




Igniting and Sustaining EBP to Meet the Quadruple Aim in Healthcare

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The Quadruple Aim in Healthcare

- Enhance the patient experience (includes quality)
- Improve population health
- Decrease costs
- Improve the work life of healthcare providers



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In God We Trust, Everyone Else Must Bring Data!



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The State of Healthcare and Health

- Preventable medical errors are a major cause of morbidity and mortality throughout the world (3rd cause of death in U.S.)
- The delivery of evidence-based care is highly variable with estimates of it occurring only 50 to 55% of the time
- Poor quality healthcare costs billions of dollars every year
- Healthcare spending could be reduced by 30% if patients receive evidence-based healthcare
- 80% of chronic disease can be prevented with healthy lifestyle behaviors
- Depression will be the 2nd most impairing disease worldwide by 2020

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Current State of Health in Nurses

U.S. Physicians Set Good Health Example

Physicians in better health than nurses and employed adult population

by Katie Bass and Kylee McGeeney, October 3, 2012
 see:
<http://www.gallup.com/poll/157859/physicians-set-good-health-example.aspx>

Data based on 1,984 physicians and 7,166 nurses, conducted Jan. 2, 2011 to Aug. 31, 2012.

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Current State of Health in Nurses

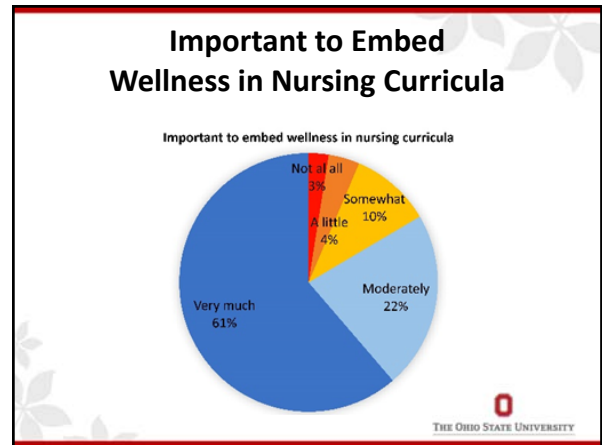
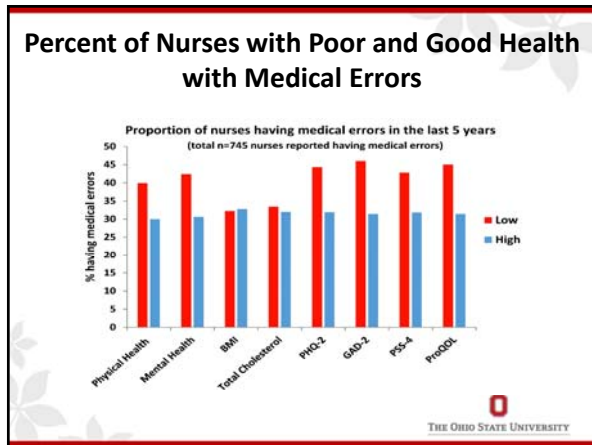
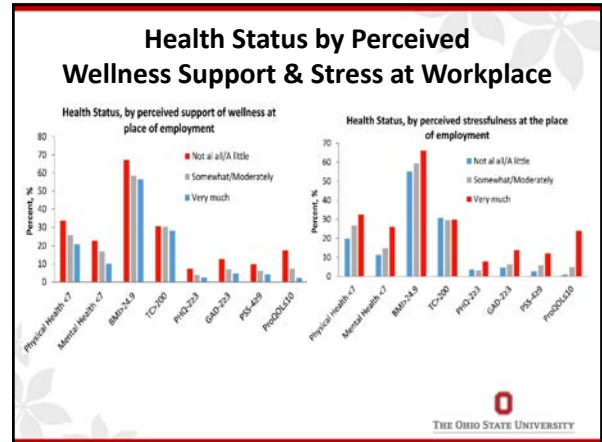
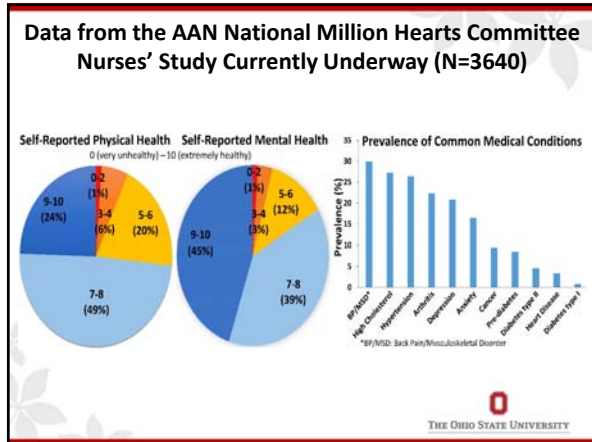
Chronic Health Problems Among Physicians, Nurses, and Other Workers

