

Evidence Implementation Training Program (EITP)

Falls in Older People: Exercise for Prevention in the Community Setting: a best practice implementation project María Solé; Arturo Pereda Área I Murcia Oeste Laura Albornós; Leticia Bernués

Audit Question: PESS

What is best practice in improving an exercise program to prevent falls in elder people in community?

- Problem: One each three patient older than 65 will fall in the next year.
- Evaluation: Audit 3 criteria.
- Setting: 4 health centers
- Stakeholders: Patients with, at least, one of
 - 1. Ask about previous falls.
 - 2. Observe and/or ask about problems with walking, balance or mobility.
 - 3. APPLY CLINICAL JUDGMENT!!
 - 4. Health professionals

Audit Question: PESS

What is best practice in improving an exercise program to prevent falls in elder people in community?

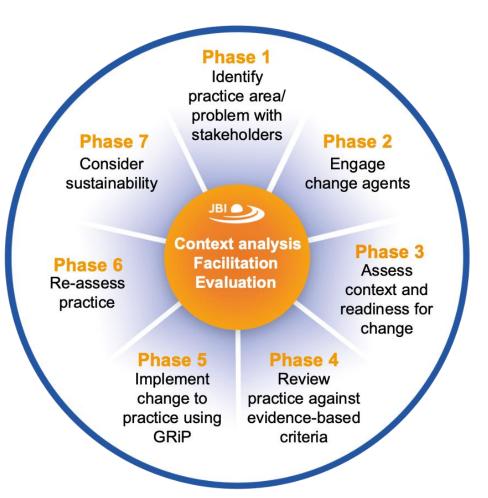
- Stakeholders: Patients with, at least, one of
 - 1. Ask about previous falls.
 - 2. Observe and/or ask about problems with walking, balance or mobility.
 - 3. Health professionals.
- Inclusion criteria
 - Age ≥ 70 **and**
 - Barthel index \geq 90 and
 - SPPB (Short Physical Performance Battery) <10

Aims and objectives

Aims of the project

- 1. To implement an evidence program based on
- 2. To decrease falls in aged people
- **3**. To analyze satisfaction of nurses
- 4. To analyze patients reported outcomes measures
- 5. To evaluate the implementation strategies

Methods: 7 phases of Evidence Implementation



Pre-planning:

- Phase 1: Identifying practice area/problem with stakeholders
- Phase 2: Engagement with change agents/project team

Baseline Assessment and Implementation Planning

 Phase 3: Assessment of context and readiness for change
 Phase 4: Review of practice against evidence-based criteria
 Phase 5: Implementation of change using CBiP

Phase 5: Implementation of change using GRiP

Impact Evaluation and Sustainability

Phase 6: Re-assessment of practice Phase 7: Sustainability Interventions

Pre-planning

- Phase 1: Identify practice area/problem with stakeholders
 - Falls
 - Health, Familiar, Social and Economic problem
 - 16% of our patients
- Phase 2: Engage change agents/project team
 - Who is going to be a part of your project team? 8 Nurses
 - Who else do you need to engage with? All the staff in 4 Health Centers
 - How will you engage them and ensure their support?
 - Trained nurses, Health Centers Coordinators, Support Sessions, Audits feedback

Baseline Assessment and Implementation Planning

- Phase 3: diagnostic/situational analysis using a SWOT tool
- Phase 4: Review of practice against evidence-based criteria
 - Pilot of audit criteria
 - Baseline data collection, including what data, which sources, how identify compliance, and ethics in data collection (anonymity, confidentiality, appropriate data storage).

- Review Electronic Clinical History(ECH)

Baseline Assessment and Implementation Planning

- Phase 4: Review of practice against evidence-based criteria
 - Pilot of audit criteria
 - Baseline data collection, including what data, which sources, how identify compliance, and ethics in data collection (anonymity, confidentiality, appropriate data storage).
 - Review Electronic Clinical History(ECH)

Phase 4: Review of practice against evidence-based criteria

Audit criterion	Sample	Method used to measure percentage compliance with best practice		
 Patients are asked about falls history Patients are offered an exercise program 		 Records in ECH. If there are: "Yes". If not: "no" Records in ECH. If there are: "Yes". If not: "no" 		
 Patients Reported Outcomes Measures 	3. Patients	3. EuroQol 5D-5L		

Impact Evaluation and Sustainability

- Phase 6: Re-assessment of practice
 - Periodic Sessions
 - Involve new training specialist

- Phase 7: Sustainability Interventions
 - Periodical Audit (Criteria and PROMS)
 - Feedback to nurses and coordinators

SCHEDULE OF INTERVENTIONS

	CRONOGRAMA	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
1	BASAL AUDIT											
2	SWOT ANALYSIS											
3	SELECTION AND TRAINING OF PROFFESIONALS											
4	DESIGN - INTERVENTION											
5	TEAMS SESSIONS											
6	OTAGO START IN HEALTH CENTRES											
7	OUTCOMES AUDIT											
8	SUSTAINABILITY PLANS											



Evidence Implementation Training Program (EITP)

Project Title (use PESS):Nursing education in bone marrow donation in young patients: a best practice implementation project

Participants Name: Itsaso Elizalde; Sara Furtado Organization: Servicio Navarro de Salud Facilitator Name: Itsaso Elizalde

Audit Question: PESS

What is best practice in improving.....?

