



THE OHIO STATE UNIVERSITY

***Evidence-based Leadership:
Key Strategies for Building a Sustainable EBP Culture to Improve
Healthcare Quality, Safety, Patient Outcomes and Costs***

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Evidence-based Leaders and Leadership

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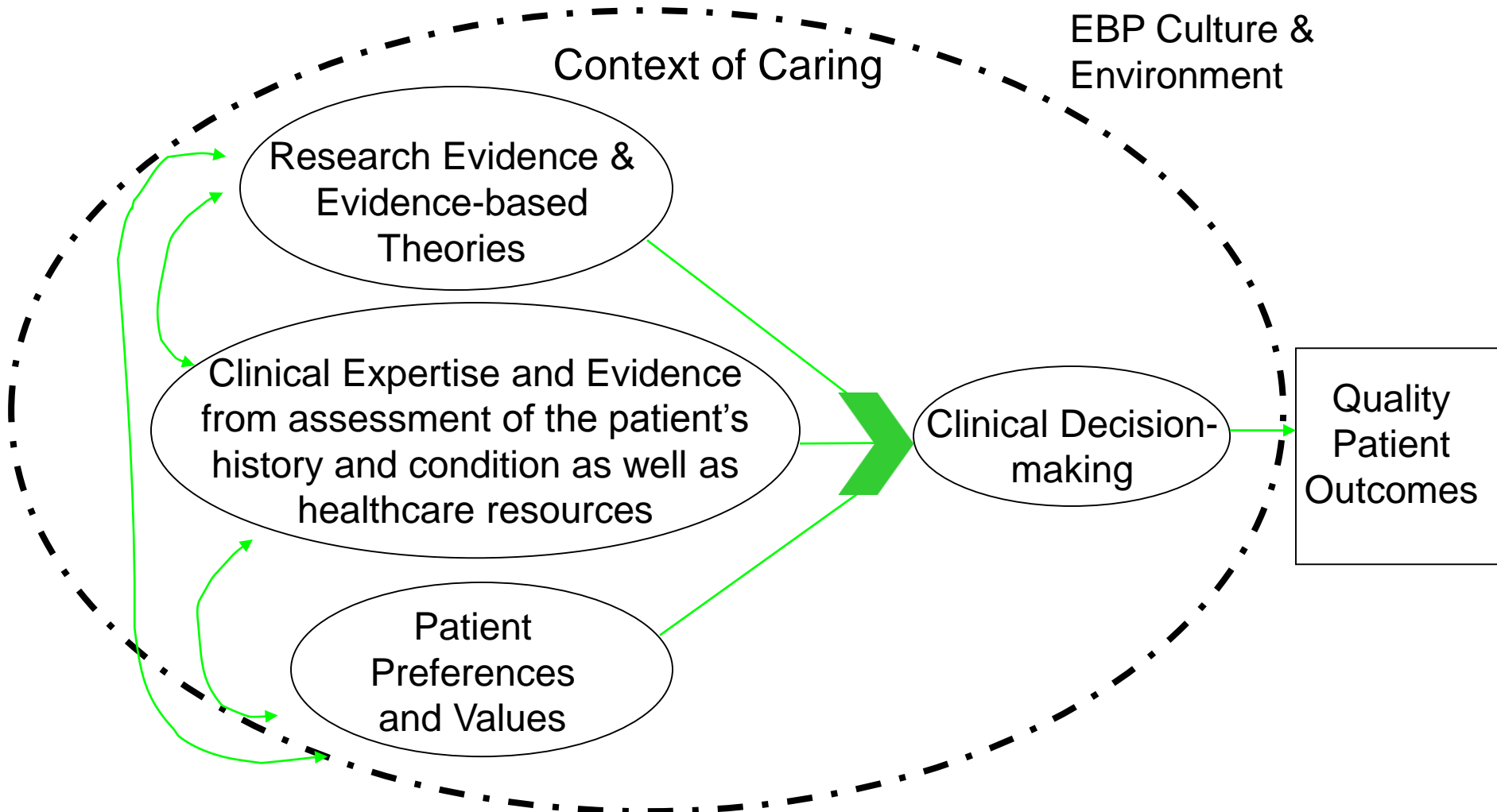
Editor, *Worldviews on Evidence-based Nursing*

**In God We Trust,
Everyone Else Must
Bring Data!**

The State of Healthcare

- There are up to 420,000 unintended patient deaths per year (James 2014).
- Patients only receive about 55% of the care that they should when entering the healthcare system
- Poor quality healthcare costs the United States about 720 billion dollars every year
- The U.S. healthcare system could reduce its healthcare spending by 30% if patients receive evidence-based healthcare

The Merging of Science and Art: EBP within a Context of Caring & EBP Culture and Ecosystem Results in the Highest Quality of Patient Care



The *So What* Outcome Factors in an Era of Healthcare Reform

- Conducting research and EBP projects with high impact potential to positively change healthcare systems, reduce costs and improve outcomes for patients and their families
- Measuring outcomes that the healthcare system is most focused on
- Key questions when embarking on a research study or an EBP project:

So what will be the end outcome of the study or EBP project once it is completed?

So what difference will the study or EBP project make in improving healthcare quality, costs or patient outcomes?

COPE (Creating Opportunities for Parent Empowerment): An Evidence-Based Program to Improve Outcomes in Critically Ill/Hospitalized Young Children, LBW Premature Infants & Parents

