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# Using a virtual journal club for sharing evidence-based practice recommendations in critical care registered nurses<sup>1,2</sup>

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#### ABSTRACT

Objective: Registered nurses must remain current with evidence-based practice knowledge to meet job demands in an evolving health care climate. This pilot study's purpose was to investigate a virtual journal club's effect on satisfaction, knowledge, and practice.

*Background:* On-line learning is used to convey information while meeting diverse learner needs, and journal clubs are used to disseminate and discuss evidence-based practice knowledge. Combining the 2 concepts into a virtual journal club creates an opportunity to meet learner needs while discussing information that promotes evidence-based practice knowledge and implementation.

Setting/Population: Sixteen critical care nurses from one midwestern teaching hospital's intensive care unit. *Methodology:* Researchers used the Kirkpatrick Learning Evaluation Model in a 4-week-long, mixed methods pilot study. Researchers presented 1 article about sepsis in an on-line discussion forum. Nurses took a pretest before participation and a Likert-type satisfaction survey and posttest after participation. Two weeks following journal club participation, researchers sent participants e-mails asking if/how nurses applied knowledge to practice. Researchers analyzed pre—/posttest results using McNemar's Test.

Results: Sixteen nurses actively participated. Ten nurses took satisfaction surveys, choosing mostly 4 s (agree) and 5 s (strongly agree), reflecting statistically significant satisfaction. Sixteen nurses took pre- and posttests and demonstrated improvement in knowledge; however, only answers to 2 questions demonstrated statistically significant improvement. Eight nurses responded to the evaluation surveys with comments surrounding increased confidence in caring for septic patients and increased awareness of symptomology, testing, and treatments. Two nurses noted that their practice was not impacted by participation.

Practice Implications: Choose relevant articles and make hard copies of the article available for easy access. The virtual journal club discussion forum should promote ease of use and be moderated by someone well positioned to participate frequently and knowledgably. In addition, consider offering continuing education credits to encourage participation.

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#### **Introduction and Background**

Registered nurses (RNs) must be integral in applying current research to practice with constantly evolving health care knowledge affecting treatments, patient satisfaction, and patient outcomes; thus, innovative professional development strategies are needed that are flexible with health care workers' schedules and that facilitate nurses' learning and implementation of new evidence (Bilodeau, Pepin, & St-Louis,

2012). On-line learning is one strategy that is meeting this need with its asynchronous, self-paced, and self-directed format (Dovi, 2014; Morente, Morales-Asencio, & Veredas, 2014). On-line learning may meet the needs of learners who receive and assimilate information in diverse ways (Cottrell & Donaldson, 2013; Morente et al., 2014), can reach more health care workers at one time without limitations of time/place restrictions (Morente et al., 2014), and offers interaction experiences that might not be available otherwise (Carter, Rukholm, & Kelloway, 2009). In addition, some health care organizations may view on-line professional development as a more cost-effective approach for presenting information to a large number of people (Sortedahl, 2012). Therefore, on-line education is being used in health care as an effective method of conveying knowledge and overcoming time, class attendance, diverse learner, communication, and financial barriers. (See Tables 1 and 2.)

Journal clubs have been used within health care for many years as a way to share and discuss evidence-based practice (EBP) knowledge

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with the added benefit of a greater understanding of research methodologies (Steenbeek et al., 2009). Combining on-line learning and journal clubs opens the door for interactive learning experiences through a virtual journal club (VJC) wherein knowledge is shared and discussion is encouraged so that learning takes place and evidence can be put into practice (Lehna, Berger, Truman, Goldman, & Topp, 2010).

#### Literature Review

The author searched several databases from October 3 to 7, 2014 to obtain research articles: CINAHL through EBSCO, Cochrane Library, ProQuest, Medline through Ovid, Web of Science, Medline through EBSCO (using different search terms than CINAHL/EBSCO search), and PubMed. A variety of search terms and combinations were used: *virtual journal club, journal club, on-line education, web-based learning, e-learning, knowledge, understanding, comprehension, practice, skills, application, impact, affect, influence, registered nurses, nurses, and RNs.* After obtaining relevant articles, the author combed through reference lists and forward searched in an effort to capture all applicable research.

