



Showcase for Hopkins Inquiry and Nursing Excellence

# SHINE

Conference **2023**

## Three Forms of Inquiry

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NURSING

# Nursing Strategic Initiatives and Goals and JHM Strategic Priorities



[Nursing Strategic Initiatives and Goals](#)



[John Hopkins Medicine Strategic Plan Innovation 2023](#)

- Describe the core components of EBP, QI and research
- Explain the similarities and differences among the 3 forms of inquiry and when to use them
- Identify the correct type of inquiry for given project examples

# The Three Forms of Inquiry

# What are the three forms of nursing inquiry?



# The Three Forms of Nursing Inquiry

## *Definitions*

- Evidence-Based Practice (EBP) is a problem-solving approach to clinical decision-making within a healthcare organization. EBP integrates the best available scientific evidence with the best available experiential (patient and practitioner) evidence.
- Quality Improvement (QI) is a process to improve healthcare services, systems, and processes at the local level (i.e. unit, department, organization) with the intent to improve outcomes.
- Research is a systematic investigation (quantitative, qualitative, or mixed-methods) designed to develop uncover, create, or contribute to new knowledge that can be generalized for broader application.

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# The Three Forms of Nursing Inquiry

## Definitions



**Evidence-Based Practice:** What does the evidence tell us?



**Quality Improvement:** We know what works, now let's make it work for us



**Research:** There is not enough evidence for us, so let's try something new and see if it works

# The Three Forms of Nursing Inquiry

*Definitions*

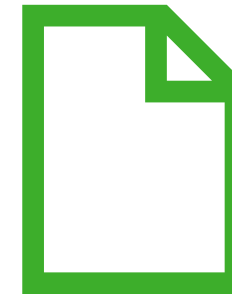
Evidence-Based Practice: KNOW



Quality Improvement: NOW



Research: NEW



# The Three Forms of Nursing Inquiry

## Definitions

### EBP

Synthesis of literature to generate best-evidence recommendations, translation to the practice setting

