

**JBI** - Full Text  
database providing  
evidence-based  
medicine and best  
practice information  
and JBI Tools




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Federal Manager



# Learning Objectives

1. Provide an understanding of JBI, Collaboration and the Database
2. Highlight the content and key features
3. Share resources for additional learning
4. How to access from the VA Library and resource page
5. Demonstrate live tips on searching JBI
6. Introduce you to the JBI Tools
7. Take time to answer any questions

 Wolters Kluwer


Ovid®

## JBI Evidence-Based Practice Resources

Healthcare professionals and institutions around the world strive to provide the highest quality care to their patients.

JBI's evidence-based practice model is considered a benchmark in the healthcare industry. JBI's unique suite of evidence-based content and software ensures that health professionals can access high quality evidence, appraise diverse types of evidence and apply evidence at the point of care, to meet today's rigorous quality standards and improve patient outcomes.

**One of the World's Leading Providers of Evidence-Based Information— Available Exclusively on Ovid**



- Content and software that will help your institution implement evidence-based practice
- Systematic reviews, recommended practices, evidence summaries, and more
- Evidence to inform clinical practice—derived from JBI's global collaborating Centres of Excellence in 40+ countries
- Resources designed to help assess the quality of research

### Why JBI EBP Resources on Ovid?


- Evidence-based content and software from a leading evidence-based practice organization— only available on Ovid
- Summarized research in a format that is easy to locate, understand, and distribute
- Diverse range of resources that go beyond therapeutic medical interventions, to look at patient and caregiver experiences, report on costs, diagnostics, and prognostics.
- Improved patient outcomes by extending the reach of clinical practice guidelines tailored for your institution or community

### Evidence to Inform Clinical Practice

#### JBI Evidence Synthesis

An international peer-reviewed, online journal that publishes rigorous evidence syntheses relevant to a range of healthcare contexts and health conditions. JBI Evidence Synthesis is the premier channel for diverse systematic reviews that move beyond inclusion of RCTs and experimental studies, providing the best available evidence for health professionals to aid point of care decision making and healthcare administrators to inform health policy and practice.

The journal publishes systematic and scoping review protocols, diverse types of systematic reviews, and scoping reviews covering multi-disciplinary healthcare-related topics that follow rigorous methodology and methods developed by JBI. Fully indexed in Embase®, MEDLINE®, and CINAHL®.



[Click on the image to open](#)

## JBI Collaboration Entities



- Evidence Based Practice
- Research Institute since 1996
- Royal Adelaide Hospital and the University of Adelaide
- Not-for-profit
- 70+ Centres and Groups
- >7000 members in over 47 countries
- International collaboration of health scientists, health professionals and health researchers
- To improve global health through providing point-of-care access to:
  - Evidence databases
  - Decision support systems
  - Implementation, evaluation and continuous improvement tools

# Why JBI?



- JBI's synthesis work helps providers understand the content and put it in their context.
- Healthcare organizations are facing many pressures – evidence-based information saves time and money.
- Up-to-date and practical evidence informs clinical decision making.
- Used as a tool for teaching EBP and it provides a connection between research and practice that is excellent.

# JBI Nodes (Groups)

*\* Click in the [Aged Care](#) mode to see the experts that have been assigned to manage its content.*

1. Aged Care\*
2. Burn Care
3. Cancer Care
4. Diagnostic Imaging
5. Emergency and Trauma
6. Health Policy
7. Infection Control
8. Mental Health
9. Musculoskeletal
10. Pediatrics
11. Palliative Care
12. Reproductive Health
13. Surgical Services
14. Urinary



15. Wound and Skin Care

**New**

Adolescents

Blood Disorders

Cardiovascular

Critical Care

Dental and Oral Care

Endocrine and Diabetes

Family Health

Informatics

Neonatal

Nervous System

Respiratory



# 5 full text publications

- Guidelines to implement in clinical practice
  - Evidence Summaries
  - Evidence Based Recommended Practice
  - Best Practice Information Sheets

## Detailed documents for further investigation

- JBI Systematic Reviews-Journal Linking

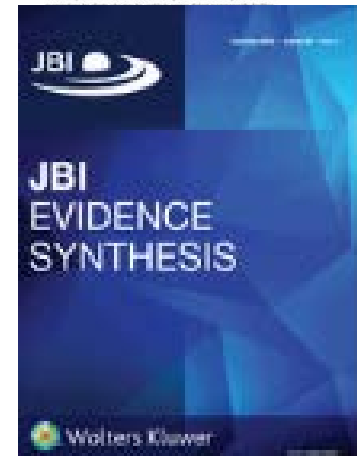
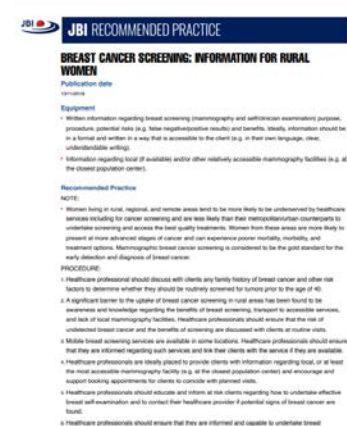
 [Article as PDF \(650KB\)](#)

