Formulating a PICOT Question

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Introduction

According to studies conducted by the Centers for Disease Control and Prevention, emergency room visits have risen by 20% over the past ten years. Besides, the research also found that the number of available emergency centers has fallen by 15% over the past decade. Concerning the same challenge of emergency rooms, the American Hospital Association conducted a survey which found that 62% of hospitals felt that they were overcrowded and operating beyond their capacities. The overcrowding witnessed in most emergency departments (ED) results in compassion fatigue (CF) among the nurses. Therefore, compassion fatigue is a common challenge in almost all ED. Nurses undertake many tasks both day and night, but oneself is essentially the thing that should be delivered most (Harris & Quin-Griffin, 2015).

According to Merriam-Webster's online dictionary (n.d.), compassion is an empathic apprehension of another person's misery coupled with the desire to relieve the distress. On the other hand, fatigue is mental and physical depletion arising from overworking, stress, medication, or even a disease (The Medical Dictionary: The Free Dictionary, 2011). The nurses in the ED execute their duties under stressful conditions. Their working environment is full of overcrowding, cerebral vascular accidents and deaths, and myocardial infarctions, which heighten their stressful states. The ED nurses are always alert and on the lookout for what kind of patient will knock on the emergency door next or how quickly the status of the patient changes.

Nurses offer care, kindness, succor, and tenderness to the sick, their family members, and other nurses. Furthermore, the nurses also offer support to advanced practitioners and doctors, direct medical physicians, nurse assistants, and any other staff members they encounter in their daily roles. These roles empty the nurses' wells of compassion, exhausting them and leaving behind CF. In simple terms, CF is the incapability of the nurses to offer the required services to patients and other co-workers because of secondary traumatic stress disorders (Hinderer et al., 2014). The objective of this study is to describe the background of CF as an ED problem while formulating a PICOT question to act as a guideline for the topic.

Background

The most demanding subset of the overall field of nursing is the emergency nursing area, which can easily interfere with the physical and emotional health of a nurse. According to research, the other areas of nursing are less challenging than the ED. The ED environment is a stressful one, apart from being a challenging and emotional area. Right from the word go, the nurse experiences strains arising

from casualties of accidents and life-threatening disorders, emotions from the patient's relatives, and new patients. According to Braun Schneider (2013), maintenance of elevated stress levels for 12 hours or more and continuous exposure to traumatic conditions can have adverse effects on the rate of job performance and the health of the nurses.

A survey conducted by Hooper et al. (2010) found that 86% of ED nurses, on average, experience moderate to high levels of CF at some point during the execution of their responsibilities. The adverse effects associated with CF can easily hinder nurses' capability to perform duties effectively, causing depression and detachment from daily roles. Moreover, a study carried out by Dominguez & Rutledge (2009) found that 43% of nurses showed signs of emotional numbness, 55% of nurses easily get annoyed during the course of their duty, and 52% frequently avoid attending to their patients due to CF. The CF escalates the rate of reducing job morale and increases the rate of staff resignations, call-outs, and indifferences in the working environments (Hunsaker et al., 2015).

A report released by Nursing Solutions Inc. showed that the mean average RN staff turnover rate was 16.4% in 2014, which is a 2.2% increase from the value of the previous year, 2013. When the whole hospital facility is subdivided into departments, the nurses in the ED have a high turnover rate of 21.7% ("2015 National Healthcare and Staffing Report, "2015). Compared with other nursing specialties, ED nurses have higher burnout scores (Braun Schneider, 2013).

The PICO Question

For the researcher to obtain clinically relevant evidence, it is important for him or her to define the clinical problem in terms of the specific patient problem. The PICO configuration is employed to ask clinical questions. A solid and focused question always directs an evidence-based practice (EBP) process. PICOT as the name suggests is an acronym for: P the patient population, I refers to the intervention or the issue of interest, C is the comparison, O is the outcome and T is the time which is an optional parameter (Melnyk & Fineout-Overholt, 2015). The comparison is only applied in cases where I am an intervention and is ignored in situations where I am an issue of interest. For the case of the ED problem, the PICO question formulated in the research is, "*In the ED, do positive reinforcements and educational workshops have an effect on reducing compassion fatigue?"*

