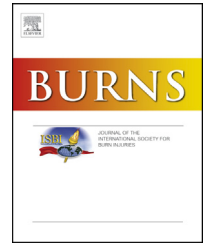


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## Evaluation of a multidisciplinary burn care journal club: Lessons learned

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### ARTICLE INFO

#### Article history:

Accepted 25 October 2017

Available online xxx

#### Keywords:

Journal club

Burns

Evaluation

Team-based learning

Multidisciplinary education

### ABSTRACT

**Background:** Journal clubs allow discussion of the quality and findings of recent publications. However, journal clubs have not historically been multidisciplinary. Burn care is recognized as a true collaborative care model, including regular multidisciplinary rounds. Since 2011 we have offered a multidisciplinary burn journal club at our institution. We present an evaluation of the factors that have made the sessions successful to facilitate others to commence their own club. **Methods:** At the end of each journal club session participants anonymously completed a structured evaluation. Five-point scales were used to evaluate understanding, meeting objectives, presentation and appropriateness of information. Qualitative questions were asked to identify beneficial factors, suggestions for improvements, ideas for future sessions and feedback for the facilitator.

**Results:** Attendance grew from six to a maximum of 19. Members included physicians, nurses, dietitians, physiotherapists, occupational therapists, social workers, basic scientists and students. Presentations were undertaken by all of these disciplines. Ratings improved steadily over time. Understanding increased from a score of 4.5 to 4.8; meeting objectives from 4 to 4.9; satisfaction with method of presentation from 4.3 to 4.9 and with level of information from 3 to 4.9.

**Conclusions:** Over time, the journal club has evolved to better meet the needs of our team. Successful multidisciplinary journal club implementation requires identification of champions and ongoing evaluation.

**Applicability of research to practice:** The success of the journal club has been possible through the engagement of the entire burn team. Champions within each discipline, facilitated discussion and evaluation tools have helped nurture a nonthreatening team based learning environment.

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## 1. Background

Meeting within the walls of academia and medical clinical teaching areas to discuss relevant literature as a group dates

back at least 200 years [1]. This is traditionally done in discipline specific treatment communities in journal clubs. Journal clubs are where literature is reviewed in professional groups and are a platform to integrate evidence into clinical practice and discuss research in a group setting [2,3]. This is an

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<https://doi.org/10.1016/j.burns.2017.10.017>

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opportunity for team members to discuss evidence for best clinical practices and share opinions regarding particular care topics. Journal clubs are components of responsive health care, clinical specialty areas are a part of health care training programs [4]. Journal clubs have been shown to have numerous positive benefits. They provide an environment for clinicians to advance knowledge and discuss the quality of current relevant literature and the research methodologies [4,5]. This exposure increases comfort with research for those members of the clinical team who may not have had any training in this area. Journal clubs are recognized as a way to encourage the exchange of ideas [6], keep abreast of the innovative advances and review changes and innovation within a field of practice [7,8]; providing a platform to foster evidence-informed practice [9] and the adoption of new practice modalities [10] which may result in improved patient outcomes. The evolution of critical appraisal skills, evidence-informed practices [11] and collaboration with others [6] can create a foundation to develop and integrate practice change and may also enhance scholarly writing skills for grant applications and research papers [12] for team members so inclined.

Challenges in maintaining active and responsive journal clubs include the need to be relevant to the attendees and having a clearly defined purpose [13]. It has been noted that journal clubs may lack rigor and may also fall short in enhancing critical thinking skills [9]. There is also a concern that articles may be selected ad hoc, and the structure of the evaluation and discussion may be lax [9]. This results in most journal clubs being discipline specific. Historically, journal clubs have not been multidisciplinary and knowledge regarding the impact of journal clubs is modest [4,11]. Although widely accepted and adopted by many educational and clinical practice teams, the impact on patient care remains unknown [11]. In addition, there are few multidisciplinary journal club evaluations available that report valuable results such as enhanced medical knowledge, research competency, heightened critical thinking [6] and team collaboration [14]. There is limited research on building effective burn care journal clubs. Fowler et al. [6] used an anonymous survey to examine the impact of participation in a burn team journal club in a large center over a two-year period. They had 114 attendees complete the survey from surgery, nursing and rehabilitation areas as well as other clinicians, scientists and hospital administrators. All attendees indicated the journal club enhanced personal education. The findings informed local process changes to increase accessibility of articles, wider promotion of the time and location of the journal club meetings and they also explored the potential to formalize the offering of profession specific continuing competency credits.

The goal of this study was to evaluate and present our experience with an evolving multidisciplinary burn care journal club with a focus on continued refinement and process improvement. We provide evaluation of the journal club experience using both anonymous Likert items and open-ended comments from the participants. We amalgamated our findings and lessons learned to create some recommendations for other burn care teams to facilitate creation of their own successful journal club.

## 2. Methods

We describe our experience hosting a burn care team journal club at a provincial burn referral centre Winnipeg, Manitoba, Canada from January 2011 to December 2016. Journal clubs were held bi-monthly during lunch hour with lunch provided in meeting space geographically near the clinical areas. The burn care journal club core team has a number of rotating facilitators with advanced experience in pedagogical, clinical and research knowledge in the areas of surgery, nursing, nutrition, wound healing, psychosocial recovery and rehabilitation. We began with lunch and learn sessions to introduce the concept of assessment of articles related to advances in burn care. Over time, the journal club evolved to include evaluation tools for critiquing articles including discussion of basic statistical analysis and implementation of evidence into best practice burn care (Fig. 1).

Presenters were encouraged from all programs to promote multidisciplinary involvement. Each session had a presenter and a facilitator. The facilitator was from the core group with research and evaluation skills to help guide the discussion and encourage audience participation. The presenters were volunteers from the care providers or research group and volunteered to review and discuss a burn related article based on clinical practice questions. The article was selected based on a combination of the quality of the manuscript/study, as well as the relevance to a patient care related question. The choice of the article was vetted through a member of the core facilitator group. The article was circulated to participants a few weeks prior to the session. In some sessions evaluation tools were used to aid participants in critically appraising the article content and guide discussion regarding the validity of the journal article, strengths and weaknesses, and applicability to current practice.

At the end of each session, a survey evaluating the journal club was circulated and voluntarily and anonymously completed. The survey instrument contained four, five-point Likert item questions and four open-ended questions about each specific journal club session (Table 1). Likert item questions evaluating understanding, meeting objectives, presentation and appropriateness of the level of information were analyzed for mean score trends throughout the study period. The four open-ended qualitative questions captured

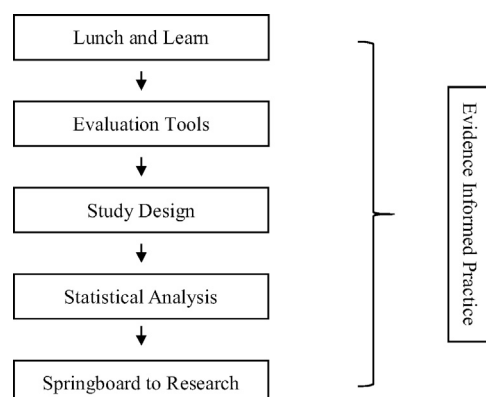


Fig. 1 – Evolution of burn journal club.

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