- JBI Systematic Review Protocols

 [Article as PDF \(650KB\)](#)

- JBI Evidence Synthesis


 [Article as PDF \(1482KB\)](#)



# Evidence Summaries

- Short abstracts starting with a **PICO question** that summarize existing international evidence on common health care interventions and activities
- Based on structured searches of the literature and selected evidence-based health care databases

JBI Grades of Recommendation	
A 'strong' recommendation for a certain health management strategy where:	
Grade A	1. it is clear that desirable effects outweigh undesirable effects of the strategy;
	2. where there is evidence of adequate quality supporting its use;
	3. there is a benefit or no impact on resource use, and
	4. values, preferences and the patient experience have been taken into account.
A 'weak' recommendation for a certain health management strategy where:	
Grade B	1. desirable effects appear to outweigh undesirable effects of the strategy, although this is not as clear;
	2. where there is evidence supporting its use, although this may not be of high quality;
	3. there is a benefit, no impact or minimal impact on resource use, and
	4. values, preferences and the patient experience may or may not have been taken into account.



# JBI EVIDENCE SUMMARY

## LOW BACK AND PELVIC PAIN (PREGNANCY): PREVENTION

**Author**  
Dr Ashley Whitehorn BAppSc BHealthSc (Hons) PhD

**Publication date**  
08/04/2020

**Question**  
What is the best available evidence regarding interventions to prevent low back and/or pelvic pain in pregnant women?

**Clinical Bottom Line**

It is estimated that around half of all pregnant women experience low back pain (LBP), or pelvic girdle pain (PGP), together known as lumbopelvic pain (LBPP) during pregnancy.<sup>1</sup> LBP is pain or discomfort between the 12<sup>th</sup> rib and the gluteal fold, while PGP is pain experienced between the iliac crest and gluteal fold, particularly around the sacroiliac joints. LGPP can negatively affect sleep, social and sexual life, work and mental health.<sup>1</sup> A systematic review and meta-analysis investigated the effect of prenatal exercise (frequency, intensity, type and volume) on maternal LBP, PGP, and LBPP during pregnancy and in the postpartum period. Exercises included yoga, aerobic exercise, strength training and combination resistance and aerobic exercise, with the majority of interventions starting in the second and ending late in the third trimester. Exercise frequency ranged from one to 14 times per week, duration ranged from 20 to 75 minutes per session and exercise intensity ranged from low to vigorous. The meta-analysis of randomized controlled trials (RCTs) (n=13) found that overall prenatal exercise was not associated with lower risk of pain (LBP, PGP or LBPP) during pregnancy compared to no exercise. A single study found lower risk of LBP when participating in water based exercise compared to land based exercise, although there was no effect on PGP. The meta-analysis did find an inverse association between prenatal exercise and pain severity suggesting that although women who exercised did experience pain, the severity was less than women who did not exercise. Authors concluded that there is very low level evidence supporting exercise to reduce the severity of pregnancy related LBP, PGP and LBPP.<sup>1</sup> (Level 1)

- A systematic review and meta-analysis investigated the effect of exercise for the prevention of low back and pelvic girdle pain (and associated sick leave) during pregnancy. The exercise interventions included water gymnastics, sitting pelvic tilt exercises, an energy expenditure exercise, strength training (general and targeted abdominal, hamstring and gluteal muscles), low impact aerobics and a combination of all

**Best Practice Recommendations**

Best Practice Recommendations

Women should be encouraged to participate in regular exercise during pregnancy as there may be a small protective effect for low back pain. (Grade B)

# Recommended Practices

Interventions or procedures that describe **step by step** and recommend a practice on a selected clinical topic; developed by an expert clinical review panel to confirm clinical relevance and currency; based on Evidence Summary.

