Teaming With Students and a Sacred Cow Contest to Make Changes in Nursing Practice

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ABSTRACT

Many current nursing traditions and practices were developed over time by nurses who used a trial and error method of research. Nursing has passed along these practices through nursing education programs and in the policies and procedures established by hospitals. Do these practices have sound scientific principles behind their use, or are they just traditions that are difficult to change? This article explores the experience of one educator trying to make changes in the attitudes of students toward research and suggests how this process can be applied in the day-to-day practice of staff nurses.

Nursing has a long and rich heritage beginning with Florence Nightingale and her impeccable attention to detail. It was Florence Nightingale who taught us how important it was (and still is) to keep excellent records of the environment, the patient's condition, and the nursing care provided. Collection of these data helped to identify which nursing practices made a difference and which practices should be continued. In today's climate of cost containment, these lessons from the past have never been more important. And yet, many nurses continue to practice in the way they were taught during their basic nursing education programs—whether it was 3 or 30 years ago. I can still remember how particular my instructors were that we made the bed just right, including those mitered corners and taut draw sheets!

Nursing is a caring profession. We pride ourselves on providing the best possible care for our patients. However, we often do things the same old way without even questioning why it is done that way or whether there is a better way we could improve the care. Think about the last time that you performed a new procedure. Did you check the procedure manual? Or did you just ask a more experienced nurse to demonstrate how the procedure should be done? What hints and practices have you learned from other nurses? What time-saving suggestions have you passed on to others as you share the joys and challenges of caring for patients? Have you ever questioned why some procedure is performed a certain way? Is it because that is what is stated in the policy manual or because "Dr. X always wants it done like this for his patients?"

This article describes one institution's efforts to engage nursing students and staff nurses in research by challenging established practices and exploring new ideas.

TRADITIONS AND SACRED COWS PERMEATE NURSING PRACTICE

Nurses often learn from one another and then share those skills and practices from one generation of nurses to another. Many traditions have their basis in a trial and error type of research and have become the sacred cows of nursing. If a practice works, we just keep doing it the same way again and again. These time-tested interventions work well and permeate every facet of nursing practice today. But as practicing nurses, we should not be satisfied with just passing on these practices. We need to ask many questions about these traditional interventions. Were these ideas really tested and identified as best for patient care or were these interventions developed for the convenience of the nurses? Were the practices based on sound scien-

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Sacred Cow Contest to Change Nursing Practice · Leake
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tific principles, or were they the easiest and cheapest way to get something accomplished? Do the common practices we apply in nursing today provide the best quality of care for our patients? Are nurses encouraged to change these traditions or are these practices sacred cows that should not be questioned?

As practicing nurses, we hear more and more about the need for evidence-based practice. A survey of recent literature indicates that many areas of nursing are questioning the sacred cows that impact practice in their specialties. Operating room nurses question the procedures for maintaining asepsis, scrub times, skin preparation, expiration dates on sterile equipment, and the need for shoe covers and anti-static shoes (Caudwell, 1998; Giordano, 1993; Shewchuk, 1996; Wicker, 1997). Management techniques (Muller-Smith, 1999), nursing care plans (Palmer, 1988), and the peer review process for professional journals (Tilden, 2002) have been questioned by nurses in practice. However, not all areas of nursing are using research to challenge the traditions of yesterday to improve the nursing practice of the future.

EVIDENCE-BASED PRACTICE: WHO SHOULD BE INVOLVED?

Most nurses who graduate from baccalaureate and higher degree programs have experienced the research process, but there are many nurses who participate in direct patient or client care who have not had the opportunity to become involved in research. Identifying, designing, conducting, and evaluating research has often been considered the responsibility of the academic world—those “ivory tower” nurses. But to make changes in the day-to-day care of clients, research needs to be incorporated into the grassroots of nursing practice. How important is it for nurses who work directly with patients to use the research process to improve their own practice?

As a nurse educator, I have seen how the attitudes of practicing nurses impact the excitement and focus of students as they gain valuable clinical experiences. Students thrive in situations where practicing nurses take the time to share insights and special experiences with them. Students are so excited when a nurse mentor shares with a student the critical thinking skills used when the nurse made an important clinical decision. Experiential learning brings the textbooks alive to these students thanks to the interaction with competent clinical practitioners.

