

An Innovative Multifaceted Education Program to Teach Evidence-Based Practice to

Interprofessional Health Care Executives

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Problem

- The Institute of Medicine (2003) mandated education for Evidence-Based Practice (EBP) but the system is overall falling short of educating and providing a consistent plan for EBP.^{1,2}
- EBP is known to decrease health care costs, improve patient outcomes, and increase provider satisfaction but is underutilized.²
- Leadership support drives EBP culture and is key to its success but leaders have expressed a lack of confidence to complete EBP projects.^{2,3}
- Interprofessional approaches are emphasized and being promoted in healthcare.⁴ EBP education is an ideal venue for interprofessional education.⁵



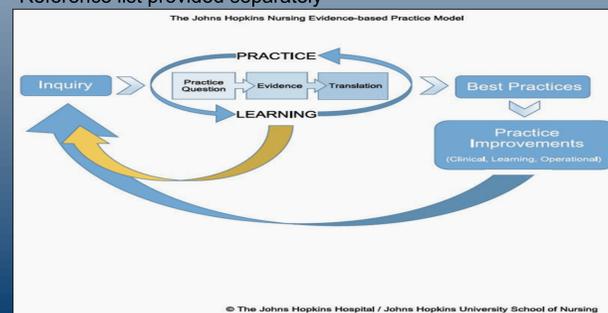
Learning Objectives

- Identify and utilize best practices regarding teaching interprofessional EBP education.
- Recognize ways to embed interprofessional EBP education for individual health care organizations.

Description

- Before the study, a cultural survey showed the executives (n=41) needed an EBP tune-up and preferred several short education sessions.
- The education was developed based on the most up to date EBP literature, Kolb's experiential learning theory, Rogers' Theory of Innovation and the Johns Hopkins Nursing EBP Model.^{6,7,8}
- The project was IRB approved. A convenience sample included executives who attended the Patient Care Leadership Council, which is a shared governance meeting, at an urban mid-west hospital.
- Before the first education session, EBP confidence was measured using the 11-item EPIC self-rating scale with options of 0% to 100% confident in 10% increments using an online survey.⁵
- One-hour EBP education sessions are scheduled monthly for four months with videos, dialogue, games, online study, homework, and the development of an EBP project relevant to the group.
- After the final session, a post-learning online survey using the EPIC scale will compare pre and post education confidence of the group.

Reference list provided separately

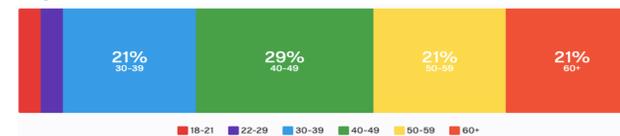


Outcomes

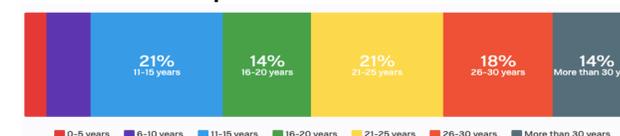
- 28/50 (56%) completed the EPIC pre-survey to measure confidence.
- Participants included nurses (n=16), advanced practice nurses (n=3), pharmacists (n=1), physical therapists (n=2), dieticians (n=2), and business managers/other (n=4).
- The EPIC scale EBP item with the highest confidence score was asking patients about needs, values, and treatment preferences, M= 9.5/11 (SD 2.03).
- The EBP item with the lowest confidence score was interpreting statistics M=5.22/11 (SD 3.07).

Group Demographics

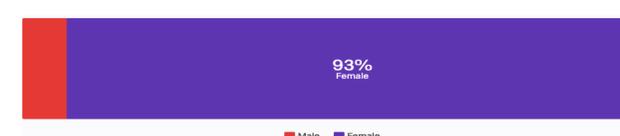
Age:



Years of work experience:



Gender:



Conclusions

- The pre-survey indicated moderate EBP confidence among executives.
- The majority of the sample was nurses (n=16; 67%) and female (n=26; 93%).
- 42% of the executives were over age 50 and may not have had EBP education.

Facilitators

- Hospital and industry support the project.
- EPIC is valid and reliable tool.
- EBP education is an initiative to meet desired hospital certifications and the project fulfilled an emerging need.
- The education was incorporated into an existing meeting.

Barriers

- Technology and agenda time management.
- Resources were not approved for video production creating a gap related to time and resources for EBP.

Recommendations

- The study should be repeated with other interprofessional groups.
- Share results to enhance and standardize hospital-based EBP education and add to the interprofessional education literature.
- Additional studies measuring knowledge retention, competency, use of EBP, and patient outcomes are needed.

