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Nancy Spector, PhD, RN

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Learning Objectives

- [illegible]
- [illegible]
- [illegible]

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[illegible]

Foundation of Evidence-Based Regulation

[illegible]

[illegible]

[illegible]

[illegible]

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Defining Evidence-Based Health Care and Research Utilization

As discussed in Chapter 1, *evidence-based health care* (EBHC) is the integration of best research evidence with clinical expertise and patient values (Sackett et al., 2000). According to Sackett et al. (2000), *research utilization* is the application of research findings to the delivery of patient care. Research utilization is a process that begins when a practitioner asks a clinical question, searches for the best evidence to answer that question, critically appraises the evidence for its validity and usefulness, selects and implements the best evidence in practice, and evaluates the outcomes of the practice change based on evidence. Sackett et al. (2000, p. 1) state that *research utilization* is the same as *evidence-based practice*. Other terms that are sometimes used synonymously with research utilization and evidence-based practice are *clinical effectiveness*, *clinical epidemiology*, *clinical informatics*, *outcomes management*, *practice guidelines*, *quality assurance*, and *total quality management*.

Six Steps of Evidence-Based Health-Care Regulation

Melnyk and Fineout-Overholt (2005) described six steps of EBHC (Table 1-1). These steps are discussed briefly here and in more detail in Chapters 2 through 7.

Step 1: Formulating the question. Clinicians must be able to ask answerable questions to find the evidence they need to provide 100% effective health care. Clinicians must learn how to track and manage the evidence they need to practice EBHC.

Step 2: Identifying and collecting evidence. Clinicians must know how to search effectively for the best evidence to answer clinical questions. Clinicians must be familiar with the best resources for finding evidence.

Step 3: Appraising quality of the evidence. Clinicians must critically appraise evidence for its validity, clinical importance, and applicability to patients.

Step 4: Processing data. Clinicians must be competent in statistics so they can understand the results reported in research studies. They must also be competent in measuring their own clinical outcomes resulting from EBHC changes.

Step 5: Disseminating findings. Clinicians must be able to present EBHC findings persuasively to various interdisciplinary groups.

Step 6: Evaluating effectiveness and efficiency. Clinicians must be able to evaluate their own performance in terms of speed and effectiveness in implementing EBHC. Table 1-1

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Implementing Evidence-Based Regulation in Nursing

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The Future of Evidence-Based Nursing Regulation

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Conclusions

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