

Florida Occupational Therapy Educational Consortium

How Do Clinicians Provide Evidenced Based Practice in the Busy Workplace?

What is evidence based practice?

As Academic Fieldwork Coordinators (AFWC) of Florida Colleges, we teach students that evidenced based practice is important to demonstrate to our clients, our reimbursement entities and other professions that occupational therapy has proven methods that are effective. The American Occupational Therapy Association (AOTA) states in its centennial vision "We envision that occupational therapy is a powerful, widely recognized, science-driven, and evidence-based profession with a globally connected and diverse workforce meeting society's occupational needs" (AOTA.org). Research and evidenced based practice (EBP) can come in many forms with degrees of validity and reliability. There is an established ranking system that is "based on the strength of the research design, the randomization of participants and the clinical significance of the research findings" (Sladyk, p 475). **These levels are as follows:**

- Level I Systematic Random Control Trials (RCT's), meta-analysis, adequate sample size.**
- Level II Non-RCT's with a minimum of 2 groups small sample size**
- Level III Non-RCT with at least 1 treatment group; Longitudinal studies; pre- and post Test; cohort; case studies.**
- Level IV Evidenced based opinions of experts or respected authorities; well designed non-experimental studies; single subject design; may be descriptive studies:
literary publication of expert panels**
- Level V Expressed opinions of individuals who have written and reviewed guidelines
based on their clinical or theoretical experience or knowledge**

Sladyk, 2005

The levels of evidence are often referred to in an article's review and provides the reader with valuable information on whether the article is appropriate for evidence based practice or simply interesting knowledge.

What are the barriers to using evidenced based practice?

When clinicians are asked how they provide evidenced based practice on an everyday basis they have a difficult time providing an answer. Some of the responses are "Um, my company ensures we are doing that", or "I don't really know but I will get back to you". Other answers are more to the point, "Our productivity is so high we don't have time", "I can't read all that research stuff with the numbers it's too confusing", or "I don't even know where to find a real research article". With these answers it is important as AFWC's to provide a bridge or link for students and clinicians between education and practical real life situations. Evidenced based practice research must be available, distinguishable between informational knowledge and clinical research, and finally be easily read to be put into practice.

How to provide evidence based practice in the clinic.

There are several avenues to access evidenced based practice. These may include looking up diagnoses on the computer, going to continuing education classes, using references available in the clinic, and using standardized assessments. All of these have been studied and have demonstrated the use of evidence based practice in every day practice.

To find actual journal articles the AOTA website provides evidenced based practice articles to both members and non-members. Another easy way to obtain research pertaining to a specific practice area is the AOTA practice guidelines. In these publications (there are 14 now) there is an appendix entitled Evidenced Tables that lists many research articles with the abstracts broken down into an easy to read format including what level of evidence the article falls under. Lastly, a method that is becoming widely used in larger facilities is having one person each month look up a research article and then report on it to the rehab staff during a weekly or monthly team meeting. This method also promotes an interdisciplinary team approach by learning about each other's professions.

Reading an article can be time consuming, so how can this task become manageable? Begin by reading the Abstract; the abstract will summarize the most important points of the research article. Most importantly the abstract will inform the reader of the methods used for the research and the outcomes of the study. Then read the pertinent information that is important to you, the clinician. For example, does the article speak about using an innovative assessment and/or evaluation, a new treatment, or theory that proves your treatments are effective? Finally, read the last couple of paragraphs about the outcomes or findings and think about what it means and how do they apply to your current practice.

After the research

As clinicians we have a responsibility to use the best available resources for our clients. This includes using research in our practice. This is accomplished by using the latest evaluation, treatments and theories to reach our client's goals. It also requires documenting research that explains our clinical reasoning in our notes. Ultimately, research is only as good as what we do with it. As occupational therapy practitioners we need to demonstrate that our profession provides a unique prospective, treatment option and significant outcome for our clients.

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References

www.AOTA.org

Sladyk, K., & Ryan, S. (2005) *Ryans Occupational Therapy Assistant: Principles, Practice Issues and Techniques Fourth Edition*. (pp 475-476). Slack Inc: Thorofare NJ.