

Evidence Based Practice
Are you putting evidence
into practice?

Challenges and Strategies

A blue, multi-pointed star shape with a white outline, containing the text 'RCOT Conference 2019' in white.

RCOT
Conference
2019

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Retired Occupational Therapist
NICE Fellow 2016- 2019

Introduction

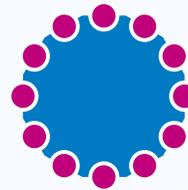
- Occupational Therapist - Neuro Rehabilitation and Social Care
- Established a new service in 1984 for WSCC becoming head Operations Independent Living. Retired September 2014
- Member of RCOT and WFOT
- ✓ RCOT regional committees x5 , RCOT Membership Board
- ✓ RCOT Council 2004 -2006
- ✓ RCOT Chair of Council 2006 – 2009
- Presented nationally and internationally about EBP
- NICE Guideline Committee Chair 2015/8 and NICE Fellow 2016/9

Definition

‘EBP requires that decisions about health and social care are based on **the best available, current, valid and relevant evidence**. Decisions should be made by those receiving care, informed by the tacit and explicit knowledge of those providing care, within the context of available resources’

Bannigan & Birlesdon 2007

Professional and Political Drivers



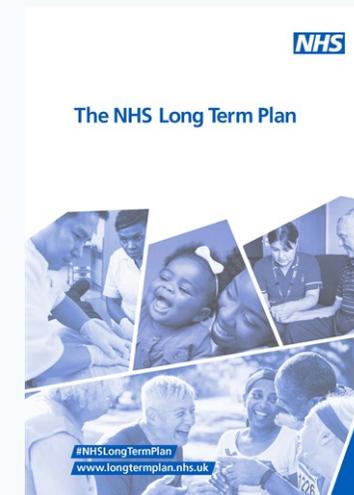
Allied Health Professions
into Action

Using Allied Health Professionals to
transform health, care and wellbeing.

2016/17 - 2020/21

#AHPsintoAction

NHS
England



NICE National Institute for
Health and Care Excellence

Improving health and social care through evidence-based guidance



02/06/19

NICE Fellowship Project

Posed 4 questions

- Do you use NICE guidelines in your everyday practice? If yes, what is your experience?
- If no, what are the challenges?
- How could NICE guidelines be made more accessible to Allied Health Professionals?
- What is your overall approach to incorporating evidence into your practice?

Three Themes



02/06/19

Evidence Based Practice and Evidence Informed Practice

- Evidence based medicine is the conscientious, explicit and judicious use of best evidence in making decisions about the care of individual patients
- Evidence informed practice implies that there are many different levels of evidence needed and used to support decision making and that ‘some of our conventional wisdom and common sense can be used to achieve a more person centered approach’

Evidence based practice v Evidence informed practice: What's the Difference?

M Gail Woodbury BScPT MSc, PHd and Janet Lkuhnke RN,BSN, MS, ET
Research 101 Vol 12 Number 1 2014

Discussion

- What do you do to overcome barriers
- How does your organization facilitate EBP/ EIP

Pause!

Strategies

Create Time

Use organisational processes and structures

Develop a culture of enquiry

Find a buddy, role model, leader to support you

Collaborate

Shadow an expert

Use RCOT CF

10 Commandments

- Ensure there is a consensus statement for current practice
- Check that practice is in line with this
- Keep appraisal skills current
- Question custom and practice
- Question new ideas and expect evidence to be provided
- Avoid implementing novel ideas without evidence
- Take responsibility for education others
- Take responsibility for finding evidence
- Keep up to date within your specialism
- Remember to include users views and expertise alongside clinical evidence



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And any questions ?

References

- Taylor M C 2007 Evidence Based Practice for Occupational Therapists 2007 Wiley Blackman 2nd Ed
- Trinder L, Reynolds S, Evidence Based Practice, A Critical Appraisal, Blackwell Science 2000
- Lipton D, Stephens D, Williams B, Scuslock-Lewis L 2014 Occupational Therapists Attitudes, Knowledge and Implementation of Evidence Based Practice - A systematic Review of Published Work British Journal Occupational Therapy 2014 V77 pp24-38
- Bannigan K, Birlesdon A 2007 Getting to Grips with Evidence Base - The Ten Commandments British Journal Occupational Therapy V70 pp345 – 348
- Woodbury M Gail & Kuhnke JL RN,BSN, MS, ET Evidence based practice v Evidence informed practice: What's the Difference? Research 101 Vol 12 Number 1 2014