The Online EBP Academy: Improving Capacity for Evidence-Based Practice
Liz Walker, BSN, RN, CRS
Arkansas Children’s Hospital
Angela Green, Beatrice Boateng, Debra Jeffs, Amy Huett, Barbara Pate, Barbara Schmid,
Gary Lowe, Todd Nick, Maria Melguizo

Problem: While evidence-based practice (EBP) is a major clinical influence, many clinicians lack EBP knowledge and skill.

Evidence: The IOM identified EBP as critical to healthcare quality and an essential competency for clinicians. Practice based on evidence leads to better quality care.

Strategy: E-learning interventions can rapidly reach larger numbers of staff by removing scheduling, accessibility, and resource constraints.

Practice Change: A face to face course was converted to an interactive e-learning intervention.

Evaluation: Participants completed online modules, participated in interactive discussion forums, and developed a project with support from a program mentor. Focus groups were conducted to evaluate platform usability and functionality after 10 participants (Phase 1). EBP beliefs and EBP implementation were measured pre, immediately post, and 6 months post completion for Phase 1 and Phase 2 participants. Data analyzed to identify changes in EBP beliefs, EBP implementation, and project specific quality outcomes.

Results: Phase I (10 participants) and Phase II (38 participants) were comprised of 83% nurses and 17% respiratory therapists (17%). Participants averaged 38-39 years of age and over 12 years of clinical experience. Half reported a bachelor’s degree or higher. Focus group data identified the need for tutorials for the learning management system and library. EBP belief scores and EBP implementation scores increased at each administration. Phase I increase from pre to 6 months post was statistically significant (p=.001). Phase II increase from pre to immediately post was statistically significant (p=0.4). Projects were developed by 7 of phase 1 participants and 13 phase II participants.

Recommendations: E-learning interventions successfully increase capacity for EBP.

Lessons Learned: Significant attrition occurred during Phase II due to extremely high census during the winter months. Participants may need more support to develop projects than is possible with a large e-learning group.

Conclusions and Discussion: The e-learning intervention resulted in improved EBP Belief and Implementation scores. Strategies are needed to provide focused support for project development in an e-learning environment.
Bibliography:


