



RNAO

NQUIRE®

**EVIDENCE
BOOSTER
WEB FORM
USER
MANUAL**

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EVIDENCE BOOSTER WEB FORM: USER MANUAL

1. Introduction

The Registered Nurses' Association of Ontario's (RNAO) evidence boosters are two-page infographics that demonstrate the impact of best practice guideline (BPG) implementation on clinical and organizational outcomes.

The evidence booster web form is an online page available through the Nursing Quality Indicators for Reporting and Evaluation (NQuIRE) home page. The web form allows Best Practice Spotlight Organizations (BPSO)® to input their NQuIRE data and corresponding descriptive text by filling out specific fields. This information is then auto-populated to create a standardized evidence booster in PDF format.

RNAO has designed the evidence booster web form to support BPSOs to create their own evidence boosters. They can be shared with executives, managers and care staff to showcase the positive outcomes being achieved through BPG implementation using NQuIRE data.

1.1 Purpose

This user manual provides instructions on how to create an evidence booster using the NQuIRE evidence booster web form.

2. Creating an Evidence Booster

Log into your NQuIRE data system account.

Consider the BPG, practice changes and clinical outcomes your organization would like to showcase in the evidence booster. Determine the NQuIRE reports you want to include in the evidence booster. Before you begin, download the selected NQuIRE reports and save them to a secure folder on your network as a JPEG or PNG image and rename the file.

2.1 Completing the Evidence Booster Web Form

Step-by-step instructions are provided and outlined below:

1. Ensure you are on the NQuIRE home page. Select the “Evidence Booster” option from the NQuIRE My BPSO Main Menu bar located on the right hand side of your screen.

Figure A: NQuIRE My BPSO Main Menu



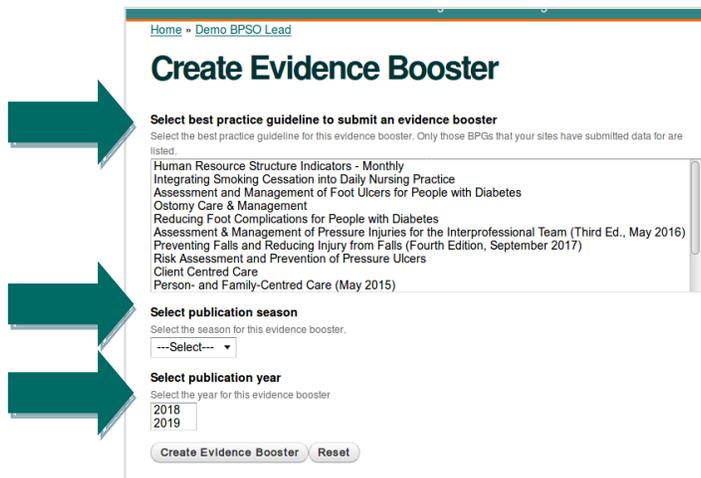
2. **Select a BPG:** Select a BPG from the generated list you wish to showcase in the evidence booster. The generated list only includes BPGs that your organization has submitted NQuIRE data on.

3. **Select publication season:** Select the current season.

4. **Select publication year:** Select the current year.

5. **Click on “Create Evidence Booster”.** This will direct you to the evidence booster web form.

Figure B: Create Evidence Booster

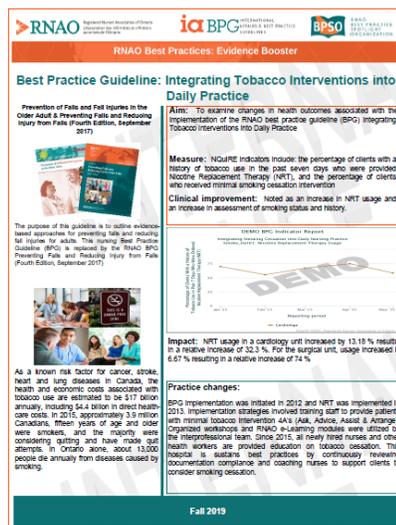


Caution: An error message will appear at the top of the page, if you have already created an evidence booster with the same parameters selected (BPG, season, and year).

2.21 Instructions to Complete Page 1 of the Evidence Booster Web Form

1. **Evidence Booster Title:** Create a suitable title to summarize the content of the evidence booster. This title will identify the BPG’s clinical or health topic and the clinical improvements being reported.
2. **Aim:** This section identifies the objective of the evidence booster. See Figure C for an example. [Max. 40 words]
3. **Measure:** This section identifies the measure(s) (i.e. indicators) that were included in the analysis to demonstrate impact of the BPG implementation. See Figure C for an example. [Max. 40 words]
4. **Clinical Improvement:** This section identifies the improvement (increase/decrease) with respect to the utilized measure(s). See Figure C for an example. [Max. 40 words]

Figure C: Example of Aim, Measure, and Clinical Improvement



Aim: To examine changes in health outcomes associated with the implementation of the RNAO best practice guideline (BPG) Integrating Tobacco Interventions into Daily Practice.

Measure: NQuIRE indicators include the percentage of clients with a history of tobacco use in the past seven days who were provided Nicotine Replacement Therapy (NRT) and the percentage of clients who received minimal smoking cessation intervention.

Clinical improvement: Noted as an increase in NRT usage and an increase in assessment of smoking status and history.

5. **Organization and BPG clinical topic:** Fill out this section with information about your organization such as:

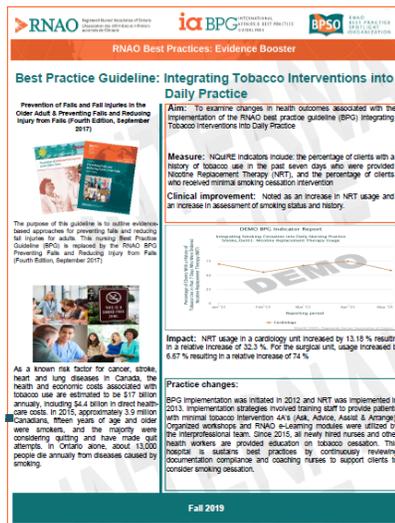
- Health sector your organization represents;
- Size of your organization; and
- Any other high-level relevant facts.

Provide a rationale for selecting the identified BPG for implementation. Examples include: relevance of the BPG to the clinical practice area or setting, identification of practice gaps, to meet a quality improvement goal etc. You could also include information about the importance of the BPG's clinical topic such as:

- Prevalence, incidence or cost; and
- Impact on patient outcomes including, quality of life, morbidity and/or mortality.

See Figure D for an example. [Max. 80 words]

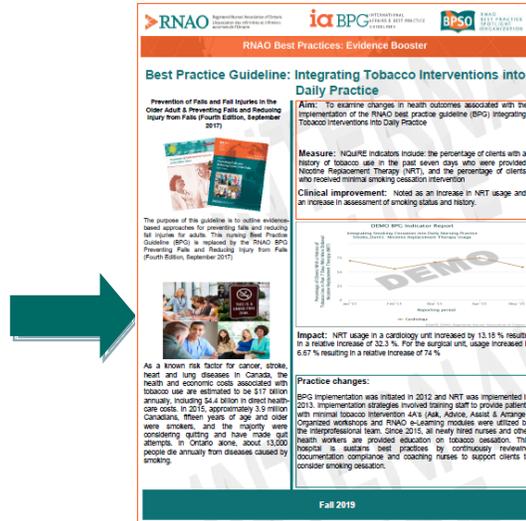
Figure D: Example of Organization and BPG Clinical Topic



Consumer tobacco is a known risk factor for cancer, stroke, heart and lung diseases. In addition to the devastating health effect, the health and economic costs associated with tobacco use are estimated to be \$17 billion annually, including \$4.4 billion in direct health-care costs. In Ontario, about 13,000 people die annually from diseases caused by smoking. In 2015, approximately 3.9 million Canadians, 15 years of age and older were smokers, and the majority tried to quit.

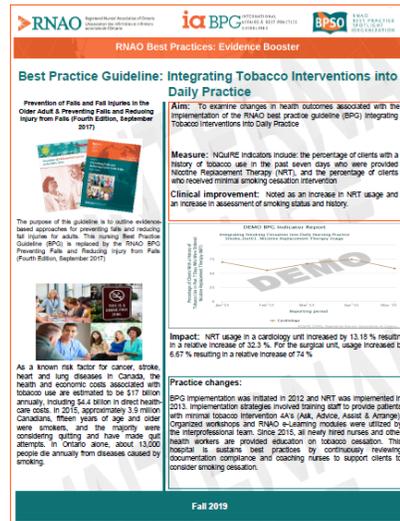
6. **Insert Picture:** Add a picture of your organization or the clinical topic area of the BPG.

Figure E: Insert Picture



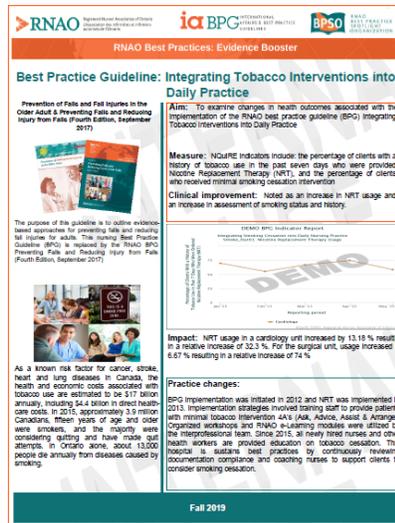
7. **Insert Figure 1.** Click on the icon for “**Choose File**” and “**Upload**” to insert your NQuIRE report. The uploaded NQuIRE report will visually demonstrate the impact of the BPG on clinical outcomes and can include run charts such as single indicator or indicator overlay reports.