### QI

Continuous improvement on identified metrics

### Research

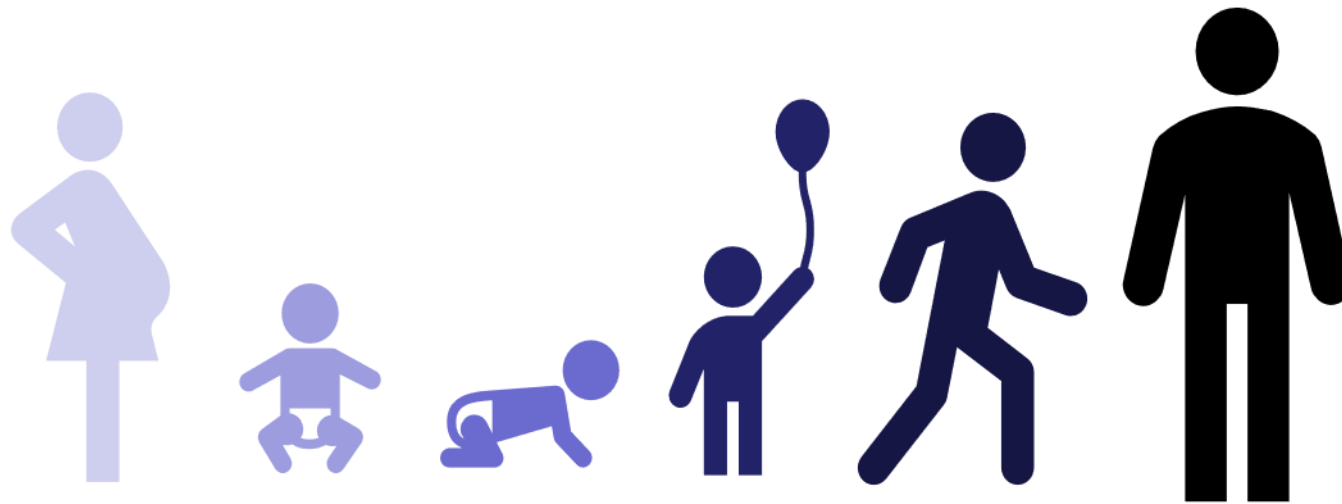
New knowledge

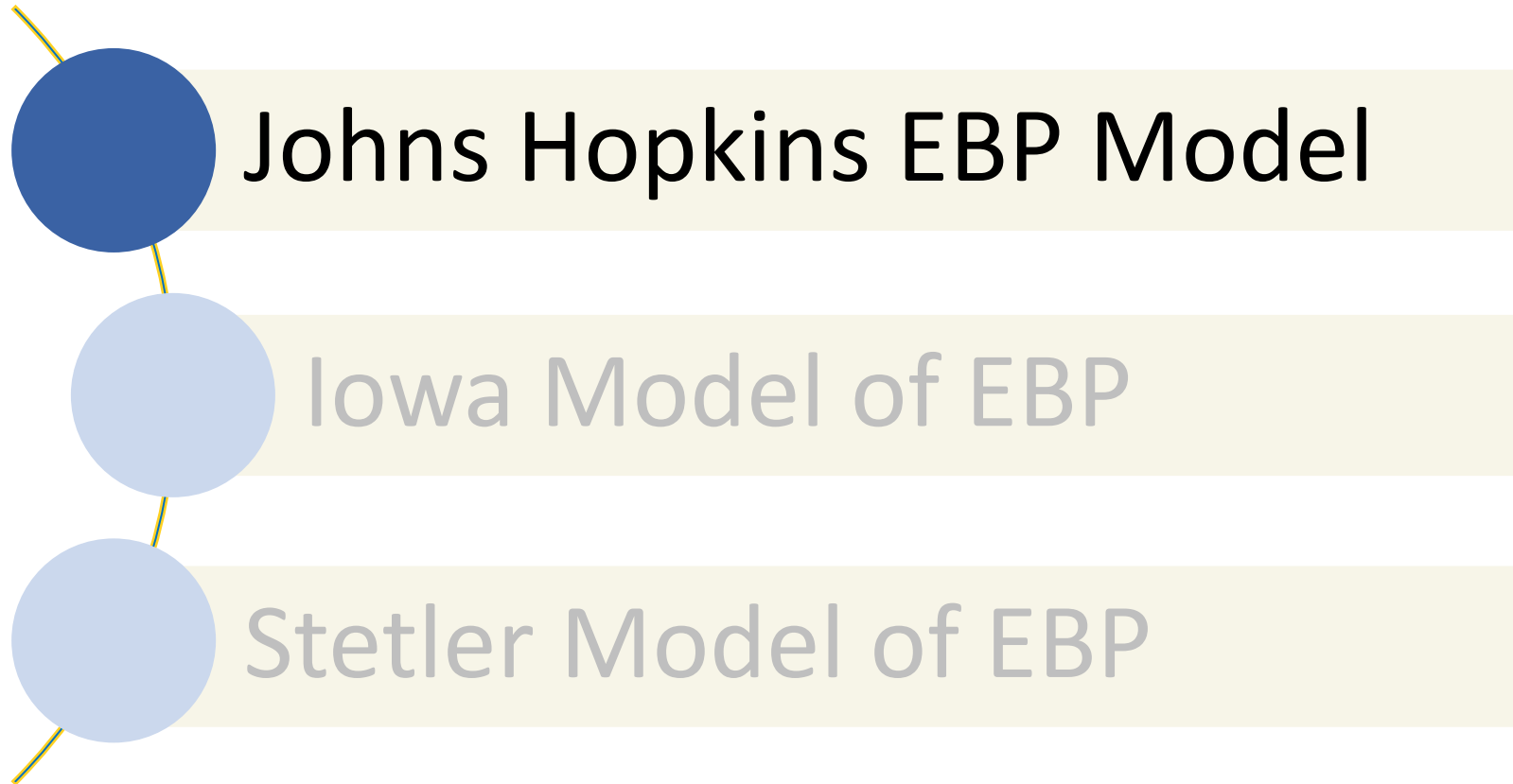
# Evidence-Based Practice

Gathering what we KNOW

# Why do we need EBP?

It takes 15-17 years to implement best evidence into daily clinical care (Balas, 2000; Khan, 2021)

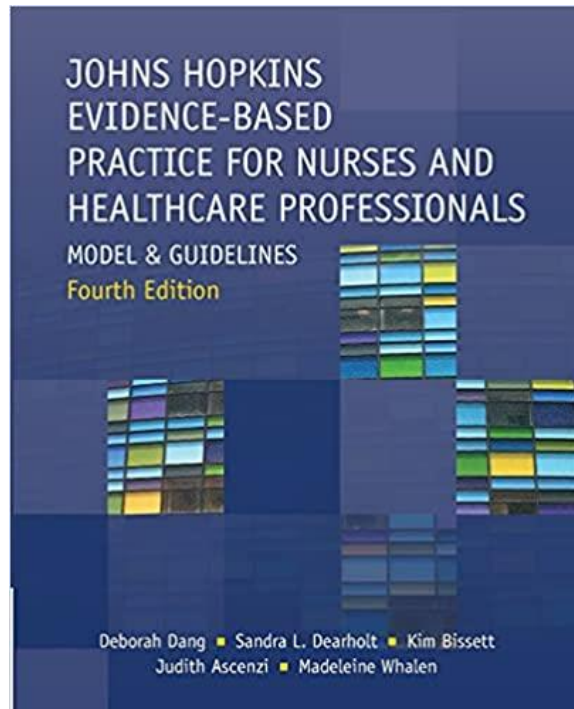




# Evidence-Based Practice

## Models and Tools

## Johns Hopkins Evidence-Based Practice for Nurses and Healthcare Professionals: Model and Guidelines



Johns Hopkins Nursing Evidence-Based Practice

### Appendix D Evidence Level and Quality Guide

Evidence Levels	Quality Ratings
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**Appendix E  
Research Evidence Appraisal Tool**

**Evidence level and quality rating:**

Article title:	Number:
Author(s):	Publication date:
Journal:	
Setting:	Sample (composition and size):

Does this evidence address my EBP question?  
 Yes  
 No-Do not proceed with appraisal of this evidence

**Is this study:**

- Quantitative** (collection, analysis, and reporting of numerical data)  
Measurable data (how many; how much; or how often) used to formulate facts, uncover patterns in research, and generalize results from a larger sample population; provides observed effects of a program, problem, or condition, measured precisely, rather than through researcher interpretation of data. Common methods are surveys, face-to-face structured interviews, observations, and reviews of records or documents. Statistical tests are used in data analysis.  
➔ Go to **Section I: Quantitative**
- Qualitative** (collection, analysis, and reporting of narrative data)  
Rich narrative documents are used for uncovering themes; describes a problem or condition from the point of view of those experiencing it. Common methods are focus groups, individual interviews (unstructured or semi structured), and participation/observations. Sample sizes are small and are determined when data saturation is achieved. Data saturation is reached when the researcher identifies that no new themes emerge and redundancy is occurring. Synthesis is used in data analysis. Often a starting point for studies when little research exists; may use results to design empirical studies. The researcher describes, analyzes, and interprets reports, descriptions, and observations from participants.  
➔ Go to **Section II: Qualitative**
- Mixed methods** (results reported both numerically and narratively)  
Both quantitative and qualitative methods are used in the study design. Using both approaches, in combination, provides a better understanding of research problems than using either approach alone. Sample sizes vary based on methods used. Data collection involves collecting and analyzing both quantitative and qualitative data in a single study or series of studies. Interpretation is continual and can influence stages in the research process.  
➔ Go to **Section III: Mixed Methods**

**Appendix F  
Non-Research Evidence Appraisal**

**Evidence level and quality rating:**

Article title:	Number:
Author(s):	Publication date:
Journal:	
Setting:	Sample (composition and size):

Does this evidence address my EBP question?  
 Yes  
 No-Do not proceed with appraisal of this evidence

**Clinical Practice Guidelines LEVEL IV**  
Systematically developed recommendations from nationally recognized experts based on research evidence or expert consensus panel

**Consensus or Position Statement LEVEL IV**  
Systematically developed recommendations, based on research and nationally recognized expert opinion, that guide members of a professional organization in decision-making for an issue of concern

• Are the types of evidence included identified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Were appropriate stakeholders involved in the development of recommendations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Are groups to which recommendations apply and do not apply clearly stated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Have potential biases been eliminated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Does each recommendation have an identified level of evidence stated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Are recommendations clear?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