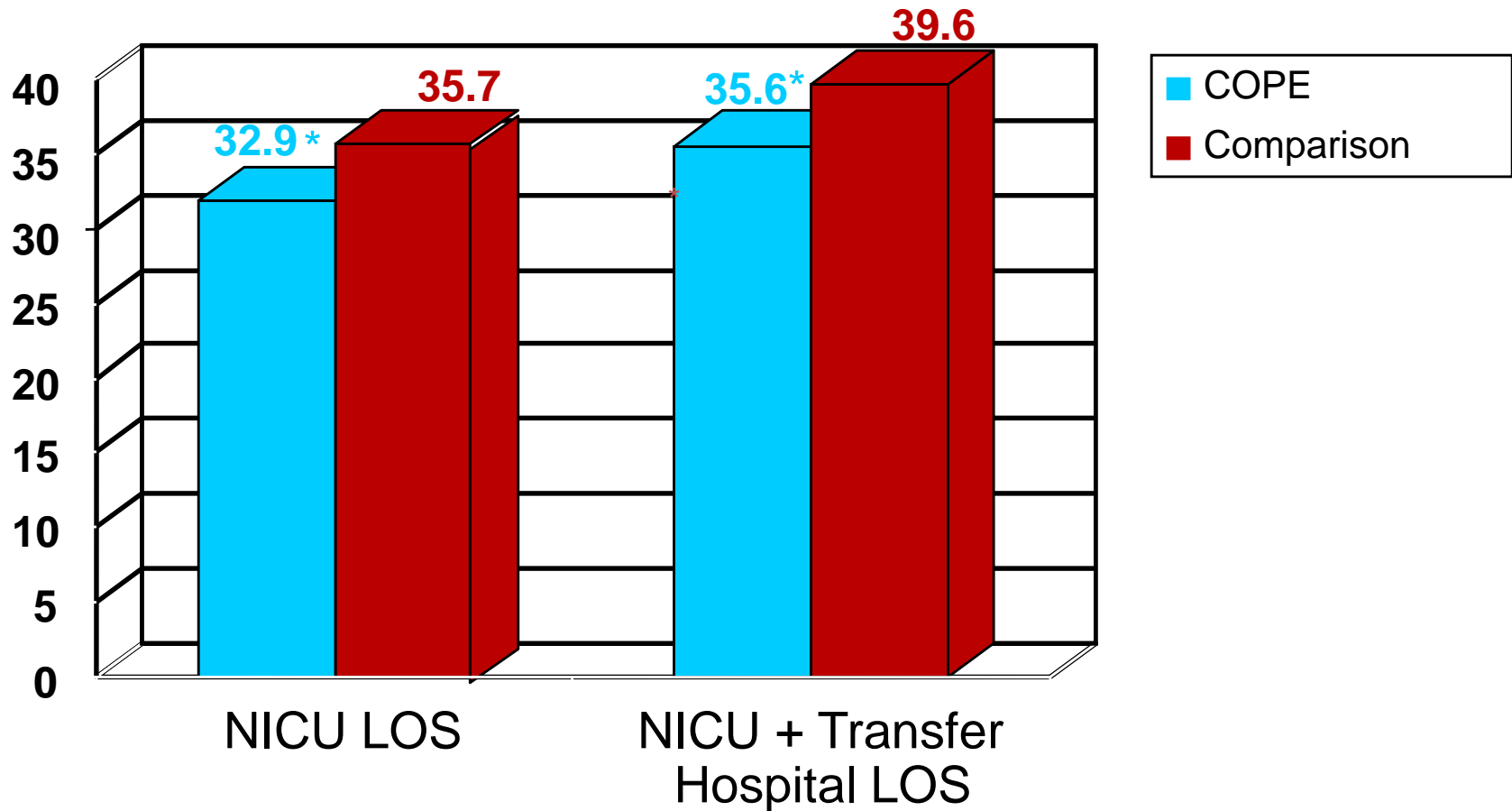


The COPE NICU Program



FUNDING FOR THIS RESEARCH BY THE
NATIONAL INSTITUTE OF NURSING RESEARCH
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**A 4 Day Shorter Length of Stay (LOS) for COPE Preterms
Resulted in Cost Savings of \$5000 per infant;
8 Day Shorter LOS for Preterms < 32 Weeks**



*p < .05

2012 Study of U.S. Nurses and EBP; What Did We Learn?

The State of Evidence-Based Practice in US Nurses: Critical Implications for Nurse Leaders and Educators

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN;

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JONA: September 2012; Volume 42 (9)

Findings from our Recent EBP Survey with over 1000 U.S. Nurses (Melnyk et al., 2013; JONA)

- More highly educated nurses reported being more clear about the steps in EBP and having more confidence implementing evidence-based care
- The more years in practice, the less nurses were interested in and felt it was important to gain more knowledge and skills in EBP



Percent of Respondents Who Agreed or Strongly Agreed with the Following Statements

	%
EBP is consistently implemented in my healthcare system	53.6
My colleagues consistently implement EBP with their patients	34.5
Findings from research studies are consistently implemented in my institution to improve patient outcomes	46.4
EBP mentors are available in my healthcare system to help me with EBP	32.5
It is important for me to receive more education and skills building in EBP	76.2



The One Thing That Prevents You From Implementing EBP

	Total Responses
1. Time	151
2. Organizational culture, including policies and procedures, politics, and a philosophy of “that is the way we have always done it here.”	123
3. Lack of EBP knowledge/education	61
4. Lack of access to evidence/information	55
5. Manager/leader resistance	51
6. Workload/staffing, including patient ratios	48
7. Nursing (staff) resistance	46
8. Physician resistance	34
9. Budget/payors	24
10. Lack of resources	20

Survey of 276 Chief Nursing Officers

Key Sections:

- CNO demographics
- Hospital metrics (core measures)
- Patients' perspectives of care (HCAHPS)
- Nurse-sensitive metrics (NDNQI)
- Organizational data (e.g., % of BSNs, % of nurses certified, whether a clinical ladder system exists)
- Highest priorities for the CNOs
- EBP scales
- EBP-related metrics
 - Value of EBP
 - Budget for EBP
 - Organizational structures to support EBP, councils

ELSEVIER

Advisory Report



A National Survey & Forum for Nurse Executives: Leveraging Evidence-Based Practice to Enhance Healthcare Quality, Reliability, Patient Outcomes and Cost Containment



EXECUTIVE SUMMARY

The opportunity for leaders to collectively and boldly advance evidence-based practice as standard for healthcare is before us. This advisory research-based report and its recommendations provide insights on making this a reality.

