

Utilizing Diffusion of Innovations Theory to Implement An Evidence-Based Practice Change

Constance M. Bowen, DNP, RN, APN-C, CCNS,CCRN, CEN

Kennedy University Hospital

INTRODUCTION

Delirium is a common occurrence in the ICU, which affects 60-80% of mechanically-ventilated patients. Its effects include increased ventilator days, hospital length of stay, 6 month mortality rates, and costs.

Despite the prevalence of delirium in the ICU, it often goes unrecognized. The Confusion Assessment Method for the Intensive Care Unit (CAM-ICU) is a reliable and validated delirium screening tool, specifically designed to assess mechanically-ventilated patients.

A previous attempt at our facility to implement the CAM-ICU revealed barriers to implementation. Identifying barriers and the use of strategies to overcome these barriers appears to be essential to facilitate adoption of a practice change.

Rogers' Diffusion of Innovations Theory proposes that knowledge, persuasion, decision, implementation and confirmation are the five stages in the innovation decision process. These steps can assist with the adoption of an evidence-based practice change.¹

- Knowledge**
Gain a better understanding of the innovation²
- Persuasion**
Form a more positive opinion about the innovation³
- Decision**
Accept or reject innovation³
- Implementation**
Initial use of the innovation⁴
- Confirmation**
Recognize the value & benefit of the innovation⁴

PURPOSE

To determine the effectiveness of Diffusion of Innovations Theory to facilitate adoption of an evidence-based practice change, the Confusion Assessment Method for the Intensive Care Unit.



METHODS

This descriptive case study was conducted for 8 weeks in a different ICU within the facility. The participants were the 34 ICU RNs who provide care for mechanically-ventilated patients in the ICU. CAM-ICU assessments were expected to be performed at the beginning of each shift on every mechanically-ventilated patient.

Strategies, specific to each stage of the innovation decision process, were utilized to facilitate adoption of this practice change.

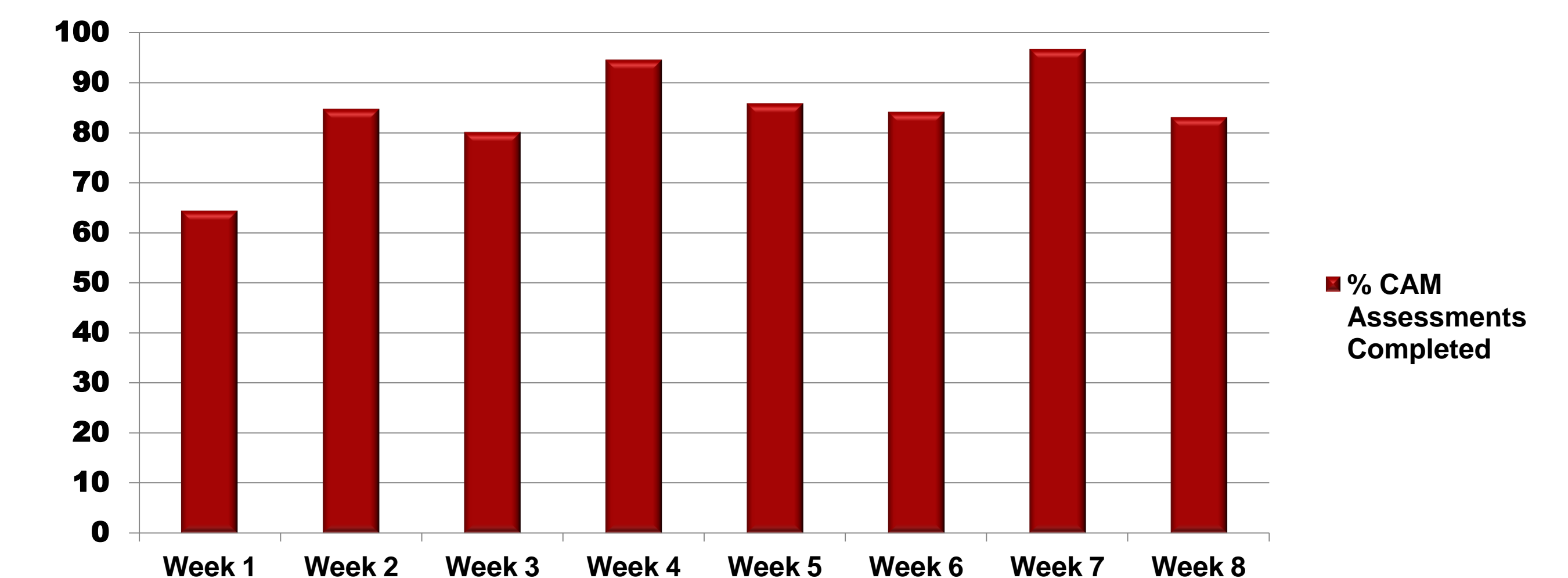


Five Stages –Innovation Decision Process

RESULTS

The frequency of CAM-ICU assessments was measured by determining how many assessments were expected to be performed and how many were performed. This was calculated as a percentage.

Based on previous studies, the benchmark for successful implementation of the CAM-ICU was 80%^{5,6}



- 159 of the 187 expected assessments were performed
- Frequency of CAM-ICU assessments = 85%
- 38% of the completed assessments suggested delirium

CONCLUSIONS

Diffusion of Innovations Theory can be effective for guiding the process of implementing the CAM-ICU.

Identifying potential barriers and developing specific strategies to overcome these barriers, which are specific to each stage of the innovation decision process, can assist with promoting the use of the CAM-ICU.

Diffusion of Innovations Theory can be effective for facilitating an evidence-based practice change.

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