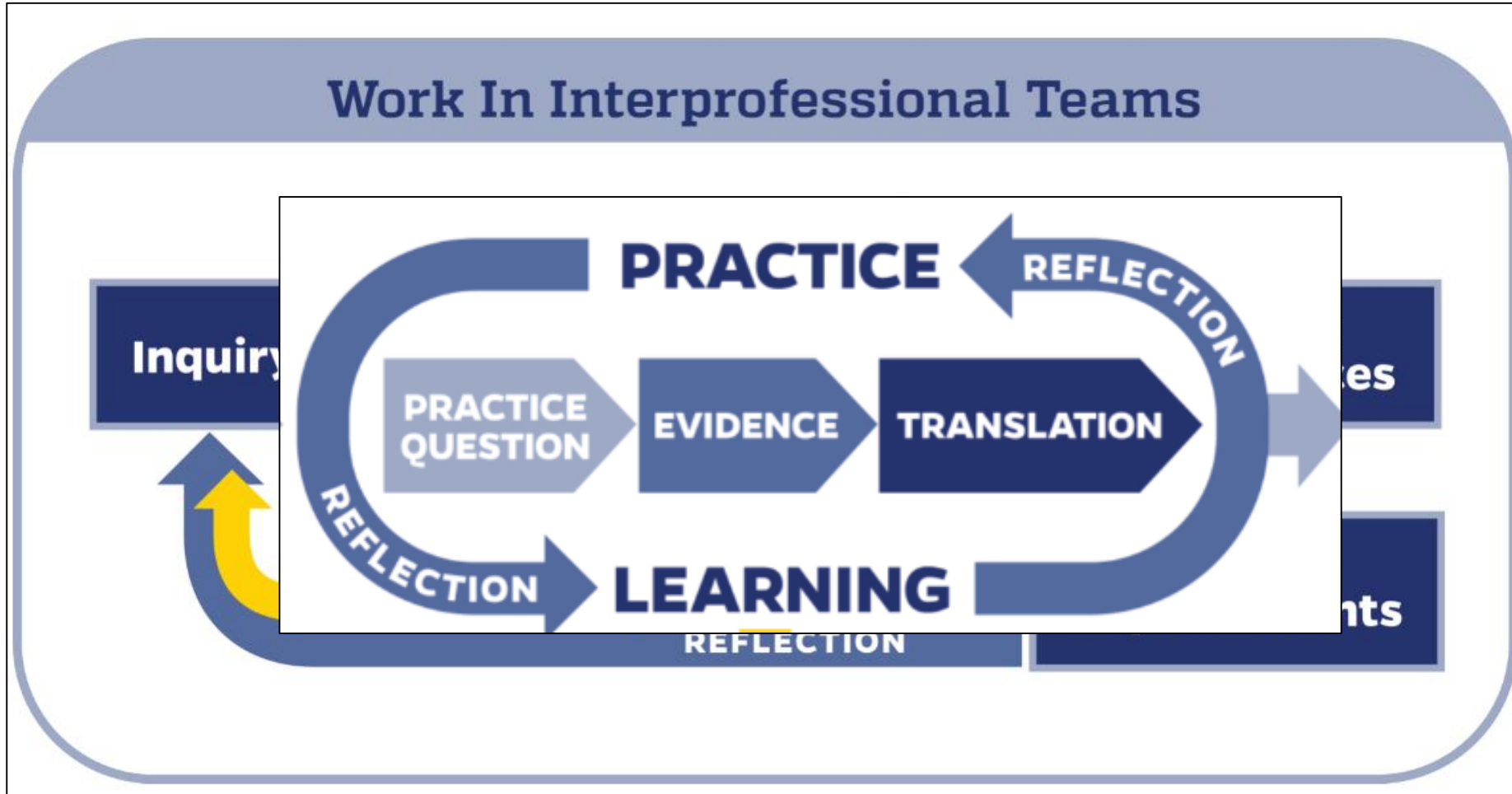
Findings That Help Answer the EBP Question

Complete the corresponding quality rating section.

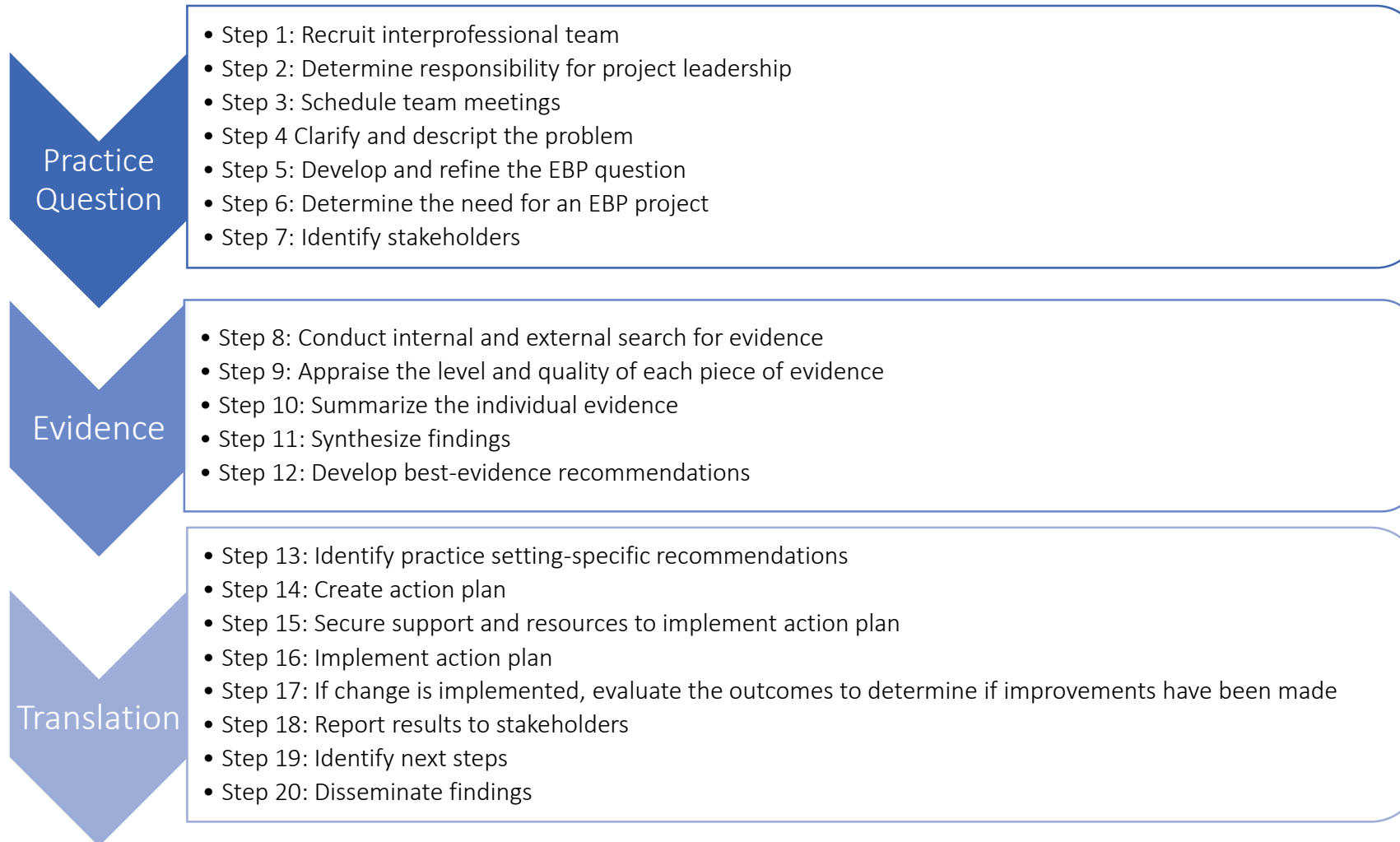
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# Johns Hopkins EBP Model



