

EBP FellowS²: A Model For Sharing Science in the Oncology Setting and Beyond...

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EBP FellowS²: A Model for Sharing Science in the Oncology Setting and Beyond...

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Problem Statement

Although the importance of evidence-based practice (EBP) is readily acknowledged and purportedly ascribed to, recent studies show only a small percentage of health care providers are incorporating research findings into practice.

Solution

A pragmatic model – the EBP FellowS² (S² = Sharing Science) Program – to facilitate the integration of evidence into practice

Application in the Oncology Setting

The EBP FellowS² model, and more specifically, an EBP project undertaken by staff from Hematology/Oncology Medical-Surgical units to develop an evidence-based standard for fever management, serve as an example of how to use evidence to positively improve oncology practice.

EBP FellowS² Program

Methods

Study Design

- 12 week offering of didactic and project development
- Additional 8 - 12 week mentored process to project completion
- Participants selected based on proposed question with potential to improve patient care through translation of evidence into practice

Setting

- Program implemented in a 988 bed, academic, community Magnet™ hospital

Participants

- FellowS² are dyads of a master's prepared unit educator and direct care nurse
- Facilitated by doctorally prepared nurse who coaches the project teams

Interventions

- Didactic offerings, workshops and coaching sessions
- Question formulation through evidence review
- Individual project development, implementation, evaluation, and dissemination

Outcomes

- Eight (8) individual dyad teams → 8 EBP projects
 - 1 Nurse knowledge and awareness of venous thromboembolism prophylaxis
 - 2 Narrowing of Lasix timing and implementation of standard toileting schedule
 - 3 Staff Driven Mobility protocol to minimize functional decline in elderly adults
 - 4 Non-separation of mother and neonate
 - 5 Crit line technology to minimize intra- and post-dialytic symptoms
 - 6 Medication administration interruptions
 - 7 Investigation of impact of early A.M. planned toileting on fall prevention
 - 8 Establishment of an evidence-based, standardized approach to fever management
→ see 3rd column



Implications

- Oncology nurses must design and implement practical strategies to translate evidence into practice. The EBP FellowS² program is a model that can be replicated in a wide variety of oncology settings.

- The EBP study to standardize the nursing treatment of fever in the hospitalized adult serves as an example of how to use evidence to positively impact practice in the Oncology setting and beyond.

Fever Management in the Hospitalized Adult Patient

Methods

Study Design

- Evidence-based quality improvement pilot project

Setting

- 20 bed Hematology/Oncology unit
- 30 bed Hematology/Oncology Medical-Surgical unit

Participants

- Direct care RNs, non-licensed assistive personnel, providers, & patients

Interventions

- Pre- and post-survey of RNs, non-licensed personnel & providers
- Development of a Discomfort Scale
 - Defining patient comfort and identifying appropriate assessment strategies to determine when intervention is necessary
- Design and utilization of a decision tree to guide fever management
- Assessment and analysis of patient satisfaction related to fever management



Outcomes

A PASSION FOR BETTER MEDICINE.™