- Recommended Practice
- Equipment List
- Occupational Health & Safety Provisions

## Occupational Health and Safety Considerations



BACK CARE  
FOLLOW MANUAL  
HANDLING PROCEDURES



CLINICALLY COMPETENT  
PROFESSIONALS ONLY



ATTENTION  
SPECIAL HANDLING  
OR APPROPRIATE  
PRECAUTIONS



EDUCATION  
COMPLETION REQUIRED



PATIENT EDUCATION  
REQUIRED



RESIDENT EDUCATION  
REQUIRED



## JBI RECOMMENDED PRACTICE

### NON-SPECIFIC LOW BACK PAIN: SUPERFICIAL HEAT

#### Publication date

10/04/2020

#### Equipment

- Patient's medical record
- Sensation testing equipment
- Heat Wrap/Hot Pack

#### Recommended Practice

##### PRECAUTIONS:

- Neurological disorders
- Kidney problems
- Diabetes mellitus
- Bleeding diseases
- Inflammatory disease
- Abnormal heat sensitivity
- Peripheral vascular disorders
- Active tuberculosis
- Skin lesions (e.g. rash, bruising, laceration)
- Areas where heat rub was applied
- May refer to manufacturer's guidelines for precautions

##### CONTRAINDICATIONS:

- Circulatory insufficiency
- Risk of dissemination (malignancy, systemic disease)
- Possible exacerbation of existing conditions
- Loss of skin sensation (hot or cold)

##### PROCEDURE:

•

1. Conduct an appropriate assessment to determine individual patient needs and any contraindications/ precautions.
2. Explain procedure to patient and gain consent. Warn patient regarding potential risks (e.g. burns), and that the sensation must be comfortable. Therapist should monitor the effects during the treatment and stay present. If therapist needs to leave the patient, he/she should be provided with a warning device or if able,



# Systematic Reviews and Systematic Review Protocols

## ■ Systematic Reviews

### Analysis of all the available literature

- Develop a question
- Establish inclusion/exclusion criteria
- Develop a strategy to comprehensively search for the evidence
- Appraising the quality of each paper
- Extracting the findings of included papers
- Synthesizing the findings of included papers

## ■ Systematic Review Protocols

- A document that will become a systematic review

Links from the record open the article in the JBI journals

The screenshot displays the JBI Evidence Synthesis website interface. At the top, it identifies the journal as 'JBI Evidence Synthesis', Volume 18(3), pages 368-642, March 2020, with ISSN 2689-8381 and copyright © 2020 Joanna Briggs Institute. It includes social media links for RSS, eTOC, and Email Jumpstart.

The main content area shows a record for the article: 'Risk factors for osteoporosis in adults with serious illnesses: a comprehensive systematic review'. The authors listed are Xie Huijing, RN, BHS, PhD<sup>1</sup>; Lu Qiu Fen, BSc, RN<sup>1</sup>; Yuan Peng, BSc, RN, RMN<sup>1</sup>; Wang Jia, BSc, RN, RMN<sup>1</sup>; Serena Loh, BSc, RN(Hons)<sup>2</sup>; Chuai Pei Shan, BSc, RN<sup>2</sup>; and Ragni Parasuram, BSc, RN, RMN<sup>2</sup>. The affiliations are: 1. The Joanna-Briggs Institute-Institute of Mental Health (Singapore) Centres Practices in Mental Health Care; a collaborating centre of the Joanna Briggs Institute; 2. Mount Elizabeth Hospital, Singapore.

The corresponding author is Xie Huijing, with email [hui\\_ting\\_xie@imh.com.sg](mailto:hui_ting_xie@imh.com.sg).

The 'Executive summary' section includes a 'Background' paragraph: 'Mental illnesses are a major public health concern. In people with mental illnesses, the prevalence of medical conditions is often higher than the general population. Stigma and misconceptions of mental illnesses have led to the under-diagnosis and treatment of many medical conditions. One such medical condition is osteoporosis. Osteoporosis is a progressive, systemic metabolic bone disorder, characterized by low bone mineral density (BMD). The presence of osteoporosis has been associated with increased fragility and susceptibility to fractures, often leading to high health, social and economic burden. In order to effectively prevent or treat osteoporosis or related fractures in people with mental illnesses, one must aim to understand the risk factors so that targeted interventions to abolish or reduce the risk.' It also includes an 'Objectives' paragraph: 'The objective of the review is to synthesize the best available evidence factors for osteoporosis and fractures as a consequence of osteoporosis years and over.'

At the bottom of the record, it states: 'Huijing et al. Risk factors for osteoporosis in adults with serious mental illnesses: a comprehensive review © the authors 2014. doi:10.11124/jbisr-2014-1488'.