	Physicians	Nurses	Other workers
% Obesity	13	25	25
% High Blood Pressure	16	22	22
% High Cholesterol	21	20	20
% Diabetes	4	7	7
% Depression	7	14	13
% Heart Attack	2	1	2
% Asthma	9	11	10
% Cancer	6	5	4

Jan. 2, 2011 to Aug. 31, 2012
 Gallup-Healthways Well-Being Index

GALLUP





400 physicians commit suicide each year, a rate more than **2X** that of the general population (Antes & Beebe, 2015)

24% of ICU nurses tested positive for symptoms of post-traumatic stress disorder (Healy et al., 2007)

39% Physician rates of depression remain alarmingly high at (Hawthorn, 2015)

23-31% Prevalence of emotional exhaustion among primary care nurses (Grossman, Chapman et al., 2016)

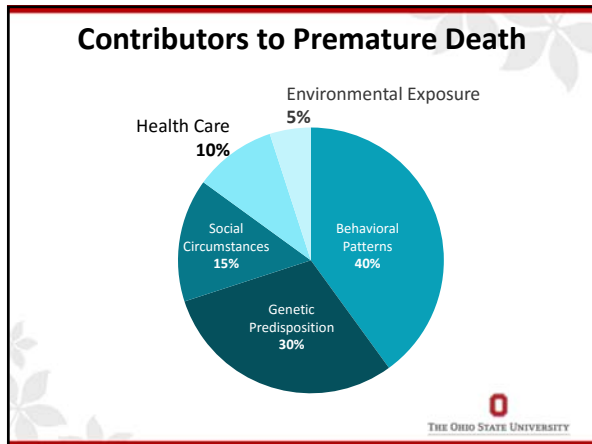
How can we protect the health of the people who protect our own?

National Academy of Medicine
Action Collaborative on Clinician Well-Being and Resilience

Learn more at nam.edu/ClinicianWellBeing @theNAMedicine

Self-Care is Key for Great Care of Others

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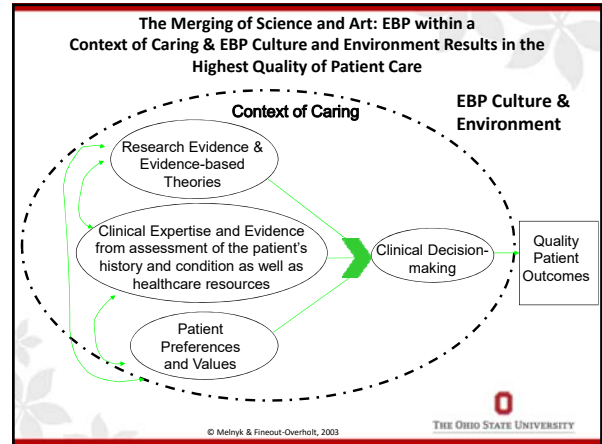
- ### Based on Evidence What Do We Know?
- People who have the following behaviors have 66% less diabetes, 45% less heart disease; 45% less back pain, 93% less depression, and 74% less stress
- **Physical activity**- 30 minutes 5 days per week
 - **Healthy eating**- 5 fruits and vegetables per day
 - **No smoking**
 - **Alcohol in moderation**- 1 drink per day for women, 2 drinks per day for men
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Kaylin's Story: Australian Dream Trip Turned Nightmare




