



# Implementing Evidence Based Practice into Clinical Practice

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# Disclaimer

- I have no conflicts of interest related to this presentation.



# Presentation Purpose

- Discuss how Nursing and Patient Care Services (NPCS) implemented the Evidence Based Practice Competency into practice
- Describe an evidence based practice project
- Discuss outcomes of the project
- Describe where we are today



# Background

- Developing competence in evidence based practice (EBP) may be challenging for nurses at the bedside.
- One such barrier is lack of knowledge and skill related to research translation and utilization.

# Our Approach

- We developed a written competency to structure the process of ensuring that all staff possess the skill set requisite to deliver nursing care based on best evidence.

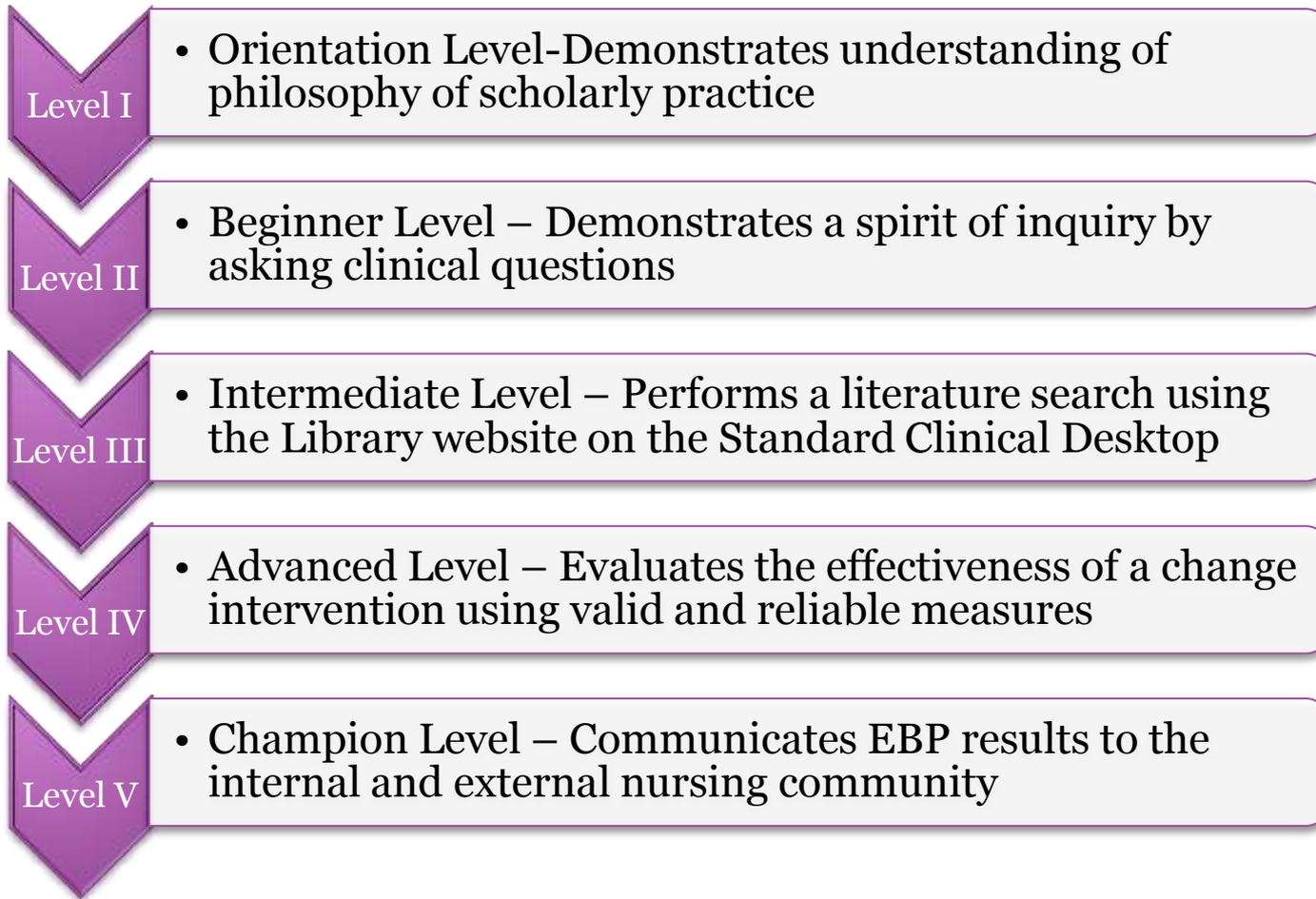
NIH CLINICAL CENTER NURSING & PATIENT CARE SERVICES CRN CORE COMPETENCY VALIDATION									
Name: _____			Manager or Designer: _____						
Work Area: _____			Primary Preceptor: _____						
Issue Date: _____			Competency Date: Met _____ Not Met _____						
Reason for validation: <input type="checkbox"/> Orientation <input type="checkbox"/> Re-validation <input type="checkbox"/> PI Follow-up <input type="checkbox"/> Other _____									
Key: 1 = No knowledge/Experience    3 = Knowledge Done with assistance    Circle method used for validation: D = Demonstration    DE = Demonstration/Evidence    V = Validation 2 = Knowledge/No experience    4 = Knowledge Done independently    T = Test Quiz    O = Other (specify) _____									
