



THE UNIVERSITY OF BRITISH COLUMBIA

School of Nursing
Okanagan Campus

NURSING 504 COURSE SYLLABUS

Finding and Integrating Knowledge for Evidence Informed Practice

Spring 2022
May 9 - June 10

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TA



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Master of Science in Nursing (MSN) Program Overview

Welcome to the Master of Science in Nursing (MSN) Program at the University of British Columbia Okanagan Campus. The MSN program offers opportunities for baccalaureate nurses to develop and advance their professional knowledge, practice, and scholarship. Graduate students will engage in scholarly inquiry within a chosen area of nursing practice. Consistent with the College of Registered Nurses of British Columbia (CRNBC) definition, nursing practice is broadly defined as practice within the domains of clinical work, education, administration and research. In addition to a required core of foundation courses, students will select either a course-based or a research-based stream. The course-based stream may be completed in 16 months of full-time study. The research-based stream requires a minimum of 24 months of full-time study. Both streams have part-time options and are offered via a combination of flexible delivery and intensive summer courses offered on campus. Graduates will be prepared to participate in knowledge development, application, integration, and translation through leadership roles within their practice setting.

MSN Program Objectives

The MSN program at UBC Okanagan serves to provide nurse leaders with the tools needed to succeed in collaborative inter-professional teams. The program cultivates creative problem solving, innovation and the pursuit of evidence-based knowledge.

The MSN program aims to help graduates excel at:

1. Creating, translating and using nursing knowledge in all its forms
2. Synthesizing and applying diverse perspectives within scholarly nursing research, practice and knowledge development
3. Cultivating advanced ethical reasoning and critical thinking
4. Developing advanced skills and strategies for evidence-informed decision-making and practice

NRSG 504 - Calendar Description

Focuses on the development of students' abilities to find, critique, and synthesize evidence to inform the scholarly development of advanced practice in their teaching, management, research, and provision of nursing care. [3-0-0]

Prerequisite: First-year standing in the Master of Science in Nursing program or permission of the Graduate Program Coordinator, School of Nursing. Additional Course Requirements.

Course Format

This course will be offered online in an intensive format over a period of 8 days, from May 9 - 18, with additional time to complete and submit assignments following the initial intensive period. The course officially ends on June 10th.

The course is structured around 2 sets of modules: course content modules and assignment modules. There are 5 course content modules and 6 assignment modules.

The content modules will take the form of facilitated discussions of course readings and be covered synchronously via Zoom. The assignment modules will be completed by students independently.

The course professor will be available via Zoom, CANVAS, or email to answer any questions or concerns related to the course assignments. Further details about the course structure are provided in the course schedule on page 9.

We will use the online platform, CANVAS, to communicate the course syllabus, course announcements, and any other course-related materials. Questions to the course professor/TA should be posted in the CANVAS discussion board in the first instance, as we receive many of the same questions that would be beneficial for all students to know. Individual meetings about specific aspects of assignments can also be organized with the course professor/TA on an as needed basis.

We will use the UBC Library databases and the [UBC Covidence software](#) in this course. [Please sign up for a Covidence account](#) at the start of the course.

The Zoom link for the synchronous sessions will be found on the course Canvas page on the left hand side under "Zoom". When you click there, you will see a button to join each day.

Course Overview

Students will learn to identify and refine a search question, systematically identify and collate relevant literature, and summarize the findings for a relevant audience. Students will deepen their understanding of the relationships between research, knowledge translation, and advanced nursing practice. Students will also increase their understanding of fundamental principles of knowledge translation as well as analyze common challenges associated with moving knowledge into actions that improve nursing and health care.

Course Objectives

This course offers the opportunity for students to:

- identify a topic of interest to focus on in their graduate studies
- work with an information scientist to design and implement a feasible search strategy to locate the accessible evidence on the topic of interest
- conduct a rapid review of relevant literature using a systematic search method
- critique and summarize relevant research to address a selected practice-oriented search question; use [Covidence](#) (or other bibliographic tool) as an online research management and writing tool to help gather, manage, store and share information, and generate citations and bibliographies for research purposes
- generate a written report on the rapid review using a variety of processes/tools through which knowledge may be refined, distilled and tailored to the needs of knowledge users (health care professionals and policy makers)
-

Learning Outcomes

After completing the course, student will be able to:

- recognize indications for different types of reviews (e.g., systematic; scoping; meta-synthesis);
- demonstrate how to conduct a rapid review of relevant literature using a systematic search method
- articulate the characteristics of different types of evidence

- describe and critique a range of knowledge translation models and interventions (education, informatics, linkage, patient mediated, etc.)
- prepare an informative report that prepares stakeholders for discussion on a research or policy issue

Evaluation Criteria & Grading

This course is graded on a numeric (percentage) basis. Average performance should receive marks in B range. Marks in A range are for good performance; and the A+ range, for outstanding performance. Graduate students are expected to maintain marks in the B range (68%) or above. See graduate program requirements for Masters' students at <https://www.grad.ubc.ca/faculty-staff/policies-procedures/academic-progress>

Course Assignments:

1. Rapid Review Part 1– Background & Method	20%	Due May 13 @9am
2. Rapid Review Part 2 – Findings	25%	Due May 16 @ 10pm
3. Rapid Review Part 3 – Presentation	10%	Due May 17 @10pm
4. Rapid Review Part 4 – Final Report	30%	Due June 3 @9am
5. Seminar Participation	15%	

Further guidelines about each assignment will now be outlined. This information is also available on CANVAS under the “[Assignments](#)” tab.

