

Exploring return of Evidence Based Practice behaviours to baseline at follow up among Clinical Instructors in Physiotherapy Education



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Background: A multifaceted and clinically integrated training program in EBP

- A non-randomized controlled study among clinical instructors (CIs)
- Intervention group (n=13) (training program in EBP)
- Control group (n=14) (no intervention)

Training program in EBP:

- Four half-day workshop sessions
- Five assignments
- Supervision
- Exam: oral presentation

Background: Behaviour change, only at post-intervention

	Pre-intervention	Post-intervention	Follow-up (6 months)
Adapted Fresno Test (range 0 - 156)			
Intervention	43.4	80.5	69.4
Control	34.5	37.5	32.5
p-value, MD*	0.248	<0.001	<0.001, 37
EBP Beliefs Scale (range 16 - 80)			
Intervention	44.8	52.6	53.6
Control	43.6	44.7	45.4
p-value, MD*	0.526	<0.001	0.002, 8.1
EBP Implementation Scale (range 0 - 60)			
Intervention	7.7	17.7	12.3
Control	8.9	7.0	10.5
p-value, MD*	0.570	<0.001	0.574, 1.8

*MD: between groups; estimated mean difference between scores in the intervention and the control group

Aim

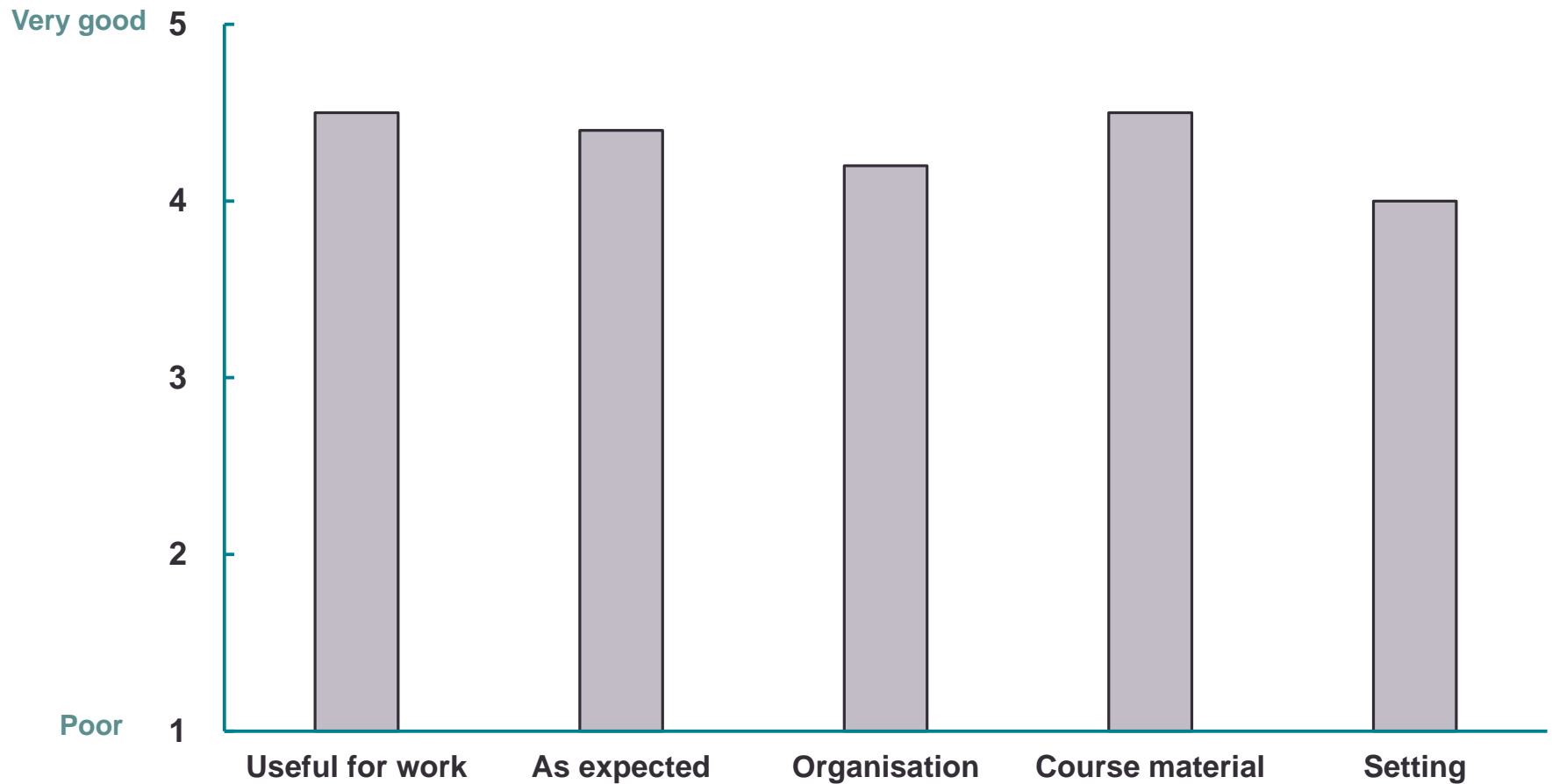
- To explore *why* long term EBP behaviour change (measured by the EBP Implementation Scale) was not sustained among CIs who participated in the training program in EBP.