Competency: Evidence Based Practice - Demonstrates a working knowledge of Evidence Based Practice									
Behavioral Indicators	Self Evaluation				Assessment Method	Validator's Initials Date		Learning Resources	Comments
						Met	Not Met		
<b>Level I: ORIENTATION LEVEL</b> (Suggested for: CRN I, PCT, Pre-Disc, LPN) Demonstrates an understanding of the NPCC philosophy of scholarly practice by asking questions in day to day practice, such as "It does more information on this about that?" or "What is the rationale for doing it this way?"	1	2	3	4	D			ERP Competency	
<b>Level II: BEGINNER LEVEL</b> (Suggested for: CRN 2I)								ERP WEB Resources <a href="http://ccmnet.nih.gov/learning/ERP-erp_orientation.html">http://ccmnet.nih.gov/learning/ERP-erp_orientation.html</a>	
1. Completes on line ERP interests	1	2	3	4	DE (verbalize)			ERP Tutorial <a href="http://ccmnet.nih.gov/learning/ERP-erp_tutorial.html">http://ccmnet.nih.gov/learning/ERP-erp_tutorial.html</a>	
2. Searches one data base for searching evidence based literature	1	2	3	4	V			Praxis <a href="http://ccmnet.nih.gov/learning/ERP-erp_praxis.html">http://ccmnet.nih.gov/learning/ERP-erp_praxis.html</a>	
3. Explains the meaning of the PICO acronym	1	2	3	4	V			Four direction card Praxis <a href="http://ccmnet.nih.gov/learning/ERP-erp_praxis.html">http://ccmnet.nih.gov/learning/ERP-erp_praxis.html</a>	
4. Describes the four skills of ERP (Ask, Assess, Apply, Appraise)	1	2	3	4	V				
5. Demonstrates a spirit of clinical inquiry by asking clinical questions or seeking evidence for best practice	1	2	3	4	V				
Initials	Print Name		Signature			Initials	Print Name		Signature
Initials	Print Name		Signature			Initials	Print Name		Signature

