

Title:

EBP in Action: Ensuring Best Practice is Standard Practice

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Session Title:

Building EBP Capacity and Getting Results: What a Difference One Year Makes

Slot:

J 01: Saturday, 29 July 2017: 1:30 PM-2:45 PM

Scheduled Time:

2:10 PM

Preferred Presentation Format:

Symposium

Keywords:

Collaboration, Evidence-based practice and Outcomes

References:

- Dilling, J.A., Swensen, S.J., Hoover, M.R., Dankbar, G.C., Donahoe-Anshus, A.L., Murad, M.H., Mueller, J.T. (2013). Accelerating the use of best practices: the Mayo Clinic model of diffusion. *The Joint Commission Journal on Quality and Patient Safety* 39 (4) 167-176.
- Jacobs, S.R., Weiner,B.J., Reeve, B.B., Hofmann, D.A., Christian, M., and Weinberger, M., (2015). Determining the predictors of innovation implementation in healthcare: a quantitative analysis of implementation effectiveness. *BMC Health Services Research*. 2015; 15: 6. doi: 10.1186/s12913-014-0657-3

Abstract Summary:

This symposium describes the innovative work of a nationally recognized university-based EBP program in advancing EBP through a collaborative relationship with a large, Magnet designated Pediatric Health System to create a successful EBP program that is delivering improved care and significant outcomes.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
Describe key organizational structures that support implementation of evidence-based practice in a complex healthcare system.	Overview of Children's Hospital Colorado comprehensive Policy and Procedure process to support integration of evidence-based nursing practice into clinical care highlighting demonstrated outcomes.
Identify strategies to support evidence-based clinical practice at the point of care.	Embedding EBP into existing structures such as organization P&P ensures that best practice is standard practice across all settings. Outcomes include pre/post surveys from leadership as well as end users. Data on frequency of policy access.

Abstract Text:

Purpose:

EBP methodology including evidence based policies and procedures and clear, consistent dissemination and implementation processes can accelerate the move of best practice to standard practice in a complex organization.

Background:

Literature suggests that 70% to 90% of complex healthcare innovations never reach the patient (Jacobs et al, 2015). An organization that incorporates an Implementation Team embedded in its policy and procedure process has the opportunity to remove barriers and implement new practice as soon as it is identified. Using EBP methodology in policy management can support rapid adoption of evidence into clinical practice.

Methods:

Implementation is often the most challenging aspect of EBP. Frontline clinical nurses do not always have the resources needed to manage organizational change, especially in a complex healthcare organization. As a result, EBP projects often stall at this critical point, preventing the new knowledge and innovation from reaching the patient.

Most practice changes eventually make it to a clinical policy. The Clinical Policy Committee (CPC) includes an Implementation Team consisting of Nurse Educators, Clinical Nurse Specialists, Advance Practice Providers, Clinical Managers, Nursing Informaticists and clinical application specialists from the electronic medical record. After each Clinical Policy meeting, the Implementation Team evaluates what steps are needed to prepare staff for the practice change. A dissemination plan is developed during the meeting. Key steps are identified, action items assigned and timelines established (Dilling et al, 2013).

A monthly newsletter entitled Policy Pearls is published on the first Monday or the month, the same day in which all new or updated policies are posted. Step by step instructions, skills validation check lists, videos, patient handouts, links to manufacturer's instructions, ordering information and educational materials are all included in the policies to accelerate uptake. Each quarter 8-10 questions designed to measure knowledge and understanding of practice changes are assigned to over 1500 clinical nurses through the organization's learning management system (LMS). The team manages complex implementation processes, including communicating with Providers, EMR personnel and educators to ensure the necessary changes are in place prior to posting the policy.

Outcomes and Takeaways:

A pre/post survey was administered measuring leaders satisfaction with how information of practice changes were shared with staff before and after the creation of the Implementation Team.

- Satisfaction with the implementation process increased from 12% to 100% over two years for:

- Awareness that a policy/procedure was updated.
 - Awareness that a new policy/procedure was posted.
 - Education for staff around policy and practice changes.
 - Timeliness of process of instituting new policy and practice.
- House-wide pre/post survey of confidence and satisfaction with current Clinical Policy and Procedure system. November 2013 August 2016 N=250

	November 2013	August 2016
Confidence P&P are evidence-based	Not confident = 13 Neutral=22 Confident/Very confident=65	Not confident =1 Neutral=14 Confident/Very confident=82
Satisfaction knowing about new and updated P&P	Dissatisfied/ Very dissatisfied=24 Neutral=35 Satisfied/Very satisfied=41	Dissatisfied/ Very dissatisfied=5 Neutral=25 Satisfied/Very satisfied=70
Satisfaction with searching and finding P&P	Dissatisfied/ Very dissatisfied= 29 Neutral=38 Satisfied/Very satisfied=37	Dissatisfied/ Very dissatisfied=5 Neutral=12 Satisfied/Very satisfied=83

- A question was embedded in the quarterly LMS test to measure the effectiveness of using this method to spread awareness of significant practice changes. N=1500
 - 93% of nurses “Agreed or Strongly Agreed” that “The quarterly policy and procedure module is a beneficial way to increase my awareness of new and revised policies and practices.”
- Using logistics to track how often P&P are searched for, selected and opened we know that staff members access P&P 15,000-20,000 per month in the newly developed policy management platform.

Implications for Nursing Practice:

EBP methodology including clear, consistent dissemination and implementation processes can accelerate the move of best practice to standard practice in a complex organization. Embedding EBP into existing structures such as organization P&P ensures that best practice is standard practice across all settings. Establishing the expectation that evidence is required for all practice changes supports the culture of EBP within the organization. Leveraging Shared Governance structure allows for streamlined communication and education efforts. Creating supportive structures, including technology that allows for quick retrieval of P&Ps, ensures that clinicians at the point of care have the tools necessary to provide safe, evidence based care.