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Perceived Barriers in Implementation of Evidenced Based Practice in Health Care Facilities Among Health Professionals

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ABSTRACT

Evidence-based practice is considered as gold standard nowadays. There continues to be a sizable gap between the research findings and their application to practice due to many barriers. This study aims to assess the perceived barriers in implementation of EBP among health professionals. A descriptive survey was done among 153 health professionals of Koyili Hospital, Kannur. Data were collected using demographic proforma and rating scale with reliability 0.76.

Out of 153 samples 75.8%, 16.3% and 7.8% were staff nurses, doctors and paramedical professionals respectively. About 82(56.2%) perceived barriers in implementing EBP as medium, 65 (42.5%) as high. Lack of time and resources (76.5%), lack of knowledge regarding EBP (75.8%) and lack of autonomy in bringing a change (68%) were the major barriers. To put in nutshell, a great deal of work has to be done to reduce barriers and implement EBP, thereby bridging the gap between EBP and its utilization.

KEYWORDS	EBP, practice, research, utilization of findings

Introduction:
More than 20 years after its introduction, the EBP paradigm has been embraced by healthcare professionals as an important means to improve quality of patient care, but its implementation is still deficient though there is demand for using EBP in health care settings.

" It is a lifelong problem solving approach to clinical practice that incorporates external evidence(research), internal evidence (performance improvement or outcomes management data) and patient preferences and values." [1]

A systematic review was done with 31 good quality surveys to formulate a policy framework for the implementation of EBP. The researchers identified the barriers, knowledge and attitude regarding EBP. The barriers to implementation were insufficient knowledge, insufficient skills and they desired more training. The attitude of health professionals towards EBP was good, but due to the barriers they were not able to put it into practice. [2]

Therefore it is high time we look upon the factors affecting the implementation of EBP so that the barriers could be identified and resolved for a better health care delivery for coming tomorrows.

Objectives:
The purpose of the study is to determine the personal, organizational factors that hindered the implementation of EBP in a health care setting.

The objectives of the study were to:
assess the perceived barriers in implementation of evidenced based practice among health professionals using a structured rating scale.

assess the perceived barriers in implementation of evidenced based practice among staff nurse, doctors and paramedical professionals.
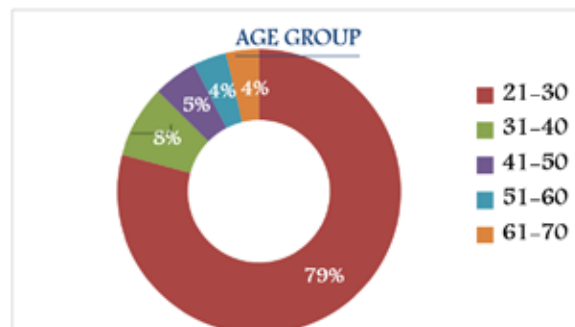
find association between perceived barrier score and selected demographic variables like age, gender, education, occupation and years of experience

Methods:
The research approach used in the study was survey approach. A descriptive survey design was used. Of the 230 health professional in the selected hospital invited to participate, 153 health professionals completed the survey. So these 153 respondents were the focus of the study. Non probability purposive sampling technique was used for this study. Setting was Koyili Hospital, Kannur. Data were collected using demographic proforma and a rating scale with 24 items categorized under three sections like personal factors, organizational issues and miscellaneous factors was used. Content validity was established by giving the tool to five experts and modifications were made based on the experts' suggestions. Pretesting was done among five health professionals at Koyili hospital, Kannur. Reliability of the scale was done and (0.76) was found to be reliable by using Cronbach's alpha.

Results:
Descriptive and inferential statistics were used to analyze the data.

Fig 1:Distribution of sample based on demographic char-

acteristics -age

The study results revealed that majority 125 (81.7%) of the sample were in the age group 21-30years, majority 107 (69.9%) of the sample were females.

