

Nurse Facilitator as Mentors for Evidenced Based Projects in a Nurse Residency Program

Carol Hein MSN, RN, CMSRN, GCNS-BC; Christina Hildebrand, MS, RN; Susan Nasif, MSN, RN; Lori Pierret, MSN-Ed., RN

Background/Significance

The ANRP (Aurora Nurse Residency Program) exposes the next generation of nurses to evidence-based projects (EBP) through projects during residency as many other programs across the country. This is to ensure that the practice is adopted early in the professional development of the nurse. (1)

ANRP facilitators are experienced RNs that have undergone training to facilitate ANRP sessions, provide informal guidance, counseling and direction in conjunction with the ANRP Coordinators.

Partnering with nurse scientists can provide mentorship, knowledge, skills, and value for EBP processes and outcomes.

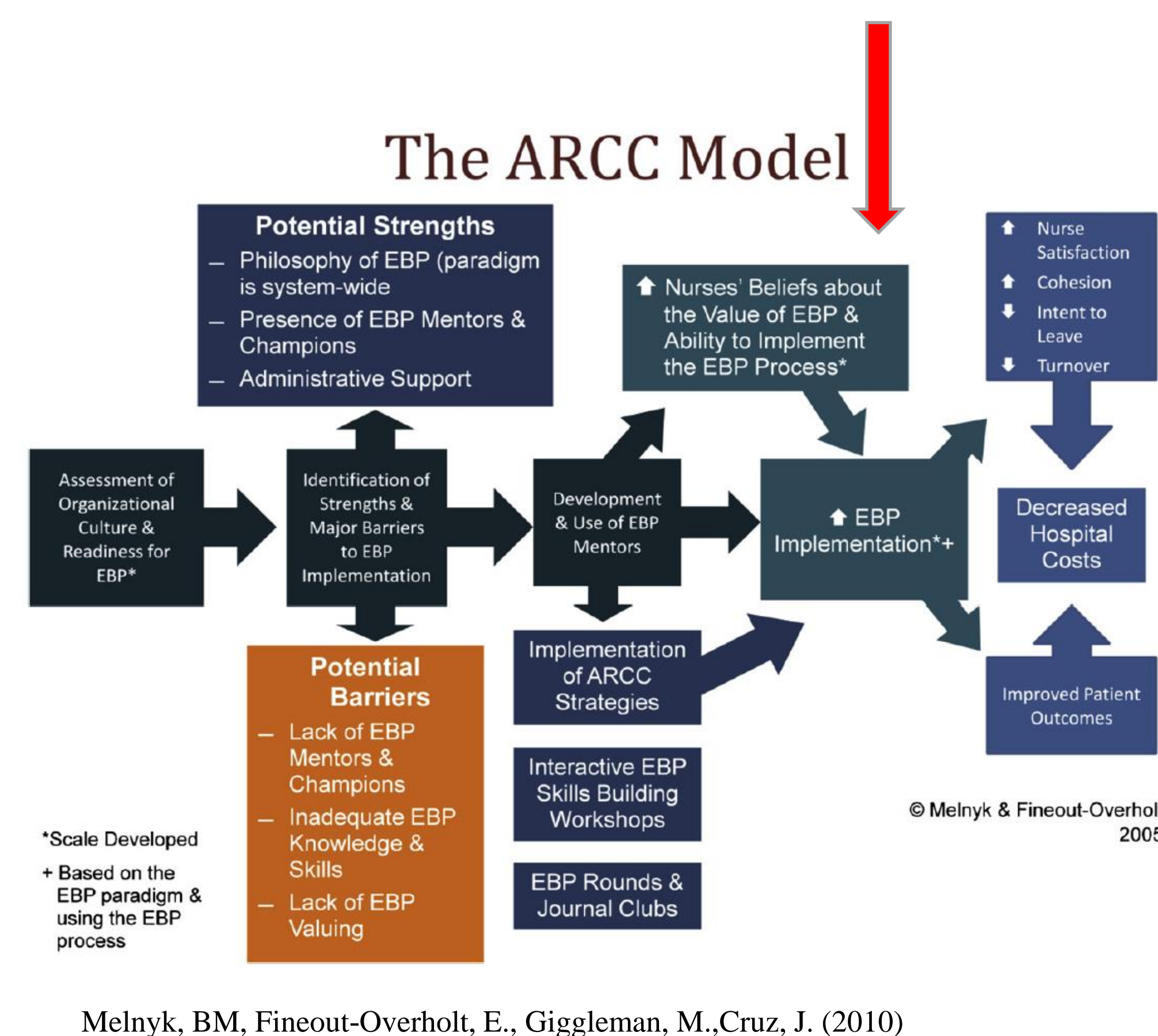
Developing EBP knowledge and skills of the ANRP facilitators may be a successful system strategy to prepare bedside resident nurses in EBP utilization and improve patient outcomes. (2, 3, 4, 5, 6, 7)

