Evolution of EBP Education in a Large Pediatric Academic Hospital System
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Purpose:
Though evidence-based practice (EBP) has been identified as a key competency in all levels of nursing educational programs and professional organizations, Melnyk et al (2018) identified that major deficits still exist in nursing competencies related to EBP. Our large academic pediatric and women’s hospital set out to create an educational program to meet the needs of staff at their stages of learning. EBP education was initially offered in silos of physicians, nursing, and other ancillary staff educational efforts. Frequent requests for EBP education from healthcare providers across the institution and organization-wide nursing needs assessments highlighted the need for an innovative approach. Our objective was to create an institutional EBP education program that would meet the needs of our interdisciplinary and intergenerational learners and to share the lessons that we learned from previous educational efforts.

Methods:
Results of surveys from previous educational opportunities along with institution-wide needs assessments were reviewed to identify areas for improvement. A pilot online module was launched in 2018 and demonstrated improvements in EBP self-efficacy, knowledge, awareness, and attitudes. As a result of the educational activity 86.8% (n = 204) reported intent to change practice. With a partnership between nursing professional development, evidence-based practice specialists, physician partners, nurse scientists, and other institutional leaders, a framework was created to meet learners where they are and to appeal to a wide variety of learners. Benner’s novice to expert model (Benner, 1982) was adapted to create four levels of course offerings: novice/beginner, competent, proficient, and expert levels. The transtheoretical model (Prochaska & DiClemente, 1982) set the foundation for identifying learner-centric outcomes. Competencies and objectives for each of the four levels were created using two primary sources: interdisciplinary competencies previously reported by Albarquoni, et al. (2018) and nursing competencies from Melnyk, Gallagher-Ford, Long, & Fineout-Overholdt (2014). To meet the needs of our intergenerational workforce, the structure of the education incorporates a blended approach of both in-person and online learning. The framework has integrated the institutional culture and strategic goals of the program to remain consistent with shared governance and other quality groups to provide structural empowerment for projects.

Results:
In both formal anonymous and open discussions with participants to evaluate the course, we came away with several lessons learned to share with others engaging in
hospital-based EBP Education. Consistent with previous findings by Eddy, Johnson, & Stephenson (2016), we found that it was important to meet learners where they are and that both mentorship and leadership engagement are critical to successful projects. We found that personal interest in the topics was a driver for success for project completion. With a topic as complex as EBP, expect an evolution of understanding to occur over a series, one class or workshop is insufficient to reach competency. As with all professional development efforts, dedicated education time is necessary.

**Conclusion:**
To support evidence-based practice, institutions must create educational frameworks that adapt to learners’ needs and reflect the interdisciplinary nature of care. Mentorship, leadership support, and meeting learners where they are is vital to success.

**Title:**
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**Keywords:**
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**Abstract Summary:**
Recent research has identified that major deficits still exist in evidence-based practice (EBP) competency, despite many efforts. We set out to create a hospital-based educational program to meet the needs of our interdisciplinary learners. We will describe the evolution of our EBP education and lessons learned along the way.

**References:**


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