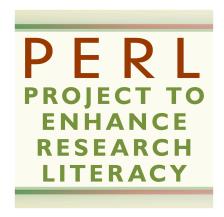
## **Project to Enhance Research Literacy**



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## **PERL**

PERL: Project to Enhance Research Literacy

- Collaborative Effort
- Seven ACCHAC Member Institutions
- NCCAM funding to enhance research literacy
- Shared resources
- Utilize resources as platform to engage educators at ACCAHC institutions



GOAL: Shift culture toward evidenceinformed education and practice in all ACCAHC member academic institutions.

## **ACCAHC EIP Competency**

Competencies for Optimal Practice in Integrated Environments (2010/2011)

#### **COMPETENCY 5 – Evidence-based healthcare and evidence-informed practice**

General Competency Statement: Explain, evaluate, and apply scientific evidence in the context of practitioner experience and patient preferences and apply evidence informed decision-making in integrated healthcare delivery.

- EP1. Explain the role of scientific evidence in healthcare in the context of practitioner experience and patient preferences.
- EP2. Describe common methodologies within the context of both clinical and mechanistic research, focusing on an assessment of your own field.
- EP3. Discuss contemporary issues in integrative practice research, including those relative to evaluating whole practices, whole systems, disciplines, patient-centered approaches and health outcomes.
- EP4. Analyze the research base within one's own discipline including the positive and negative interactions, indications and contraindications for one's own modalities and agents.
- EP5. Apply fundamental skills in research evaluation.
- EP6. Demonstrate evidence informed decision making in clinical care.
- EP7. Discuss the value of evidence informed risk management planning and risk management behavior.



## **Moving Forward**

- Current resources provided by educators, largely for educators
- Expanding vision for PERL:
   Clinician utilization of EIP to support evidence informed health care
- Expand PERL resources to support practitioners daily incorporation of research into practice.



## **Objectives for Today**

- A description of the types of EIP resources that would benefit the ACCAHC clinical community
- Examples of current initiatives to incorporate EIP in the clinic
- Identification of significant barriers to the clinical application of evidence based health care
- Examples of who/where/what to start in order to gain traction for EIP in the clinic







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### Types of resources that would help you utilize EIP in the clinic

- Describe your average daily routine in clinic (time with patients, external demands on time, charting, office work etc.)
- What resources do you currently use to assist in patient care (charts, handouts, books, websites etc.)?
- What types of resources do you feel would be most useful in the clinical setting? (flip chart, pocket guides, handouts, wall chart, etc.)
- Do you utilize electronic medical records, or point of care tools?



### **Current state of Evidence Informed Practice in the Clinic**

- What initiatives are in place at your clinic to incorporate evidence into practice?
- Describe some of the ways that you, or someone you know, has utilized research to inform clinical care.
- What resources do you currently have available to help incorporate research into practice. How are these beneficial and how can they be improved?



### Barriers to EIP in the clinic

- Do you personally feel that research findings are applicable to the clinical setting?
  - ✓ What would make them more applicable (different study designs, tools to interpret results, etc.)?
  - ✓ What role do case reports play in clinical application of evidence?
- Could you discuss the following as possible barriers to EIP in the clinic? What other barriers should we be aware of?
  - ✓ The ability to read and appraise research
  - ✓ Time and ability in locating relevant research
  - ✓ Appling research to the clinical context



### Impacting change-Best place to start

- Describe the early adapters to change in your institution/ clinic, what is the best way to reach them?
- What role can office staff, assistants, interns, play in the incorporation of EIP?
- Do you have journal clubs, or other routine meetings, where colleagues exchange clinical information?
- What types/methods of training would be most impactful and most likely to be attended/covered?



# **THANK YOU!**