On the right side, there is a 'SYSTEMATIC REVIEW' section for the article: 'Nurse experiences of medication administration to people with swallowing difficulties living in aged care facilities: a systematic review of qualitative evidence'. The authors are Aida Sefidani Forough<sup>1</sup>, Simon Y.M. Wong<sup>1</sup>, Esther T.L. Lau<sup>2,3</sup>, Jose Manuel Serrano Santos<sup>1,4</sup>, Greg J. Kyle<sup>1</sup>, Kathryn J. Steadman<sup>1,5</sup>, Julie A.Y. Cichero<sup>1,6</sup>, and Lisa M. Nissen<sup>1</sup>. The affiliations are: <sup>1</sup>School of Clinical Science, Faculty of Health, Queensland University of Technology, Brisbane, Australia; <sup>2</sup>QIMR Centre for Evidence-Based Health Research; <sup>3</sup>James Cook Institute of Health, Evidence, Australia; and <sup>4</sup>School of Pharmacy, University of Queensland, Australia.

The 'ABSTRACT' section states: 'Objective: To identify nurses' experiences of administering oral medications to residents of aged care facilities (ACFs) with swallowing difficulties.'

Below the abstract, there are links for 'Abstract', 'Cite', 'My Projects', and 'Annotate'. At the bottom right, there are links for 'Abstract Reference', 'Complete Reference', 'JBI Database PDF', and 'JBI Topic Request'.

# Best Practice Information Sheets

- Based on the results and recommendations of many systematic reviews.
- Provides access to key issues & recommendations that have been collected from a large amount of material

The new JBI Levels of Evidence and Grades of Recommendation are now being used for all JBI documents as of the 1st of March 2014.

	Levels of Evidence - Effectiveness
Level 1 - Experimental Designs	Level 1.a - Systematic review of Randomized Controlled Trials (RCTs) Level 1.b - Systematic review of RCTs and other study designs Level 1.c - RCT Level 1.d - Pseudo-RCTs
Level 2 - Quasi-experimental Designs	Level 2.a - Systematic review of quasi-experimental studies Level 2.b - Systematic review of quasi-experimental and other lower study designs Level 2.c - Quasi-experimental prospectively controlled study Level 2.d - Pre-test - post-test or historic/retrospective control group study Level 2.e - Systematic review of comparable cohort studies Level 2.f - Systematic review of comparable cohort and other lower study designs
Level 3 - Observational - Analytic Designs	Level 3.a - Cohort study with control group Level 3.b - Case - controlled study Level 3.c - Observational study without a control group
Level 4 - Observational - Descriptive Studies	Level 4.a - Systematic review of descriptive studies Level 4.b - Cross-sectional study Level 4.c - Case series Level 4.d - Case study
Level 5 - Expert Opinion and Bench Research	Level 5.a - Systematic review of expert opinion Level 5.b - Expert consensus Level 5.c - Bench research/ single expert opinion



The JOANNA BRIGGS INSTITUTE

Aged care

## Best Practice

Evidence-based information sheets for health professionals

### Family involvement in decision making for people with dementia in residential aged care

**Recommendations\***

- Residential aged care staff could ascertain the preferred degree of involvement of family caregivers in decision making about the resident. **(Grade B)**
- Residential aged care staff can ensure that they develop and maintain effective dialogue with the resident's family about the resident's health status. **(Grade B)**
- Residential aged care staff can provide support for family caregivers when making decisions about the resident. **(Grade B)**
- Residential aged care staff can provide opportunities for reciprocal sharing of information with the resident's family about the resident's illness, treatment options and quality of life as well as their life story, values and wishes. **(Grade B)**

\*For a definition of JBI's 'Grades of Recommendation' please see the last page of this sheet

**Information Source**

This Best Practice Information Sheet has been systematic review published in 2013 in the J. Systematic Reviews and Implementation Reports. review report is available from the Joanna ([www.joannabriggs.org](http://www.joannabriggs.org)).

JBI Grades of Recommendation*	
<b>Grade A</b>	A "strong" recommendation for a certain health management strategy where (1) it is clear that desirable effects outweigh undesirable effects of the strategy; (2) where there is evidence of adequate quality supporting its use; (3) there is a benefit or no impact on resource use, and (4) values, preferences and the patient experience have been taken into account.
<b>Grade B</b>	A "weak" recommendation for a certain health management strategy where (1) desirable effects appear to outweigh undesirable effects of the strategy, although this is not as clear; (2) where there is evidence supporting its use, although this may not be of high quality; (3) there is a benefit, no impact or minimal impact on resource use, and (4) values, preferences and the patient experience may or may not have been taken into account.

