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Title: NExT: Creating an Interdisciplinary Alliance to Diminish Informational Barriers for Public Health Nursing

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Abstract:

**Background:** Public health nurses (PHNs) are challenged in obtaining opportunities to learn evidence-based practice (EBP). An interdisciplinary alliance was created between health sciences librarians and nurse educators to create a continuing education (CE) opportunity.

**Objective:** To measure the effectiveness of CE training for PHNs on the knowledge gained about the EBP process and information resources.

**Methods:** Ten in-person CE workshops were offered to 69 attendees in rural and urban areas. A pre-test/post-test survey was administered immediately before and after the training that asked participants to rate their perceived knowledge and comfort levels with EBP concepts and resources.

**Results:** 97% of participants reported the training was a good use of their time. Based on a five-point Likert scale self-assessment, participants developed new skills (m=4.06, SD=.968) and were able to find evidence-based literature (m=4.16, SD=.980). Participants reported increasing their understanding of EBP concepts and familiarity of information resources. All data was statistically significant at p<0.001 (95% CI).

**Discussion:** With the interdisciplinary collaboration capitalizing on the instructors’ disciplinary skillsets, the team was able to create a new effective EBP education intervention for PHNs.

**Conclusion:** PHNs were able to increase knowledge of EBP concepts and information resources to utilize in practice or grant development.

**Keywords:**

Interdisciplinary Collaboration, Continuing Education, Public Health Nursing, Evidence-Based Practice

**Key Messages:**

- This case study illustrates the benefits of interdisciplinary collaboration between nurse educators and health sciences librarians to provide professional development opportunities.
- Professional development is a core need for public health nurses, and health sciences librarians can play a key role in the development of EBP continuing education (CE).
Interdisciplinary partnerships are successful when a common goal is pursued and each discipline contributes their expertise to the effort.

Nurse educators and librarians can capitalize on established community partnerships to promote professional development among the health professions.

Background

According to the American Public Health Association (APHA), public health nurses (PHNs) “aim to improve the health outcomes of all people” and “take into consideration assets, needs, and disparities of individuals and populations and translate this into action for public good.” In the United States, it is estimated that there are at least 34,521 Full-Time Equivalent (FTE) Registered Nurses (RNs) working in state and local health departments. With ninety-seven local health departments providing services for more than 5.5 million Illinois residents, many public health nurses (PHNs) have limited access to information resources as they work in small, local health departments that are unaffiliated with academic institutions or hospitals. These PHNs need information to provide services in prenatal care, supplemental nutrition benefits, substance abuse assistance, breast and cervical cancer screenings, and vaccinations. Hemingway reports that many of these services are similar to what is provided by district or community nurses in the United Kingdom or Canada.

The impetus for the NExT project came from the identified concerns and challenges impacting the public health nursing workforce practicing in local public health departments throughout the state of Illinois. A 2013 survey of directors from 28 Illinois public health departments (accounting for 38 counties) found there were 461 nurses employed by Illinois public health departments. The needs mentioned in the survey included enhancing nurses’ critical thinking skills, increased opportunities for staff development, and a better trained workforce. These directors identified the following goals for the future: increasing the number
of grants written and awarded, developing skills and tools in population health, expanding the knowledge base associated with PHN, educating PHNs on research methodologies and evidence-based practice (EBP), and increasing the public health nurse’s role in policy and program planning.4

EBP is “the conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients.”5 Brettle and Urquhart have identified nursing and public health as two health sciences disciplines who have adopted an evidence-based approach to practice.6 The Quad Council for Public Health Nursing and the Nursing & Midwifery Council recognize the importance of the identification and application of evidence to address public health issues, “applying it to all areas of work where it is relevant and likely to be effective, must be reflected throughout all programs of preparation.”7,8 Furthermore, standard nine of the American Nurses Association’s (ANA) Public Health Nursing: Scope and Standards of Practice states that PHNs must utilize, incorporate, participate, and share evidence to improve healthcare outcomes.9 With Illinois nurses required to complete 20 hours of CE credits every two years for license renewal10 training in interpreting evidence to apply to public health issues is needed, and should be championed and developed by leaders within the field.11

