Instituting an Evidence-Based Methodology Through a Practice Change Checklist

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Introduction and Evidence Review

• Creating a consistent methodology for changing practice can be difficult in a large academic multicenter environment.
In this evidence based quality improvement project, clinical nurses in the practice council of a shared governance structure created a comprehensive checklist for consistent practice changes that led to improved clinical inquiry and more consistent implementation.
• Structural empowerment is one of the major components of the ANCC’s Magnet Recognition Program model (ANCC, 2008). Structural empowerment in an organization with Magnet status is exemplified by nurses involved in shared governance and engaged in shared decision making on structures as well as processes that results in staff satisfaction (Clavelle & O'Grady, 2013).

Methods

Each month 30 clinical nurses and inter-professionals from across inpatient, outpatient and procedural areas come together to solve the problems of the organization through an eight-hour day shared leadership council structure. To address these issues the council members designed what is called an Action Request Form (ARF). When first developed the ARF generated hundreds of ideas with very little structure around how to make an evidence based practice change. After categorizing the ARFs in seven different areas that effected practice it was clear to see that there was much variation in the process undertaken to make a practice change.

Results

A workgroup of clinical nurses with the support of doctorate prepared nurse leaders developed a comprehensive practice change checklist that would guide the implementation of a new practice. Each step in the checklist was individualized to the institution to include contact names of potential key stakeholders, links to standardized literature review table and library sources, and a clear methodology for creating change.

Results (cont.)

Through the leadership and guidance of their nursing directors the council members were successful in developing an evidenced based methodology to tackle difficult practice issues. The stabilization of the process led to an increase in the submissions of action request forms and in a three-year timeframe (2014 – 2017) 900 clinical issues have been brought forward for investigation with 80% of them being solved through this systematic combined approach of Action Request Form submission and practice change checklist.

Conclusion:

The Practice Change Checklist guided nurses in the design of nurse driven protocols for:
• Lidocaine jelly application prior to NG insertion
• Transferring stable cardiac patients from the ED without infusion treatment patients to go home with peripheral IV in place for next visit
Empowering clinical nurses and interprofessionals to elevate their practice is essential to job satisfaction, patient satisfaction, and positive clinical outcomes. The practice change checklist is a reliable methodology and replicable to other organizations.

References


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