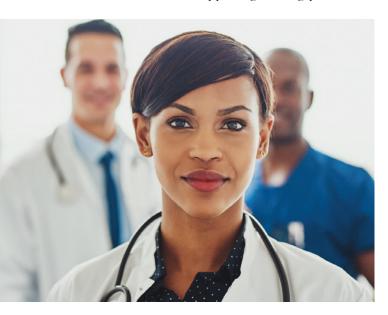
A leader's guide to implementing evidence-based practice

Lead the way to healthcare quality and safety.

By Sharon Tucker, PhD, RN, FAAN, and Bernadette Mazurek Melnyk, PhD, RN, CPNP/PMHNP, FAANP, FNAP, FAAN

Nurse Leaders, managers, directors, and chief nursing officers have considerable influence on the implementation of evidence-based practice (EBP) in their units, departments, and organizations. However, resistance to change can stall innovations, quality improvement, and EBP, and negatively impact patient outcomes. Our 12step approach to leading change and quality improvement can be adopted by healthcare leaders to ensure that the best evidence is supporting nursing practice.



Leadership, change, and sustainability

All organizational and system change requires an understanding of change theory, how change is facilitated and blocked, successful change steps, and strategies to promote each step. Effective leadership is key to all change theories and models. Kotter, for example, described good leaders as those who establish where their team should go, help them prepare for and commit to change, and energize them to overcome barriers. The best leaders do this by appealing to human needs, values, and emotions, which demands emotional intelligence on the leader's part. (See *Show me the research*.)

Nurse leaders also can influence the long-term sus-

tainability of EBP. One study found that key nurse leader strategies for sustaining best practice guidelines on inpatient units include maintaining priorities, reinforcing expectations, and fostering exchange and learning. These attributes lead to teamwork and accountability and contribute to sustainability. Long-term change success also requires leaders to invest (with adequate staffing, protected time for staff out of direct patient care, education and training, mentors, library resources, data management support, supplies, presentation resources, and other tactics) in EBP and provide resources and a structure for consistent implementation.

12-steps for leading EBP implementation

The Helene Fuld Health Trust National Institute for Evidence-based Practice in Nursing and Healthcare at The Ohio State University College of Nursing has created the infrastructure and resources to serve as a national hub for leading, teaching, and studying EBP implementation. Using our expertise in EBP, behavioral and organization change, and leadership roles, we have created a 12-step approach to leading change for organizations and individuals who want to promote EBP as a foundation for quality decision-making and care. (See 12 steps to success.) We used published evidence to guide these steps and strategies.

✓ Use compelling data and rationales to identify whether and why change is needed. Outline the issue at hand with data that support the story as to why change is needed. For example, if pressure injury (PI) rates are above benchmarks and increasing, you'll want to show staff a graphic representation of change over time, followed by information as to how rates compare to outside benchmarks and other internal units, as well as organization and patient costs. You'll also want to review your current practices and where gaps in care might exist.

Assess the organization's readiness for change along with organizational strengths and potential barriers. Is the staff ready for change? If resources are need-

Show me the research

Research on what leadership attributes contribute to implementing and sustaining evidence-based practice (EBP) change is limited, but it does indicate that leaders can support success by:

- establishing a clear project mission and vision
- being knowledgeable about the EBP being implemented
- engaging in early planning with staff and continuing planning during the implementation period
- remaining persistent and proactive
- developing and following a realistic plan
- identifying alternative strategies as needed
- supporting staff efforts to use EBPs.

Training approaches that help healthcare leaders succeed include:

- firstline leader training with targeted, multilevel organizational strategies
- weekly coaching calls with 360-degree feedback
- workshops with 180-degree feedback
- teaching knowledge, skills, and abilities for effective leadership related to evidence-practice gaps at the site level
- implementing strategies that reflect planned change processes
- managing barriers to implementation
- emphasizing the importance of prioritizing change, setting goals and target outcomes, and engaging patients and staff.

ed, what is senior leadership's appetite for change? Also consider organizational culture and leadership models and how they'll influence change success. Your assessment can be formal (with standardized instruments to measure readiness for change and knowledge translation) or informal (discussions and observations). Use the assessment data to identify the strategies you'll need to move a change forward on the unit and at the organizational level. For example, if staff say that they're doing as much as they can to prevent PIs, perhaps conduct a focus group to find out what resources might help them better manage skin assessments and PI prevention. To get organization buy-in, build a compelling case with data, costs, and potential return on investment to address resistance.

