Evidence-based practices in Finland based on nurse professionals’ descriptions

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ABSTRACT

Aim: Evidence-based practices (EBPs) seek to promote the implementation of interventions that are effective, appropriate, feasible and meaningful for patients. The current demand for updated EBPs in Finland is shaped by national legislation. This study’s aim was to describe nurses’, nurse directors’ and clinical nurse specialists’ (CNSs’) perceptions of how well EBPs are being implemented in nursing in Finland.

Methods: In this quantitative descriptive study, the data were collected with an e-questionnaire distributed in Finland in 2017 and analysed using descriptive statistical methods.

Results: A total of 1063 nurses and 340 nurse directors and CNSs participated. The majority of nurses (64%, n = 669) reported that evidence is not clearly used to develop clinical practices. Most nurses (67%, n = 702) and over half of nurse directors and CNSs (57%, n = 184) also observed that knowledge of evidence-based protocols is not widespread within their organizations. However, 39% of nurses (n = 407) and 53% of nurse directors and CNSs (n = 171) stated that they are developing EBPs.

Conclusion: The results indicate that nurses need more support to implement EBPs.

Key words: decision-making, evidence-based practice, health care, implementation, nursing


Background

Finland’s Healthcare Act1 asserts that ‘healthcare shall be based on evidence and recognized treatment and operational practices’. Evidence-based practice (EBP) seeks to provide safe, high-quality services to all individuals2 by ensuring nursing interventions are effective, appropriate, feasible and meaningful.3 A key aspect of EBP is the minimization of interventions and practices subject to unjustifiable variations between different organizations or care providers.4,5 Consistent practices across organizations and health professionals increase healthcare’s efficiency and quality and patient safety.2

Finland’s Ministry of Social Affairs and Health published the Action Plan for Nursing6 to support implementation of EBP in healthcare. The Nursing Research Foundation (NRF) also promotes EBP in nursing at the national level. The following article is based on a previously published report” (in Finnish), which presented a nationwide survey’s results concerning EBP implementation.

Methods

The current study’s aim was to describe nurses’, nurse directors’ and clinical nurse specialists’ (CNSs’) perceptions of how well EBPs are being implemented in nursing in Finland.

The NRF together with the Finnish Nurses Association collected data on this topic in 2017 using e-questionnaires, one separately for nurses and the other for nurse directors and CNSs in both Finnish and Swedish. The survey was distributed to nurses, nurse directors and CNSs via e-mail after permission was received from the relevant trade unions to use their registers in the study.
The questionnaire was developed based on the Action Plan for Nursing and previous related research. Some items were based on the internationally validated Evidence-based Practice Process Assessment Scale, so permission to use parts of the scale was obtained from the copyright holders. The data were analysed with descriptive statistical methods (i.e. frequency and percentage) using the Statistical Package for Social Sciences Statistics for Windows version 22.0 (IBM, Armonk, New York, USA).

Results
In total, 1063 nurses and 340 nurse directors and CNSs participated. The respondents’ characteristics are presented in Table 1.

Most nurses are confident of their competencies regarding EBP, such as how to find the best available evidence (70%, n = 730) and how to determine the need to improve current practices (76%, n = 786). Less than half of the respondents (43% of the nurses, n = 452; 49% of the nurse directors and CNSs, n = 158) reported that the requisite evidence on which to base their organizations’ clinical practices is available. Approximately one-third (37%, n = 118) of the nurse directors and CNSs asserted that availability of research evidence has been ensured. In addition, the majority of nurse directors and CNSs (63%, n = 204) perceived that their organizations consider EBPs a strategic goal.

However, most nurses (64%, n = 669) indicated that evidence is not used in clinical practices’ development. The nurses also reported that the current practices followed to disseminate evidence (65%, n = 679) and implement EBPs (66%, n = 687) are impractical.

The majority of nurses (67%, n = 702) and over half of nurse directors and CNSs (57%, n = 184) perceived that knowledge about evidence-based protocols is not circulated within their organizations.

