SYSTEMATIC LITERATURE REVIEW

AN EASY GUIDE

BY BRYNN QUICK

1. RESEARCH QUESTION(S)

What do you want to know? Make these questions as specific as you can. This will help you to extract data from the SLR studies in a systematic way.



2. ASK A LIBRARIAN!

Make an appointment with a university librarian who will help you devise a **search strategy**. The search strategy includes the keywords you will use to find your studies. The librarian will also tell you which databases will be best for your search. Come up with **inclusion and exclusion criteria**.



3. SEARCH & SCREEN - TITLES

Search for the SLR studies (librarian will help). This may result in hundreds of studies, so get a cup of coffee and get comfortable as you read each title and decide whether or not the study seems relevant to your research questions.



4. SCREEN - ABSTRACTS

Maybe now you only have 300 or 400 studies (after you threw away the ones whose titles had nothing to do with your research). Import this list into **Covidence**. Get another cup of coffee because now you are going to read all of the abstracts of the remaining studies. Get rid of any that don't meet your inclusion criteria.



5. EXTRACT DATA

Now that you have all of your studies, you want to answer your research questions. Go through each study and extract the data that answers them. A great way to do this is through a **Covidence template**.



6. EXPORT DATA

Once you have run your Covidence template against each study, Covidence will export all of your data into an Excel spreadsheet. This is the quantitative data that will really allow you to answer your research questions.



7. VISUALISE THE DATA

It's hard to compare a lot of quantitative data without visualising it first. There are lots of online programs that will allow you to import this data spreadsheet and then use the data to make bar graphs, pie charts, etc.



8. WRITE YOUR DISSERTATION!

You can do this! Remember to centre your writing around your research questions so that you have a good anchor. Write a little bit every day, and don't let perfect get in the way of submitted!



1. RESEARCH QUESTION(S)

What do you want to know? Make these questions as specific as you can. This will help you to extract data from the SLR studies in a systematic way.



RQ1: What types of language barriers exist between

patients and staff in hospitals?

How do hospital staff assess a patient's language RQ2:

proficiency and need for a multilingual

communication strategy?

What **current tools/strategies** do hospitals use to RQ3:

overcome these barriers and provide inclusive

communication?

What are the **advantages and challenges** to using RQ4:

these tools and implementing inclusive

communication strategies?

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Inclusion Criteria





7	
Study examines at least ONE (1) of the research questions	Study does not examine at least ONE (1) of the research questions
Study is a free full text in English	Study is, itself, a systematic review or meta-analysis
Study is peer-reviewed	Study is not peer-reviewed
Study has been completed and was published between 2018-2023	Study is not available as a free full text
	Study is not available in English
	Study is ongoing
	Study is part of a student's thesis
	Study does not take place in a hospital

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Randomized Controlled



Pub Med [®]	limited english proficiency hospital X Search Advanced Create alert Create RSS User Guide
	Save Email Send to Sort by: Best match \$ Display options \$ *
MY NCBI FILTERS	272 results 1 item selected × Clear selection 《 Page 1 of 2 > 》
RESULTS BY YEAR Reset 2018 2023 TEXT AVAILABILITY	Filters applied: Free full text. Clear all Language barriers and their impact on provision of care to patients with limited English proficiency: Nurses' perspectives. Cite Ali PA, Watson R. J Clin Nurs. 2018 Mar;27(5-6):e1152-e1160. doi: 10.1111/jocn.14204. Share PMID: 29193568 Free article. AIM AND OBJECTIVE: To explore nurses' perspectives of language barriers and their impact on the provision of care to patients with limited English proficiency from diverse linguistic background. DESIGN AND METHODS: A qualitative descriptive approach was used
☐ Abstract ☐ Free full text ☐ Full text ARTICLE ATTRIBUTE ☐ Associated data ARTICLE TYPE	Limited English Proficiency and Clinical Outcomes After Hospital-Based Care in English-Speaking Countries: a Systematic Review. Woods AP, Alonso A, Duraiswamy S, Ceraolo C, Feeney T, Gunn CM, Burns WR, Segev DL, Drake FT. J Gen Intern Med. 2022 Jun;37(8):2050-2061. doi: 10.1007/s11606-021-07348-6. Epub 2022 Feb 2. PMID: 35112283 Free PMC article. BACKGROUND: Limited English proficiency (LEP) is common among hospitalized patients and may impact careDISCUSSION: The research community lacks a standardized definition of LEP. Most studies did not find an association between English pr
Books and Documents Clinical Trial Introductory Journal Article Meta-Analysis	Implications of Language Barriers for Healthcare: A Systematic Review. Al Shamsi H, Almutairi AG, Al Mashrafi S, Al Kalbani T. Cite Oman Med J. 2020 Apr 30;35(2):e122. doi: 10.5001/omj.2020.40. eCollection 2020 Mar. PMID: 32411417 Free PMC article. Review. One study reported the implementation of online translation tools such as Google Translate and MediBabble in hospitals, which increased the satisfaction of both medical providers and patients