Of the sample, 116 (75.8%), 25 (16.3%) and 12 (7.8%) were staff nurses, doctors and paramedical professionals respectively. Most 136 (88.9%) of the sample were with less than 10 years experience in their field.

Majority 82(56.2%) perceived barriers in implementing EBP as medium, 65 (42.5%) perceived high barriers and 2 (1.3%) of participants perceived low barriers in implementing EBP.

Item wise analysis of perceived barriers shows that lack of time and resources to search for and appraise evidence (76.5%), lack of knowledge regarding EBP (75.8%) , lack of autonomy in bringing a change(68%), limited access to literature in working unit (67.9%) and lack of incentives and motivation from the organization (64.7%), were the major barriers in implementing EBP.

Table 1 about here:
Table 1: Item wise analysis of perceived barriers among health professionals

ITEMS	PERCENTAGE (%)
Lack of time and resources to search for and appraise evidence	76.5
Lack of knowledge regarding EBP	75.8
Lack of autonomy in bringing change	68
Limited access to literature in working unit	67.9
Lack of incentives and motivation from the organization	64.7

The study also revealed that among the staff nurses, the strongly perceived barriers were, lack of knowledge regarding EBP (72%), lack of time and resources to search for and appraise evidence (77.5%), lack of autonomy in bringing a change (74.2%), limited access to literature in the working unit (71.5%) and organizational constraints such as lack of incentives and motivation (69.8%).

Table 2 about here:
Table 2: Item wise analysis of perceived barriers among staff nurses

ITEMS	PERCENTAGE (%)
Lack of time and resources to search for and appraise evidence	77.5
Lack of autonomy in bringing change	74.2
Lack of knowledge regarding EBP	72
Limited access to literature in working unit	71.5
Lack of incentives and motivation from the organization	69.8

Among the doctors, 80% of the people perceived that lack of time and resources to search for and appraise evidence was the strongly perceived barrier, whereas lack of knowledge regarding EBP (72%) was the second. Peer pressure to continue with practices that are already in practice and inadequate content and behavioral skills regarding EBP in educational program accounted for 60%.

Among the paramedical professionals, negative view about EBP (83.3%), decreased resource for patient care (76%), lack of time and resources (75%), limited access to literature (75%) and demands from patients from a certain type of treatment (75%) accounted for the top five strongly perceived barriers.

There was a significant association between perceived barriers scores and age (p=0.006), education (p=0.005) and occupation (p=0.024) whereas gender (p=0.242), years of experience (p=0.173) has no association with perceived barrier score.

Conclusion:
In a cross sectional descriptive survey to determine the staff nurses use of research to facilitate EBP with 794 participants revealed that only 38% of them had sometimes used research before, 46% stated they had used research often and 72% had fully implemented research findings. The investigators used a survey instrument with 53 items. The main barriers identified in the implementation of EBP were lack of time, lack of resources and lack of knowledge.[3]

In the year 2006-07 a descriptive cross sectional survey was carried out in the U.K with 458 nurses conveniently selected from a hospital there. The aim of the study was to assess the nurses knowledge, attitude, practices related to EBP and the relation of perceived barriers to and the facilitators of EBP. Organizational barriers like lack of time, lack of autonomy, peer pressure, lack of resources compiled at the same place were the top ranking barriers. This study also identified the facilitators as learning opportunities, culture building and simplicity of resources.[4]

Thus, the study concluded that health professionals perceived the barriers in implementing EBP was medium. The strongly cited barriers in implementation of EBP were lack of time, lack of knowledge, lack of autonomy, lack of incentives and limited access to literature. Factors like, lack of respect from colleagues and dissatisfaction in the profession were perceived to be the least likely affecting in implementation of EBP. To put in a nutshell, a great deal of work has to be done to reduce these barriers and assist health professionals in using scientific inquiry and implementing EBP, thereby bridging the gap between EBP and its utilization.

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