1. Rapid Review Part 1 - Background and Method (20%) - Due May 13 @ 9am

A rapid review is a modification of a systematic review that allows you to gather evidence, using a systematic method, in an abbreviated time frame. In this course you will have the opportunity to *select a question of interest from your own practice* and to review the evidence available to answer that question. This is the perfect opportunity to gather literature for your thesis or capstone project. We will go through the rapid review process in a step-by-step fashion throughout our eight days together. You will be required to produce an evidence report as the major assignment in the course. The assignment is structured so that you have an opportunity to submit portions of the assignment, get feedback, and then revise those portions prior to the final submission.

In this first assignment, you will focus on the background information, as well as the method used to search for appropriate literature. You are expected to develop a 3-4 page proposal, using the guidelines provided in class, that includes an argument for why this is an important question, the search question/purpose, and the search method. Tools for documenting your search strategy and a sample methods paragraph are located on the CANVAS site.

The assignment should include the following:

- Cover page
- Background to the research question (1-2 pages)
- Finalized review question
- Proposed search methods described in paragraph format
- Reference list in APA format
- Appendix “Literature Search Strategy”

- Please submit as a Word file using the naming convention: LASTNAME FirstName_RR Background_N504 May2022 (example: SANTOS Don_RR Background_N504 May 2022.docx).

Grading Criteria:

1. Clear and logical argument for why this is an important question
2. References used are appropriate and current
3. Research question is clearly identified
4. Search methods are described in enough detail so that someone else could replicate the search
5. Appendix outlines all relevant information
6. Proper APA referencing

Hints for success:

- Make your title specific to the “what” (your substantive topic) and “how” (rapid review). e.g. “Rural palliative care: A rapid review”
- References should be recent; if you include older references, it should be clear why this is a key/foundational paper in the field/topic area.
- Statistics should be highly relevant and recent.
- Watch your tenses – stay in the past or present but not both.
- Make sure your argument has “flow” with connected ideas (i.e., how does your last point connect to the next point you are making?).
- Say HOW you used your Boolean operators and only include your final search.

2. Rapid Review Part 2 – Findings (25%) - Due May 16 @ 10pm

For this second assignment, you will conduct the search, select publications to be included, critique the included studies, and submit a data extraction table that summarizes the findings and limitations of included publications. Tools for completing this assignment are located on the CANVAS site. You will use the Covidence software platform to complete this assignment.

This assignment consists of various pieces that will be included in your final assignment. These pieces should include the following:

- Cover page
- “Literature Search Strategy”
- A Covidence account containing the results of your search (add charlene.ronquillo@ubc.ca and [REDACTED] as reviewers in Covidence)
- A Prisma flow diagram
- Revised (from assignment 1) methods paragraph
- A data extraction table with findings grouped logically (e.g., alphabetically or by theme)
- Reference list in APA format
- Please submit as a Word file using the naming convention: LASTNAME FirstName_RR Findings_N504 May2022 (example: SANTOS Don_RR Findings_N504 May 2022.docx).

Grading Criteria:

1. Search strategy is replicable based upon information provided
2. Covidence processes correspond with Prisma diagram
3. Data extraction table is concise, correct, informative, and parallel in language
4. Limitations are identified appropriately
5. Correct APA referencing

Hints for Success:

- Turn your paper to “landscape” so it fits. List studies in alphabetical order unless you are discussing them in a thematic way.
- Start all your purpose statements with “to” and make sure all studies directly answer your question.
- Keep findings concise and to the point - no sentence fragments.
- Make sure the findings are written in such a way that they answer the research objective of the study.
- Know what a measurement instrument is.

3. Rapid Review Part 3 - Presentation (10%) - Due May 17 @ 10pm

This assignment is modeled after the 3-minute thesis (3MT) in which students are asked to explain the breadth and significance of their research in 1 slide and 3 minutes. In keeping with the 3MT requirements your presentation needs to embody the 3 C’s: CLEAR, CONCISE, CAPTIVATING. Your presentation will be timed and must finish within the 3 minutes allowed. Presentation order will be through random draw.

Presentation grades will be assigned by through real-time peer-evaluation of the 3MT presentations. A link to the evaluation form will be provided on the presentation day.

Please upload a PDF version of your presentation slide to CANVAS by the assignment due date. Presentations will be held on May 18th.

Peer-Review Grading Criteria:

1. Presenter is clearly audible and engaging.
2. The presentation has been well-rehearsed.
3. The slide is captivating.
4. It is clear why this is an important topic.
5. Listeners are clear on the quality of the evidence and preliminary findings.

4. Rapid Review Part 4 – Report (30%)

This final report summarizes all of the steps completed to date and has additional requirements of a summary page, a narrative summary of the findings, and a discussion. The report should be structured as follows (page numbers are only a guide):

- Page 1: Cover page: title and student identification
- Page 2: Summary page which includes research question, 3-4 key messages about findings (including what you didn’t find), and the intended audience for this review
- Pages 3-4: Background revised from assignment 1
- Pages 5: Method revised from assignment 2
- Pages 6-8: Narrative summary of findings
- Pages 9-10: Discussion
- References. This should include both the studies analyzed and other references cited in paper.
- Appendices: Literature search strategy, Prisma diagram; Table of studies
- Please submit as a Word file using the naming convention: LASTNAME FirstName_RR Final Report_N504 May2022 (example: SANTOS Don_RR Final Report_N504 May 2022.docx).

Grading Criteria:

1. Instructor feedback on previously submitted components are integrated/addressed.
2. Key messages represent major findings.

3. Findings are discussed in an integrated manner.
4. Critical appraisal of articles are demonstrated.
5. Discussion reiterates the major findings, relates the findings to other relevant literature, states the clinical relevance, acknowledges limitations and makes suggestions for further research.
6. Correct, clear and concise writing style with APA referencing.