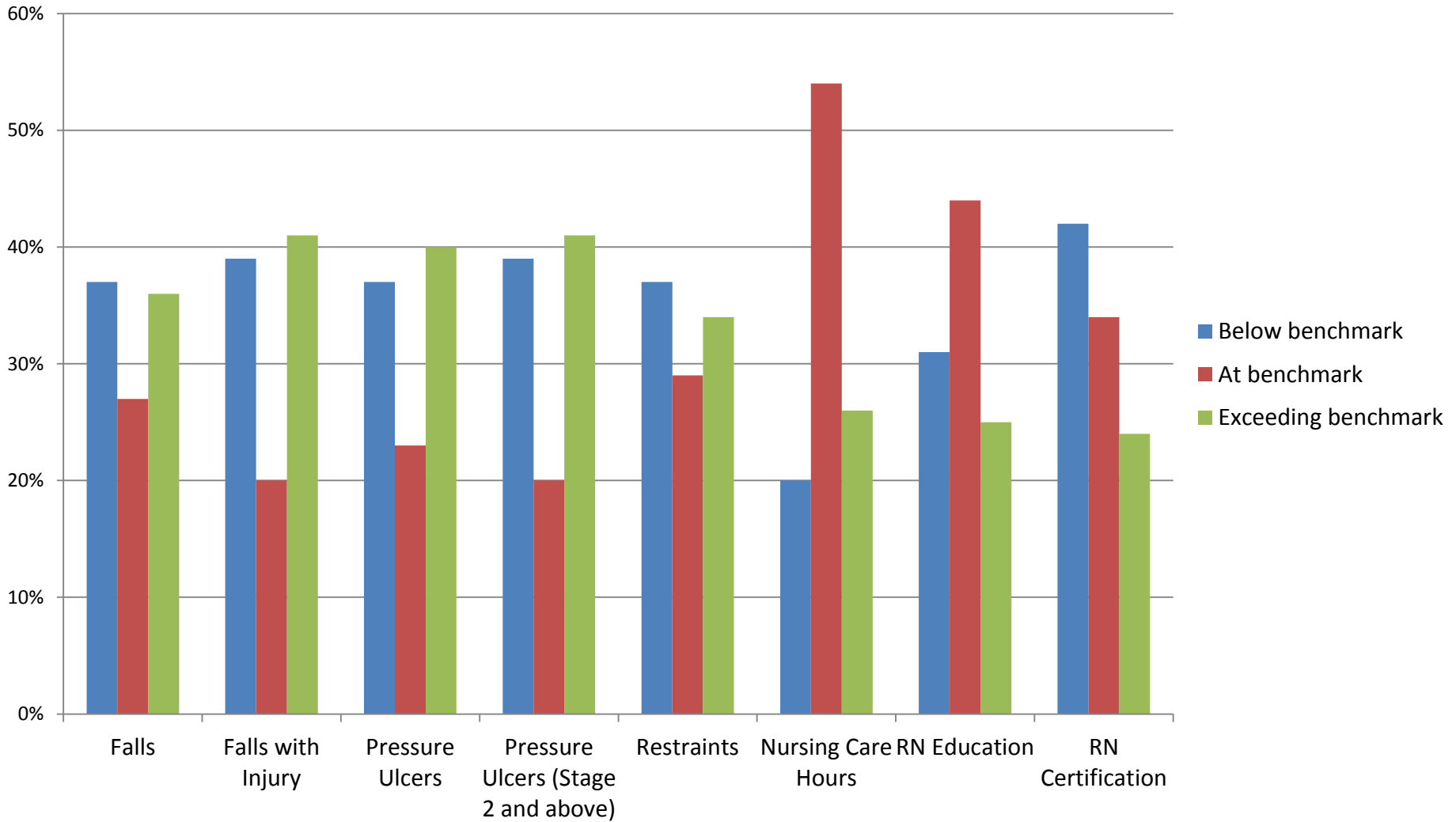
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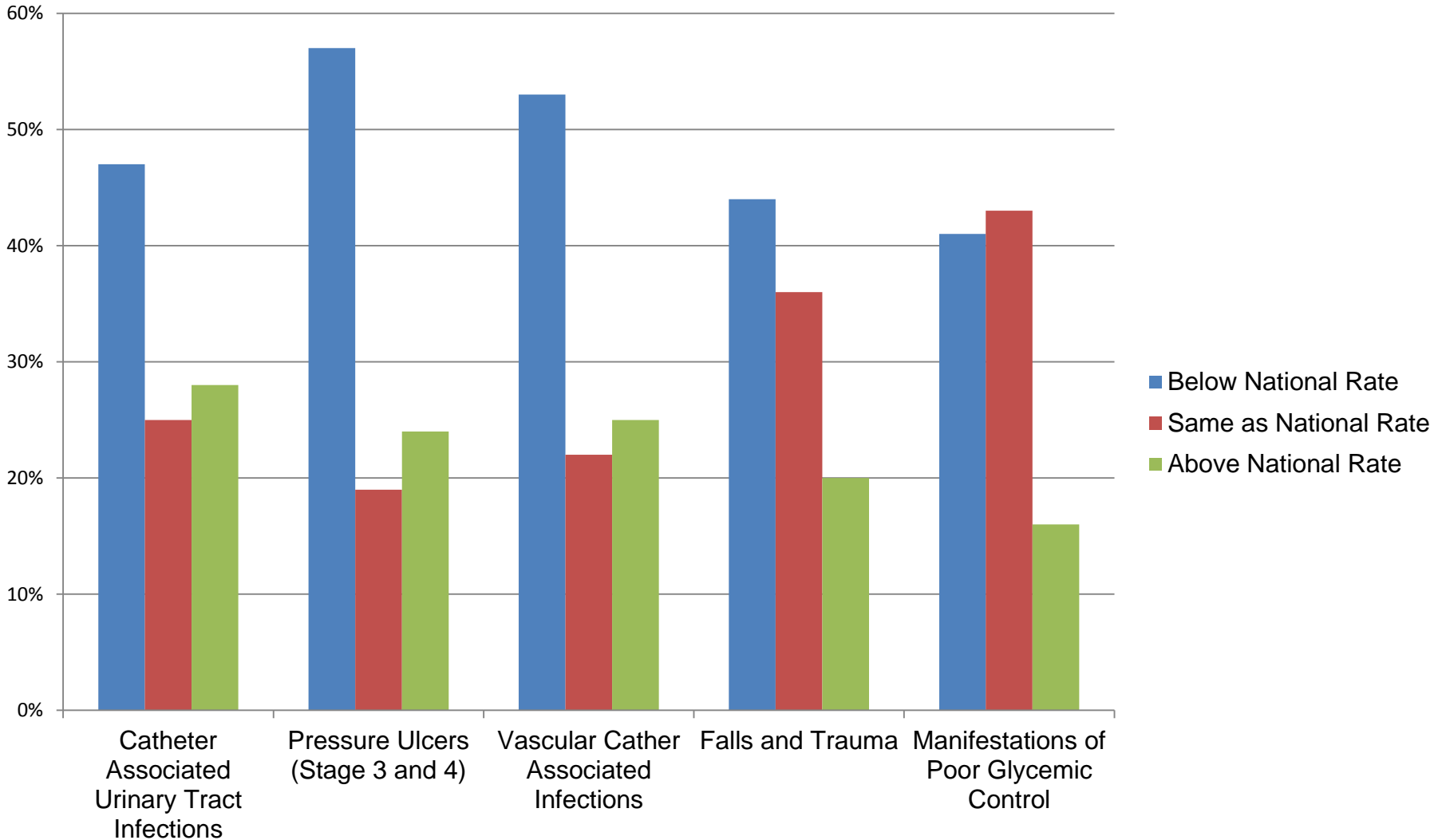
Annual Operating Budget Allocated to EBP

