**Evidence Based Practice (stroke)**

**Evidence-Based Practice patient to nurse ratio**

The ratio of patient to nurse determines a lot when it comes to quality care for all which is not an exception in the areas of traumatic brain injury, spinal cord patients, and stroke patients. The patients who suffer from these conditions require more care since some have quadriplegia and can only be transferred with assistance of two or more nurses. In the department I work on, we take care of patients who are suffering from stroke, spinal cord injuries and traumatic brain injuries thus they are high acuity patients who require sensitive and quality care. To offer this care adequate nurse staffing is required since when the nurses are not adequate then the quality of care is compromised (Cho Et al, 2017). In the facilitate I work in, the nurses are not enough to take care of these patients and thus is the reason I want the policy of patient to nurse ratio be changed.   The reason I want to change this procedure is to improve the quality of care and minimize the mortality rate. The procedure can be changed by employing permanent nurses instead of temporary ones. It will entail employing more nurses thus allowing timely, safe, efficient, and effective care to the patients.

The video on the implementation of evidence-based practice states that before implementing a person need to plan and chose the right team to make the implementation a success (Barwick, 2014). Furthermore, one needs to know the resources that will help in implementing. The implementation depends on a person’s preparedness and planning. Training before implementing is important since implementing is not a smooth path. Implementing has a number of shortcomings and thus there should be time allocation for the shortcomings (Barwick, 2014). In addition, every member of the implementation team should have his or her roles defined and every task should be reviewed when completed. When the changes are been implemented, they should be communicated throughout the organization. Lastly, the success of implementation requires a person to be mindful and have a vision (Barwick, 2014). The video on the implementation team states that first step is to identify the person to lead the change. The team is the champion of change who plan, execute, as well as monitor the evidence-based practice (Barwick, 2014). Before selective, the team one should be open-minded and visionary on the selection since the team is made of people who will be affected by the change and those who will manage the change for the long term. To make the implementation team effective, there is the need for planning, structure, and support towards the team which will make them take their work as a priority (Barwick, 2014). The video on coaching and implementation shows that people may know what to do but not to apply what they know. Coaching helps a person to develop skills without been overwhelmed or been unsure of how to start. Not only does the practice improve when a person receives coaching as part of evidence-based practice but also the outcomes improve (Barwick, 2014). For clinicians, coaching helps them to improve confidence, to establish the new skills mindfully, as well as keep the skill as a priority in their minds. The purpose of a coach is to help a person reflect and become aware of the growth in proficiency. In these videos I will use the idea of hiring the best staff, choosing the team to implement change, and considering the resources to implement the procedure.

To implement and monitor the change of increasing the number of nurses, I will implement it all at once. This will be by hiring all the required nurses who have great experience in handling patients who suffers from traumatic brain injury, spinal cord, and stroke. By hiring the nurses at once, the cost of hiring will be reduced and since the new nurses have experience the cost of training will be reduced and the quality of care will be enhanced. The purpose of hiring the nurses is to reduce the mortality rate, enhance nurses morale, and improve the patients overall care. The reason I will implement the change once is because I have been in this facility for a long time and I know what is affecting the quality of care.

**The timeline for the implementation of this change will be as follows**

1 week is for strategy and planning the kickoff of the project with the relevant parties

1 week will be for hiring the nurses

1 week will be for orientation

2 days for communicating the change to the relevant shareholders

To evaluate the change process, I will first look at the rate of mortality since the change was implemented. The lesser the mortality rate, the more effective the change is. Furthermore, I will collect feedback from not only the patients but also their family members on their satisfaction level (Cho Et al, 2017). I will collect feedback from the nurses who have been working for some time in the facilitate in order to determine if the rate of worn out has decreased. In addition, I will look at the rate a patient is been discharged since the better the quality of care the higher the rate of discharge. I will further look at the rate of new patients visiting the hospital since a higher number of new patients indicate the effectiveness of the change.

**References:**

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