



PERCEPTION OF REGISTERED NURSES REGARDING BARRIERS TO EVIDENCE BASED PRACTICE AT SELECTED HOSPITAL IN KERALA: A DESCRIPTIVE STUDY

Shiny M Jose
(Sr. Therese Jose)

Professor, Holy Family College Of Nursing, Thodupuzha , Idukki , Kerala-685585

ABSTRACT

Evidence can close the gap between actions. The present study aimed to assess the perception of Registered Nurses [RN] regarding barriers to evidence based practice [EBP] and to prioritize the barriers to evidence based practice, to compare the perception of registered nurses with the level of education, to identify the association between perception of RN and selected demographic variables. The research design selected was non- experimental descriptive design, the areas selected for the study were multispecialty hospital, college of nursing and school of nursing in Idukki. The study was carried out on 30 samples were selected by stratified random sampling (lottery method). The Instrument 5-point Likert's scale, a tool used for the study was, section (A) demographic data, section (B) assessment of perception of RN on barriers to evidence based practice. The collected data, were analyzed on the basis of objectives using by descriptive and inferential statistics. The findings of the study showed that the attitude and morale having high mean score (16.8) and time and workload is having low means score (4.6).while prioritizing the barrier, RN perceived more priority for attitude and morale (84%), continuing education (84%),quality of education (84%)least for time and workload (46%). There is no significant difference between diploma and graduate or post graduate nurses perception regarding barriers to EBP ($t=0.9663$, $p>0.05$). There is no significant association between education, year experience and research experience.

KEYWORDS : Perception, Registered Nurse, Evidence Based Practice.

INTRODUCTION:

As we move into the next millennium, we expect nurses to care with their head, heart and hands. Increased emphasis on efficiency, cost - effectiveness and quality in health care system, that is rapidly changing and advancement of science and technology have lead to the need for reliable, up to date evidence for effective health care interventions. The generation of empirical knowledge is essential to improve clinical practice. The movement of evidence based health care has evolved overtime and is expanding. Evidence based practice (EBP) involves using research generated information to make an impact or change in the existing practice. The time lag between generating and using knowledge by society has been a concern for numerous years and can extensive. Binding the gap between evidence and action will create a revolutionary change in the quality of nursing care.

Evidence based nursing practice is using the best available evidence from research , along with patients preference and clinical experience while making nursing care decisions [1] many nursing scholars believe Evidence based nursing practice will fill the gap that is present between research theory and practice[2].

The usual practice is not good any more , the switch must be made based on evidence[3].

The best research evidence is focused on health promotion, illness prevention, assessment, diagnosis and management of acute and chronic illness with innovative techniques. We can assess the knowledge, skill and belief of nurse regarding the benefit of EBP based on their action[4].

MATERIALS AND METHODS

The research approach used was non experimental descriptive design. The study was conducted in multi-specialty hospital at Thodupuzha . The stratified random sampling (Lottery method) method was used to select 30 Registered Nurses from 3 different strata (Post graduate, graduate and diploma - 10 subjects from each category). The pilot study was conducted with 6 samples.

TOOLS AND TECHNIQUES

- Performa to elicit demographic variables.
- Assessment of perception of Registered Nurse on barriers

to evidence based practice, researchers prepared 24 items likert's scale questionnaire.

DATA COLLECTION PROCESS

After obtaining permission from the authorities to conduct research study, the purpose of the study was explained to the registered nurses individually and verbal consent was obtained. The subjects were identified according to the inclusion and exclusion criteria. The data was collected using structured form of likert's scale questionnaire.

ANALYSIS AND INTERPRETATION

The data was entered into the excel master sheet and analyzed based on objectives, result of the study were computed using the descriptive (% , Mean and SD) and inferential statistics (t- test and chi-square).

RESULTS

- 80% of Registered Nurses have the experience less than 10 years, 20% Registered Nurses have experience more than 10 years.
- 76% of RN have research experience and 23.1% have no research experience.

Assessment of perception of Registered Nurses regarding barriers to EBP

Table: 1 Assessment of perception of Registered Nurses regarding barriers to EBP

Sl. No.	Barriers	Total Score	Mean	No. of above Mean	No. of below Mean
1	Knowledge in nursing science & research	20	12.8	20	10
2	Attitude and morale	20	16.8	22	8
3	Practice environment	10	6.2	8	22
4	Time and Work load	10	4.6	10	20
5	Autonomy	10	7.3	14	16
6	Insufficient guidelines	10	6.8	19	11
7	Prevailing Opinion	10	5.4	17	13
8	Increasing Complexity of patient care	10	8.2	17	13
9	Continuing Education	10	8.4	17	13
10	Quality of Education	10	8.4	17	13

The table shows that the attitude and morale is having high mean score (16.8) and time and work load is having low mean score (4.6)

Prioritization of barriers based on Registered Nurses, Perception.