What % of your annual operating budget do you spend on building and sustaining EBP in your organization?	Frequency	Percent %
0	41	15%
1 to 10	162	59%
11 to 25	49	18%
26 to 50	15	5%
51 to 100	6	2%

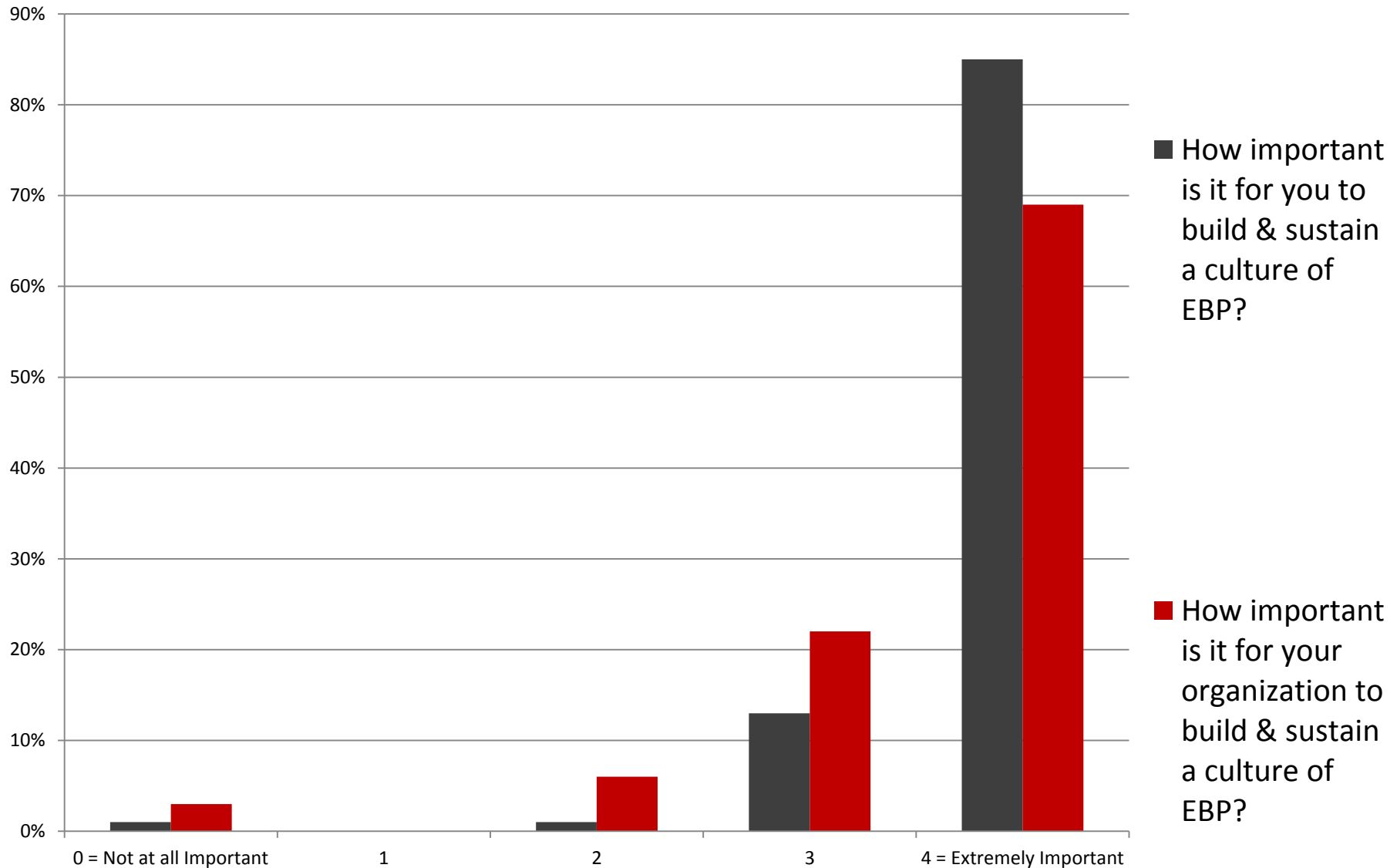
NDNQI METRICS