Barriers to EBP utilization have been described as strategic (i.e., lack of resources, time constraints, lack of commitment to EBP), cultural (i.e., organizational resistance to change), technical (i.e., lack of training and resources to access evidence), and structural (i.e., lack of systems dedicated to EBP application and dissemination).12-15 A 2010 study of PHNs identified needs for resources that are easily navigable and well organized for their specific information needs.16 According to Krom, Batten, and Bautista (2010), nurses lack an awareness of electronic databases and how to navigate them effectively.17 Hughes et al. also listed subscription
fees/financial consideration and lack of awareness of information resources and services available from a 2015 survey of public health practitioners. Additionally, nurses feel intimidated by research methods and powerless to implement identified changes in their practice settings without administrative support.

With the challenges identified, efforts were made to engage in an interdisciplinary collaboration with nurse educators and health sciences librarians to effectively address the needs of the PHN workforce. The World Health Organization (WHO) recognizes interdisciplinary or interprofessional collaboration in education and practice “…as an innovative strategy that will play an important role in mitigating the global health workforce crisis.” The need for continuing education (CE) can serve as an impetus for successful collaboration between nurses who need access to evidence and librarians who have developed strategies to meet these needs. Krom, Batten, & Bautista (2010) and Miller et al. (2010) found that nurse/librarian collaborations not only increase nurses’ knowledge of EBP, but also effectively eliminate barriers to EBP access. These partnerships have been used effectively in past efforts in nursing education and in CE opportunities for licensed staff nurses working in the hospital.

Discussion of outreach to PHNs has been limited within the literature. In 1994, Self et al. reported the training of PHNs on the database Grateful Med and showed little change in PHNs information seeking behavior due to the new information landscape with the introduced “microcomputer.” In 2010, Miller detailed PHNs’ positive response to a training opportunity provided by nurses and librarians; however, the training focused on consumer health resources and fee-based professional nursing databases.
Objectives

The objective of this study was to evaluate an educational intervention to practicing public/community health nurses on EBP concepts and translating evidence into practice and to familiarize nurses with free, high-quality information resources through an interdisciplinary collaboration between health sciences librarians and nurse educators.

Methods

Since 2001, the University of Illinois at Chicago has focused on teaching core evidence-based public health practice concepts and freely available resources to healthcare professionals within the state of Illinois. To continue those efforts, a team was created from nursing and library faculty from two Illinois institutions of higher education: The University of Illinois at Chicago and Western Illinois University. This team created the Nursing Experts: Translating the Evidence (NExT) project and prepared the following framework to develop the project (see Figure 1).

Figure 1. Project Development Framework
The framework was developed and used to guide the creation of the curriculum, which was offered at public health departments and health sciences libraries. The project team used their discipline specific knowledge and skills to enhance the educational opportunities for participants. Librarians shared their expert searching skills and provided instruction in the development of information literacy skills. They contributed to the development of topics on how to develop PICO questions, how to conduct literature searches, and how to access freely available, highly credible information resources for use in EBP. The nurse educators shared their expertise in public health practice and education, including the identification of practice problems and the translation of evidence into practice. Nurse educators presented on the following topics during the workshop: the evidence-based public health model, knowledge translation, critical appraisal, and program planning, implementation, and evaluation. Throughout project planning and design, health sciences librarians and nurse educators were able to find commonality in their ability to prioritize problems, to formulate clinical questions, and to appraise evidence for clinical relevance within PHN practice.
Educational objectives were developed and the collaborators utilized their knowledge and skills to develop the session’s curriculum (Table 1).