From Melnyk, B.M., & Fineout-Overholt, E. (2011). *Implementing EBP: Real World Success Stories*

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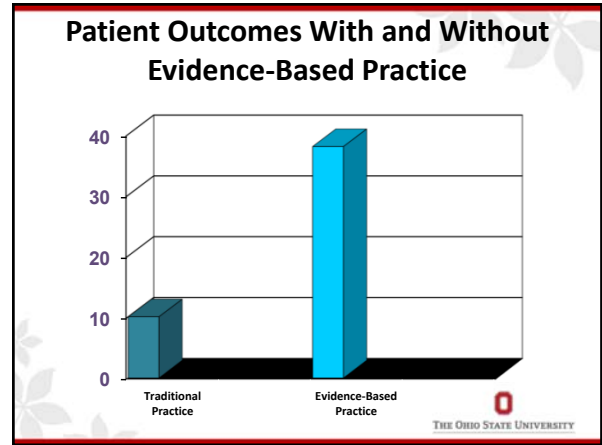


Acting on the Evidence

- Strength of the Evidence + Quality of the Evidence = Confidence to Act!



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Why Must We Accelerate EBP?

Despite an aggressive research movement, the majority of findings from research often **are not** integrated into practice to improve outcomes

The gap between the translation of research into practice and policy is huge; It often takes decades to translate research findings into practice and policy



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The So What Outcomes Factor in an Era of Healthcare Reform

- Conducting research and EBP projects with high impact potential to positively change healthcare systems, reduce costs and improve outcomes for patients and their families
- Key questions when embarking on a research study or an EBP project:
 - So what** will be the end outcome of the study or EBP project once it is completed?
 - So what** difference will the study or EBP project make in improving healthcare quality, costs or patient outcomes?
 - So what** will I measure as outcomes that will help scale the findings when the project is complete?

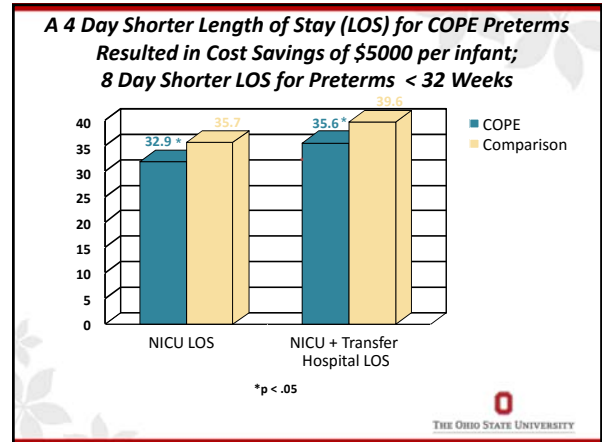
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COPE (Creating Opportunities for Parent Empowerment): An Evidence-Based Program to Improve Outcomes in Critically Ill/Hospitalized Young Children, LBW Premature Infants & Parents



FUNDING FOR THIS WORK BY THE NATIONAL INSTITUTE OF NURSING RESEARCH
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Why Must We Accelerate EBP?

Practices routed in tradition are often outdated and do not lead to the best patient outcomes

- ❖ Daily changing of IV dressings
- ❖ Mayonnaise for head lice
- ❖ Sugar paste for pressure ulcers
- ❖ Albuterol delivery with nebulizers
- ❖ Checking placement of NG tubes with air
- ❖ Vital signs every 2 or 4 hours
- ❖ 12 Hour Shifts for Nurses

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Why Must We Accelerate EBP?