Performance Metrics: Core Measures

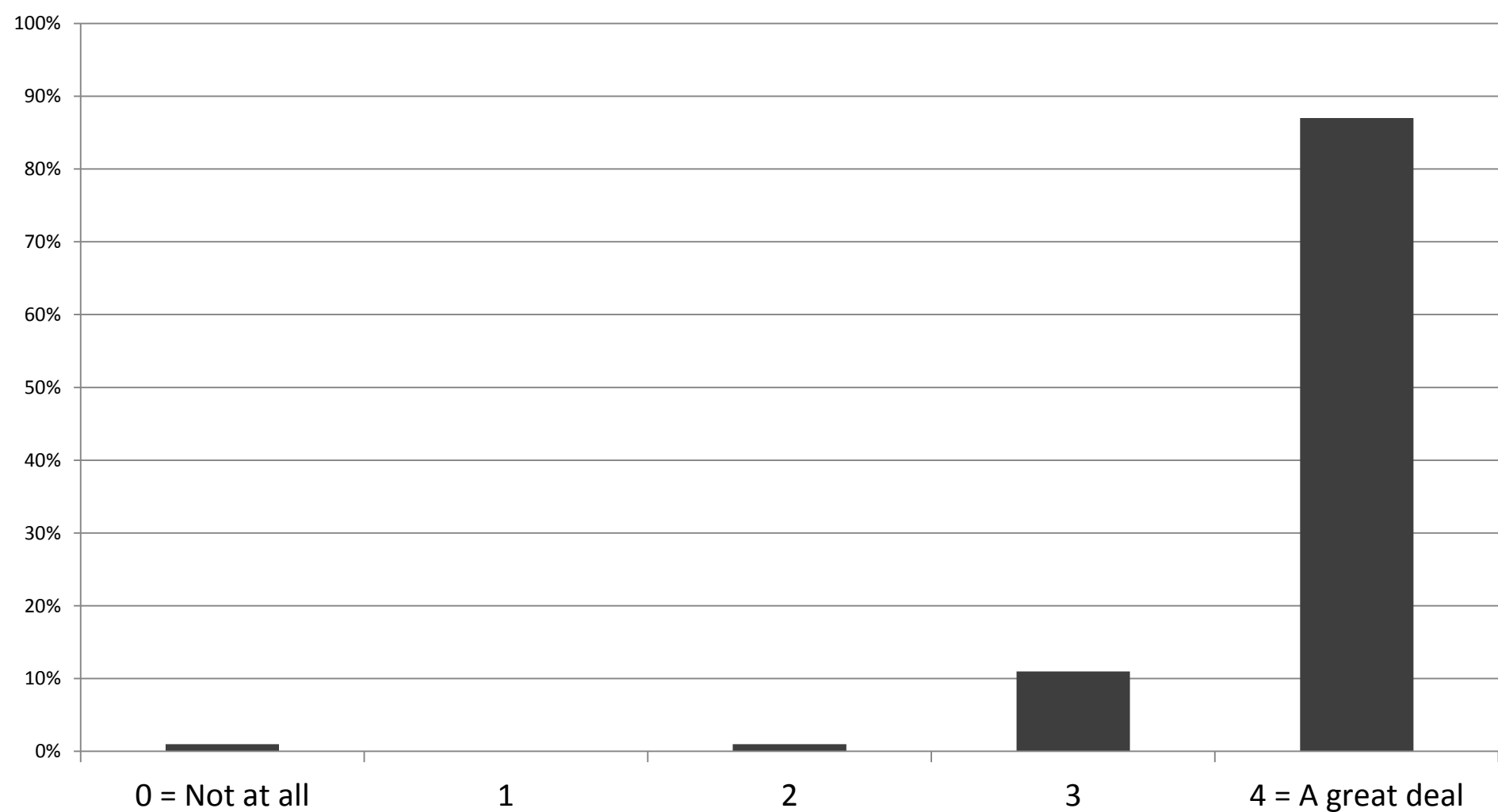


How Important is EBP?



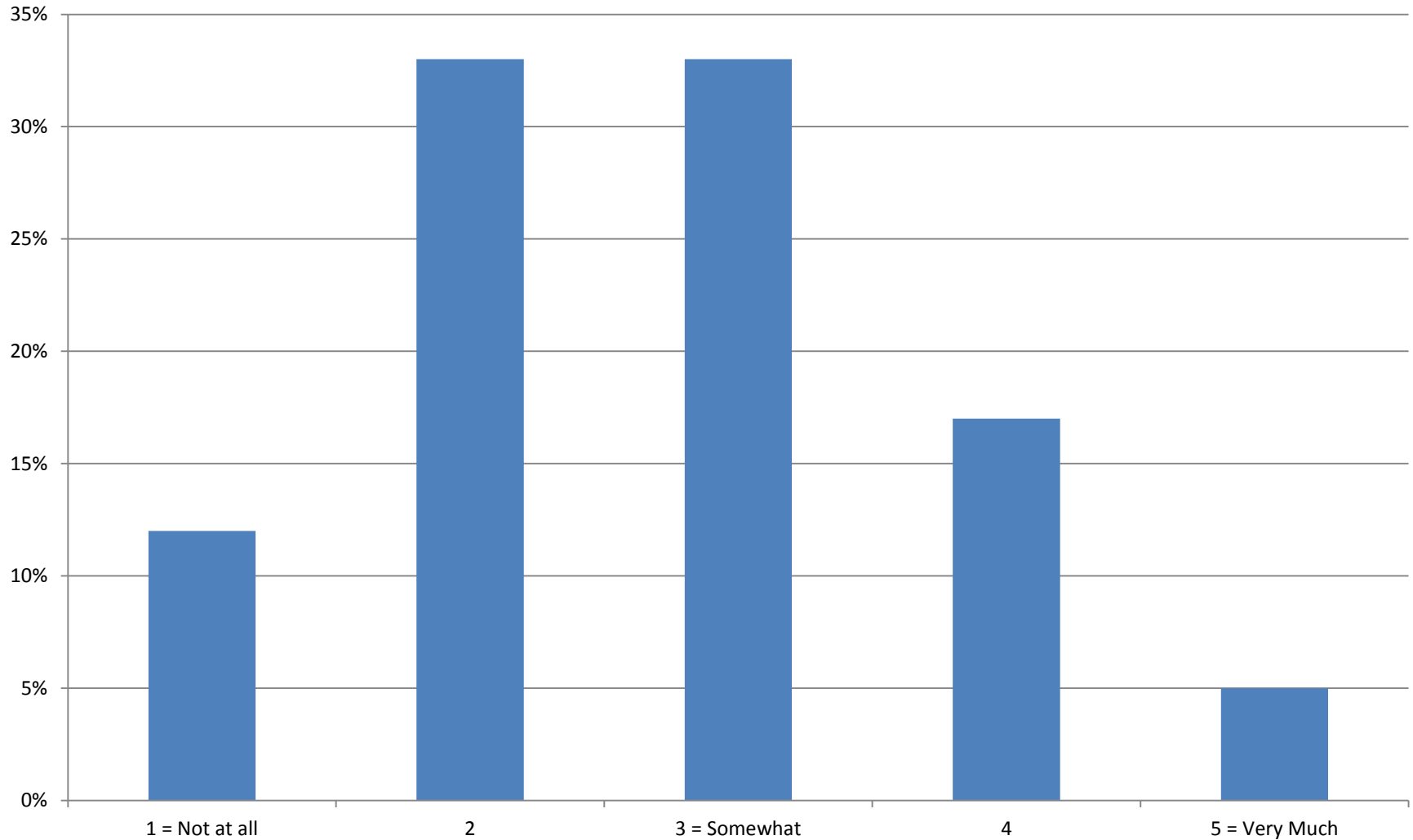
EBP Priorities

How much do you believe implementation of EBP improves quality & patient outcomes?



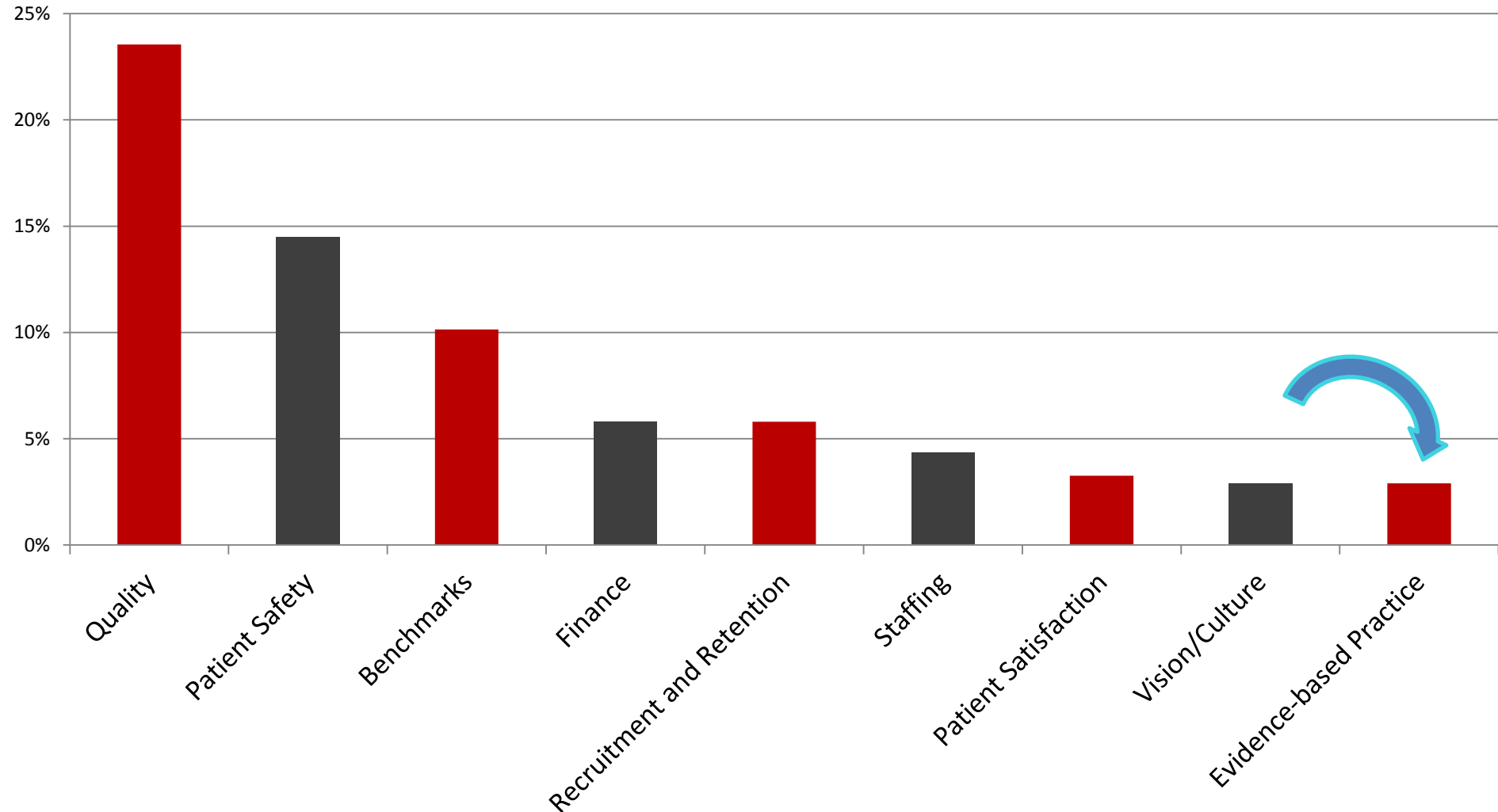
Organizational Readiness

In your organization, to what extent is there a critical mass of nurses who have strong EBP knowledge & skills?



How High a Priority is EBP?

As a CNO/CNE, what are the top priorities that you are currently focused on in your role?



Follow-up to the National Survey

*A National Forum with more than
150 CNEs/ CNOs*

***Leveraging Evidence-based Practice to
Enhance Healthcare Quality, Reliability,
Patient Outcomes and Cost Containment***

AONE National Conference

March 12, 2014.



The Voice of Nursing Leadership™



Recommendations Nurse Executive Forum

- Align EBP as a ***cost effective foundation for patient safety and quality***.
- Establish a ***business case, budget, and resources*** to prioritize EBP as a strategic imperative.
- Focus ***recruitment/retention*** and ***accountability for performance*** on demonstration of EBP.
- Develop a critical mass of ***EBP mentors***
- Integrate the new ***EBP competencies***
- Provide evidence-based ***tools and resources*** at the fingertips of interprofessional team members ***in the EHR*** to keep EBP in the forefront of patient care
- Mobilize ***interprofessional partners in all roles to integrate EBP***, measure outcomes and celebrate successes
- Identify and advance ***healthcare policy*** to foster vibrant evidence-based practice environments

American Organization of Nurse Executives

The professional responsibilities of nurse leaders related to healthy work environments, a culture of safety, and EBP include:

- accelerate EBP capacity
- integrate EBP into practice, policy, and procedure

(AONE, 2010)

Where Do We Go from Here?

**Leaders Must Help the Team to Catch an Exciting
Vision with Specific Goals**

We must begin with the end in mind!



Building an EBP Culture

An EBP culture means...

EBP is in the organizational DNA.

EBP is the foundation of how the organization functions on every level.



Critical Components of an EBP Culture

A Philosophy, Mission and Commitment to EBP:

- there must be commitment to advance EBP **across the organization**; administration as well as other disciplines

A Spirit of Inquiry:

- health professionals are encouraged to continuously review and analyze practices to improve patient outcomes

EBP Mentors:

- who have in depth knowledge and skills in EBP, mentoring others, and overcoming barriers to individual and organizational change

Critical Components of an EBP Culture

Administrative Role Modeling and Support:

- leaders who value and model EBP as well as provide the needed resources to sustain it