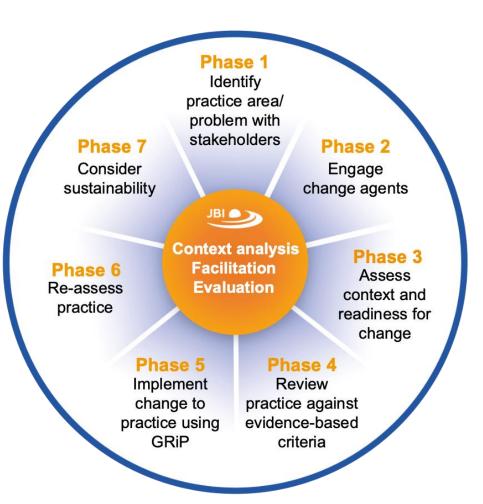
- Problem: Lack of information about bone marrow donation in young patients
- Evaluation: Survey about bone marrow donation knowledge
- Setting: Primary Care centers
- Stakeholders: Primary Care Management, Nurses Managers, Nurses, Blood Bank

Aims and objectives

Aims of the project

- Main goal: Provide Primary Care nurse proper and evidence based information about health education to future bone marrow donors
- Enhance knowledge about CHM in young patients between 18-40 years old
- Increase knowledge about CHM in Primary Care nurses
- Provide healthcare professionals with multimedia resources about bone marrow donation
- To increase the number of bone marrow donors subscribed to REDMO

Methods: 7 phases of Evidence Implementation



Pre-planning:

Phase 1: Primary Care Nurses of four Healthcare centers (to identify Primary Healthcare centers with population between 18-40 years old)

Phase 2: Nurse managers of PHC centers Primary Care Management, Leader nurses of Primary Healthcare centers, Management services and Information service of Servicio Navarro de Salud- Osasunbidea

Baseline Assessment and Implementation Planning

Phase 3: Identify the level of training about bone marrow donation of Primary care nurses. Seek for available resources at the online healthcare resources and documentation of the health care centers.

Phase 4: Choose the number of nurses to train in bone marrow donation, the health care centers to implement the information and the online healthcare resources to spread this information.

Phase 5: Provide training to Primary Care nurses about bone marrow donation. Enable necessary materials to inform patients and healthcare professionals through online healthcare resources (Auzolan).

Barriers: work burden of nurses/ lack of motivation about the bone marrow donation theme/ lack of interest by Primary Care Management.

Enablers: Nurses managers of Primary Healthcare / Training leaders of healthcare centers/ Primary Care management.

Impact Evaluation and Sustainability

Phase 6: Assess nurses knowledge after the training (Post training questionnaire). Assess knowledge about necessary resources to find available materials.

Phase 7: 'Hang on' the internet resource a training video to be available for all healthcare professionals: Continue training other healthcare centers and provide online healthcare resources to health care professionals (information sheet and video for patients)

Pre-planning

- Phase 1: Identify practice area/problem with stakeholders
 - What is the clinical problem? Lack of training of healthcare professionals about bone marrow donation
 - Why did you identify this practice area/problem? In the daily routine
 - Did you make this decision with key stakeholders?
- Phase 2: Engage change agents/project team
 - Who is going to be a part of your project team? Primary Care Management, nurses managers and register nurses.
 - Who else do you need to engage with? Referrer nurse in each healthcare center
 - How will you engage them and ensure their support? 'Hang on' the information in the online healthcare resources such as 'Auzolan'

Baseline Assessment and Implementation Planning

- Phase 3: Assessment of context and readiness for change
 - Diagnostic/situational analysis; for example, a SWOT analysis
 - PICO:
 - P: Primary care nurses in contact with young patients
 - I: To increase information about bone marrow donation, increasing training, access of information, and number of donors
 - C: To provide audiovisual and written to healthcare professionals at the ?citizen folder' and the healthcare center.
 - O: To increase knowledge about bone marrow donation in nurses to enlarge the number of donors.
- Phase 4: Review of practice against evidence-based criteria
 - Pilot of audit criteria
 - Baseline data collection, including what data, which sources, how identify compliance, and ethics in data collection (anonymity, confidentiality, appropriate data storage).