- ❖ Tongue Patch for Weight Loss

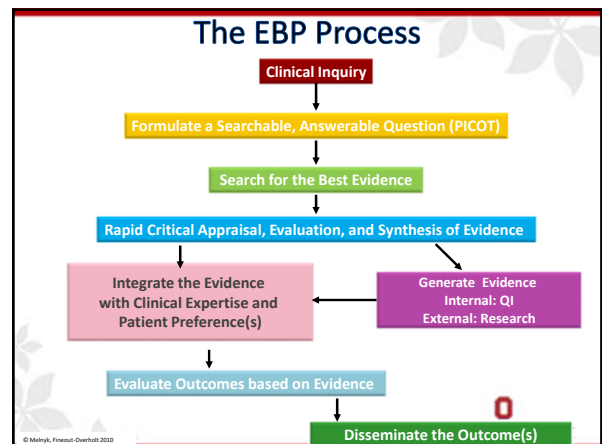


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The Steps of EBP

- Step 0: Cultivate a Spirit of Inquiry & EBP Culture
- Step 1: Ask the PICO(T) Question
- Step 2: Search for the Best Evidence
- Step 3: Critically Appraise the Evidence
- Step 4: Integrate the Evidence with Your Clinical Expertise and Patient Preferences to Make the Best Clinical Decision
- Step 5: Evaluate the Outcome(s) of the EBP Practice Change
- Step 6: Disseminate the Outcome(s)

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A Critical Step in EBP: The PICO(T) Question

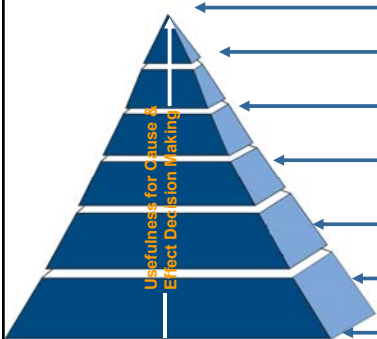
Ask the burning clinical question in PICO(T) format

- Patient population
- Intervention or Interest area
- Comparison intervention or group
- Outcome
- Time


In *adults with depression (P)*, how does *CBT (I)* versus *interpersonal therapy (C)* affect *depressive symptoms (O) 3 months after treatment (T)*?




Levels of Evidence



- Systematic review or meta-analysis of all relevant randomized controlled trials (RCTs).
- Evidence-based clinical practice guidelines based on systematic reviews of RCTs
- Evidence obtained from at least one well-designed RCT
- Evidence obtained from well-designed controlled trials without randomization and from well-designed case-control and cohort studies
- Evidence from systematic reviews of descriptive and qualitative studies
- Evidence from a single descriptive or qualitative study
- Evidence from the opinion of authorities and/or reports of expert committees




Levels of... Chocolate



- Godiva Truffles
- Donnelly Chocolates
- Ghirardelli Chocolate Bars
- Hershey Kisses
- Fannie Farmer Sampler
- Nestle's Quik

"Inspirational quotes are fine, but you'll motivate more people with chocolate."

Modified from Julia Sollenberger, University of Rochester.



Why Measure the Outcomes of EBP?


Outcomes reflect IMPACT!

EBP's effect on patients

- ❖ Physiologic (complication reduction; health improvement)
- ❖ Psychosocial (quality of life; depressive and anxiety symptoms; patient satisfaction with care)
- ❖ Functional improvement

EBP's effect on the health system


- ❖ Decreased cost, length of stay, rehospitalizations
- ❖ Nursing retention / job satisfaction
- ❖ Interdisciplinary collaboration



Findings from our EBP Survey with U.S. Nurses


Melnyk et al., 2012, JONA

- Over 1000 randomly sampled nurses from the American Nurses Association
- The more years in practice, the less nurses were interested in and felt it was important to gain more knowledge and skills in EBP



Percent of Respondents from the ANA Survey Who Agreed or Strongly Agreed with the Following Statements

	%
EBP is consistently implemented in my healthcare system	53.6
My colleagues consistently implement EBP with their patients	34.5
Findings from research studies are consistently implemented in my institution to improve patient outcomes	46.4
EBP mentors are available in my healthcare system to help me with EBP	32.5
It is important for me to receive more education and skills building in EBP	76.2



