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Challenges of Applying Evidence -Based Practice in Nursing: Subject Review

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Abstract

That applying evidence-based practice enhances nursing practice, increases confidence in decision-making, and provides better patient care overall. To address clinical issues related to patient care, EBP integrates well-designed evidence with client preferences, evaluations, and providers of healthcare. The intent of this review is to look into the difficulty's nurses have when putting evidence-based practice into practice. Therefore, by identifying some of the hurdles to the adoption of EBP among nurses, health care systems can devise strategies to assist medical facilities in avoiding such issues and implementing the approach among healthcare providers. Plenty of studies have been carried out to look at the obstacles preventing the worldwide roll out of (EBP). There hasn't been any research on the subject in hospital or primary healthcare settings in Iraq. Analysis of the current state of (EBP) in nursing is the goal of this essay. The paper includes a description of how EBP works as well as an account of the history and development of EBP. The present obstacles that the nursing profession faces in implementing (EBP) into healthcare delivery are examined, and strategies to overcome these obstacles are also discussed.

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Introduction

The term "evidence-based medicine originated in the 1980s and refers to the methodology that employed scientific evidence to determine the optimal course of action. Later, the term was changed to EBP "as clinicians other than doctors came to understand the importance of scientific evidence in clinical decision-making". Although there have been several definitions of (EBP) put forth in the literature, the definition that is most widely accepted is "the conscientious, explicit, and judicious use of the current best evidence in making decisions about the care of individual patients" ^[1]. The experts then discussed the subject of evidence-based healthcare. This strategy entails applying research findings to inform choices concerning a particular patient population or group. When assessing the evidence, both EBP and EBH take the patient's preferences, the clinical setting, and the doctor's training into consideration. They also expect medical professionals to be able to read, interpret, and summarize research findings in addition to understanding the most recent evidence-based clinical practice guidelines. The majority of medical staff are nurses, and they play a critical role in enhancing care and advancing health ^[2]. EBP has grown in importance within the nursing field and has been incorporated into routine practice ^[3]. It is crucial for the professional development, accountability, and competencies of nurses ^[4]. Furthermore, nurses who use scientific evidence to guide their practice have improved their decision-making skills when it comes to providing services ^[5]. Even though nurses generally have positive attitudes and beliefs about evidence-based practice (EBP) ^[6], prior research indicates that nurses have limited use of EBP and are not sufficiently familiar with its principles ^[7].

The beliefs and application of EBP among Iraqi nurses have not been extensively studied. Additionally, the Iraqi nursing care system does not encourage nurses to conduct research, and the majority of nurses were not conversant with the idea of evidence-based practice ^[8].

Considering that nurses make up the majority of healthcare professionals in the system, they are essential in both promoting health and offering top-notch services. Because it affects nurses' competencies, responsibilities, and professional growth, evidence-based practice (EBP) has grown in importance within the nursing field and is being incorporated into routine procedures. When it comes to providing services and care, nurses who are recognized for basing their decisions on scientific evidence are more adept at making decisions. Even though the method is known to increase professional satisfaction, it is not being used consistently. The healthcare environment has changed as a result of research strategy development. The transition to evidence-based practices from class practices is not too difficult for nurses with experience or novices. To guarantee that EBP is appropriately incorporated into the healthcare system, a number of adjustments must be made to the way nurses treat their patients with high-quality care^[9].

Discussion

In the healthcare industry, many nurses find it challenging to apply EBP as a problem-solving method. Therefore, the goal of this study was to compile and organize the findings of several studies carried out in this area in order to identify potential obstacles and opportunities for incorporating evidence-based practices into nursing practice and to create helpful recommendations.

Alqahtani *et al.* (2022)^[10] looked at potential barriers to the use of EBP in primary healthcare in Riyadh. The results of the current study showed that when trying to apply (EBP), nurses had encountered some organizational challenges. These difficulties encompassed not having the authority to alter patient care protocols, not having enough time to devote to research, not being able to apply research findings to the nursing organization, inflexible primary care physicians, and subpar facilities. This suggests that they have been unable to incorporate EBP into their professional practice in primary healthcare settings because of these difficulties. However, the nurses acknowledged the value of research and their confidence in its practical applications, so they are willing to try new things or make changes in order to apply EBP. Furthermore, the study shows that depending on their job title, gender, and level of education, primary healthcare nurses encounter various challenges when attempting to implement evidence-based practice (EBP).^[10]

The conclusion of the study, written by Hunt L., 2024 adds to our knowledge of a subject that has not gotten much attention by highlighting the special and difficult experience that nurses have when they are admitted as clients. While there are some aspects of nurse-patient experiences that are similar to those of non-healthcare specialists, this review focuses on some distinctive aspects that seem unique for patients who are not nurses. It will be simpler for nurses to think critically about providing care and raising the standard of care if they are aware of the distinctions and similarities between patients who are not medical professionals and nurses. It can be challenging to ascertain what particular skills or preparations nurses might need in order to care for patients who are also healthcare professionals due to the paucity of resources on this topic. In order to better understand how to meet the specific needs of medical individuals who are also clients, future studies should concentrate on the observations of nurses who provide care for other healthcare professionals^[11].

In 2021, Kerr H. and Rainey D. conducted a study in Northern Ireland that revealed (EBP) is a global phenomenon that improves clinical effectiveness, best practices, and quality of care. Despite the fact that the idea of an (EBP) approach is still relatively new to the healthcare industry, there has been a push to recognize its advantages and integrate it into routine practice. Even though (EBP) is at the top of the national healthcare agenda, not all healthcare settings have fully embraced EBP. It is difficult to come up with original ways to help nurses apply EBP in clinical and educational settings. The global COVID-19 pandemic points out how important it is to ensure that healthcare delivery is evidence-based, as novel research necessitates a quick and thorough review prior to conclusions being put into practice. This will facilitate the growth of a profession that significantly helps with optimizing favorable patient outcomes and makes decisions with a greater amount of autonomy. When developing their roles, nurses' increasing autonomy in decision-making and clinical judgment must be taken into account. Helping them find, assess, apply, and integrate evidence with clinical expertise is part of this.^[12] The implementation of EBP should be facilitated by nursing administrators and educators, according to a 2020 Saudi Arabian study conducted by Alatawi *et al.* Consequently, the review's conclusions help nursing administrators get past the obstacles that have been found. The implementation of EBP can be made easier by giving nurses enough supervision, scheduling nursing time, supplying them with the tools they need, and advancing their level of education and training in nursing. Every one of these components raises the bar for care. Future studies would benefit greatly from examining the typical barriers to EBP in a given culture, such as the Middle East. Furthermore, studies in the future may focus on barriers to EBP implementation that impact patients and their families^[13].

Ultimately, the study conducted in Iran (2014) came to the conclusion that organizational and individual barriers exist when it comes to the application of EBP. EBP is a measure of quality in nursing practice. Therefore, it is advised that Iranian nurses become familiar with EBP. Understanding the obstacles will also assist the health care system and policy makers in addressing them and fostering an environment of EBP^[14-17].

Conclusion

The analysis revealed that the Although EBP is at the forefront of the national healthcare agenda, its application in hospitals and nursing homes is still relatively limited. Despite the established advantages, there is a claim that EBP is not the standard for care that is used internationally. Numerous authors have identified a major obstacle to the EBP process as organizational factors, such as a lack of time for gathering, analyzing, implementing, and evaluating evidence. Moreover, nurses identify two more barriers to (EBP): a culture that values "having always done it this way" and an absence of legitimacy to change care procedures in the field.

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