

## Appendix B

### Question Development Tool

<b>1. What is the problem?</b>	
<b>2. Why is the problem important and relevant? What would happen if it were not addressed?</b>	
<b>3. What is the current practice?</b>	
<b>4. How was the problem identified? (Check all that apply)</b>	
<input type="checkbox"/> Safety and risk-management concerns <input type="checkbox"/> Quality concerns (efficiency, effectiveness, timeliness, equity, patient-centeredness) <input type="checkbox"/> Unsatisfactory patient, staff, or organizational outcomes	<input type="checkbox"/> Variations in practice within the setting <input type="checkbox"/> Variations in practice compared to community standard <input type="checkbox"/> Current practice that has not been validated <input type="checkbox"/> Financial concerns
<b>5. What are the PICO components?</b>	
<p><b>P</b> – (Patient, population, or problem)</p> <p><b>I</b> – (Intervention)</p> <p><b>C</b> – (Comparison with other interventions, if foreground question)</p> <p><b>O</b> – (Outcomes are qualitative or quantitative measures to determine the success of change)</p>	
<b>6. Initial EBP question   <input type="checkbox"/> Background   <input type="checkbox"/> Foreground</b>	

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<b>7. List possible search terms, databases to search, and search strategies.</b>					
<b>8. What evidence must be gathered?</b> <i>(Check all that apply)</i>					
<input type="checkbox"/> Publications (e.g., EBSCOHost, PubMed, CINAHL, Embase) <input type="checkbox"/> Standards (regulatory, professional, community) <input type="checkbox"/> Guidelines <input type="checkbox"/> Organizational data (e.g., QI, financial data, local clinical expertise, patient/family preferences) <input type="checkbox"/> Position statements					
<b>9. Revised EBP question</b>					
<i>(Revisions in the EBP question may not be evident until after the initial evidence review; the revision can be in the background question or a change from the background to a foreground question)</i>					
<b>10. Outcome measurement plan</b>					
<b>What will we measure?</b> <i>(structure, process, outcome measure)</i>	<b>How will we measure it?</b> <i>(metrics are expressed as rate or percent)</i>	<b>How often will we measure it?</b> <i>(frequency)</i>	<b>Where will we obtain the data?</b>	<b>Who will collect the data?</b>	<b>To whom will we report the data?</b>

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#### Directions for Use of the Question Development Tool

##### **Purpose**

This form is used to develop an answerable EBP question and to guide the team in the evidence search process. The question, search terms, search strategy, and sources of evidence can be revised as the EBP team refines the EBP question.

##### **What is the problem, and why is it important?**

Indicate why the project was undertaken. What led the team to seek evidence? Ensure that the problem statement defines the actual problem and does not include a solution. Whenever possible, quantify the extent of the problem. Validate the final problem description with practicing staff. It is important for the inter-professional team to take the time together to reflect, gather information, observe current practice, listen to clinicians, visualize how the process can be different or improved, and probe the problem description in order to develop a shared understanding of the problem.

##### **What is the current practice?**

Define the current practice as it relates to the problem. Think about current policies and procedures. Observe practices. What do you see?

##### **How was the problem identified?**

Check all the statements that apply.

##### **What are the PICO components?**

- P** (patient, population, problem) e.g., age, sex, setting, ethnicity, condition, disease, type of patient, or population
- I** (intervention) e.g., treatment, medication, education, diagnostic test, or best practice(s)
- C** (comparison with other interventions or current practice for foreground questions; is not applicable for background questions, which identify best practice)
- O** (outcomes) stated in measurable terms; may be a structure, a process, or an outcome measure based on the desired change (e.g., decrease in falls, decrease in length of stay, increase in patient satisfaction)

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#### Initial EBP question

A starting question (usually a background question) that is often refined and adjusted as the team searches through the literature:

- *Background* questions are broad and are used when the team has little knowledge, experience, or expertise in the area of interest. Background questions are often used to identify best practices.
- *Foreground* questions are focused, with specific comparisons of two or more ideas or interventions. Foreground questions provide specific bodies of evidence related to the EBP question. Foreground questions often flow from an initial background question and literature review.

#### List possible search terms, databases to search, and search strategies.

Using PICO components and the initial EBP question, list search terms. Terms can be added or adjusted throughout the evidence search. Document the search terms, search strategy, and databases queried in sufficient detail for replication.

#### What evidence must be gathered?

Check the types of evidence the team will gather based on the PICO and initial EBP question.

#### Revised EBP question

Often, the question that you start with may not be the final EBP question. Background questions can be refined or changed to a foreground question based on the evidence review. Foreground questions are focused questions that include specific comparisons and produce a narrower range of evidence.

#### Measurement plan

Measures can be added or changed as the review of the literature is completed and the translation planning begins:

- A *measure* is an amount or a degree of something, such as number of falls with injury. Each measure must be converted to a metric, which is calculated before and after implementing the change.
- Metrics let you know whether the change was successful. They have a numerator and a denominator and are typically expressed as rates or percent. For example, a metric for the measure falls-with-injury would be the number of falls with injury (numerator) divided by 1,000 patient days (denominator). Other examples of metrics include the number of direct care RNs (numerator) on a unit divided by the total number of direct care staff (denominator); the number of medication errors divided by 1,000 orders.