



Evidence-based Practice: Shocking Low Implementation



A new study reveals why healthcare organisations fall short of improving patient outcomes and reducing costs. The study is published in *Worldviews on Evidence-Based Nursing*.

The survey, led by Bernadette Melnyk, dean of the College of Nursing at The Ohio State University included 276 chief nurse executives across the U.S. The objective was to gauge how evidence-based practice ranks as a priority in their respective institutions. Evidence-based practice brings together research, a clinician's expertise and patient preferences and values to drive the best care and outcomes. Several studies already show that these practices result in improved population health, high-quality care, greater patient satisfaction and lower costs.

The analysis showed that the use of evidence-based practice among chief nurses and their hospitals is relatively low. The study also reported poor scores on key performance measures for many of the hospitals.

"We found that a substantial percentage of hospitals were not meeting national benchmarks for quality and safety," said Melnyk, who also serves as Ohio State's associate vice president for health promotion and chief wellness officer.

The authors point out that a major reason why 30 to 40 percent of hospitals aren't meeting benchmarks may be because of the low level of evidence-based practice in these hospitals. Majority of the survey participants believed in the value of such practices but when they were asked to rank the top three priorities for their organisation, the first was quality and second was safety. Evidence-based practice was ranking quite low.

"When patients get evidence-based care, they have 28 percent better outcomes. That's a big deal," said study co-author Lynn Gallagher-Ford.

Despite the public perception that hospitals do implement evidence-based practice, the reality is that many are not doing so. The survey participants said that they will focus on this aspect as soon as they have a handle on quality and safety. But the authors point out that this is the main problem. Healthcare organisation leaders think of these as a competing priority but in fact, they should be using evidence-based practice as the mechanism to achieve safety and quality. The survey also showed that the chief nurses were unsure of how to measure patient outcomes. That is a real gap in the preparation of nurse leaders, the authors note. They believe that if the leaders don't have these skills, they cannot possibly create the culture and infrastructure needed to practice evidence-based care.

Source: [Ohio State University](#)

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