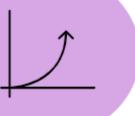
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Review Summary ■ PRISMA Settings 🕏 \$ This review is part of a trial and is restricted to screening 500 records. To remove this limit, <u>upgrade</u> to a paid plan Import references 7 total duplicates removed 🚹 Import Title and abstract screening 265 irrelevant 0 studies to screen TEAM PROGRESS ıė Brynn, 353 • DONE O conflicts you have screened 353 studies O ONE VOTE O NO VOTES Team settings

5. EXTRACT DATA

Now that you have all of your studies, you want to answer your research questions. Go through each study and extract the data that answers them. A great way to do this is through a Covidence template.



Data Extraction Template

- 1) Study title
- 2) Study authors
- Keywords searched
- 4) Database searched
- 5) Country in which the study was conducted
- Aim of study
- 7) Data collection method
- 8) Inclusion criteria (at least one)
- □ Tool or strategy used to overcome language barriers
- Advantages and challenges to using tools to overcome language barriers
- Type of language barrier
- ☐ How hospital staff assess a patient's language proficiency and need for multilingual communication strategy
- 9) What types of language barriers exist between patients and staff in hospitals?
- Verbal Written
- ☐ Auditory
- Technological literacy
- ☐ Health literacy Academic literacy
- ☐ Hospital/Healthcare system literacy
- 10) How do hospital staff assess a patient's language proficiency and need for a multilingual
- communication strategy? ☐ Not stated at all
- Upon hospital admission or triage
- □ Not explicitly stated the healthcare provider potentially identified the need for language services
- ☐ Not explicitly stated the language preference is listed in the EMHR but it is unclear who
- 11) What tool or strategy does the hospital in this study use to overcome language barriers and provide inclusive communication?
- Interpreters (in general, unspecified)
- Interpreters (in-person, professional)
- Interpreters (phone, professional)
- Interpreters (video, professional)
- Interpreters (ad hoc hospital staff and/or patient family members)
- Translated written discharge instructions ☐ Translation app
- Interpretation app
- Other (specify)
- 12) What are the advantages and challenges to using the specified tool(s) and implementing inclusive communication strategies?
- Challenge Language service not available at all hours Challenge - Too few language service providers
- Challenge Patient/Patient's family does not want to use the language service
- ☐ Challenge Language service is language/dialect-discordantChallenge Language
- service is or is perceived to be expensive
- Challenge Confidentiality and/or privacy concerns
- Challenge Language service itself perceived as time-consuming
- Challenge Time constraints in organising language service (real or perceived) Challenge - Language service providers untrained in specific medical terminology
- Challenge Language service not available in all needed languages
- Challenge Need to book the language service far in advance
- □ Challenge Lack of clarity on how to organise language service (patients)
- Challenge Lack of clarity on how to organise language service (hospital staff) ☐ Challenge - Lack of clarity regarding specific roles/scope of practice for healthcare team
- and language service providers
- Challenge Overestimation of language proficiency (patients)
- Challenge Overestimation of language proficiency (language service provider) Challenge - Lack of trust between healthcare providers and interpreters
- Challenge Lack of awareness of the existence of the language service (patients)
- Challenge Lack of awareness of the existence of the language service (hospital staff) Challenge - Linguistic minority patients lack access to technology
- ☐ Challenge Language or situation deemed too complex for any service other than in-person interpreter
- Challenge Inaccurate or insufficient translations/interpretations
- Challenge Other (specify)
- Advantage Interpreter as patient advocate/cultural broker Advantage - Family member as patient advocate/cultural broker
- Advantage More confidentiality and/or privacy compared to other types of language services
- Advantage Language service can cater to a wide variety of languages Advantage - Language service is or is perceived to be low-cost

Advantage - Language service is easy to organise (patients)
Advantage - Language service is easy to organise (hospital staff)
Advantage - Language service is quickly available
Advantage - Language service is available all or most hours
Advantage - Language service is easy to use
Advantage - Language service can be used with varying levels of technological literacy
Advantage - Other (specify)

Follow this link! https://support.covidence.org/help/create-and-publish-a-data-extraction-template

