Association of Community Health Nursing Educators' 2020 Evidence Based Project Priorities: Steps 12-19
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Association of Community Health Nursing Educators' 2020 Evidence Based Project
Priorities: Steps 12-19

Translation: PET Steps 12-19

Step 12: Determine fit, feasibility and appropriateness of recommendations for translation path. The Core Team determined that based on the stance that an iterative theme review was performed as opposed to a critical appraisal of quality and strength of evidence, there is no need to complete the recommended a statistical analysis (Dang & Dearholt, 2017) of any of the identified themes. The recommendations were determined to be in alignment (fit, feasibility and appropriateness) with the 2019 ACHNE Strategic Goals (achne.org), which are consistent with the 2017 Quad Council Coalition Vision and Mission (Quadcouncilphn.org). In addition, the Core Team explored the fit, feasibility and appropriateness of incorporating the recommendations into the ACHNE Research Committee Structure, Goals and Research Priorities report.

This review has provided an opportunity for the ACHNE Research Committee to establish a foundational process for the review of DNP Projects as a basis for informing future funding of priority projects, making recommendations to C/PHNs for essential DNP Projects and for promoting the translation of C/PHNE related research into clinical nursing practice.

Step 13: Create an action plan. After the Review and Executive teams reviewed and endorsed the four aforementioned recommendations, an action plan was developed using Dang and Dearholt's (2017) Action Planning Tool. The decision was to have the Research Committee coordinate a plenary session at the Annual Institute (AI) and to work with other stakeholders such as Quad Council Coalition representatives, ACHNE Policy and Education committees and the general membership to facilitate the development of virtually-based member driven action plans aimed at establishing projects that translate, advance or add to the evidence base for

Community/Public Health Nursing Education (C/PHNE) of which are aligned with ACHNE strategic plans and research priorities and that inform C/PHNE, promote population health, contribute to the evidence base application to practice, and/or inform further research.

The plan is to have ACHNE Officers, AI Planning Committee and Education and Policy Committee work with the Research Committee Chair to advance membership action plans. Champions would include the Small Grants Award and EBP Project Chairs, as well as Core and Review Team members. Milestones will be determined as follows: Annual Institute 2019 participation in Research Plenary session, Development of virtually based, member driven action plans, Committee mid and annual year reports, Submission of projects for 2020 funding as well as AI 2020 proposal submissions. Pre and Post measures will be threefold: 1) Pre plenary 2) Post plenary and 3) midyear report.

Step 14: Secure support and resources to implement an action plan. (People. money things, space and time). Barriers may include ongoing member participation over the course of the year. To augment active participation champions will reach out and to participants every month to help groups overcome inertia. The Research Committee Chair will work with ACHNE's management company to advance technology/website and list serves to improve technological resources. The Research Committee Chair will work with the Executive Board to secure funding for projects. In addition, the Research Committee Chair will work with ACHNE and PHN leadership to advance national public funding sources and private donors to fund C/PHNE focused DNP projects.

Step 15: Implement action plan. According to Dang and Dearholt (2017) as action plans are implemented, verbal and written communication is essential so that all affected staff and stakeholders are educated about the practice change, implementation plan, and/or evaluation

process. To facilitate, the ACHNE leadership and management company will update the ACHNE website with target projects, proposal calls invitations to participate in AIs and offer mentoring to advance projects for publication.

Step 16: Evaluate outcomes. According to Dang and Dearholt (2017), the PICOT Question should be evaluated via the Question Development Tool, to determine if the project outcome was achieved. In this project, the PICOT question**,** "*Since 2014, what DNP-led EBP projects have community-based population health outcomes?*" was evaluated by the Core Team asking, "Did we achieve outcomes using a systematic search?"

The answer was debated. For example, the Core Team identified the state of scholarship specific to DNP-led EBP projects having community-based population health nursing education. However, the Core Team also identified that a gap exists in the the ability to systematically review DNP projects of the level and quality of evidence due to inherent process constraints. In particular, DNP projects undergo a quality check within their programs, yet there is no corollary process for projects as compared with research studies and systematic reviews. The Core Team also identified that DNP projects represent a cross sectional view of a short time period, limiting the ability to determine if changes or the impact of changes are sustained.

Step 17: Report outcomes to stakeholders. Step 17 involves promulgating outcomes to individuals, groups, or organizations, who may affect, be affected by, or perceive itself to be affected by a decision, activity, or outcome of a project (Dang & Dearholt, 2017). The means of information sharing and communication to ACHNE members and the Executive Board are formalized through the ACHNE committee structures. For instance, after the priorities were approved by the ACHNE Executive Board, the priorities were announced at the AI and then disseminated monthly at the Research Committee meetings. The ACHNE Website is also

frequently updated, adding information through list serves, newsletters, and announcements such as calls for EBP Project proposals. Ongoingly, the Research Chair provides the organization with mid and annual reports.

