#### **Northwell Health**

### **System Nursing Research and EBP Council**

#### **Evidence-Based Practice (EBP) Fellowship Application**

The Evidence-Based Practice (EBP) fellowship program offers registered nurses the opportunity to develop necessary knowledge and skills to search, critically appraise and use the evidence to initiate new or to change current practices for optimal patient outcomes. EBP integrates the best available research and other types of evidence with clinical expertise and individualized patient care to improve professional practice and patient care. The proposed fellowship is a 9-month long program including didactic education, facilitated course work and independent study on a selected evidence-based practice project.

The fellowship program aims to provide both theory and skills to facilitate identification, development and progression of the fellow's selected EBP project. The foundation for this course is based on Steven's Star Model operationalized by Northwell's EBP Algorithm. The course will provide information about locating, critiquing and synthesizing evidence, developing recommendations, identifying gaps between available evidence and current practice, understanding change theory for planning implementation, and relevant measures. The project work will be supported by site/system mentors, educational specialists, and EBP project topic experts.

The didactic education consists of 3 days of 8-hour in-person classes followed by one 8-hour day a month in-person meetings for reviews, presentations, and additional instructions. The EBP fellowship attendees must be endorsed by their manager, director, and CNO and must complete all required course work.

#### **Program objectives:**

- 1. Educate nurses on the process of EBP.
- 2. Stimulate scholarly inquiry, i.e. consistent questioning of current clinical practices, to strengthen beliefs in the value of EBP.
- 3. Foster professional growth and development by disseminating project findings through poster and podium presentations and publications.

## **Fellowship Applicant Eligibility criteria**

Applicants must have a strong commitment to attend all the didactic classes, complete all assignments, and meet the following criteria:

- 1. BSN prepared RN with two or more years of nursing experience
- 2. At least one year employment at Northwell Health
- 3. Currently employed at ≥ 0.5 FTE as a registered nurse
- 4. Interested in learning and the application of research and EBP in nursing practice
- 5. Identified by the unit manager/director as a team player with strong written and verbal communication, strong interpersonal skills, and upholding the core values of NWH
- 6. Current performance evaluation that meets or exceeds expectations
- 7. Should serve on the site EBP and Research Council

# **EBP Fellowship Application**

# Part A- Demographic information

Applicant's Name and Credentials:	
Position:	Unit:
Department:	Site:
Email:	Preferred Phone Number:
Unit Manager Name:	
Unit Manager Email:	
Are you a member of the Site Research 8	EBP Council: ☐ Yes ☐ No ☐ Other
If other explain:	
Proposed Project Title:	
Proposed Project/topic of interest Descri	ption:

## Part B- EBP Fellowship Program Service Agreement

The EBP fellowship program represents patient care services' (PCS) investment in your professional development, and therefore, carries with it some responsibilities. Prior to being designated as an EBP fellow, we require your agreement with the statements below. This signed form is a required part of your application.

If accepted as an EBP Fellow, I agree to:

- 1. Attend all scheduled sessions, complete the course work (may have homework assignments), and project and disseminate the results (may need to work with your manager about your work schedule).
- 2. Collaborate and work with the EBP mentor and program coordinator to complete the project at the mutually agreed upon timeline.
- 3. Submit an abstract on the completed project internally and/or externally
- 4. Complete a program evaluation at the completion of the course
- **5.** Agree to serve as an active member of the site EBP & Research Council

Organization:	Unit:
Name & Credentials of the Applicant	Work Email
Signature of the Applicant	 Date
Part C- Er	ndorsement
I endorse the application of	
for the Northwell Health 2020 EBP Fellowship progrequisites and eligibility criteria for the program. Shall EBP fellowship program classes.	
Name & signature of Applicant's Nurse Manager	Date
Name & signature of applicant's Director	 Date
Name & Signature of applicant's CNO	 Date
Name & Signature/Site Research & EBP Chair	 Date