# The Johns Hopkins EBP Model

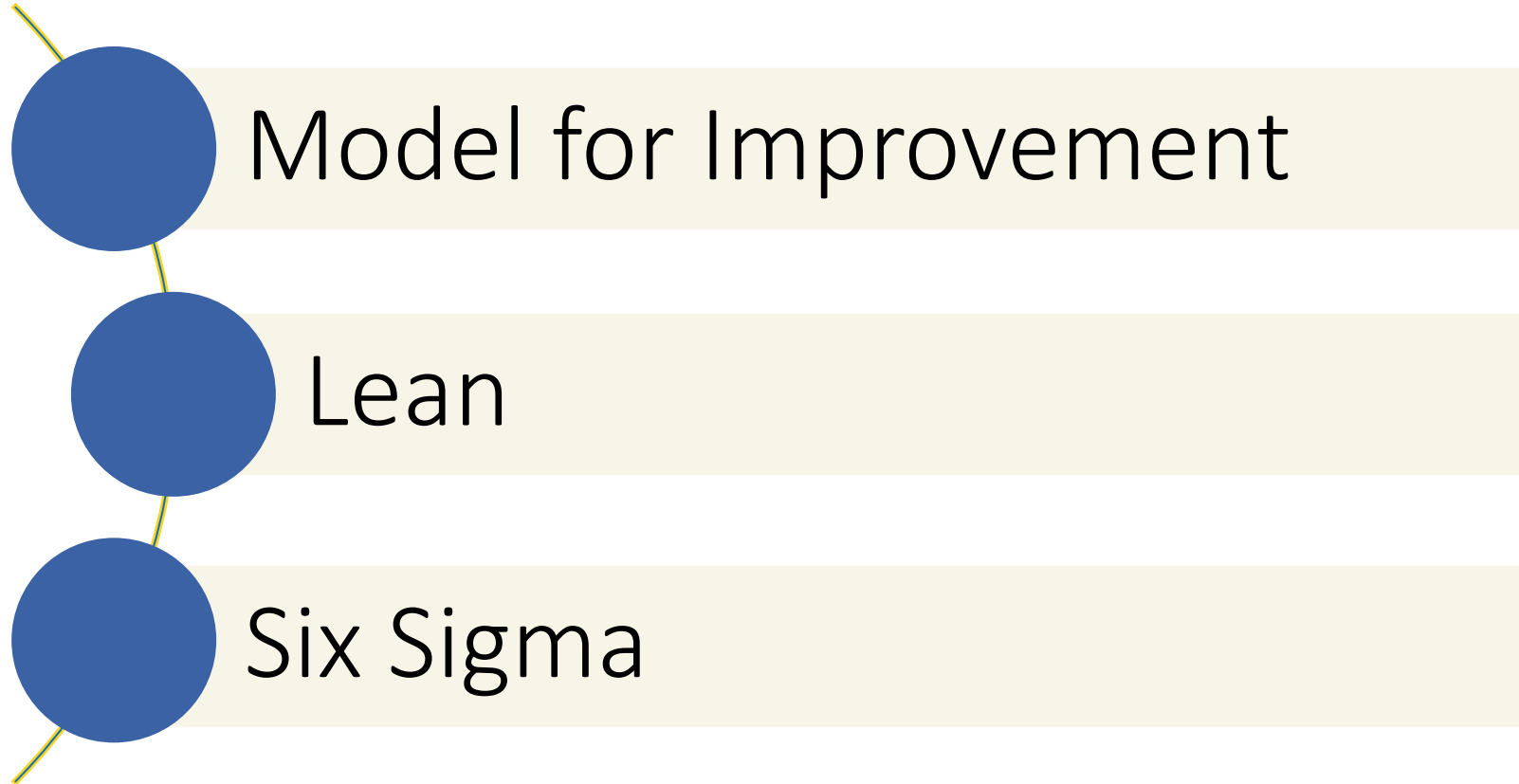


# Johns Hopkins EBP Model

Appendix	<b>A</b>	PET Process Guide
Appendix	<b>B</b>	Question Development Tool
Appendix	<b>C</b>	Stakeholder Analysis and Communication Tool
Appendix	<b>D</b>	Hierarchy of Evidence Guide
Appendix	<b>E</b>	Research Evidence Appraisal Tool
Appendix	<b>F</b>	Non-research Evidence Appraisal Tool
Appendix	<b>G</b>	Individual Evidence Summary Tool
Appendix	<b>H</b>	Synthesis and Recommendations Tool
Appendix	<b>I</b>	Translation and Action Planning Tool
Appendix	<b>J</b>	Publication Guide

# Quality Improvement

Applying best practices NOW



# Lean

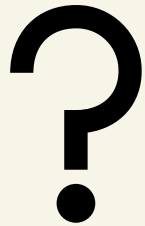
*No Waste*



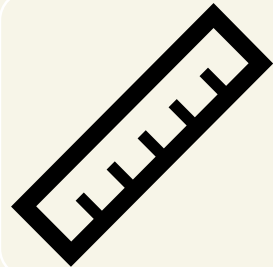
- Bharsakade et al. (2021)

