Published in final edited form as:

J Nurses Prof Dev. 2016 ; 32(1): 15–20. doi:10.1097/NND.0000000000000197.

Immersion in Evidence-Based Practice Fellowship Program: A Transforming Experience for Staff Nurses

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The Institute of Medicine's (IOM) 2020 goal that 90% of clinical decisions be evidenced-based will assist in improving patient outcomes and reducing health care costs (IOM, 2009). In order to meet this goal, many hospitals have evidence-based practice (EBP) programs to develop competencies that enable staff nurses to use evidence in their practice. Programs vary in length and format but share common outcomes of increasing nurses' confidence in skills and fostering professional growth (Gawlinski,& Becker, 2012; Turkel, Ferket, Reidinger, & Beatty, 2008; Wells, Free, & Adams, 2007).

Studies describe the success of these EBP programs in terms of personal achievement and organizational benefit. Nurses completing fellowship programs often report furthering their education or changing jobs while organizations benefit from creating EBP champions and standardizing care (Gawlinski,& Becker, 2012; Turkel, Ferket, Reidinger, & Beatty, 2008; Weeks, Moore, & Allender, 2011; Wells, Free, Adams, 2007). This qualitative study focused on the changes in thinking and behavior of staff nurses who had completed an EBP fellowship program.

Background

A recent survey revealed that the barriers to evidence-based practice identified in 2005 still exist today in clinical settings (Pravikoff, Tanner & Pierce, 2005; Melnyk, Fineout-Overholt, Gallagher-Ford & Kaplan, 2012). Continuing barriers to EBP include users' deficiency of EBP knowledge and skills, limited resources to search for evidence, and perceived absence of administrative support. While EBP fellowships have been shown to reduce barriers to EBP there are little data on the long-term outcomes of fellowship programs (Kim, et.al., 2013). Evaluations of fellowship programs are often anecdotal or focus on changes in knowledge. Few articles describe the process used to evaluate the programs discussed.

Turkel et.al., (2008) developed a research fellowship and evaluated the program using a 10-item self-report questionnaire on participants' ability to perform skills. These authors also asked about the fellows' experiences during the fellowship. Kim evaluated a regional fellowship program using a preposttest design (Kim, et.al. 2013). Changes in knowledge, barriers, and perceived ability to perform EBP tasks were measured, but individual growth was not assessed. Wells et.al., (2007) conducted interviews to examine participants' use of EBP, professional development, and the unanticipated effects of a fellowship program, such as enhanced networking opportunities, 6 months after completing the fellowship program. At the time that evaluation occurred, nurses reported educational advancement, expanded perspective of the medical center, and increased commitment to nursing (Wells et.al. 2007).

These long-term outcomes are similar to the more immediate outcomes (e.g., increased knowledge of the research process, expanded understanding of professional role) reported by Turkel et al., 2008.

Recently, nurses engaged in the fellowship program related to this study described the program as a “life-changing” experience. The literature does not describe what is meant by “life-changing” or what that experience can mean to a health care organization. Thus, this project was conducted to explore the experiences of staff nurses that they attributed to participation in an EBP fellowship program.

Evidence-Based Practice Fellowship Program

The EBP Fellowship Program in this study was initiated in 1999 as a method to improve patient care through the use of EBP and to provide staff nurses an opportunity for professional development related to EBP. The EBP Fellowship is a year-long program designed to enhance skills in finding and using evidence to guide nursing practice. Fellows identify a topic of interest and learn how to form a practice question, search the literature, and apply findings to change practice. At the end of the year Fellows create a poster about their project to present at Nursing Research Day. Fellows in the program are guaranteed 8 hours of release time each month to attend successive didactic coursework to engage in EBP skill building exercises and facilitated project worktime.

Method

Focus groups were conducted to explore the professional and personal changes that occurred during and following the 1-year EBP fellowship program. Focus groups are recommended as an interview method to provide study participants a means to more fully express and expand on their experiences, remembrances and ideas (Melnyk & Fineout-Overholt, 2015). Three focus groups of approximately 90 minutes each were conducted over one week. The study was approved by the Institutional Review Board; written informed consent was obtained from all participants. The three focus groups were facilitated by a faculty member from the School of Nursing and a nurse educator from the hospital. Both facilitators were experienced group interviewers. In addition, an experienced researcher was present for the purpose of taking observational notes at each 90 minute session. Each group had 3 - 7 participants, which allowed ample time to respond to the questions we posed. The focus groups, though small, were composed of members with similar career experiences, thus facilitating interaction. The six primary questions (see figure 1) were structured with potential areas to probe within the question. The questions were written to elicit information about what, if any, changes occurred in participants’ behavior, thinking or practice after finishing the fellowship. Questions were reviewed by the research team for relevance and conceptual fidelity to the study’s purpose prior to the focus groups being held. The question route moved from general to more specific inquiries. Audiotapes from each focus group discussion were transcribed verbatim.