6/2010 \*If competency is initiated as 'NOT MET', CNS/ Educator or Designer must be contacted for follow-up. See reverse side for action plan.

# The Process

- A review of the literature revealed no published competencies for EBP developed specifically for application in a clinical practice environment.
- We adapted a set of competencies developed by the Academic Center for Evidence-Based Practice at the University Of Texas Health Science Center.

# Competency Levels and Sample Behavioral Indicators



# Methods and Processes

- EBP committee adapted an academic competency and leveled the competencies from orientation and beginner levels to advanced and champion levels.
- The competency was reviewed and approved by staff nurse representatives and members of the nursing leadership team including:
  - clinical nurse specialists,
  - nurse managers, and
  - nurse researchers.



# Evidence Based Standard of Practice Process



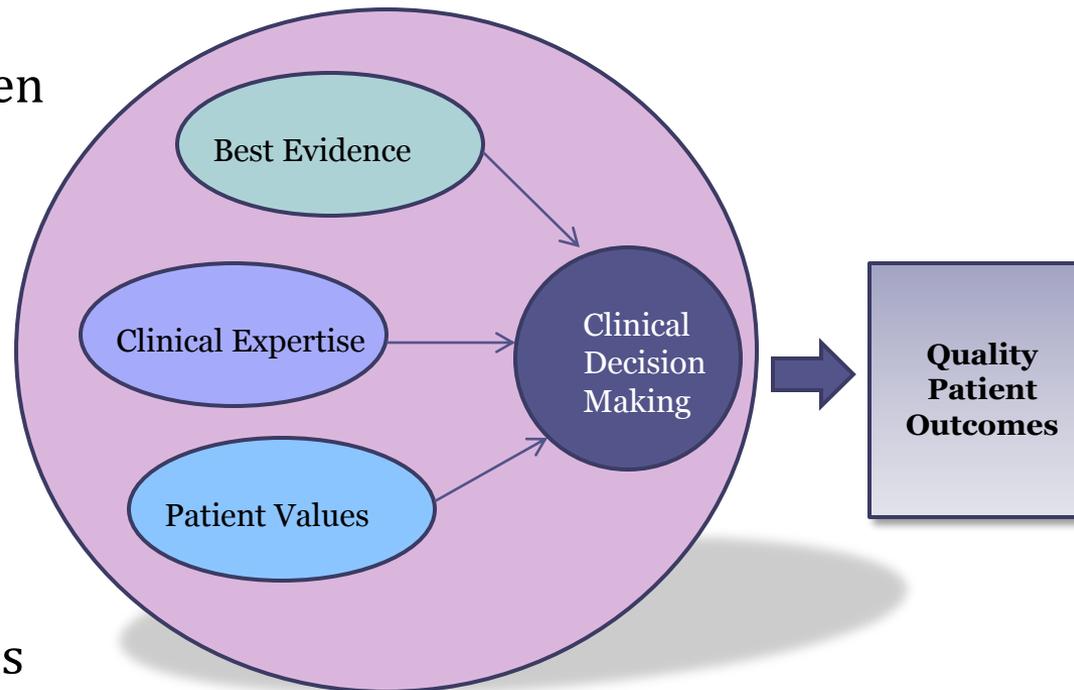
# Outcomes

- After 4 years, the EBP competencies have been used by more than 650 nurses for skills validation.
- Supporting resources have been developed to facilitate implementation including:
  - Two workbooks (participant and facilitator guide)
  - A website and pocket reference guide
- Additionally, this competency has supported the revision of more than 32 standards of practice and has guided staff in setting learning goals.

# Putting Evidence into Practice

*EBP is essential to the provision of excellent patient care*

- It substantiates nursing decisions and patient care when integrating the best evidence
- Important to balance patient preferences and values along with clinical expertise
- Adds a foundation based on validity to practice
- It is no longer acceptable to base ones nursing care on the “status quo” or because “it has always been done that way”



# A New Initiative

- Nursing and Patient Care Services developed an EBP Competency
- All nursing staff were expected to be validated by the end of the year (2010)



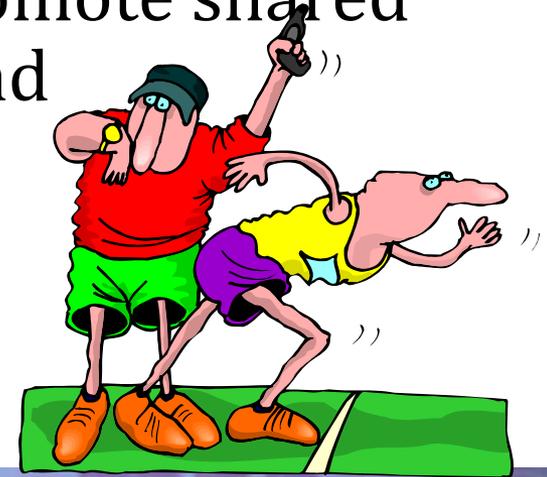
# Application in the Pediatric Clinic

- Nurse Manager implemented a group learning strategy in order to foster and support the incorporation of EBP into the culture of the pediatric clinic.



# Getting Started

- Nurse Manager partnered with CNS and pediatric clinic nursing staff to facilitate the validation of this new competency.
- A project champion was identified that would lead the unit based EBP project under the mentorship of the CNS.
- Staff agreed this approach would promote shared understanding of the EBP process and facilitate learning.



# During Monthly Staff Meetings...

- Nurses were introduced to the concept of EBP
- Competency expectations were reviewed
- Learning needs were identified
- Clinical questions were discussed
- Implementation process was developed
- Institutional resources were identified



# Pediatric Clinic



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# The EBP Project

- Staff actively participated in group activities
  - formulating a PICO question
  - identifying key search terms
  - learning the literature search process
  - appraising the evidence
- A clinical question identified for the understanding and application of the EBP process, thus bringing EBP to life for the clinical nurse.

