The Hybrid Journal Club: A Pilot Study

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Purpose

Implement and evaluate a pilot hybrid in-person and on-line journal club.

Background

- Literature findings noted:
  - Journal Clubs (JC) may increase nurses’ confidence with using research evidence to guide practice
  - No consensus on best JC methods to impact a change in practice
- Staff development nurses have unique opportunities to promote evidence-based practice (EBP) and research through JC.

Participant Characteristics

Average participant:
- Patient care Registered Nurse
- Age 41 to greater than 60 years old
- Caucasian
- More than 10 years experience
- All participants had at least a bachelor’s degree

Methodology

- Pretest-posttest quasi-experimental design
- Evidence-Based Practice Capabilities Beliefs Scale (Wallin, Bostrom, & Gustavsson 2012)
  - EBP self-efficacy scale rates confidence for each step of EBP from 0% (No, I cannot manage that) to 100% (I’m sure I can manage that).
  - EBP Use rates evidence-based practice and research use in their jobs on a scale of 0 (rarely/never) to 3 (several times a month).
- Information Literacy for Evidence-Based Nursing Practice tool (Pierce, Pravikoff, & Tanner 2003)

Results

EBP Capability Beliefs Scale

Information Literacy Scale

Positive significant relationships were detected between:
- Improved EBP barrier scores and the total number of in-person journal club sessions ($r = .50, p = .02$).
- Taking a facilitator role and:
  - total online postings ($r = .53, p = .001$)
  - total in person sessions attended ($r = .77, p < .001$)
  - improved scores for EBP desire ($r = .54, p = .009$)

Conclusions and Recommendations

- Significant positive changes on pre/post tests findings for EBP
- Able to determine change in 8 weeks
- Have 2 tools to determine changes in behavior - strong measurement tools for future studies
- Was feasible to offer hybrid method, adaptive for varying learning styles and work schedules
- Need more innovation to improve engagement
- Desired improvements in EBP scores may be related to attending in-person sessions and/or taking a facilitator role

Limitations

- Cannot attribute changes to specific intervention, need future randomized controlled trials
- Participation: no Associate Degree RNs
- Attrition/small sample size
- Variable "dose" of intervention depending on engagement