

Evidence - Based Practice in Nursing

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Throughout the 21st century, the role of nurse has evolved significantly. Nurses work in a variety of settings, including the hospital, the classroom, the community health department, the business sector, home health care, and the laboratory. Although each role carries different responsibilities, the primary goal of a professional nurse remains the same: to be the client's advocate and provide optimal care on the basis of evidence obtained through research.^[1] The recommendation that nurses lead interprofessional teams in improving delivery systems and care brings to the fore the necessity for new competencies, beyond evidence-based practice, that are requisite as nurses transform healthcare. Directions in nursing education in the 1960s established nursing as an applied science. This was the entry of our profession into the age of knowledge. To affect better patient outcomes, new knowledge must be transformed into clinically useful forms, effectively implemented across the entire care team within a systems context, and measured in terms of meaningful impact on performance and health outcomes. The recently-articulated vision for the future of nursing in the Future of Nursing report (IOM, 2011a) focuses on the convergence of knowledge, quality, and new functions in nursing. These competencies focus on utilizing knowledge in clinical decision making and producing research evidence on interventions that promote uptake and use by individual providers and groups of providers.^[2] Nursing research has a tremendous influence on current and future professional nursing practice, thus rendering it an essential component of the educational process.

What Is Evidence Based Practice?

Evidence based practice (EBP) is the conscientious use of current best evidence in making decisions about patient care.

What is Evidence Based Nursing?

Definitions of evidence based nursing have varied in

scholarly literature. Scott & McSherry's extensive literature review looked at commonalities between EBN definitions and synthesized them to come up with the following definition:

"An ongoing process by which evidence, nursing theory and the practitioners' clinical expertise are critically evaluated and considered, in conjunction with patient involvement, to provide delivery of optimum nursing care for the individual."^[4]

Why Evidence Based Nursing?

Evidence-based nursing is one approach that may enable nurses to manage the explosion of new literature and technology and ultimately may result in improved patient outcomes.

Nursing students spend a great deal of preclinical preparation time designing care plans, reviewing pathophysiology, and memorizing pharmacologic interactions. Although these activities are useful, they cannot be the only methods of preparing students for nursing practice.

Evidence based practice (EBP) "involves an ability to access, summarize, and apply information from the literature to day-to-day clinical problems". Evidence based practice "requires an emphasis on systematic observation and experience and a reliance on the research literature to substantiate nursing decisions." Evidence based practice allows practitioners to meet a daily need for valid information about clinical situations.

Evidence based practice allows nurses to enrich their clinical training and experience with up to date research. With the large amount of research and information that exists in nursing, learning

The skills of evidence based practice allows nurses to search for, assess, and apply the literature to their clinical situations.

How is EBN different from Evidence Based Medicine?

Evidence based medicine is defined as "the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients. The practice of evidence based medicine means integrating individual clinical

expertise with the best available external clinical evidence from systematic research." Both EBM and EBN fall under the umbrella of evidence based practice. However, nurses's approach to evidence based practice may differ from the standard biomedical model. Typically, nurses are committed to providing holistic care; treating and working with patients rather than working on them. Effectiveness of treatment is only one part of the clinical decision-making process: in deciding on therapeutic interventions, acceptability to the patient and cost-effectiveness are considered.^[5]

Why Evidence Based Nursing?

Using evidence-based-practice in the clinical setting is not the same as conducting research, the purpose of using EBP is to take the latest evidence from research and guide patient care to achieve the best possible outcomes for the patient. It has been proven that integration of evidence-based practice has a lot of benefits in health care. One of the advantages of implementing evidence-based practice by nurses and other health professionals results in higher quality of care that leads to improved patient outcomes, since EBP incorporates the latest research evidence that are made available to healthcare providers at the point of care. Also, the current use of evidence in healthcare would result in increase patient outcome since EBP includes healthcare recommendations that would help nurses in addressing questions related to best client care.

As well, the use of evidences in the healthcare setting would further increase the nurses' confidence, adaptability, improve their skills, critical thinking and decision making since they have to constantly evaluate various research that would support and be beneficial in their practice. Evidence-based practice not only enhance the nurse's clinical performance, but also lead to higher job satisfaction and better group cohesion which promote job retention in health care. Also, another benefit of using evidence-based practice is reducing cost in health care compared with the care that is based in tradition and outdated policies and practices. Implementation of evidence-based practice would manage available resources, since it would be used efficiently and effectively instead of being wasted in the process of determining ways of providing

competent client care. However, in spite of these benefits, familiarity and implementation of evidence-based practice remains low due to multiple barriers in health care system.^[6]

Sigma Theta Tau International provides systematic reviews, entitled Worldviews on Evidence-Based Nursing, to guide nursing practice across many priority topics.

Key Steps-

The five key steps in the evidence-based practice process include:

1. Formulation of a clinical question;
2. Gathering the best evidence to answer the clinical question;
3. Critical appraisal of the best evidence;
4. Integration of the evidence with the clinician's own expertise, assessment of the patient's condition, available healthcare resources, and the patient's preferences and values to implement a clinical decision; and
5. Evaluation of the practice change as a result of implementing the evidence.

While all five steps are critical, the fifth step is one of the most neglected. It is not uncommon for practitioners to implement a practice change based on evidence, but fail to evaluate the effectiveness of the change. Evaluation of the practice change is paramount, as it is imperative nurses and other healthcare professionals know how a particular treatment worked or the effectiveness of clinical decisions.

The authors maintain that asking the questions in this format will yield the most relevant and best evidence.^[7]

Barriers to Implementation-

These barriers include lack of knowledge regarding evidence-based practice strategies; uncertainty or skepticism that evidence-based practice will result in better patient outcomes than traditional care; lack of time and resources to search for and appraise evidence; organizational constraints, such as lack of administrative support; and peer pressure to continue practices because "they have always been done this way."

Key Facilitators

In an effort to overcome barriers, Melnyk and Fineout-Overholt have identified facilitators to evidence-based practice: administrative support and time to critically appraise literature for relevant and best evidence, as well as to implement and evaluate findings. Mentorship also is a key component in facilitating evidence-based practice.

Creating a Culture-

New nurses are expected to implement evidence-based practice. However, this poses a challenge in that new nurses often are focusing on their transition to professional nursing practice and learning various policies and procedures. It is not uncommon for new nurses to focus more on tasks and organizational skills than specific patient needs. New nurses frequently experience stress and lack of confidence. Once confidence is gained, new nurses are better able to focus on patient needs, thereby facilitating implementation of evidence-based practice.

Disseminating Evidence-

There are many strategies for disseminating evidence: oral presentations, posters, hospital/organization-based and professional committee meetings, journal clubs and publishing.

No Longer an Option-

Evidence-based practice, a problem-solving approach to using best evidence in making decisions about patient care, is no longer an option for staff nurses. Patient care must be based on evidence for optimal outcomes. Equally important as utilizing evidence as the foundation of quality patient care is the conduct of research to fill the gaps in existing nursing literature.

While nurses can be taught how to implement evidence-based practice at the bedside, ongoing support is necessary from nursing administration. This support is critical in facilitating an evidence-based practice culture within the healthcare facility.^[8]

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AN IDEAL WHITE COAT:

- Physician apron should be up to mid-thigh.
- Surgeons apron should be up to knee
- It should be WHITE in color.
- It should be full sleeves.
- Sleeves should have buttons or braces.
- The cloth should be made of drill cotton to prevent static electricity.
- It should have three pockets, one in left above and other two below right and left.
- In front it should have acrylic buttons.

(Source : Park's Textbook of Preventive and Social Medicine, edition 19, page 322-323)