

Evidence based practice

Business



Evidence-Based Practice (EBP) has been a protocol that various nurses and medical personalities implement in their line of duty to obtain action-oriented results. However, while this approach is popular and extensively assumed in medical and nursing facilities, its implementation bags a number of disadvantages. It is logical to argue that nothing is perfect – and in this case, EBP isn't either. Firstly, EBP implementation relies on real and tangible information that can be used as evidence before devising a treatment or management plan. The gathering of information relies on time which most nurses do not have regarding their tight schedules and tiresome shifts. Caring for patients within a 12-hour shift and allocating time to find information is almost impractical for these nurses.

Secondly, various medical facilities do not have libraries within them. This burs the chances of a nurse to access relevant information regarding his/her profession or the medical condition at hand (Porter-O'Grady and Malloch, 2010). While the lack of information sources within a facility can be blamed for the minimal access to information, it is widely documented that the lack of technology and knowledge on how to use it are other factors that propagate the disadvantages of implementing EBP. Information sources may be absent within a medical facility, however, their existence elsewhere does not influence the proficiency of EBP approach as various nurses do not have the necessary knowledge needed to search for information. In this case, it is evident that besides lack of time, inefficient information sources can be blamed for the nurses' incompetence in terms of information mining.

Lastly, the nursing profession has not valued the use of research within the practice (Porter-O'Grady and Malloch, 2010). To nurses, 12-hour shifts and

base-knowledge seem enough to handle various treatments and care requirements - research is not as valued as EBP may dictate.