<table>
<thead>
<tr>
<th>Table 1: Objectives of In-Person Educational Session</th>
<th>Champion of Activity</th>
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</thead>
<tbody>
<tr>
<td>1. Review process of literature searching for answers to practice questions (PICO)</td>
<td>Librarian &amp; Nurse Educator</td>
</tr>
<tr>
<td>2. Search PubMed (MEDLINE) for systematic reviews, meta-analyses, and practice guidelines</td>
<td>Librarian</td>
</tr>
<tr>
<td>3. Demonstrate information available from the CDC’s Guide to Community Preventive Services, the Agency for Healthcare Research and Quality (AHRQ), and the United States Preventative Services Task Force</td>
<td>Librarian</td>
</tr>
<tr>
<td>4. Determine if information from the professional literature applies to local practice site</td>
<td>Nurse Educator</td>
</tr>
<tr>
<td>5. Develop a plan for implementation of information from professional literature if appropriate</td>
<td>Nurse Educator</td>
</tr>
</tbody>
</table>

The three-hour, in person CE workshop curriculum was developed using mini-lectures and interactive demos to engage the participants on how to find evidence-based information and to translate evidence into PHN practice. This blend of lectures and activities was done to promote active learning for participants. The collaborators designed a clinically relevant public health case-based scenario focused on prevention of sexually transmitted infections (STIs). Throughout the session, librarians and nurse educators used the case study to start the conversation but encouraged participants to select relevant topics to their practice which
promoted ownership and engagement within the session. Nurse educators provided firsthand experience in working with community populations and with EBP applications/interventions. Librarians contributed by directing participants to free resources and teaching them search strategies. Participants translated this evidence into the development of an intervention plan to address the problem that they identified within the case study or their own practice. At the end of the session, an online portal 36 created by the NExT project team was demonstrated to help the participants access the materials covered in the session, as well as links to resources for finding statistics and keeping current. A paper bookmark with the link to the portal was distributed to the participants. An outline of the CE curriculum is shown in Table 2.

<table>
<thead>
<tr>
<th>Table 2: NExT Workshop Curriculum</th>
<th>Content</th>
</tr>
</thead>
</table>
| 6. Evidence-Based Public Health Nursing | • Lecture  
• Lecture Note Handout |
| a. Definition  
 b. Models |
| 7. First Steps | • Lecture  
• Case Study |
| a. Making an Initial Statement of the Problem  
 b. Quantifying the Problem  
 c. Putting the Problem in Community Context |
| 8. PICO Question | • Lecture  
• PICO Question Worksheet  
• Feedback on PICO Questions |
| a. Definition  
 b. Construct PICO from Case  
 c. Construct own PICO |
| 9. Literature Types | • Lecture |
| a. Define Primary and Secondary Literature  
 b. Review Evidence-Based Practice (EBP) Pyramid  
 c. Introduce PubMed and CINAHL  
 d. Define Systematic Reviews, Meta-Analyses, & Practice Guidelines |
| 10. Process of Searching | • Lecture  
• Group Searching Activity  
• Time for Individual Searching |
| a. Cyclical Revision Search Process  
 b. Use of Controlled Vocabularies  
 c. Conducting a Search in PubMed |
| 11. Free Public Health Resources | • Lecture  
• Resource Demonstrations  
• Time for Individual Searching |
| a. United States Preventive Services Task Force  
 b. The Guide to Community Preventive Services  
 c. National Association of County & City Health Officials – Model Practices Database |
<p>| | |</p>
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<th></th>
<th></th>
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<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>
| 12. Critical Appraisal  
  a. Scientific Terminology  
  b. Reliability  
  c. Validity  
  d. Bias  
  e. Lecture  
  f. Critical Appraisal Worksheet  
|   |   |
| 13. Knowledge Translation (KT)  
  a. Goal of EBP  
  b. 4 Stages of KT Model  
  c. Knowledge to Action (KTA) Model  
  e. Lecture  
|   |   |
| 14. Program Planning  
  a. Health Impact/Desired Outcome  
  b. Economic Evaluation  
  c. Coordinated Implementation  
  d. Factors for Success  
  e. Lecture  
  f. Program Implementation Discussion Based on Case Study and/or Individually Developed PICO/Issue  
|   |   |

Librarians and nurse educators paired in dyads or triads to cover geographic regions throughout the state of Illinois. Nurse educators contacted their public health colleagues in the field to recruit participants to the educational sessions. Librarians also advertised the educational sessions on local library listservs, so librarians could make their nursing patrons aware of these opportunities. Additionally, nurse educators advertised the educational sessions in their classes and invited graduate nursing students working in public health.