Create a compelling and exciting vision for change that's clearly communicated to all key stakeholders and staff. You must create an exciting team vision to get buy-in and keep people motivated and engaged. Work with staff who are ready to make the change and carve out a creative vision for promoting it. For example, a PI prevention campaign for the unit or hospital could generate the commitment and energy to roll out the vision and strategies to meet it. Develop a solid communication plan and involve someone from marketing and/or information technology to help identify the most effective strategies for communicating with all staff and key stakeholders.

Solicit input on the vision from all key stakeholders and staff. Get input from early adopters and champions on your unit, but also involve late adopters or naysayers to understand resistance and barriers, validate concerns, and troubleshoot solutions. Engaging senior leaders early can help ensure needed resources and learn about strategies that have been used elsewhere to solve similar problems.

Convene specific leadership teams to develop a detailed strategic plan with SMART goals. Once the staff and stakeholders are engaged, develop SMART (specific, measurable, action-oriented, realistic, timesensitive) goals with identified process and clinical outcomes and indicators to monitor and assess for change. Also complete a barriers assessment (look for stress levels, competing demands, and staff composition) and identify strategies and solutions for minimizing and managing barriers. For example, time is frequently identified as a barrier. In this case, you could work with the schedule and senior leaders to provide time away from patient care to participate in the initiative. You'll also want to present a calculation of the return on any upfront investment.

Provide effective change training and education for leaders and staff along with tools and resources for success. Education and training can have a huge impact on project success. Make sure all leaders are knowledgeable about the practice change and its rationale and how they can influence it. Training should include working in teams; using champions, mentors, and change agents; setting small goals for achieving success; incentivizing efforts and progress; recognizing staff and celebrating successes; using auditing and feedback; and tracking data over time. Coaching is an evidence-based strategy to guide leaders who, in turn, will coach their staff during the EBP implementation process. Provide formal workshop and continuing education training to convey senior leadership support for the change. The bottom line is that leaders must invest in EBP; the return on investment can increase healthcare quality and safety and decrease costs.

Leverage social networks, change champions, opinion leaders, and mentors. Everett Rogers introduced the Theory of Diffusion of Innovation as an approach to bringing innovation and change to an existing and perhaps longstanding practice. This approach appreciates that individual levels of openness to change (innovators, early adopters, early majority, late majority, and laggards) can influence innovation adoption rate and success. Rogers found that when about 35% of people are on board, the pace of adoption increases. He also discussed change features that

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12 steps to success Tucker and Melnyk developed this 12-step model for leading and sustaining successful organizational change. Use compelling data and Assess the organization's Create a compelling and ex-Solicit input on the vision from rationale to identify readiness for change along citing vision for change that is all key stakeholders and staff. whether and why change is with organizational strengths clearly communicated to all needed. and potential barriers. key stakeholders and staff. Convene specific leadership Provide effective change ed-Leverage social networks, Use evidence-based implementeams to develop a detailed ucation for leaders and staff tation strategies to promote change champions, opinion strategic plan with SMART along with tools and resources leaders, and mentors. and sustain the change. goals. for success. 05 06 Engage in small change Provide regular recognition Evaluate outcomes by moni-Disseminate progress and outsteps for quick wins. and appreciation. toring progress over time, comes to stakeholders and staff modifying the strategic plan and celebrate accomplished as indicated. goals. 11 Copyright Tucker and Melnyk, 2019. Melnyk B, Tucker S. Leading organizational change and building wellness cultures for maximum ROI and VOI. In: Melnyk B, Raderstorf T, eds. Evidence-Based Leadership, Innovation and Entrepreneurship in Nursing and Healthcare: A Practical Guide. Springer Publishing. In press.

matter, such as relative advantage, compatibility, complexity, trialability, and observability. Evidence by our team and others emphasizes the role of mentors in promoting EBP adoption. As frontline staff peers, they're trusted and respected.

