

\Box Joanna

Joanna Briggs Institute (JBI)

- 附屬於澳洲阿德雷德大學
- 國際公認實證實務資訊權威機構之一
- 其開發的實證基礎實務模式,被醫療照護產業視為基準指標。
- 與全球 70 多個實證照護中心合作,提供經由研究分析、評價、專家評論編輯而成,同時兼顧研究的質與量之實證實務資訊。

· JBI 的資源特色

- JBI 清楚的提供醫護人員可以立即運用在臨床的作法
- 非提供冗長的治療方式比較與研究過程。
- 在國際間醫療單位的使用經驗上,能確實地大大提高工作上的效率與病患安全。

Part I -JBI EBP Database

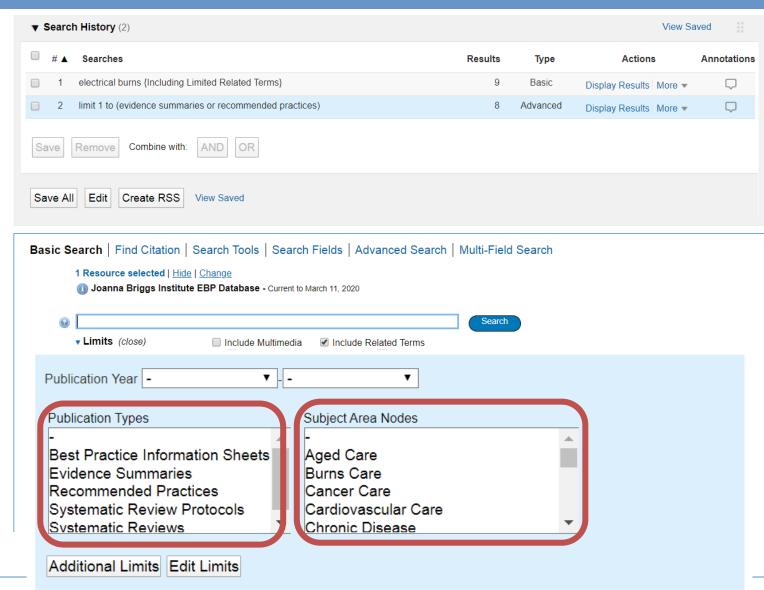
The JBI EBP Database is full text evidence based material from the Joanna Briggs Institute

JBI EBP 資料庫是來自Joanna Briggs Institute 的臨床實證全文資料庫

使用影片說明

JBI EBP Database 實證護理資料庫

- 收錄五種全文出版品類型
 - Evidence Summaries
 - Recommended Practices
 - Best Practice Information Sheets
 - Systematic Reviews
 - Systematic Reviews Protocols
- 內容分佈在18個主題中
 - 每種類型的出版物都有其不同的 使用需求。
 - 但大多數是可立即用於指導治療 和臨床指引的文獻。

