

Get your evidence-based program off the ground sooner than you think

Six steps to help your facility change the care it provides

A quick poll during HCPro's recent audioconference "Applying Evidence-Based Nursing: Successful approaches to Data-Driven Practice" revealed some intriguing numbers.

Listeners were asked where they were in their quest to bring evidence-based practice (EBP)—using the current best evidence to make decisions about the care of patients—to their facilities. The results showed that

- 37% were researching the topic
- 32% were designing a program
- 26% were implementing a program
- 5% had a well-established program

"I'm thrilled at those results," said **Melissa Fitzpatrick, RN, MSN, FAAN**, chief healthcare strategist at the SAS Institute in Cary, NC. "It shows that the topic is on everyone's mind."

But having it on the mind and having it in place are two very different things. Fitzpatrick and **Sally Gerard, RN, MSN, CDE, CCRN**, a clinical instructor of critical care at Stamford (CT) Hospital, tackled this gap during the audioconference, showing how to take EBP from idea to reality.

Sowing the evidence-based seeds

"In order to start the culture shift to EBP, there has to be interest," said Gerard. "You want to stimulate interest on the staff from the very beginning, and you can do it in a variety of ways." Gerard suggested the following:

- Nursing conferences
- Focus groups
- Journal clubs
- Recognition programs (e.g., career ladders)
- Unit bulletin boards covered with articles

"There should be something visual on the unit to bring [the idea] to the forefront," Gerard said. "The staff need to know what's going on nationally."

Finding a way to engage team members will help get the idea of EBP off the ground, Fitzpatrick said.

"Find something they are passionate about," she said. "Find some common ground that they can jump [onto] with both feet."

Before embarking on a journey to EBP, planning and structure are essential to success, Gerard said. Deciding on which model or framework to use is of tremendous importance.

"Find one that is appropriate for your institution," she recommended.

Rolling it out, step by step

After the foundation is set, it's time to begin implementing the program. Gerard broke the process down into six, easy-to-follow steps that can guide a facility from start to finish:

1. Examine data driven initiatives. Examining hospital-specific data and the culture of clinical decision making is important, Gerard said. An investigation of national topics or initiatives can also help. "A variety of data can guide the initiative," Gerard said.

2. Form a council structure. The formation of an interdisciplinary team is essential, Gerard said. Who to include on the team is not a decision to be taken lightly, she added. "It should be diverse—you want to have staff nurses and leadership," she said. "You want to have significant staff nurse involvement from the very beginning."

3. Formulate a plan. A plan should include more than just research. An appropriate plan can be drawn up by taking the data, literature review, experience of the council, and framework, Gerard said. Communication takes center stage after that. "I think this is so crucial. People need to know why this is vital to the nursing professional. People need to understand the process," she added.

Keeping stakeholders "on the radar" is also a must, she added. "Not every person vital to the process will be on your team," Gerard said.

4. Implement. Putting the program in place should build upon the communication and education, and create some excitement, Gerard said. "Preparation will pay off in implementation."

5. Evaluate. "Any process needs to be evaluated and reflected upon," Gerard said. With regard to EBP, feedback from all sides is important. In addition to stakeholder feedback, patient feedback should also be incorporated, she added.

6. Reassess plan. Make sure to gauge the success of the plan based on all of its components within the model, Gerard said. Sharing evaluations and outcomes, and lastly, success, is the final piece of the puzzle.

"Successes don't come without a lot of hard work," Gerard added.

Overcoming barriers and obstacles

Of course, it isn't always quite as easy as those six steps make it seem. There are barriers and obstacles to overcome when implementing a solid EBP model at any facility.

Staff may see the extra responsibilities and meetings as additional stressors. Terms like “research” and “literature review” may send nurses running, Gerard said. All of these pieces, she noted, can add up to an intimidation factor that will scare people away from EBP.

“We need to come up with creative solutions to get staff into the process,” she said. “Bring the topics to them and take out the intimidation factor. Education and communication can desensitize [the material].”

The same items that created interest at the beginning of the journey—such as journal clubs and conferences—can be used to get staff energized about EBP. Additionally, pointing out the resources available to the staff—such as the library and financial resources—can help encourage involvement.

Editor’s note: For a copy of the 90-minute audioconference, visit www.hcmarketplace.com or call our Customer Service Department at 877/727-1728.

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