

## Significance of Evidence Based Nursing

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## Impetus for Evidence Based Nursing

- Increased emphasis on efficiency
- Cost containment
- Quality in health care delivery that is rapidly changing and
- The advancement of science and technology

## Evolution of Evidence Based Nursing

- Dominant themes for the decades of 1970–1980 were *doing things cheaper* (efficiency) and *doing things better* (quality improvement).
- These two themes together were considered *doing things right*.

## Evolution of Evidence Based Nursing

- During 1980–1990, *doing the right things* (increasing effectiveness) was the major theme and this, in combination with *doing things right* were considered *doing right things right* in 21<sup>st</sup> century (Gray, 1997, p. 17).

## Evolution of Evidence Based Nursing

- These days, practitioners have come to expect evidences for their interventions
- Some practitioners have come to the point of saying, “In God we trust: All others bring data” (Cornelia Beck, as cited in Tanner, 1999).

## Evidence Based Practice

- Refers to a decision making approach based on integrating clinical expertise with the best available evidence from systematic research.
- This is in contrast to *opinion*-based decision making that bases primarily on values and resources (Gray, 1997).

### **Five Steps of Evidence Based Health Care**

- Defining the question
- Collecting evidence
- Critical appraisal
- Integration of the evidence and patient factors to make and carry out the decision
- evaluation of the whole process (McKibbon, 1999).

### **The Major Purpose of Evidence Based Medicine**

- Elimination of the use of expensive, ineffective, or dangerous medical decision making (Rosenberg and Donald, 1995).

### **Definition of Evidence Based Medicine**

- Evidence-based medicine is the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients. (Sackett et. al as cited by Ingersoll, 2000)

### **Major Concerns by Nursing Scholars on Sackett et. al's Definition**

- The failure to mention theory and
- patient input into clinical decision making
- the explicit requirement of "systematic" research

### **Ingersoll's response to the criticisms of Sackett's definition**

- "Evidence-based nursing practice is the conscientious, explicit and judicious use of theory-derived, research based information in making decisions about care delivery to individuals or groups of patients and in consideration of individual needs and preferences." (p. 152)

### **The notion of EBN is not new**

- Emphasis on applying research findings to clinical practice has continued throughout the recent decades by many researchers and practitioners alike and they have identified several barriers to using evidence in practice.
- Major barriers include lack of time, poor access to the literature, and lack of ability to judge the quality of the research (Ciliska and DiCenso, 1999).

## Efforts to Facilitate EBN and Remove Barriers

- The Agency for Health Care Policy and Research (now called Agency for Healthcare Research and Quality, AHRQ) has produced 697 “evidence-based” guidelines for various health problems

## To promote EBN

The Agency for Healthcare Research and Quality began an initiative, “Translating Research Into Practice (TRIP)” in fiscal year 1999.

The practice guidelines for the diagnosis and management of allergic diseases, “Allergic disorders, Promoting Best Practice” were written by multidisciplinary health care professionals representing 23 national health care associations and the federal government.

## To Promote EBN

- The Critical Care Nurse journal added a new feature in Feb. 1998 issue called “Protocols for Practice: Applying Research at the Bedside” (p.94).
- \* In 1997, a new journal, Evidence based Nursing (EBN) was launched by colleagues in United Kingdom and Canada.

## The EBN (journal)

- One recent issue (January 1999) of the EBN listed 132 journals reviewed for that issue. These journals were in the areas of medicine, surgery, psychology, epidemiology, and nursing; and they were published in USA, UK, Canada and Australia. As best one can see, 19 (14% of total number) of these journals were nursing journals.

## Major Criticisms and Issues and MJK Responses

- *Evidence-based health care overemphasizes randomized controlled trials (RCT) and systematic reviews.* RCT is the most appropriate design for evaluating the effectiveness of a nursing intervention.

## Criticism on EBN

- *Emphasis on “routinization” of evidence-based nursing may work against strategies of professional authority and autonomy embedded in the new nursing.* (Bonell et al., 1999). No one supports the routine practice (“routinization”) of evidence-based nursing without nurses’ critical appraisal of individual patients and their unique needs.

## Criticisms on EBN

- ⑩ □ *The third party payers may ask, should we pay for care that has not been validated as the best way to improve the patient's health status?*
- Not all *interventions* lend themselves for randomized clinical trials for external validity. Hence, developing a payment system on the "validated" interventions only would be unreasonably restrictive, and antithetical to the spirit of evidence-based practice..

## Criticism on EBN

- *Evidence-based nursing isn't "new".* The concept itself is not new, as evidence-based practice provides clinicians with scientific evidences to solve the patients problems they confront. However, systematic approach and resources available for implementation of evidence-based nursing is new.

## Criticisms on EBN

- *Evidence-based nursing leads to "cookbook" nursing and a disregard for individualized patient care.* In practicing evidence-based nursing, a nurse has to decide whether the evidence is relevant for the particular patient, including patient's unique clinical circumstances such as comorbid conditions and preferences.

