Getting guidelines into practice: lessons learned as Best Practice Spotlight Organization host

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ABSTRACT

Background: The Spanish Best Practice Guidelines (BPG) Implementation Project is part of the Best Practice Spotlight Organizations international program, coordinated by the Registered Nurses’ Association of Ontario (RNAO).

Aims: To influence the uptake of nursing BPG across healthcare organizations, to enable practice excellence and positive client outcomes.

Methods: After translating the RNAO’s BPG into Spanish, the Host Organization published a formal call for proposals to select healthcare settings in Spain to implement the RNAO’s BPG and evaluate the results. The approach is nursing-led and multidisciplinary; context specific; and involving a wide range of stakeholders. The implementation of BPG Toolkit guides the process: cascade training, selection of recommendations to be implemented, 3 years of planned implementation activities, monitoring of process and outcome results for patients discharged 60 days every year. The Host Organization supports healthcare settings selected.

Results/Discussion: The first call was launched in 2012. Eight healthcare settings (11 sites), serving 1.3 million people, were selected (hospitals and primary healthcare centers). They chose 10 BPG, according to their needs. In 2015 and 2018, 16 more healthcare settings have joined the program with a total of 263 sites. And in 2019, three complete regions will join the program as a regional host. Currently, more than 3200 nurses and 40 other healthcare professionals have been trained, evidence-based protocols have been developed or updated, patient education has been promoted, and international Best Practice Spotlight Organizations indicators have been evaluated in an electronic platform.

Conclusion: The results obtained acknowledge that the RNAO implementation method could be replicated with success internationally. The strategies based on local context have worked and we have consolidated a network that shares knowledge and strategies and promotes evidence-based culture among Spanish healthcare settings and evidence-based care to patients.

Key words: Best Practice Spotlight Organizations, evidence implementation, evidence-based guidelines, Registered Nurses’ Association of Ontario

Int J Evid Based Healthc 2019; 17:S15–S17.

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DOI: 10.1097/XEB.0000000000000178
The Nursing and Healthcare Research Unit (Investén-isciii) and the Spanish Centre for Evidence Based Nursing and Healthcare applied, in 2010, as a BPSO Host, to initiate the BPSO Program at national level. This program is demonstrated to have an impact on health structures, organizational concerns, process and patients’ outcomes.

**Aim**

The project aimed to influence the uptake of nursing BPGs across healthcare organizations, to enable practice excellence and positive client outcomes.

**Methods**

In 2011, the Host Organization published the first formal call for proposals to select healthcare settings in Spain to implement the RNAO’s BPG, once they have been translated into Spanish. The implementation of BPG Toolkit guides the process.

The Spanish BPSO Program is based on four strategies:

1. **Translation of BPG into Spanish**: Investén-isciii translated RNAO’s BPGs for use in the Spanish context, in partnership with RNAO, establishing quality criteria for translation.
2. **Dissemination**: On-line access to BPSO Program information, social media launches and informative sessions were means for drawing attention to opportunities of participation.
3. **Implementation and Evaluation**: The Spanish BPSO Host launched, in 2011, the first call for proposals through a competitive application process, selecting healthcare settings for implementing RNAO’s BPG and evaluating the results (first cohort). This approach is nursing-led and multidisciplinary; multipronged in strategy; context specific; and involves a wide range of stakeholders. The toolkit: Implementation of BPG guides the process with cascade training, selection of recommendations to be implemented, a 3-year schedule of planned implementation activities, and monitoring by measuring process and outcome results for discharged patients 60 days a year. The Host Organization supports healthcare settings selected.
4. **Sustainability**: Supporting the maintenance and scaling-up BPG implementation, creating a national BPSO network of becoming part of the international network.

Evaluation is one of the key pillars of the program. For this purpose, ‘Data Dictionaries’ have been developed to document and report on the Nursing Quality Indicators. RNAO’s Nursing Quality Indicators for Reporting and Evaluation (NQuIRE) provides the evaluation mechanism and process to monitor BPG implementation by BPSO. To adapt evaluation to country requirements, the Spanish BPSO Host developed a specific database, CarEvID, to measure the structure, process and outcomes of BPG implementation in Spanish organizations. Together RNAO and the Spain BPSO Host have analyzed minimum data set applicability and established procedures to transfer data from the national nursing database CarEvID to the international platform NQuIRE.

All BPSO collect baseline data, from the month prior to their official beginning as BPSO candidates. Data are then collected on the last 5 days of every month, except for low-prevalent cases, such as ostomies, in which all patient cases are measured. Descriptive analysis of variables is analyzed by CarEvID and reported monthly to institutions.

**Results/Discussion**

For the first cohort, out of 33 organizations attending the call, eight healthcare settings caring for 1.3 million people, were selected. They are located in seven regions including hospitals and primary healthcare centers. Overall, the eight BPSO implemented 10 BPG, according to the needs at each institution. Among 26 available guidelines, the most selected BPG were Ostomy Care and Management, Prevention of Falls and Fall Injuries in the Older Adult, Breastfeeding, and Assessment and Management of Pain.

From 2012 to 2014, BPSO candidates engaged and trained health practitioners in implementing the selected guidelines; reviewing and updating protocols and procedures; monitoring and evaluating their utilization, and reporting data to Investén-isciii and RNAO. Upon successfully attaining all of the deliverables, they earned their BPSO Designation in 2015. Designated organizations continue to receive support from Investén-isciii and RNAO, and renew their designation every 2 years.

In late 2014, a second open call for BPSO candidates was published, in which 10 out of 60 organizations were selected to begin implementation during 2015. Considering both cohorts, 16 BPG are currently being implemented. Even if the characteristics of the new cohort organizations differ from the former, the feeling of leaders and champions remains encouraging.

Finally, in 2018, a third cohort joined the program – from 25 interested organizations eight new sites were selected, which will implement 15 BPGs.

At present, we have managed to involve 26 organizations representing 271 healthcare sites across Spain. Figure 1 shows the map of the 263 BPSOs currently implementing guidelines in Spain.

Nowadays, CarEvID includes more than 8000 falls prevention-related records, 3000 records of assessment
and management of pain, 1500 breastfeeding-related records, 700 ostomy care-related records and 200 stroke assessment-related records. The impact of the program in Spain is observed in many areas:

(1) New organizational structures have been created or promoted that serve to embed evidence-based culture into the organization.

(2) More than 3200 nurses and other healthcare professionals have training in implementation, or specifically in each BPG’s recommended interventions. Their training has resulted in harmonization of interventions, development or update of evidence-based protocols, promotion of patient education and evaluation of international BPSO indicators using an electronic platform.

(3) One of the most important results is the harmonization of records. As clinical records are established at a regional level, any change influences all healthcare organizations, thus suggesting a wide spread of BPG implementation in the future.

(4) Some of the major findings include the improvement of process and outcome indicators. The three most selected guidelines were falls prevention (11 BPSOs), ostomy care (nine BPSOs) and breastfeeding (nine BPSOs), whose results showed significant improvements when comparing baseline measures to the 3rd year postimplementation data.

Acknowledgements

Conflicts of interest

The authors certify that they have NO affiliations with or involvement in any organization or entity with any financial interest, or nonfinancial interest in the subject matter or materials discussed in this article.

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