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Leadership & Professional Development Judy A. Schreiber, RN, PhD • Associate Editor

Beyond Evidence-Based Practice—Achieving Fundamental Changes in Research and Practice

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ince the early 2000s, significant discussion about evidence-based practice (EBP) has occurred in the healthcare arena and early steps have been taken toward it; however, searching the EBP literature can be overwhelming. A MEDLINE® (EBSCO) search for evidence-based practice yielded interesting results. When limited to 1999 or prior, 635 articles were identified starting at 1987, and when limited to 2000-2013, 11,511 articles were identified, an 18-fold increase. The concept of EBP has been readily adopted in the healthcare community. However, the questions that remain are: So what? Who cares? Has this avalanche of new information truly changed practice or just added more layers to practice and workloads? Where do we go next? The focus of the current article is to present current initiatives directed toward integrating research and clinical knowledge through interdisciplinary and transdisciplinary processes.

Transforming Nursing Care

Experts from all healthcare disciplines reported on the state of health care in the United States and provided recommendations for the future. Three key reports had a significant impact on quality care and the use of EBP: To Err Is Human: Building a Safer Health System (Kohn, Corrigan, & Donaldson, 2000), Crossing the Quality Chasm: A New Health System for the 21st Century (IOM, 2001), and The Future of Nursing: Leading Change, Advancing Health (IOM, 2011). With the acknowledgment of human error in healthcare delivery, a focus on giving the highest quality care based on best information, and the drive to transform nursing care, EBP issues cannot be ignored.

In addition to the IOM, the American Nurses Credentialing Center's ([ANCC's], 2013) Magnet Recognition Program[®] and the Joint Commission's (2013) National Patient Safety Goals are two other main drivers in the EBP movement. The Magnet Recognition Program has five components: transformational leadership; structural empowerment; exemplary professional practice; new knowledge, innovation, and improvements; and empirical quality results (ANCC, 2013). EBP is a significant portion of those last three components. The National Patient Safety Goals (e.g., preventing catheter-related urinary tract infections) are important safety issues monitored and addressed with EBP activities (Joint Commission, 2013).

Initiatives

Most hospitals began EBP efforts in the mid-1990s. Much of the initial work involved reviewing the literature to revise and update policies and procedures, an important first step. Knowing the literature, incorporating the best supporting knowledge in practice, and demonstrating support for ongoing practice helped to standardize some aspects of care and eliminate activities that were ineffective or detrimental. For example, before EBP initiatives, the routine for cleansing around a central line was alcohol and betadine. Research data supported the use of chlorhexidine scrubs instead of alcohol and betadine, and chlorhexidine then became the current national standard (Girard, Comby, & Jacques, 2012; Goldblum, Ulrich, Goldman, Reed, & Avasthi, 1983; Render et al., 2006). Various organizations began to develop guidelines, such as the U.S. Preventive Services Task Force for primary care and the Oncology Nursing Society for oncology nursing topics. In addition, the Cochrane Library offers a repository of systematic reviews of healthcare topics across disciplines.

Partnerships

The next advance came from academic partnerships through an EBP researcher or consultant. The role was initially filled by an academic researcher working part-time in the clinical setting; in some

Table 1. Collaborative Research and Translation to Practice Terminology

Term	Definition
Interdisciplinary	Investigators working with other disciplines (but in discipline- specific frameworks) on a common problem
Integrated knowledge translation	"Involves collaboration between researchers and research uses in the research process including the shaping of the research questions, deciding the methodology, involvement in the data collection and tools development, interpreting the findings and helping disseminating the research results" (Graham & Tetroe, 2009, p. 48)
Multidisciplinary	Investigators working in parallel or sequentially in own discipline to address common problems
Transdisciplinary	Investigators working in full partnership, sharing credit in all dis- ciplines: study question development, design, and research aims
Note. Based on information from Choi & Pak, 2006; Graham & Tetroe, 2009.	