Hints for Success:

- Summarizing each study is not the same as synthesizing your results (very common misunderstanding). Integrate findings by finding common themes, trends, or identifying differences across studies.
- Be sure to answer your research question when presenting the findings.
- Integrate and/or address instructor feedback from prior assignments
- In the discussion section present the 'so what' of your findings in relation to your background argument.

5. Seminar Participation (15%)

Consistent with UBC expectations for graduate students, students are expected to attend class fully prepared to discuss, question, and comment on assigned readings and associated learning activities.

The goal of all shared class time in any mode is to co-create a safe, collegial learning culture where diverse ideas can be explored and critiqued in respectful, stimulating, and creative ways. Discussion groups will be responsible for posting a summary of their in-class discussions on the CANVAS discussion board.

Please notify the course professor in advance if you are unable to attend a session. If you are unable to participate in a scheduled session, you will be responsible for reading through ALL group discussion summaries and provide a brief reflection (maximum 300 words) of how your own thoughts relate to the group discussion summaries.

Grading Criteria for Seminar Participation (Peer-Review Grading Criteria):

1. Demonstrates consistent preparation to engage in class discussions
2. Conveys openness to, and respect of, new ideas and diverse perspectives
3. Engages in constructive analysis of the ideas presented in class
4. Critiques relevant evidence and theory for ideas under consideration
5. Uses a variety of group skills to keep group functioning at a scholarly level
6. Provides feedback to peers regarding seminar participation
7. Demonstrates consistent attendance/completion of alternate activities if unable to attend, access/engagement with CANVAS course materials

Detailed Guidelines for Seminar Participation

You will be randomly assigned into discussion teams at the start of the course. Within your team, you will assign each member with articles to read and present to your team.

We will begin each group discussion as a large class before going into breakout rooms with your teams. Teams will have 30-35 minutes for discussion. Presentation of your assigned article(s) should address the following points (if appropriate to your article) and should be NO LONGER than 5 minutes which then allows for group discussion.

1. Provide an overview of the main points of the article, highlighting what you think to be most important in the context of this class.

2. Comment on the quality of the article. In other words, provide your own analysis of the points made or of the quality of the research.
3. Pose a question that the article raised for you. Try to pose questions that are relevant to the topic and have the potential to engage the knowledge that your colleagues already have.

To conclude group discussions, we will come together as a large class for the last 15-20 minutes of the session. Once you have discussed the articles in your small group: 1) a designated member of your group will then present your major learnings about the topic under discussion to the larger class; and 2) summary of your teams major learnings should also be posted to the discussion board (maximum 300 words). Each day you should designate one of your group members to take notes of your learnings from the discussion and report back to the larger group. You will be responsible for marking the contributions of members of your team. You will be provided with an online form to submit your daily evaluations of your fellow team members.

Grading Criteria for Discussion of Assigned Readings (Peer-Review Grading Criteria):

	Excellent (4-5 points)	Acceptable (between 2.5-4 points)	Improvement Needed (less than 2.5)
Engagement	Remains active and engaged throughout the discussion.	Contributes well to the discussion but occasionally withdraws and does not participate.	Contributions are sporadic or scattered. Frequently distracted.
Original Voice	Consistently raises the discussion to new levels with creative and original thinking, and/or starts new discussions that carry the discourse.	Provides original thoughts and inspirations relative to topics of individual interest or expertise.	Follows or echoes existing discussions without original contributions.
Constructive Responses	Actively follows discussion to provide constructive responses that celebrate, elaborate and encourage the contributions of participants.	Responds appropriately to the flow of discussions in ways that demonstrate good timing, lively consideration and quality of thought.	Responds in ways that are off-topic, poorly paced, or discouraging to broader participation.
Demonstrated Knowledge	Knows articles well and applies thoughtful analysis and critique.	Demonstrates a sound understanding of the articles presented.	Participates without a sound understanding of the articles presented

UBC Okanagan Grading Scale

Letter Grade	Percentage	Descriptor
'A+' Level	90-100%	Outstanding
'A' - 'A' Level	80-89%	Very Good
'B' Level	68-79%	Acceptable
'C' Level	60-67%	Below Average
'D' Level	0-59%	Inadequate

'A' Level (80-100%)

Indicates a very good to outstanding assignment. Examples of indicators of very good quality include: accurate, and consistently strong in structure, expression, mechanics (grammar, punctuation & spelling) and presentation. Well organized, linkages evident, logical development of ideas leading to defensible conclusions/proposals, sound critical and analytical thinking. Key literature used and cited.

An outstanding assignment will show excellent comprehension of the subject and innovative ideas on the subject. Contains original and credible argument or presentation of the assigned topic with attention to many diverse perspectives; integration of the literature draws on a wide range of current and/or relevant sources and serves as the foundation of clearly articulated arguments/proposals. All 'A' level papers show a writing style that is clear and succinct with correct use of grammar, punctuation, spelling and referencing format. Errors of expression are infrequent and do not detract from the paper's effectiveness.

'B' Level (68-79%)

Indicates a competent assignment. Examples of indicators of competent but not excellent quality could include: Good quality work with no major weaknesses. Well focused on the topic; clear, explicit; discussion shows more than adequate comprehension of the subject. Some degree of critical and analytical thinking; some use of the literature; most perspectives discussed but considerations of others would have improved the paper. Writing style clear and succinct with only occasional structure, grammar, punctuation, spelling and (correct) use of referencing format errors. Errors of expression are occasional rather than chronic and do not obscure meaning.