But in many clinical settings, I have also seen areas of practice where research findings could make a difference in the planning and implementing of care for patients. Unfortunately, many nurses do not even question what practices could or should be changed. Even when nurses read widely and learn about new techniques and practices that worked in a clinical trial, they seem unclear how these findings could be used to make changes in their own practice or in practice on the unit where they work. Consequently, students do not routinely see or hear how research is integrated into practice on a daily basis, and do not complete the clinical experiences with that knowledge.

In many clinical environments today, it is hard for nurses to complete the daily assignments of caring for the patients. Even if a nurse knows that implementing current research is important to providing good nursing care, it is just easier to keep doing something the way it has always been done than to try something new. When an institution has an affiliation with a school of nursing, students and staff can work together to examine current practices. Students learn the value of applying research in the “real world” as they work with nursing staff who are willing to question practice and make changes. Staff nurses see the enthusiasm, eagerness, and open minds of students who are willing to question practices. Students can team with nursing staff to identify the sacred cows of practice, to explore what research has been done on these sacred cows, and to evaluate what research will help make a difference in their practice. It’s a win-win situation.

ATTITUDES TOWARD RESEARCH MUST CHANGE

A few years ago, I had the opportunity to develop a senior seminar course for students in a new baccalaureate nursing program. As ideas for the course evolved, I decided to focus on research use and how essential research is to nursing practice today. I share this story as a way to illustrate how senior nursing students and a fun class activity were used to make changes in nursing practice. Even if you work in an institution where there are no students, this story illustrates a fun way to have staff nurses critically examine current practices and begin to use research in day-to-day practices.
The class began with a typical discussion of what research entails and how research can and should influence nursing practice. The first assignment was a trip to the library. Students were asked to identify four different nursing research journals and to determine the focus and intended audience for each journal. They were also asked to summarize at least one article and tell how the results of that research could be applied to nursing practice.

It was discouraging to see that the students had already decided that nursing research was dull and boring. Students complained that nursing research seemed so formal with specific terminology and rigid procedures. They also complained that most research journal articles were not easy or interesting to read. What changes needed to be made to our nursing research course to stimulate an interest in research? Had students already picked up the attitude of many practicing nurses in the clinical settings? Were they already afraid of the "R" word?

I began to ask myself several questions. How could I get these students to see the value of nursing research in today’s economic and political climate? Who would be making decisions on which nursing practices would be kept? Would it be the “well-respected” members of the medical establishment? Or would the accountant using “bottom line” calculations determine which practices would be too expensive or take too much time and therefore must be eliminated?

Nurses need to provide the best possible care to clients, so it is nurses who need to control the actions and activities of the profession. As an educator, I believe that the focus on using research needs to start in nursing education programs. If nurses learn the value of research as students, it is hoped they will work harder to apply research to their practice as graduates. Perhaps I could use this class to help students develop a more positive attitude, and perhaps any excitement generated would rub off on the nursing staff on the clinical units. After all, these students would not graduate until spring, and this was only September.

INTRODUCING THE SACRED COW CONTEST

After a quick literature search, I found an article entitled “The Sacred Cow Contest” (Brown, 1993). Brown defined sacred cows as “those routine practices we do not even think about any more. Blessed by time, these practices normally escape scrutiny” (p. 31). She had encouraged nursing staff to examine practices in their clinical setting for sacred cows and did that with the use of a contest. An editorial entitled “Clinical Scholarship: Challenging Stereotypes, Myths, and Sacred Cows” (Fetter, 1993) further defined sacred cows as “individuals, organizations, or institutions regarded as exempt from criticism” (p. 98). After reading these articles, I decided to include a Sacred Cow Contest in the course. A contest similar to the one held at the hospital where Brown worked seemed like a fun way to encourage students to question traditional nursing practice without threatening the staff members on the units where they were assigned for clinical experiences.

Each student was enrolled in two of four clinical nursing courses taken during their senior year. The idea of a Sacred Cow Contest seemed like a fun way to tackle this hesitancy to use research in practice. Brown’s article had an illustration of a cow with a stethoscope and nursing cap with the caption “Got a beef with nursing? Maybe you think a practice hasn’t moooved with the times? Research can help you break away from the herd!!” (Brown, 1993, p. 31). Using the illustration and caption from Brown’s article, a small poster was made to stimulate interest in the contest.

