



ASSESSMENT OF KNOWLEDGE, ATTITUDES AND PRACTICE ABOUT EVIDENCE-BASED PRACTICE AT A TERTIARY CARE HOSPITAL IN NORTH INDIA

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ABSTRACT

Background: Evidence-based practice is the integration of the best current evidence for clinical decision making process . Evidence-based practice (EBP) has become a worldwide concern for healthcare staff and administrators as well as researchers.

Objective: The aim of this study was to describe nurses Knowledge, attitudes, and practice regarding evidence- based practice.

Methodology: Descriptive cross- sectional study was done using modified version of Evidence based practice (EBP) questionnaire adapted from Upton *et al* ⁽⁸⁾ as a study tool.

Results: The Knowledge/ skills of respondents towards evidence based practice had the highest mean score followed by attitude and the practice.

Conclusion: The study in conclusion established that attitude and practice of respondents towards evidence based practice need to be strengthened.

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INTRODUCTION

Evidence-based management is defined as making decisions about the management of employees, teams or organizations through the conscientious, explicit and judicious use of the best available scientific evidence, organizational data, professional experiential evidence, and stakeholders' values and concern ⁽¹⁾

Evidence-based practice (EBP) has become a worldwide concern for healthcare staff and administrators as well as researchers⁽²⁾. In 2009, the Institute of Medicine established a goal of having 90% of all clinical decisions based on the latest evidence. Since the time, a plethora of studies have shown that evidence based practice (EBP) promotes safe, quality patient care (Doran *et.al*, 2014; Melnyk, Fineout-overholt, Gallagher Ford & Kaplan, 2012)⁽³⁾.

Evidence-based practice is the integration of the best current evidence for clinical decision making process⁽⁴⁾. Evidence-based practice is considered the gold standard of care and as such it is now an expectation of patients, regulatory agencies and healthcare funders.⁽⁵⁾

The greatest barriers were lack of time and lack of skills to find and manage research evidence ⁽⁶⁾. Other barriers such as Language barriers, inability to access, interpret, and use the research findings and knowledge deficit about EBP were reported ⁽⁷⁾.

The aim of this study was to describe nurses Knowledge, attitudes, and practice regarding evidence- based practice.

METHODOLOGY

The study was carried out in 1059 bedded tertiary care hospital from North India with a aim to assess the status of Knowledge, attitude and practice about evidence based practice. This study used descriptive cross sectional design. In our study modified version of Evidence based practice (EBP) questionnaire adapted from Upton *et al* ⁽⁸⁾ was used as a study tool. This tool has three subscales: practice of EBP, attitude towards EBP and Knowledge of skills associated with EBP. The practice subscale has three items, Knowledge subscale has six items and attitude subscale has three items. All the items were scored from one to seven with a higher score indicating a more positive attitude towards EBP, greater use (practice) and greater knowledge of EBP. Each item in the attitudes subscale has two pairs of opposing statements and score greater than four were considered as positive. All the registered nurses working in the hospital who agreed to participate in the study were included while as questionnaires that were incompletely filled by the respondents were excluded from the study.

The second portion of the questionnaire was about sociodemographics of the participants. This part consist of questions about age, gender, professional experience and educational level. To validate the questionnaire pilot study was carried out.

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RESULTS

All the nurses working at a tertiary care hospital were included in the study. Out of total 526 nurses only 441 responded with the response rate of 83.8%. Most of the participants/respondents fall in the age group of 40-60 years having greater than 10 years of experience. Also, most of the respondents were females having postgraduate degree.(Table 1)

Table 1 Sociodemographic Characteristics of the sample

Characteristics	Entire sample (N= 441) n(%)
Gender	
Male	132, (30%)
Female	309, (70%)
Age	
20-40 years	22.05, (5%)
40-60 years	242.5, (55%)
>60 years	176.4, (40%)
Years of Experience	
< 10 years	110.2,(25%)
>10 years	330.7,(75%)
Educational level	
Graduate	88.2,(20%)
Postgraduate	352.8, (80%)
Participation in research	
Yes	135, (30.6%)
No	306, (69.4%)
Data base access	
Yes	76, (17.2%)
No	365, (82.7%)

Table 2 Nurses questionnaire scores regarding their perceived Knowledge, skills, attitude and practice of EBP (N= 441)

Item	Total positive responses score
ATTITUDE	N, (%)
My workload is too great for me to keep up to date with all the new evidence/New evidence is so important that I make the time in my work schedule	137(31.0%)
I recent having my clinical practice questioned/I welcome questions on my practice	111(25.1%)
I stick to tried and trusted methods rather than changing to anything new/My practice has changed because of evidence I have found	81(18.36%)
KNOWLEDGE/SKILLS	N,(%)
Research skills	186,(42.1%)
IT skills	139(31.3%)
Ability to analyze critically evidence against set standards	75(17%)
Ability to identify gaps in your professional practice	165(37.4%)
Dissemination of new ideas about care to colleagues	201(45.57%)
Ability to review your own practice	218(49.4%)
PRACTICE	N,(%)
Formulated a clearly answerable question as the beginning of the process towards filling this gap	85,(19.2%)
Tracked down the relevant evidence once you have formulated the question	72,(16.3%)
Evaluated the outcomes of your practice	126,(28.5%)

Most of the respondents showed positive response for attitude item ‘ My workload is too great for me to keep up to date with all the new evidence/ New evidence is so important that I make the time in my work schedule.’

In Knowledge/skills item ‘ ability to review your own practice’ scored the highest positive response of 49.4% among all the items where as the Knowledge item ‘ability to analyze critically evidence against set standards’ scored the least positive response of 17%.

Practice item ‘ Evaluated the outcomes of your practice’ scored the highest positive response of 28.57%.

Table 3 Mean Scores of Knowledge, Attitude and practice

Item	Mean
Attitude	109.6
Knowledge	164
Practice	94.3

The Knowledge/ Skills of respondents towards evidence based practice had the highest mean score followed by attitude and the practice.

DISCUSSION

The results of this study revealed the knowledge/skills of respondents towards evidence based practice had the highest mean score followed by attitude and the practice which is contrary to study carried out by Abu Ruz *et al.*⁽⁹⁾ in which the attitude toward evidence- based practice had the highest mean followed by the knowledge/skills and finally the practice.

Ironically, in our study it was observed that most of the participants have post graduate qualification and still have lower rate of participation in research.

It was found that in our study most of the respondents observed to have no access to data base which might be the reason of having lower participation in research as database in hospital is important in conducting research.

CONCLUSION

The study in conclusion established that attitude and practice of respondents towards evidence based practice need to be strengthened. Also, there is a need to improve access to data base for further improvement in conducting research.

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