# Six Sigma

*No ERRORS*



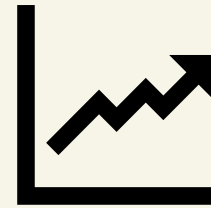
Define



Measure



Analyze

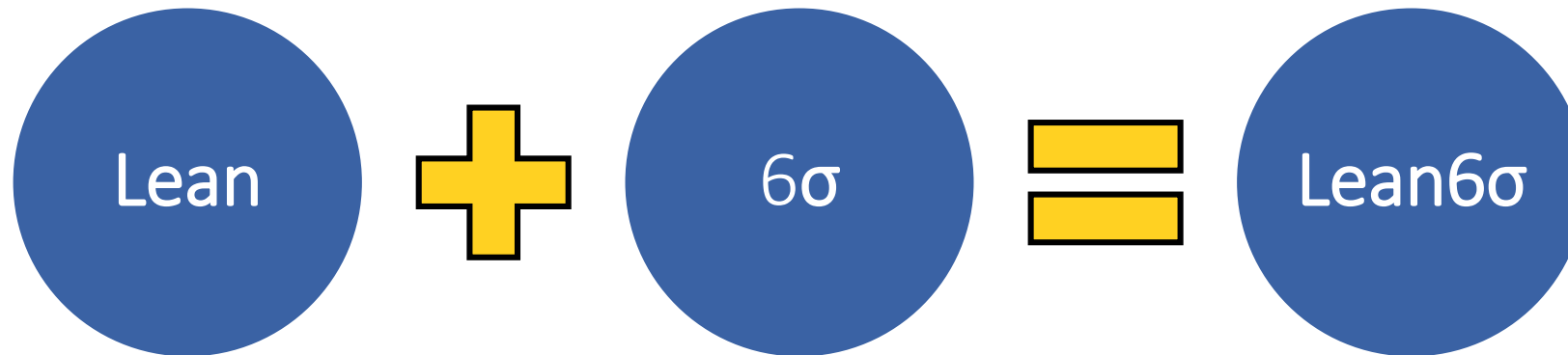


Improve



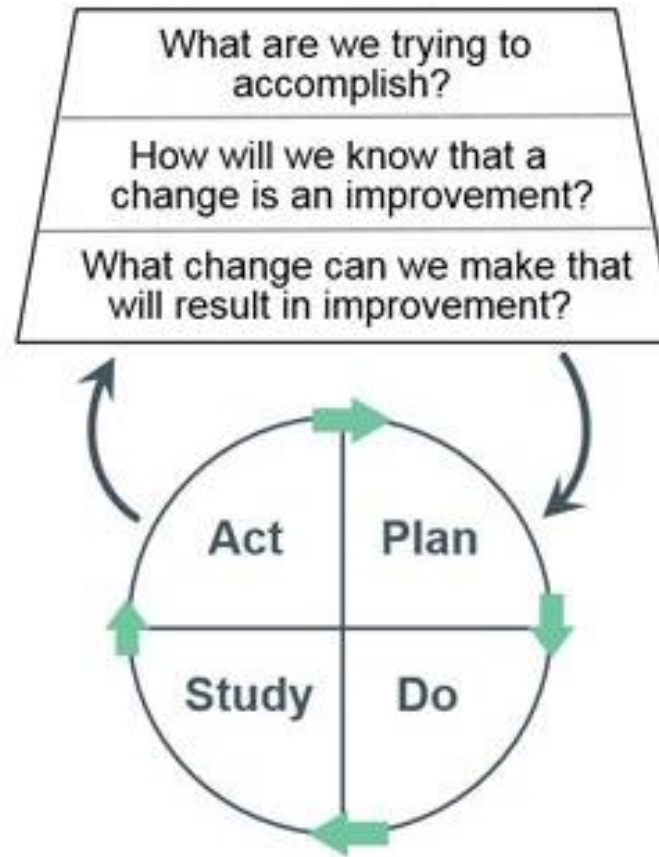
Control

# Lean Six Sigma





# Model for Improvement



- Langley et al. (2009)