Methods

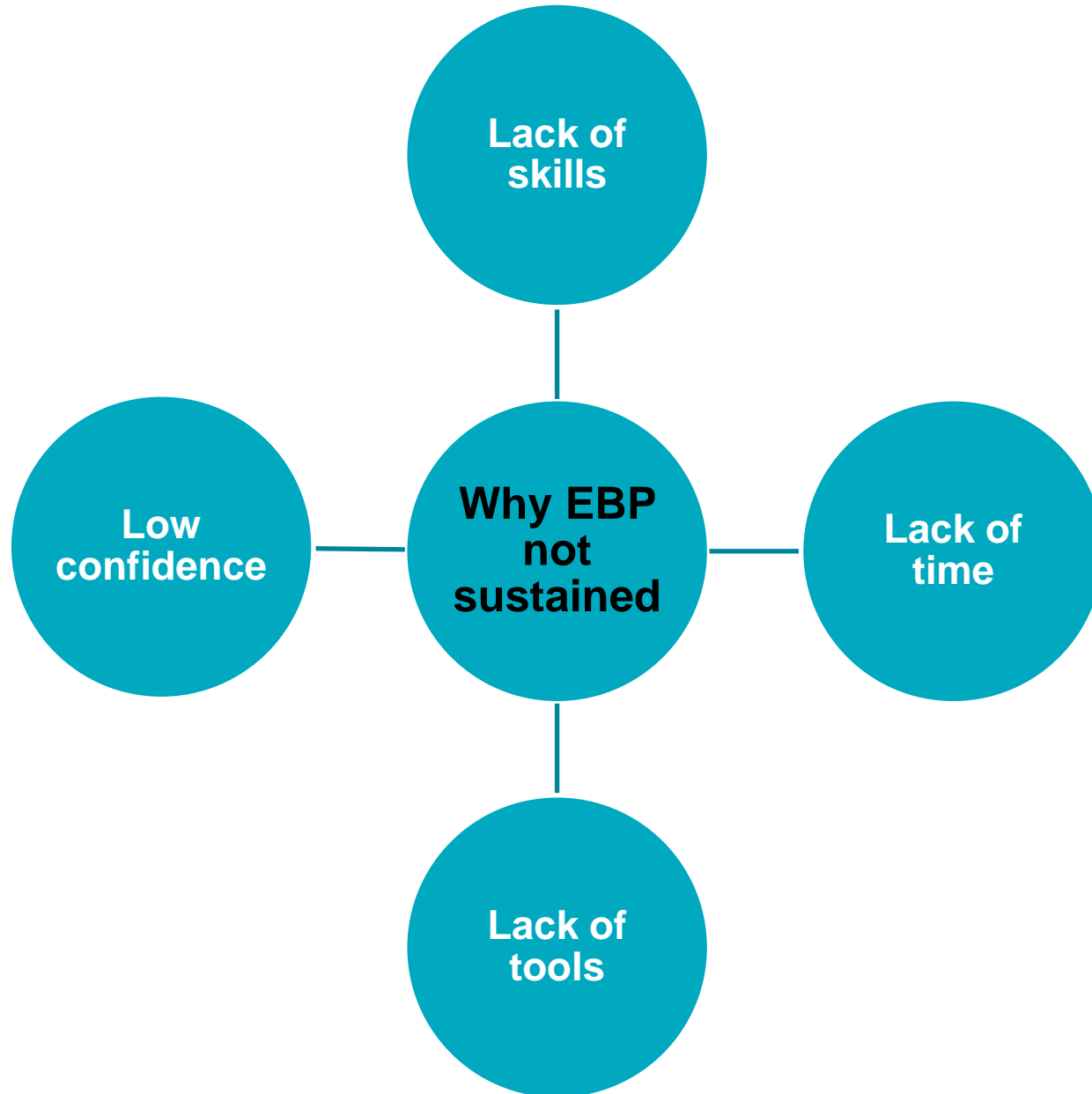
- Participant satisfaction
- Focus group interviews
- EBP goals