# The PICO Question

- What is the most effective pharmacologic and/or non-pharmacologic interventions for reducing pain and anxiety in children prior to venipuncture or intravenous placement?

**P**

-Pediatric population

**I**

- Pharmacologic vs non-pharmacologic interventions

**C**

- Conventional therapy

**O**

- Reduced pain and anxiety

# The EBP Process

- Project champion and CNS attended 1:1 sessions with a librarian
- Multiple databases were searched in collaboration with the librarian
- The findings of the search were reviewed by the group
- The first article was reviewed with the group to learn the process

# The Process Continues

- Additional articles were reviewed
- Staff extracted and entered pertinent data onto EBP tables (evidence summary tables)
- Group members participated in work sessions
- The final EBP tables were collated by the project champion and the CNS and reviewed by the Nurse Manager and staff.



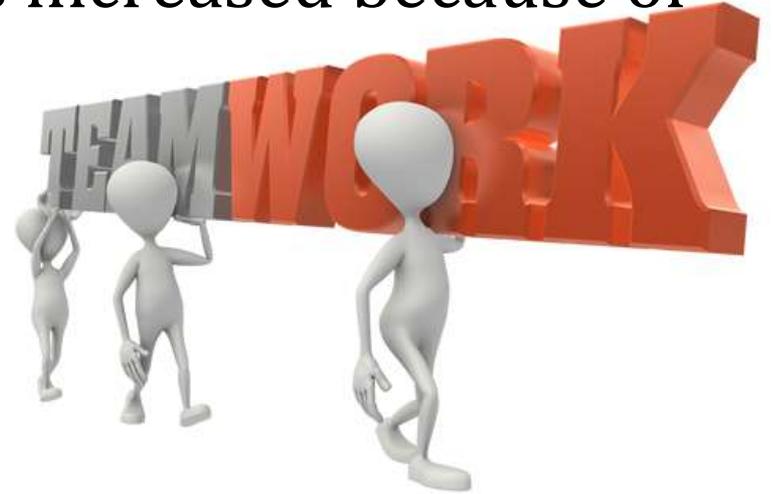
# Barriers

- Late adopters
- Time constraints
- Staff turnover



# Outcomes

- An environment of inquiry has been created contributing to the provision of evidence based nursing care
- Staff dialogue about EBP has increased because of the group process
- Improved team work

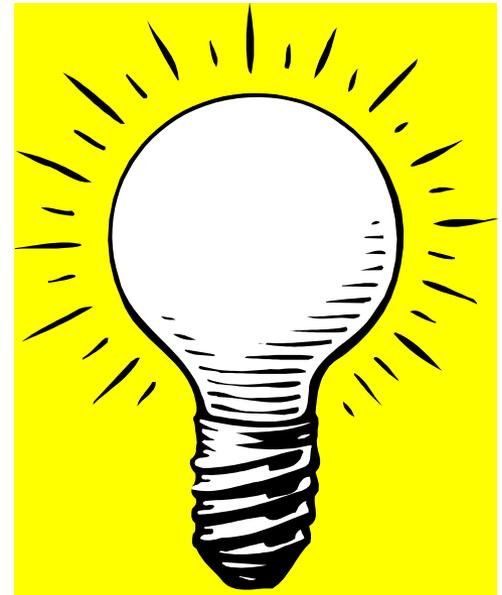


# Outcomes Continued

- EBP competency validation completed for all RN staff
- Improved understanding of the different pharmacological interventions
- Increased awareness of non-pharmacological interventions
- Increased competency with the EBP process

# Ah Ha Moments

- Discovered there is limited evidence to support any one intervention to reduce pain and anxiety in children prior to venipuncture or intravenous placement.



# Implications for Practice

- Adoption of EBP into daily practice
- Increased comfort in discussing clinical practice
- Collaboration in performing queries and completing evidence summary tables
- Incorporation of EBP in performance expectations

# Conclusions

- The EBP group project served as an effective framework to learn the process
- Balancing the competing demands required flexibility and commitment
- The Nurse Manager and CNS were key change agents
- The creation of an environment of inquiry was a transformative experience for the staff
- With the evolution of the project, staff developed an appreciation for the importance of weaving EBP into the fabric of their pediatric practice

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# Feedback & Questions



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