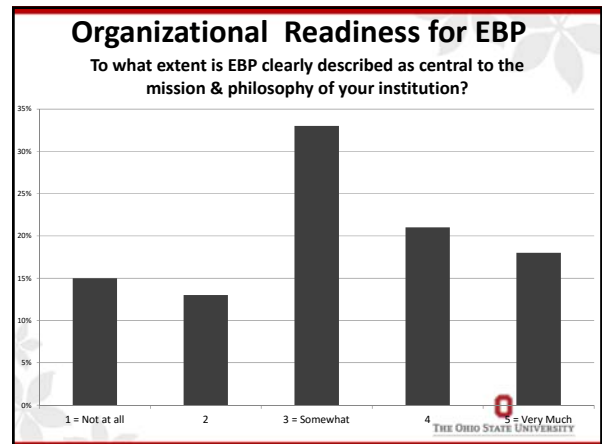
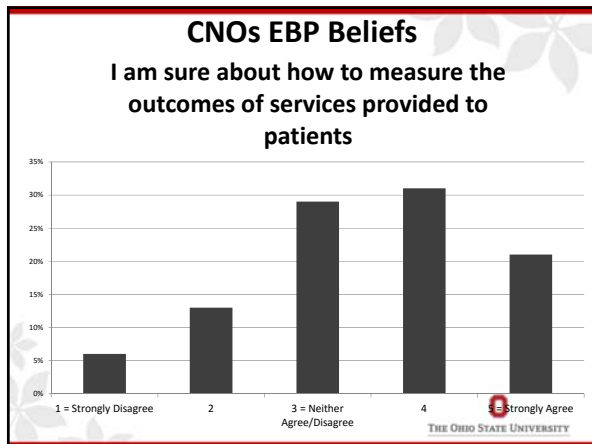
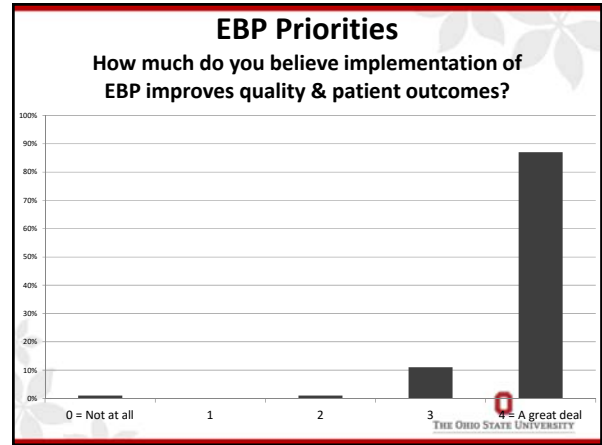
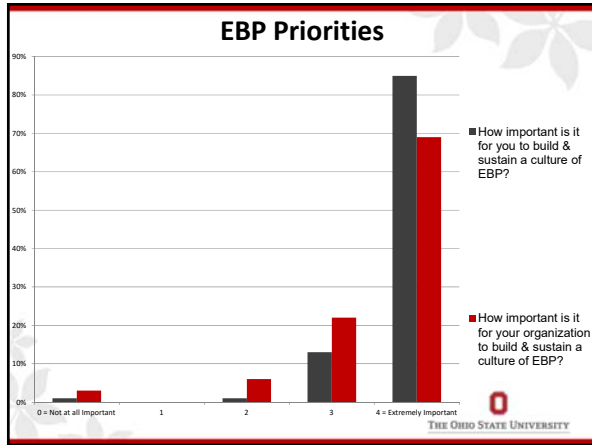
The One Thing That Prevents You From Implementing EBP