'C' Level (60 - 67%)

Indicates an adequate assignment. Examples of indicators of adequate but not quite competent quality could include: Fair comprehension of the subject but some weaknesses in content and/or structure. Discussion is vague even though on topic; important details or perspectives are left out. Insufficient use of the literature; minimal evidence of critical and analytical thinking; transitions may be inconsistent; evidence may be occasionally unconvincing or incomplete. Lacking in clarity and succinctness. Errors in structure, grammar, punctuation, spelling and referencing format, but not so serious or so chronic that they make the paper difficult or impossible to understand.

'D' Level (0-59%)

Indicates an inadequate assignment. Examples of indicators of inadequate quality could include: The paper suffers from one or more of the following: may be off topic; incorrect or absent information leading to questionable conclusions. Lacks clear and adequate development and presentation of ideas; obvious flaws in critical and analytical thinking. Limited comprehension of the topic; minimal use of literature. Contains serious and repeated errors in structure, grammar, punctuation, spelling and referencing errors that obscure meaning.

Course Schedule

Monday May 9

Time	Topic	Notes
9:00-9:15	Welcome	Zoom - Dr. Charlene Ronquillo
9:10-10:10	Graduate Program Orientation	Zoom- [REDACTED] Program Coordinator
10:15-11:00	Library Orientation	Zoom - Robert Janke, UBCO Nursing Liaison & Associate Chief Librarian
11:00-11:15	Break	
11:15-12:00	Canvas Orientation	Zoom - Dr. Charlene Ronquillo
12:00-12:30	Lunch	
12:30-14:30	Course Introduction / Student In-Class Working Time	Zoom - Dr. Charlene Ronquillo
14:30-15:30	Assignment Module 1: Introduction to Evidence Reviews	Independent Review of Power Point & Readings
15:30-15:50	End of Day Wrap-Up / Questions	Zoom
16:00	Readings for Tomorrow	Homework

Tuesday May 10

Time	Topic	Notes
9:00-10:00	Group Discussion of Course Content Module 1: Evidence Informed Practice – What is it?	Zoom – breakout rooms
10:00-10:15	Break	Zoom
10:15-11:15	Assignment Module 2: Identifying Your Question	Independent Review of Power Point & Readings
11:15-12:00	Group Discussion of Assignment Module 2: Identifying Your Question – Fleshing out our topics	Zoom
12:00-12:30	Lunch	
12:30-13:30	Linking your research question to systematic search strategies	Zoom - [REDACTED] UBCO Nursing Liaison & Associate Chief Librarian
13:30-15:15	Student In-Class Working Time	Independent
15:15-15:35	End of Day Wrap-Up / Questions	Zoom
16:00	Readings for Tomorrow	Homework

Wednesday May 11

Time	Topic	Notes
9:00-10:00	Group Discussion of Course Content Module 2: Facilitators & Barriers to Evidence Informed Practice	Zoom – breakout rooms
10:00-10:30	Questions	Zoom

10:30-12:00	Assignment Module 3: Finding & Screening Evidence	Independent Review of Power Point & Readings
12:00-12:30	Lunch	
12:30-13:30	Independent reading: Course Content Modules 3 and 4	Independent
13:30-14:00	Covidence overview and demo	Zoom - ██████████ UBCO Nursing Liaison & Associate Chief Librarian
14:30-15:30	Student In-Class Working Time – article search and import into Covidence	Independent (<i>Charlene available via Zoom</i>)
15:30-15:50	End of Day Wrap-Up / Questions	Zoom
16:00	Readings for Tomorrow	Homework

Thursday May 12

Time	Topic	Notes
9:00-10:00	Group Discussion of Course Content Module 3: Evidence-Informed Practice Environments	Zoom – breakout rooms
10:00-10:15	Questions	Zoom
10:15-12:00	Assignment Module 4: Writing Your Background	Independent Review of Power Point & Readings
12:00-12:30	Lunch	
12:30-13:30	Group Discussion of Course Content Module 4: Creating Evidence-Based Practice Guidelines: Beyond the Literature	Zoom – breakout rooms
13:30-15:00	Student In-Class Working Time	Independent (<i>Charlene available via Zoom</i>)
15:00-15:20	End of Day Wrap-Up / Questions	Zoom
16:00	Readings for Tomorrow	Homework

Friday May 13

Time	Topic	Notes
9:00	Rapid Review Part 1– Background & Method	Assignment 1 due
9:00-10:00	Assignment Module 5: Extracting & Critiquing Your Evidence	Independent Review of Power Point & Readings
10:00-12:00	Student In-Class Working Time	Independent (<i>Charlene available via Zoom</i>)
12:00-12:30	Lunch	
12:30-15:00	Student In-Class Working Time	Independent (<i>Charlene available via Zoom</i>)
15:00-15:20	End of Day Wrap-Up / Questions	Zoom
16:00	Readings for Tomorrow	Homework

Monday May 16

Time	Topic	Notes
9:00-9:15	Orientation to the Week / Questions	Together - Zoom
9:15-10:30	Group Discussion of Course Content Module 5: KT & Partner Engagement	Zoom – breakout rooms

10:30-12:00	Student In-Class Working Time	Independent
12:00-12:30	Lunch	
12:30-15:00	Student In-Class Working Time	Independent (<i>Charlene available via Zoom</i>)
15:00-15:20	End of Day Wrap-Up / Questions	Together - Zoom
16:00	Readings for Tomorrow	Homework
16:00	Work on 3MT presentation	Homework
22:00	Rapid Review Part 2– Findings	Assignment 2 due