## PHASE 1



Set aims

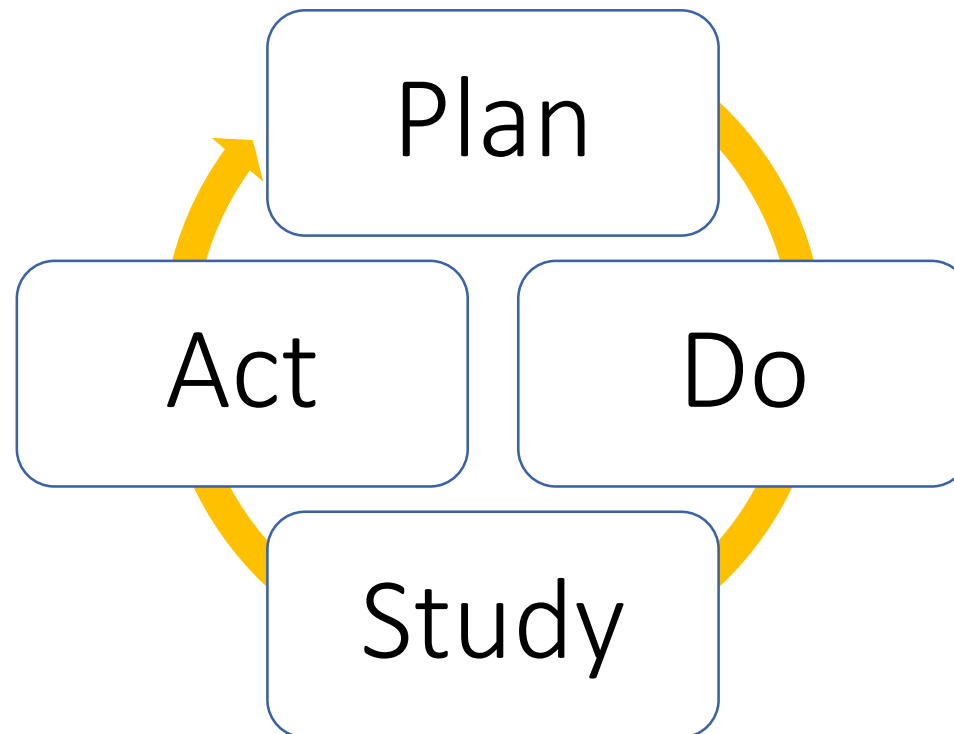


Establish Measures



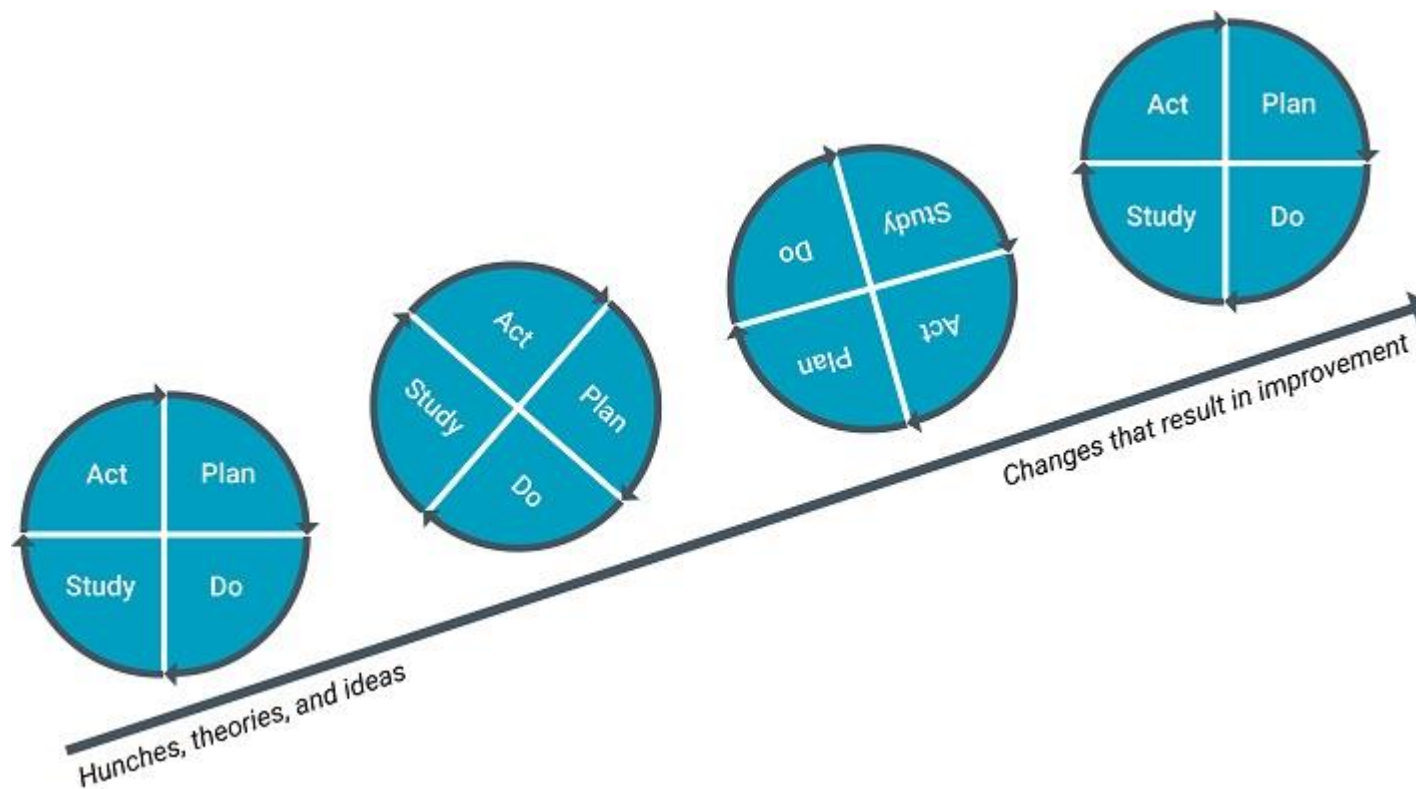
Select an intervention

## PHASE 2



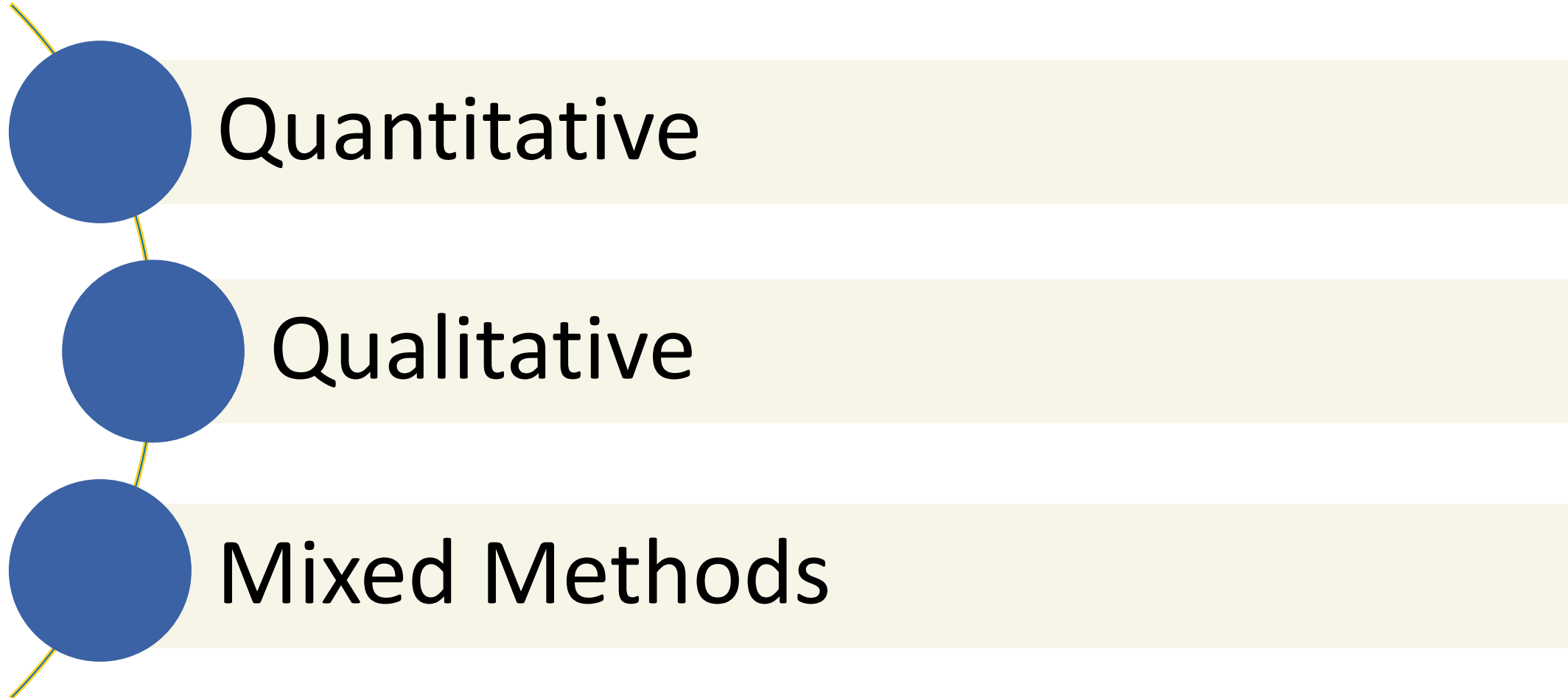
# Model for Improvement

## PDSA cycle and repeat

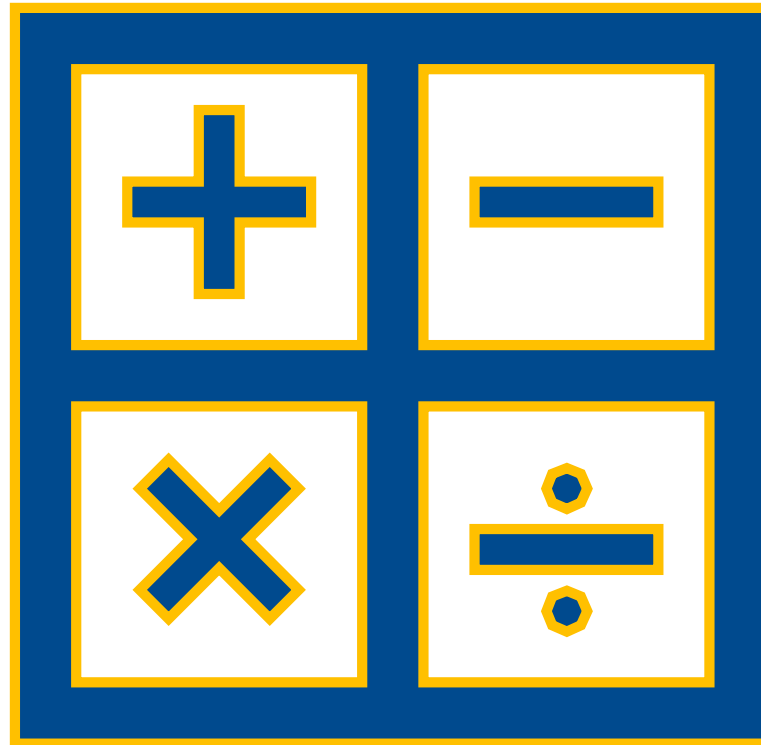