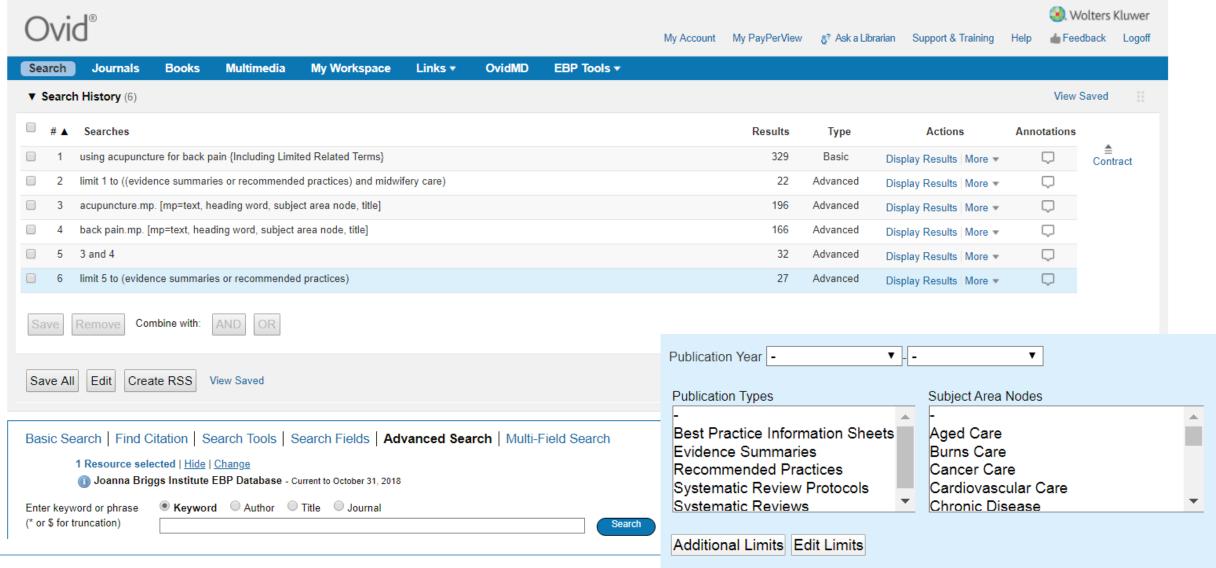




Aged Care 老年保健	Emergency & Trauma 急診與創傷	Pediatrics小兒科
Burns Care 燒傷護理	General Medicine一般用藥	Rehabilitation 復健
Cancer Care 癌症護理	Health Management & Assessment健康管理與評估	Renal Care腎臟護理
Cardiovascular Care心血管護理	Infection Control •感染控制	Surgical Services手術服務
Chronic Disease 慢性病	Mental Health精神健康	Tropical and Infectious Disease 熱帶和傳染病
Diagnostic Imaging 影像診斷	Midwifery Care助產護理	Wound Healing and Management 傷口癒合與管理

