EVIDENCE-BASED DECISION-MAKING AND NURSING PRACTICE

CNA POSITION

Evidence-based decision-making is an important element of quality care in all domains of nursing practice.\(^1\) Evidence-based decision-making is essential to optimize outcomes for patients, improve clinical practice, achieve cost-effective nursing care and ensure accountability and transparency in decision-making.

BACKGROUND

Evidence-based decision-making is a continuous interactive process involving the explicit, conscientious and judicious consideration of the best available evidence to provide care. Although rating systems have been developed to rank order this evidence, it is imperative to acknowledge that the use of the higher levels of evidence does not eliminate the need for professional clinical judgment nor for the consideration of client preferences.\(^2\)

Evidence is information acquired through scientific evaluation of practice. Types of evidence include experimental studies such as randomized controlled trials and meta-analysis, non-experimental research studies that include quasi-experimental and observational studies, expert opinion in the form of consensus documents and commission reports and historical or experiential information.

Evidence-based nursing refers to the incorporation of evidence from research, clinical expertise, client preferences and other available resources to make decisions about clients.\(^3\) Decision-making in nursing practice is influenced by evidence and also by individual values, client choice, theories, clinical judgment, ethics, legislation and practice environments.

A variety of sources are being used by nurses\(^4\) to facilitate their use of evidence. These include: systematic reviews, research studies and abstraction journals, which summarize valid and clinically useful published studies. There has also been a rapid proliferation of clinical practice guidelines for nurses to use as a source of evidence. These are defined as “systematically developed statements to assist practitioner decisions about appropriate health care for specific clinical circumstances.”\(^5\) Guidelines are based on the most rigorous research available, and when research is not available, they are grounded in expert opinion and consensus, prompting some to refer to them as best practice guidelines.

Applied at the individual client level, guidelines provide a set of instructions containing conditional logic for solving problems or accomplishing tasks. Appropriately applied, guidelines can reduce uncertainties associated with clinical decisions, diminish variation around usual practices, demystify unfamiliar terminology and decrease the need to search for journals and articles. It is important to evaluate the quality of the guidelines prior to implementation through the use of acceptable tools.\(^6\)

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\(^1\) Domains of nursing practice include practice, education, leadership and research.

\(^2\) (Trammer et al., 1998; Youngblut & Brooten, 2001).

\(^3\) (Ciliska, Pingli, DeCenso, and Cullum, 2001; Mulhall, 1998).

\(^4\) In this document, the term nurse refers to a registered nurse.

\(^5\) (Field, 1995, p. 38).

\(^6\) (Glanville, Schrim, and Wineman, 2000).
RESPONSIBILITY FOR EVIDENCE-BASED NURSING PRACTICE

Professional associations, regulatory bodies for nurses, specialty groups for nurses, individual nurses, schools of nursing, organizations employing nurses, accreditation councils, governments, health information agencies and nurse researchers share the responsibility of facilitating evidence-based decision-making and evidence-based practice. These responsibilities extend to identifying the barriers and enhancing the factors within organizational structures that facilitate and promote evidence-based practice.

- Individual nurses:
  - Position themselves to provide optimal care by acquiring competencies for evidence-based nursing practice;
  - Generate researchable questions and communicate them to researchers; and
  - Evaluate, use and promote evidence-based nursing practice.

- Professional, regulatory and nursing specialty associations:
  - Use the best available evidence as a basis for standards and guidelines; and
  - Lobby governments for funding to support nursing research and health information system that include nursing data.

- Researchers:
  - Identify knowledge gaps and use them to establish research priorities in conjunction with practitioners;
  - Generate high quality evidence through research;
  - Engage in effective knowledge transfer, translation and exchange to communicate relevant findings of the results of research to those who require the information; and
  - Develop and carry out ongoing research to explore the concepts of evidence, evidence dissemination and utilization in nursing practice.

- Educators and educational institutions:
  - Ensure that those graduating from basic and continuing nursing education programs acquire competencies to provide evidence-based nursing;
  - Use and develop evidence-based curricula; and
  - Promote a spirit of inquiry, critical thinking and a philosophy of life-long learning.

- Employers of registered nurses:
  - Reduce barriers against and enhancing the factors within organizations to promote evidence-based practice; and
  - Provide continuing education to assist nurses to maintain and increase their competence with respect to evidence-based practice.

- Governments:
  - Support development of health information systems that support evidence-based nursing practice;
  - Support health information institutions; and
  - Provide adequate funding to support nursing research in all its phases.

7 Competencies are the specific knowledge, skills, judgment and personal attributes required for a registered nurse to practise safely and ethically in a designated role and setting.
• National and provincial health information institutions:
  - Collect, store, maintain and retrieve health data in broader health information systems;
  - Provide comprehensive, integrated and relational systems that include nursing data and patient outcomes;
  - Collect data using standardized languages to ensure that nursing data can be aggregated and compared across and between sites.

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References:

Also see:
International Council of Nurses

Replaces:
CNA Position Statement: Evidence-based Decision-making and Nursing Practice (1998)
CNA Position Statement: The Role of the Nurse in the Use of Health Care Technology (1992)
CNA Position Statement: The Role of the Nurse in the Introduction or Expanded Use of Pharmaceutical Products (1994)