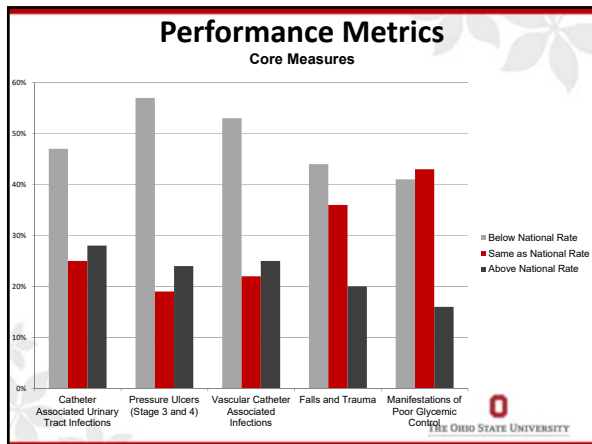
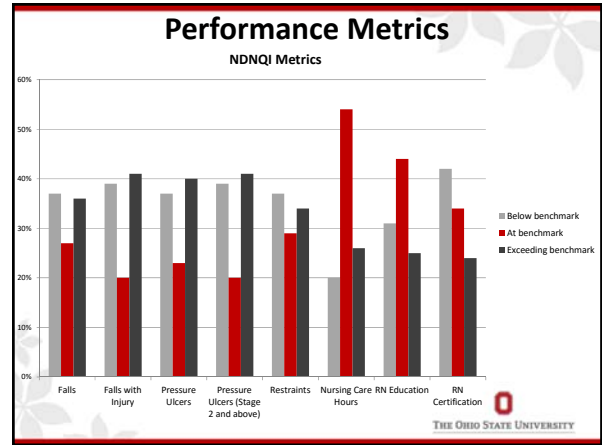
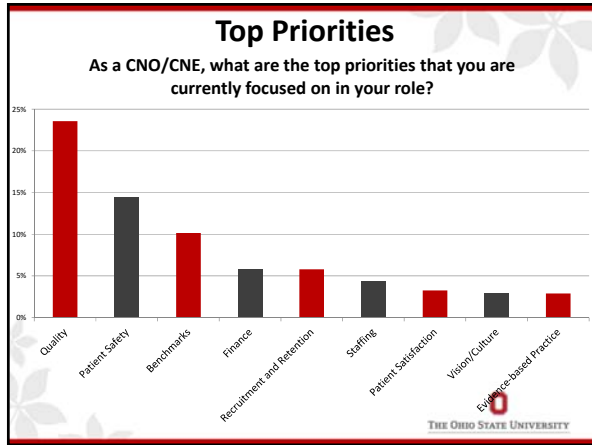
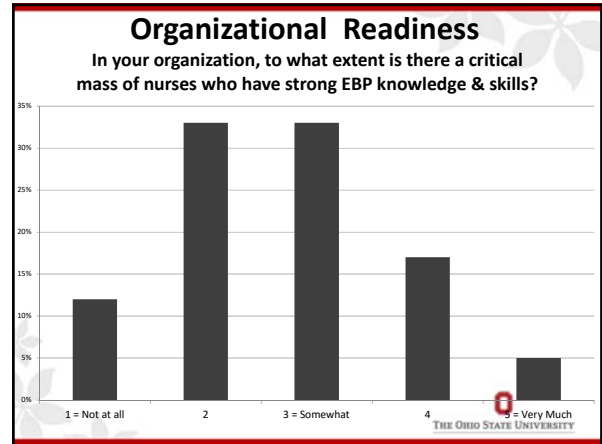
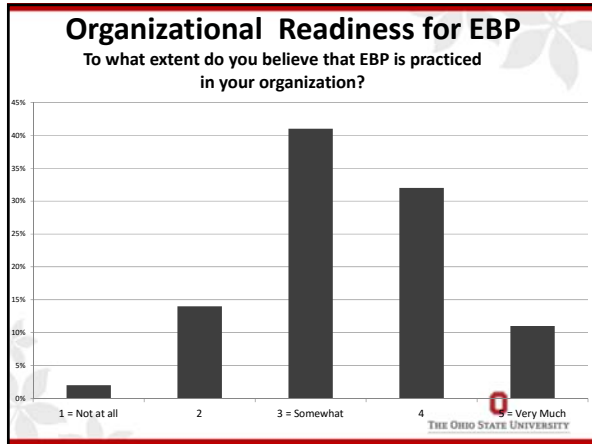
	Total Responses
1. Time	151
2. Organizational culture, including policies and procedures, politics, and a philosophy of "that is the way we have always done it here."	123
3. Lack of EBP knowledge/education	61
4. Lack of access to evidence/information	55
5. Manager/leader resistance	51
6. Workload/staffing, including patient ratios	48
7. Nursing (staff) resistance	46
8. Physician resistance	34
9. Budget/payors	24

The National Chief Nurse Survey

Melnik et al., 2016, Worldviews on Evidence-based Nursing

- 93% currently in the CNO role
- Ages ranged from 32-68 (M= 55 years)
- Years in practice ranged from 8-47 (M=31 years)
- Years as a CNO ranged from <1- 32 (M= 9 years)
- 92% female; 94% White
- 6% bachelor's degree; 69% master's degree;
- 8% PhD prepared; 10% DNP prepared
- 45 States and DC represented
- 18% work in Magnet facilities
- 55% reported having clinical ladder systems
- 47% had no ongoing nursing research projects





Creating a Culture and Environment to Sustain EBP

What Works

Remember, Culture Eats Strategy!

