Oncology Nurses and the Experience of Participation in an Evidence-Based Practice Project

Mary Fridman, DNS, APRN-BC, AOCNP®, and Keville Frederickson, EdD, RN, FAAN

Nursing is the largest profession in the U.S. healthcare workforce and has been nationally recognized for its potential to lead transformation in health care (Institute of Medicine [IOM], 2010). Transforming health care will require the generation and use of current and high-quality research to improve organizational and patient outcomes. In other words, improving healthcare quality in the United States will require evidence-based practice (EBP). EBP is in contrast to practice that is based on tradition, routine, personal preference, or opinion (Rutledge & Bookbinder, 2002). A large gap exists between what research has shown and what healthcare providers actually use in practice, so patients do not “reap the full benefit” of the investment in research (IOM, 2001, p. 145). Because of the recognized importance of the nursing profession as a major player in transforming the healthcare system with relation to the Affordable Care Act (2013), healthcare providers should strive to implement EBP.

Nursing leaders describe implementing EBP as a complicated and elusive goal (McCorkle, 2009). Many nursing studies have documented the struggles nurses face in accessing, evaluating, and implementing EBP. In an integrative review of studies using the BARRIERS scale, frequently used to assess nurses’ use of research in practice, barriers to research use (e.g., limited access to information, limited ability to interpret information, limited ability to apply information) were found during a 15-year period from 1991–2006 (Carlson & Plonczynski, 2008). Nurses outside of the United States have also identified those obstacles (Gerrish et al., 2007). The challenge to the actualization of EBP in oncology nursing is addressed by the Oncology Nursing Society’s current research agenda, which includes translational research as a priority (Berger, Cochrane, & Mitchell, 2009). Translational research explores the knowledge-to-practice gap in an effort to improve the quality of nursing practice.

Survey research in nursing has shown little increase in nursing use of EBP, reporting consistent obstacles. Many of those obstacles have been more recently attributed to the nursing workplace, shifting the focus of EBP research away from individual nurse factors to the contextual variables affecting EBP (Kitson, 2007). Nurse leaders stress the importance of creating nursing work environments with an infrastructure conducive to and supportive of EBP (Gerrish et al., 2012; Titler, Everett, &

Purpose/Objectives: To illuminate the experiences of oncology nurses who participated in an evidence-based practice (EBP) project in an institution with an EBP organizational structure.

Research Approach: A descriptive phenomenologic approach and in-depth interviews with each participant.

Setting: An oncology-focused academic medical center with an established organizational infrastructure for EBP.

Participants: 12 RNs working in an oncology setting who participated in an EBP project.

Methodologic Approach: Descriptive, qualitative phenomenologic approach through use of interviews and analysis of interview text.

Findings: Four essential themes (i.e., support, challenges, evolution, and empowerment) and 11 subthemes emerged that reflected nurses’ professional and personal growth, as well as the creation of a culture of EBP in the workplace.

Conclusions: The participants described the EBP project as a positive, empowering personal and professional evolutionary experience with supports and challenges that resulted in improvements in patient care.

Interpretation: To the authors’ knowledge, the current study is the first qualitative study to demonstrate improved nursing outcomes (e.g., professional growth, improved nursing performance) and nurses’ perception of improved patient outcomes (e.g., ongoing healthcare collaboration, evidence-based changes in practice).

Key Words: evidence-based practice; research use; professional issues; nursing administration

ONF, 41(4), 382–388. doi: 10.1188/14.ONF.382-388

ONF, 41(4), 382–388. doi: 10.1188/14.ONF.382-388