Tuesday May 17

Time	Topic	Notes
9:00-9:15	Checking in / Questions	Together - Zoom
9:15-10:30	Assignment Module 6: Writing Up the Findings & Discussion	Independent Review of Power Point & Readings
10:30-12:00	Student In-Class Working Time	Independent
12:00-12:30	Lunch	
12:30-15:00	Student In-Class Working Time Alert instructor of 3MT presentation requirements	Independent (<i>Charlene available via Zoom</i>)
15:00-15:20	End of Day Wrap-Up / Questions	Together – Zoom
22:00	3MT Presentation slide upload	Assignment 3 due

Wednesday May 18

Time	Topic	Notes
9:00-9:15	Checking in / Questions	Together - Zoom
9:15-10:30	Rapid Review Presentations	Together - Zoom
10:30-11:00	Break	
11:00-12:30	Rapid Review Presentations (continued)	Together - Zoom
12:30-13:00	Lunch	
13:00-15:00	Student Project Working Time	Independent (<i>Charlene available via Zoom</i>)
15:00	End of Course Wrap-Up! 😊	Together - Zoom

Note: I will offer 2 drop-in sessions via Zoom following the intensive period of the course. These sessions will be optional and will be an opportunity to discuss the final assignment. The dates will be decided in consultation with students.

Course Content Modules

Module 1: Evidence-Informed Practice. What is it?

Guiding Questions:

1. What is evidence-informed decision making (EIDM), and why is it important to nursing practice?
2. What are the steps to evidence-based practice?
3. What responsibilities do you have as a clinician, educator, or manager for EIDM?
4. What is the difference between evidence-informed and evidence-based practice? What are the arguments for and against? What assumption of the relationship of practice to evidence does each make?

Readings:

1. Ciliska, D. (2012). *Introduction to evidence- informed decision making*. Retrieved from CIHR website: http://www.cihr.ca/e/documents/Introduction_to_EIDM.pdf.
2. Canadian Nurses Association. (2018). *Evidence-informed decision-making and nursing practice*. [Position statement]. Ottawa: Author. Retrieved from CNA website: https://hl-prod-ca-oc-download.s3-ca-central-1.amazonaws.com/CNA/2f975e7e-4a40-45ca-863c-5ebf0a138d5e/UploadedImages/documents/Evidence_informed_Decision_making_and_Nursing_Practice_position_statement_Dec_2018.pdf.
3. Fontaine, D. (2019). Applying research to cannabis nursing practice: Confessions of an integrative nurse coach using the evidence-based practice process. *Beginnings: American Holistic Nurses Association*. October, 6-7; 26-28. Retrieved from: http://sageintegrativewellness.com/wp-content/uploads/2021/01/Beginnings_CNE_2019_issue_5_Applying-Research-to-Cannabis-Nursing-Practice.pdf
4. Makic, M.B.F., & Granger, B.B. (2019). De-implementation in clinical practice: What are we waiting for? *AACN Advanced Critical Care*, 30(3), 282-286. <https://doi.org/10.4037/aacnacc2019607>.

Module 2: Facilitators and Barriers to Evidence-informed Practice

Guiding Questions:

1. What are the factors that influence the adoption of EBP in nursing? Analyze the legitimacy of those factors.
2. Where/how do nurses get the knowledge they need for practice? What are the pros and cons of those sources?
3. What might you say to an experienced nurse who says that over the years she has learned what works and that is EBP?
4. How might we use the role of the APN to better support EBP?
5. How does the process of EBP relate to knowledge translation?
6. In light of what we know about nurses and evidence, what might be the risks of adopting the idea of EIP?
7. Of all the articles in this module, which do you think are the strongest? Why?

Readings:

1. Gerrish, K., Nolan, M., McDonnell, A., Tod, A., Kirshbaum, M., & Guillaume, L. (2012). Factors influencing advanced practice nurses' ability to promote evidence-based practice among frontline nurses. *Worldviews on Evidence-Based Nursing*, 9(1), 30-39. <https://doi.org/10.1111/j.1741-6787.2011.00230>.
2. Hanrahan, Kirsten, Wagner, Michele, Matthews, Grace, Stewart, Stephanie, Dawson, Cindy, Greiner, Joseph, . . . Williamson, Ann. (2015). Sacred cow gone to pasture: A systematic evaluation and integration of evidence-based practice. *Worldviews on Evidence-Based Nursing*, 12(1), 3-11. <https://doi.org/10.1111/wvn.12072>.
3. Ruzafa-Martínez, M., López-Iborra, L., Armero Barranco, D., & Ramos-Morcillo, A. J. (2016). Effectiveness of an evidence-based practice (EBP) course on the EBP competence of undergraduate nursing students: A quasi-experimental study. *Nurse Education Today*, 38, 82-87. <https://dx.doi.org/10.1016/j.nedt.2015.12.012>.

Module 3: Evidence-Informed Practice Environments**Guiding Questions:**

1. How does Cammer's article illustrate the overlap between EBP and Knowledge Translation?
2. What organizational factors influence EBP?
3. What interventions have been employed to support nurses' use of EBP at the point of care? How successful have they been?
4. How might theory better inform evidence for practice and nurses use of that evidence?

Readings:

1. Smith-Miller, C. A. (2022). Implementing Evidence Informed Practice Changes: Barriers, Facilitators, and Work Environments. *JONA: The Journal of Nursing Administration*, 52(4), 203-210. <https://doi.org/10.1097/NNA.0000000000001132>.
2. Cammer, Allison, Morgan, Debra, Stewart, Norma, McGilton, Katherine, Rycroft-Malone, Jo, Dopson, Sue, & Estabrooks, Carole. (2014). The hidden complexity of long-term care: How context mediates knowledge translation and use of best practices. *Gerontologist*, 54(6), 1013-1023. <https://doi.org/10.1093/geront/gnt068>.
3. Jansson, I., & Forseberg, A. (2016). How do nurses and ward managers perceive that evidence-based sources are obtained to inform relevant nursing interventions? - an exploratory study. *Journal of clinical nursing*, 25(5/6), 769. <https://doi.org/10.1111/jocn.13095>.

