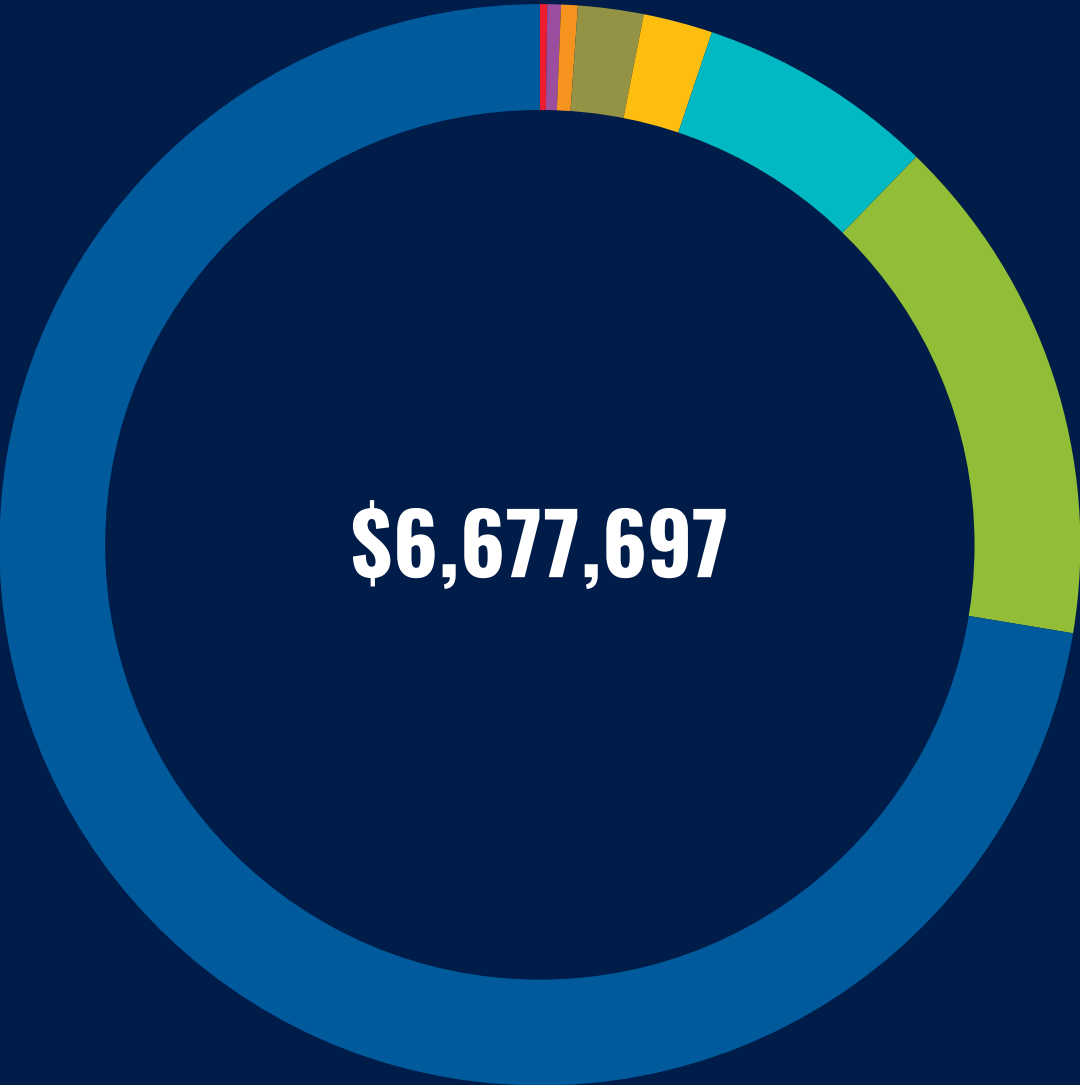
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JBI FINANCIALS



WK Research Translation Agreement	\$4,833,529	NHMRC	\$130,848
Research Block Grants	\$1,025,403	Specialist Services	\$33,283
JBI Short Courses	\$474,396	Event Sponsorship	\$27,034
Consulting	\$138,637	Miscellaneous	\$14,567

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