Journal of Neurosciences in Rural Practice

We are pleased to inform you that the “Journal of Neurosciences in Rural Practice (http://www.ruralneuropractice.com/currentissue.asp?sabs=n)” is now included in PubMed.

One can search the articles published in one issue which is now in PubMed. (http://www.ncbi.nlm.nih.gov/sites/entrez?db=pubmed&cmd=DetailsSearch&term=Journal+of+Neurosciences+in+Rural+Practice). These articles will be linked to the journal’s website in next 3-4 days. The future articles will be available in PubMed about 4-8 weeks after publication.

http://www.ruralneuropractice.com/currentissue.asp?sabs=n

Banners

As OTs and OTA/Ts, we are often asked to produce low cost/no cost banners and signs at short notice for various hospital events such as Open Day, Cultural Day, National Peace Day, Literacy Week, World Aids Day, OT Week etc. Some departments also celebrate Valentine’s Day, Spring Day, Birthdays etc.

Open day signs

These are the quickest and easiest to produce, and consist of one large computer generated Roman capital letter per A4 page, spelling out OCCUPATIONAL THERAPY in green lettering. Each page can be individually laminated and sequentially stuck on the wall with Presstik. At Edenvale Hospital, the OTs shared a table with the Physios and Speech therapists who did the same signs but in blue and maroon lettering, thus creating a bold, striking background to the Open Day Exhibits. The signs were subsequently moved to the entrances of each individual department.

Indoor banner

Based on the same principle, we did a banner for World Aid’s Day where each ‘letter’/page was strung together to resemble a traditional style necklace.

Materials to make this banner:
- white card, each about 40cmx30cm, obtainable from the X-ray department
- Large A4 computer-generated letters spelling out the theme e.g. WORLD AIDS DAY and 2 A4 copies of the Aids ribbon
- Glue (paper)
- Poster Paints (red and black)
- Thick string (±5 metres in length)

Tools
- Scissors
- Pencil
- Ruler
- Paper punch
- Homemade foam stamp (resembling a bead)

Method
- Cut the card slightly larger than the A4 page e.g. 40cm (length) x 30cm (breadth)
- Trim the card at an angle down the sides so that the top is 5cm narrower than the bottom in order for the banner to hang more naturally
- Measuring carefully, punch 1 hole in each of the upper corners of the card
- Cut out the individual letter or leave as is
- Glue down letter cut-out or A4 page onto the card after carefully positioning
- Stamp a bead pattern near the top of the card as shown
- Thread the cards sequentially with string
- A second set of letters can be pasted on the reverse side of the card so that the banner is visible from both sides
- String banner across the hall/passage

Note: The advantage of this banner is that it can be folded up concertina-style and packed away when not in use.

Outdoor banner

Materials
- Condemned sheets – ask the hospital linen department to sew a few condemned sheets together to make a banner measuring 3 metres x 1 metre
- Photocopied A4 computer generated letters spelling out EDENVALE HOSPITAL supports LITERACY WEEK
- Carbon paper (1 box)
- Sewing pins
- Ballpoint pen/pencil
- PVA exterior paint (Hospital workshop)
- String
- Splint material (4 offcuts)
- Rivets

Tools
- Tape measure
- Stapler
- Scissors
- Paintbrush
- Leather punch
- Hammer

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Method
- Compose the lettering on paper more or less to scale
- Mark out position of each A4 sized letter on banner
- Staple 1 sheet of carbon paper to the back of each A4 page and pin into position on the banner.
- Trace the outline of each letter, using a ball-point pen or pencil
- Remove pattern sheets
- Paint the letters with PCA paint and allow to dry
- Strengthen the 4 corners of the banner by riveting on splinting material offcuts
- Add a hole to the splint material corners so that a length of string can be tied to each corner of the banner
- Attach banner to relevant outdoor structure

Introducing a new regular column — EBP

Using evidence to inform our practice

A column on evidence-based practice (EBP) will be a regular feature in forthcoming editions of the Focus. The column will provide a platform for sharing information about EBP with the goals being:
1. To raise awareness about EBP
2. To disseminate information about resources to support evidence-based occupational therapy (EBOT) in South Africa/Africa
3. To showcase examples of therapists initiatives to build their EBP knowledge and skills and implement it in everyday practice.

A brief background
Before the introduction of EBP, health professionals based their decisions on professional expertise and client information with little attention being given to research findings (1). In medicine, this resulted in patients receiving harmful or ineffective treatment. Although professional expertise and client information are clearly important, both may be subject to bias. Drawing on research as a component of decision-making reduces bias. EBP empowers both clients and therapists to make informed decisions based on high-quality evidence rather than being solely reliant on the therapist’s experience, and is thus critical in ensuring ‘best practice’ and effective use of resources (2). It also gives the profession credibility and may even give us the ‘ammunition’ for creating additional occupational therapy positions.

EBP in occupational therapy
There has been extensive coverage of EBP in occupational therapy publications over the last 15 years. During this time, an abundance of articles has been published, ranging from descriptions of ‘how to do’ EBP, to research articles focused on implementing research findings. Despite the development of a variety of resources to support and develop EBP in occupational therapy (3), its implementation has proved challenging (4-11). In South Africa, implementation has been limited by barriers such as overwhelming workloads, lack of access to professional journals, lack of time and limited knowledge and skills (12). Although these barriers are no different to those experienced by our colleagues in developed countries, we need to find our own ways of overcoming them if EBP is to be a reality in our context.

The concept of EBP has evoked criticism within the occupational therapy profession (13-23). Many of the concerns raised are related to disjunctures between the philosophy of occupational therapy and the positivist roots of EBP. In my view these can be addressed by conceptualising and practising EBP in a way that is compatible with the philosophy and values of occupational therapy. This involves using research evidence in conjunction with client perspectives, professional expertise and contextual factors to reach the best possible decisions about client care (1). The following statement captures the core elements of how EBP should be applied in occupational therapy:

‘Evidence-based occupational therapy is the systematic consideration of information from multiple sources in clinical decision-making. Information is critiqued for its reliability and relevance to the situation at hand, and applied to practice in conjunction with the client within a client-centred, occupational therapy paradigm. Evidence-based practice also involves the development of occupational therapy’s theory base which, in due course, partially informs these decisions. The approach is not a directive one, but rather serves to illuminate information-rich choices for clients and their therapists’ (24, p 435).

EBP as a two-way process
In addition to drawing on research to inform our practice, we should also view our practice as a potential source of evidence. EBP has to be a two-way process of using research in practice (EBP) and producing research from practice (practice-based evidence). The latter entails documenting practice sufficiently well that the effects of occupational therapy can be monitored. Documentation is therefore a potential source of evidence, and is of particular importance where there is limited or no evidence available.

Contributions for this column
You are invited to submit articles about your engagement with EBP; these may be your indi... continued on page 26