**Discussion Forum Guidelines and Example**

**General Guidelines for Discussion Questions:**

Responses to discussion questions should adhere to the following criteria:

* Responses should be thorough and address all components of the discussion question, typically 250-350 words in length unless specified otherwise
* Learners are expected to support responses with appropriate evidence. Learners may incorporate anecdotal evidence as well as research. In those cases where research is used, learners should include parenthetical citations and references using APA formatting guidelines, which can be found in the APA Style Guide, located in the Student Success Center.
* The instructor will provide further details about expectations for discussion responses in the course announcements.

An example discussion question and sample learner response are provided below.

**Example Discussion Question:**

Discuss evidence-based tools you could implement to evaluate your future practice. Why is evaluating your practice important?

**Example Learner Response:**

Changes in current practices and skills should be evaluated frequently with the use of evaluation tools. One tool that can assist in evaluating those advancing from a novice level is the Fresno test (McCluskey & Bishop, 2009). It is a comprehensive test that has been verified as a reliable and valid assessment tool (Dragan, 2009). The tool has a wide range of application because it is also effective with lower levels of proficiency. Different tools may be more applicable at different times and at different levels of proficiency with evidence-based practice. Evaluation of competency in practice incorporates evaluation of the main elements of practice—the knowledge level; competency in practice; performance and tasks relating to directing medical care; and evaluation of actions, their effectiveness, and their situational appropriateness (Dragan, 2009). Tools that help evaluate evidence-based practice can help discover how adept the provider is with different aspects of practice. Without evaluation of practice, problems that could possibly have been brought to light may remain undiscovered and act as impediments to improvement in practice. The practitioner’s problem-solving and critical-thinking skills, as well as the ability to demonstrate sound clinical reasoning in practice, are other aspects that benefit from evaluation of progress (Dragan, 2009). Communication and ability to work as a team can also be evaluated. Tools can guide evaluation in a more structured way and promote self-evaluation regarding the effectiveness of practitioners' thinking processes.

References

Dragan, I. (2009). Assessing competency in evidence based practice: Strengths and limitations of current tools in practice. *BMC Medical Education, 9*(53). doi:10.1186/1472-6920-9-53

McCluskey, A., & Bishop, B. (2009). The Adapted Fresno Test of competence in evidence-based practice. *Journal of Continuing Education in the Health Professions, 29*, 119-226. doi:10.1002/chp.20021

When doing replies to peers, don't criticize, rather offer a**dditional information on the topic that supports or provides an alternative perspective on the topic, and provide personal reflection and support with accurate citations.**

Build a rapport by using sentences like *'I find your discussion informative and engaging." 'thank you for a very informative discussion' 'I enjoy reading your post; it is very informative. I agree with you...' 'Great breakdown of..*

Then offer an additional perspective into the subject or topic (Always try and relate it to the initial discussion question)

Typical Peer responses are 100 to 150 words and have one reference