After introducing the Sacred Cow Contest, I established the ground rules of the contest. Students were asked to identify three sacred cows: the most traditional practice, the least logical practice, and the most time-consuming practice they observed on the units. They were sent as detectives to examine the practice of nurses in their respective clinical areas to identify and investigate these three sacred cows. They had the perfect alibi to ask “why?” After all, their instructor had given them this “dumb” assignment to identify three sacred cows. If the staff felt offended, the students could always blame their professor.

The tactic worked. The first group of students completed the Sacred Cow Contest with great enthusiasm. Yes, it was just another class assignment, but in an attempt to address this “boring” topic of research once more, we had turned it into something fun and unusual. Students presented the sacred cows identified in each area and the rationale for choosing that sacred cow. They were identifying clinical problems, which is the first step in the research process.
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As part of the contest, students were required to identify research articles that focused on their identified sacred cows. Did the research they find support or refute the practice in question? Did they find research articles that were in conflict with one another? Students shared what they had found and were surprised to see how many articles refuted what they had seen practiced. Many students also found research articles that recommended new evidence-based nursing interventions or clinical practice techniques for the topics they had identified.

We voted on the winners in each of the three categories. Prizes were awarded (e.g., candle holders with cows painted on the sides and cow-shaped cookie cutters), and the winners' ideas were published in the student newspaper. The ideas were also shared with the nurses on the units. Soon the students began to ask whether some of these new ideas could be implemented on the clinical unit. We were well on our way to developing some great research utilization ideas.

FORMING RESEARCH TEAMS

As the course evolved, the Sacred Cow Contest became the impetus for a practice-based research project. Students were encouraged to form a research team of two or three individuals to share ideas and stimulate discussion of the project. Although students would do most of the work, each group was encouraged to incorporate ideas from staff nurses on the units where they were assigned. Many of the staff nurses had been interested in the sacred cows students had identified, and several new ideas were generated by this group effort. Each team was given the opportunity to identify one problem in the clinical setting and set up a plan to research the problem. The problem did not have to be one of the ideas generated by the Sacred Cow Contest, but many of those ideas were selected.

As an alternative to researching a specific problem, students were given another option for their class project. Many students found new practice ideas in their review of professional journals and were excited about those findings. Instead of researching an existing problem, these students were encouraged to explore ways to implement the new practice ideas in one of the clinical settings where they were learning and practicing their skills. The clinical setting had established guidelines for staff who wanted to request a change in practice on a unit. Students were given these guidelines to use as they developed a proposal for implementing the change in the clinical setting where they were assigned. The proposal needed to clearly state the problem, identify several potential alternative solutions, and then establish a plan to implement the recommended practice.

The excitement was growing. Ideas were taking shape and the students wanted to share the results of their research findings. They were finding that many of the sacred cows could be remedied with simple changes. They also learned how difficult but exciting it was to introduce new ideas on a unit and test the effectiveness of the new practice. We discussed the importance of dissemination of research regardless of the results. To make changes in practice, nurses need to know what research is being done and then learn how to translate that research into practice.

Instead of a traditional, formal written paper (which usually gets little or no exposure to the real world), the end product of the course needed to have a user-friendly outcome. Students were asked to put their ideas into a professional-style poster. A Call for Posters was issued and a Research Utilization Day was determined. A classroom in the hospital was scheduled and invitations were sent to the faculty, students, and nursing staff on the clinical units to attend our poster presentation during the last week of the semester. Our goals were set. We had posters to develop and a deadline to meet. The big day was fast approaching, and the students were enthusiastic about sharing their nursing-based research proposals.

NEW QUESTIONS BEGAN TO ARISE

The proposal idea was working fine. The Sacred Cow Contest had provided the kind of stimulation and excitement I was hoping to generate. Little did I know what would happen next. Students were no longer asking questions about how to put the poster together, or whether their variables were clear. The mechanics of a research proposal were well established by their previous research course. Instead I was getting comments and questions such as: “I really would like to know how many kids actually do take Ritalin in our school” and “Is it okay if I try this project on the dermatology unit?”

One registered nurse student with a job as a school nurse came to me and said she was so excited about what she had read. She had found the idea of a 1-day
health fair approach using teachers, parent volunteers, and nursing staff to facilitate the completion of school screenings in a timely fashion. She was so excited about this approach that she shared her proposal with the school principal and he approved the implementation of her project. Could she ask the class for volunteers to help?

