



**EVIDENCE-BASED HEALTHCARE  
IMPLEMENTATION STRATEGIES:  
FINDINGS FROM A FACULTY INSTITUTE ON  
TEACHING EVIDENCE-BASED PRACTICE**

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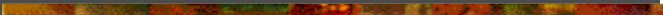


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# Greetings from Boston



# Center for Rehabilitation Effectiveness

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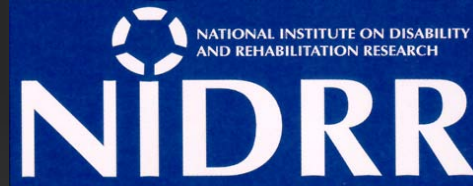
- Federally-funded research and training center on measuring rehabilitation outcomes.
  - Housed in Sargent College of Health and Rehabilitation Sciences
  - Provide training programs for faculty in the rehabilitation field
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# Faculty Summer Institute: Teaching Evidence-Based Practice in Rehabilitation Professional Curricula

- Goal: to improve rehabilitation professional education by advancing evidence-based practice.



# Acknowledgements



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Centre for Evidence-Based Medicine



# Faculty Summer Institute

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- Audience: academic and clinical faculty teaching in communication disorders, medicine, occupational therapy and physical therapy educational programs.
  - Over three years more than 300 faculty attended.
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# Faculty Summer Institute Experiences

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- Common theme
    - EBHC knowledge and skills learned in the academic setting are not reinforced in the clinical setting.
  - What are the barriers and facilitators to implementing an EBHC approach?
    - Help educators prepare students for EBHC in the 'real world'.
    - Understand how to promote behavioral change among clinicians.
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# Survey

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- 45 Clinicians surveyed.
  - Identified barriers and facilitators to incorporating an EBHC approach.
  - Outlined specific actions to promote EBHC in the clinical setting.
  - Using the constant comparative method, barriers, facilitators, and actions were independently reviewed to identify common themes.