The literature search resulted in 37 studies. Excluded studies were more general with a focus on on-line, Web-based, and/or e-learning. Also excluded were the systematic reviews that included the nine articles that made the final cut for critical appraisal. Study outcomes revealed that, while no researcher has actually observed practice change or improved patient outcomes as a result of journal clubs, nurses, nursing students, and medical doctors reported satisfaction with journal clubs and an increase in practice and research knowledge. Some studies went a little further. McLeod, MacRae, McKenzie, and Brasel (2009) compared moderated face-to-face journal clubs and on-line journal clubs and found that participants scored better on critical appraisal tests in the face-to-face clubs as opposed to the Internet journal club, demonstrating that informative comments and free give-and-take interaction in-person may be valuable to increasing knowledge and need to be considered when using the on-line format for learning. Kawar, Garcia-Savan, Baker-Genaw, Drake, and Kaatz (2012) presented evidence that enthusiasm about and involvement with the new club may wear off after the first few months, so members may require incentives to participate (Sciarra, 2011). Kean (2013) offered valuable information about using an embedded librarian in a VIC, especially for nurses who may not be aware of the resources medical librarians have to offer. Lastly, several authors reported that study participants experienced an increase in understanding interpretation of research methodologies.

#### **Local Problem**

Currently, the hospital under scrutiny continues to provide some EBP education to nursing staff through in-class instruction, requiring nurses to come in on days off and receive an hourly wage during the training (Youngblut & Brooten, 2001). This method of education incurs substantial cost to the institution and requires nursing staff to come in on unscheduled work days, creating problems with attendance. While face-to-face education maintains staff accountability and is ideal for evaluating learning outcomes, it is not the most efficient use of time and resources for both employees and the

**Table 1** Satisfaction (N = 10)

Question	Mean scores	
1	4.3	
2	4.3	
3	3.9	
4	4.3	
5	4.2	
6	4,2	

**Table 2** Knowledge (N = 16)

Question	Pretest correct responses (#,%)	Posttest correct responses (#,%)	Difference $(+/-)$	P
1	6 (37.5%)	13 (81.25%)	+43.75%	0.0196
2	9 (56.25%)	16 (100.0%)	+43.75%	*
3	12 (75.0%)	12 (75.0%)	0.0%	1
4	9 (56.25%)	10 (62.5%)	+6.25%	0.7055
5	8 (50.0%)	10 (62.5%)	+12.5%	0.5271

organization. A viable alternative is required whereby nursing staff is held accountable for learning, new knowledge can be gained and learning can be evaluated, new skills and knowledge can be effectively implemented, and patient outcomes can benefit as a result, without the extra cost for and time spent in face-to-face training.

#### **Intended Improvement**

With the establishment of a VJC through an on-line collaboration portal in our study, nurses independently can access and read a current research article and interact with other members in an on-line forum, overcoming classroom attendance barriers (Lizarondo, Kumar, & Grimmer-Somers, 2010). The VJC's facilitators are the hospital's nurse researcher and the author of this article. The research article choice was based upon a current area of interest in the intensive care unit (ICU) and upon recommendations from the unit leaders and unit-based council. For the purpose of this small pilot study, only one article was used for VJC evaluation. To incentivize RNs to participate, we gave \$5 Subway gift cards to participants and one massage gift certificate to the participant chosen in a drawing. Another incentive was that VJC participation could be included in yearly evaluations.

#### **Study Question**

In ICU RNs, what is the effect of VJCs on satisfaction, knowledge, and practice?

#### **Ethical Issues**

This small pilot study was deemed a performance improvement project and, therefore, did not need institution review board approval. Because of the nature of the project, the identities of participants were known. However, the responses to evaluation tools were confidential to the researcher who collected the data because names were removed. The nurses were informed in unit meetings prior to the study that participation was not required and that no form of punishment would be given to those who did not participate.

#### Setting

The pilot study took place within the ICU of a teaching hospital in Midwestern Indiana. The ICU was chosen through recommendations from the ICU manager, clinical nurse specialist (CNS), and nurse researcher who believed that ICU staff would benefit the most because they are a relatively young team in terms of years of experience and have, traditionally, been open to learning opportunities. To participate in the VJC/study, nurses had to work in the ICU as a unit or float staff nurse on a supplemental, part-time, or full-time basis.

#### Methods

For the author's project of developing interventions to implement a VJC, intervention mapping (IM) was a helpful tool to ensure that all necessary components of the process were included. Step Zero of IM is conducting a needs assessment. Rationale for the project was that

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