Has the EBP Culture Transformed Nursing?

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Improving Practice, Improving Outcomes
I'm retired not tired.
"I DON'T KNOW WHY WE ARE HERE, BUT I'M PRETTY SURE THAT IT IS NOT IN ORDER TO ENJOY OURSELVES."

LUDWIG WITTGENSTEIN

QUOTESEVERLASTING.COM
THE BUTTERFLY EFFECT
It has been said that something as small as the flutter of a butterfly's wing can ultimately cause a typhoon halfway around the world.

- Chaos Theory
chasm

noun
noun: chasm, plural noun: chasms

1. a deep fissure in the earth, rock, or another surface.
   synonyms: gorge, abyss, canyon, ravine, gully, ... more
   • a profound difference between people, viewpoints, feelings, etc.:
   "the chasm between rich and poor"
   synonyms: breach, gulf, rift, difference, separation, division, dissension, schism, scission
The Courage to Lead

The Future of Nursing
What is known

What we know

CHASM NO. 1
WHAT WE KNOW

KNOWLEDGE TRANSFER

WHAT WE DO

CHASM NO. 2
WHAT WE KNOW

WHAT WE DO
What is known

What we know

CHASM NO. 1
A QUICK (5-SECOND) TOOL TO DETERMINE WHETHER SOMEONE HAS WHAT IT TAKES TO BECOME A GOOD NURSE
Reliable but not valid
Reliable and valid
Unreliable and hence not valid
Snap (or click) your fingers
Forefinger
E-Test

1. Close your eyes
2. Snap the fingers of your dominant hand 5 times
3. With your forefinger, quickly draw the letter E on your forehead
The 5-second E-Test (Galinsky & Schweitzer, 2015)
E to others

A

B

E to self
Why don’t we know this?
Patients experiencing hypotension and shock should be placed in Trendelenburg position to improve blood flow to the heart and brain.

True or False?
REFERENCES


Why don’t we know this?
INFORMATION OVERLOAD
CHASM NO. 2

WHAT WE KNOW

KNOWLEDGE TRANSFER

WHAT WE DO
innovation is a process, not an event
The diffusion of innovation

Everett Rogers defines diffusion as the process by which an innovation is communicated through certain channels over time among the members of a social system.

Rogers, 1962
There is clear evidence that nurses are at risk for making more errors with longer work shifts. They also have more needlestick and musculoskeletal injuries, drowsy driving, sleep deprivation, and fatigue.
<table>
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<th>Condition</th>
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<td>Intrashift &amp; intershift fatigue</td>
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<td>Acute &amp; chronic fatigue</td>
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<td>Decreased vigilance</td>
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<tr>
<td>Increased needlestick injuries</td>
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<td>Musculoskeletal disorders, especially neck, shoulder, and back injuries</td>
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<td>Drowsy driving</td>
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<td>Neurobehavioral changes, including decreased reaction time and lapse of attention</td>
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<td>Inability to objectively judge personal sleepiness level</td>
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Sleep deprivation may lead to:
- Increased blood pressure
- Increased insulin resistance
- Diabetes
- Obesity
- Depression
The greatest barriers to changing this staffing model are staff nurses and nurse leaders. Staff nurses reportedly like, demand, and have become accustomed to the 12-hour model, currently the norm in many organizations. Staff nurses like the increased income potential and perceive they have more time off. Nurse leaders resist the major organizational culture revolution they perceive would be required for change. In addition, the 7 p.m. to 7 a.m. shift facilitates staffing the 3 p.m. to 11 p.m. shift, a slot reportedly most difficult to staff.

Gieger-Borwn & Trinkof, 2010
1. Organizational culture revolution
2. Difficult when things are still working
When should the concern for nurses' health and well-being be factored into staffing decisions?
Change is difficult.
Not changing is fatal.
How often do we do the right thing?
How often do we do the “right” thing?

• EVIDENCE-INFORMED
Knowledge Transfer:

Have we made a measurable difference?
What is the STATE of EBP implementation?

- Only 20% of what healthcare providers do is based on evidence - 80% is not (Gray, et al., 2002)
- Only 55% of time patients get the evidence-based recommended course of treatment (IOM, 2001)
- It takes 15-20 years to get evidence into practice
Despite dramatic advances in nursing and medical research, many nurses continue to promote outdated nursing practices that have been proven ineffective, unnecessary, and in some cases, downright dangerous. Based on tradition rather than science, these “sacred cows” are often revered by nurses and hard to dislodge from practice.
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Improving Practice, Improving Outcomes
FOR THE INDIVIDUAL

direct the rider

motivate the elephant

shape the path
For Institutions

Systematic Literature Review + Systematic review Surveillance

Evidence-Informed Care Plans Clinical Pathways
For Professional Organizations + Schools

Clinical Guidelines

POEMs
The Butterfly Effect

“Every single thing you do matters. You have been created as one of a kind. You have been created in order to make a difference. You have within you the power to change the world.”

Andy Andrews
LINCOLN IN THE BARTO
A Novel
GEORGE SAUNDERS
New York Times bestselling author of TENTH OF DECEMBER
The Four Phases of the Bardo

Sogyal Rinpoche, in his book The Tibetan Book of Living and Dying, organizes the experiences of the bardo of dharmata into four phases:

1. luminosity,
2. union,
3. wisdom, and
4. spontaneous presence.
BE PATIENT
GOOD THINGS
TAKE TIME

Good things come to those who Believe,
Better things come to those who are Patient and
the best Things come to those who Don’t Give up.
References