Purpose of Project

To assess baseline ANRP facilitator beliefs about the value of EBP and their ability to support and facilitate residents conducting system-based EBP projects, as compared to existing literature.

Theoretical Model

Current status of ANRP Advocate Aurora Health



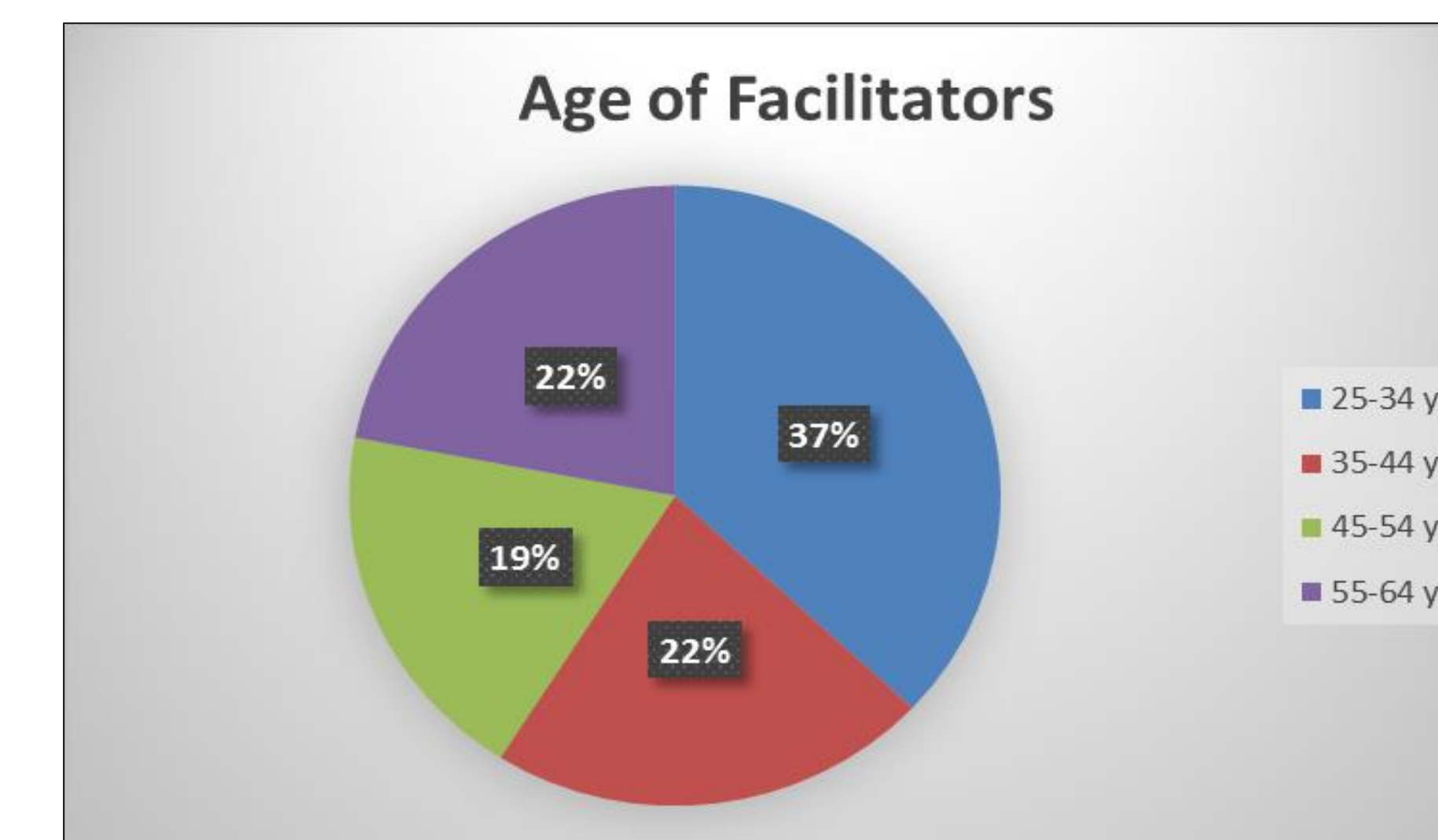
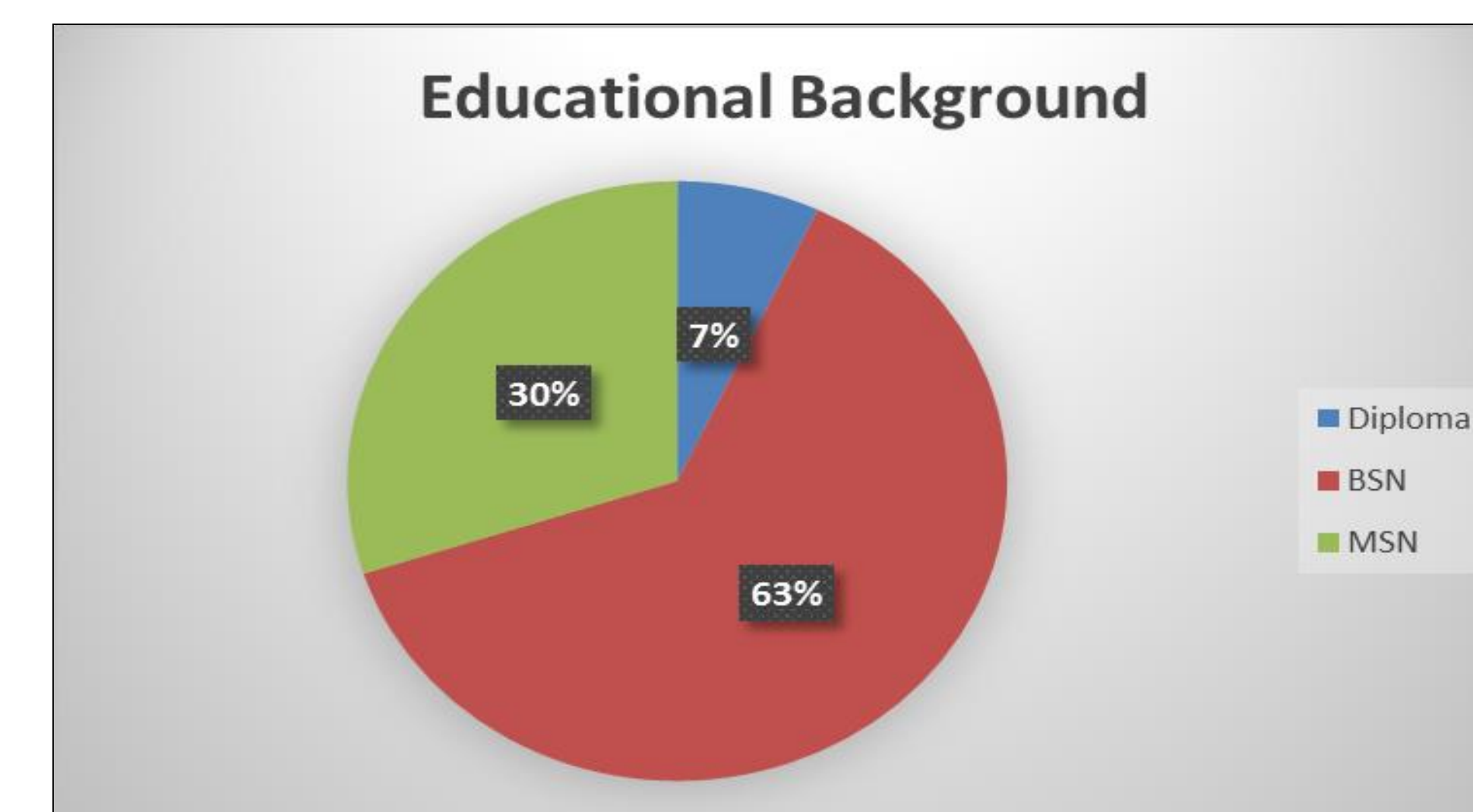
Intervention

