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Virtual Journal Club:

An innovative way of bringing evidence-based practice and research to nurses in their workplace.

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Background

Journal clubs serve many purposes including educating nurses and improving clinical practice. Nurses can use them to review research data and improve the care of patients (Seymour, Kinn, & Sutherland, 2003). Limited staffing, in the traditional journal club, makes it challenging for nurses on duty to leave patient care responsibilities to attend journal club meetings (Dobrzanska & Cromack, 2005). Therefore, innovative approaches, such as a Virtual Journal Club (VJC), are a necessity. By implementing a VJC, nursing staff can facilitate collective knowledge to be shared; engage in the discussion during patient care downtime; and establish multi-disciplinary collaboration.

Clinical Practice Question

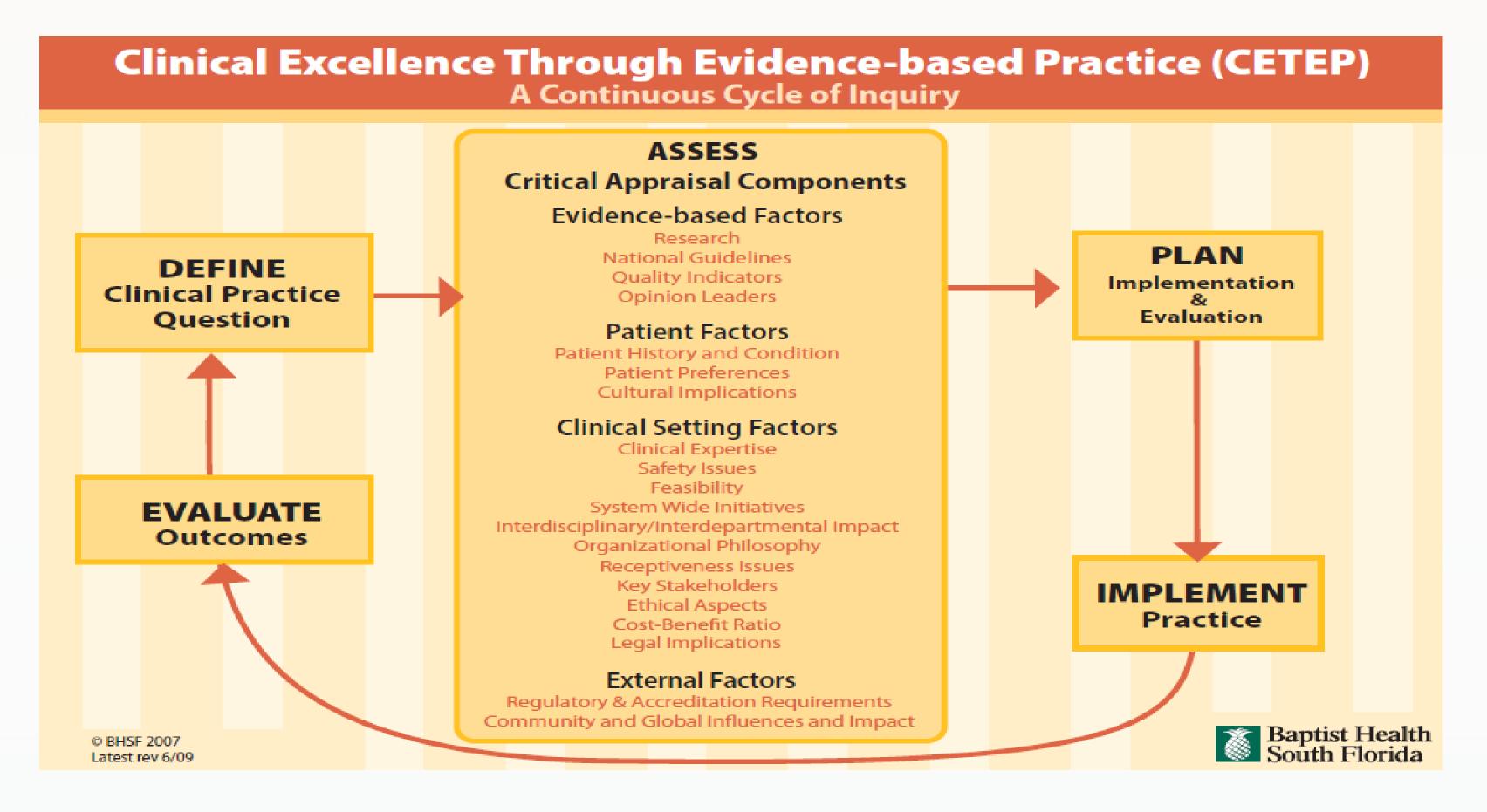
This evidence-based practice (EBP) project was created to determine whether an innovative VJC in the intensive care unit (ICU) improves and increases nursing staff participation and satisfaction with EBP and research in comparison to the traditional format?