The survey revealed variations in the nurse directors’ and CNSs’ opinions. Half of those who worked at university hospitals (50%, n = 30) and more than half of those employed by central hospitals (54%, n = 42) and primary healthcare, private or tertiary sector (62%, n = 111) asserted that knowledge about evidence-based protocols is not distributed to employees by their organizations.

Nonetheless, 39% of nurses (n = 407), and 53% of nurse directors and CNSs (n = 171) reported that they are developing clinical practices based on evidence. More than half the nurses (55%, n = 568) perceived that treatment instructions are evidence-based. Furthermore, approximately half of nurse directors and CNSs (51%, n = 163) also felt that their organization is committed to implementing evidence-based clinical guidelines.

Almost all nurse directors and CNSs (86%, n = 262), however, asserted that they do not have time to assess the implementation of EBP. Although nurses understand how to evaluate their work-related results (83% , n = 862), only a few have enough time to conduct assessments (39%, n = 412).

Discussion
The results show that evidence is utilized in some form in nursing to improve current practices. The nurse professionals’ answers highlight that their attitudes towards EBP are positive, but evidence is still not sufficiently implemented. These findings are in line with previous studies.

In addition, the results confirm the need to re-examine the practices used to ensure evidence’s availability. Previous studies have also acknowledged that easily available evidence is needed. One possible solution

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Table 1. Characteristics of the respondents (N = 1403)

<table>
<thead>
<tr>
<th>Characteristics of the respondents</th>
<th>Nurse, n (%)</th>
<th>ND, n (%)</th>
<th>CNS, n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work experience in nursing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>≤4 Years</td>
<td>101 (10)</td>
<td>0 (0)</td>
<td>1 (1)</td>
</tr>
<tr>
<td>5–10 Years</td>
<td>208 (20)</td>
<td>20 (8)</td>
<td>10 (14)</td>
</tr>
<tr>
<td>11–20 Years</td>
<td>335 (32)</td>
<td>54 (23)</td>
<td>18 (26)</td>
</tr>
<tr>
<td>≥21 Years</td>
<td>402 (38)</td>
<td>167 (69)</td>
<td>41 (59)</td>
</tr>
<tr>
<td>Total</td>
<td>1046 (100)</td>
<td>241 (100)</td>
<td>70 (100)</td>
</tr>
<tr>
<td>Work experience as a director/specialist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>≤4 Years</td>
<td>0 (0)</td>
<td>50 (21)</td>
<td>22 (37)</td>
</tr>
<tr>
<td>5–10 Years</td>
<td>0 (0)</td>
<td>69 (28)</td>
<td>24 (33)</td>
</tr>
<tr>
<td>11–20 Years</td>
<td>0 (0)</td>
<td>87 (36)</td>
<td>13 (18)</td>
</tr>
<tr>
<td>≥21 Years</td>
<td>0 (0)</td>
<td>37 (15)</td>
<td>9 (12)</td>
</tr>
<tr>
<td>Total</td>
<td>0 (0)</td>
<td>243 (100)</td>
<td>73 (100)</td>
</tr>
</tbody>
</table>

CNS, clinical nurse specialist; ND, nurse director.
could be to develop further information technologies supporting EBP.\textsuperscript{15}

The findings indicate that nurses evaluated the implementation of EBP as weaker than nurse directors and CNSs did. However, the e-questionnaires were distributed to over 50,000 nurse professionals, so the response rate was quite low. The participating nurses, nurse directors and CNSs also were from different organizations, which may have influenced the results.

**Conclusion**

Nurse professionals in Finland have positive attitudes to EBP, although the survey’s results indicate that nurses need more support to implement evidence fully to improve practices. The plan is to conduct this nationwide survey again every 2–3 years, to follow how much EBP implementation is improving.

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**Conflicts of interest**

The authors report no conflicts of interest.

**References**