The only person that likes a change is a baby with a wet diaper!



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An Essential Element Required for a Successful Change to System-wide EBP


A Vision with Specific Written Goals
We must begin with the end in mind



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SHOCK!

“You are asking me to implement EBP on top of everything else that I do?”



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Stressed!



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Change Fatigue



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Critical Components of an EBP Culture

- A Philosophy, Mission and Commitment to EBP:** there must be commitment to advance EBP across the organization as evidenced in orientation, clinical ladders, evaluations
- A Spirit of Inquiry:** health professionals are encouraged to continuously ask questions, review and analyze practices to improve patient outcomes
- EBP Mentors:** who have in depth knowledge and skills in EBP, mentoring others, and overcoming barriers to individual and organizational change

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Critical Components of an EBP Culture

Administrative Role Modeling and Support:

- leaders who value and model EBP as well as provide the needed resources to sustain it

Infrastructure:

- tools and resources that enhance EBP across the organization; computers for searching, up to date data bases, library resources

Recognition:

- individuals and units are rewarded regularly for EBP

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EBP Competencies for Practicing Nurses and Advanced Practice Nurses

WORLDviews on EVIDENCE-BASED NURSING™

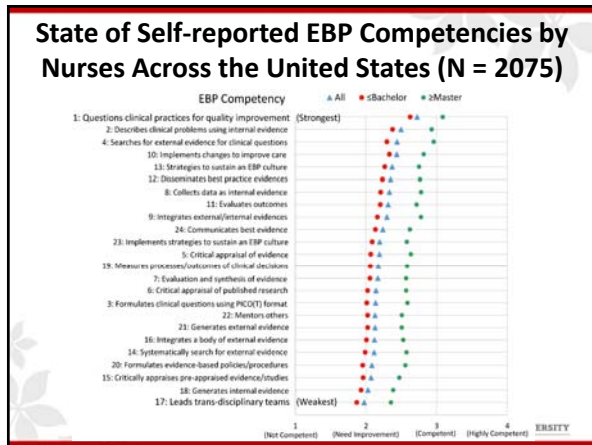
The Establishment of Evidence-based Practice Competencies for Practicing Registered Nurses and Advanced Practice Nurses in Real-World Clinical Settings: Proficiencies to Improve Healthcare Quality, Reliability, Patient Outcomes, and Costs

2014

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Making Use of the Competencies

The new EBP competencies should be integrated into healthcare system orientation programs, clinical ladders, and performance appraisals

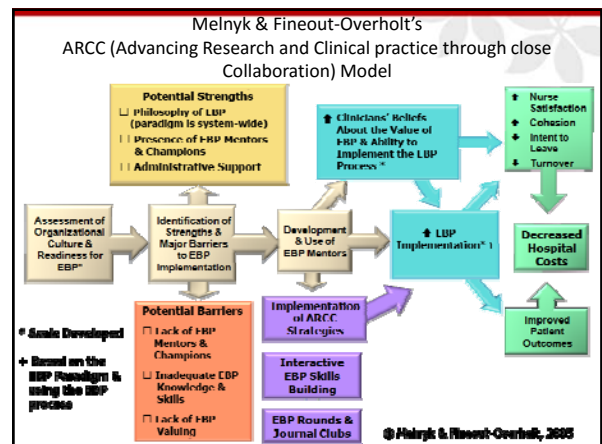
Incorporating the competencies into real world practice settings will assist healthcare systems in improving quality, safety, and patient outcomes as well as reducing costs!

