

Interdepartmental Collaboration for Evidence-based Practice

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While undertaking a study to learn how nurse managers (NMs) support clinical nurses in the conduction of evidence-based practice (EBP), the Center for Nursing Excellence (CFNE) system director (CFNESD) and a hospital chief nursing officer (CNO) in a large health care system in the southeastern part of the country partnered with key department system-wide leaders to remove an important barrier to EBP—access to data (unpublished data). Through a collaborative effort, a toolkit (*Figure 1*) was developed, providing authorized users access to data required for EBP and performance improvement (PI) work. This article describes this successful interdepartmental collaborative effort and how the specially designed Toolkit, developed for the earlier study, has been expanded to support EBP and professional nursing practice in all the hospitals through this health care system (unpublished data).



NMs along with shared governance council members explored ways for clinical nurses to apply evidence in their daily practice and to demonstrate this in their projects submitted for the system's clinical advancement program (CAP). In review of the portfolios submitted biannually (November or May) for advancement, many projects were found to be PI activities on nursing documentation. Many of the CAP applications submitted by clinical nurses did not contain examples of their scholarly application of EBP or the conduction of *clinical* PI projects supported by good evidence. In those applications that did provide these types of projects, there was often a noted absence of enough relevant, substantial evidence to justify the project's rationale, interventions, or outcome measures over time. Although nursing publications and presentations had been steadily increasing over this same

time in this clinical setting, managerial and clinical leaders concluded that due to the nature of the projects submitted for clinical advancement, an increase in those scholarly activities did not translate into more clinical nurses integrating EBP in their daily practice.

COLLABORATING FOR EBP

In the prior study conducted by the CFNESD and CNO, several NMs voiced that timely ease of access to relevant and valid data is a significant deterrent to application of evidence in the clinical setting. Through additional conversations with the organization's nurse leaders and staff, the CSNED and CNO learned that these professionals were unaware of data repositories available for EBP or how to access them. This led to the decision that the best way to address the barrier

Box 1. Selected Highlights of the Toolkit Contents

The Evidence-Based Practice (EBP) Toolkit provides a summary of relevant resources across several departments. The 16-page toolkit provides details on what is available, how to access it, who to contact, and how it connects to EBP. The toolkit is organized by the department that supports the resources.

Most of the toolkit highlights resources supported by our Center for Nursing Excellence or made available through its website. Examples of the material related to EBP include Performance Improvement (PI)/EBP Project Tools, Research/Non-Research Appraisal Tools, Project Management Tools, Question Development Tools, and templates for presentations and posters. All resources are accessed through hyperlinks.

Team members are directed to the Center's homepage to find details on the council's purpose, how to access key policies related to research, the process for initiating an EBP project or nursing research, and the contact information for the assistance.

Additional material include a 4-part series for EBP education intended for self-paced training using a computer-based learning platform, as well as information on the NDNQI with details on the purpose of the database and what metrics are included, why we participate, and who to contact for support or access.

The toolkit highlights several aspects regarding CAP. A high-level overview regarding CAP is provided that provides an idea of the goal and intent of the program. PI and/or EBP projects are a required element of the CAP program, and nurses must demonstrate completed PI/EBP project showing a level sustained improvement in order to be awarded CAP points. The toolkit recommends partnering with nursing leadership early in the project consideration process to ensure the project aligns with nursing strategic goals.

Resources supported by other departments covered in the toolkit include the WellStar Research Institute, enterprise intelligence, library resources, and quality and safety PI.

- **WellStar Research Institute:** Example content for this department includes specific services and how to access, where to find research policies and procedures, and guidance on submitting research proposal to the institutional review board.
- **Enterprise Intelligence:** Department supports metrics on labor productivity, operational benchmarking, volume statistics, quality reporting, utilization benchmarks, general patient data trend reporting, patient level profitability reporting, cost accounting, risk management, event reporting, and staffing grids.
- **Library Resources:** Medical library locations and how to request an article/topic review, lists of electronic journals and databases, including necessary passwords if needed are included.
- **Quality and Patient Safety Performance:** Provides resources and contacts for accreditation support, PI, and safety, including metrics (e.g., HCAHPS [Hospital Consumer Assessment of Healthcare Providers and Systems]), internal training (e.g., Lean Six Sigma) and external educational options (e.g., Institute for Healthcare Improvement, Agency for Healthcare Research and Quality), and project repository (KaiNexus).

The toolkit is available in hard copy and online under WellStar's Center for Nursing Excellence's professional practice resources.

to “access to data” would be to ask for assistance outside of the nursing department and to collaborate with other departments whose staff could provide relevant, valid data and lend expertise on how to interpret data.

With a simple request, department leaders from the CFNE, enterprise intelligence, library services, quality and patient safety, PI, risk management, and the Research Institute came forward to lend their support. In the spirit of true teamwork and collaboration, leaders who oversee system-wide data repositories containing clinical, financial, quality, risk, and performance outcome data provided information to nursing leaders on what data are available and how to access the repositories. This collective work led to the

creation of a toolkit that is now housed on the CFNE website and contains relevant data and information made accessible to support EBP and other scholarly activities.

In each section of the toolkit, a description of the roles and functions of each of the collaborating departments are described along with what data are in their repositories and who to contact for specific data requests. Although some departments require a short lead time for their staff to prepare reports, others offer instructions on how to set up a protected password to access and run their own reports for requested data. Policies and procedures are in place for authorized users of these data repositories along with instructions on how to protect the data and its use.

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