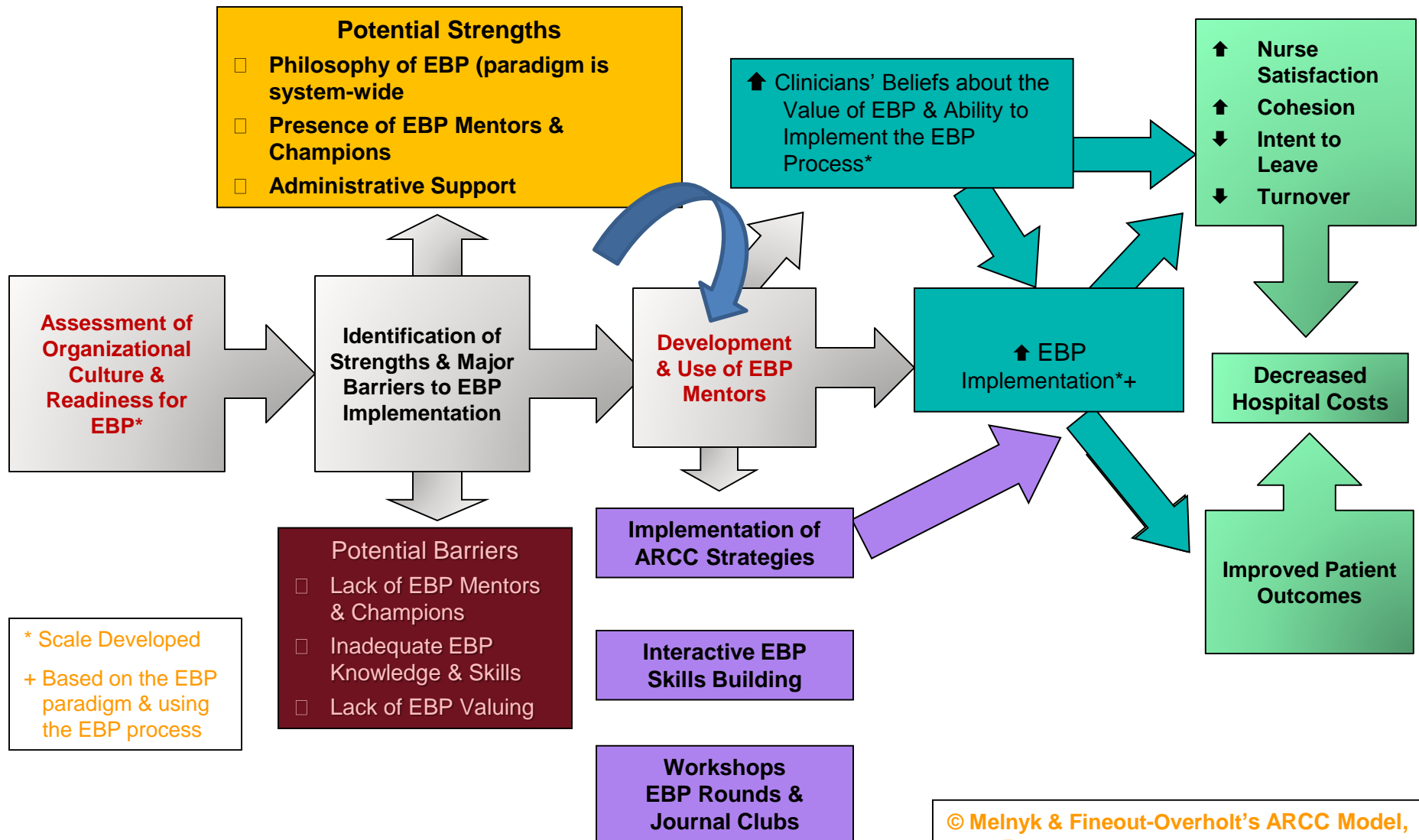
Infrastructure:

- tools and resources that enhance EBP across the organization; computers for searching, up to date data bases, library resources

Recognition:

- individuals and units are rewarded regularly for EBP

Building an EBP Culture and Environment



Outcomes of Implementing the ARCC Model at Washington Hospital Healthcare System

- Early ambulation in the ICU resulted in a reduction in ventilator days from 11.6 to 8.9 days and no VAP
- Pressure ulcer rates were reduced from 6.07% to .62% on a medical-surgical unit
- Education of CHF patients led to a 14.7% reduction in hospital readmissions
- 75% of parents perceived the overall quality of care as excellent after implementation of family centered care compared to 22.2% pre-implementation

Use Available Resources to Advance EBP

WORLDviews on
EVIDENCE-BASED NURSING™

The Establishment of Evidence-Based Practice Competencies for Practicing Registered Nurses and Advanced Practice Nurses in Real-World Clinical Settings: Proficiencies to Improve Healthcare Quality, Reliability, Patient Outcomes, and Costs



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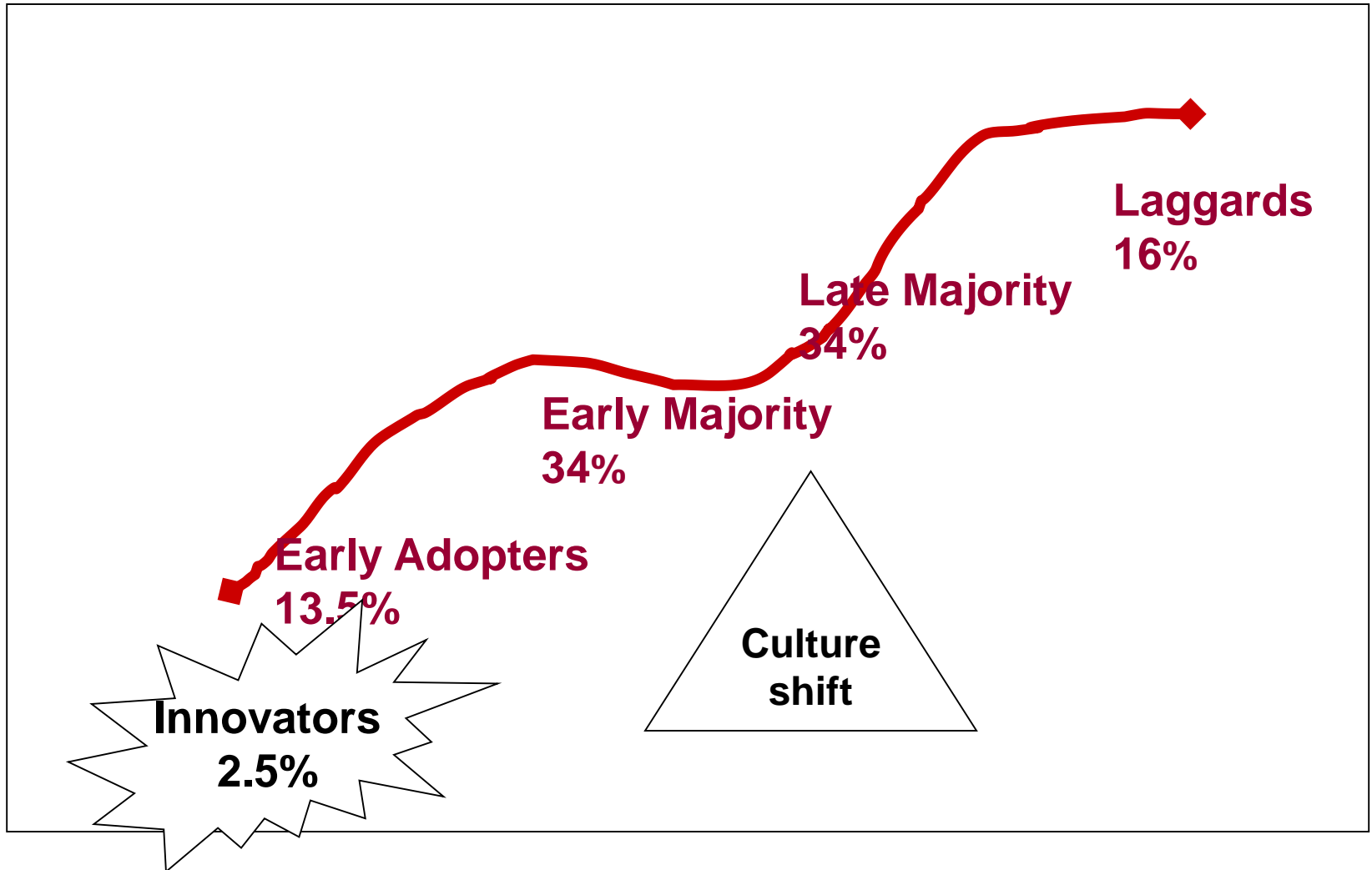
Ellen Fineout-Overholt, RN, PhD, FAAN