Ten in-person sessions were held between November 2014 and March 2015 with 69 participants agreeing to participate in the study. To assess participants’ frequency of using online resources and their understanding of course-related concepts presented in the session, a pre-test/post-test survey was administered. The pre-test survey was administered at the beginning of the instruction and the post-test survey was administered at the conclusion of the instruction session. These self-reported surveys allowed participants to grade themselves using a
5-point Likert scale on their use of online resources and understanding of key concepts presented. The pre-test survey included one open-ended question asking participants, “What are you hoping to gain from this training?” The post-test survey included three additional open-ended questions to evaluate how helpful the training was perceived to be, how the training would be used in the future, and how the training could be improved. The following demographic data on participants was also collected: age, race/ethnicity, educational attainment, and years worked in public health. The self-reported pre-test/post-test methodology was selected due to its “directness and versatility” in educational interventions; it did not burden participants with examinations or being directly observed by researchers during their work.

Reported data from these sessions was analyzed using SPSS v.22 using descriptive statistics and paired t-tests, comparing the pre- and post-test surveys. This study was reviewed and approved by Institutional Review Board at both universities.

Results

Demographics

Of the total respondents (n=69), 64 (93%) were female; 3 (4%) were under 30 years old; 14 (20%) were 30-39 years old; 18 (26%) were 40-49 years old; 19 (27%) were 50-59 years old; 15 (22%) were over 60 years old. The majority of participants self-identified as White/Caucasian 58 (84%), 5 (7%) African American, 3 (4%) Hispanic/Latino, 1 (1%) Multi-racial, and 2 (3%) other. See Table 3 for a description of participants’ educational attainment and years worked in public health.
When analyzing the data among the different demographic groups such as age, education, and years employed in public health, with the self-reported knowledge gained or likelihood to use resources, there were no statistically significant results.

**Evidence-Based Concepts and Resources**

A number of statistically significant changes in participants’ understanding and perceived use of EBP concepts and resources were found. Participants reported their knowledge was increased from pre-intervention to post-intervention (see Table 3). Self-reported increase in knowledge was represented in the following concepts: a) Evidence-Based Public Health (EBPH) \( t(68) =6.556, P<.001 \); b) PICO question \( t(68) =16.952, P<.001 \); c) Critical Appraisal of the Evidence \( t(67) =12.619, P<.001 \); and d) Knowledge Translation of Evidence \( t(67) =11.071, P<.001 \). The participants also reported an increase in anticipated use of the following resources: a) PubMed (MEDLINE) \( t(69) =8.118, P<.001 \); b) The Guide to Community Preventive Services \( t(64) =12.108, P<.001 \); c) Public Health Partners (PH Partners) \( t(64) =10.649, P<.001 \); d)

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### Table 3: Participant Reported Educational Attainment and Years in Public Health

<table>
<thead>
<tr>
<th>Education</th>
<th>N*</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School</td>
<td>5</td>
<td>7%</td>
</tr>
<tr>
<td>Associates Degree</td>
<td>14</td>
<td>20%</td>
</tr>
<tr>
<td>Bachelor’s Degree</td>
<td>35</td>
<td>51%</td>
</tr>
<tr>
<td>Master’s Degree</td>
<td>13</td>
<td>19%</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Years Working in Public Health</th>
<th>N*</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5 years</td>
<td>22</td>
<td>32%</td>
</tr>
<tr>
<td>6-10 years</td>
<td>6</td>
<td>9%</td>
</tr>
<tr>
<td>11-16 years</td>
<td>16</td>
<td>23%</td>
</tr>
<tr>
<td>17-20 years</td>
<td>9</td>
<td>13%</td>
</tr>
<tr>
<td>&gt;21 years</td>
<td>13</td>
<td>19%</td>
</tr>
<tr>
<td>N/A</td>
<td>2</td>
<td>3%</td>
</tr>
</tbody>
</table>

*One participant did not disclose demographic data
National Guideline Clearinghouse (NGC) $t(65) = 13.242, P<.001$; and e) United States Preventive Services Taskforce (USPSTF) $t(65) = 11.771, P<.001$. All data was statistically significant at $P<0.001$ (95% CI).

