**EVIDENCE BASED PRACTICE**

Jayshree Kalita

M.Sc.N.(Medical-Surgical Nursing)

PhD Scholar

Srimanta Sankaradeva University of Health Sciences

Guwahati, Assam

**ABSTRACT**

Evidence based practice (EBP) is seemed to be an emerging concept in modern era, but it rooted in ancient days as the human use their decision making skill in delivering care and treatment by choosing the best option for it. EBP is beneficial for all the Nurses, patients as well as for the organization. For nurses it gives opportunity to grow their knowledge, patients gets personalized best low cost care and organization gets benefitted as the patient satisfaction is high. To cope with the changing nature of the health care industry due to technological enhancement, EBP is the future of it.

**Keywords:** Nursing, Evidenced Based Practice, Research

1. **INTRODUCTION**

Evidence based practice (EBP) is a process of selecting best available evidence for treatment and taking care of patient. It helps improving quality care according to changing needs of the environment in low cost. Although it seems Evidence based practice (EBP) is newly emerging concept in modern nursing, its presence is there actually from ancient time. When a mother care for a baby, she knows in which way if baby was kept, he will be comfortable is an example of evidenced based practice. In modern era according to some literature physician Archie Cochrane had practiced EBP first on 1970s. On the other had many Nurse Researchers believe Florence Nightingale first practiced EBP in 1800. While caring for wounded shoulders, Florence Nightingale observation about importance of hygiene and environment is an example of practice of EBP.

People often take EBP and research as a same process; but in reality though there are similarities there are differences between EBP and nursing research. The main aim of the EBP is to use the best available evidence whereas research tries to generate new knowledge. Various evidences in nursing practice arises from nursing research; whereas EBP further translate the available evidence to apply it in clinical setting. Nursing research purpose is to generate knowledge whether it may be clinical or non-clinical or to testing or generate theory. EBPs purpose is mainly clinical best, to use best practice in clinical setting.

 According to Benefield, “Evidence Based Practice (EBP) as using the best evidence available to guide clinical decision making. This definition shifts the provision of healthcare away from opinion, past practices and precedent towards a more scientific basis.”

 Evidence based practice in nursing is a process of collecting, analyzing and implementing best evidence available in clinical practice and evaluating its result in achieving desired goal.

1. **IMPORTANCE**

In this challenging world, where quality service is an essential component, EBP has undeniable importance in delivering high quality service to the patients. There are uncountable benefits of EBP for not only for the patients, but also for the Nurses as well as for the institutions. .

1. It helps nurses in decision making through various available scientific research and helps in critical thinking.
2. As EBP is based on research, it promotes lifelong learning among Nurses.
3. Every person has uniqueness in it. EBP helps in delivering individualized patient care.
4. It allows patient to involve in planning, implementing procedures and thereby promote patients autonomy.
5. EBP tries to prevent patient complication. Thereby it helps in reducing healthcare cost.
6. It also decreases hospital acquired infection.
7. EBP make nurses up-to-date with new protocols, researches and thereby improving decision making skills of the nurses.
8. It improves Nurses evaluation of skill of researches, risk or effectiveness of treatment, test etc.
9. If EBP properly implemented, it reduces recourses used which can be used in other areas.
10. EBP improves patient satisfaction, which have a positive impact on health care institution image.
11. Health care delivery system also gets benefited by EBP as it produces knowledgeable Nurses.

1. **COMPONENTS OF EBP**

There are three main component of EBP:

1. Clinical Experience
2. Research Evidence and
3. Patient preference



**Fig1: Component of EBP**

**1.Clinical Experience:** Nurses clinical experience is a prime component of EBP. A Nurse clinical experience and expertise knowledge about the present condition effect in practice in EBP. For example, a nurse dealing with COPD (chronic obstructive pulmonary disease) who is under oxygen therapy should have knowledge about different mode of oxygen therapy administration.

**2.Research Evidence:** For practicing EBP, selecting the best research available is a key step. Various research evidences related to the situations are another important component in EBP. For the former example given, a nurse can collect data about various method of administering oxygen to a COPD patient with its advantages and disadvantages.

**3.Patient preference:** EBP is a process where patient autonomy and uniqueness is taken care of by participation of patient. Patient participation and preferences can be influenced by various factor like patient’s value, previous experience, custom, education etc. For the former example, the patient may prefer nasal-cannula over oxygen mask due to his personal preference thereby influencing the EBP.