Table 2: Mean and Mean percentage of barriers of Evidence Based Practice

Sl. No.	Barriers	Total Score	Mean	Mean of Percentage
1	Knowledge in nursing science & research	20	12.8	64
2	Attitude and morale	20	16.8	84
3	Practice environment	10	6.2	62
4	Time and Work load	10	4.6	46
5	Autonomy	10	7.3	73
6	Insufficient guidelines	10	6.8	68
7	Prevailing Opinion	10	5.4	54
8	Increasing Complexity of patient care	10	8.2	82
9	Continuing Education	10	8.4	84
10	Quality of Education	10	8.4	84

The above table shows that the attitude and morale continuing education and quality of education is having high mean percentage (84%) and time and workload is having low mean percentage (46%)

COMPARISON OF PERCEPTION OF REGISTERED NURSES WITH THE LEVEL OF EDUCATION

Comparison of perception level of Registered Nurses regarding the barriers to EBP shows;

- There is no significant difference between perception of diploma and graduate Nurses regarding barriers to EBP. ($t=0.9663$, $p>0.05$, $t_{18}=1.74$)
- There is no significant difference between perception of graduate and post graduate nurses regarding barriers to EBP. ($t=0.320$, $p>0.05$, $t_{18}=1.74$)

Association between perception of Registered Nurses regarding barriers to EBP and demographic variables.

There is no significant association between educational level ($\chi^2=0.8$, $p>0.05$), year of experience ($\chi^2=0.83$, $p>0.05$), and research experience ($\chi^2=1.07$, $p>0.05$), with perception of Registered Nurses regarding barriers to EBP.

DISCUSSION

The present study was the non-experimental descriptive design and stratified random sampling methods were used to draw the samples. The study findings revealed that the barriers like altitude and morale, knowledge in nursing science and research, time and work load, autonomy, insufficient guide lines, prevailing opinion, increasing complexity of patient care, continuing education and quality of education scored above mean where as the practice environmental scored below mean. According to the priority of barriers the mean percentage are altitude and morale, continuing education, quality of education-84%, increasing complexity of patient care 82%, autonomy -73% in sufficient guidelines -68%, knowledge in nursing science and research 64%, practice environment-62%, prevailing opinion 54%, time and work load 46%. When the association between different demographic variables like, level of education, year of experience and research experience were assessed, it was found that there is no significant association between these variables and perception of barriers. The study result was supported with a previous research conducted in 2009, on beliefs altitude and perceived barriers of registered nurses of evidence based practice, showed that there is a significant

correlation between barriers and practice, beliefs and altitude related to EBP. In this study, it is found that EBP is independent of level of education, year of experience and research experience

IMPLICATIONS NURSING PRACTICE

The generation and implementation of empirical knowledge is essentials for improving quality clinical practice, helping student nurses to increase their skills and enhancing professional autonomy.

NURSING EDUCATION

With current changes in the health care delivery system, the society is demanding more from health care professionals then ever before. Hence, to keep in pace with the changes there should be necessary modification in curriculum.

NURSING ADMINISTRATION

Nurse administrators should take special interest in enhancing research studies, developing policies, making provision for sufficient budget, providing facilities to implement this knowledge in clinical practice and should evaluate the effectiveness of this knowledge in improving quality patient care.

NURSING RESEARCH

This should be more research in nursing and high quality research can be undertaken which will generate empirical knowledge to improve clinical practice.

CONCLUSION

People are often resistant to change. Change requires effort, retaining and restructuring of habits. But significant challenges exist in the implementation of evidence based practice, not only in the clinical nursing, but broadly in health care delivery system also. The nurse's attitude towards research and their motivation to engage in EBP have repeatedly been identified as important barriers. Health care system need to implement interventions that increase nurses EBP knowledge and skills and strengthen their beliefs about the benefits of evidence based care. Strategies must be taken to close the gap between the evidence and action in order to accelerate more rapid shift towards evidence based nursing practice.

ACKNOWLEDGEMENT

We offer our gratitude towards almighty God and thanks to the management of our educational institution, our principal Rev. Sr. Mercy Angel M Sc(N), special thanks to Holy Family Hospital authority, for have given the permission to conduct the study with registered nurses who are belong to different levels of education.

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