Setting

The focus group interviews were conducted at an urban academic medical center in the southeastern U.S. The Medical Center employs approximately 5,000 nurses who provide direct care. The fellowship program, in its current 1-year format, was started in 2007. Since that time, 22-35 nurses have been enrolled in the program annually; each year between 50 - 74% finish the 1-year program. Program completion rate seems to be highly dependent on both management and administrative support. The interviews were conducted in a conference room outside the medical center, which was easily accessible for participants and provided a neutral environment.

Sample

Participants for the focus groups were selected from a list of staff nurses who had completed the fellowship program since 2007. In addition, the staff nurses had to be employed at the Medical Center at the time of study enrollment. Potential participants were purposefully selected based upon the year of participation, their abilities to provide rich description of the fellowship experience, and decision of the EBP Fellowship Director. Twenty-nine staff nurses were invited to participate and 15 agreed to be a part of a focus group. The primary reason for refusal was scheduling of the focus groups. The staff nurses who participated completed the fellowship between 2007 and 2011. The participants worked in a variety of settings in the Medical Center, the Adult Hospital, the Children's Hospital, the clinics and perioperative services. Saturation was reached by the third focus group as evidenced by recurrence of themes.

Data analysis

The focus group transcripts were initially coded for themes by four research team members. After individual coding, the themes were shared and discussed among all team members. After this discussion, which involved defining the themes, each member re-coded the transcripts and then met again to review the coding and reach consensus on which areas of the text reflected specific themes. From these themes, the team proposed a model of how the themes might be related and/or integrated (Figure 2). A summary of the model was sent to the participants to ensure and confirm that the model reflected what they experienced as a result of the fellowship program. The participants agreed the summary description was consistent with their experience, providing verification that the thematic analysis reflected their experiences.

Results

The themes emerged as the transcript from each focus group was coded and discussed by the investigators. There were 7 themes defined and labeled after the first coding; these were refined and integrated into 5 themes after the second coding. Themes were defined based upon integration of transcript content and definitions found in the literature. These themes were: support, resources, knowledge, opportunity and empowerment. Each of these themes is further described here, along with quotes from fellows which align with the themes and reflect their experiences.

Support encompassed encouragement from within the program (mentors and participants) as well as external to the program (e.g., leadership, physician colleagues). These quotes reflect the types of support fellows perceived during the fellowship.

“All of my mentors were so encouraging – I don't think I have ever had a year where I felt so encouraged in what I was doing... it was pretty confidence building.”

“I think that managers were supportive of us. My manager came the first day for so many hours and sat with me... she would touch base with me...she helped answer some questions, she helped me get past some road blocks. I think it makes a big difference to have a manager on your side and supporting you and cheering you on.”

“They [physicians in clinic] understood that we were trying to solve the same problem they were faced with and they were all about helping me with that. They put me in contact with other people and then we kind of worked on that together.”

In addition to more experienced staff, the fellows created their own supportive network as they went through the program together. Although the content of the individual practice problem differed, the fellows shared a common goal of instituting practice changes that would result in better nursing care and patient outcomes. The connections made during the fellowship lasted well beyond the completion of the program.

Resources were the tangible items that could help the fellows as they moved along the practice change pathway. The most commonly identified resource was experts, those with the knowledge and skill to move their project along.

“They [the two nurse managers] gave me their resources – they didn't spend as much time with me, but they gave me what I needed to take back to the workshop and continue on with the project”.

In addition to the experts, there also are resources available to access the evidence. A focus was placed on the biomedical library as a source of evidence. During the program the fellows spent half a day on finding evidence using databases and search engines. The program not only introduced staff to experts across the medical center, it gave participants access to information that built the knowledge and skills necessary to implement practice change.

“The librarians would walk me through a lot of things and show me what resources were available...I was able to do some legwork on my own after that.”

Knowledge referred to the information gained through the didactic components of the program, consultation with expert resources and the “real world” experience gained through project development and implementation. There were many specific statements about the skills obtained during the program – for example, library and computer skills. Therefore, this theme was enlarged to encompass both knowledge and skill.

“Knowing how to do the research. I felt before the program that I really didn't know how to elevate my practice with the research because I didn't know what kind of research I was looking at.”

The fellowship program clearly met deficits in knowledge and skills; once these needs were met, the fellows described a shift in thinking to one of inquiry and critical analysis.