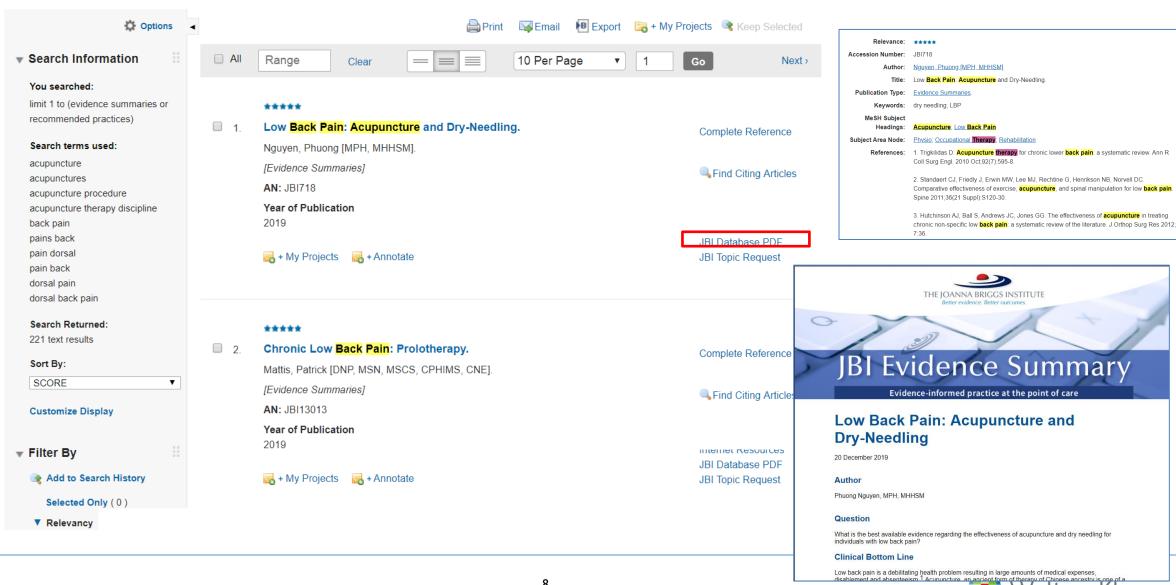
JBI EBP Database 收錄主題

資料庫檢索介面 - JBI EBP Database





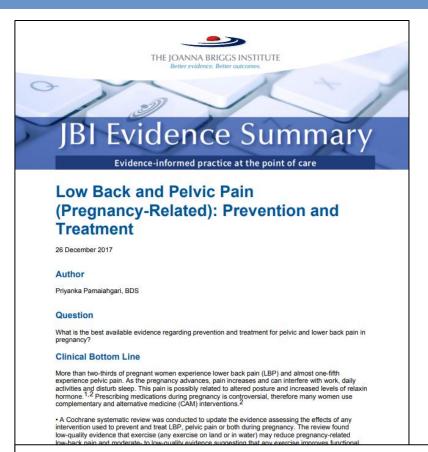
資料庫檢索結果 - JBI Database Results



文獻類型 - Evidence Summaries

- 針對常見臨床照護介入措施及方式, 提供國際上實證的簡短摘要
- 結構化的檢索文獻方式,用來查詢 實證照護資料庫

JBI Grades of Recommendation		
A 'strong' recommendation for a certain health management strategy where:		
	it is clear that desirable effects outweigh undesirable effects of the strategy;	
Grade A	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:		
	1. desirable effects appear to outweigh undesirable effects of the strategy, although this is not as clear;	
Grade B	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.	



Best Practice Recommendations

- Exercises that are tailored to the stage of pregnancy are recommended to reduce evening pelvic pain or lumbopelvic pain. (Grade B)
- Water-based exercise should be considered for inclusion in a care plan to assist in reducing lower back pain, based on patients' needs and the context. (Grade B)
- Craniosacral therapy, osteomanipulative therapy or a multi-modal intervention (manual therapy, exercise and education) may be considered in reducing pregnancy-related pelvic and lower back pain. Clinical judgement and individual patient preference should inform the decision to use these interventions. (Grade B)



文獻類型 - Recommended Practices

- 提供介入指引及程序, 針對選定的 臨床主題作進一步的說明及建議
 - Recommended Practice 推薦做法
 - Equipment List 設備清單
 - Occupational Health & Safety
 Provisions 相關安全規定
 - Evidence Summary 臨床證據摘要

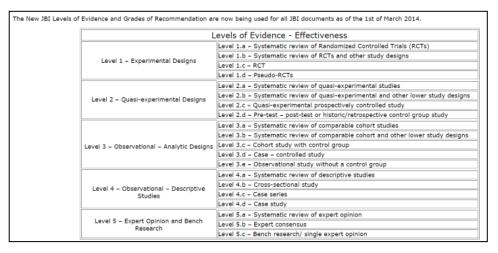


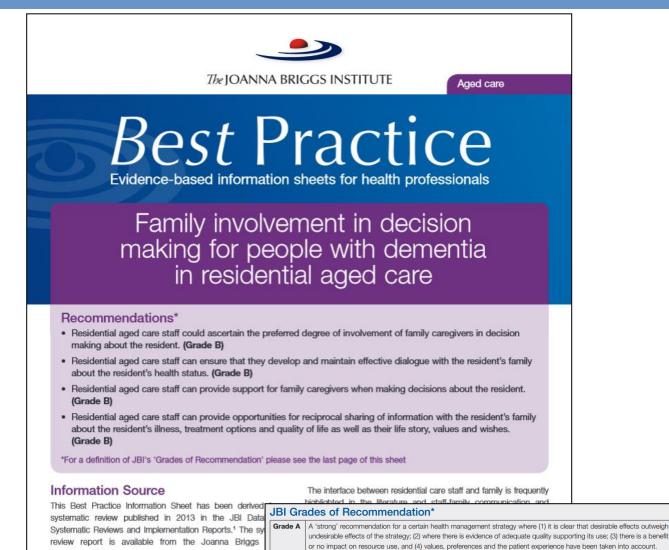




文獻類型 - Best Practice Information Sheets

- 根據大量的systematic reviews 文獻的結果,彙整出一個建議方案
- 從大量數據中收集的關鍵問題和 建議的訪問
- 2020 新文獻類型





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.

