

Changing Nursing Practice Through a Nursing Journal Club

As hospitals seek to promote evidence-based nursing practice and improve the quality of bedside nursing care, formation of a nursing journal club can be one strategy to accomplish both goals.

Jeanne St. Pierre, MN, APRN, BC, is a Gerontological Clinical Nurse Specialist, Ball Memorial Hospital, Muncie, IN.

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The purpose of professional journal clubs in health care has been traditionally twofold: to help students and providers stay abreast of clinical research, and to improve clinicians' ability to critically evaluate published research (Heiligman & Wolitzer, 1987). Presenting research studies at journal clubs also helps students learn how to make presentations.

Professional journal clubs are most prevalent in academic medical centers with onsite medical schools. They have existed as a teaching tool in medical education for well over a century, dating back to Sir William Osler (1849-1919), a noted medical educator who formed a journal club "for the purchase and distribution of periodicals to which he could ill afford to subscribe" (Linzer, 1987, p. 475). Most references to journal clubs are in the medical literature, emphasizing their value to residency training and providing guidance regarding formats for successful presentations (Ebbert, Montori, & Schultz, 2001). A search of the nursing literature for the past 10 years in the CINAHL and MEDLINE databases revealed 18 articles about nursing journal clubs. These articles have variously described how to start a journal club (Brooks-Brunn, 1994; Denehy, 2004; Kleinpell, 2002; Nolf, 1995); the value of journal clubs in the education of nursing students (Burrows & Baillie, 1997; Fraser, 1994; Goodfellow, 2004; Owen, Wheway, & Anderson, 2001) and nursing faculty (Sheehan, 1994); using a journal club to familiarize nurses with research (Kirchhoff & Beck, 1994; Shearer, 1995), for staff development (Stelmach, 1994), and to promote evidence-based practice (Belanger, 2004; Dyckoff, Manela, & Valente, 2004; Kartes & Kamel, 2003; Pollard & Taylor, 1997) and multidisciplinary collaboration (Mayor, 2004). Only one article was found that documented a journal club's impact on organization-wide changes in nursing practice (Tibbles & Sanford, 1994).

To address this last topic, the Nursing Journal Club was launched in a 350-bed community teaching hospital. It was conceived not only as a way to promote evidence-based practice, but also to improve the quality of care. Thus, the focus of the discussions was less on the research methods and more on practice implications.

Feed Them (Mind and Body) and They Will Come

Because journal clubs can be perceived as dry and unstimulating, often becoming "bogged down in minutiae" (Milbrandt, 2004, p. 401), the first challenge was to develop a format that would entice busy nurses to

Figure 1.
Guidelines for Nursing Journal Club Presentations

Purpose
The purpose of the Nursing Journal Club is to foster excellence in nursing practice by promoting evidence-based practice.
Goals
<ol style="list-style-type: none"> 1. Improve nursing knowledge of current research findings. 2. Foster the application of clinical research and best practice models to nursing practice. 3. Provide a means by which to address clinical issues.
Format for Presentations
<ol style="list-style-type: none"> 1. Introduce topic and presenter (by Nursing Journal Club planning committee member). 2. Polling (optional) <ul style="list-style-type: none"> • Test baseline knowledge and/or seek opinions, attitudes of audience. 3. Give brief synopsis of following parameters: <ul style="list-style-type: none"> • Title of article • Study's purpose • Setting • Population 4. Discuss major findings of study. 5. Discuss other relevant research that supports/does not support this study. 6. Discuss implications of article in terms of impact on nursing practice <ul style="list-style-type: none"> • Documentation • Delegation • Patient education • Patient satisfaction • Patient/Family-centered care • Interdisciplinary collaboration <p>What is the relevance of this article to our practice? Should we change our practice based on this information? If yes, discuss next steps.</p> <ol style="list-style-type: none"> 7. Group discussion/Questions 8. Evaluations <p>Suggestions for a dynamic presentation:</p> <ul style="list-style-type: none"> • Audience participation • Role-playing • Invite other experts/disciplines to do a portion of the presentation • Videotape • Case studies

attend. Notifications are sent via email to all nurses (all of whom have access at this hospital) and include a challenging clinical situation and question. For example, with delirium as the topic, the following clinical scenario and questions were posed: "Your elderly patient has just pulled out her IV and tells you she is going home. Now what do you do? How can you best manage this patient? What might be causing her confusion? Could this episode have been prevented?" A journal article (PDF format) is attached to

the email notification. Flyers also are distributed.

