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Chapter 1 : Teaching evidence-based practice in nursing | Search Results | IUCAT Kokomo

Teaching Evidence-Based Practice to Second-Career Nursing Students Jeanne T. Grace Teaching Evidence-Based Practice throughout an Undergraduate Curriculum: Here, There and Everywhere Rona F. Levin

In my spare time I love to play games and sports with my two young kids. While working clinically, Donna developed management and leadership training programs, new graduate orientation programs, and preceptor programs. She has published Nursing Education newsletters at pediatric hospitals, and served as an affiliate regional faculty for the American Heart Association. A personal note from Dr. I recently graduated from a doctoral program after 39 years as a Registered Nurse. It is important for nurses to support one another in their professional growth. Relocating to Nashville from Georgia brought her to the caring Christian environment of Belmont University. Personal Statement Teaching in the profession I love is overwhelmingly the most rewarding of my career! Aligning education with real-world clinical practice, building safe, ethically strong, professional, and resilience nurses is a privileged role I feel very blessed to do in the ever-changing healthcare environment. Caring student-faculty relationships ultimately build caring relationships with patients and are linked to improved patient outcomes, job satisfaction for nurses, critical to healthcare and the nursing profession. Outside of teaching, I enjoy the Nashville music scene with my husband. We have two grown daughters who presently live in Georgia and Washington DC. I am blessed with a large farm family in Wisconsin and always enjoy family time. Walking exercise, gardening, reading, and painting old furniture are my favorite hobbies. Friday-Saturday-Sunday nights, so I could go to graduate school full-time. I left two large teaching hospitals to work in the private side of medicine, in a small hospital, as a Critical Care Nurse Specialist. This truly removed me from patient care, and I was miserable doing planning, paperwork and budgets. This time to Belmont. I commuted from Kentucky, while my husband opened a new practice in Illinois with our two year old. I received a post-graduate certification as a nurse practitioner in family practice, and opened a private practice in a rural Illinois. After a short two years, we moved to Nashville. I loved my practice, but the opportunities in Nashville for my family could not compare, so here we are. Leslie Higgins for a recommendation. I have just completed my third full time year here teaching Principles of Acute Care After a fulfilling nursing practice in Pediatrics and Neonatology, Courtney returned to school to obtain an advanced degree in nursing education. Responsibilities Introduction to Nursing-Clinical Coordinator and Introduction to Nursing-lab instructor Personal Statement Nursing is a discipline of knowledge acquired both through formal education and through life experiences. The sum of these parts continues to alter and refine my nursing. My roles outside of nursing enhance my personal knowledge, which I bring to my professional life. These life experiences expose me to many cultures and attitudes about life. My spiritual self allows me to maintain my inner core of who I am in relation to others. These encounters help me to see my role as a nurse through a unique lens grounded in caring. Caring defines my life, and enhances my professional role as a teacher of nursing. Outside of teaching, I spending time with my children and husband. She is a Certified Rehabilitation Registered Nurse. The opportunity to care for someone at their most vulnerable time of need is deeply rewarding. I am privileged to have provided such care for traumatic brain injury, stroke, and spinal cord injury patients and to assist them in their daily struggle to piece back their lives. My time at Sarah Cannon Cancer Center was the most rewarding and fulfilling. I cared for and celebrated with many patients who experienced full remission; and have been blessed to be at the bedside of patients who, having lost their fight with cancer, take their last breath to be with our Lord, Jesus Christ. Dunlap joined Belmont University School of Nursing as a full time faculty in the fall of Please see the linked curriculum vitae below for details about Dr. Nursing represents a way to love people skillfully. In addition, nursing provides a front row seat for the human drama. I find both of these compelling reasons to be a nurse. I came to teach at Belmont in the fall of through a series of coincidences which make me believe that God wanted me here. My experiences at Belmont have never caused me to question His wisdom. Learning and growing with colleagues and students at

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Belmont is still one of the most satisfying aspects of my life. I love the global connections which teaching community health nursing gives me. I believe that diversity enriches life and that all of us are impoverished when any one of us is left out. In addition to interacting with students, I love to read the classics, participate in philosophical discussions of any kind, and walk, run or hike outdoors. Getting off the subject is something I particularly enjoy and I always look for opportunities to do so.

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Chapter 2 : Jeanne Sewell's Informatics & Nursing Blog:

Teaching evidence-based practice to second-career nursing students / Jeanne T. Grace Teaching evidence-based practice throughout an undergraduate curriculum: here there and everywhere / Rona F. Levin Teaching how to make accurate nursing diagnoses using an EBP model / Dina de Almeida Lopes Monteiro da Cruz, Cibele Andrucio de Mattos Pimenta.