ANRP facilitators received four hours of training related to EBP and six system-based EBP bundles (e.g., early mobilization) developed to improve selected patient outcome measures (e.g., falls). Each bundle contains: the problem, the nursing policy & procedure, staff training resources, expected outcomes, and unit-based performance reports

Sample and Setting

27 of 32 Residency Facilitators (mentoring 400+ residents) participated in the EBP mentor course.

8 of 15 Inpatient areas in a large Midwest not-for-profit health care system were represented.



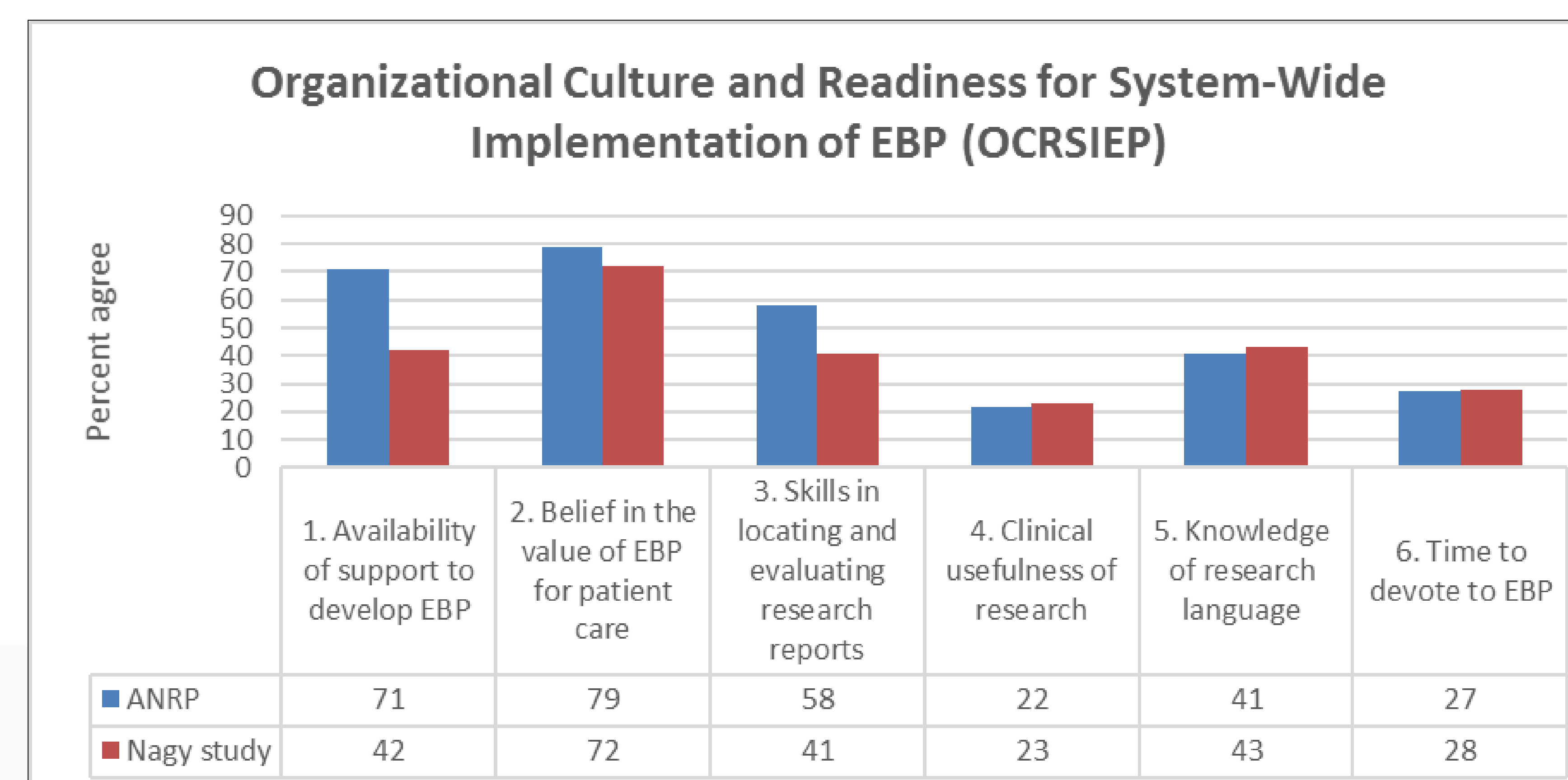
Methods/application to Practice

ANRP facilitators completed the Organizational Culture and Readiness for System-Wide Implementation of EBP (OCSIEP) (cite here) questionnaire prior to the facilitator EBP training. (6)

Findings from this baseline assessment were compared to findings from a previous investigation. (6)

[Note: The Facilitator Training and EBP Bundles are the first step in the intervention. Post-intervention and the success of the resident EBP projects on patient outcomes will be conducted at the end of the year.]

Findings/Results/Outcomes



Conclusions

Overall, findings were consistent with previous evidence. As with Nagy, the facilitators that participated in this work highlighted 3 of 4 areas.(6)

- Did not see research as relevant to nursing practice
- Lack confidence in their ability to use nursing research
- Do not have protected time to devote to implementing EBP
- *The ANRP facilitators DID have confidence in their organization to support EBP work*

Limitations

The initial education did not include all of the ANRP facilitators. Not all of the bundles performance reports were conducive to use. Will be offering a session again in Q2 2019 to reach all facilitators

Recommendations

