



Topic Expert Group: Education and training of the multidisciplinary team working in neonatology

Evidence-based practice

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Target group

Infants, parents, and families

User group

Parents and families, healthcare professionals, neonatal units, hospitals, health services, and education providers

Statement of standard

Every healthcare professional caring for infants and their families delivers care based on the best available evidence, integrated with clinical expertise, available resources and the wishes of the family.

Rationale

Evidence-based practice (EBP) has emerged as an innovation in quality improvement in healthcare. In order to deliver safe and effective care, healthcare professionals underpin their practice with evidence in order to reduce inconsistencies, enhance effectiveness of care and improve outcomes for infants and their families. Through gaining access to, assessing, applying and integrating new knowledge, healthcare professionals can adapt to changing circumstances throughout their professional life. Curricula to deliver these aptitudes need to be grounded in the five-step model of EBP, and informed by ongoing research. (1,2)

Benefits

- Facilitated individualisation of care (1,2)
- Assured quality of healthcare (1,2)

Components of the standard

| Component | Grading of evidence | Indicator of meeting the standard |
|--|--|-----------------------------------|
| For parents and family | | |
| 1. Parents are informed about the contribution of evidence to clinical decision making, including evidence-based practice (EBP) and its limitations by healthcare professionals. | B (High quality) | Patient information sheet |
| 2. Parents and families are equal partners in healthcare decision making. (3,4) (see TEG Infant- & family-centred care, TEG Ethical decisions) | A (Moderate quality) B (Moderate quality) | Clinical records, parent feedback |



For healthcare professionals

| | | |
|--|--|---------------------------|
| 3. The principles of evidence-based practice (EBP), implementation of evidence-based policies and a critical attitude to personal practice are understood by all healthcare professionals. (2) | A (Moderate quality) B (High quality) | Training documentation |
|--|--|---------------------------|

For neonatal unit

| | | |
|--|--|---------------------------|
| 4. Educators, healthcare providers, and those in positions of leadership have appraisal skills commensurate with higher training and continued practice. (2) | A (Moderate quality) B (High quality) | Training documentation |
| 5. All unit guidelines are evidence based and regularly updated. | B (High quality) | Guideline |

For hospital

| | | |
|---|------------------|---------------------------|
| 6. Training that supports EBP is ensured for educators, healthcare providers, and those in positions of leadership. (2) | B (High quality) | Training documentation |
|---|------------------|---------------------------|

For health service

| | | |
|--|------------------|---------------------------|
| 7. Easy access to electronic databases to support EBP is provided. (2) | B (High quality) | Training documentation |
|--|------------------|---------------------------|

For education provider

| | | |
|---|----------------------|---|
| 8. Undergraduate and graduate curricula include the "five-step model" of EBP. | B (Moderate quality) | Training documentation |
| 9. Parents are given the opportunity to review and revise curricula. (2) | B (Low quality) | Training documentation, parent feedback |

Where to go – further development of care

| Further development | Grading of evidence |
|--|----------------------------|
| For parents and family N/A | |
| For healthcare professionals N/A | |
| For neonatal unit | |
| <ul style="list-style-type: none"> Provide access to and information about evidence-based practices presented in such a way that it can be understood by parents. | |



For hospital

N/A

For education providers

- Foster research into the most effective and efficient methods for teaching each step, and link with ongoing systematic reviews on each step. (2) A (Moderate quality)
B (Moderate quality)

Getting started

Initial steps

For parents and family

- Parents are informed about the contribution of evidence to clinical decision making, including evidence-based practice (EBP) and its limitations by healthcare professionals.

For healthcare professionals

- Attend training that supports EBP.
- Recognise and admit uncertainties in clinical practice (Step “0”).

For neonatal unit

- Develop and implement evidence-based unit guidelines.
- Develop information material on evidence-based practice for parents.
- Support the routine use of previously appraised evidence in clinical practice.

For hospital

- Support healthcare professionals to participate in training that supports evidence-based practice.
- Support the routine use of previously appraised evidence in clinical practice.

For health service

N/A

For education providers

- Include EBP in core curricula of undergraduate programmes.

Source

1. Farokhzadian J, Khajouei R, Ahmadian L. Evaluating factors associated with implementing evidence-based practice in nursing. *J Eval Clin Pract.* 2015 Dec;21(6):1107–13.
2. Dawes M, Summerskill W, Glasziou P, Cartabellotta A, Martin J, Hopayian K, et al. Sicily statement on evidence-based practice. *BMC Med Educ.* 2005 Jan 5;5(1):1.
3. Smith J, Swallow V, Coyne I. Involving parents in managing their child’s long-term condition-a concept synthesis of family-centered care and partnership-in-care. *J Pediatr Nurs.* 2015 Feb;30(1):143–59.
4. Kuo DZ, Houtrow AJ, Arango P, Kuhlthau KA, Simmons JM, Neff JM. Family-centered care: current applications and future directions in pediatric health care. *Matern Child Health J.* 2012 Feb;16(2):297–305.



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