Results: Participant satisfaction

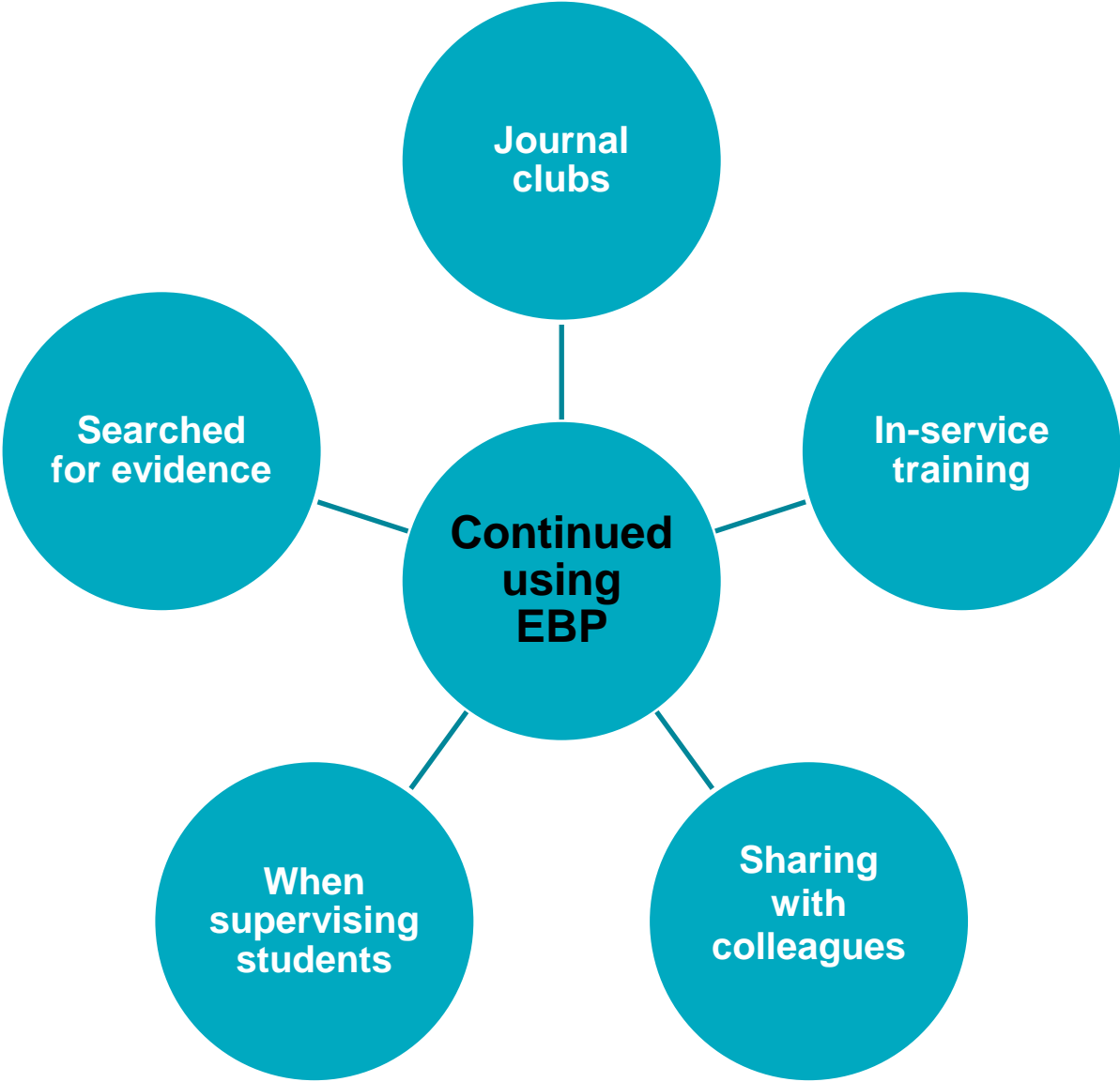
Most satisfied with structure, content and supervision



Results: From interviews



Results: From interviews





Results: EBP goals

- 39 goals described – 20 achieved
- Related to EBP steps
- Related to the EBP process (all steps)
- Related to implementation

Discussion

- Multifaceted and clinically integrated¹
- Barriers identified²
- Interpreting results from research evidence³
- Training program: format, content, duration, frequency
- Contextual factors: leadership, facilitation, follow-up support⁴

- Lack of an action plan for sustainability⁵
 - › Actions among leaders
 - › Champions for change
 - › Systems for continued implementation or monitoring

1. Young et al. (2014) Plos One

2. Scurlock-Evans et al. (2014) Physiotherapy

3. Johnston et al. (2015) CMAJ

4. Yost et al. (2015) Implementation Science

5. Straus et al. (2014, Ch. 3.6) Knowledge Translation in Health Care

Limitations, conclusions and questions for YOU!

- Lack of an action plan for sustainability
- Small sample size

- CIs continued using EBP
- CIs still need to improve their EBP competence
- **Q: What is the optimal way of teaching EBP?**
(format, content, duration, frequency)



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