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Virtual Journal Club: An innovative way of bringing evidence-based practice and research to nurses in their workplace

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Virtual Journal Club:
An innovative way of bringing evidence-based practice and research to nurses in their workplace.

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Background

Journal clubs serve many purposes including educating nurses and improving clinical practice. Nurses can use them to review research data and improve the care of patients (Seymour, Kinn, & Sutherland, 2003). Limited staffing, in the traditional journal club, makes it challenging for nurses on duty to leave patient care responsibilities to attend journal club meetings (Dobrzanska & Cromack, 2005). Therefore, innovative approaches, such as a Virtual Journal Club (VJC), are a necessity. By implementing a VJC, the nursing staff can facilitate collective knowledge to be shared; engage in the discussion during patient care downtime; and establish multi-disciplinary collaboration.

Clinical Practice Question

This evidence-based practice (EBP) project was created to determine whether an innovative VJC in the intensive care unit (ICU) improves and increases nursing staff participation and satisfaction with EBP and research in comparison to the traditional format?

Methods of Implementation

This project was developed using the Clinical Excellence Through Evidence-based Practice (CETEP) model—Define, Assess, Plan, Implement, and Evaluate. The implementation of the VJC included: monthly article placement by a nurse via MS SharePoint; and review and reply by the 30 ICU nurses in an electronic blog format about the article’s significance to their practice. Review and responses also include the research specialist and physicians.

Month & Submitter | Topic | Responders (% of ICU staff) | Whether the topic became an Evidence Based Project (EBP) in the Intensive Care Unit (ICU)
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Jan 2011 | Cohn, MSN, MEd, RN | Critical Appraisal of Current Evidence-based Practice | 8 (26.6%) | Yes
Feb 2011 | Cohn, MSN, MEd, RN | Evidence-based Practice: A Continuum of Inquiry | 11 (36.6%) | Yes
Mar 2011 | Garcia, BSN, CCRN, CSC, CMC, RN | Evidence-based Practice | 12 (40%) | Yes
Apr 2011 | Samsundar, MLIS, AHIP | Critical Analysis of Evidence-based Practice | 10 (33.3%) | Yes
May 2011 | Samsundar, MLIS, AHIP | Evidence-based Practice | 10 (33.3%) | Yes
Jun 2011 | Judkins-Cohn, MSN, MEd, RN | Evidence-based Practice | 11 (36.6%) | Yes
Jul 2011 | Judkins-Cohn, MSN, MEd, RN | Evidence-based Practice | 11 (36.6%) | Yes
Aug 2011 | Garcia, BSN, CCRN, CSC, CMC, RN | Evidence-based Practice | 10 (33.3%) | Yes
Sep 2011 | Garcia, BSN, CCRN, CSC, CMC, RN | Evidence-based Practice | 10 (33.3%) | Yes
Oct 2011 | Samsundar, MLIS, AHIP | Evidence-based Practice | 10 (33.3%) | Yes
Nov 2011 | Samsundar, MLIS, AHIP | Evidence-based Practice | 10 (33.3%) | Yes
Dec 2011 | Cohn, MSN, MEd, RN | Evidence-based Practice | 10 (33.3%) | Yes
Jan 2012 | Cohn, MSN, MEd, RN | Evidence-based Practice | 10 (33.3%) | Yes
Feb 2012 | Samsundar, MLIS, AHIP | Evidence-based Practice | 10 (33.3%) | Yes
Mar 2012 | Judkins-Cohn, MSN, MEd, RN | Evidence-based Practice | 11 (36.6%) | Yes
Apr 2012 | Judkins-Cohn, MSN, MEd, RN | Evidence-based Practice | 11 (36.6%) | Yes
May 2012 | Garcia, BSN, CCRN, CSC, CMC, RN | Evidence-based Practice | 10 (33.3%) | Yes
Jun 2012 | Garcia, BSN, CCRN, CSC, CMC, RN | Evidence-based Practice | 10 (33.3%) | Yes
Jul 2012 | Cohn, MSN, MEd, RN | Evidence-based Practice | 10 (33.3%) | Yes
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Jun 2013 | Cohn, MSN, MEd, RN | Evidence-based Practice | 10 (33.3%) | Yes

Outcomes

Eleven articles have been posted since the inception of the VJC, with over 140 postings from June 2011 to July 2012. On average there were over 13 responses per article. The feedback received from the nurses included:

- a sense of engagement,
- reduced fears of reviewing literature,
- a sparked interest in research and EBP,
- an increase in professional advancement via the PNAP—Professional Nurse Advancement Program model.

Discussion

Since the inception of the VJC in the ICU the articles presented have led to: (1) bacterial swabbing of basins for the development of a future research study; (2) increased knowledge of additional risk factors for identifying patients at higher risk of skin breakdown; (3) partnering evidence of early mobilization of ventilated patients to a new unit initiative; (4) policy development by bedside ICU nurse on the use of a bladder scanner to reduce unnecessary foley insertions; and (5) an IRB approved research proposal for the application of earplugs to prevent delirium and promote better sleep quality. Out of the 9 nurses that posted their articles, 5 of them went on to attain their "Advancement" via the PNAP—4 of them became "Advance" nurses and 1 an "Expert" nurse in the ICU. Furthermore, the innovative development of the VJC in the ICU has served as a model for the hospital system which is now implementing VJC's in other units and entities in the system.

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