“...but walking through this fellowship I was able to face those fears [libraries, computers, resources], and learn those tools and use them. Since I got comfortable with certain librarians and certain computer programs, then I'd say, “I wonder why we do this? Why do we always do it at this time?”

Armed with support, resources and knowledge, the fellows experienced a confidence to complete a practice change project.

The concept of *opportunity* was identified by statements reflecting self-determination, a feeling of challenge, and being provided with an environment that fosters professional growth. Throughout the program, the fellows were given a chance to challenge themselves, to learn and grow, and to become more autonomous. The opportunities given to them included implementing their practice change, creating a poster presentation, and collaborating with leadership and other departments. The fellows recognized their potential to accomplish these milestones, which the team initially labeled self-actualization. After further reflection and discussion, this concept was re-labeled opportunity – the ability to take risks, accomplish tasks related to EBP, and ultimately to grow as a professional.

“...to participate in the fellowship opened up some new avenues and doorways and allowed me to think about things that maybe I didn't think I was empowered to even be a part of.”

Empowerment, in contrast to the confidence that grew from opportunity, was the belief that one can change practice; the individual has the autonomy and responsibility to act. This concept emerged during data analysis as we recognized the transition when the fellows realized they had the knowledge and skills to make changes. They could make changes and get results; this led to a heightened sense of curiosity, “If I can find out what I do and why, then what a difference I could make.”

That curiosity then led to questioning many things they had previously accepted without question.

“And after the fellowship, my perspective changed to one: I can do better; my area can do better; this institution can do better: and where is my role in it? And so my thought process of nursing sort of change and I said I want more”

Several of the fellows were inspired to return to school and continue their education; others became more involved in the hospital via committees or completed other leadership courses. A number of fellows presented their projects at regional and national conferences and some even had their projects published.

“I did not realize that I had any leadership skills, and that you can mentor others around you. It [the fellowship program] brought that out.”

The support, resources, knowledge and opportunities laid the foundation to create a sense of empowerment. The themes were conceptualized as building blocks toward growth of the nurse as an active professional. The changes may be best summed up by this participant:

“...being in that program showed me that the changes I wanted to make are possible and there is help and support and encouragement, and I can do it even if there is negativity.”

Discussion

The findings from this study describe a process of professional and personal development that resulted from experience during the year-long fellowship program. Fostering an environment focused on improving nursing practice and patient care that includes elements of support, resources, knowledge, and opportunity will result in nursing staff who feel empowered to make changes in practice. This transformation following a structured education program has not been previously described. This process of becoming empowered explains some of the long-term outcomes of a fellowship program in terms of professional growth. Although not the intent of this study, participants' narratives supported a logical relationship between Kanter's (1993) theory of structural empowerment and the attributes gained from the EPB fellowship program. Structural empowerment is described as determinants that influence behavior in organizations. According to Kanter's theory, empowerment is fostered in organizations that provide employees with access to support, resources, information and opportunity. Nurses described the support, resources, information (i.e., knowledge gained through didactic and skill components of the program) and opportunity provided in the EBP fellowship program, as cultivating empowerment. Professional empowerment is described as a heightened self-awareness of professional status, expertise and abilities (Manojilovich, 2007). Nurses attributed their perceived professional empowerment, gained through the fellowship, as contributing to a more meaningful and professional practice environment.

Support

Kanter (1993) noted that employees require support in order to function with optimum effectiveness in meeting organizational goals. Participants in this study identified several significant sources of structural support related to the fellowship. Ongoing support from supervisors and the EBP fellowship staff, especially fellowship mentors, was a primary influence for completing the fellowship. Reassurance from others within the organization such as physicians and Advanced Practice Nurses was viewed as beneficial and support from peers within the program was a critical source of inspiration to fully engage in the program.

Resources

Access to structural empowerment resources refer to an individual's ability to secure material, money, time, and equipment needed to achieve organizational aims (Kanter, 1993). Laschinger, Almost & Tuer-Hodes (2003) found that access to resources is the most strongly related empowerment structure to nurses' control over practice. In this study, access to

resources was repeatedly identified as an important component for success in achieving desired outcomes associated with the EPB Fellowship. Participants reported that having adequate resources and the requisite skills to use those resources allowed them to be more self-directed, thereby increasing their abilities to be inspired, industrious and effective in approaching and solving clinical concerns.

Information

According to Kanter (1993) empowerment is facilitated when employees have access to open lines of information about all facets of the organization. The researchers conceptualized information as knowledge and skills gained in the program as critical building blocks for success. As ability and confidence increased, the fellows' perception of the organization changed. Participants in this study reported the fellowship program enhanced their understanding of the medical center and became more engaged in meeting the medical center's goals and expectations. This transformation may have occurred because the fellows had greater access to organizational information through contacts made during the program.