When the budget permits, cookies and drinks are offered and advertised. Meeting at the noon hour is believed to provide the best opportunity for most nurses to attend. To maximize participation and stimulate interest, nurses are welcome to attend even if they have not had an opportunity to read the journal article.

Process and Format

Journal articles are chosen from the nursing and medical lit-

erature for their relevance to inpatient nursing practice, targeting clinical issues that have meaning for a broad medical-surgical audience. The journal club meeting is 1 hour in length. Continuing education credit is offered.

Most presentations begin with interactive polling. Attendees are queried using DIGI-VOTE® (DIGIVOTE®, Inc.), an electronic system that projects audience responses to questions onto a viewing screen, much like that seen in game shows. In addition to engaging the audience, this method tests baseline knowledge, elicits opinions, and gives immediate feedback. This introductory question and answer session can also be conducted without electronic support.

The research design is briefly examined, concentrating on study purpose, setting, and population. Review articles are sought when possible, obviating the need to discuss research methods in depth. To bring issues to life, teaching methods such as role-playing, videotapes, and case presentations are utilized and enhance discussion of the article.

Articles can be presented by any discipline. To reinforce the hospital's professional nursing practice model and provide usable information for bedside nurses, nurse presenters are asked to discuss implications of the article in terms of the guidelines seen in Figure 1. To provide guidance regarding the implications of the research, presenters are chosen for their knowledge of the journal article's topic. Presenters meet with the club's planning committee to assure incorporation of the guidelines and brainstorm about innovative ways to share the material.

Because the goal of the Nursing Journal Club is to offer more than information exchange, the bulk of meeting time is spent discussing the two questions in the guidelines: What is the relevance of this article to our practice? Should we change practice and policies based on this evidence?

Content and Outcomes

Over the past 2 years, Nursing Journal Club presentations have been conducted on the following topics:

- Alternative medicine
- Women's health
- Smoking cessation
- Alcohol withdrawal
- Education of coronary artery bypass patients
- Evidence-based practice
- Delirium
- Family-witnessed cardiopulmonary resuscitation
- Nursing informatics

Meeting attendance averages 20 people, a combination of staff nurses, nurse managers, nurse educators, and other disciplines. Level of audience participation is high, with some meetings generating a good amount of lively discussion. Participants are asked to evaluate the presenter, content, new learning, and relevance to practice. Nurses also are invited to suggest articles and topics for future journal clubs. Attendees' evaluations have rated the Nursing Journal Club meetings as good-to-excellent for all sessions.

The chief nursing officer's presence at Nursing Journal Club meetings provides added leadership for practice change through her encouragement and support of action plans. Three examples of changes that were implemented based on discussions generated by the Nursing Journal Club include: (a) changes in how nurses counsel patients on smoking cessation, (b) the development of a nursing research study on family-witnessed cardiopulmonary resuscitation that involves bedside nurses, and (c) implementation of an education initiative on how patients with alcohol withdrawal are managed. An additional unexpected outcome was the establishment of unit-based nursing journal clubs in the oncology and cardiology divisions.

Challenges

Not surprisingly, a big challenge has been the ability to support the attendance of busy staff nurses at journal club meetings. Finding knowledgeable speakers willing to present, and designing

a format that incorporates the presentation guidelines in a creative and stimulating manner are additional challenges. The final challenge is completing the hard work of putting the evidence into practice.

Conclusion

A hospital-based nursing journal club can be a fun and interesting way to improve the quality of nursing care by providing the impetus to change practice. Traditionally, the journal club has been used by health care disciplines to foster knowledge currency, teach critical thinking, and learn about research methods. By emphasizing practice implications and following up with an action plan, a nursing journal club can go beyond information-sharing to having an impact on patient care. ■

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nurse may seek the halls of a medical-surgical unit to provide care to adults in a less-intensive setting. The excitement of teaching students about the wonders of medical-surgical nursing may challenge an adult-health nurse to move into an academic position. Regardless of the trajectory of the remodeling, the outcome is better care to those we serve. And we have expanded the value of our nursing practice.

I like the notion of *owning* my professional practice. It is mine. I have worked for it. I am responsible for it. Although my practice may sometimes be compromised by circumstances beyond my control, I can provide the best possible practice because I own my practice. It is mine to give and no one can take it from me. ■

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