

Essay on strategies for implementing an evidence-based approach to nursing practi...

[Law](#), [Evidence](#)



Abstract

The evidence based approach (EBP) to nursing practice provides nurses the ability to deliver quality health care services to a specific population. This kind of approach in the nursing practice is widely used because it reinforces the nurse's ability to solve problems and overcome barriers using the best evidence available from research, patient references and clinical judgment (Schmidt & Brown, 2011). Orthopedic nursing involves the delivery of treatment and management of care to patients with musculoskeletal problems (Lippincott Williams & Wilkins, 2007) and this is one of the areas of clinical nursing practices that impose challenges and difficulties to a clinical nurse. Evidence based practice assists nurses to learn about how to respond to emergency procedures in the orthopedic ward but there are existing challenges and barriers that could prevent nurses from delivering optimal care to patients with musculoskeletal injuries. This paper aims to present these common barriers and challenges that nurses experience in the orthopedic ward based on evidence based approach perspectives while providing for the best strategies that would help overcome these difficulties. An evidence based practice in nursing is primarily designed to integrate research evidences to a nurse's clinical practice and the patient responses to their treatment and health care services that are made available for them. According to Malloch & O'Grady (2010), the keystones to evidence based practice involve clinical practice, clinical data and research, patients' concerns and the identification of the best practices in the clinical setting. This helps the healthcare practitioners to exercise a sound judgment before any clinical situation laid down before them. Health professionals are

becoming more engaged in involving patients in the decision making process with regards to the health care services received by them in consideration of their values and preferences (Hoffman, Bennett, and Del Mar, 2010).

In the orthopedic ward setting, a clinical nurse is often subjected to various difficulties and challenges. The nature of the condition of the patients in the orthopedic ward consists of musculoskeletal trauma that may be acute or chronic. Patients in the orthopedic ward also include the elderly population who require long term care of their condition or perhaps throughout their lifetime. According to Jester, Santy and Rogers (2011), orthopedic patients manifest major symptoms of pain, reduce mobility and function and deformity. Some of these patients may have existing medical conditions such as heart disease, pulmonary complications and diabetes making them high risk patients in the orthopedic ward. According to Nazarko (2004), choosing the right staff with the right skills is essential in the delivery of quality patient care. Considering how vulnerable patients in the orthopedic ward can become, nurses who are assigned in the orthopedic ward should be able to learn to identify the barriers that prevent them from becoming efficient nurses and to find the appropriate strategies in resolving them. Nurses often experience difficulties when assisting the patient in their mobility where the risk of falls among elderly patients and those with high risk conditions may be high. Nurse related barriers usually involves the awkward handling of their patients during transfer and mobilizing them that may compromise patient safety and comfort (Nelson and Baptiste, 2004). Moreover, the lack of patient handling devices and equipment could also add to this problem encountered by nurses, which is essential in the delivery of

quality patient care and safety. Some patients also feel extreme pain when receiving nursing care when mobilized especially during transfers and in the presence of their trauma wounds (Schoen, 2000).

According to Melnyk and Overholt (2011), there are different factors that affect the nurses' ability to use evidence based practice in their profession. Among these barriers include their misconception and negative attitudes about research and evidence-based care, overwhelming patient loads, lack of resources to make a research, resistance to change, organizational constraints such as lack of administrative support and incentives as among others. Moreover, work beliefs and attitude of nurses also affect the way they perceive the effectiveness of evidence based practice or they lack the knowledge with no EBP mentors to help them apply the EBP concepts in the orthopedic ward (Godshall, 2009). Because of the lack of understanding about the EBP principle, orthopedic nurses often fail to consider the patient's own difficulties and pain and deliver care that is only oriented according to their own usual care of practice without regard to consider the patient as the core of the nursing care service.

According to Courtney and McCutcheon (2010), evidence based practice help nurses to learn how to communicate with patients and the health care team the rationale of their decision making process and health care plans. With the lack of knowledge of using EBP in clinical practices, nurses lack the skills to practice their initiative of attending to their patient needs accordingly. Moreover, the inadequate availability of research materials (that are often outdated already) serves as a barrier for nurses to improve their skills in applying evidence based practice in the health care settings (DiCenso,

Guyatt and Ciliska, 2005). Another gap identified by Ball (2011) is the nurse's inability to access, identify and evaluate EBP resources. Apparently, about 58% of nurses do not use research and journals and 82% do not utilize the use of the hospital library.

Organizational cultural barriers also affect the infusion of EBP in the orthopedic ward. There is the absence of institutional promotion of the EBP in various hospital departments. Many health organizations support the principle of EBP but they do not necessarily provide support to their staff in terms of resources, time and guidance (Polit and Beck, 2008) for its implementation. Thus, strong organizational leadership is expected for the effective implementation of EBP in hospital settings because their role in the implementation of EBP and in developing a culture that fosters the practice of evidence based patient care is essential in sustaining the same in the delivery of health care services. Nurses are also constrained to exercise their own initiative in performing nursing care that is based on research findings (Gerrish and Lacey, 2010) owing to inflexible organizational health practice policies.

Numerous guiding principles have been provided in literatures to help overcome the barriers to the implementation of EBP. A paradigm principle of EBP in the orthopedic setting usually involves the corroborative efforts between the health care team, case management nurses and outcome measurements monitoring to ensure a functional outcome of treatment. Flarey and Blancett (1996) emphasized that organizational barrier is overcome by providing facilities and promoting a cultural environment for case nurses to practice research efficiently in order to understand which

treatment approach is best to deliver to individual patients. This will strengthen the outcome measurement of the patient's response to the delivery of care received by them. The transfer and mobility difficulties that are commonly encountered in the clinical setting is attributed to the lack of skills of a nurse as well as the lack of corroborative efforts with the other staff present in the ward. This experience can be used as guiding principle in improving a nurse's skill on transfer and mobility care for patients with musculoskeletal injuries (Hally, 2009) and may be strengthened by research on the best EBP treatment approach to this specific patient population.

The Cochrane Collaboration is a non-profit organization that aims to deliver to the global health care communities updated research data that would improve the quality of patient care through a systematic review on health care practice and policy (The Cochrane Collaboration). Hospital management should be able to obtain sources that will help them foster an effective organizational culture and policies that will promote the practice of evidence based patient care. Another organization, the Joanna Briggs Institute (JBI) also offers a good implementing guidelines on how to adopt strategies that will effectively implement the research data available for EBP and how to disseminate the same to the health care providers. Using the Best Practice Information Sheet designed by the institute, nurses will be guided in their practice of delivering evidence based nursing care services. The institute has a wide database of systematic reviews and implementation reports (Joanna Briggs Institute Library) that should be accessible electronically to practicing nurses and nursing students as well without a cost for health care professionals to use.

In conclusion, the nursing profession is a practice based profession where improvement in the quality of services usually emanates from evidence based practice that improves the nurses' ability to exercise an efficient decision making process. Individual and organizational barriers are common but there are guiding principles that could help overcome these barriers with the availability of the wide research data base and implementing guidelines on EBP that can be adopted in the healthcare setting. Evidence based practice is only effective when its principles are implemented in the health care organizations that need to foster a supportive environment that will encourage nurses to perform research for professional development and in improving their delivery of evidence based oriented nursing care services. Orthopedic ward patients need appropriate nursing care services which can be best addressed through the delivery of an effective evidence based patient care services that can be optimized through research and fostering the implementation of evidence based practice culture within the orthopedic ward section.

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