Phase 4: Review of practice against evidence-based criteria

Audit criterion	Sample	Method used to measure percentage compliance with best practice
 Level of training about bone marrow donation Audiovisual materials online available at the healthcare resources 	 Primary care nurses in urban areas To analyze what materials are online available at the intranet. 	 Does the nurses knowledge about bone marrow donation increase after the training? Are there specific and simple available resources at the intranet to offer to the future donors?

Results: Baseline audit

Baseline Assessment and Implementation Planning

- Phase 5: Implementation of change using GRiP
- How baseline audit findings will be evaluated: Provide training to Primary Healthcare nurses about bone marrow donation.
- Provide necessary materials to inform patients and professionals through intranet resources ('Auzolan')
- Barriers: Workload of nurses/lack of motivation about the theme/ lack of interest by Primary Health Management
- Enablers: Primary healthcare nurses managers/ training leaders of Primary Healthcare centres/ Primary Health Management
 - Process description for how barriers and enablers to evidence utilisation will be identified
 - Description of how strategies for implementation will be planned and agreed by the project group.

Impact Evaluation and Sustainability

- Phase 6: Re-assessment of practice
- Assess the knowledge of nurses after the training (post trining questionnaire)
- Rate if nurses know the about the available resources to find specific bone marrow donation materials of information materials
- Phase 7: Sustainability Interventions
- 'Hang on' the information in the online healthcare resources such as 'Auzolan' for the healthcare professionals. Continue training healthcare professionals and provide a information sheet and video for patients

Discussion

• Achievements and challenges

Conclusion

• Sustainability and scale-up

Acknowledgements



PROTOCOL

Evidence Implementation Training Program (EITP)

Improving Effective Nursing Documentation for Pre-Hospital Emergencies for Real or Potentially Critical Patients: Implementation of the Nursing Report.

AUTHORS

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Health Management of Urgencies, Emergencies, and Medical Transportation (GUETS) of the Castilla-La Mancha Health Service (SESCAM)- Spain

Facilitator: Nieves Sanroma Gómez, M. Angeles Gregorio Sanz

Audit Question: PESS

What is best practice in improving effective nursing documentacion?

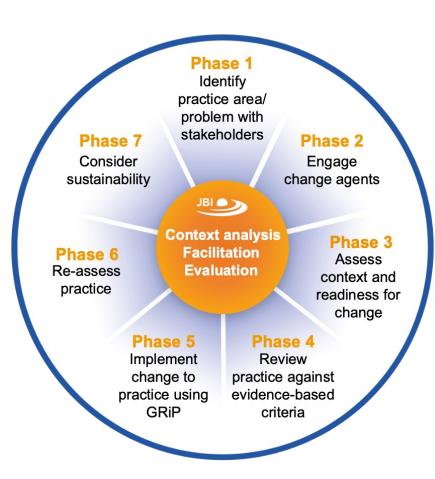
- Problem: The need for effective nursing documentation for critical patients in out-of-hospital emergencies.
- Evaluation: Improving practice through the implementation of a nursing report.
- Setting: Pre-Hospital Emergencies.
- Stakeholders: Real or potentially critical patients and nursing.

Aims and objectives

The aim of this project was to improve compliance with evidencebased practices in effective nursing documentation in the emergencies service of the GUETS at the SESCAM (Spain).

- 1. Align current nursing documentation with best evidence-based practices.
- 2. Improve nursing documentation practices in areas where non-compliance is identified.
- **3.** Evaluate the effectiveness of the interventions implemented to improve practice.
- 4. Establish an audit system to continuously maintain and enhance the quality of documentation.

Methods: 7 phases of Evidence Implementation



Pre-planning:

- Phase 1: Identifying practice area/problem with stakeholders
- Phase 2: Engagement with change agents/project team

Baseline Assessment and Implementation Planning

Phase 3: Assessment of context and readiness for change
Phase 4: Review of practice against evidence-based criteria

Phase 5: Implementation of change using GRiP

Impact Evaluation and Sustainability

Phase 6: Re-assessment of practice Phase 7: Sustainability Interventions



PROTOCOL

Evidence Implementation Training Program (EITP)

Pre-planning:

Phase 1: Identifying practice area/problem with stakeholders Phase 2: Engagement with change agents/project team

Phase 1: Identifying practice area/problem with stakeholders.

Clinical Issue and Stakeholder Involvement in the Project to Improve Practice:

The Manager, Director of Nursing, and Nursing Care Committee at GUETS have identified the need to review the Nursing Documentation System and initiate a project to implement a new system in electronic and paper formats. The Nursing Care Committee, comprised of clinical nurses, along with the GUETS management team, has played a crucial role in identifying the necessity for review and improvement. Internal reviews and feedback from healthcare professionals have underscored the urgency of this update.