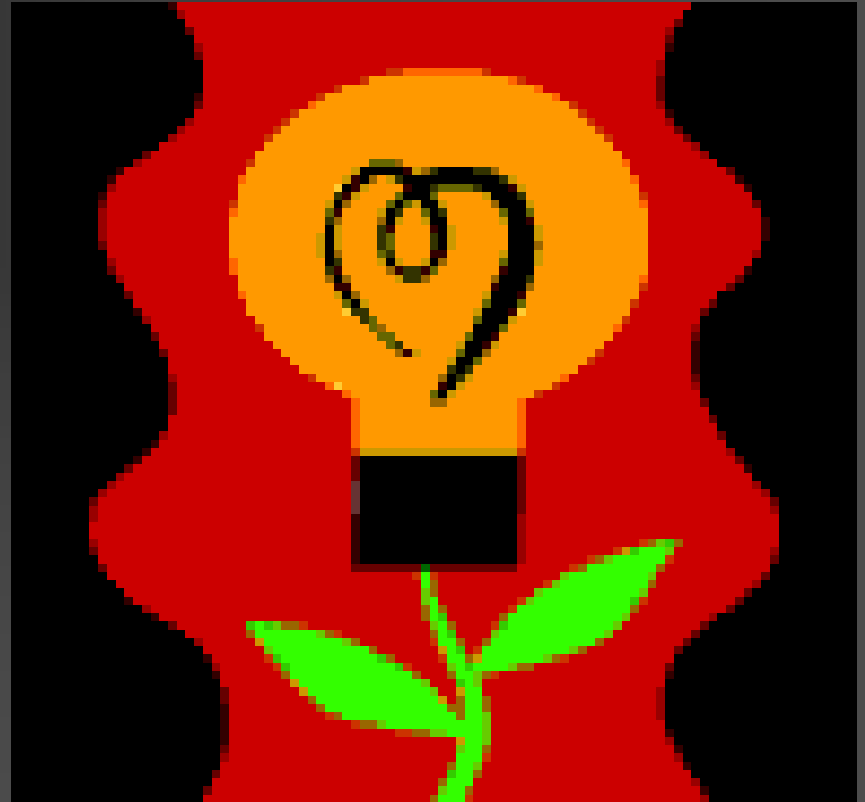


# Barriers, Facilitators and Actions

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## ■ Themes

- Reflection
- Knowledge
- Management
- Peers



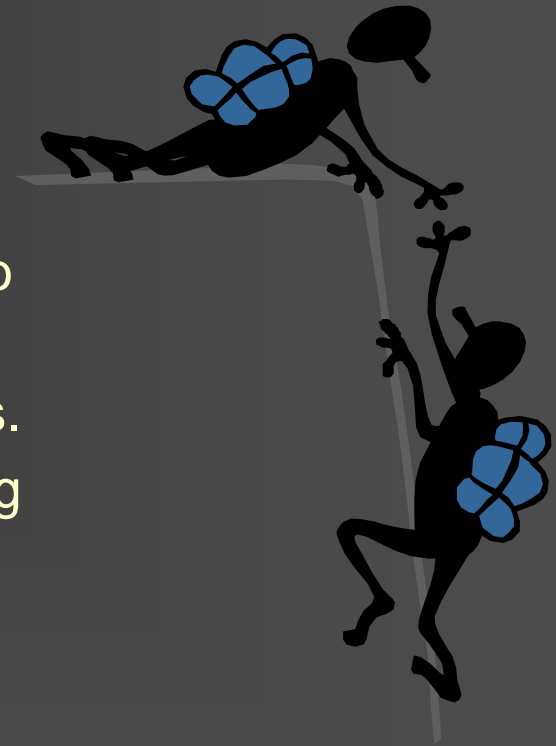
# EBHC Facilitators

## ■ Reflection

- Recognize the importance of life-long learning.
- Attitude among staff and management to promote quality care.
- Co-workers value intellectual exchanges.
- Developing an EBHC expectation among consumers.

## ■ Knowledge

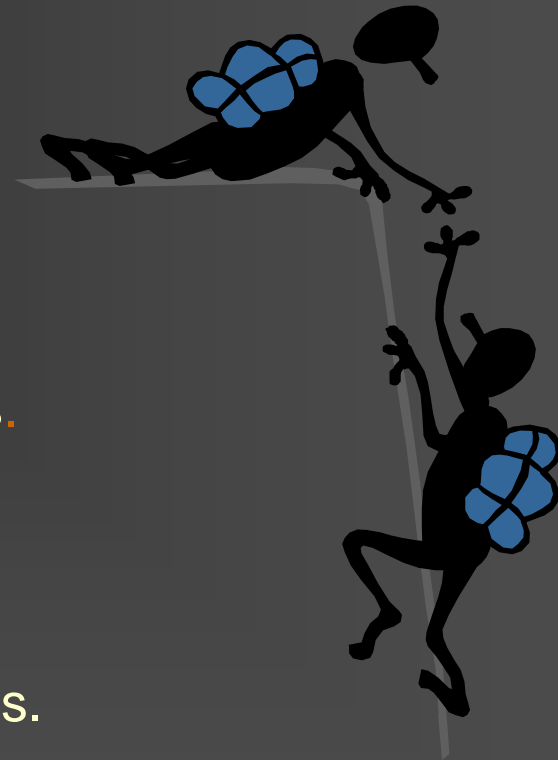
- EBHC training.
- Internet access.
- Affiliations with academic institutions.



# EBHC Facilitators

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- Peers
  - Good communication with staff.
  - Staff eager to learn.
- Management
  - Integrate EBHC with other activities.
  - Support for EBHC training.
  - Communication between staff and management.
  - Affiliations with academic institutions.
  - Manageable case loads.
  - Physicians promote EBP.



# EBHC Barriers

## ■ Reflection

- Resistance to change and avoidance of ambiguity.
- Personally do not value EBHC.
- Administration/peers do not value EBHC.

## ■ Knowledge

- No EBHC training.
- Inadequate research and statistics background.
- Lack access to computer, Internet and/or medical library.
- Lack of evidence in literature.



# EBHC Barriers

## ■ Peers

- Unable to influence multidisciplinary team.
- Lack of peer support.
- Isolation from other professionals.
- Peers lack EBHC competencies.

## ■ Management

- Have not found time to commit to EBHC.
- Have not developed EBHC implementation strategies.
- High productivity demands.
- Lack of physician advocacy for EBHC.



# EBHC Activities

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- Reflection
    - Learn to formulate good clinical questions.
  - Knowledge
    - Attend workshops and courses.
    - Make use of on-line EBHC resources.
    - Develop CATs.
  - Peers
    - Educate peers.
    - Establish EBHC workgroups.
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# EBHC Activities

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## ■ Management

- Develop a system for EBHC in your setting.
    - Systematic tracking of clinical questions for practice setting.
    - Define EBHC competencies and include in performance evaluation.
  - Work EBHC into scheduled activities.
    - Rounds, journal club, in-service, clinical education.
    - Have students assist with EBHC searches and develop CATs.
    - Use evidence in patient education.
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# Recommendations for Educators

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- Develop competency in EBCH implementation strategies.
  - Prepare students to act as 'change agents'.
  - Promote interaction between academic and clinical faculty.
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# EBHC: Building bridges between clinicians and academic faculty

How can clinicians support academic faculty?

- Identify EBHC implementation strategies that can be developed in the academic setting.
- Develop EBHC cases for academic settings.
- Generate relevant clinical questions for CATs.



# EBHC: Building bridges between clinicians and academic faculty

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How can academic faculty support clinicians?

- Provide access to libraries, journal articles, journal clubs
- Provide EBHC continuing education training and train students to give EBHC in-service
- Share CATs developed by faculty and students with clinical sites.



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