**Figure 2. Knowledge of evidence-based practice concepts**

![Knowledge of Evidence Based Practice Concepts](image)

**Figure 3. Knowledge of resources**

![Knowledge of Resources](image)
The most common reasons why participants attended the workshop were to increase their understanding of EBP, to improve their clinical practice, and to discover new online resources to use in their practice. Participant responses included the following:

“Ability to find resources in order to improve my practice”

“Ideas to improve my practice and to expand it”

“Understanding of how to navigate & understand research”

“Make me more technologically savvy”

“A better understanding of how to interpret data”

At the end of the educational session, 97% of participants self-reported the workshop was a good use of their time. Participants developed new skills (m=4.06, SD=.968) and were able to find evidence-based literature (m=4.16, SD=.980). In response to the open-ended questions on the post-test survey about the training itself, many participants responded favorably to the structure of the training, including the hands-on components of searching for information resources and building their own PICO question. Additionally, one participant commented, “This training enlightened me as to what research leading to grant writing involves.” In response to the direct application of the material to their current position, participants mostly reflected on the process of quality and practice improvement in public health, including a comment from a participant wanting to use the content to train additional public health workers on the use of EBP and information resources.

Discussion
The results of this study add to the evidence supporting CE in EBP for PHNs and the use of interdisciplinary collaboration in that training. The quantitative data showed significance in self-perceived knowledge attainment in all major topical areas of the CE workshop, including evidence-based public health, formulation of a PICO question, critical appraisal of evidence, and knowledge translation of evidence. Additionally, participants reported an increase in their anticipated use of electronic resources demonstrated throughout the workshop, including PubMed/MEDLINE, The Guide to Community Preventive Services, Public Health Partners (PH Partners), National Guideline Clearinghouse (NGC), and United States Preventive Services Taskforce (USPSTF). The facilitators received positive qualitative feedback from participants ranging from good use of time to incorporation of workshop content into their work. The overwhelming positive responses from the participants validated the NExT team’s efforts and justified the creation of this CE opportunity.

The NExT project has contributed to the expansion of knowledge of EBP of PHNs in the field. Although similar approaches have been used to educate PHNs,\textsuperscript{22,31} this project differed in that it covered a large array of freely available electronic resources. Overall, participants reported a knowledge increase in these resources immediately following the in-person session. Miller (2010) found that participants needed reminders on how to search for articles and/or refresher sessions on what they had previously learned.\textsuperscript{31} This is an indication that the NExT team needs to sustain efforts to offer these CE sessions to those who have limited access to these opportunities. This need recognized by the \textit{Public Health Nursing: Scope and Standards of Practice} in that “the public health nurse attains knowledge and competencies that reflect current nursing practice.”\textsuperscript{40} PHNs are encouraged to participate in “ongoing educational activities” and “seek experiences that reflect current practice to maintain knowledge, skills, abilities, and
judgment in the implementation of policies, programs, and services for populations.” In addition to the Scope and Standards, the American College of Research Libraries’ Information Literacy Competency Standards for Nursing provides examples of the proficiencies that nurses may need in becoming more competent in searching for evidence-based information. As PHNs embrace a culture of health, a sustained focus on enhancing the current skills of the PHN workforce is necessary and the current collaboration should be sustained to promote these educational activities.

The NExT project provides PHNs with concrete skills to develop public health programs to improve population health. As the healthcare paradigm in the United States shifts from a disease model to a population health model, there is an increased demand to investigate new ways to improve population health. Building the skill sets of the existing PHN workforce to locate and translate evidence-based research into practice is imperative. Knowing how to access evidence-based research translates to PHNs practicing more efficiently and effectively, leading to a decrease in healthcare costs and better patient outcomes. Through this CE course, PHNs reported learning new skills, gaining a better understanding of evidence-based practice, and discovering new PHN resources. If this opportunity was not made available to this population, PHNs are often left basing programs or policies on “political or media pressures, anecdotal evidence, or the way it’s always been done.” This is especially needed during emergent public health issues at the local level, where guidance is often unavailable early in the time of need.

