To fast-track nurse resident EBP competencies, Johns Hopkins and UCSF turn to leading clinical decision support



Executive summary

A core competency for nurses is evidence-based practice (EBP). Well-designed clinical guidelines should be the pinnacle of applying evidence-based medicine to one's daily workflow. However, many clinical protocols are not based on EBP, and newly minted nurse graduates often lack expertise in finding the best available resources to support EBP projects. Such knowledge and practice gaps can lengthen the time it takes to develop those initiatives and may yield results that aren't actionable.

Introduction

Nursing students vary widely in their knowledge of EBP. A recent study showed that only half of fourth-year nursing undergraduates knew how to utilize EBP and apply it in a clinical setting to improve workflow and patient safety. The transition-to-practice training that a nurse residency program offers is an opportune time for new graduates to increase their EBP skills. Accordingly, most residency programs require nurses to complete an EBP project that addresses a targeted clinical query. The goal is to teach residents how to translate their academic knowledge of EBP into real-world practice changes. However, the task can be daunting.

Such projects should incorporate the best available evidence, patient values, and clinical expertise.² But nurse residents often don't know where to start. They may lack experience in finding, collecting, or assessing all three. Moreover, the magnitude of "newness" they face in their new positions may overwhelm them.

Strategies to bring nurse residents up to speed with EBP

Nurse residency programs address these issues in various ways. The Johns Hopkins Center for Evidence-Based Practice has codified a model for conducting EBP projects and applying their results to clinical practice. In book form and updated four times since its inception, the comprehensive resource describes the model and provides blank flowcharts, worksheets, measurement tools, communications planning, and other information that steps nurses through the process of EBP inquiry and implementation. A free instructor's guide is also available.

The accredited nurse residency program at the University of California San Francisco (UCSF) School of Nursing eases its participants into utilizing EBP by employing a four-stage learning process that familiarizes residents with EBP and then teaches them how to apply it. "That reduces their anxiety so they don't feel like they have to know everything about it right out of the gate," says Adam Cooper, MSN, RN-BC, NPD-BC, Director of Nursing Continuous Improvement at the UCSF Health Center for Nursing Excellence & Innovation and Director of the UCSF JBI Center. "First, they learn how to recognize EBP in existing policies and protocols; then they learn how to find and assess external sources of evidence."

The common thread between these two strategies is that both institutions rely heavily on the JBI EBP Database to find the best available information. Rigorously vetted and continually updated, the JBI EBP Database contains more than 5,000 clinical point-of-care resources. Their easy-to-understand format and up-to-date guidance simplify the task of finding, assessing, and adopting EBP in clinical care.

The transition-topractice training that a nurse residency program offers is an opportune time for new graduates to increase their EBP skills.



JBI EBP Database: a valued partner

The JBI EBP Database system offers many benefits, including:



Standardizing and accelerating nurses' competency in critically evaluating, developing, and implementing evidence-based clinical practices



Streamlining research by providing rapid access to high-quality, evidence-based information



Reducing the time and complexity of conducting evidence-based research projects



Broadening clinical knowledge and accelerating learning about diverse medical conditions and patient populations, enabling healthcare professionals to enhance their expertise beyond traditional educational boundaries.

"My mini-goal for my career at Johns Hopkins is for everyone to know how to find JBI and how to utilize their amazing resources."

- Madeleine Whalen



JBI EBP Database includes:

Evidence summaries



Asks a clinical question then culls the answer from many sources (systematic reviews, research studies, expert opinion, etc.) — presented in summary form as best available info on a topic

Simplifies research for an EBP project and is a key aid to decision-making in practice

Best practice information sheets



A single systematic review boiled down into a 2-4 page document with recommended step-by-step practices based on that summary

Helps nurse residents compare what they're doing internally to a global bestpractice recommendation

Recommended practices



Evidence-based procedures that provide a clear description of steps and processes for a wide range of healthcare procedures

Gives step-by-step instructions and processes to residents and new nurses "We really want to have accessible, easy-to-understand resources for our teams, which is why we value the JBI EBP database."