# Research

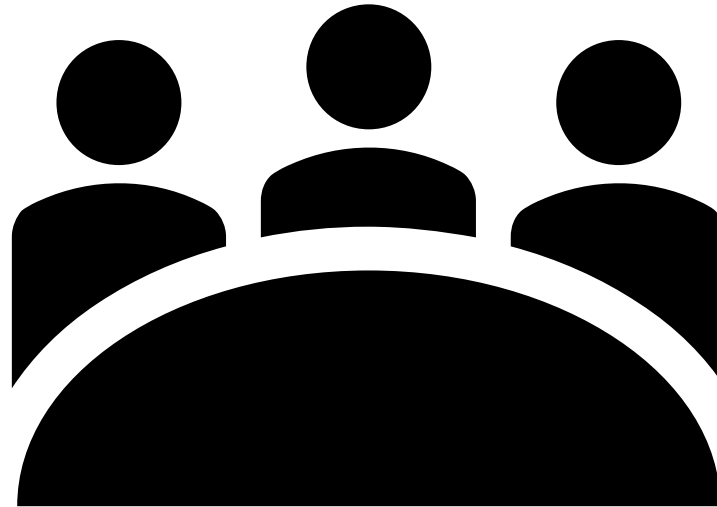
Generating something NEW



# Quantitative Research

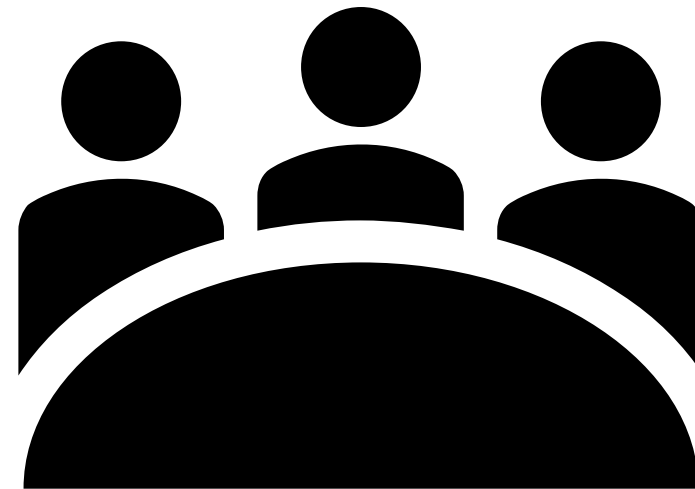
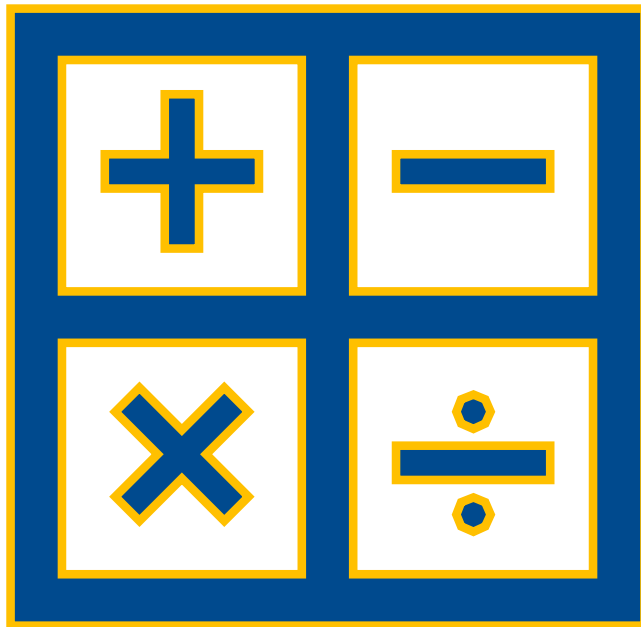


# Qualitative Research





# Mixed Methods



# Which Form of Inquiry?

What do we know? What do we do now? Do we create new information?

