Development of a Multidisciplinary Evidence-Based Framework for Sustaining Change in Pediatric Nursing Practice
Shirley D. Martin, RN, BSN, CPN
Cook’s Children Medical Center
Suzanne Frey, Andrea Smith

Problem
Despite many strong EBP models for initiating change in pediatric nursing practice, the challenge to sustain change over time remains. The purpose of this EBP project was to identify the most effective strategies to sustain change from a variety of different disciplines, develop them into a framework to change practice, and test the framework in two pediatric units using the problem of needle stick pain prevention.

Evidence
Iowa model of EBP (Titler, 2001) guided this project. Extensive search of multidisciplinary on-line databases provided summary evidence from: 1) psychology: successful change related to congruent decisions, 2) neuroscience: changes in brain neuroplasticity related to repetition, 3) cognitive Behavioral therapy: successful change and axiomatic rules, 4) business: guidelines for making change stick, 5) nursing: change related to cultural assessment.

Strategy
This evidence was incorporated into an implementation framework with strategies for sustaining change in pediatric nursing practice.

Practice Change
To pilot and evaluate the change framework, a multidisciplinary group of pediatric nurses and caregivers from the E.D. and post-surgical in-patient units were recruited for an EBP team to improve needle stick pain prevention (NSPP). Key stakeholders from various parts of the hospital participated, including a pharmacist and laboratory technician.

Evaluation
Baseline data was collected by surveying healthcare providers regarding their perceived importance for the use of pain prevention measures prior to performing needle stick. Additional data collected included current pharmacological and non-pharmacological practice. The culmination of this data suggested that previous strategies to implement EBP for NSPP were inadequate.

Results
Two year follow up shows increased use of pharmacological and non-pharmacological practices and increased patient/parent satisfaction with NSPP.

Recommendations
Multidisciplinary evidence based strategies to help sustain change in practice can enhance adoption and help overcome barriers.

Lessons Learned
Meaningful change takes time in a large organization. Early adopters and champions can help pave the way for areas slower to adopt new change. Identifying key stakeholders and best communication strategies enhances positive outcomes.
References:
Baxter, A., Ewing, P., Evans, N., Ware, A., Mix, A., & Manworren, R. EMLA application in triage improves venipuncture success, poster presentation, Children's Medical Center, Dallas.

MacLean, S., Obispo, J., & Young, K. (February 2007). The gap between pediatric emergency department procedural pain management treatments available and actual practice. Pediatric Emergency Care, 23(2), 87-93.