  Step 18: Identify next steps. Dang and Dearholt (2017) recommend that next steps in planning and oversight be identified in order to promote its sustainability. The action plan development allows for sustainability of the prioritizing project priorities on a continuous basis contingent on four factors: 1) the need for a tool to guide priority updates, 2) continued award funding, 3) if members establish virtual workgroups to address targeted projects, 4) if members submit project proposals aimed at the targeted projects. An important next step is reviewing the project priorities every five years unless there is a shift in funding, refitting of national priorities, a monumental scientific discovery, a transformation of ACHNE vision, mission or strategic plans.

  Step 19: Disseminate findings. The last step in the JHNEBP Model guided the EBP Process is dissemination of findings (Dang & Dearholt, 2017). Dang and Dearholt's (2017), Dissemination Tool was used to guide Step 19. The External Reviewer feedback (Quad Council, EBP and Research experts), ACHNE annual reports, feedback from ACHNE and Research Committee membership will be litmus tests for whether the EBP Project Priorities document should be submitted for publication in a peer-reviewed professional journal. The scholarship will be submitted for podium and poster presentations internal of and external to the ACHNE organization. Another innovative means of sharing the information is via a technology-based website builder that uses WYSIWYG editing, entitled Weebly. The innovation is to create a Resource Center for C/PHNE's interested in learning more about ACHNE sponsored Research

Studies and EBP Practice Projects, developing interprofessional and intraprofessional

opportunities for connectivity among members, academicians, practice partners and students.

References

Dang, D., & Dearholt, S. (2017). Johns Hopkins nursing evidence-based practice: model and

    guidelines. 3rd ed. Indianapolis, IN: Sigma Theta Tau International.

Glover, J., Izzo, D., Odato, K., & Wang, L. (2006). EBM pyramid and EBM page generator.

    New Haven: Yale University.

Table 6. DNP Projects selected for review (2014-2018)

1	Author, (year). xxxxxxx
2	

Table XX. Five additional articles not selected for review

Table XXX. Move this table to shared drive it will be available upon request

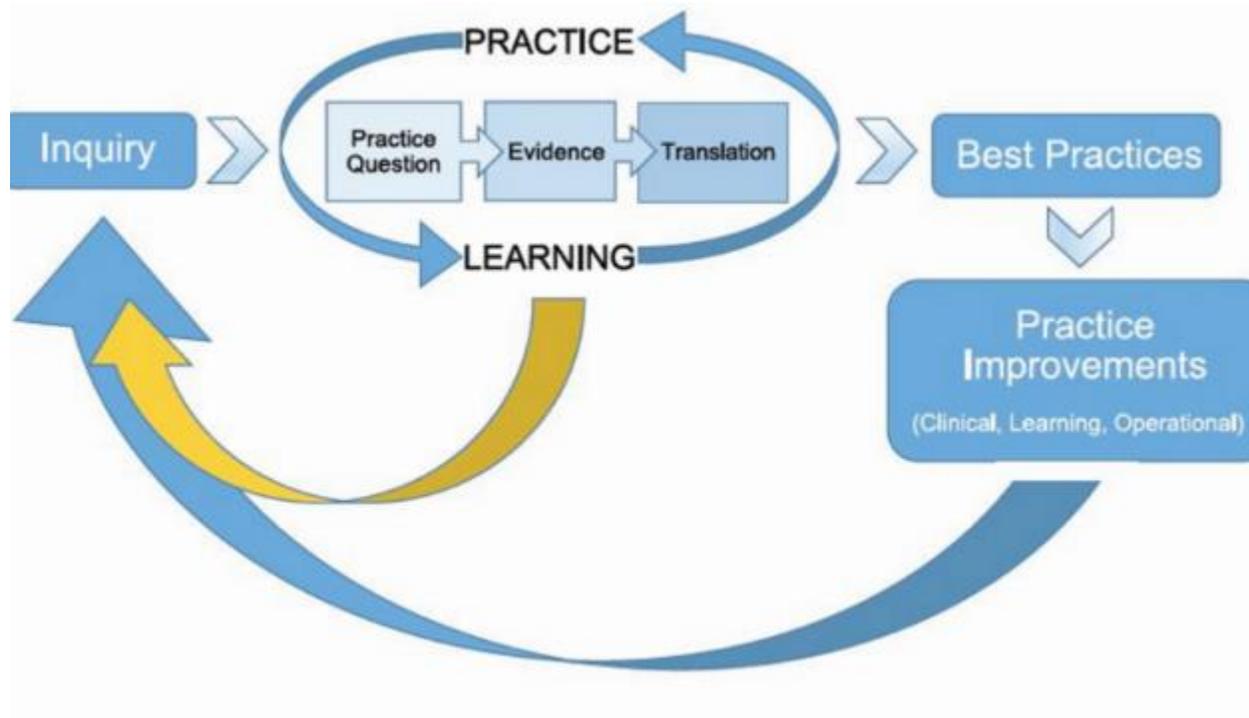   Table x provides findings according to PICOT.