The identification of the area that requires changes has been carried out through a comprehensive process of assessment, study, and discussion. This need for change is based on several key factors:

- 1. Obsolescence of the Nursing Documentation System: It has been recognized that the current nursing documentation system, in both paper and electronic formats, requires significant updates. This system was designed in the year 2000, and since then, there have been substantial changes in legislation, regulations, and documentation systems. These changes have affected the competencies and roles of nurses, as well as the formats for recording healthcare data.
- 2. Internal Audits: Internal audits conducted by GUETS have highlighted the need to improve nursing records. These audits have identified specific areas where the current documentation does not meet the required standards.
- 3. Identification of Opportunity: After facing various challenges, such as the COVID-19 pandemic, the opportunity to participate in the Evidence Implementation Training Program (EITP) has been recognized. This program also offers the opportunity to enhance the update process and align documentation with the best available evidence, becoming a pathway to improve the quality of updated and evidence-based documentation.

Phase 2: Engage change agents/project team.

Table 2-1 Engage change agents/project team.

Agents/project team.	Contribution.			
Manager of GUETS	 Provides necessary support and resources. Promotes the project at the institutional level. Ensures alignment with organizational objectives. 			
Director of Nursing	 Supervise and assist in coordinating all activities related to the project implementación. Resolve eventualites. Training of nursing staff Will be the direct liaison with Executive Director 			
Project Leader	 Direct the realization of the project, supervise all stages, communicate with other team members, report on the progress of the project 			
Project Co-Leader	Support the project leader in all his func>ons.			

Phase 2: Engage change agents/project team.

Table 2-1 Engage change agents/project team.

Agents/project team.	Contribution.
Clinical Nurses with expertise in methodology (Nursing Care Team)	 Experience in pre-hospital emergency. Experts in nursing documentation, nursing methodology, and standardized language.
Nurses with Training in Digital Health (it is integrated into the nursing care committee)	Integrate the practice perspective with the digital one.

Phase 2: Engage change agents/project team.

Table 2-2 Engaging Additional Stakeholders

Additional Stakeholders	Contribution.
Nursing Unit Leaders	 Involve nursing unit leaders from various units. Seek their input and support for the project's success.
Clinical Nurses as Project Facilitators	 Engage clinical nurses who express interest in project development. Leverage them as project facilitators within their respective units to promote project adoption.
Teams of Computer Engineers and IT Professionals	Develop and provide solutions for the functional layout of the documentation system.
External Consultants	We will consult with the administrators of the electronic clinical viewer where our Care Report will be displayed.
Medical Management Team of GUETS.	As part of the interdisciplinary team.
Engaging Patients	 Explore strategies to involve patients, including potential and critical patients, in the project. Consider ways to gather their input and incorporate patient perspectives.

Pre-planning: Phase 2: Engage change agents/project team.

Table 2-3 How to engage them and ensure their support?

Aspect	To engage them and ensure their support			
Communication and Commitment	 We will hold initial meetings to present the project, its objectives and its importance. We will maintain regular communication to keep all stakeholders informed. We will solicit feedback to encourage stakeholders to share their opinions and concerns, enhancing the value of the project and stakeholder engagement. 			
Training and Adapting to Changes	 We will provide training when significant changes are introduced as part of the project. We will celebrate the project's achievements as milestones are reached. 			
Establish Continuous Feedback Channels	 We will establish efficient feedback channels for team members and stakeholders, ensuring timely addressing of concerns and issues. We will promote a culture of collaboration. We will foster an environment where all people feel valued. We will encourage collaboration and the exchange of ideas among stakeholders. 			

Pre-planning: Phase 2: Engage change agents/project team.

Table 2-3 How to engage them and ensure their support? (Continued)

Aspect	To engage them and ensure their support			
Promote a Culture of Collaboration	 Foster an environment where all individuals feel valued, recognizing that their contributions are vital for the project's success. Encourage collaboration and the exchange of ideas among stakeholders. 			
Offer support and necessary resources.	 We will ensure the availability of essential support and resources to effectively fulfil various functions, including training and mentoring. We will clearly communicate how the project will benefit patients, team members, and the organization as a whole, reinforcing engagement. 			

