

Transforming the Workplace with Evidence-based Practice at  
UCLA Medical Center – USA

Presented by  
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#5 Rule: Evidence-based decision-making

“Patients should receive care based on the best available scientific knowledge. Care should not vary illogically from clinician to clinician or from place to place”

*Crossing the Quality Chasm. Institute of Medicine*

■ What is Evidence-based Practice?

It is the conscientious use of current best evidence in making decisions about patient care. It is a problem-solving approach to clinical practice that integrates:

- A systematic search for and critical appraisal of the most relevant evidence to answer a burning clinical question
- One’s own clinical experience
- Patient preferences and values

What do we know about EBP?

- 15% of healthcare providers use evidence-based practice for clinical decision making.
- 85% continue to rely on traditional practices and provider’s own practice.
- 28% receive better health outcomes from providers who implement evidence-based practice.

**UCLA Medical Center**

- 520 bed teaching hospital in metropolitan area of Los Angeles, California, USA
- 2006 – ranks #5 of top ten hospitals in the USA by US News and World Report.
- Ranks Best in the West for 17 years consecutively.
- 16 specialties ranks in the top ten

### The Old & The New UCLA Medical Center



### Early Beginnings:

- 1999 – appointment of Vivien Dee to the Nursing Research, Education & Clinical Affairs position (position had been vacant for several years)
- 2000 – ½ FTE (full time equivalent) nurse research position was allocated and shared with the UCLA School of Nursing for a total of 1 FTE. Appointment was made but deleted within 3 months.
- 2002 – nurse research position restored; but still at ½ FTE.

### Partnership in the Making

- Identifying what is doable to ensure success
- Selecting a working title for the ½ FTE
- Clarifying the roles of the Director for Evidence-based Practice Initiative and the Director for Nursing Research & Education

### Developing the Infrastructure – Creating a Culture

- Building internal expertise
- Securing Administrative, Clinical Leaders and Staff Nurses Involvement
- Redesigning traditional policies and procedure committee focus
- Establishing achievable goals and timelines
- Ensuring financial support

### Maintaining the Infrastructure – Sustaining the Culture

- Staff Nurse Fellowship Program
- Advanced Practice Institute
- Annual Evidence-based Practice Conference
- Nursing Grand Rounds
- Clinical Practice Committees
- Clinical Alerts
- Incentives and rewards

### Strengthening the Infrastructure – Nurturing the culture

- Calculate cost savings achieved through EBP initiatives
- Increase collaboration with physicians on use of EBP guidelines
- Get Patients' perspectives on EBP
- Incorporate EBP principles in Job Descriptions

### Community Outreach - Sharing EBP Successes

- Recipient of Magnet Recognition Award from the American Nurses Credentialing Center – sharing stories of success
- Advanced Practice Institute – external participants
- Evidence-based Practice Conference – open to community
- Presentations
- Publications

### What have been achieved?

### Staff Nurse Fellowship Program

- Since 2002: 21 nurse fellows graduated
- Partial lists of projects:
  - “Effects of an Evidenced-based Interventions on Early Identification, Treatment and Outcomes for Difficult Patients” – Richard Chen
  - “Effect of an Evidence-based Discharge Teaching Protocol for Pediatric Patients” – Lynne Hancock
  - “Optimizing New Nurse Graduate Orientation in 4E CTU through Application of Evidence-based Concepts for Effective Orientation” – Denise Brown

### Staff Nurse Fellowship Program

- Partial List of projects: (continued)
  - “Effect of an Evidence-based Practice Protocol on the Identification and Assessment of Patients with Self-Injurious Behavior” – Sunnie Dishman, RN
  - “Improving Umbilical Venous Catheter Care through Implementing an Evidence-based Guideline in the NICU” – Anahit Saringulian, RN
  - “Implementing an Evidence-based Shift Report Tool to Improve and Facilitate Nurses’ Communication” – Kristy Ung, RN and Irene Davis, RN

### Evidence-based Practice Conferences

- 2002: “Implementing EBP: What is It?” - Dr. Titler
- 2003: “Getting the Evidence into Practice”- Dr. Chulay
- 2004: “Evaluating and Sustaining EBP Changes” – Dr. Donaldson
- 2005: “Creating Excellence in the Workplace Environment: What the Evidence Tells Us” – Drs. Urden and Prevost
- 2006: “Creating Enthusiasm and Motivation for EBP Changes” – Dr. Rutledge
- 2007: “Empowering Patients and Nurses as Partners in Evidence-based Care” – Dr. Melnyk

### Clinical Practice Guidelines

- Partial List:
  - Amiodarone
  - Continuous Cardiac Output and Mixed Venous Oxygen Saturation
  - Chest Tube Placement
  - Enteral Nutrition
  - Hyperbilirubinemia
  - Neuromuscular Blockade
  - Nurse-Patient Interaction
  - Patient Identification for Transport
  - Pediatrics Fall Prevention
  - Venous Thromboembolism Prophylaxis
  - Pediatric Skin Care

## Advanced Practice Institute

- Workshops & Seminars: Dr. Gawlinski
  - “Beginning knowledge and skill building for all phases of EBP”
  - “Transforming a clinical issue into an answerable EBP question (PICO)”
  - “Building Advanced Coaching Skills for Practice Changes”
  - “Maximizing the strengths of individuals and unit-based teams for advancing Research and EBP”
  - “Blueprint for the ‘how to’ of EBP: Using EBP Models”

## Lessons Learned

- *Two motivational quotes:*
  - “I do not think there is any other quality so essential to success of any kind as the quality of perseverance. It overcomes almost everything, even nature”  
– John D. Rockefeller
  - “Start by doing what is necessary, then do what is possible, and suddenly you are doing the impossible”  
– St. Francis of Assisi