



How do nurse academics value and engage with evidence-based practice across Australia: Findings from a grounded theory study



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ABSTRACT

Background: Integrating evidence-based practice (EBP) into undergraduate education and preparing future nurses to embrace EBP in clinical practice becomes paramount in today's complex and evolving healthcare environment. The role that EBP plays in the practical lives of nursing students will depend on the degree to which it is promoted by academics, how it is incorporated into courses and its application to clinical setting. Hence, nursing academics play a crucial role in influencing its integration into curricula. Drawn from a larger doctoral study, this paper presents findings discussing how nurse academics value and engage with EBP.

Methods: Grounded theory was employed to explore processes used by nursing academics while incorporating EBP into teaching and learning practices. Twenty-three academics across Australian universities were interviewed. Nine were also observed while teaching undergraduate students. Data were collected from semi-structured interviews and non-participant observation. In keeping with the tenets of grounded theory, data collection and analysis continued until theoretical saturation was reached. In total, four categories emerged. This paper focuses on the category conceptualised as *Valuing and Engaging with EBP*.

Results: How nursing academics valued and engaged with EBP was closely associated with meanings they constructed around understanding it, attitudes and commitment to implementation while teaching and working clinically. Different opinions also existed in regard to what actually constituted EBP. However, they engaged with and valued EBP by keeping themselves up-to-date, being involved in research activities, using evidence in teaching, therefore leading by example. Participants identified a number of barriers influencing their engagement with EBP including heavy workloads, limited time, lack of commitment within their schools, lack of confidence with teaching EBP, and complexity of EBP application. Faculty clinical practice, committed academics, workload management and continuing education were highlighted as facilitators.

Conclusion: A number of barriers prevented academics from fully engaging with EBP at academic or practice levels. Academic institutions and practice settings need to employ strategic planning to overcome such barriers.

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1. Introduction

Educating future nurses can be seen as a daunting challenge, particularly equipping them with adequate knowledge and skills of EBP to influence patient outcomes. Evidence-based practice has gained momentum globally as practitioners strive to make decisions about patient care based on the best available evidence. EBP has been described as a decision-making process for patient care that uses the best evidence available combined with practice experience and patients' own values and preferences to guide care (Sackett et al., 1996). Whereas, research utilisation refers to the use of research findings based on one single study and this concept is now recognised as a part of the broader concept of EBP (Melnyk and Fineout-Overholt, 2011).

Nurse academics can no longer focus entirely on clinical skills mastery and content knowledge, but must also prepare nurses to

develop a spirit of inquiry and skills to search for evidence to support clinical reasoning and thinking in their practice (Finotto et al., 2013). Because academics shape future practice of nurses through education and role modelling, it is important they incorporate EBP into their own teaching and learning practices (Hung et al., 2015).

To date, there is a paucity of studies examining nursing academics' understanding and engagement with EBP. In particular, how they engage and commit themselves to EBP in the context of clinical practice before imparting these skills to students remains an important area of investigation. To be successful in integrating EBP into undergraduate curricula, one must address academics' understanding, engagement and level of commitment towards EBP. While most faculty members demonstrate knowledge and competencies in traditional research processes, many do not have adequate knowledge, attitudes or competencies in EBP to be able to successfully incorporate it into teaching (Stichler et al., 2011).

Nurse academics have been slow to adopt the paradigm shift to EBP and have related concerns about the time it takes to integrate knowledge and skills in already full curricula, and their lack of ability to incorporate

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EBP into teaching and learning practices (McInerney and Suleman, 2010). A study by Stichter et al. (2011) explored perceptions of 125 faculty members with baccalaureate and master's degrees from two schools of nursing in the south western region of the United States. They found that attitudes of academics towards EBP were much more positive than their knowledge, skills and engagement with EBP. Barriers cited included misconceptions about EBP, lack of frameworks for curriculum design, limited mentorship, time, information literacy skills, administrative support, organisational resources, and inadequate statistical skills. In addition, participants indicated insufficient knowledge and skills in adopting EBP in their teaching practices. The researchers recommended continuing education opportunities for faculty to improve engagement with EBP in a way that encouraged faculty to seek more opportunities to incorporate it into their teaching practices, courses and student activities (Stichter et al., 2011).