Figure F: Insert Figure 1



8. **Impact:** Provide a narrative summary of the analysis based on Figure 1 [Max 40 words].

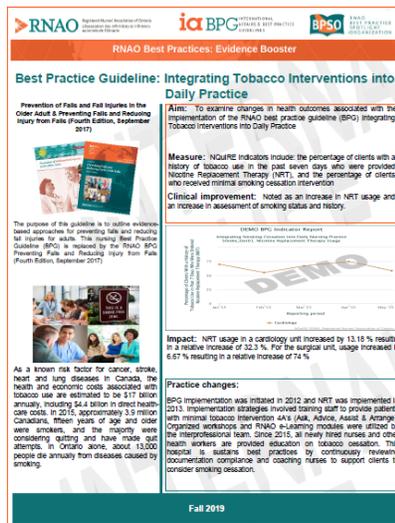
Figure G: Example of Impact Summary



NRT usage in a cardiology unit increased by 13.18 per cent resulting in a relative increase of 32.3 per cent. For the surgical unit, usage increased by 6.67 per cent resulting in a relative increase of 74 per cent.

9. **Practice Changes:** This section provides a detailed description of practice changes in your setting based on the guideline implementation and corresponding to the analysis presented in Figure 1. [Max. 80 words].

Figure H: Example of Practice Changes for Figure 1



BPG implementation was initiated in 2012 and NRT was implemented in 2013. Implementation strategies involved training staff to provide patients with minimal tobacco intervention 4A's (Ask, Advice, Assist &

Figure J: Practice Changes for Figure 2



4. **Conclusion:** Provide one to two sentences that summarize the overall content of the two-page evidence booster [Max. 50 words].

Figure K: Example of Conclusion



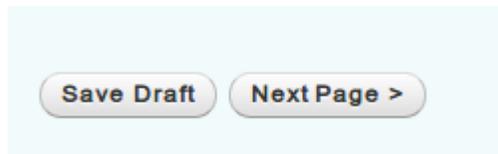
This analysis demonstrates an increase in the percentage of clients using nicotine replacement therapy and an increase in the number of assessments of clients' smoking status and history for two BPSOs that implemented RNAO's best practice guideline, Integrating Smoking Cessation into Daily Nursing Practice, 2007 (2nd Ed.).

5. **References:** Provide additional references if any. See Figure L. References should be cited in text followed by the number in parenthesis e.g. (1) corresponding to the reference in the reference list. References in the reference list follow APA format.

Figure L: References

2.3 Navigating the Web Form

Save Draft: On Page 1 of the evidence booster web form, you can “Save Draft” or go to the “Next Page”. You can select “Save Draft” if you want to finish the evidence booster at a later time. You will need to finish the draft before you can create a new evidence booster.



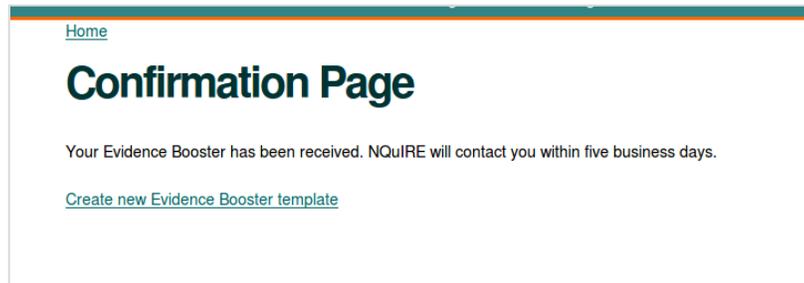
Preview: On Page 2 of the evidence booster web form, you must select “Preview” to show what the evidence booster looks like before submitting.



Submitting the Evidence Booster: On Page 2 of the evidence booster web form, you can select “Submit” to submit the evidence booster.



Confirmation: The confirmation page will display a message indicating the evidence booster has been received. You can continue to create another evidence booster directly from this page by clicking on the link "Create new Evidence Booster". If you want to go back to the main page, click on the link "Home".



2.4 Support and Publication

For additional support, please contact nquire@RNAO.ca.

The evidence boosters created with the web form are submitted to the NQuIRE team at RNAO. The NQuIRE team will contact you within five business days of receiving the submitted evidence booster. NQuIRE will support with final editing of the evidence booster and release the final version back to you.

All evidence boosters created by RNAO are free for download on the RNAO website: <https://rnao.ca/bpg/evidence-boosters>.