- Adam Cooper



University of California San Francisco



JBI's development process

JBI is a global leader in its rigorous methodology for developing and updating all its resources in the JBI EBP Database system. Their process includes:













This aligns with the Institute of Medicine's missive for standardizing guidelines development that is deemed trustworthy and accurate.²

Madeleine Whalen, MSN, MPH, RN, Evidence-Based Practice Program Coordinator for the Johns Hopkins Health System and clinical instructor at the Johns Hopkins School of Nursing, praises JBI Evidence Summaries as an invaluable tool. "We use [JBI] as the foundation for case studies. This allows our nurse residents to practice their EBP skills ... We know we'll end up with actionable results because JBI employs such a robust search strategy in developing these summaries."

Adam Cooper from UCSF has similar praise for JBI's Best Practice Information Sheets. "Usually, our clinicians can't take the time to sit down and read a systematic review. A Best Practice Information Sheet can boil down an eighty-page systematic review to a short synopsis so someone can get the key points from it, knowing that it came from a very rigorous process and an evidence-based manner. This is ideal for clinicians who are trying to quickly access the best available evidence."

Cooper adds that, when the nurse residents can compare known global best practices to their units' practices, they can assess differences and ask why. "That builds upon the concept of questioning, which is so important to our process."



About Johns Hopkins Nursing

The Johns Hopkins Center for Nursing Inquiry strives to build the capacity for nurses to participate in the three forms of clinical inquiry: evidencebased practice, quality improvement, and research. Dedicated to advancing the science of nursing, the Center for Nursing Inquiry offers a variety of educational resources and expert guidance to help nurses engage in meaningful, high-quality scholarly work.



University of California San Francisco

About UCSF

The University of California,
San Francisco (UCSF) is
driven by the idea that
when the best research,
teaching, and patient care
converge, breakthroughs
that help heal the world
can be delivered. UCSF's
hospitals and educational
programs consistently rank
among the best in the U.S.,
with numerous awards, and
have achieved Magnet®
recognition since 2012.



Conclusion

Evidence-based practice is a problem-solving approach for assessing and synthesizing the best available evidence to generate initiatives to improve patient outcomes.³ Tools like the JBI EBP Database can streamline the process and ensure robust results.



For more information about institutional subscriptions of the JBI EBP Database or to request a demo, visit www.wolterskluwer.com/know/jbi-resources.

Acknowledgments

We would like to thank the following for their contributions to this paper:

- Madeleine Whalen, MSN, MPH, RN, Evidence-Based Practice Program Coordinator for the Johns Hopkins Health System and clinical instructor at the Johns Hopkins School of Nursing.
- Adam Cooper, MSN, RN-BC, NPD-BC, Director of Nursing Continuous Improvement at the University of California-San Francisco (UCSF) Health Center for Nursing Excellence & Innovation; Director of the UCSF JBI Center; and Nursing Quality Staff in UCSF's Affiliates Network.

References

- 1. Abu-Baker NN, AbuAlrub S, Obeidat R, Assmairan K. Evidence-based practice beliefs and implementations: a cross-sectional study among undergraduate nursing students. BMC Nurs. 2021;20(1):13. doi: 10.1186/s12912-020-00522-x.
- 2. Guerra-Farfan E, Garcia-Sanchez Y, Jornet-Gibert M, et al. Clinical practice guidelines: The good, the bad, and the ugly. Injury. 2023(54);Suppl 3:S26–S29
- 3. Gallagher-Ford L, Melnyk BM. Evaluating outcomes of evidence-based practice initiatives versus research: Clarifying the confusion with a call to action. Worldviews Evid Based Nurs. 2022;19(4):258-259.



About JBI

JBI is a global organization that promotes and supports evidence-based decisions that improve health and health service delivery. JBI offers a unique range of solutions to access, appraise, and apply the best available evidence.

JBI is driven to improve health outcomes in communities globally by promoting and supporting the use of the best available evidence to inform decisions made at the point of care. This work begins and ends with the needs of those working in and using healthcare services.