Many of our practicing nurses have not yet had the necessary education to use EBP; this book was written to help nurse educators fill this gap. It was also written to encourage faculty to include EBP in the academic curriculum. We believe that all professional nurses, regardless of educational preparation, need to be able to practice evidence-based nursing. In order to do this, the following skills and characteristics need to be developed: Anything less is inadequate at this point in our professional evolution. Part of the questioning process is to assess the validity of nursing protocols and procedures that each clinical agency develops to standardize practice. Upon what types of evidence, if any, are they based? Knowing how to access, critique, and use the best evidence to do this job is crucial. This book provides readers with practical strategies from more than 20 distinguished educators who are experienced in teaching EBP to nurses. Part 1 introduces EBP in nursing and our philosophy of teaching it. Part 2 covers the teaching of core principles of EBP for nurses, which can be used in both academic and clinical settings. Parts 3 and 4 describe specific strategies for the academic and clinical settings, respectively. My husband, Roy, deserves an award for his constant support and encouragement. He never complained about the hours he spent alone when I was thinking and writing. I owe special thanks to my children, Sherry and Robert, for encouraging me to pursue my professional as well as my maternal career. I am grateful to my parents, Ruth and Martin Kaufman, who I know are watching from the stars. Your unconditional love and belief in me when I was growing up are what give me courage to create. Finally, I owe a special note of appreciation to my dear friend and coeditor, Harriet Feldman, for believing in the idea for this book and agreeing to work with me to help make that idea a reality. Levin So many people played a role in my scholarly and professional work and I would like to express my gratitude to them. My husband, Ron, has been an amazing cheerleader for all of my efforts, professional and otherwise. Our children, Craig, Jaime, Debbie, and Arlene, and their families— Frank, Devon, Ford, Bill, and Lindsay—and especially my mother, Florence Martin, and my brothers and their respective families have always been both supportive and proud of the work that I do. The tremendous support I have received from family, friends, and my colleagues at Pace University has also helped me to pursue these and other professional projects. Partnering with Rona Levin on a number of past projects as well as the current one has been a treat. This book made a number of turns as xvii xviii Acknowledgments the pieces came together, but we were always ready to listen to each other and debate, as necessary, to make changes. Having a sense of humor did not hurt either! Yet, we both know the meaning of cooperation and collaboration well. The many contributors not only shared their work with us but they also helped to shape the flow of the book and its chapters. And so we would like to thank them for sharing their experience and expertise toward creating a book we can all be proud of. Students past and present also helped to stimulate our thinking about what was important to include. She has always been a risk taker and we both value that very much. Although she has since left Springer for another venture, we would like to acknowledge our editor at Springer, Ruth Chasek, for her insightful comments, hands-on approach, and easygoing style. Last, but certainly not least, we are grateful to the Hugoton Foundation for funding the Joan K. This project could not have been possible without the continued interest and support of Joan K. The project helped to spur many of the ideas and works described in the chapters of this book. Rona and Harriet Foreword Although evidence-based practice EBP is now recognized as the gold standard framework for implementing clinical decision making and delivering high-quality care, only a small percentage of nurses and interdisciplinary health professionals are using this approach to their practices. Evidence from several studies indicates that the slow paradigm shift to EBP is attributable to multiple factors,

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such as perceived lack of time, lack of administrative support and mentorship, as well as inadequate search and critical appraisal skills. One result of teaching research the traditional way is that students often acquire a negative attitude toward research and leave their professional programs with little desire to continue to read, critique, use, and apply evidence from research. In their outstanding book, Rona Levin and Harriet Feldman draw upon several years of educational experience to capture creative approaches for teaching EBP. This book includes comprehensive and unique strategies for teaching EBP for all types of learners across a variety of xix xx Foreword educational and clinical practice settings. The concrete examples of teaching assignments provided in the book bring the content alive and serve as a useful, detailed guide for how to incorporate this material into meaningful exercises for learners. Use of the strategies highlighted in their book no doubt will play an important role in accelerating the paradigm shift to EBP that will lead to a higher quality of care being delivered by health care professionals. In order to learn from and implement these strategies, however, it is critical to have the foundation or mind-set for a different kind of teaching, one that is focused mainly on the learner and not on the teacher. What are the attitudes and values inherent in this new approach? What are the skills that students need to question their practice and ultimately make changes in the way they deliver care? Part 1 provides this foundation so that you can better understand the important tools for teaching and learning EBP in nursing within an evolving paradigm shift. A Bridge to Quality, in chapter 1 Levin makes the case for educating students and practicing nurses in using an EBP framework to stay abreast of the knowledge explosion in health and medicine and provide high-quality patient care. This chapterâ€™EBP in Nursing: Throughout the book, evidence-based practice is referred to as EBP; the words are not spelled out in each chapter prior to use of this abbreviation. In chapter 2, Feldman and Levin go into more depth about the need for a different approach to teaching and learning by engaging students firmly in the learning process. The notion of student centeredness has been bandied about for quite some time and has existed in a number of iterations, starting with Socrates. Why has it become so popular at this point? Many colleges and universities have adopted this orientation, as evidenced by the language on their Web sites and in their catalogues, but what does it really mean? This is not the way we view student centeredness; to us it means that students are partners in, rather than consumers of, the business of learning. This value is set forth in the presentation of philosophical foundations for teaching and learning, where the idea of collaborative learning is introduced. So in this interest we advocate for students working in mentoring relationships with their faculty and together with peers to achieve shared goals. This approach to learning fits well with EBP in that it is an active process requiring multiple perspectives, group work, and procedures for setting objectives and evaluating outcomes. Besides, as the chapter states, the collaborative approach to learning is itself based on evidence. Chapter 1 Evidence-Based Practice in Nursing: They did everything togetherâ€™went on long walks and discussed philosophies of life, encouraged the king in Wherever Land to provide health care for all its citizens, and created healing spas for the body, soul, and especially the imagination. And when the nurse needed answers to clinical questions, the wizard provided them. On one particular day the nurse and the wizard planned to go for a walk in the forest. The nurse was excited about this outing as she had been working very hard and needed answers to some burning clinical questions. She waited and waited and waited but the wizard never showed up. The nurse went to his home to find out what had happened to him. She was devastated when she learned that his time had come to go to wizard heaven. Of course, she would miss her dear friend very much. When her grief lessened, she began to think about her profession and wondered how she would ever be able to find the answers to her 5 6 Setting the Stage burning questions now that the wizard, her mentor, was gone. Luckily for the nurse, evidence-based practice was on the way to Wherever Land. Although this book emphasizes how to teach nursing students and nurses the EBP model for decision making in clinical practice, it also addresses the importance of using an evidence-based approach to the teaching and administration of nursing. You can see how these same skills can also be applied to educational and administrative questions in nursing. This model is flexible and dynamic, not linear. Though we need to know what we are looking for before we start searching for answers to questions, we should be prepared to go back and forth between asking questions and