Module 4: Creating Evidence-Based Practice Guidelines: Beyond the Literature**Guiding Questions:**

1. What was the purpose of each of the interventions described in these articles?
2. What was used as primary evidence?
3. What steps were taken to gather that evidence?
4. What steps were taken to ensure quality evidence?

5. How do these strategies compare to only gathering evidence through the literature, in your opinion?

Readings:

1. Campbell, C., Nowell, A., Karagheusian, K., Giroux, J., Kiteley, C., Martelli, L., McQuestion, M., Quinn, M., Rowe Samadhin, Y.P., Touw, M., & Moody, M. (2020). Practical innovation: Advanced practice nurses in cancer care. *Canadian Oncology Nursing Journal*, 30(1), 9-16. <https://doi.org/10.5737/23688076301915>.
2. Davis, S.M., Jones, A., Jaynes, M.E., Woodrum, K.N., Canaday, M., Allen, L., & Mallow, J.A. (2020). Designing a multi-faceted telehealth intervention for a rural population using a model for developing complex interventions in Nursing. *BMC Nursing*, 19(9), 1-9. <https://doi.org/10.1186/s12912-020-0400-9>.
3. James-Reid, S., Bain, K., Hansen, A.S., Vendelbo, G., Droste, W., & Colwell, J. (2019). Creating consensus-based practice guidelines with 2000 nurses. *British Journal of Nursing*, 28(22), S18-S25. <https://doi.org/10.12968/bjon.2019.28.22.S18>.

Module 5: Knowledge Translation and Partner Engagement

Guiding Questions:

1. What is KT and how has it been referred to in the literature?
2. What are KT activities and who is responsible to undertake them?
3. What are the challenges inherent to KT?
4. Why are knowledge users important to evidence informed practice?
5. What are best practices in involving knowledge users in health research?
6. What assumptions undergird the current KT discourse and how is it related to how we think about knowledge? How might we think about KT differently?

Readings:

1. Greenhalgh, T., & Wieringa, S. (2011). Is it time to drop the 'knowledge translation' metaphor? *Journal of the Royal Society of Medicine*, 104,501-509. <https://doi.org/10.1258/jrsm.2011.110285>.
2. Rattray, M., Marshall, A. P., Desbrow, B., von Papen, M., & Roberts, S. (2021). Assessment of an integrated knowledge translation intervention to improve nutrition intakes among patients undergoing elective bowel surgery: a mixed-method process evaluation. *BMC health services research*, 21(1), 1-12. <https://doi.org/10.1186/s12913-021-06493-2>.
3. Crosschild, C., Huynh, N., De Sousa, I., Bawafaa, E., & Brown, H. (2021). Where is critical analysis of power and positionality in knowledge translation?. *Health Research Policy and Systems*, 19(1), 1-9. <https://doi.org/10.1186/s12961-021-00726-w>.

Additional Resources:

1. Bacsu, J., & Macqueen Smith, F. (Eds.), (2011). *Innovations in knowledge translation: The SPHERU KT casebook*. Saskatoon, SK: University of Saskatchewan. Available at:

<http://www.spheru.ca/publications/files/SPHERU%20KT%20Casebook%20June%202011.pdf>

2. Interior Health. (2010). *Interior Health knowledge translation casebook: Sharing stories of evidence informed practice*. <https://studyres.com/doc/8011640/interior-health-knowledge-translationcasebook>.

Assignment Modules

Module 1: An Introduction to Evidence Reviews

Guiding Questions:

1. What is unique about a rapid review? How does it differ from a critical review, literature review, scoping review or systematic review?
2. Haby et al. (2016) used the [AMSTAR criteria](#) to a tool that can be used to evaluate the quality of rapid reviews (adapted from systematic reviews).
 - a. What are the review components assessed by the AMSTAR criteria?
 - b. What did they conclude about the body of published rapid reviews?
 - c. What other recommendations do the authors provide to improve the quality of rapid reviews in the literature?
 - d. How do the other example reviews for critique meet the AMSTAR criteria?

Readings:

1. Grant, M.J., & Booth, A. (2009). A typology of reviews: An analysis of 14 review types and associated methodologies. *Health Information and Libraries Journal*, 26, 91-108. <https://doi-org.ezproxy.library.ubc.ca/10.1111/j.1471-1842.2009.00848.x>.
2. Kennedy, C., Ramukumba, M.M. (2020). Systematic and integrative review: synthesizing evidence for community nursing practice. *British Journal of Community Nursing*, 25(1), 6-9. <https://doi.org/10.12968/bjcn.2020.25.1.6>.
3. Khangura, S., Konnyu, K., Cushman, R., Grimshaw, J., & Moher, D. (2012). Evidence summaries: The evolution of a rapid review approach. *Systematic Reviews*, 1, 10. <https://doi.org/10.1186/2046-4053-1-10>.
4. Haby, M. M., Chapman, E., Clark, R., Barreto, J., Reveiz, L., & Lavis, J. N. (2016). What are the best methodologies for rapid reviews of the research evidence for evidence-informed decision making in health policy and practice: a rapid review. *Health research policy and systems*, 14(1), 1-12. <https://doi.org/10.1186/s12961-016-0155-7>.
5. Tricco, A. C., Tetzlaff, J., & Moher, D. (2011). The art and science of knowledge synthesis. *Journal of Clinical Epidemiology*, 64, 11-20. <https://doi.org/10.1016/j.jclinepi.2009.11.007>.