Resurvey will occur at end of year and impact of EBP projects on clinical outcomes will be measured as well as retention of residents prior to and after the mentor education

Test whether this ANRP strategy will be a useful as a template for future use of EBP mentors in the organization

References

1. Jackson, N. (2016). Incorporating Evidenced-Based Practice learning into a Nurse Residency Program. The Journal of Nursing Administration. Volume 46, Number 5, pp 278-283.
2. Christenbery, t., Williamson, A., Sandlin, V., Wells, N. Immersion in Evidence-Based Practice Fellowship Program A Transforming Experience for Staff Nurses. Journal of Nurses in Professional Development, 32(1):15-20.
3. Magers, T.L.(2014) An EBP Mentor and Unit-Based EBP Team: A Strategy for Successful Implementation of a Practice Change to Reduce Catheter-Associated Urinary Tract Infections. Worldviews on Evidence-Based Nursing, 2014; 11:5, 341-343.
4. Melnyk, BM, Fineout-Overholt, E., Giggelman, M.,Cruz, J. (2010). Correlates among cognitive beliefs, EBP implementation, organizational culture, cohesion and job satisfaction in evidence-based practice mentors from a community hospital system. Nursing Outlook 2010;58:301-308.
5. Melnyk, B. M., & Fineout-Overholt, E. (2015).Evidence-based practice in nursing and healthcare: A guide to best practice. Philadelphia,PA: Lippincott, Williams & Wilkins.
6. Nagy, S., Lumby, J., McKinley, S., Macfarlane, C. (2001). Nurses' beliefs about the conditions that hinder or support evidenced-based nursing. International Journal of Nursing Practice, 7, 314-21.
7. Roe, E.A., Whyte-Marshall, M. (2012). Mentoring for Evidenced-Based Practice. Journal for Nurses in Staff Development, 29, 4, 177-181.

Acknowledgements

Linda Bub MSN, RN-BC, GCNS-NC Cynthia Phelan PhD, RN Mark McIlquham BSN, RN-BC