Use evidence-based implementation strategies to promote and sustain the change. Implementation strategies for promoting EBP fall into seven general categories: leadership, coaching, communication, reinforcements, recognition, measurement, and reporting. Different strategies may be appropriate at each stage of change. For example, if staff are skeptical about the reason for the change, you might hold open forums to discuss the current practice and the advantages and disadvantages of change. Present data to demonstrate the issue and get senior leaders involved to show their support and belief in the need for change. As the change process gets under way, consider recognizing staff efforts, showing data trends, incentivizing and rewarding staff for their work, auditing records, and providing direct and real-time feedback using coaching methods. (See *Choose your model.*)

Engage in small change steps for quick wins. From the beginning of the practice change initiative to the end, use small wins to encourage and motivate staff.

Provide regular recognition and appreciation. Human behavior is influenced by positive encounters; staff who are already working hard appreciate when their extra effort is noticed. Senior and middle-level leaders should acknowledge and recognize staff participation and progress with surprise on-the-spot performance recognition, ceremonies with meals, flowers, small monetary gifts, newsletter announcements and formal communications, parking spots, or paid time off.

Evaluate outcomes by monitoring progress over time and modifying the strategic plan as indicated. Continuous improvement requires ongoing data measuring and monitoring. This includes outcome data (such as PI rates and falls) and process data (such as daily skin assessments and skin barrier supplies related to moisture risks). Strategic goals and plans may need to be modified based on data indicators. Ongoing data monitoring should be hardwired into the system.

Choose your model

Two evidence-based models can serve as guides for implementing and sustaining evidence-based practice (EBP) throughout a healthcare system.

- Advancing Research and Clinical Practice through Close Collaboration (ARCC). The key strategy in the ARCC model is developing and using a critical mass of EBP mentors who work with point-of-care clinicians to consistently implement EBP. When this model is used, EBP implementation grows, staff job satisfaction increases, patient outcomes improve, and accompanying costs decrease.
- Promoting Action on Research Implementation in Health Services (PARiHS). The PARiHS model emphasizes the characteristics of evidence, the context for adopting the evidence (including leadership and culture), and facilitation (person and processes) that promotes the EBP initiative and implementation strategies.

Disseminate progress and outcomes to stakeholders and staff and celebrate accomplished goals. Share findings internally with staff at the front-line level up to senior executives, at key conferences and workshops, and in journal articles and press releases. Sharing positive findings and lessons learned helps to promote standards of care and EBPs across organizations as well as deimplement interventions that aren't effective or may even be harmful.

Follow the steps

Nursing leaders can successfully implement EBP changes by becoming aware of general leadership change attributes and recognizing the importance of being knowledgeable about a proposed change, partnering with a team of staff ready for the change, engaging the help of mentors or change agents at the unit level, working with key senior leaders throughout the initiative to convey their commitment and appreciation, evaluating the change with data, thanking and celebrating all staff in the process, and disseminating findings. Following each of these steps will improve EBP change implementation and sustainability.

Editor's note: Read more about EBP implementation at americannursetoday.com/implementation-linchpin-evidence-based-practicechanges.

The authors work at The Ohio State University in Columbus. Sharon Tucker is the Grayce Sills Endowed Professor in psychiatric—mental health nursing in the college of nursing, the translational/implementation research core director, and the Helene Fuld Health Trust National Institute for Evidence-based Practice in Nursing and Healthcare nurse scientist at the Wexner Medical Center. Bernadette Mazurek Melnyk is the vice president for health promotion, university chief wellness officer, dean and professor in the college of nursing, and professor of pediatrics and psychiatry in the college of medicine.

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