# JBI levels of evidence

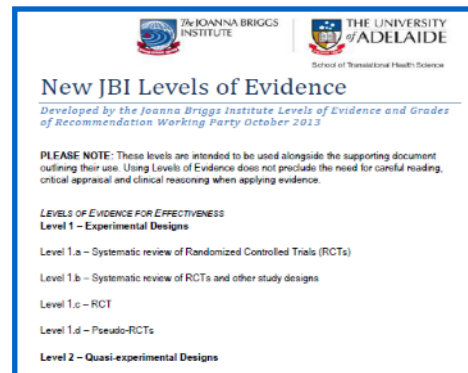
## ■ JBI Levels of Evidence (PDF)

The JBI levels of evidence help describe the strength of the evidence found in the Evidence Summaries. JBI assigns levels 1 to 5 [1 systematic reviews, 5 expert opinions].

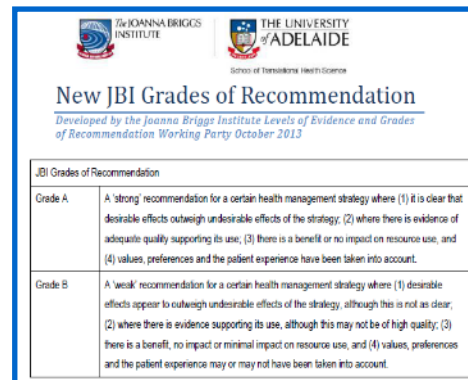
## ■ JBI Grades of Recommendation (PDF)

Grading system that helps professionals to quickly establish the importance of the evidence. JBI assigns a level \*[A or B] to its recommendations found within the Best Practice Sheets and the Evidence Summaries

\* Some older Best Practice Sheets will continue to show A, B, C, D grades.



[Click on the image](#)



[Click on the image](#)

# VHA National Desktop Library

VA » Health Care » VHA National Desktop Library » Training

## VHA National Desktop Library

- HeinOnline Knowledge Nook Recorded
- Joanna Briggs Institute Evidence-based Practice (EBP) for VA Clinical Staff Resource Page for JBI Link Knowledge Nook Recorded
- Lexicomp Online for Dentists Knowledge Nook Recorded
- Natural Medicines Knowledge Nook Recorded
- Nutrition Databases (eNCP) Knowledge Nook Recorded
- Ovid Clinical Edge Anatomy.tv Training site\* Anatomy.tv Resource Center Knowledge Nook Recorded

Find an Online Journal or Book

The drop down menu below contains links to your library's unique portal where you can search or browse for online journals and books and get connected to the full text.

Selecting a medical center will open a new window. Close the window to return to this page.

## JBI Resource Page

JBI is one of the world's leading evidence-based practice (EBP) organizations. JBI's evidence-based practice resources assist healthcare professionals to implement an effective evidence-based practice program to provide the best possible patient care.

[View a list of new JBI Reports added last month](#)

[Email the Monthly flyer of new JBI Reports to me](#)

[JBI Evidence Synthesis](#)

[JBI Overview for Clinicians - Session Recording](#)

[JBI Resource Center](#)

[Athens Login to JBI](#)

### Search JBI EBP Database:

Publication Types:

### Popular Searches:

Click to search the JBI EBP database for these topics:

[PTSD - Evidence Summaries](#)

[Diabetes Prevention - Evidence Summaries](#)

[Falls - Recommended Practices](#)



[Help and Training](#)

### Browse by Publication Type:

- Best Practice Information Sheets
- Evidence Summaries
- Recommended Practices
- Systematic Review Protocols
- Systematic Reviews

### Evidence-Based Practice Tools:



JBI SUMARI

SUMARI provides a framework for managing the systematic review project step-by-step.

[SUMARI Tutorials](#)

[SUMARI Reviewer's Manual](#)



# JBI Resource Center

- [JBI Resource Center](#)
  - Access additional JBI information, videos, widgets...

## JBI Resource Center

[Home](#) [COVID-19](#) [Training Videos](#) [User Guides](#) [Access Options](#) [Contact](#) [About JBI](#)

**Welcome to the JBI Resource Center**


This site provides many support and training options to you as a JBI member.

There are pre-recorded training videos for the JBI database and tools. You can view these videos directly from this webpage or, copy the video links for your own site.

There are also a range of intuitive JBI manuals and Ovid quick reference cards available for direct download.

The Ovid Support team can help to simplify the access to your JBI subscription by offering a selection of personalised JBI portals and widgets for your specific institution.

If you have any questions or requests, please don't hesitate to contact [Ovid Support](#) team.

