Venous Thromboembolism: Applying Evidence to Change Nursing Practice

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Objectives

- Identify organizational processes in bringing research to the bedside
- Describe the role of a staff nurse in a clinical research study in the healthcare setting

Organizational Processes in Bringing Research to the Bedside

- Visionary Nursing Leadership committed to Evidence Based Nursing Practice
- Supports research activities by providing for:
  - CNS’s & Nursing Staff Development Specialists
  - Local Practice & Quality Councils
  - Nurse Researchers
  - Research Forums
  - Time for study

Magnet Forces
1994 - Present

Incorporating Research into Clinical Practice AKA Evidence Based Practice

Evidence Based Practice (EBP) Activities Include:

- Updating clinical policies, procedures & guidelines
- Selection of patient care technology
- Development of clinical pathways, care maps & standing orders
- Answering clinical (research) questions

A Review of Evidence Based Practice (EBP)

- The responsibility of Nurse Clinicians, not Nurse Administrators
- Assures patient care routines are safe & effective
- Uses science to guide clinical practice
- Provides evidence to eliminate practice routines which do not enhance practice
Why Promote Research at the Bedside?

EBP → Nursing Staff Outcomes:
- Development of clinical inquiry skills
- Expansion of clinical knowledge
- Improvement in writing and presentation skills
- Sense of professional pride

EBP → Institutional Outcomes:
- Improvement of clinical & fiscal outcomes
- Align practice with community standards
- Teambuilding
- Visibility/marketing of professional climate
- Improved product acquisition decisions
- Recruitment and retention of nurses

CNS’s, Staff Development Specialists & Nurse Researchers Provide:
- Coaching: Literature review for updating nursing P&P’s & guidelines, developing research questions
- Mentoring: Review levels of evidence and research protocols such as confidentially, inter-rater and intra-rater reliability
- Organizational Support: Coordinate timelines and research documents, design tools, coordinate data collection and analysis, assist staff nurses in preparing for poster and oral presentations

UWMC Professional Practice Model

The Role of a Staff Nurse in a Clinical Research Study

“When a patient care problem is identified, a research question is born.” (2)

Study Team:
- Principle Investigator: Sylvia McKenzie
- Clinical Nurse Researcher: Elizabeth Bridges
- Medical Surgical Local Practice Council Members:
  - Karen Slapper, Sharon Tugwell, Kathleen Bornstedt, Daphne Hacker, Sandy Le Just, Tamra Maars, Anne Mercier, Cindy Sayre, Leah Spaccianti, Sue Taylor

Medial Surgical Local Practice Council 1st Research Study

- TED hose/SCD nursing P&P’s due for review
- Literature review performed
- Discussion about nurses routinely “guessing” for TED hose size and under-estimating timeframe SCD’s should be worn
- Research questions “born”
- Consultation with Nurse Researcher, study protocol developed and submitted to Human Subjects
- Approval for study
Background
- VTE statistics are shocking
- When correctly sized and applied, TED hose and SCD’s may reduce the risk of VTE
- Nurses are solely responsible for properly fitting and using TED hose and SCD’s

Purpose of Research
- Describe the correct sizing and use of TED hose and SCD’s on medical surgical patients
- Describe the effects of an educational intervention aimed at improving the correct sizing and use of TED hose and SCD’s

Research Design
- Descriptive pre-post study
- Intervention: Education
  - “What's New in Nursing Posters”
  - Unit in-services
  - Unit Champions for EBP
- Outcomes pre/post at 30 and 90 days
  - Correct sizing of TED hose
  - Correct fitting and use of SCD’s

Sample
- A convenience sample of adult medical surgical patients admitted to eight medical surgical units
  - Pre (n=41)
  - 30-day post (n=49)
  - 90 days post (n=47)
- Inclusion: Wearing TED hose and/or SCD’s
- All participants were asked permission to perform noninvasive measurements and had option of not participating
Data Collection Tool

Knee High TEDs Correct Size/Length

*Phase 3, 30% higher than Phase 1 (p = .006)

Correctly Sized/Applied SCDs

Implications for Practice
- Data driven purchasing
- 600+ nurses and assistive personnel were educated
  - Educational methods used were partially effective in implementing EBP
  - Discovery that a 17 inch leg length may require either regular or long size TED hose depending on foot size/calf circumference
  - Future nursing work to focus on ensuring patients are wearing SCD's during their stay
  - Providers should be aware of study results

Next Steps
- Implement softer SCD sleeve to decrease skin harm
- Implement continuous SCD use during transports and procedures
- Study team to continue work as “EBP Champions”
- Share results: poster, publish, replicate study

N = # of patients with SCDs ordered
The Role of “EBP Champion”
- Auditing
- Unit expert
- Informal teacher
  - Reminding staff of nursing P&P’s
  - Explaining importance of measuring
  - Explaining importance of continued use

Sharing the Power of EBP
- Partnering with nurse leaders who provided time, tools and expertise made it possible to incorporate research into routine nursing care
- Striving for EBP can make a difference in how we provide care and improve patient outcomes

Sharing the Power of EBP
- Staff research activities such as this one can increase accountability and passion
- Involving nurses in projects and studies is a great way to bring EBP to the bedside

References