Population

In the PICO question, the ED nurses are the population of interest. The ED nurses are adversely affected by extreme CF levels since they experience continuous stressful moments every day. They are always alert and on the lookout for what kind of patient will knock on the emergency door next or how quickly the status of the patient exhibits changes. The increased incidences of CF reported among the ED nurses indicate that the majority of the professionals definitely experience the severe impacts of CF (Dominguez-Gomez & Rutledge, 2009). The population used in the PICO question must

be 18 years of age and above. There are no exclusions made based on ethnic community or gender. Moreover, no restrictions were made on the basis of years of experience or the degree/education level. In New Jersey state, the law requires licensure of all registered nurses (RNs) who meet the desired qualifications. The licensed RNs should hold the necessary testimonials to enable him or her to execute duties at the targeted project sites.

Intervention

Positive reinforcements and educational workshops are the interventions in the query under consideration. “The first step in preventing or ameliorating compassion fatigue is to recognize the signs and symptoms of its emergence” (Bride et al., 2007, p.156). The educational workshops will execute various functions, such as defining the context of CF, discussing the signs and symptoms associated with CF, and identification of the risk factors in the ED population. Additionally, the workshops will also describe self-care intervention options, the process of managing stress, and achieving positive reinforcements. Education materials will be supplied to the participants, which will help them in the self-monitoring process. Individual monitoring of the CF signs, for instance, the emotional, physical, spiritual, and behavioral, significantly assists in preventing the negative impacts of CF (Bride et al., 2007). It is good for nurses to understand the concepts and importance of CF and should learn to acknowledge it in their inner being and in others, as this affects the intervention as fast as possible and helps in reducing workplace-acquired CF (Harris & Quinn-Griffin, 2015).

Comparison

The formulated PICO query has no comparison group. However, the comparison is made for the research participants in two aspects, that is, prior to engaging in the workshop and after the engagement, to determine if there was a decrease in CF among the ED nurses or whether it remained at the same level. The comparison process will be facilitated by a scale known as the Professional Quality of Life Scale (ProQOL: Stamm, 2010).

Outcomes

The reduction in CF among the nurses in the ED environment is the defined outcome of this project. Similar to the comparison, the ProQOL tool is employed to access the outcome. Various measurements are recorded by the tool. Some of these include the gratification obtained from the perfect completion of duties, difficulties in performing the job effectively, feelings of desperation and hopelessness, and secondary exposure to severe stressful conditions (Stamm, 2010). Research shows that the tool is valid and reliable and has been applied on many occasions.

Conclusion

The issue of compassion fatigue has been a prevailing incidence in the ED environment and a common challenge in nursing. The healthcare field is demanding, which puts healthcare professionals at risk of developing CF, which arises from their caregiving nature (Lanier, 2012). The risk of developing CF is extremely high for ED nurses because of working in an environment full of overcrowding, cerebral vascular accidents and deaths, and myocardial infarctions, which heighten their stressful states.

Nurses offer care, kindness, succor, and tenderness to the sick, their family members, and other nurses. These services empty the nurses' wells of compassion, exhausting them and leaving behind CF. The ED environment is stressful, challenging, and emotional. PICOT is an acronym for P, the patient population; I refers to the intervention or the issue of interest; C, the comparison; O is the outcome; and T is the time, which is an optional parameter (Melnyk & Fineout-Overholt, 2015). The PICO question formulated in the research is, "In the ED, do positive reinforcements and educational workshops have an effect on *reducing compassion fatigue?"*

Based on the PICO question, ED nurses are the population of interest. The ED nurses are adversely affected by extreme CF levels since they experience continuous stressful moments every day. The interventions include positive reinforcements and educational workshops. The educational workshops will execute various functions, such as defining the context of CF, discussing the signs and symptoms associated with CF, and identification of the risk factors in the ED population. There is no comparison group in the formulated PICO question. However, a comparison can be made to the research participants in both pre and post-workshop engagements to gauge whether the CF in the ED nurses decreased after the participation or whether it remained the same. The desired outcome of the project is the reduction in CF among the nurses in the ED environment. The ProQOL tool is employed to perform both the comparison and measure the outcome.