Evidence-Based Practice

What is it & what do we do with it?

March 16th, 2006
What do we think EBP means?
Some Definitions:

EBP “is the integration of best research evidence with clinical expertise and [client] values”
Sackett, Straus, Richardson, Rosenberg & Haynes (2000). *Evidence-Based Medicine: How to practice and teach EBM (2nd ed.)*

“It is the conscientious, explicit and judicious use of current best evidence in making decision about the care of individual [clients]”
Sackett, et al. (1997)
Definitions, cont.

Gilgun’s 4 ‘Cornerstones’ of EBP:
1. Research and Theory
2. Practice wisdom, or what we and other professionals have leaned from our clients
3. The person of the practitioner (personal assumptions, values, biases and world views)
4. What clients bring to the situation

Definitions, Cont.

Practice that is informed and ‘mindful’ of:

- Best available research evidence;
- Best Clinical Experience;
- Client values and preferences.
EBP Key Issues:

- **Transparency**: How much information on the evidence do we give beginning practitioners? Experienced practitioners? Clients?

- **Critical Thinking**: How do we encourage this? What happens when staff or trainees do not exhibit this?

- **Falsification** – A willingness to seek information that challenges our understandings and an openness to contradictory evidence. How do we encourage this without creating confusion when there is little evidence?
The process of Evidence-Based Practice - 5 steps:

**STEP ONE: What do we want to know? What are the questions?**
- Convert information needs related to practice decisions into answerable questions

**STEP TWO: What evidence is there?**
- Track down the best evidence with which to answer them

(Sackett et al., 2000, pp.3-4), Courtesy of Eileen Gambrill, UC Berkeley School of Social Welfare
The process of Evidence-Based Practice - 5 steps:

**STEP THREE: What is the quality of the evidence?**
- Critically appraise that evidence for its validity, impact (size of effect) and applicability (usefulness in practice)

**STEP FOUR: How do we use the evidence to make decisions?**
- Apply the results of this appraisal to practice/policy decisions.
- This involves deciding whether evidence found (if any) applies to the decision at hand (e.g., is a client similar to those studied, is there access to services described) and considering client values and preferences in making decisions as well as other application concerns
The process of Evidence-Based Practice - 5 steps:

**STEP FIVE: How did this work?**

- Evaluate our effectiveness and efficiency in carrying out steps 1-4 and seek ways to improve them in the future.
How does training fit in?
Further study identified

Unified Research Agenda Developed at EBP Symp.

CWS Research Projects Chosen, Funded

Initiate Research - Multiple Sites

Findings from Research Gathered & Analyzed

Findings Integrated into University Education and In-Service Training Content

Findings Disseminated Via EBP Symp.

Evidence Based Practice

University/Counties Study Practice After E & T Intervention

University/Counties Study Outcomes for Children/Families

Education & Training Intervention Occurs

Further Study Identified
Group Discussion No. 1: How do we get across the concepts of EBP in our training?

- What do we think the CWS workforce thinks or knows about EBP? What is the general attitude of the workforce toward research and evidence?
- What message do we want to get across to the CWS workforce about evidence-based practice?
- Do supervisors need any additional message? Managers?
- What steps can we take to prepare our trainers to effectively deliver these messages?
- What are the barriers to getting this message across? How can we address these barriers?
- Are there any curriculum products that are needed about EBP?
- What next steps should we take as a state to build awareness of EBP concepts (be as specific as possible)?
Group Discussion No. 2: How do we infuse our training with the latest evidence?

- What do we do now to infuse our curriculum and training with the latest evidence on practice?
- What might we do in the future to improve our efforts?
- What additional capacity do we need to get more evidence into our curriculum and training (include statewide and regional capacity)?
- What specific training areas might we target for inclusion of more research and evidence?
- What specific next steps can we take (statewide and regionally)?
Group Discussion No. 3: How do we build upon the evidence about training methods?

- What current evidence do we have and use about effective training methods?
- What do we need more evidence about? (Try to formulate questions that can be answered via research.)
- What are we doing now to build evidence about effective delivery of training?
- What are the barriers to implementing more evidence-based training methods? How can we address these barriers?
- What specific next steps can we take to build more evidence about training methods?
For more information about EBP and training:

http://calswec.berkeley.edu/