Another trio of students was interested in observing patients and families in the intensive care unit. Hospital policies indicated that visitors were restricted to 5 minutes per hour to reduce the potential increased stress for the patient when the family was in the room. Did family visits really cause increased stress on the client, or was it more stressful for the nurses? Was this rule rigidly or sporadically enforced? What was the average length of family visits? Questions had been raised and the students wanted to find the answers.

Students were developing a sense of curiosity that was no longer satisfied by just identifying a problem and writing a proposal. They wanted to find answers to their questions. Time was running out in this one-semester course, so there was not enough time to actually conduct a full-fledged research project. However, students were encouraged to complete a pilot project whenever feasible. The data collected could be added to the poster to give it more credibility.

After consulting with the Director of Nursing Services, the head of the Hospital Research Committee, and the chair of the Human Subject Rights committee at the college, we decided that students would be allowed to proceed with an expedited review of the research proposals for the pilot studies. The existing student research teams initially served as preliminary Human Subject Rights committees to review each other’s proposals. Each team had the chance to present their proposal to the student committee and receive feedback from their peers. This process also allowed students to understand what an Institutional Review Board or a Human Subjects Rights committee process involved. The criteria and format used by the hospital for human subjects review were used to evaluate the proposals. Proposals were reviewed and critiqued with the option for revision before final approval was given to proceed. If the pilot study involved patients or nurses in the hospital, the proposal was also submitted for additional review by the hospital and institutional Human Subjects Rights committees. The projects had taken on a broader perspective than I had ever imagined.

From a student standpoint, the poster session was a great success. The posters were professional in appearance (we had read several excellent articles about poster development in nursing journals), and the students were professional in their appearance and activities. Each group prepared a 5- to 7-minute summary of their proposal to share with poster session attendees. One group used a small VCR machine to share segments of interviews conducted as part of their project. Another group displayed samples of new supplies they were recommending for adoption by the hospital, and could show the cost-effectiveness of implementing the new equipment. The faculty and student turnout was great and provided a lot of positive feedback to the students.

From a staff nurse perspective, the attendance by nursing staff was disappointing. Only the Director of Nursing Services from the hospital and a few supervisors attended. Was this turnout typical of the interest practicing nurses had in innovative projects and research? Brown (1993) commented that only 110 of the 700 nurses in her hospital voted for the sacred cows. But Brown noted that at least they were able to begin making changes in nursing practices in their institution. She indicated that the internal publicity about the sacred cows “gave nurses an immediate understanding of the value that research-based practice could have” (p. 33). Through the external publicity, “the general public also gained an awareness of nursing’s desire to improve patient care through research” (p. 33). Isn’t that what all of us want—to improve patient care?

LESSONS LEARNED
What lessons did the students learn from this process? What can we as practicing nurses learn from the Sacred Cow Contest and working with students on our units? The bigger question is “How can all nurses get involved in changing the sacred cows in nursing practice?” There are many simple activities that we can all incorporate into our role as professional nurses. None of them are too complex, but each action reminds us that we should constantly examine ways to improve nursing practice. Here are the lessons we learned:

- Begin by examining the practices and actions of the nursing personnel where you work. Ask questions about why this intervention has been ordered. Ask how a particular outcome can best be achieved. Examine the things that frustrate you the most or that take the most time.
- Then begin to question the rationale for what you are doing. Look for research that supports nursing
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interventions. Read professional journals and begin to incorporate some of these new ideas into what you do at work. If there is new research that conflicts with a policy or procedure in the institution, discuss the findings with the supervisor or clinical nurse practitioner to help determine whether the practice should be continued.

- Use research studies to suggest alternatives for the practice. Share information found with other nurses and the nurse manager. Develop a plan to implement the new alternative. Keep accurate documentation of the results, and then share the results with other nurses. Research can be integrated into the daily practices of every nurse.

- Advocate for changes in practice if there are no research findings to support what is currently being done. Team up with the students and the faculty members in your facility to conduct small, practice-based research projects that impact nursing care on a daily basis. Students will learn from this situation, and staff can contribute their years of experience and expertise to identify problems and implement the changes that are suggested during this process.

- Remember, dissemination of results is as important when something fails as it is when something succeeds. Publish the results of new interventions in the local institution newsletter, the local paper, or a professional journal. Don’t forget that most professional meetings seek poster presentations for new and innovative nursing practice.

- Remember to keep a positive outlook and an open mind to change. Nothing will stay the same forever; everything we have learned in nursing is subject to change over time. So enjoy a sense of wonder and have fun learning.