## Criticisms on EBN

- ⑩ □ *Emphasis on "current" best care practice.* This is because "today's golden truth may easily be tomorrow's inaccurate, or even inappropriate information". (McKibbon, 1999).
- Nurses in practice should monitor the validity of current evidences as they apply to their patient care, and this continuous formative evaluation may lead to another research that may change the evidences that are currently available.

## Criticisms on EBN

- □ *Is evidence-based nursing the same as research utilization?* As Stetler et al (1998) stated, evidence-based practice encompasses more than research utilization. The authors recognized that evidence on which practice is based can include performance data from quality improvement initiatives, consensus recommendations of recognized experts, affirmed experience, as well as research findings.

## Conclusion on EBN

- Evidence-based nursing practice will continue to play a significant role in every day practice of nurses.
- Comprehensive definition of evidence-based nursing by Ingersoll (2000) and evidence-based practice guidelines for various health problems/needs provide a good start for nurses to practice evidence-based nursing.
- Our patients stand to gain the most as nurses and other health professionals make evidence-based practice the norm of their everyday practice.

### Evidence-based Nursing: Public Health Nursing Practice

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### Future of Public Health (Institute of Medicine, 1988)

- Public health actions require application of an accurate knowledge about the causes and distribution of health problems and knowledge of intervention effectiveness.

### Three Models of Canadian Community Health Nursing

(Chalmers and Kristajanson, 1989)

- The “Public Health” model
- The “Community Participation” model
- The “Community Change” model

### The Public Health Model

- Uses epidemiological concepts to identify risk groups in the community.
- The efforts of the public health nurses are directed at primary and secondary prevention (e.g. Programs on immunization and carrying out screening programs, teaching clients about nutrition, control of the spread of communicable diseases)
- Contains strong elements of professional dominance and control. Little attention is devoted to analyzing “the underlying problems facing these risk groups.

### The Community Participation Model (Orr, 1985)

- Involves community members as a group in planning and delivering health services.
- The community health nurses’ role is to assist communities in identifying their own needs and problems, and to help the community to carry out their own solutions before seeking outside help.
- Entails a shift in power from professionals to communities.

### The Community Change Model

(Chalmers and Kristajanson, 1989, Kickbusch,  
1985)

- The target of this model is much wider than the community.
- Involves community nurses in challenging the existing distribution of power, the dominant value system and the allocation of resources.
  - Community nurses aim to improve community health not through a specific intervention but by mediating, enabling, and advocating to aid in the generation of community systems and to make health a politically accountable issue.

**Evidence-based Guidelines for Public Health Nursing Practice-1**  
(Strohschein et. al, 1999)

- Evidence obtained through *systematic review of research*,
- filtered through *experts*
- can be structured and communicated to public health nurses
- via *practice guidelines*.

**Evidence-based Guidelines for Public Health Nursing Practice-2**

- Framing research findings as *guidelines* can provide a user-friendly approach that increases nurses' awareness of existing research and ways to apply research to practice.

**Centers for Disease Control and Prevention**

- Task Force on Community Preventive Services:
  - Summarizes what is known about the effectiveness of population-based intervention and control.
  - This *guide* focuses on community-based prevention and control strategies, and also incorporates current scientific evidence and expert opinion.  
<<http://web.health.gov/communityguide>>

**Barriers and Strategies for Evidence-based Public Health Nursing Practice**

- Little time to search the literature as they face daily demands of practice:
- Lack of sufficient knowledge about the research process, and interpretation and application of the results; and
- Integration of *guidelines* into practice must involve systematic incorporation into *agency* activities, personnel policies, and procedures.
- Set aside time for research utilization and promote group activities for peer support.  
(Camiletti and Huffman, 1998)

**Evidence-based Practice and Community Health Visits** (Elkan et.al, 2000)

- Evidence-based practice is used by the British National Health Service to make decisions about the allocation of limited resources.
- Evidence-based health visiting in the community should not be reduced to a scientific, technological solutions applied to social problems.
- Health visiting is a complex social process, addressing manifestations of socio-political *disharmony*.
- Health visiting should be evaluated by the health visitors' goals and intervention strategies that are based on theoretical frameworks.

**Health Visiting in the Community:**  
Problem Oriented vs. Relationship-centered Approach (Robinson, 1982)

- **Problem oriented approach:**
  - The goal is to identify problems and refer them to medical or other colleagues.
  - Epidemiological in orientation and is derived from disease model with emphasis on individual treatment and cure.

### Health Visiting: Relationship- centered Approach

- The goals are more diffuse than the detection and treatment of a particular problem.
- Health visiting is more similar to social work than nursing.
- A family is key, and the emphasis is on supporting the family, and helping individual members to identify and deal with their own problems, with professional assistance.

### Quantifiable Outcomes vs. Qualitative Aspects of Health Visiting

- Problem oriented approach yields tangible and quantifiable outcomes.
- Relationship-centered approach depends on less tangible factors (e.g. acceptance, empathy, and rapport), yields subjective, qualitative estimation.
- Both approaches to health visiting should be valued in the ultimate evaluation and allocation of resources.

### Sherlock Holmes

- It is a capital mistake to theorize before one has *data*.