A graphic for the JBI Resource Center. It features a blue square with the text 'JBI Resource Center' in white. Below the text is a white target icon. The background of the graphic shows a blurred image of a computer keyboard and a pair of glasses.

[Click on the image](#)



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# JBI Tools

# JBIR Tools Factsheets – click image to access

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## JBIR SUMARI



**NEW  
& IMPROVED**




The new and improved **JBIR SUMARI** includes features such as automatic generation of PRISMA 2020 flow diagram; the ability to screen studies within multiple study screeners, including logic to resolve conflicts, and to merge studies; separation of study screening to facilitate both title and abstract screening, and screening at the full text level; and proportional meta-analysis.

### JBIR's premier software for the systematic review of literature

The System for the Unified Management, Assessment and Review of Information (SUMARI) is JBIR's premier software program that provides end-to-end support for researchers and health professionals to conduct a systematic review from anywhere in the world. **JBIR SUMARI** is designed to assist researchers and practitioners in fields such as health, social sciences and humanities in an easy-to-use web application.


**JBIR SUMARI** supports the entire review process, from protocol development to writing the review report, and includes team and contributor management for effective and efficient collaboration.

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## JBIR PACES

(Practical Application of Clinical Evidence System)



Streamlining healthcare quality improvement projects for better patient care



Developed by JBIR—world leaders in helping organizations use evidence to inform clinical decision-making—**JBIR PACES** is an all-in-one evidence-based audit and feedback software solution perfect for quality improvement, audit, or evidence-based practice projects.

### JBIR's Intuitive, Customizable Software for Improving Outcomes

- Ideal for healthcare practitioners, researchers, and students and faculty at hospitals, clinics, long-term care facilities, and other institutions
- Step-by-step approach to implementing behavior and practice change
- Rapid access to the best available evidence in the JBIR EBP Database (also on Ovid)
- Easily searchable audit criteria, including outcome measurements, quality indicators, and other performance measures—modify and create your own!
- Built-in calculators make statistics easy!
- Customizable data presentations, plus automatic reporting
- Accommodates large-scale, organization-wide initiatives plus smaller, more individual projects
- Integrated with JBIR Evidence Based Summaries, Recommended Practices, and BPI Sheets

# JBI on Ovid®: JBI EBP Tools



## JBI SUMARI

Develop, conduct and report on systematic reviews of multiple research papers.

[Learn More](#)

[Bookmark Tool](#)



## JBI PACES

User-friendly tool that makes it easy for health professionals to conduct efficient, time saving, evidence based clinical audits and change practice.

[Learn More](#)

[Bookmark Tool](#)

# The JBI Systematic Review Suite



- A tool that permits researchers to undertake in-depth quality systematic reviews of the literature for a particular topic

[SUMARI Video Tutorial](#)

# JBI PACES



- A tool that allows users to undertake a clinical audit for evidence-based interventions.
- There are currently 160 predefined interventions available.

[PACES Video Tutorial](#)