Despite a plethora of literature on what evidence-based practice is, its inclusion in nursing education is still limited and requires investigation into teaching approaches, academics' engagement and EBP related course objectives and outcomes. Studies have reported that decisions to implement EBP in undergraduate programmes have not been made explicit, thus its incorporation represents an area of limited knowledge (Al Hadid and Al Barmawi, 2012; Waters et al., 2009). It is believed that adopting evidence-based practice in nursing education commences with undergraduate preparation and is carried further through graduate and doctoral studies (Melnyk and Fineout-Overholt, 2011). Therefore, exploring how nursing academics engage with, and influence integration of EBP into undergraduate curricula is vital in preparing graduates to adopt EBP into their practice. Hence, this paper draws upon findings from a grounded theory study that aimed to explain processes used by nurse academics while incorporating EBP into their teaching and learning practices. The key question underpinning the study was: What processes occur as nursing academics undertake to incorporate evidence-based practice into their teaching and learning practices? Findings presented in this paper focus on ways nurse academics engaged with and committed themselves to EBP.

2. Methodology

Grounded theory methodology (GTM) underpinned by symbolic interactionism was employed for this study. Grounded theory is an inductive, qualitative research approach ideal for the study as it focuses on human interaction and social processes (Munhall, 2007). Underpinned by symbolic interactionism, this research methodology emphasises process and relates to context, so was particularly suitable to answer the study question. GTM is appropriate to exploration of areas where little is known and the researcher aims to develop a substantive theory to understand and explain the social processes grounded in data (Anells, 1997). An important characteristic of GTM is allowing data collection using a variety of sources to understand how research participants construct meanings and define their realities in specific situations (Charmaz, 2006). Charmaz (2006) asserts that in order to produce credible theory, grounded theorists should focus on using various data collection methods such as observations, interview transcripts, documents and images throughout the research process.

3. Data Collection

Prior to commencing data collection, ethical approval was obtained from the relevant university ethics committee. Approvals were also obtained from heads of schools and written consent was obtained from all participants wishing to partake.

Data were collected through interviews and non-participant observation. Employing purposive sampling, nurse academics teaching undergraduate nursing curricula across Australian universities and colleges offering undergraduate nursing programmes were invited to participate in the study. Letter of invitations were sent to heads of

schools for distribution to their academic staff. Potential participants expressed their interest in participating by contacting the researcher. Twenty-three nurse academics teaching into undergraduate nursing courses across Australian universities and colleges were interviewed. Nine consented to be observed while teaching undergraduate nursing students.

Participants were given the choice to participate in both or either of the data collection methods. Interstate participants were interviewed via telephone with mutual agreement between participant and researcher. Participants were interviewed one-on-one using a semi-structured format with some guiding questions. Interviews were approximately of 45 to 90 min in duration, were audiotaped and later transcribed verbatim.

Observations of participants teaching undergraduate students were conducted during laboratory, tutorial and lecture sessions. Nine observations were undertaken across four states including Victoria, Queensland, South Australia and Western Australia. Before observations occurred, participants informed students regarding the purpose of the observation and the researcher assured that non-participant activities would not be reported in any stage of research process. Field notes were taken during the observations. To maintain participants' confidentiality and anonymity, pseudonyms were used throughout data analysis and communication of findings.

4. Data Analysis

Data were analysed using Charmaz's (2006) approach of open, focused and theoretical coding. Interviews and observations were transcribed into transcripts and field notes. They were read multiple times to generate codes to identify actions, processes, causes and behaviours. These codes were constantly compared with focused codes, data and with emerging concepts. These comparisons generated sub-categories and categories, which were further compared to codes and data to identify linkages between them. Charmaz (2006) asserts that grounded theory analysis depends on constant comparative method by continually engaging and interacting with data. This method enhances the conceptual understanding of the researcher and provides sense of direction in which the analysis is going (Charmaz, 2006). Theoretical memos and reflective diary were maintained throughout the study as a means of conceptualising the data. In keeping with the tenets of grounded theory, data collection and analysis continued until theoretical saturation was reached. NVivo 10 was utilised to organise data into codes and categories. As a result of this iterative and interactive process, four categories emerged. This paper focuses on the first category conceptualised as *Valuing and Engaging with EBP*. Other three categories were: *Enacting the Curriculum*, *Influencing EBP Integration* and *Envisaging the use of EBP*. Nurse academics instil EBP knowledge and skills by introducing EBP and research units in curriculum and integrating EBP into various units of study. Academics influence EBP integration by employing a variety of teaching and learning strategies and expecting students to apply EBP in theory and practice.

5. Findings

The category identified as "*Valuing and Engaging with EBP*" describes methods through which academics engaged with and committed to EBP. By having knowledge and understanding of EBP concepts, they kept themselves up-to-date with latest evidence. They further embraced it by undertaking research, disseminated research findings and incorporated evidence into their teaching and learning practices, therefore setting positive examples for their students and colleagues. This category is further conceptualised through sub-categories: *demonstrating some understanding of EBP, committing to and embracing EBP, keeping up to date, and leading by example*.

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