LETTER FROM THE DEPUTY EDITOR



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Hardwiring a Culture of Clinical Inquiry from Day One

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Healthcare is a dynamic space that is ever evolving; new knowledge and innovations are constantly sprouting. Hospitals are challenged to stay current with best practices, policies, guidelines, new regulations, and laws. The literature states that research translation can take over 17 years before it becomes standard practice.

At Baptist Health, new graduate registered nurses with less than one year of experience are hired into an RN Residency program where they attend various classes and guided preceptorship over the course of 18-22 weeks. As a Nurse Scientist, I encourage our newest nurses to develop a keen eye in questioning current practice and to dive into the literature to find ways to improve practice and propose a recommendation change during the RN Residency program. Regardless of their educational background, they are required to go through 10 hours of evidence-based practice (EBP) workshops facilitated by Nurse Scientists and Nurse Educators.

The overall goal of the EBP workshops is to encourage the new nurses to identify areas of improvement within their practice. They learn the various steps of EBP and develop competencies they might have learned in school such as identifying a topic, creating a PICO question, appraising the literature, and making and presenting an EBP poster. All this, while trying not to overwhelm them during their transition to practice. At the end of the EBP workshops, they present at an EBP Showcase where they get to discuss their recommendations with bedside nurses, leaders, and edu-

cators from across the organization.

I want the new graduate nurses to feel empowered to question clinical practice and make informed recommendations that can ultimately improve outcomes, work environment, patient experience and/or reduce costs. Hardwiring a culture of clinical inquiry from day one is essential in reducing the gap in translating research into standard practice.

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