What Can *You Do* to Build, Promote and Sustain EBP in Your Organization?

Leaders:

- Reflect
- Gain Knowledge
- Be an EBP Role Model and Mentor Others
- Lead EBP
- Build EBP Cultures and Environments

Diffusion of Innovation



Ask yourself:

- *What will you do if you know you cannot fail in the next 2 to 5 years?*
- *What can we do together if we know we cannot fail?*
- *What is the smallest EBP change that you can make tomorrow in your healthcare system that would have the largest positive impact for your patients' outcomes?*

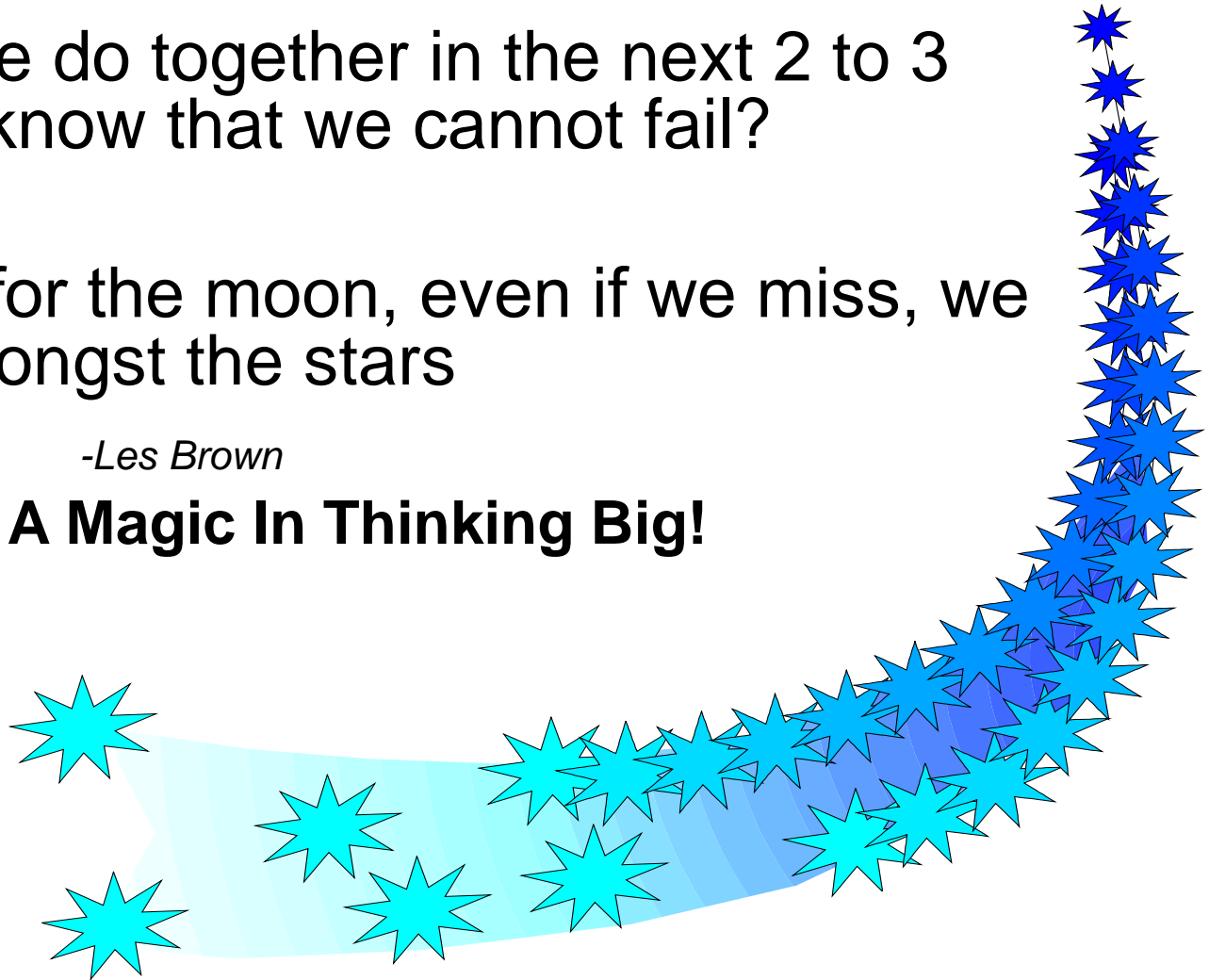
The Next 2-3 Years

What can we do together in the next 2 to 3 years if we know that we cannot fail?

Let's shoot for the moon, even if we miss, we will land amongst the stars

-Les Brown

There Is A Magic In Thinking Big!



Contact Information

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