



Envisioning Magnet Designation: Raising the Bar for a Nursing Culture of EBP Awareness and Practice



Lisa Marguerite Fallon, DNP, MSN, BSN, RN: Covenant Children's Hospital,
Cindy Ford PhD, RN, CNE: Lubbock Christian University- Lubbock, Texas

INTRODUCTION

- Magnet designation requires an organization integrate evidence based practices (EBP) and research into clinical and operational activities (Magnet®). Removing barriers for nursing staff at the frontline to become engaged in EBP and creating a culture of inquiry can be a daunting task for nurse executives.
- A large health care system recently set a goal of increased bedside nurse EBP utilization and nurse confidence with creating a cultural of inquiry.
- A formal collaboration with university scientists has led to a tremendous increase in the number, quality, and rigor of nurse-led projects in the facility.

BACKGROUND & SIGNIFICANCE

- The landmark work of the Institute of Medicine (2001) and requirements from regulatory entities urged healthcare organizations to focus on improving the quality of patient care.
- The literature currently, and over the last years has increased with evidence supporting nurse led research, implementation of evidence based practice and quality improvement processes.
- Beginning in 2012, nurse executives embarked on a plan of nursing support to shift the culture of the organization to one of improved understanding and utilization of research, encourage an attitude of inquiry for best practices at the bedside resulting in a shift in culture, and to ultimately become one of the 7% of Magnet organizations in the country.

LITERATURE REVIEW

- The evidence from current literature reveals the variety of challenges nurse executives face as they work to promote nursing cultures of inquiry, and shift to cultural norms of care evaluation with implementation of nurse led best practices system wide.
- The facilitators of research include significant leadership commitment at the organizational level (Scala, Price, & Day, 2016) although competing priorities pull nurse executives in many directions.
- Stimulating EBP and research required a multi-faceted approach from leadership and our research mentors.
- One of the highest facilitators to nurse-led research is the presence of research mentors (Kelly, Turner, Speroni, McLaughlin, & Guzzetta, 2013).
- Often the time, understanding, and expertise needed to implement successful research in hospitals is underestimated by nurse executives (Wilson, Kelly, Reifsnider, Pipe, & Brumfield, 2013) and the presence of a PhD-prepared nurse researcher can minimize these barriers.
- Understanding the differences between research and quality improvement projects requires processes and clarity (Ryan & Rosario, 2012) our fledgling program couldn't distinguish between without expertise provided by university scientists.
- Partnerships such as ours increase nurses' ability to identify literature, critically appraise it, and synthesize findings to subsequently increase the research environment (Latimer & Kimbell, 2013).

OUTCOMES

- The nurse executive team has observed multiple measureable outcomes in the few short years of promoting and supporting a nurse led shift in the culture of care provision.
- Prior to collaborative efforts with university mentors, the standing committee for research, the Research Council, experienced an attendance average of only eight participants per month composed of predominantly nurse educators. Only 30% of nurse educators and 0% of staff nurses attended the monthly meetings. Currently, an average of 20 nurse educators and 18-20 engaged bedside nurses and attend monthly.
- Other measurable outcomes include increased participation, from a 10% to 65% participation rate for nurses' system wide with creation of scholarly activities such as poster, abstract and article creation.
- A poster rubric was created to guide creation and measure improved scholarship of posters submitted for Nurse Week Poster Symposiums annually. Positive attributes of posters include improved content organization, appropriate literature review with clearer methodologies reported, and clearly stated outcomes.
- The total number of posters submitted for Nurse Week has increased 150% (34) while abstracts submitted for presentation nationally and internationally has increased 300% and manuscript creation/publication has increased 150%.

CONCLUSIONS

- Today, the Research Council monthly meetings are filled with bedside nurse presentations of nurse identified patient issues resulting in research, evidence based and quality improvement projects, and policy changes.
- Mentoring of new members of the research council continues while experienced members move on to their second or third projects in recent years. Need assessment surveys are conducted annually to identify learning needs of the novice and experienced research council members.
- The nurse executives recognized a nursing need that would ultimately impact quality of care and worked to support the nurses of the facility. They provided the support and leadership to help instill and sustain a culture of inquiry and continue to do so.

COMPARISON TABLE

Component	Pre	Post
Research Council attendance	30% Nurse Educators 0-2% Staff Nurses	70% Nurse Educators 10% Staff Nurses
System wide nurse participation	Approximately 10% participation	65% participation
Poster rubric	Rubric did not exist	Rubric present and helpful to create quality content posters
Nurse week total poster submissions	10% (8)	Increase of 150% (34) Quality content increased!
Abstract submitted nationally and internationally	4	Increase of 300% (32)
Manuscript creation/publication	1	Increase of 150% (3)
Quality/scholarship of posters/abstracts	minimal	Excellence is evident
Staff nurse presentations at Research Council	minimal	Every month 2-3 staff nurses present unit projects

"As you read/hear the powerful stories about how clinicians transformed practice and improved patient outcomes through EBP, you will reignite your passions for why you chose your profession and rekindle your commitment to deliver the highest quality of care possible for the benefit of your patients and family members." (Melnik, B. 2011, pg. v).

For further inquiries contact the authors:
Dr. Marguerite Fallon at mfallon@covhs.org
Dr. Cindy Ford at cindy.ford@lcu.edu