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Title

How can audit and feedback support nurses' practice? A set of hypotheses based on qualitative and quantitative evidence

Priority 1 (Research Category)

Dissemination and implementation research

Presenters

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Abstract

Context: When used properly, audit and feedback has been shown to be an effective, versatile and low-cost intervention for improving quality of care. Audit and feedback has been mainly studied with physicians. Yet, nurses' response to this type of intervention may differ because of their roles, power, and the configuration of nursing activities.

Objective: To develop practical hypotheses about features of audit and feedback that support its effectiveness with nurses.

Study Design and Analysis: The Clinical Performance Feedback Intervention Theory (CP-FIT) was recently developed to explain the mechanisms involved in the success of audit and feedback with health care providers through a set of hypotheses based on qualitative data. A comparative analysis of the CP-FIT hypotheses was conducted using nursing-specific empirical data from (1) a mixed-methods systematic review of quantitative and qualitative studies on the effects of audit and feedback among nurses and (2) a pilot study of an audit and feedback intervention that we designed and tested with a team of primary care nurses.

Dataset: Data CINAHL, Cochrane Controlled Register of Trials, Embase, MEDLINE, PubMed, Scopus, Web of Science, PsycINFO, and Global Health for the review and clinical-administrative data from ICLSC database for the pilot study.

Population Studied: Nurses

Intervention/Instrument: N/A

Outcome Measures: N/A

Results: Thirty-one studies published between 1995 and 2021 were included in the review. As for the pilot, seven nurse-sensitive indicators were measured from a sample of 1356 patients and reported in two feedback sessions. First, feedback that emphasizes how it relates to the relational aspect of nursing

is more likely to be in line with their priorities. Second, indicators measured with the proximal team rather than on an individual basis would be more representative of their ability to act on the feedback. Finally, feedback provided in a way that highlights the benefits to nurses' practice, such as the potential to reduce workload, increases their commitment to action.

Expected outcomes: This research is based on a thorough synthesis of empirical work on audit and feedback interventions involving nurses. The hypotheses build on recent developments in quality improvement by providing concrete, actionable guidance for testing audit and feedback interventions to support their effectiveness as a primary health care improvement strategy.