

Title:

Are Students Prepared to Engage in Evidence-Based Practice (EBP)? Developing Essential EBP Skills

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Session Title:

Evidence-Based Practice in Nursing Education

Slot:

L 01: Sunday, 30 July 2017: 8:30 AM-9:45 AM

Scheduled Time:

8:30 AM

Keywords:

Competencies, EBP and Undergraduate

References:

Bloom, K., Olinzock, B.J., Radjenovic, D., & Trice, L.B. (2013). Leveling EBP for

undergraduate nursing students. *Journal of Professional Nursing*, 29(4), 217-224. doi:

10.1016/j.profnurs.2012.05.015.

Stevens, K.R. (2013). The impact of evidence-based practice in nursing and the next big

ideas. *The Online Journal of Issues in Nursing*, 18(2), 1.

doi:10.3912/OJIN.VOL18No02Man04

Stevens, K.R., Puga, F., & Low, V. (2012). *The ACE-ERI: An instrument to measure EBP*

readiness in student and clinical populations. Retrieved from:

www.acestar.utscsa.edu/institute/su12/documents/ace/8%20The%20ACE-

[ERI%20Instrument%20to%20Benchmark.pdf](http://www.acestar.utscsa.edu/institute/su12/documents/ace/8%20The%20ACE-ERI%20Instrument%20to%20Benchmark.pdf)

Abstract Summary:

This presentation will describe our 6-year project to reengineer EBP throughout our three undergraduate curricula using the American Association of Colleges of Nursing (AACN) Baccalaureate Essentials as a guide. Students' knowledge increased, as did their level of confidence in EBP competencies, as demonstrated by scores on the ACE-ERI.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will describe the integration of EBP throughout the undergraduate curriculum.	EBP Curriculum Road Map, EBP/Research Course Development, Learning Activities, Integration of EBP into each nursing specialty.
The learner will discuss ACE-ERI results and interpretation of these results.	The ACE-ERI, development, competencies measured, administration of instrument, data analysis.

Abstract Text:

Background: Over the past six years we reimagined EBP throughout our undergraduate program using the AACN Baccalaureate Essentials as our guide. Student and faculty feedback was positive, work products were excellent. We measured EBP competencies for each cohort and were able to demonstrate success, however we did not have a cumulative measure of all of the students over time.

Purpose: To measure EBP competencies and knowledge of students in in the undergraduate program.

Methods: IRB approval was obtained from the university. The ACE Evidence Based Readiness Inventory (ACE-ERI) is an online instrument that measures self-reported competencies in EBP. The instrument is based on nationally established EBP competencies and has strong validity and reliability. It has been utilized in both clinician and student populations. The tool incorporates the EBP competencies, a knowledge test focusing on knowledge transformation and demographic information. The ACE ERI is distributed to students via an email invitation at the beginning and end of their EBP course as well as at the end of their program. Data is anonymous and reported in aggregate. In order to encourage students to complete the survey, a certificate of completion is generated for students.

Results: The ACE ERI has been administered to 18 cohorts over the past five years. There is greater than a 90% return rate for both pre and post surveys. Student knowledge increased as did level of confidence in EBP competencies. Pretest and posttest mean scores for ACE-ERI competencies were compared. Statistical significance was achieved for all twenty competencies ($p < 0.001$). Analyses were run to investigate the correlations between the questions and the demographic variables. There were no statistically significant relationships indicating that the variation in the results was not related to the demographics of the students.

Conclusion: Student knowledge and competency in EBP increased significantly. We use the ACE-ERI to measure EBP knowledge and competency on an ongoing basis. Further analyses are being conducted to ascertain which specific features of our EBP model are most successful.