

EVIDENCE – BASED NURSING.WHAT'S IT'S ROLE?

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I. INTRODUCTION

Florence Nightingale started evidence-based practice in the 1850s, during the Crimean War. Evidence-based nursing practice refers to the best recent techniques for delivering high-quality care that are supported by the most reliable research. EBP encourages medical staff to give patients high-quality care.

- 1. Meaning of Evidence based practice:** Reviewing, analyzing, and translating the most recent scientific data is done through the EBP process.
- 2. Definition of evidence based medicine:** “The conscientious, explicit, and judicious use of the current best evidence in making decisions about the care of individual patients”. (Sackett et al.)
- 3. Definition of research:** “Research essentially is a problem solving process, a systematic, intensive study directed towards full scientific knowledge of subject studies”. (Ruth M. French,1968)
- 4. Evidence-based practice components**
 - The most reliable facts available.
 - The demands and preferences of consumers of health services.
 - The clinical judgment and nursing knowledge.

II. RESEARCH VS EBP

EBP is not about conducting research. It is about using research.

Steps of evidence-based practice

- 1. Formulating the well-built clinical question:** Clinical cases frequently present a deluge of information to process. Prior to conducting a successful search of EBP resources, you must decide which specifics are crucial to answering the current question.

The following elements are found in a well-designed clinical question:-

- The disorder or illness of the patient
- The review's intervention or findings
- Contrast and intervention (if applicable-not always present)

The result: The abbreviation PICO makes it easier to recall the procedure –

PICO:

- Patient population
- Intervention
- Comparison intervention
- Outcome

Consider the following example: "Does nebulization lessen respiratory distress in preterm newborns more efficiently than ventilation?"

Premature newborns make up the patient population. Nebulization is the intervention; ventilation is the comparison intervention. The goal is to lessen respiratory distress.

2. Identify and collect the most relevant and best evidence:

- **General information resources:** These resources that provide information's about various diseases & clinical questions, like up to-date E-Books.
- **Filtered resources:** filtered resources are more acceptable or favourable & helpful, because the literature is previously searched & results are evaluated. It includes databases of systemic reviews, national guidelines etc.
- **Unfiltered resources:** It is less favorable than filtered resources. These are the primary resources which are generally articles that appear in journals. eg: CINAHL(CUMULATIVE INDEX TO NURSING & ALLIED HEALTH LITERATURE provides indexing for more 46,000 journals of nursing and related articles)

3. Critically appraise the evidence & it's validity: Are the results valid (as close to the truth as possible)?

4. Apply the evidence: If the evidence is valid and clinically relevant, the next step is to apply the evidence in clinical field with clinical expertise, and patient factors.

5. Evaluate the outcome: outcomes are may be measured by physiologic condition & psychological condition of the patient.

The EBP Process Models used in EBNP

III. ACE STAR MODEL OF KNOWLEDGE TRANSFORMATION

As research data moves through numerous cycles, gets supplemented with other information, and is implemented into practice, the Star Model shows various types of knowledge in a relative succession. A framework for methodically implementing evidence-based practice processes is provided by the ACE Star Model. Knowledge transformation is defined as the process by which research findings from primary research results are transformed into effects on health outcomes via EB care.

Stages of The Transformation Of Knowledge: 1. Discover 2. Summarize the evidence 3. Translate 4. Integrate 5. Evaluate

1. Discovery: This stage is where knowledge is created. In this stage, new knowledge is found by the standard research procedures and scientific inquiry. Research findings are produced by carrying out a single study. Research designs span from descriptive to correlational to causal; from randomised control trials to qualitative, and this study may be referred to as a primary research study. In this phase, a body of clinical action research is developed.

2. Evidence summary: The first distinctive stage in EBP is evidence summary; the objective is to combine the body of research information into a single, accurate

statement of the state of the knowledge. This phase, which also includes the summarization, is regarded as a knowledge-generating phase. By merging the results of all research to detect bias and reduce chance effects in the conclusions, evidence summaries create new knowledge. Additionally, the systematic approach improves the results' dependability and reproducibility.

- 3. Translation:** Outlines of the evidence must be translated put into action recommendations and then integrated into practice in order for them to become actual practice. The goal of translation is to give doctors and patients an usable and pertinent package of condensed information in a format that fits the time, cost, and care standard. Clinical practice guidelines (CPGs) are recommendations that can be reflected or included in care standards, clinical pathways, protocols, and algorithms. Research evidence that has been summarized is interpreted, supplemented with information from other sources (such as clinical knowledge and theoretical texts), and then contextualized to the particular client group and location. Evidence-based CPGs explicitly state the relationship between the clinical guidance and the strength of the supporting data and/or suggestion.
- 4. Inclusion:** Due to society's long-standing expectation that healthcare be based on the most recent information, which necessitates the application of innovations, integration is likely the stage of healthcare that is most well-known to patients. In this step, both formal and informal channels are used to modify organizational and individual practices. The main issues that are covered in this stage are those that have an impact on how quickly individuals and organizations absorb innovation and integrate the change into long-lasting systems.
- 5. Analysis:** Evaluation is the last step in the transformation of knowledge. EBP evaluates a wide range of end points and outcomes. These include assessing how well EBP affects patient health outcomes, patient and provider satisfaction, efficacy, efficiency, economic analysis, and impact on health status. The final result of the five stages of knowledge transformation is evidence-based quality improvement in healthcare.

IV. UTILIZING RESEARCH MEANS

For years, nurses have used the research at their disposal to direct their nursing practice and their attempts to more patient success. In this procedure, research findings were critically analyzed, evaluated, and their applicability to clinical practice was determined. Closing the gap between research and practice involves incorporating important research results into clinical practice and assessing the effects of the adjustments.

