Redesigning a Hospital’s Evidence-Based Practice Course
Value Institute

- Under the hospital's Quality Management department
- Provides education, evidence synthesis services, and development of clinical decision support tools

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Previous Evidence-Based Practice Courses

- **Fall 2016, Spring 2017**
- **10 weeks**
- **Participants: Clinicians**
- **8 in-person sessions, 3 consultations**
- **Content:** developing clinical question, searching literature, appraising evidence, and planning for implementation
- **Completion:** evidence table, presentation, implementation plan, 12 hours CE credit
EBP Courses

Barriers to success

- Lack of time to complete coursework
- Cannot attend every/any class session(s)
- Difficult concepts to teach in short amount of time
- High drop-out rate

August 2017

Focus groups with participants of Fall 2016 and Spring 2017 courses

Spring 2018

Redesigned EBP course based on focus group feedback
Focus Group Invitations

- Choice of two focus group dates
- Challenge statement
- Point of View statement
- Syllabi of past EBP courses
Introductions

Challenge Statement

To redesign the EBP course to be more effective, engaging, and better meet the needs of MUSC health care team members.

Problem Statement

Busy clinicians who do not have much time outside of class to complete coursework; may not always be able to attend class; and difficult concepts to teach in a short amount of time.

Silent Brainstorming

- How could the content be more "user friendly"?
- What worked well?
- What would make course more attractive to take?
- What is the most effective way for you to learn the course content?

Group Discussion
• Create visual roadmap that illustrates what participants have already accomplished and what still needs to be completed.
• Provide more one-on-one check-ins throughout the course.
• Teach using multimedia presentations; less lecture.
• Change dates/times (classes interfere with clinic duties, procedures).
• Make tutorials for each session for use as an after-class review supplement.
• Develop cheat sheets for each session.
• Create shared Box folder for each person to upload documents throughout the course.
• Highlight successful past projects. Show what types of projects can be completed.
Shared Governance New Knowledge and Innovation Council

RN III certification
- EBP project that seeks to improve patient outcomes on their unit and within the organization
Changes Based on Focus Group Feedback

- Create visual roadmap that shows what participants have already accomplished and what still needs to be completed.
- Provide more one-on-one check-ins → EBP navigator.
- Teach using multimedia → Hybrid (mostly online) course with videos.
- Change dates/times → Hybrid, self-paced course.
- Tutorials for each session → Hybrid course with brief videos for each module.
- Develop cheat sheets → Printable cheat sheets for each module.
- Create shared Box folder for each person to upload documents throughout the course.
- Highlight past projects → We will illustrate types of projects can be completed (next cohort).
Spring 2018
12 weeks (somewhat self-paced)
Participants: Nurses applying for Registered Nurse (RN III) certification
Hybrid model: 2 in-person sessions, 7 online modules, 3 consultations
Content: developing clinical question, searching literature, appraising evidence, and planning for implementation
Completion: evidence table, presentation, implementation plan, 15 hours CE credit

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Module 2 Coursework

Please watch all three tutorials (see three tabs above).

Phrase the Clinical Question Using PICO

PICO questions are phrased in a standardized way based on question type.

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are (is) ________ (I) more accurate in diagnosing ________ (P) compared with ________ (C) for ________ (O)?</td>
<td></td>
</tr>
<tr>
<td>In ________ (P), what is the effect of ________ (I) on ________ (O) compared with ________ (C)?</td>
<td></td>
</tr>
</tbody>
</table>
As of October 2018, the overall rate of completion of the RNIII certification process was 44%. Of that 44%....
How could we make the content more "user friendly"?

I think it is already user friendly for sure - the online presentations are fabulous, and meeting with the mentors was so helpful!

What worked well?

I loved the online modules that you can do on your own time around work schedules or at home. Also, the mentors were all very available and responsive to questions when things weren't clear to me.

How might we make the course more attractive to take?

It wasn't clear to me when I took it that it can be useful for ANY RN III project. I thought it was only for Research Studies or Evidence Based Practice projects. If somehow you could let folks know this walks them through the majority of the difficult part of the RN III process.

What would be the most effective way to learn course content?

Just the way you did it - the modules online were perfect so I wasn't distracted and could choose a time to do them instead of trying to make it to a class around clinic schedules.
Next Steps

Spring 2019: Courses for RNIIIs and Registered Dieticians

Course offered through university compliance training program software
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