Building collaborative partnerships across disciplines is essential to practice. These collaborative partnerships take time to cultivate and grow as trust is developed, needs are explored, and resources are assessed. It is important to find a common ground first through the development of a shared goal or vision. Within the NExT project, librarians and nurse educators
found a common ground through the development of this shared goal: the need for enhancing the professional growth of PHNs by equipping them with skills to find evidence-based research and translating knowledge into their practice. Librarians shared their expertise on how to efficiently and effectively retrieve evidence-based research using a variety of tools. Nurse educators demonstrated the translation of knowledge into practice for our targeted audience. Together these two disciplines marketed their product to local public health departments, which resulted in the development of more collaborative partnerships with the ongoing vision of enhancing the skills of the PHN workforce.

The NExT project gave librarians the opportunity to connect with nurses beyond the classroom and hospital setting. By connecting with PHNs in the field, librarians developed a better understanding of PHNs' information needs and which online resources were essential to their everyday practice. By engaging with PHNs in the field, librarians gave them a starting point for EBP and additional resources. Librarians also encouraged PHNs to utilize local health sciences or public libraries to access full text articles or subscription-based resources. By collaborating with health science librarians, nurse educators learned about unfamiliar online resources that they could use in their teaching and clinical practice and about additional search strategies which allowed them to conduct more efficient searches of the evidence-based literature.

Several challenges and limitations were identified during the development and implementation of the NExT project for PHNs. One of the challenges of implementing a public health program was the frequent turnover of staff, and the NExT team was not immune to turnover, losing both team members and contacts within the public health departments, making it challenging to schedule events. Another challenge was the impact of a viral outbreak on the
availability of PHNs to attend a CE session. Those planning in-person PHN CE opportunities should be aware of any public health problems affecting their communities and maintain flexibility in regard to scheduling. Furthermore, the process of developing a sustainable CE program for PHNs was quite time consuming for the team. Because PHNs, which are typically unaffiliated with academic institutions, are outside of the primary audience for academic health sciences librarians, there is limited funding and time available to support programs directed at PHNs. Outreach programs are typically grant–funded and short-term for these reasons. The team members also spent a great deal of time in creating the course materials and online content, as well as, securing the ability to offer free CE credits to PHNs.

A few limitations for our analysis were identified, including a relatively small sample size, use of self-reported knowledge and anticipated resources, limited geographic reach, and limited follow-up. While calculating the quantitative results for the entire population proved to be significant, when divided into subgroups according to demographics, educational attainment, or years worked in public health, the groups were too small to show significance. An additional limitation is the reliance on participant self-reported data, regarding EBP knowledge and use of anticipated resources which may negatively affect the validity of responses and the findings. A failure of subjects to truthfully report their responses would diminish the accuracy of any findings. Since the NExT project was conducted in Illinois only, the demographics and results may differ if the intervention was implemented in another geographic location. The study only represents a small portion of the PHN workforce. The limited ability to follow up with our population over a period of time did not allow for testing of retention of knowledge gained or the practical use of the skills reportedly gained during the CE opportunity.

Conclusion
The NExT project demonstrated an increase in PHNs’ knowledge of freely available online resources and the application of EBP concepts demonstrating the potential impact of this methodology on larger cohorts of PHNs. By educating PHNs on utilizing EBP for program implementation, the NExT project has contributed to addressing the PHN workforce’s educational needs. The nurse educators and health sciences librarians’ collaboration was an essential element of this program, which substantially contributed to the overwhelming success of the program.

Given the success and lessons learned from this first phase of implementing a CE program for PHNs, the NExT project moved into a second phase which was expanded to include an online CE tutorial, mobile website, and social media presence, in addition to the in-person workshops. The online CE tutorial was built using a similar structure to the in-person workshop but offers additional flexibility and accessibility to participants to earn CE. The mobile website, at http://gonext.uic.edu, has been created using WordPress so that the content could be more easily updated and maintained by the librarians. The ten additional in-person sessions of the NExT CE course were offered face-to-face between October 2015 to April 2016, to geographical areas untouched in the first phase of implementation. It is anticipated that the second phase will show the continuing success of this interdisciplinary team’s work on educational interventions benefiting the community/PHN workforce.
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