Evidence-based practice has supplanted research utilization initiatives in nursing more recently.

V. IMPLICATIONS OF EBP FOR NURSES

Evidence-based practice is ensured and provided in large part by nurses. They must constantly inquire into the "greatest achievable outcomes" for the patient, their family, and the nurse, as well as "what is the evidence for this intervention," "How do we deliver best practice," and "Are these the questions we should be asking." Additionally, nurses are in

a good position to collaborate with other members of the healthcare team to pinpoint clinical issues and apply the body of evidence to enhance practice. There are numerous chances for nurses to challenge established nursing practices and use data to improve patient care.

VI. EVIDENCE-BASED PRACTICE IS PLAYS AN IMPORTANT ROLE

By using evidence-based nursing practice, nurses are able to provide patients with high-quality care that is informed by research and knowledge as opposed to "the way we have always done it" or by following the suggestions of coworkers, outdated textbooks, customs, or hunches.

VII. IMPORTANCE OF EBP IN NURSING PRACTICE

- Better patient outcomes are achieved as a result of it, and it also advances nursing science and maintains practice up to date and relevant.
- It boosts self-assurance in judgment.
- Current policies and practices that take into account the most recent research support.

1. Impact of Evidence Based Practice in Nursing

- **Information explosion:** EBP provides systematic, structured information which can be applied in clinical setting relevant to patient care.
- **Efficiency:** Evidence-based practice increases the efficiency of nurses & helps in making decision based on knowledge.
- **Better patient outcome:** The patient will likely experience a better outcome when the decision is correct by using the evidences.
- **It keeps nursing practice current:** Evidence-based practice is based on new discoveries.
- **Variation in practice:** Through evidence-based practice a nurse can use different techniques & tools in clinical setting.
- **Quality care:** Using Evidence based practice promote nurses to provide quality care to the patients.

2. Implementing evidence-based practice is hampered by: The obstacles that keep nurses from applying research to their daily work.

- **Nurses often report the following:** Lack of administrative support; lack of knowledgeable mentors; insufficient time for research; lack of understanding of the research process; lack of value for research in practice; difficulty in changing practice; lack of value for research in practice; lack of awareness of research or evidence-based practice. Lack of accessibility to research reports and articles; difficulty accessing research reports and articles; lack of free time to read research; complexity of research reports; ignorance of EBP and article critique; feeling overwhelmed by the process.
- **Tips to overcome barriers:** Utilizing research evidence is a skill that any nurse can develop:
 - Read widely and critically: Nurses who are responsible for their profession should read journals that are related to their field of expertise, including the research findings in them.

- Attending conferences offers the chance to network with scholars and consider their implications for practice.
- Acquire the expectation that a procedure will be supported by evidence of its efficacy. Nurses should expect that the clinical judgments they make will be supported by solid evidence.
- Participate in a journal club: Many companies that employ nurses support groups that gather to discuss studies that might be useful for practice.

VIII. CONCLUSION

Evidence-based practice has been developed to help nurses move evidence into practice. Use of these evidences prevents incomplete interventions for better patient outcome.

REFERENCE

- [1] Burns N, Grove SK. Understanding nursing research-eBook: Building an evidence-based practice. Elsevier Health Sciences; 2010 Sep 20.
- [2] Bellamy JL, Bledsoe SE, Traube DE. The current state of evidence-based practice in social work: A review of the literature and qualitative analysis of expert interviews. *Journal of Evidence-Based Social Work*. 2006 Mar 6;3(1):23-48.
- [3] Abalos E, Carroli G, Mackey ME. The tools and techniques of evidence-based medicine. *Best Practice & Research Clinical Obstetrics & Gynaecology*. 2005 Feb 1;19(1):15-26.
- [4] Sharma S. Nursing research and statistics. Elsevier Health Sciences; 2018 Jun 9.
- [5] Scott K, McSherry R. Evidence-based nursing: clarifying the concepts for nurses in practice. *Journal of clinical nursing*. 2009 Apr;18(8):1085-95.
- [6] Yoder LH, Kirkley D, McFall DC, Kirksey KM, Stalbaum AL, Sellers D. CE: Original Research: Staff nurses' use of research to facilitate evidence-based practice. *AJN The American Journal of Nursing*. 2014 Sep 1;114(9):26-37.
- [7] Isaksen J. Evidence-based practice: Steps towards a better clinical practice. *Revista de logopedia, foniatría y audiolología*. 2017 Sep 1;37(4):172-9.
- [8] Bonis S, Taft L, Wendler MC. Strategies to promote success on the NCLEX-RN®: an evidence-based approach using the ACE Star model of knowledge transformation. *Nursing education perspectives*. 2007 Mar 1;28(2):82-7.
- [9] Kc S, Subramaniam PR, Paudel S. Barriers and facilitators of utilizing research among nurses in Nepal. *The Journal of Continuing Education in Nursing*. 2016 Apr 1;47(4):171-9.
- [10] Nolan P, Bradley E. Evidence-based practice: implications and concerns. *Journal of Nursing Management*. 2008 May; 16(4):388-93.
- [11] McKibbon KA. Evidence-based practice. *Bulletin of the medical library association*. 1998 Jul;86(3):396.
- [12] Stevens K. The impact of evidence-based practice in nursing and the next big ideas. *The Online Journal of Issues in Nursing*. 2013 May 31;18(2).
- [13] Wallis L. Barriers to implementing evidence-based practice remain high for US nurses. *AJN The American Journal of Nursing*. 2012 Dec 1;112(12):15.