Programing – Phase 1-2

TASK.	METHOD	START	END	RESPONSIBLE	AGENTS
 Project Presentation to the Management Team 	 Tools: Video meeting; : Groupware; mail Presentation and initial analysis of the topic 	010/4/23	30/4/23	Leader - Co-leader	 Executive Director Director of Nursing Leader - Co-leader
Beginning of Training and Coaching	 EITP Training (Phase 1) Protocol Writing: Methods: 7 phases of Evidence Implementation. 	01/05/23	30/05/24	Leader - Co-leader	 Leader - Co-leader Leader - Co-leader
 Evidence Review Protocol Development Final Protocol 	Study and ReviewDevelopment and Dellivery	01/05/23	23/06/23		
 Institutional Promotion of the Initiative 	 Management Council with Unit Coordinators. Scientific conferences, among others. 	20/06/23	Continuos	Executive Director Director of Nursing	 Executive Director Director of Nursing Unit Coordinators
 Team work Establishment 	 Meeting with the Director of Nursing and agents. 	01/06/23	21/06723	Leader - Co-leader Director of Nursing	 Leader - Co-leader Nursing Care Team Director of Nursing



PROTOCOL

Evidence Implementation Training Program (EITP)

Baseline Assessment and Implementation Planning:

Phase 3: Assessment of context and readiness for change Phase 4: Review of practice against evidence-based criteria Phase 5: Implementation of change using GRiP

Phase 3: Assessment of context and readiness for change diagnostic/situational analysis.

Improving documentation systems is one of GUETS' top priorities. The nature of this need has been explained in Phase Identification of the practice area for change. We have the participation and support of the management team; therefore, it is the opportune moment to work on it.

The initial audit aims to identify discrepancies between the current practice and best practices regarding effective nursing documentation. This analysis will allow us to identify areas of improvement and establish a benchmark to assess our progress.

Best Practice Recommendations upon which our audit criteria are based:

- 1. Nursing documentation should be presented in a logical and sequential manner, aligned with the stages of the nursing process. (Grade B) ⁹
- 2. Standard terminologies and classification systems should be developed and used in nursing documentation. (Grade B) ⁹
- 3. Nursing documentation should be patient-centered, objective and reflect the actual work of nurses including the psychological support and education provided to patients. (Grade B).⁹

The Care Committee decided to split the recommendation into two individual criteria to assess specific and precise aspects such as patient-centeredness and objectivity. This strategy will allow us to measure and improve each component separately.

- 1. Nursing documentation should be patient-centered, objective and reflect the actual work of nurses including the psychological support and education provided to patients. ⁹ (Grade B)
- Nurses should use a structured approach to conducting a nursing assessment of a patient admitted to an in-patient ward. (Grade B) ¹⁰

The choice of the sample involves two relevant types: documentation system and nurses' documentation.

Ethical Considerations and Confidentiality Commitment

- a) The audit will be conducted in accordance with the institution's audit system standards, for which permission was requested, and it was determined that there were no ethical conflicts.
- a) In order to ensure ethics in data collection, a confidentiality commitment will be established for the auditors involved in data collection and review. The purpose of this confidentiality commitment is to safeguard data privacy and security. Auditors, as an integral part of the process, pledge not to disclose confidential information and to use the data solely for audit purposes.

JBI EVIDENCE SUMMARY

Writing Effective Nursing Documentation

Best Practice Recommendations

Search date 13/05/2022 Author Matthew Stephenson BBiotech(Hons), PhD Publication date 23/05/2022

1. Nursing documentation should be presented in a **logical** and **sequential** manner, **aligned with the stages** of the nursing process. (Grade B)¹

Note ¹: The Care Committee considered it essential for the documentation to accurately reflect the dynamic nature of the nursing process, ensuring the inclusion and representation of all stages. This not only complies with the recommendation to present the documentation logically and sequentially, aligned with the stages of the nursing process, but also facilitates the inherent comparison and correlation.

The choice of the sample involves two relevant types:

- Documentation system.
- Nurses' documentation.

Evidence: Nursing documentation should be presented in a logical and sequential manner, aligned with the stages of the nursing process. (Grade B) ⁹

Audit criterion	Sample	Method used to measure % compliance with best practice
1.1.The nursing documentation system must be presented logically and sequentially, aligned with the stages of the nursing process.	System	 The Nursing Care Committee will evaluate compliance as a percentage based on the following evaluation requirements. Requirements to meet: Present the stages of the nursing process in a logical and sequential manner in the documentation system, reflecting its dynamic and evolving nature to allow temporal correlation and comparison between stages. Assessment Stage: Compliance 20% Diagnostic Stage: Compliance 20% Interventions Stage: Compliance 20% Outcomes Stage: Compliance 20%

Evidence: Nursing documentation should be presented in a logical and sequential manner, aligned with the stages of the nursing process. (Grade B) ⁹

Audit criterion	Sample	Method used to measure % compliance with best practice			
1.2 The documentation written by nursing staff should follow a logical and sequential order, aligned with the stages of the nursing process	Records	 The Nursing Care Committee will evaluate compliance as a percentage based on the following evaluation requirements. Requirements to meet: Nurses document the nursing process stages (Assessment, Nursing Diagnosis, Planning, Interventions, Outcomes) in a logical and sequential manner. Assessment Stage: Compliance 20% Diagnostic Stage: Compliance 20% Planning Stage or reference to it: Compliance 20% Interventions Stage: Compliance 20% Outcomes Stage: Compliance 20% 			

JBI EVIDENCE SUMMARY

Writing Effective Nursing Documentation

Best Practice Recommendations

Search date 13/05/2022 Author Matthew Stephenson BBiotech(Hons), PhD Publication date 23/05/2022

2. Standard terminologies and classification systems should be developed and used in nursing documentation. (Grade B)

The choice of the sample involves two relevant types:

- Documentation system.
- Nurses' documentation.