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Return on Investment with EBP


- It is critical to establish ROI with EBP
- ROI helps with sustainability of EBP
- We must measure quality indicators

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Evidence to Support ARCC


- **Study #1:** Descriptive correlational study with 160 nurses
- **Study #2:** A psychometric study of the EBP beliefs and EBP implementation scales with 360 nurses
- **Study #3:** A randomized controlled pilot study with 47 nurses in the VNS
- **Study #4:** A quasi-experimental study with 159 nurses in a clinical research medical center environment
- **Study #5:** A pre-experimental study with 52 clinicians at WHHS



Outcomes of Implementing the ARCC Model at Washington Hospital Healthcare System

- Early ambulation in the ICU resulted in a reduction in ventilator days from 11.6 to 8.9 days and no VAP
- Pressure ulcer rates were reduced from 6.07% to .62% on a medical-surgical unit
- Education of CHF patients led to a 14.7% reduction in hospital readmissions
- 75% of parents perceived the overall quality of care as excellent after implementation of family centered care compared to 22.2% pre-implementation

Melnyk et al., 2017, *Worldviews on Evidence-based Nursing*



The simple provision of resources and dissemination of information alone will not lead to uptake of EBP





A multi-component active strategy is necessary, including behavior and organizational culture change strategies




The Future of EBP: What It Will Look Like in 2030


- EBP is in the DNA of every practicing clinician and educator
- 100% of healthcare decisions are evidence-based
- Reimbursement is only provided for EBP
- There is no time lag between the generation of research findings and their implementation in practice to improve care and outcomes

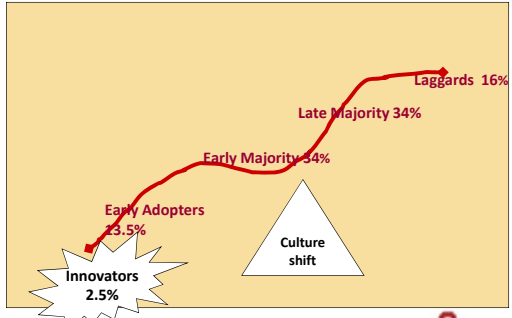
What Will It Take to Achieve the Vision?




- Slaying of many sacred cows!
- An interprofessional team dream, belief, risk-taking and persistence through the "character-builders!"
- A sense of urgency; the time is NOW!
- Professors and clinical educators who have the knowledge and skills to teach EBP as people can not teach what they themselves do not know
- Investment in building cultures and environments of EBP, including critical masses of EBP mentors
- Integration of the new EBP competencies as standard of care



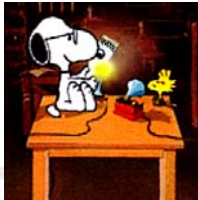
Diffusion of Innovation



Category	Percentage
Innovators	2.5%
Early Adopters	13.5%
Early Majority	34%
Late Majority	34%
Laggards	16%



A key ingredient for success is persistence as there will be many "character-building" experiences along the way!!



"At least I have found 9000 ways that it won't work."

Thomas Edison



Worldviews on Evidence-Based Nursing™

Linking Evidence to Action

Editor
Bernadette Melnyk, PhD, CNRN/PMHNP, FAANP, FAAN

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Ask yourself:

- *What will you do if you know you can not fail in the next 2 to 5 years?*
- *What is the smallest EBP change that you can make tomorrow that would have the largest positive impact for your patients' outcomes?*



“...because we’ve always done it that way.”

~~Because we've always done it that way!~~

Nothing Happens Unless First a Dream!

Carl Sandburg



The Helene Fuld Health Trust National Institute for EBP in Nursing & Healthcare took 10+ years for the dream to become reality

Fuld National Summit – October 18-20, 2017

See <https://fuld.nursing.osu.edu/>



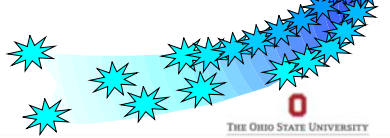
The Next 2-5 Years

What will you do in the next 2 to 5 years if you know that you cannot fail?

Shoot for the moon, even if you miss, you will land amongst the stars

-Les Brown

There Is A Magic In Thinking Big!



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