Examples of Reviews for Critique:

1. Pesut, B., Greig, M., Thorne, S., Storch, J. Burgess, M., Tishelman, C., Chambaere, K., Janke, R. (2019). Nursing and euthanasia: A narrative review of the nursing ethics literature. *Nursing Ethics*, Published online May 21, 2019, 1-16. <https://doi.org/10.1177/0969733019845127>.
2. Pesut, B., Thorne, S., Stager, M. L., Schiller, C., Penney, C., Hoffman, C., . . . Roussel, J. (2019). Medical assistance in dying: A review of Canadian nursing regulatory documents. *Policy, Politics and Nursing Practice*, 20(3), 113-130. <https://doi.org/10.1177/1527154419845407>.
3. Pesut, B., Thorne, S., Greig, M., Fulton, A., Janke, R., & Vis-Dunbar, M. . (2019). Ethical, policy, and practice implications of nurses' experiences with assisted death: A synthesis. *Advances in Nursing Science*, 42(3), 216-230. <https://doi.org/10.1097/ANS.0000000000000276>.

Module 2: Identifying Your Question

In this module you are going to identify the question that will direct your rapid review. There are all kinds of different questions that can inform your rapid review. The PICOT format is best suited to clinical questions (for which there may be little evidence!); however, you may choose to review any topic of interest to nursing. Ideally, this topic will be one that you follow up on in your thesis or capstone project. This is the time to identify what is known in the area that interests you. Lipscomb's article is included here because it reveals how all different forms of reason and evidence inform questions of interest to nursing.

You will need to spend some time looking in the literature before you can decide on your question. For example, you may have identified a question for which there is not enough evidence to write about. One way to do this is to simply do a quick search in the data base that best matches your topic. Use the key words that you think are most appropriate and then order the results in terms of 'relevance'. Read the abstracts of what you have found until they no longer seem to apply to your topic. Ask yourself the following questions: Did I find articles that directly speak to my topic? Are they primarily theoretical or empirical? Does my topic seem too broad or too narrow? Did I find other terms that might match my topic better?

Resources:

1. Lipscomb, M. (2015). Just how wide should 'wide reading' be? *Nursing Philosophy*, 16(4), 187-202. <https://doi.org/10.1111/nup.12095>.
2. Stillwell, S. B., Fineout-Overholt, E., Melnyk, B. M., & Williamson, K. M. (2010). Asking the clinical question: A key step in evidence-based practice. *American Journal of Nursing*, 110(3), 58-61. <https://doi.org/10.1097/01.NAJ.0000368959.11129.79>.

Module 3: Finding and Screening Your Evidence

In this module you are going to construct a search strategy, implement the search, decide on inclusion and exclusion criteria for your review, and identify relevant studies. It is important to note that this is more of an art rather than a science, particularly as we are trying to keep your review to what is manageable for a course.

Resources:

1. Kable, A. K., Pich, J., & Maslin-Prothero, S. E. (2012). A structured approach to documenting a search strategy for publication: A 12 step guideline for authors. *Nurse Education Today*, 32(8), 878-886. <https://doi.org/10.1016/j.nedt.2012.02.022>.
2. Tricco, A. C., Tetzlaff, J., & Moher, D. (2011). The art and science of knowledge synthesis. *Journal of Clinical Epidemiology*, 64, 11-20. <https://doi.org/10.1016/j.jclinepi.2009.11.007>.

Module 4: Writing your Background

In this module you will learn how to write an 'argument' for a literature review. This may be quite different than writing you have done to date. We will also review good graduate writing practices.

Resources

1. Banbury, A., Roots, A., & Nancarrow, S. (2014). Rapid review of applications of e-health and remote monitoring for rural residents. *The Australian Journal of Rural Health*, 22, 211-222. <https://doi.org/10.1111/ajr.12127>.
2. Harker, J., & Kleijnen, J. (2012). What is a rapid review? A methodological exploration of rapid reviews in Health Technology assessments. *International Journal of Evidence-Based Healthcare*, 10, 397-410. <https://doi.org/10.1111/j.1744-1609.2012.00290.x>.
3. [UBCO Online Writing Community](#) (registration required)
4. [Paramedic method](#) for writing concisely
5. Dr. Raul Pacheco-Vega's [blog post on writing effective introductions](#).

Module 5: Extracting and Critiquing your Evidence

In this module you are going to organize your findings on a data extraction table. You will also be required to make some judgements about the limitations of the evidence. There are excellent critical appraisal tools available online for the different study methods. You are not expected to conduct this level of critique for each study you review. However, you should be aware of the strengths and limitations of each study you have included.

Resources

1. Critical appraisal tools from Joanna Briggs: <https://jbi.global/critical-appraisal-tools> (new link)
2. Critical appraisal of intervention studies. Retrieved from CIHR website: <http://www.cihrirsc.gc.ca/e/45235.html>.
3. Critical appraisal tools from Equator Network: <https://www.equator-network.org/reporting-guidelines/>

4. Dr. Raul Pacheco-Vega's [blog post on one approach to synthesizing evidence in a literature review](#).

Module 6: Writing Up your Findings and Discussion

This is the final step of your assignment and it is not due until 9am on June 3rd. This is a formal paper and must include all the elements outlined in the assignment criteria.