Opportunity

Kanter noted an implicit organizational understanding that people do not mean much to the organization unless they get the chance to develop and advance. Opportunity is important because it allows employees to demonstrate out-of-the-ordinary capabilities, thus to be seen as successful and promotable (Kanter, 1993). Clearly, the fellowship offered participants a wide variety of opportunities to use new knowledge and skills for accomplishing meaningful organizational goals. The fellowship opportunity promoted confidence in many fellows to accomplish out-of-the-ordinary initiatives that brought them recognition beyond their area of practice.

Empowerment

Across the literature, empowerment is defined as the ability to get things done (Irvine, Leatt, Evans & Baker, 1999; Kanter, 1993; Knol & VanLinge, 2009). Kanter (1993) views empowerment as arising from four structural components (i.e., support, resources, information, opportunity), thereby enabling employees to be engaged in more satisfying and effective work-related activities. The degree of employee empowerment is dependent on the extent to which the four structural components are present in the work environment.

Empowerment research has demonstrated many positive benefits relating directly to staff nurses. For example, empowered nurses tend to be highly motivated and as a consequence tend to motivate co-workers (Knol & VanLinge, 2009; Laschinger & Havens, 1996). Empowered nurses experience less job strain (Laschinger, Finegan, Shamian & Wilk, 2004) and less "burnout" (Laschinger & Havens, 1996) both costly outcomes for health care organizations. Most important, empowered nurses, who work closely with patients, are necessary if they are to be active participants in reaching organizational goals.

Participants in the current study were highly motivated to question and improve practice; this level of motivation or passion for the work led to a process of *empowering others*. Consistent with the empowerment literature, these staff nurses were positive and optimistic about the nursing practice and none of the participants showed signs of weariness with the program, such as absenteeism. The sense of empowerment was strong and consistent across all focus groups, suggesting that the four components of structural empowerment were present in the work environment.

Limitations

There are methodological limitations in this study. The possibility of missing key informants, due to the limited time focus groups were offered, is a concern. However, these informants were accustomed to conversing in groups and were comfortable expressing their experiences in the fellowship program. The lived experiences of those in this EPB fellowship program may differ from those in other fellowship programs.

Conclusion

This is the first study to qualitatively explore the “life-changing” manifestations of nurses in an EPB fellowship program. In conclusion, the participants in the study indicated that their sense of empowerment arose through support, knowledge, resources and opportunity provided by the EBP Fellowship. Participants’ narratives support the linkage between Kanter’s (1993) empowerment structures and staff nurses who are fully engaged in meeting and surpassing both professional and organization standards. Nursing and health care administrators should consider the themes of this study as important indicators for the establishment and maintenance of active EBP Fellowship programs. An understanding of the themes and their importance to EPB Fellowships may help to retain highly qualified and satisfied nurses within the organizations workforce.

The findings of the study have specific implications for the Nursing Professional Development Specialist (NPD). A primary role of the NPD specialist is to engage nurses in developing and maintaining lifelong learning skills and competencies to help advance the nurse’s professional practice. EBP Fellowships enable nurses to validate their competencies by engaging in important evidence-based practice projects that ultimately improve patient care. This study suggests that EPB fellowships are one method the NPD specialist may use to foster confidence in nurses.

Future research, based on this study’s findings, should explore explanations for those nurses who do not complete EBP fellowship programs. Exploring explanations for program attrition may provide information on how to better retain nurses in EBP fellowships and may also provide key insights into selecting program candidates who will be most successful in completing EBP projects. Future research should also explore other methods of successfully designing and delivering EBP fellowship programs. For example, the use of technology to provide the EBP fellowship in a distance or off-campus format. In conclusion, future studies should also focus on how to best educate nurse leaders in providing the most supportive

environments to enable staff to both participate and successfully complete the EBP fellowship programs.

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Focus Group Questions

Icebreaker: Please share with the group your name, clinical area where you work, how long you have worked in that area, and what year you were in the Fellowship Program.*

*Audiotaping will begin after the Icebreaker Question

Opening/Engaging:

1. What was your favorite part about the Fellowship Program?

Exploratory:

2. Following the fellowship program how did your perception and outlook on nursing practice change?
3. Everyone is in a different stage of their careers, we would like you to think about how the Fellowship Program helped you to advance to the next stage of your career.
4. What characteristics do you notice about people who have been through the Fellowship Program compared to others who have not been through the Fellowship Program?
5. What intrinsic changes did you experience as a result of the Fellowship Program?

Expiration:

6. Is there anything else you would like us to know about the fellowship program and how it has affected your career.

Figure 1.
Focus Group Questions

Figure 2.
Structural Empowerment Themes