Evidence: Standard terminologies and classification systems should be developed and used in nursing documentation. (Grade B) ⁹

Audit criterion	Sample	Method used to measure % compliance with best practice
2.1 The nursing documentation system allows or facilitates the use of standard nursing terminologies	System	 The Nursing Care Committee will evaluate compliance as a percentage based on the following evaluation requirements. Requirements to meet: Its structure facilitates it and its instruction guide. Usage of recognized standardized nursing terminologies, such as NANDA, NIC, NOC, and/or ICPN: Diagnostic Terminology: 33.3% compliance. Intervention Terminology: 33.3% compliance. Outcome Terminology: 33.3% compliance.

Evidence: Standard terminologies and classification systems should be developed and used in nursing documentation. (Grade B) ⁹

Audit criterion	Sample	Method used to measure % compliance with best practice			
2.2 Nurses document using standard nursing terminologies.	100 Nursing Records	 The Nursing Care Committee will evaluate compliance as a percentage based on the following evaluation requirements. Requirements to meet: Nurses use standardized nursing terminologies in their documentation, such as NANDA, NIC, NOC, and/or ICPN: Diagnostic Terminology: 33.3% compliance. Intervention Terminology: 33.3% compliance. Outcome Terminology: 33.3% compliance. 			

JBI EVIDENCE SUMMARY

Writing Effective Nursing Documentation

Best Practice Recommendations

Search date 13/05/2022 Author Matthew Stephenson BBiotech(Hons), PhD Publication date 23/05/2022

3. Nursing documentation should be patient-centered, objective and reflect the actual work of nurses including the psychological support and education provided to patients. (Grade B)

Note ²: We decided to split the recommendation into two individual criteria to assess specific and precise aspects such as patientcenteredness and objectivity. This strategy allows us to measure and enhance each component separately and will help us identify areas that may require adjustments.

The choice of the sample involves two relevant types:

- Documentation system.
- Nurses' documentation.

Writing Effective Nursing Documentation

Best Practice Recommendations

3. Nursing documentation should be, **Objective** (Grade B)

Note ²: We decided to split the recommendation into two individual criteria to assess specific and precise aspects such as patientcenteredness and objectivity. This strategy allows us to measure and enhance each component separately and will help us identify areas that may require adjustments.

The choice of the sample involves two relevant types:

- Documentation system.
- Nurses' documentation.

Evidence: Nursing documentation should be patient-centered, **objective** and reflect the actual work of nurses including the psychological support and education provided to patients. ⁹ (Grade B)

Audit criterion	Sample	Method used to measure % compliance with best practice			
3.1 The Nursing Documentation System facilitates the objectivity of the nurse's diagnostic and outcomes	System	The Nursing Care Committee will assess compliance as a percentage based on the following evaluation requirements.			
judgment.		Requirements to meet:			
		Specific and Verifiable Indicators: The documentation system should facilitate the entry of specific and verifiable indicators to objectify the nurse's judgment. 50% compliance.			
		System Completion Guide:			
		 There are instructions that contain well-described indicators. 25% compliance. 			
		 The guide instructs nurses on how to write objectively. 25% compliance 			

Evidence: Nursing documentation should be patient-centered, **objective** and reflect the actual work of nurses including the psychological support and education provided to patients. ⁹ (Grade B)

Audit criterion	Sample	Method used to measure % compliance with best practice
3.2 Nurses document the objectivity of the nurse's diagnostic and outcomes judgment.	100 Nursing Records	The Nursing Care Committee will assess compliance as a percentage based on the following evaluation requirements.
		Requirements to meet:
		Nurses document nursing assessment, including specific and verifiable indicators to help objectify the nurse's judgment. 100% compliance.

Writing Effective Nursing Documentation

Best Practice Recommendations

3. Nursing documentation should **be patient-centered** and reflect the actual work of nurses (Grade B)

Note ²: We decided to split the recommendation into two individual criteria to assess specific and precise aspects such as patientcenteredness and objectivity. This strategy allows us to measure and enhance each component separately and will help us identify areas that may require adjustments.

The choice of the sample involves two relevant types:

- Documentation system.
- Nurses' documentation.

