

sentara nurse



Strategic Goal Alignment with Evidence-Based Practice Projects

Joanne Williams-Reed, DNP, RN-BC, CNS; Lesley Cook, MSN, RN, NE-BC Susan Winslow, DNP, RN, NEA-BC



Background

- A multi-hospital East coast health system joined Vizient/AACN™ Nurse Residency Program (NRP) in 2016 launching the program in all 12 hospitals within the first year.
- Collectively, the health system has 30 cohorts, comprising over 500 new grad nurses participating in the NRP.
- Structurally, there are two system leads for the program, with coordinators and facilitators at each hospital.
- There is a system advisory council comprised of nurse executives, Human Resources, an academic dean, other nurse leaders and the two system leads.
- This infrastructure provides for a unique opportunity to ensure best practice, system standardization and strategic alignment.

Problem

- Although evidence-based practice (EBP) is embedded in the NRP curriculum, it is still very challenging to teach the content to recent graduates of an Associate or Bachelor degree nursing program.
- Residents lack clarity of the content of what EBP is as well as the outcome expected of them.
- Broad topics provided are insufficient to stimulate clinical questions/decision making regarding the development of (Problem/Patient/Population, Intervention/Indicator, Comparison, Outcome, and (optional) Time element or Type of Study) PICOT questions.¹

Purpose

 The purpose of this project is to determine whether aligning the NRP EBP projects with strategic goals and clinical performance topics improve PICOT questions that have a greater impact for sustainability.

Aim

 Consider ways to formulate an infrastructure of EBP sustainability within the NRP.

Methodology

- Provided a 2 hour class for all site facilitators/mentors
 - *Roles and Responsibilities
 - *EBP Guidelines
 - *Strategic Alignment
 - *Development of PICOT questions
- Expanding broad topics to include sub topics which align with the current Nursing Strategic Plan:

Professionalism in Nursing (BSN, certification,	Nurse sensitive outcomes (Falls w/injury, HAPI,
Magnet/Pathways, preceptor development, EBP,	CAUTI, CLABSI, VAE, MRSA, elective c-section
professional organization work, recognition	avoidance)
programs, self-care)	
Safety (violence towards nurses – physical and	Technology/Innovation (EMR, alarms, patient
emotional, safe lifting/patient handling, National	education, plan of care, smart phone use, phone
Patient Safety Goals, restraints, Nursing Bundles)	apps, nurse call, orchid, acuity systems, big Data)
Patient centric initiatives (patient teaching, patient	National issues (Opioid addiction, violence towards
satisfaction/experience)	nurses, LBGT, behavioral health issues, health policy,
	human trafficking)
Shared Governance (Professional Practice Model,	Health Care Quality initiatives (Wrong events, CDI,
Care Delivery System, Relationship Based Care)	VTE, vaccinations)
Interprofessional Role Communication (MDRs,	Community issues (population health, refugee
discharge planning, geographic assignments)	groups, outreach, social determinants of health)
Competencies & Performance Evaluation (peer	Unit or Hospital level Nursing initiatives (CPI goals)
review)	
Work environment/space (Equipment, noise,	Process Improvement (Readmissions, Throughput
interruptions, construction, pumps, etc.)	T&R/T&A, stroke door to needle, door to balloon)
Medications (High risk, documentation,	Ethical Decision Making (Hospice/palliative referrals,
reconciliation, pharmacy initiatives, etc.)	advance care planning)

Nursing Strategic Plan

Achieve Clinical
Performance
Improvement (CPI)

Expand nursing capacity utilizing innovative staff retention and cost reduction methods

Decrease care variation applying evidence based practice to achieve nurse sensitive goals

Ensure care delivery is based on unique needs and desires of patients and families

Ensure all frontline clinical staff have access to and utilize identified nursing experts

Contact information: Joanne Williams-Reed - jwreed@sentara.com

Conclusions

- The system advisory council elected to proactively align the NRP EBP project guidelines to system clinical and nursing goals.
- A sub team of the advisory council cross walked current priorities to direct NRP EBP projects.
- Cohorts beginning in summer 2017 were presented the strategic EBP list to use for selecting their EBP projects.
- Both coordinators and residents demonstrate increased satisfaction with the new guidelines.
- The new strategic EBP projects were used to support nursing strategic plan initiatives, system clinical performance improvement attainment, and empirical outcomes for American Nurse Credentialing Center (ANCC) Magnet® document submissions.

Implications

Nurse leaders and educators must provide learning opportunities regarding EBP and facilitate supportive cultures to achieve the Institute of Medicine's 2020 goal that 90% of clinical decisions be evidence-based.² This is being achieved by:

- Improving EBP knowledge and skills in clinicians to minimize perceived barriers of implementation
- Encouraging the belief that EBP improves patient care and outcomes
- Ensuring access to Advance Practice Nurses, mentors, and identified nursing experts

References

1. Jacobs, S.K. (2008) Search Strategies: Framing the question (PICO): Retrieved from https://guides.nyu.edu Health (Nursing, Medicine, Allied Health

2. Melnyk B.M., Fineout-Overholt, E., Gallagher-Ford, L., Kaplan, L., (2012). The State of Evidence-Based Practice in US Nurses: Critical Implication for Nurse Leaders and Educators. *Journal of Nursing Administration* 42(9) 4 11