(www.joannabriggs.org).

文獻類型 - Best Practice Information Sheets

Systematic Reviews

- 文獻的分析
 - 提出一個問題
 - 建立收錄原則
 - 建立廣泛搜索實證的策略
 - 評估每篇文章的質量
 - 擷取文章中的重點
 - 綜述各篇文章中的要點

Systematic Review Protocols

• 文獻背景資訊和進行系統化綜述的計劃

JBI Library of Systematic Reviews

2009: 7(14):583-614

A meta-synthesis of women's perceptions and experiences of breastfeeding support

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- 2. Research Midwife, Centre for Research in Midwifery and Childbirth, Thames Valley University, Paragon House, Boston Manor Road, Brentford, TW8 9GA, UK and Deputy Director, Thames Valley Centre for Evidence-Based Nursing & Midwifery.
- 3. Senior Lecturer, Faculty of Nursing and Health, Avondale College, NSW, Australia and Adjunct Research Fellow, School of Nursing and Midwifery, University of Western Sydney, Sydney,
- 4. Professor of Anthropology & Health, Centre for Research in Midwifery and Childbirth, Thames Valley University, London, UK and also visiting professor, NMAHP Research Unit, University of
- 5. Professor of Maternal and Infant Health and Director of Maternal and Infant Nutrition and Nurture Unit (MAINN). School of Public Health and Clinical Sciences, University of Central Lancashire, England, Adjunct Professor, University of Western Sydney

Corresponding author: Sarah Beake, Centre for Research in Midwiferv and Childbirth, Thames Valley University, Paragon House, Boston Manor Road, Brentford, TW8 9GA, UK. E-mail: Sarah.Beake@tvu.ac.uk

Executive Summary

Background- Breastfeeding conveys significant health benefits to infants and mothers yet in many affluent nations breastfeeding rates continue to decline across the early months following birth. Both peer and professional support have been identified as important to the success of breastfeeding. What is not known are the key components or elements of support that are effective in increasing the duration of breastfeeding?

Objectives- The aim of this meta-synthesis was to examine women's perceptions and experiences of breastfeeding support, either professional or peer, in order to illuminate the components of support that they deem "supportive". A secondary aim was to describe any differences between components of Peer and Professional support.

Selection criteria- Both primiparous and multiparous women who initiated breastfeeding were included in the study. Studies that included a specific demographic sub-group, such as

Schmied et al. © the authors 2009 Breastfeeding support



JBI 實證護理資料庫客製化連結



醫療照護專業人士及機構殷切期盼根據最新實證研究結果、醫療照護專業及 患者偏好,為患者提供最高品質的照護。

Joanna Briggs Institute (JBI) 是全球領先的實證式實務 (EBP) 機構之一,所提供的最新資源正能幫助他們達成上述目標,而現在透過 Ovid 上線了!

JBI 的實證基礎實務模式被醫療照護產業視為基準指標,鼓勵醫療照護專業人士採取有效的實證式實務方案,盡可能提供最高品質的患者照護。

實務所需資訊:

JBI 的內容資料庫涵蓋獨一無二的豐富資訊,可協助醫療照護專業人士的實證 式實務工作。

- 實證摘錄 -針對常見醫療照護干預和作業的現有國際文獻進行摘述的文獻評論
- 實證式建議實務 -以豐富實證資訊為基礎的程序資料庫,針對各種臨床 主題說明和/或建議實務



背痛復健 - 建議措施

團體治療 - 精神健康節點

http://access.ovid.com/demo/jbi/lp/zh-t.htm



專家檢索:

PART 2- JBI SUMARI

A template based solution for creating systematic reviews 提供建立 Systematic review 的範本

使用影片說明

What is SUMARI?