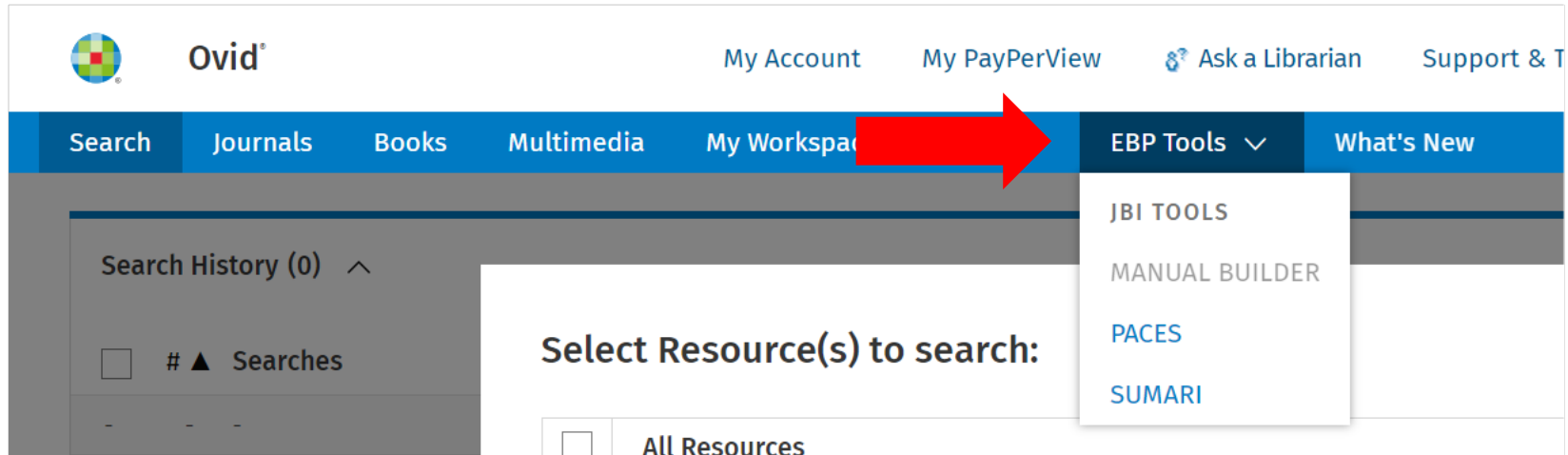


# JB I Tools login options

Step 1: Log into Ovid via your institution or library.

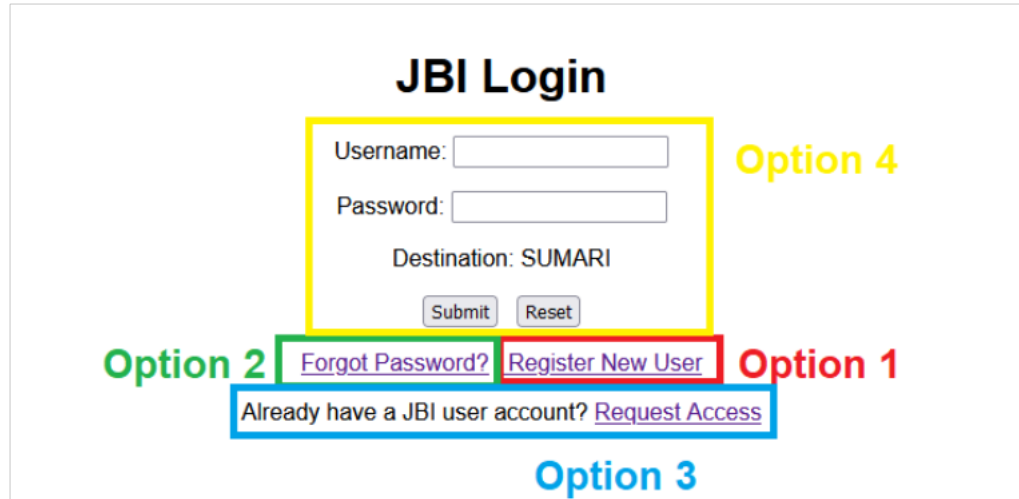
Step 2: Within Ovid Select "EBP Tools" from the Dark blue navigation bar at the top of the Ovid screen

Then select either "SUMARI" or "PACES".



# JBI Tools login options

[Click here](#) for step-by-step instructions for each option



**JBI Login**

Username:

Password:

Destination: SUMARI

**Option 2** [Forgot Password?](#) [Register New User](#) **Option 1**

[Already have a JBI user account? Request Access](#)

**Option 3**

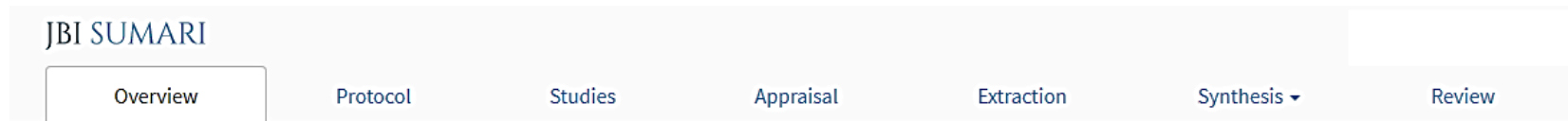
# What is SUMARI ?

- What is SUMARI?

The System for the Unified Management, Assessment and Review of Information

- The JBI SUMARI is designed to facilitate the entire review process, from protocol development, team management, study selection, critical appraisal, data extraction, data synthesis and writing a systematic review report

The process of creating a systematic review involves the phases listed across the top of the screen



- JBI SUMARI supports the entire review process, including allowing you to manage review teams and contributors to your review. It's now an online web-based application so there's no need to download and install any software. The new SUMARI supports more review types

# JBI PACES

Evaluate  
practice  
changes  
and patient  
outcomes



A tool that allows users to undertake a clinical audit for evidence based interventions.

There are currently 160 predefined interventions available.