Resources

1. Barbour, R. S., & Barbour, M. (2003). Evaluating and synthesizing qualitative research: The need to develop a distinctive approach. *Journal of Evaluation in Clinical Practice*, 9(2), 179-186. <https://doi.org/10.1046/j.1365-2753.2003.00371.x>.
2. Conn, V.S. (2017). How to craft a strong discussion. *Western Journal of Nursing Research*, 39(5), 607608. <https://doi.org/10.1177/0193945916650196>.
3. Perneger, T.V., & Hudelson, P.M.(2004). Writing a research article: advice to beginners. *International Journal for Quality in Health Care*. 16(3),191-192. <https://doi.org/10.1093/intqhc/mzh053>.
4. Thorne, S. (2017) Metasynthetic madness: What kind of monster have we created? *Qualitative Health Research*, 27(1), 3-12. <https://doi.org/10.1177/1049732316679370>.

Note: Additional resources for each of these assignments can be accessed via CANVAS in the "Assignment Resources" tab.

Academic Integrity

The academic enterprise is founded on honesty, civility, and integrity. As members of this enterprise, all students are expected to know, understand, and follow the codes of conduct regarding academic integrity. At the most basic level, this means submitting only original work done by you and acknowledging all sources of information or ideas and attributing them to others as required. This also means you should not cheat, copy, or mislead others about what is your work. Violations of academic integrity (i.e., misconduct) lead to the breakdown of the academic enterprise, and therefore serious consequences arise and harsh sanctions are imposed. For example, incidences of plagiarism or cheating may result in a mark of zero on the assignment or exam and more serious consequences may apply if the matter is referred to the President's Advisory Committee on Student Discipline. Careful records are kept in order to monitor and prevent recurrences. A more detailed description of academic integrity, including the University's policies and procedures, may be found in the Academic Calendar at <http://okanagan.students.ubc.ca/calendar/index.cfm?tree=3,54,111,0>.

Student Resources

Disability Services

The Disability Resource Centre ensures educational equity for students with disabilities, injuries or illness. If you are disabled, have an injury or illness and require academic accommodations to meet the course

objectives, please contact Earllene Roberts, the Diversity Advisor for the Disability Resource Centre located in Commons Corner in the University Centre building (UNC 227).

UBC Okanagan Disability Resource Centre: UNC 227A 250.807.9263

email earllene.roberts@ubc.ca

Web: www.ubc.ca/okanagan/students/drc

Health & Wellness Center

At UBC Okanagan, student health services are provided by Health and Wellness. There are no extra fees to use Health and Wellness Services. Most services are covered by your provincial health insurance. There are nurses, counsellors, and physician services available. They are located on the 3rd floor of the University Center (UNC 337).

Website: <http://www.ubc.ca/okanagan/students/health-wellness/welcome.html>

E-mail: campushealth.ubco@ubc.ca (Note: E-mail is checked once daily during weekdays)

Tel: 250.807.9270

SafeWalk (Campus Security)

Don't want to walk alone at night? Not too sure how to get somewhere on campus. For more information, see: <https://security.ok.ubc.ca/safewalk/>

Campus Security

Tel 250.807.8111 (Emergency Calls)

250.807.9236 (Non-Emergency Calls)

The UBC Emergency First Response Team

The UBC Emergency First Response Team (UBCEFRT) aims to serve the campus community by providing pre-EMS emergency and non-emergency care to any injured or ill members of the UBC Okanagan community. Each Responder maintains a minimum Standard First Aid (SFA) and CPR C standard of care, and supports all patients until the Responder is relieved by Campus Security or Emergency Medical Services, or until the patient is discharged.

Tel 250 807 9802

Website efrt.ok.ubc.ca/

Email ubc.efrt@ubc.ca

Sexual Violence Prevention and Response Office (SVPRO)

A safe place for faculty, staff and students who have experienced sexual assault regardless of identity, expression or orientation, regardless of when or where it took place.

Okanagan Campus

Nicola Townhome 120, 1270 International Mews

Kelowna, BC Canada V1V 1V7

Tel 250 807 9640

Ombuds Office

The Ombuds Office offers independent, impartial, and confidential support to students in navigating UBC policies, processes, and resources, as well as guidance in resolving concerns related to fairness.

UBC Okanagan Ombuds Office: UNC 227B 250.807.9818

email: ombuds.office.ok@ubc.ca

Web: <https://www.ubcsuo.ca/services-ombudsperson>

Equity and Inclusion

UBC Okanagan is a place where every student, staff and faculty member should be able to study and work in an environment that is free from discrimination and harassment. UBC prohibits discrimination and harassment on the basis of the following grounds: age, ancestry, colour, family status, marital status, physical or mental disability, place of origin, political belief, race, religion, sex, sexual orientation or unrelated criminal conviction. If you require assistance related to an issue of equity, discrimination or harassment, please contact the Equity and Inclusion Office.

UBC Okanagan Equity and Inclusion Office: UNC 227C 250.807.9291

email: equity.ubco@ubc.ca

Web: <https://equity.ok.ubc.ca>

Additional Student Resources	Web Sites
New to UBCO	https://students.ok.ubc.ca/new-to-ubc
Academic Success	https://students.ok.ubc.ca/academic-success
Aboriginal Programs & Services	https://students.ok.ubc.ca/aboriginal-students/contact
Health & Wellness Services	https://students.ok.ubc.ca/health-wellness
Involvement & Activities	https://students.ok.ubc.ca/involvement-activities
Career & Experiences	https://students.ok.ubc.ca/career-experience

Disclaimer

Every attempt has been made to ensure the accuracy and timeliness of the material in this syllabus. Nevertheless, some errors or omissions may have occurred. Teachers are expected to honor evaluation expectations and preset dates. However, teachers reserve the right to make reasonable changes and to make changes to class outlines as necessary throughout the semester.

****This course syllabus has been adapted by Dr. Charlene Ronquillo with permission from Dr. Vicki Foley, Spring 2021.***