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finding answers in the literature; between the answers found in the literature and their application to the population and setting with which we are concerned; and between application of this process and evaluation of EBP strategies we use. The acronym stands for population, intervention, comparison intervention, and outcome. One example of this type of question would be, What is the effect of clean versus sterile urinary catheter insertion on urinary tract infections in women who have undergone gynecologic surgery? This is a treatment, therapy, or intervention question. There are also questions of secondary prevention, prognosis, and harm Sackett et al. Examples of these types of clinical questions are as follows: In order to facilitate this, Levin, Lunney, and Krainovich-Miller devised an acronym for framing diagnostic questions, the PCD format. P refers to the patient population; C refers to the cues or cue clusters; and D refers to differential diagnosis see Box 1. For the PCD question in Box 1. After reviewing the evidence that is available on these diagnoses, the nurse might ask the following questions: What is the strength of the cues in relation to the possible diagnoses? Based on the evidence, which of the possible diagnoses represents the best match with the cues? Asking Answerable Questions About Education and Administration in Nursing In this book we are taking EBP a step beyond where it has been to include educational and administration decision making. After all, if we are teaching current and future nurses to base their practice on the best evidence, should we not as nursing educators and nursing service administrators do the same? Education The types of questions educators need to ask concern best teaching practices for achieving learning outcomes as well as questions related to the clinical content they are teaching. Below are examples of focused, answerable questions about teaching practices: And those concerning system-wide initiatives or management practices are no different. Examples are as follows: Finding the Evidence In order to find the evidence to answer burning clinical, educational, or administrative questions, nurses need to possess knowledge of the databases available and the most appropriate databases to search for answers to their specific questions. Diagnostic research in nursing is in its infancy. As such it may be necessary to look to other than nursing databases or sources for evidence. For example, when asking a treatment question, one may go to the Cochrane Library database www.cochrane.org. The type of diagnostic research in nursing we are discussing does not currently have such a database, so one needs to review the individual studies on a diagnosis of interest. Appraising the Validity of the Evidence Once the evidence is uncovered, the next step is to read it with a critical eye. This is the step that makes use of the critiquing skills learned in a basic nursing research course, except that there are only three major questions you need to answer: What is validity of the evidence you have uncovered? Are the results of these studies clinically, educationally, and administratively significant or important? Is the evidence usable with my population of patients, students or nurses in the setting in which I practice?

Chapter 3 : Nursing Faculty | School of Nursing | Belmont University | Nashville, TN

Based on the idea that nursing students and nurses at all levels can contribute to the development of a scientific base for nursing practice by critiquing and questioning guidelines, treatments, and outcomes of their own practice, this book examines the ways in which the teaching and learning of.

Chapter 4 : - NLM Catalog Result

Includes comprehensive strategies for teaching evidence-based practice(EBP) for various types of learners across a variety of educational and clinical practice settings.

Chapter 5 : Table of contents for Teaching evidence-based practice in nursing

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Chapter 8 : Teaching evidence-based practice in nursing (edition) | Open Library

Get this from a library! Teaching Evidence-Based Practice in Nursing. [Rona Levin; Harriet R Feldman] -- This AJN award-winning text is the only book to teach evidence-based practice (EBP) content grounded in a tested philosophy of teaching and learning.