

Journal of Perioperative & Critical Intensive Care Nursing

Open Access

Strategies for Professional Nursing Associations to Contribute to Evidence-Based Practice and High Quality Health Care

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Received date: July 06, 2016; Accepted date: July 15, 2016; Published date: July 22, 2016

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Introduction

Over 15 years have passed since the Institute of Medicine (IOM) Report Crossing the Quality Chasm: A New Health Care System for the 21st Century was published (IOM, 2001) [1]. Health care quality measurement resources and expectations for quality improvement and reporting have expanded significantly since 2001. However, there remains a great deal to accomplish to "cross the quality chasm" between what is known to be effective through research evidence and the delivery of patient-centered care based on the best evidence available. The purpose of this short communication is to summarize key strategies that nursing associations can utilize to contribute significantly to closing that gap. These strategies were initially described in more detail in Mallory [2].

There are several models of evidence-based practice (EBP) which have been described extensively. Dang et al. [3] summarized several of these models. Common components of these models can provide a guide for professional nursing associations to develop and provide resources for their members to use for quality improvement initiatives within their practice settings. These include:

- Identification of a clinical problem
- New knowledge becomes available through research
- Access to primary research results and/or systematic reviews
- Critical appraisal of research evidence
- Synthesize research evidence
- Development of guidelines and/or protocols that integrate evidence, clinical practice, patient preferences and practice environment
- Design strategies to implement change in the practice setting
- Evaluate the impact of change [2]

Identification of a clinical problem

Nurses often contact their professional association with questions about how to manage a specific clinical problem. Associations respond to these questions and then these questions/issues can be used to develop evidence-based publications, educational programs and website content. Additional opportunities that associations offer include discussion and interest groups where members can discuss clinical problems and identify topics that may not have any research evidence. These topics can be used to develop research priorities for the generation of new knowledge.

New knowledge generation

Many nursing associations develop and publish research priorities based on gaps in the knowledge base for clinical practice. Associations

or their foundations often provide research grant funding for pilot studies to begin the process of generating new knowledge to address clinical problems and issues.

Access to primary research results and/or systematic reviews

Nursing associations have staff (even a librarian in some instances) and/or nurse scientists or faculty/clinical educators who can assist members with searching and finding relevant research publications, especially systematic reviews which provide a strong evidence base for interventions, to guide the development of an evidence-based intervention to address a specific clinical problem/issue. Often members are not aware of this important resource and networking opportunity available through their association.

Critically reviewing the research evidence

Although nurses learn research critiquing skills in their undergraduate and/or graduate programs, often these skills are not utilized after completion of a research course. The broad range of expertise within the membership of a nursing association along with the networking and project opportunities can provide a peer consultant to a nurse or group within a specific practice setting in critiquing research articles. Additionally, many nursing associations provide online courses, journal articles and other publications and projects in which members can learn research critiquing skills and experience.

Summarizing and synthesizing the research evidence

One of the most helpful resources that a nursing association can provide is the syntheses of research evidence regarding a specific clinical problem or nursing intervention. The critique and synthesis of research evidence is very time-consuming, yet very necessary, as a practice change cannot be based on one or a few studies with small sample sizes. Research syntheses by nursing associations most often occur through member involvement in projects whose purpose is to summarize the strength of the research evidence (and keep it updated) for ready accessibility to members. Several nursing associations have developed an evidence rating model which is used by the project members to rate and summarize research publications [4,5].

Development of guidelines and/or protocols that integrate evidence, clinical practice, patient preferences and practice environment

Guidelines and/or protocols published by nursing associations need to be based on strong research evidence. One of the major roles of nursing associations is to provide standards of practice that can be used and cited in developing policies and procedures within and across practice settings. Access to synthesized research evidence is key to the development of standards of practice.

Implementing an evidence-based change in the practice setting

Once an evidence-based practice change is identified, the actual implementation into the practice setting entails a complex and ongoing process. Nursing associations can provide many resources for their members as they plan, implement and evaluate a practice change. One of the important skills that education programs provided by associations provide is leadership. Most associations provide leadership courses, some of which are focused specifically on evidence-based practice change and others include broad leadership skills and the change process. Many of these courses provide ongoing coaching as the participants plan and implement a practice change. Additionally, these courses enable the participant to become a champion of change in his or her practice setting, a key factor in the success of the change [2,6].

Evaluation and monitoring of the change

The increased focus on health care quality measurement, including the use of standardized quality measures/metrics and ongoing reporting to the federal government and accrediting organizations, has led to the development various strategies by health professional associations, including nursing, to facilitate the reporting of quality measures. These responses have included the development of quality measures that reflect nursing's contribution to quality of care [7]. New systems and partnerships between health care associations (including nursing) and technology groups are being developed to collect quality measure metrics electronically and to provide rapid feedback to the clinician along with links to "how to improve" resources provided by the association [8]. This is an exciting new area of development that needs to be explored by nursing associations.

Summary

Professional nursing associations are in key positions to contribute to evidence-based practice and high quality health care. Many resources and experts are available through nursing associations and more are being rapidly developed. It is an exciting and complex time in health care with lots of opportunities for nursing's contribution – it is essential that nurses in all roles work closely with their professional associations to move quality health care forward.

References

- 1. Institute of Medicine: Committee on Quality of Health Care in America (2001) Crossing the quality chasm: A new health system for the 21st century. Washington, DC: National Academy Press.
- Mallory GA (2010) Professional nursing societies and evidence-based practice: Strategies to cross the quality chasm. Nurs Outlook 58: 279-286.
- Dang D, Melnyk BM, Fineout-Overholt E, Ciliska AD, Cullan L, et al. (2016) Models to guide implementation and sustainability of evidencebased practice. In: Melnyk BM, Fineout-Overholt (eds.) Evidence-based practice in nursing and healthcare: A guide to best practice, Philadelphia, pp: 274-315.
- Irwin M, Johnson LA (eds.) (2014) Putting Evidence into Practice: A Pocket Guide to Cancer Symptom Management. Pittsburgh, PA: Oncology Nursing Society.
- Spruce L (2015) Back to basics: implementing evidence-based practice. AORN J 101: 106-112.
- White S, Spruce L (2015) Perioperative Nursing Leaders Implement Clinical Practice Guidelines Using the Iowa Model of Evidence-Based Practice. AORN J 102: 51-56.
- Fessele K, Yendro S, Mallory G (2014) Setting the bar: developing quality measures and education programs to define evidence-based, patientcentered, high-quality care. Clin J Oncol Nurs 18 Suppl: 7-11.
- 8. Oncology Nursing Society (2016) Qualified Clinical Data Registry.