# The Three Forms of Inquiry

*Summary*

EBP

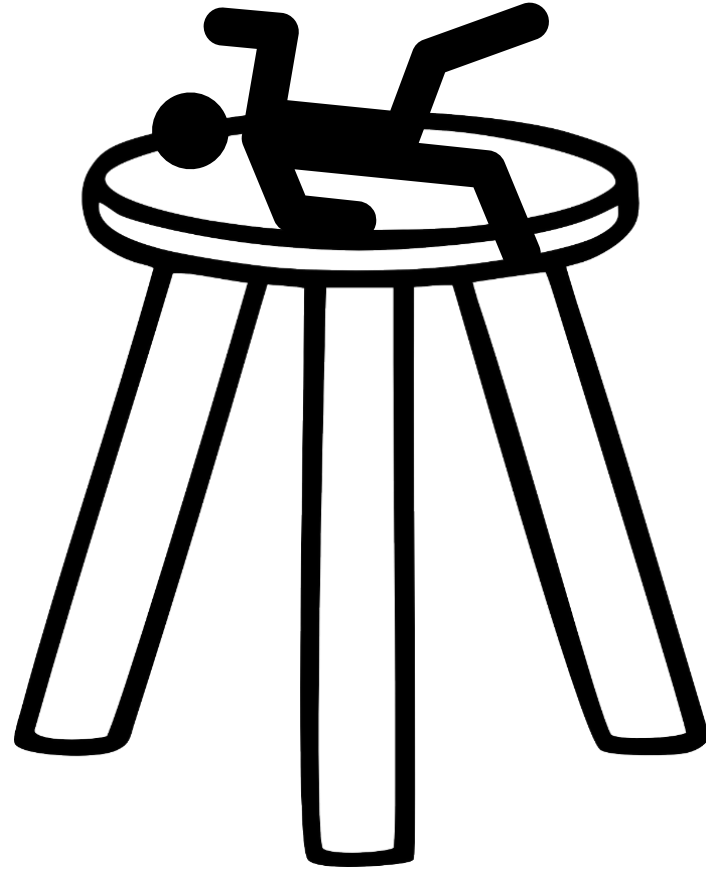


Quality  
Improvement

Nursing  
Research

# The Three Forms of Inquiry

*Clinical Example*



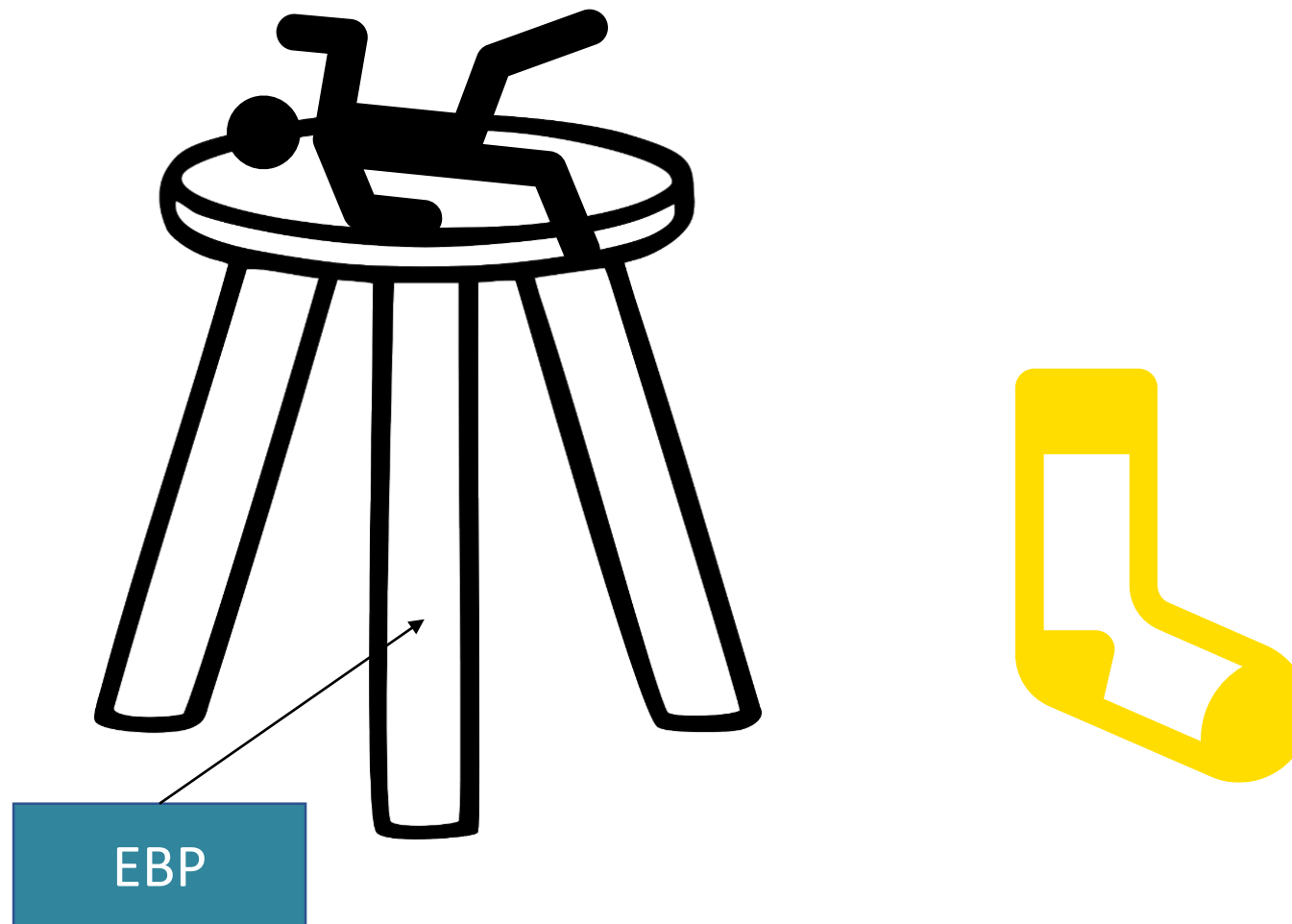
# The Three Forms of Inquiry

*Clinical Example*

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# The Three Forms of Inquiry

*Clinical Example*

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# The 3 Forms of Nursing Inquiry

*Clinical Example*



# Name the type of inquiry!

- Nurse Wes is working to ensure the nurses on the unit are correctly documenting fall screenings. They think it might be a good idea to start sending the nurses a report card each month with their individualized documentation compliance scores. They know it is easy to pull the data from the electronic health record, but they aren't sure if there is any evidence this works to improvement charting. This is an example of...

EBP



# Name the type of inquiry!

- Nurse Sam has always been told that ER nurses should not use a patient's central line if it is in place for chemotherapy. They wonder what evidence exists to support this practice. This is an example of....

EBP

# Name the type of inquiry!

- Nurse Kaya is on a work group to increase compliance with the best-practice of skin-to-skin contact for newborn babies and their moms. They have been doing audits and performing staff education to monitor progress. This is an example of...

QI

# Name the type of inquiry!

- Nurse Jessie noticed they have to walk all over the department to gather the necessary supplies to do a dressing change. They want to streamline the process to make it easier and quicker to perform the task. This is an example of...

QI

# Name the type of inquiry!

- Nurse Riley has been taking care of patients with COVID-19 and is curious what the effect of wearing PPE is on nurses' ability to stay hydrated during their shift. COVID-19 is so new there is very little existing information about this problem. This is an example of...

# Research

# Name the type of inquiry!

- Nurse Riley has been taking care of patients with COVID-19 and is curious what the effect of wearing PPE is on nurses' ability to stay hydrated during their shift. COVID-19 is so new there is very little existing information about this problem. This is an example of...

# Research

- **Live Events**
  - [Annual SHINE Conference](#)
  - [Quarterly Workshops](#)
  - [Quarterly Journal Club](#)
  - [Office Hours](#)
  
- **On-Demand Education**
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# Questions?

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