1. **STEPS**

EBP is a lifelong learning practice, where a nurse is in search for best available evidence. In today’s context what is the best evidence available may be changed tomorrow. A Nurse should always be aware for new researches, new protocols to uplift the present scenario. EBP is a five step never-ending circular process:

1. Formulating a question
2. Gather the best evidences
3. Analyze the evidences
4. Apply the evidence
5. Assess the result

**1.Formulating a question:** The first step of evidence based practice is to formulate a clear question based on clinical problem which the nurse in interested in. For formulating a question, ideas can come from various areas example a nurse experience, her expertise, previous literature available, brainstorming, scientific discussion etc.

 The sources of ideas can be mainly categories in two areas: one is problem focused another is knowledge focused. The problem focused ideas arises from mainly improve the quality of care or to solve a specific problem Knowledge focused ideas came from reading new researches, scientific discussion which lead a nurse attention to a newer field of knowledge. For example, a nurse notices increase incidence of bed sore in critically ill patient; this is an example of problem focused trigger. On the other hand a research study done in America shows preoperative teaching in patient decrease anxiety in patient during postoperative period. The Nurse wanted to generate same knowledge about the patient in her country. This is a example of knowledge focused trigger.

**2.Gather the best evidences:** Once the question is formulated in EBP, the next step is to collect data regarding the available evidences and research. Evidences can be collect from various research journal, institution protocol, library, scientific meetings etc. It is important for a nurse to read and have a theoretical knowledge and broad view of the topic before critiquing the research.

**3.Analyse the evidences:** After collecting various research evidences, a nurse have to evaluate its advantages and disadvantages in that particular situation. After analyzing all the available evidences, the nurse now has to select the best solution for this particular problem.

**4.Apply the evidence:** In this phase, the nurse implements the selected evidence to solve the problem. Here a nurse always keep in mind a patient’s decision should have utmost priority in a situation.

**5.Assess the result:** Here after implementation, the nurse evaluate the problem is solved or not through peer review, internal or external audit or through self reflection. If not desired result found, the same process will restart. That is why EBP is a lifelong process.

1. **LEVELS OF EVIDENCES**

There are five levels of evidences:

**Level A:** It is the most reliable level of evidences. Here evidences are acquired from randomized control trials. Example: administration of a anti-hypertensive drug A and placebo to determine its effectiveness on a hypertensive patient.

**Level B:** Here, Evidence is found from quality-designed control trials without randomization, clinical cohort studies, case-controlled studies, uncontrolled studies, epidemiological studies, and qualitative/quantitative studies. Example: studying the progress of heart disease after having or non-having of 15 years sedentary lifestyle.

**Level C:** Evidence is acquired from meta-synthesis, consensus viewpoint or expert opinion. It is naturally used when there is less data yet available about a specific problem.

**Level ML (multilevel):** Here Evidence is acquired from more than one level usually used in more complex cases.

1. **BARRIERS IN EVIDENCED-BASED PRACTICE**

 There are many barriers in practicing EBP among nurses. Some of them are discussed below:

1. A nurse lack of professional ability to critically evaluate research.
2. Lack of Nurses workforce thereby overburden workload on the nurses de-motivate the nurses.
3. Lack of organizational support to the Nurses another barrier in implementing EBP
4. Lack of scientific environment for nurses in an organization example, library for nurses, remuneration for nurse researchers etc.
5. As EBP gives freedom to change, resistance of authority or a nurse to change is a barrier to EBP.
6. Lack of support of colleague and confidence on Nurses is another barrier in EBP.
7. Nurses not understanding the importance of EBP and fear of being not accepted are a barrier to EBP.
8. Resource constrain within an organization is another barrier of EBP.
9. Patient personal choices do not match with EBP is also a barrier to it.
10. **WAYS TO PROMOTE EVIDENCED-BASED PRACTICE IN NURSING**

Though there are many challenges and barriers in practicing EBP among Nurses, a Nurse leader have to promote EBP among clinical practice for the betterment of the future health care and patient satisfaction. Following are few ways develop EBP among Nurses:

1. A nurse leader can ask for suggestion from fellow nurses regarding a particular problem thereby boosting up their confidence and engagement.
2. Conducting workshop, educational programme, offering education opportunities to the nurses improve the scientific temperament among the Nurses.
3. Motivation in terms of prize, monitory benefit also can improve the EBP among Nurses.
4. Increased resource allocation as per needed and maintaining nurse patient ratio will also improve the research temperament.
5. Evidences related to the organization should be taken in consideration to promote EBP in that particular organization.
6. Approaching the authority for protocols developing scientific environment among the nurses in an organization.
7. **CONCLUSION**

EBP is future of health care delivery system which has a holistic approach towards patient to give best care available in a cost effective way. Nurses can develop their awareness through their clinical practice by collecting, implementing suitable evidences in the setting. EBP provides patients personalized care as they are also involved in decision making. With the changing nature of the world, where preserving human rights are becoming an important topic, EBP gives space to it as well as cut the health care cost.

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