Introduction: Evidence-based practice (EBP) has been defined as a problem-solving approach to the delivery of healthcare that incorporates the best available evidence, clinician's expertise and patient values and preferences (Baldwin, Schultz & Barrere, 2016). As in other countries, Mexico has recognized the need to improve patient outcomes through the implementation of EBP. The Nursing Permanent Commission has recently published the Model of Nursing Care in which EBP is considered a key tool to conduct, guide, orient and improve nursing care (Secretaría de Salud, 2018).

One of the first steps to the implementation of EBP is to assess the readiness of nurse professionals and the organization to include EBP on a daily basis. The readiness of EBP is defined as “the state of being fully prepared to deliver EBP when, where and how it is needed” and is grounded in four pillars: nursing, training, equipping and leadership development and support (Shaefer & Welton, 2018). To date, there are no extant Mexican studies of EBP readiness. The purpose of the work is to evaluate the readiness to implement EBP among clinical nurses from southern Mexico.

Methodology: Data were derived from a descriptive exploratory survey regarding EBP readiness during a national nursing conference held on October 2018 in the state of Tuxtla Gutiérrez, Chiapas, Mexico. The survey was adapted in Spanish from the American Academy of Nursing Publication Advisory Committee EBP Readiness Study (Pravikoff, Tanner, & Pierce, 2005). The survey included information on the use of information resources, participation in research, sources of nursing information, as well as individual and institutional barriers to EBP in clinical practice. Data were analyzed using SPSS (V24) software.

Results: Nursing professionals and students (N=121) (76% women; 80.2% 39 years of age and under) completed the survey. Participants held baccalaureate (65%) or master’s degrees (21%). The remaining nurses held associate, doctoral degrees, or ‘other’ (e.g., midwifery). A majority (77%) worked in the hospital setting, while the other participants were employed in ambulatory, home, or occupational health areas. Although they believed that EBP improves patient outcomes (90.7%), respondents (44%) reported little to no knowledge of EBP, and only 35% reported using research findings in clinical practice frequently, or almost always.

Sources of information used ‘frequently or almost always’ included librarians (23%), peers (39.2%), bibliographic database searches (67.6%), searching in the internet (79.5%), journals or books (52%), and attending conferences or workshops (43%); however 40% of the respondents indicated the use of these information sources once a month or less. Furthermore, when asked about the following activities in the past year, 40% indicated that they had not participated in research, 60% had not evaluated a research report, and 31.4% had not identified a research problem.

The three leading individual barriers to the use of research findings in practice reported by participants were: 1) understanding the organization of electronic databases; 2) lack of skills required to critique or synthesize the literature; and 3) access to research materials. The leading institutional barriers to EBP in clinical practice were: 1) EBP as a low budget priority; 2) difficulty recruiting and retaining nurses; and 3) Lack of financial resources for training.
**Conclusions:** Participants recognize the value of EBP as a useful tool for nursing care; however, they have little knowledge of, or training to lead the actual implementation. Further training is needed to improve institutional and personal knowledge of EBP in health care institutions in southern Mexico. Furthermore, these results indicate the need for policy development toward a national strategy to assess individual and organizational readiness for EBP that will lead to a countrywide implementation for training in clinical EBP. Such training will stimulate a culture of inquiry that improves nursing knowledge and decision-making, promote organizational knowledge regarding the budget advantages and cost-savings related to nurse recruitment and retention with EBP, and contribute to better patient outcomes through evidence-based nursing practice.

**Title:**
Readiness for Evidence-Based Practice Implementation: A Survey From Southern Mexico

**Keywords:**
Barriers, Evidence-based practice and Readiness

**References:**
2. Pravikoff, D. S., Tanner, A. B., & Pierce, S. T. (2005). Readiness of US Nurses for Evidence-Based Practice: Many don’t understand or value research and have had little or no training to help them find evidence on which to base their practice. AJN The American Journal of Nursing, 105(9), 40-51.

**Abstract Summary:**
The Nursing Permanent Commission of Mexico has recently published the Model of Nursing Care in which EBP is considered a key tool to improve nursing care. The purpose of this descriptive exploratory survey is to evaluate the readiness to implement EBP among clinical nurses who attended a national nursing conference.

**Content Outline:**
1. Introduction
2. Methodology
3. Results
4. Conclusion

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