Methods of Implementation

This project was developed using the Clinical Excellence Through Evidence-based Practice (CETEP) model—Define, Assess, Plan, Implement, and Evaluate. The implementation of the VJC included: monthly article placement by a nurse via MS SharePoint; and review and reply by the 30 ICU nurses in an electronic blog format about the article's significance to their practice. Review and responses also include the research specialist and physicians.

Month & Submitter	Topic	Responders (% of ICU staff)	Whether the topic became an Evidence Based Project (EBP) in the Intensive Care Unit (ICU).
June 2011 Devica Samsundar, Medical Library Services	Shared Governance supports Evidence-Based Practice.	8 (27%)	No
July 2011 Rommel De La Rosa, ICU RN, UBPC, CCRN, Advanced Nurse	Clorhexidine Gluconate Bathing: Does it decrease hospital- acquired infections?	21 (70%)	Pre-research work: Swabbing of bath basins taking place to determine if a significant #reveal growth of harmful organisms.
August 2011 Olivia Cocabo, ICU RN, CCRN, Advance Nurse	VValk the walk to reduce catheter- related bloodstream infections.	12 (40%)	Trialed the use of "Scrub Site" product in conjunction with CLABSI bundle and CLABSI remains at zero since opening. Poster presentation presented in BHSF 7 th Annual Research Conference 2012.
September 2011 Jonathan Espinosa, ICU RN, UBPC, CCRN	Few Decreases in Tuberculosis Rates in the Largest U.S. Cities.	9 (30%)	No
October 2011 Daybe Oliver, ICU RN, UBPC	Predictors of pressure ulcers in adult critical care patients.	13 (43%)	Became part of our 2011 Quarter 2 HAPU Action Plan to eliminate any further HAPU in the ICU, since then zero HAPU in the ICU.
November & December 2011 Delia Hipos, ICU RN, UBPC, CCRN, Advance Nurse	Early Mobilization and Walking Program for Patients in Intensive Care Units: Creating a Standard of Care.	9 (30%)	EBP developed through a multidisciplinary team, data presented in Nurses Week 2012 as a poster presentation.
January 2012 Ofelia Delgado, ICU RN, UBPC	Who should Provide Continuous Renal Replacement Therapies.	12 (40%)	No
February 2012 Ruth Mangana, ICU RN, UBPC, CCRN, Advance Nurse	Family Visitation in the Adult ICU.	21 (70%)	Research study underdevelopment utilizing Patient/Family survey responses to develop specific ICU visitation guidelines.
March & April 2012 Vivian Chang, ICU RN, UBPC	Duodenal Verses Gastric Feeding in Medical Intensive Care Unit Patients.	15 (50%)	EBP prior to article posting and after, the insertion of NDT _s as opposed to NGT (Salem sump) for TF has increased. RNs have become educated based on article that the NDT is safer for patients because of incidence of less VAPS, better nutritional uptake and reach nutritional goals quicker. We have also implemented the use of the Cortrak device that allows easier insertion without exposing the patient to multiple KUBs.
June 2012 Fatima Garcia, ICU RN, UPBC, Expert Nurse	The effect of earplugs during the night on the onset of delirium and sleep perception: a randomized controlled trial in intensive care patients.	21 (70%)	Research grant and study under development about the use of earplugs for ICU patients upon admission in two BHSF entities.
July 2012 Rommel De La Rosa, ICU RN, UBPC, CCRN, Advanced Nurse	Effectiveness of the ultrasound bladder scanner in reducing urinary tract infections.	8(27%)	EBP policy, developed by the article posting ICU RN, for bladder scanner use in the ICU.





Outcomes

Eleven articles have been posted since the inception of the VJC, with over 140 postings from June 2011 to July 2012. On average there were over 13 responses per article. The feedback received from the nurses included:

- a sense of engagement,
- reduced fears of reviewing literature,
- a sparked interest in research and EBP,
- an increase in professional advancement via the PNAP

 – Professional Nurse Advancement Program model.

Discussion

Since the inception of the VJC in the ICU the articles presented have led to: (1) bacterial swabbing of basins for the development of a future research study; (2) increased knowledge of additional risk factors for identifying patients at higher risk of skin breakdown; (3) partnering evidence of early mobilization of ventilated patients to a new unit initiative; (4) policy development by bedside ICU nurse on the use of a bladder scanner to reduce unnecessary foley insertions; and (5) an IRB approved research proposal for the application of earplugs to prevent delirium and promote better sleep quality. Out of the 9 nurses that posted their articles, 5 of them went on to attain their "Advancement" via the PNAP— 4 of them became "Advance" nurses and 1 an "Expert" nurse in the ICU. Furthermore, the innovative development of the VJC in the ICU has served as a model for the hospital system which is now implementing VJCs in other units and entities in the system.

Research Fellowship Program
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