## Phelps Hospital Northwell Health- Evidence Based Practice Template State problem/issue:

**Identify scope of problem/issue:** (Identify if it is it local, unit / department based, or universal, common across Phelps or Northwell; does it involve only nursing or does it involve other disciplines?):

#### **Identify the PICO Components?**

P-(Patient, Population or Problem)

**I-** (Intervention)

C-(Comparison with other treatments)

**O**-(Outcome(s))

#### Does the problem/issue require....:

□ Change in Practice? (Consult the Shared Governance Professional Practice and Development Council, the New Knowledge and Innovation Council, and / or the nurse researcher.) Describe:

Education? (Consult the Education and Clinical Practice Team.) Describe:

□ Referral to Quality Team? (Consult the Shared Governance Quality and Safety Council.) Describe:

- Addition/Change to Procedure Manual? (Consult the Shared Governance Professional Practice and Development Council and / or Nursing Standards Council.) Describe:
- Addition/Change to Documentation? (Consult the Shared Governance Professional Practice and Development Council, Nursing Standards Council, Clinical Informatics Council, and / or HIM.)
   Describe:

Collaboration/Communication with Interdisciplinary Teams (Consult your shared governance council, manager, or educator.)
 Describe:

# **Identify the evidence/research that supports problem identification?** \* (SCROLL TO PAGE 4 FOR THE EVIDENCE APPRAISAL FORM)

#### **Recommendation:**

Action Plan: (Clearly identify what needs to be done, the anticipated outcome, goals and metrics that will be used, who needs to be involved, who will be responsible for critical steps / actions, the communication plan, steps and feedback process, the anticipated need for education and methodology for providing, and timeline for everything.)

**Identify Process for Sustainment of Change:** (Identify who is responsible for monitoring, the process for monitoring / auditing, and the metrics; to whom and how to communicate the information; the frequency of monitoring; the timeline for evaluation.)

Project owner(s):				
Name:				
Phone/email				
Unit/Area				
Cilit/Illou				
Project Mentor(s):				
Name:				
Phone/email				
Unit/Area				

#### **Evidence Based Practice: Level and Quality of Evidence Appraisal Inclusive Review of all Available Evidence on Topic Without Limitation on Year**

Article Title:

Author(s):

Journal:

Year:

Source:	
Non-Research	Research
Systematic Review	Meta-Analysis
Clinical Practice Guidelines	<b>Experimental</b>
<b>Organizational (QI, Finance, etc)</b>	Quasi-Experimental
Expert Opinion, Case Study, Lit Review	Non-Experimental
	Qualitative

Non-Research		
Systematic Review	Yes	No
Is the question clearly stated?		
Did the article undergo peer review?		
Are the search strategies specified?		
Are the search strategies appropriate to include all pertinent studies?		
Are inclusion and exclusion criteria identified?		
Are details of design, method and analysis presented?		
Are limitations of the study disclosed?		
Are the studies appropriately combined (were the variables similar?)?		
Clinical Practice Guidelines	Yes	No
Are appropriate stakeholders involved in guideline development?		
Are applicable patient populations clearly defined?		
Are potential biases identified?		
Are guidelines valid?		
Reproducible search		
<ul> <li>Expert consensus</li> </ul>		
<ul> <li>Independent review</li> </ul>		
Current information		
• LOE for each recommendation		
Are recommendations clear?		
Organizational Experience	Yes	No
Is the project goal clearly stated?		
Is the setting similar to the setting of interest?		

Is the method adequately described?				
Are the measures identified?				
Are the results reported?				
Is the interpretation clear and appropriate?				
Individual Expert Opinion, Case Study, Literature Review	Yes	No		
Is evidence based on opinion of one individual?				
Is the individual an expert on the topic?				
Is the author's opinion based on scientific evidence?				
Is the author's opinion clearly stated?				
Are potential biases acknowledged?				

#### Research

Strength of Study Design	Yes	No
Is the sample size adequate and appropriate?		
Are the study participants randomized?		
Is there an intervention group?		
Is there a control group?		
If there was more than one group, were groups equally treated, except for		
the intervention?		
Was there adequate description of the data collection methods?		
Study Results	Yes	No
Are the results clearly presented?		
Is there an interpretation/analysis?		
Conclusions	Yes	No
Are conclusions based on clearly presented results?		
Are study limitations identified and discussed?		

#### **Pertinent Evidence Findings and Recommendations:**

**Evidence Rating \*\* See page 6 for rating scales** 

Strength of Evidence: Level 1 Quality of Evidence: High(A)		Level IV	Level V

Appraisal	completed by:
Name	

Date				

Adapted from Newhouse, R. P. et al (2007) *Johns Hopkins Nursing Evidence-Based Practice Model and Guidelines*. Sigma Theta Tau International.

### EBP Evidence Rating Scales

#### **Strength of Evidence**

Level I	Experimental study/randomized controlled trial or meta analysis of RCT
Level II	Quasi-experimental study
Level III	Non-experimental study, qualitative study, or meta-synthesis
Level IV	Opinion of nationally recognized experts based on research evidence or expert consensus panel. (systematic review, clinical practice guidelines)
Level V	Opinion of individual expert based on non-research evidence (Includes case studies; literature review; organizational experience e.g. quality improvement and financial data; clinical expertise, or personal experience).

#### **Quality of Evidence**

A HIGH	Research	consistent results with sufficient sample size, adequate control, and
		definitive conclusions; consistent recommendations based on extensive
		literature review that includes thoughtful reference to scientific evidence
	Summative	well-defined, reproducible search strategies; consistent results with sufficient
	Reviews	numbers of well defined studies; criteria-based evaluation of overall
		scientific strength and quality of included studies; definitive conclusions
	Organizational	well-defined methods using a rigorous approach; consistent results with
		sufficient sample size; use of reliable AND valid measures
	Expert Opinion	expertise is clearly evident
B GOOD	Research	reasonably consistent results, sufficient sample size, some control, with
		fairly definitive conclusions; reasonably consistent recommendations based
		on fairly comprehensive literature review that includes some reference to
		scientific evidence.
	Summative	reasonably thorough and appropriate search; reasonably consistent results
	Reviews	with sufficient numbers of well defined studies; evaluation of strengths and
		limitations of included studies; fairly definitive conclusions
	Organizational	well defined methods; reasonably consistent results with sufficient numbers;
		use of reliable AND valid measures; reasonably consistent recommendations
	Expert Opinion	expertise appears to be credible
C LOW	Research	little evidence with inconsistent results, insufficient sample size, conclusions
(MAJOR		cannot be drawn.
FLAWS)	Summative	undefined, poorly defined, or limited search strategies; insufficient evidence
	Reviews	with inconsistent results; conclusions cannot be drawn
	Organizational	undefined OR poorly defined methods; insufficient sample size; inconsistent
		results; undefined, poorly defined or measures that lack adequate reliability
		or validity.
	Expert Opinion	expertise is not discernable or is dubious

Newhouse, R., Dearholt, S., Poe, S., Pugh, LC., & White, K. (2007). *The Johns Hopkins Nursing Evidence Based Practice Rating Scale. Appendix B.* The Johns Hopkins Hospital, Johns Hopkins University School of Nursing: Baltimore, MD.