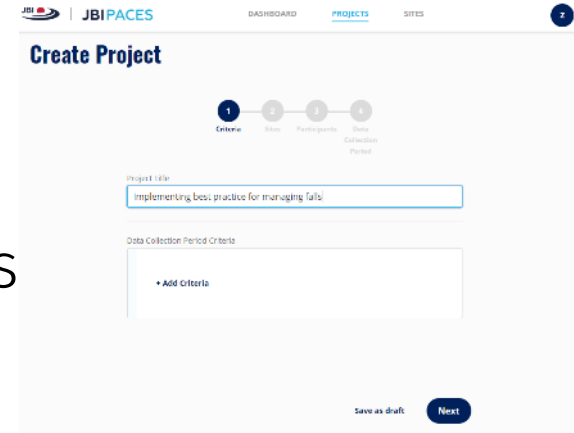
Pactical  
Application of  
Clinical  
Evidence  
System



# JBIPACES

Simple to use software to support:

- Evidence-based practice
- Quality improvement projects
- Different types of research projects
- Audit and feedback cycles
- Evidence implementation
- Collection of outcome data



The screenshot shows the 'Create Project' interface of the JBIPACES software. At the top, there is a navigation bar with 'JBIPACES' and tabs for 'DASHBOARD', 'PROJECTS' (which is active), and 'SITES'. A progress indicator shows four steps: 1. Criteria (active), 2. Sites, 3. Participants, and 4. Data Collection Period. The main form area has a 'Project title' field containing 'Implementing best practice for managing falls'. Below it is a 'Data Collection Period Criteria' section with an 'Add Criteria' button. At the bottom right, there are 'Save as draft' and 'Next' buttons.

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# What has changed?

## MODERN

- Complete rebuild with new, modern interface tech

## INTUITIVE

- Simpler interface, less 'clunky'

## FLEXIBLE AND CUSTOMISABLE

- Can modify or create your own outcome measurements, quality indicators, performance measures or audit criteria
- Can be used for a broad range of

projects

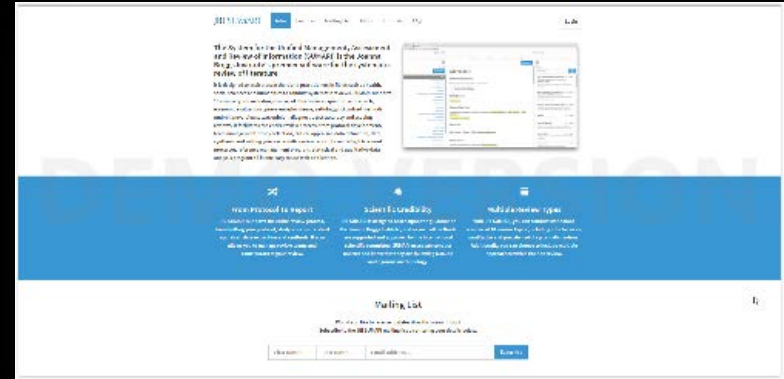
- Can export data into various formats
- Customise presentation of reports and run multiple analyses

## LATEST EVIDENCE AND APPROACHES

- Fully integrated with JBI EBP Database
- Facilitates the implementation of evidence into practice

# Where to find out more...

- SUMRI
- <http://joannabriggs.org/sumari.html>
- <https://www.jbisumari.org/> and
- <https://www.jbisumari.org/#tutorials>
- PACES
- [https://www.youtube.com/watch?v=wU\\_lz0jCJbg](https://www.youtube.com/watch?v=wU_lz0jCJbg)
- <https://www.youtube.com/watch?v=mJfYVDieZms>
- <https://paces.jbi.global/>



# Ovid Tools & JBI Resources Portal

The screenshot displays the Ovid Tools & Resources Portal. The header includes the Wolters Kluwer logo and the portal title. A green 'Ovid' button is in the top right. Navigation links for 'What's New on Ovid', 'Contact Ovid Support', and 'Contact Ovid Trainer' are present. The main content area features a grid of icons for Home, Training, Tools, Resources, Services, and Customer Support. The 'JBI Resource Center' is highlighted, showing a list of training videos and resources. The JBI logo is visible on the right side of the page.

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Ovid Tools & Resources Portal

Ovid

Home

Training

Tools

Resources

Services

Customer Support

JBI Resource Center

Home

Training Videos

User Guides

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About JBI

Training Videos

The following JBI tutorials are available for the Ovid platform.

Watch videos directly from this site or set links to the videos in your own webpage.

Click on the **i** icon to see more information about each tool.

Please note that JBI SUMARI training is conducted by JBI in Adelaide, Australia and may incur a charge.

JBI EBP Database

- Introducing the JBI EBP Database **i**
- Beyond the Search: Maximizing the Quality of Systematic Reviews **i**

JBI EBP Software

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<https://tools.ovid.com>

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For additional information  
or assistance contact our  
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