Evidence: Nursing documentation should **be patient-centered**, objective and reflect the actual work of nurses including the psychological support and education provided to patients. ⁹ (Grade B)

Audit criterion	Sample	Method used to measure % compliance with best practice			
3.3 The Nursing Documentation System Facilitates Patient-Centered Information Entry	0	The Nursing Care Committee will assess compliance as a percentage based on the following evaluation requirements.			
		Requirements to meet:			
		Patient-Centered Data Integration: The system should facilitate the entry of patient-centered data, including patient sensations, perceptions, and preferences: Compliance (50%).			
		Comprehensive Approach .: The system should facilitate the entry of patient assessment data and nursing interventions with a comprehensive approach addressing physiological, functional, psychosocial, and safety aspects of patient care. Compliance (50%)			

Evidence: Nursing documentation should **be patient-centered**, objective and reflect the actual work of nurses including the psychological support and education provided to patients. ⁹ (Grade B)

Audit criterion	Sample	Method used to measure % compliance with best practice			
3.4 Nurses document with a patient- centered approach.	100 Nursing Records	The Nursing Care Committee will assess compliance as a percentage based on the following evaluation requirements.			
		Requirements to meet:			
		Patient-Centered Data Integration: Nurses document taking into account patient-centered assessments, including sensations, perceptions, and patient preferences: Compliance (50%).			
		Comprehensive Approach : Nurses document, taking into account both patient assessment and interventions, a comprehensive approach that addresses physiological, functional, psychosocial, safety aspects in patient care. Compliance (50%).			

JBI EVIDENCE SUMMARY

Nursing Assessment (General): Patient Assessment in Acute/Sub-Acute In-patient Settings

Best Practice Recommendations

Search date 10/11/2022 Author Ashley Whitehorn BAppSc BHIthSc (Hons) PhD Publication date 25/11/2022

4. Nurses should use a structured approach to conducting a nursing assessment of a patient admitted to an in-patient ward (Grade B)

The choice of the sample involves two relevant types:

- Documentation system.
- Nurses' documentation.

Evidence: Nurses should use a structured approach to conducting a nursing assessment of a patient admitted to an in-patient ward. (Grade B) ¹⁰

Audit criterion	Sample	Method used to measure % compliance with best practice			
4.1 The documentation system facilitates the entry of nursing assessment data using a structured	System	The Nursing Care Committee will assess compliance as a percentage based on the following evaluation requirements.			
approach.		Requirements to meet:			
		 The documentation system includes an assessment section that allows for the use of a structured assessment tool following standardized and/or institution-approved criteria. Compliance (100%). 			

Evidence: Nursing Assessment (General): Patient Assessment in Acute/Sub-Acute In-patient Settings

Audit criterion	Sample	Method used to measure % compliance with best practice
4.2 Nurses document nursing assessment using a structured approach.	Records	The Nursing Care Committee will assess compliance as a percentage based on the following evaluation requirements. Requirements to meet : 1. The nurses document the assessment using a structured approach
		following standardized and/or institution-approved criteria. Compliance (100%).

	TASK.	METHOD	START	END	RESPONSIBLE	AGENTS
•	Assessment of context and readiness for change diagnostic/situational analysis	 Tools: Groupware, mail, Video meeting. Situational review Expert opinión Review of legislation and regulations. 	01/07/23	15/08/23	Leader - Coleader	 Director of Nursing Nursing Care Team Leader - Co-leader
•	Ethical Considerations and Confidentiality Commitment	 Request and permissions. 	01/07/23	15/09/23		
•	Establishing Audit Criteria	 Tools: PACES Based on Best Practice Recommendations from JBI Evidence Summaries. Selection of the sample Specifying the requirements 	01101120	10/00/20		
•	Review of practice against evidence-based criteria	 Review of practice against evidence based audit criterio, and Consensus 	16/09/23	30/09/23		

TASK.	METHOD	START	END	RESPONSIBLE	AGENTS
Results: Baseline audit	• Tools: PACES ; Video meeting.				
		01/09/23	31/10/2023		



PROTOCOL

Evidence Implementation Training Program (EITP)

Baseline Assessment and Implementation Planning

Phase 5: Implementation of change using GRiP

Phase 5: Implementation of change using GRiP

In this phase, we will focus on translating the findings from the initial audit into concrete actions. Results will be evaluated, obstacles and opportunities will be identified, and a detailed plan will be developed to proceed with the implementation of changes based on best practice recommendations for effective nursing documentation.

- Evaluation of Initial Audit Findings: A comprehensive evaluation of the results obtained in the initial audits will be carried out. This involves reviewing the data collected during the audit and analyzing compliance with the previously established audit criteria. Findings will be used as a basis to identify specific areas that require improvement and to understand the current level of adherence to best practices.
- 2. Identification of Barriers and Facilitators for Evidence Utilization: During this phase, a detailed analysis will be conducted to identify barriers that may hinder the adoption of best practices. Similarly, facilitators that can promote effective implementation will be identified. This process will help understand the challenges that may arise and the opportunities that can be leveraged on the path to improving nursing documentation.
- Planning and Agreement on Implementation Strategies: The project group will meet to plan and agree on implementation strategies. This will include defining specific actions, assigning responsibilities, scheduling activities, and identifying necessary resources. The goal is to ensure that the implementation of changes is carried out effectively and efficiently.