Can nursing change? Will nursing be ready to move into the future with evidence-based practices? Are we willing to get rid of the sacred cows that impede change? Are we ready to explore alternatives to improve the quality of care? Only nurses can answer these questions. However, for these changes to occur, all nurses need to be involved.

Perhaps you did not have the opportunity to be enrolled in a nursing research course as part of your nursing education. Perhaps you work in a small hospital. Or perhaps you are the only nurse in your local public school system. You still can make a change. You still can make a difference.

Practice-based research begins with the simple identification of problems in your workplace. Just like my students, you can take these problems and document their existence. You can also identify new and innovative ways to make changes. Research utilization is considered a buzz word by today’s nursing professionals, especially among nurse researchers. However, research utilization will occur only if the nurses working at the bedside and in the community are willing to make the changes necessary to improve care. It is up to all of us regardless of our background or where we work. We owe it to ourselves, our clients, and our profession.

The Sacred Cow Contest turned out to be more successful than I had ever hoped. The nurses who attended the poster session were impressed with what the students had done and were quick to take notes on the data as well as the students’ recommendations. In subsequent semesters, nurses on the units began to suggest topics or asked to have students examine a particular problem. The Director of Nursing at the local hospital asked for the abstracts from student projects and often requested the actual posters to share with the appropriate staff personnel. Students were invited to bring their posters to the individual units where they had collected data to share the findings with nurses who were unable to attend the poster session.

It was interesting to see what happened after students began to share their findings on the unit level. Soon we saw changes being made in practice. For example, when students conducted a chart review for data on preparation of children for surgery, they noted that there was no place to document the child’s psychological preparation; the charts were soon changed. Some students completed a cost analysis comparing the cost of pre-packaged wet dressings (such as they had seen advertised in a professional journal) with the cost of using 4 × 4 gauze dressing and sterile water. When the cost of nursing time involved in using either treatment was included in the charge, the hospital began to explore purchasing the pre-packaged dressings as a cost- and time-saver for the staff. Still another group did a survey of patients and nurses to determine the satisfaction of using bag baths versus traditional bed baths and soon saw the implementation of bag baths on several units.
In subsequent semesters, we held the poster session in the hospital cafeteria, and even tried to schedule it during lunch hours to encourage more attendance. We always shared the posters with staff after the poster session by placing them in the library or sharing them directly on the units. Interestingly, it wasn’t until we were able to offer continuing education credits for the poster session that we saw more nurses make the effort to attend the actual poster session.

**CHANGING PRACTICE: HOW TO DO IT**

Just like the students in my class, you can begin to make a change in nursing practice. As a practicing nurse, you can do some or all of the following activities during the next few days. If you are a staff education director, you can be instrumental in encouraging staff to look for sacred cows in your institution; maybe you can hold your own contest and see what practices are questioned by the staff. Here are some ideas to get you started:

- Keep a list (mentally or on paper) of the things you question about the nursing practices where you work.
- Keep your eyes and ears open. Are there other nurses questioning what they are doing and why?
- Identify sacred cows in your practice. Look for practices that are the least logical, the most time consuming, and the most traditional.
- Read professional journals at your institution, library, or online to see if you can find some new research on traditional practices. Which ideas can be implemented on your unit?
- Talk to other nurses about sacred cows they have encountered and what, if anything, they have done to try to change the practice.
- Check the procedure manual at your institution to learn how a procedure should be done, and then check to see if there are references for the procedure. Is this an evidence-based practice?
- Volunteer to participate in regular reviews of policies and procedures on your unit. Use standards of care established by various professional organizations to establish new or verify old policies and procedures to ensure that you are using the best practices in your institution. Make sure all policies are based on sound, scientific research; evidence-based practice should guide all decisions made on your unit.

- Enjoy the feelings of curiosity you have when you don’t know what to do or how something is going to turn out. Just like my students, you may have the beginnings of a nursing-based research project just waiting to be explored.

It was exciting to see the staff become more involved in the Sacred Cow Contest and the resulting pilot study projects. It was even more exciting when changes were made on the units based on the research shared by the students or the pilot studies that were conducted. The Sacred Cow Contest provided a unique method to question nursing practices. The students found this a fun way to work with the nursing staff and to see how simple research projects could make an impact. And isn’t that what we had hoped to do from the start?

**REFERENCES**