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

 新的JBI SUMARI 目的在促進整個審查過程,包含:從開始建置、團隊管理、研究選擇、內容評估、 數據匯整、數據整合和編寫系統審查報



The process of creating a systematic review involves the phases listed across the top of the screen 依據上述的階段開始進行 systematic review 的建置步驟

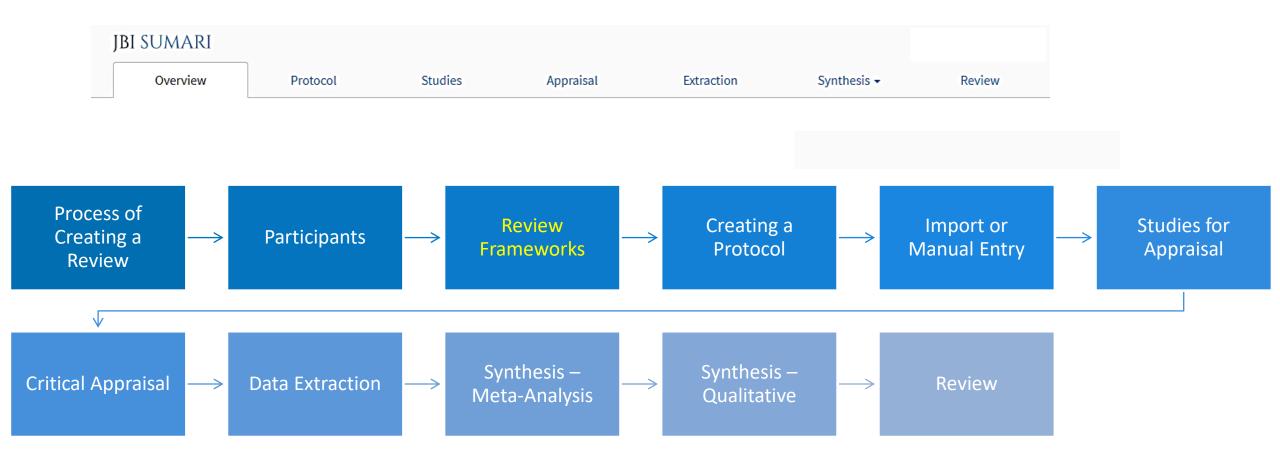
What has changed?

- JBI SUMARI 支援完整的閱審流程,有效的管理團隊並產出相關Review文獻資料。
- 線上平台應用,不需要安排其他工具,新的SUMARI同時支援多種Review類型



SUMARI 建置流程

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





What is SUMARI?

- The new SUMARI now supports more review types. What are the review types?
- Effectiveness Review
- Qualitative Review
- Cost/Economic Review
- Prevalence/incidence Review
- Diagnostic test accuracy
- Etiology/risk Review
- Text/opinion Review
- Mixed methods *
- Umbrella/overviews
- Scoping reviews
- Custom Review *

The Review Frameworks may be qualitative or quantitative, the steps that we see later, and the types of analysis and results are selected during the review

審查框架可能是質化的或量化的,我們稍後看到的步驟,以及在審查期間選擇的分析和結果類型

^{*} you can choose to include multiple approaches within the one review.



Filter studies...