Programing – Phase 5

TASK.	METHOD	START	END	RESPONSIBLE	AGENTS
 Evaluation of Initial Audit Findings. 	 Tools: Groupware, mail, Video meeting. Review the data collected during the audit analyze Compliance with the previously established audit criterio 			Leader - Co-leader	Director of Nursing (will be the direct liaison with Executive Director) Nursing Care Team Leader - Co-leader
 Identification of Barriers and Facilitators for. Planning and Agreement on 	 Tools: GRIP Thorough analysis to identify: Barriers that may hinder the adoption of best practices. Facilitators that can promote effective implementation will be identified." 				As barriers and facilitators are identified and strategies are designed, the following professionals will gradually join the project: • Teams of Computer Engineers and IT Professionals • Nursing Unit Leaders
Implementation Strategies:	 The group will define strategies into specific actions and assign responsibilities, schedule activities, and identify necessary resources. 				 Clinical Nurses as Project Facilitators Medical Management Team of GUETS. Engaging Patients



PROTOCOL

Evidence Implementation Training Program (EITP)

Impact Evaluation and Sustainability

Phase 6: Re-assessment of practice Phase 7: Sustainability Interventions

Phase 6: Re-assessment of practice

In this phase, a reevaluation of the practice will be conducted to determine the impact of the implemented interventions and assess the sustainability of the changes made.

Phase 7: Sustainability Interventions

Strategies will be designed to maintain and strengthen the positive changes in practice identified in previous phases. Additionally, areas where previous interventions may not have had the desired impact will be addressed. This phase focuses on ensuring that changes are sustained in the long term and addressing any challenges that may arise, thus enabling continuous improvement in the quality of care.

Programing – Phase 6-7

TASK.	METHOD	START	END	RESPONSIBLE	AGENTS
	Tools: Groupware, Video meeting. Review and Discussion with the Group:	01/04/24	15/05/24	Leader - Co-leader	Director of Nursing
 Phase 6: Re-assessment of practice. Post-Implementation Audit 	 Evaluate the data collected during the audit Analyze the audit findings Reassess current practices Determine the impact of the implemented interventions 				Nursing Care Team Leader - Co-leader
Phase 7: Sustainability Interventions	 Design strategies to: Sustain and enhance positive practice changes from earlier phases Address areas where previous interventions may not have achieved the intended impact Focus on the long-term sustainability of changes and address challenges for continuous quality improvement in care. 				



PROTOCOL

Evidence Implementation Training Program (EITP)

Discusion

Conclusion

Discussion

Our analysis will encompass the achievements and challenges we encountered during our effective nursing documentation project. This analysis will provide a deeper insight into what worked well and what posed difficulties. We consider including the following:

- 1. Noteworthy Achievements: Enumeration of the primary successes and advancements realized throughout our project. These may encompass enhancements in nursing documentation, improvements in the quality of care, positive alterations in practice, and other remarkable accomplishments.
- 2. Identified Challenges: Examination of the impediments or complications that arose during our project's course. These may entail technical issues, resistance to change, resource limitations, or any other challenges we encountered.
- 3. Extracted Insights: Reflecting on the insights we derived from both achievements and challenges. What knowledge was gained from these aspects? How can these insights be applied in future projects of a similar nature?

Conclusion

In this section, our focus will be on the sustainability of the changes we have implemented and the potential for scaling them up on a broader scale. We can structure it as follows:

- 1. Sustainability of Changes: We describe how we plan the assurance of long-term sustainability for the positive changes we have achieved in nursing documentation. This may encompass our institutional policies, ongoing training, or supervision.
- Scaling Up: We explain how the improvements we have made can be extended to other areas, units, or institutions. How can these changes be applied within a broader context?
- 3. Long-Term Expected Outcomes: We emphasize the long-term outcomes we aim to achieve through sustainability and scaling up of the changes. This might relate to the continuous improvement of the quality of care.

Programing – Discussion Conclusion

	TASK.	METHOD	START	END	RESPONSIBLE	AGENTS
	Discussion	 Tools: Groupware, Video meeting. Review and Discussion with the Group: Noteworthy Achievements Identified Challenges Extracted Insights: 	15/05/24	31/05/24	Leader - Co-leader	Director of Nursing Nursing Care Team Leader - Co-leader
·	Conclusion	 Sustainability of Changes Scaling Up Long-Term Expected Outcomes 				

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