Results

The 77 articles were analyzed using the PICOT format. Four keyword themes were identified:

Conditions/diagnosis, Treatments, Clinical Factors, and Patient Factors.

Populations of focus

interventions implemented and evaluated

comparison, and outcomes- knowledge generation

John Hopkins EBP Model, 20XX

Lacks the opportunity to have translation/ebp inform research questions before adopting best practice-- replicability? *To advance knowledge about promoting and sustaining adoption of EBPs in health care, translation science needs more studies that test translating research into practice (TRIP) interventions: studies that investigate what TRIP interventions work, for whom, in what circumstances, in what types of settings; and studies that explain the underlying mechanisms of effective TRIP interventions.35, 49, 79, 87 (https://www.ncbi.nlm.nih.gov/books/NBK2659/)*

The quality of evidence was assessed using the XXXX pyramid (Figure X).
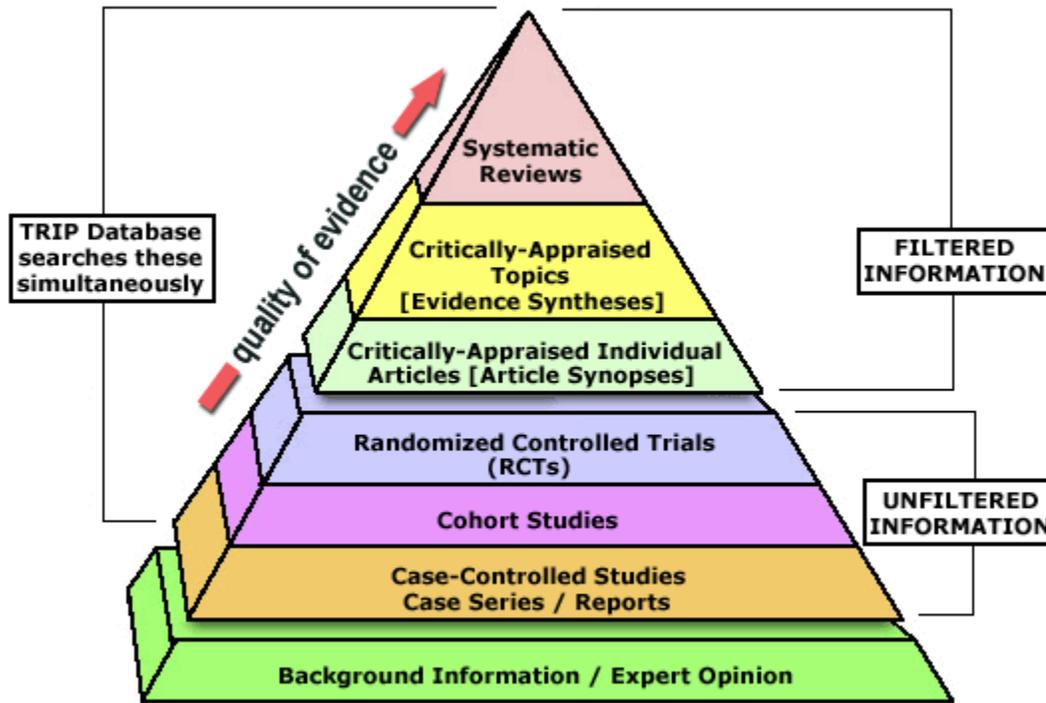
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Results

Johns Hopkins Nursing Evidence-Based Practice
Practice Question, Evidence, and Translation (PET)

PRACTICE QUESTION

Step 1: Recruit interprofessional team
Step 2: Develop and refine the EBP question
Step 3: Define the scope of the EBP question and identify stakeholders
Step 4: Determine responsibility for project leadership
Step 5: Schedule team meetings

EVIDENCE

Step 6: Conduct internal and external search for evidence
Step 7: Appraise the level and quality of each piece of evidence
Step 8: Summarize the individual evidence
Step 9: Synthesize overall strength and quality of evidence
Step 10: Develop recommendations for change based on evidence synthesis
- Strong, compelling evidence, consistent results
- Good evidence, consistent results
- Good evidence, conflicting results
- Insufficient or absent evidence

TRANSLATION

Step 11: Determine fit, feasibility, and appropriateness of recommendation(s)
          for translation path
Step 12: Create action plan
Step 13: Secure support and resources to implement action plan
Step 14: Implement action plan
Step 15: Evaluate outcomes
Step 16: Report outcomes to stakeholders
Step 17: Identify next steps
Step 18: Disseminate findings

steps 1-8, some have no analysis of evidence. Steps 9 & 10 resides in the layer of the paper by

the project team, not us. then our team assessed level quality of projects.