Barkley, R. A.; Hastings, J. E.; Jackson Jr, T. L. The effects of rapid smoking and hypnosis in the treatment of smoking behavior Carmody, T. P.; Duncan, C.; Simon, J. A.; Solkowitz, S.; Huggins, J.; Lee, S.; Delucchi, K.	1977	➢ Edit S Revert ➤ Delete
Carmody T. D. Duncan C. Simon, I. A. Solkowitz, S. Huggins, I. Lee, S. Delucchi, K.		
Hypnosis for smoking cessation: A randomized trial	2008	➢ Edit S Revert ➤ Delete
Elkins, G.; Marcus, J.; Bates, J.; Hasan Rajab, M.; Cook, T. Intensive hypnotherapy for smoking cessation: A prospective study 1	2006	≯Edit ♥ Revert ★ Delete
Hyman, G. J.; Stanley, R. O.; Burrows, G. D.; Horne, D. J. Treatment effectiveness of hypnosis and behaviour therapy in smoking cessation: A methodological refinement		✓ Edit S Revert ➤ Delete
Kaufert, J. M.; Rabkin, S. W.; Syrotuik, J. Health beliefs as predictors of success of alternate modalities of smoking cessation: Results of a control	1986 Illed trial	≯Edit ♥ Revert ★ Delete
Neufeld, V.; Lynn, S. J. A single-session group self-hypnosis smoking cessation treatment: a brief communication	1988	≯Edit S Revert ★ Delete
Pederson, L. L.; Scrimgeour, W. G.; Lefcoe, N. M. Comparison of hypnosis plus counseling, counseling alone, and hypnosis alone in a community service withdrawal program	1975 e smoking	≯ Edit S Revert ★ Delete
Pederson, L. L.; Scrimgeour, W. G.; Lefcoe, N. M. Variables of hypnosis which are related to success in a smoking withdrawal program	1979	➢ Edit S Revert ➤ Delete





Incorporation of rapid smoking in a community service smoking withdrawal program



PART 3 - JBI PACES

PACES 線上的持續質量改進工具,旨在幫助衛生保健人員及衛生保健機構將最佳證據應用到臨床實踐中,以獲得最有利於患者的效果。該系統是通過臨床質量審查(clinic audit)實現證據應用的工具,其基本原理是根據臨床問題,組建質量審查團隊,快速收集現有的最新最佳證據,制定護理質量審查指標,將實踐現狀與審查指標進行比較,明確實踐現狀與證據之間的差距。

使用影片說明



JBI PACES 收錄內容

在JBI的PACES系統中,已經收錄了320項臨床質量審查題目,涵蓋了:

- 老年、腫瘤、心血管、慢性病、重症、助產、兒科、腎臟疾病、 康復等18個領域的健康問題
- 為衛生保健人員開展臨床質量改進提供了證據和工具支持。

註:原文網址:https://kknews.cc/zh-tw/health/al95xx6.html



PART 3 - JBI PACES應用實例

一家老年照護機構的護理人員發現,該機構老年人在衛生間內跌倒的發生率較高,為減少護理院 老人衛生間內跌倒的發生率,該機構護理管理者應用PACES系統,快速檢索該領域的最新最佳證 據,並將該機構的現狀與最新證據進行比較。

- 該領域的證據指出,降低衛生間內跌倒的措施包括衛生間內鋪設防滑墊/防滑地磚、定期清理水漬、馬桶旁安裝垂直與水平的扶手、張貼醒目的防跌倒標記等。
- 但該機構的衛生間內僅在馬桶前放置了防滑地毯,沒有衛生間定期清理的記錄,馬桶旁也僅安裝了水平 位置的扶手,這些都提示該機構的現狀與最新最佳證據之間存在明顯差距。
- 護理人員依據PACES系統制定了預防老年人衛生間內跌倒的質量審查指標,開展為期半年的持續質量改進項目,將最佳證據引入該護理機構,改進了衛生間環境,降低了老年人衛生間內跌倒的環境風險。







- □ 確保最高質量的護理照護與患者治療效果
- □ 提高臨床照護能力和患者滿意度
- □ 減少健康照護醫療的地區性差異
- □ 降低醫療照護人員周轉率
- □ 降低醫療成本
- □ 提高投資回報率

