Integrating Evidence Based Practice Using a RN-MD Collaborative Model
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Background: Evidence Based Practice (EBP) integrates current evidence, clinical expertise and patient values to optimize patient’s outcome and quality of life (Sackett, 2000; DiCenso, 2005). Children’s Mercy Hospitals & Clinics (CMH&C) initiated its EBP program in 2002 to improve patient care by creating a structure and framework based on Oxford’s Center of Evidence Based Medicine & Cincinnati Children’s Hospital Clinical Effectiveness Department. The Evidence Based Practice Collaborative (EBPC) is facilitated by a Medical Director and a Nurse Program Manager; and supported by Director of Research, Director of Quality, Nursing Practice Council Chair, Director of Clinical Informatics, librarians, and biostatisticians.

Project: Staff members pose answerable clinical questions which are addressed using 5 basic EBP principles: Ask question, Access literature, Appraise literature, Apply literature and Assess the outcomes of the interventions. If clinical questions cannot be answered with available evidence, EBPC assists in developing consensus statements based on clinical expertise and consensus. The process is documented, creating a transparent system for clinicians to understand the foundation for practice recommendations. EBPC provides passage around three common barriers clinicians experience when translating research into practice: lack of clinician time and access to literature, and limited ability for literature analysis. With the assistance of EBPC staff, clinicians access the Cochrane Collaborative, STTI Worldviews on Evidence-Based Nursing, Critical Appraisal Skills Programme (CASP) Tools, and the AGREE Guideline appraisal tool.

Conclusion: EBP programs meet organizational needs when issues are addressed: barriers for clinicians and mechanisms to diminish them; need for a transparent system to identify how care practices are determined; and need for intra- and inter-organizational EBP networks. Consequently, clinicians become savvy in accessing, assessing, and integrating evidence in practice. While changing practice is never easy, the process is eased when organizations determine what EBP means in their settings. Start with baby steps and celebrate milestones!

References
http://www.phru.nhs.uk/casp/critical_appraisal_tools.htm
http://www.agreecollaboration.org/instrument/.