6. EXPORT DATA

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Study ID +1	Title	Reviewer Name	Authors	Keywords searched ▼	Database searche	Country in which the study was conducted	Aim of study
							To explore nurses' perspectives of language
	Language barriers and their impact on provision of care to patients with limited English proficiency: Nurses'						barriers and their impact on the provision of care to patients with limited English
Ali 2018	perspectives.	Brynn Quick	Ali, P.A. & Watson R.	limited English proficiency hospital	PubMed	England	proficiency from diverse linguistic background.
	Navigating the care between two distinct cultures: a			"limited English proficiency" "hospital"			To explore how hospitalized Arabic-speaking
	qualitative study of the experiences of Arabic-speaking		Alkhaled, T., Rhode, G., Lie, B.	"language" "language barrier"			patients experienced their interaction with the
Alkhaled 2022	immigrants in Norwegian hospitals	Brynn Quick	& Johannessen, B.	"healthcare access"	Google Scholar	Norway	Norwegian health-care system.
			Barreto, E.A., Guzikowski, S.,				
			Michael, C., Carter, J., Betancourt, J.R., Tull, A., Tan-				To identify areas where transition from hospital to community could be improved,
	The role of race, ethnicity, and language in care		McGrory, A. & Donelan K.				with a special focus on racial, ethnic, and
Barreto 2021	transitions.	Brynn Quick		limited English proficiency hospital	PubMed	United States	language differences.
			Blay, N., Ioannou, S., Seremetkoska, M., Morris, J.,				To use administrative data to explore which patients with LEP were provided with a
	Healthcare interpreter utilisation: analysis of health		Holters, G., Thomas, V. &				healthcare interpreter during their hospital
Blay 2018	administrative data.	Brynn Quick	Bronwyn, E.	limited English proficiency hospital	PubMed	Australia	admission

7. VISUALISE THE DATA

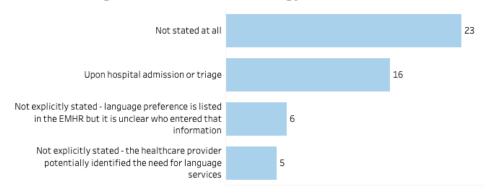
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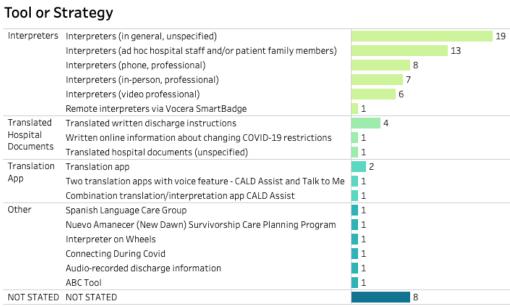


Interpreters (general)

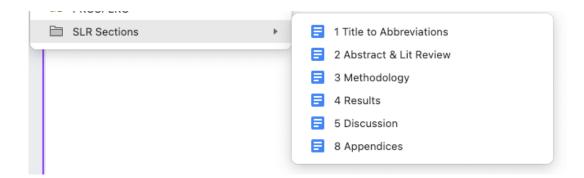
-	,-		
Advantages	Response	Interpreter as patient advocate/cultural broker	3
	Other	Increased odds of containing complete discharge education content and high-quality assessment of caregiver understanding	1
		Families felt more informed and reassured when an interpreter was present	1
Challenges	Response	Language service itself perceived as time-consuming	8
		Language service providers untrained in specific medical terminology	6
		Time constraints in organising language service (real or perceived)	4
		Patient/Patient's family does not want to use the language service	4
		Too few language service providers	3
		Language service not available in all needed languages	3
		Language service not available at all hours	3
		Lack of trust between healthcare providers and interpreters	3
		Lack of awareness of the existence of the language service (patients)	3
		Overestimation of language proficiency (patients)	2
		Overestimation of language proficiency (language service provider)	2
		Need to book the language service far in advance	2

How hospital staff assess a patient's language proficiency and need for a multilingual communication strategy





8. WRITE YOUR DISSERTATION! You can do this! Remember to centre your writing around your research questions so that you have a good anchor. Write a little bit every day, and don't let perfect get in the way of submitted!



I have personally found it easiest to write section by section. A lot of recommendations are to write in this order:

- 1) Methodology
 - 2) Results
- 3) Discussion
- 4) Abstract & Introduction
 - 5) Literature Review
 - 6) Conclusion

But do what works best for you!

I write in Google Docs as that allows me to log in no matter what computer (or phone!) I am on. Then, I download that google doc chapter as a Word document and send that to my supervisors so they can make edits. I also keep all of my references in Endnote.