



LEADING CHANGE TOOLKIT™

TO HELP CHANGE AGENTS AND
CHANGE TEAMS MAKE LASTING
IMPROVEMENTS IN HEALTH CARE

Attitudes toward Evidence-Based Dentistry

Pragmatic Testing and Content Validity Data

Summary of Pragmatic properties

The Attitudes toward Evidence-Based Dentistry tool had an overall **objective pragmatic score** of **15** out of **20**. According to this objective pragmatic assessment, the Attitudes toward Evidence-Based Dentistry tool's strengths include being available in the public domain, having acceptable language, not requiring training for administration, and having less than 50 items. The Attitudes toward Evidence-Based Dentistry tool lost scores because not enough instructions exist for interpreting scores.

Based on two RNAO stakeholders, the Attitudes toward Evidence-Based Dentistry tool was rated **2.5** out of **4** for **likelihood to use**. The Attitudes toward Evidence-Based Dentistry tool has an overall **stakeholder facing assessments** score of **15** out of **24**.

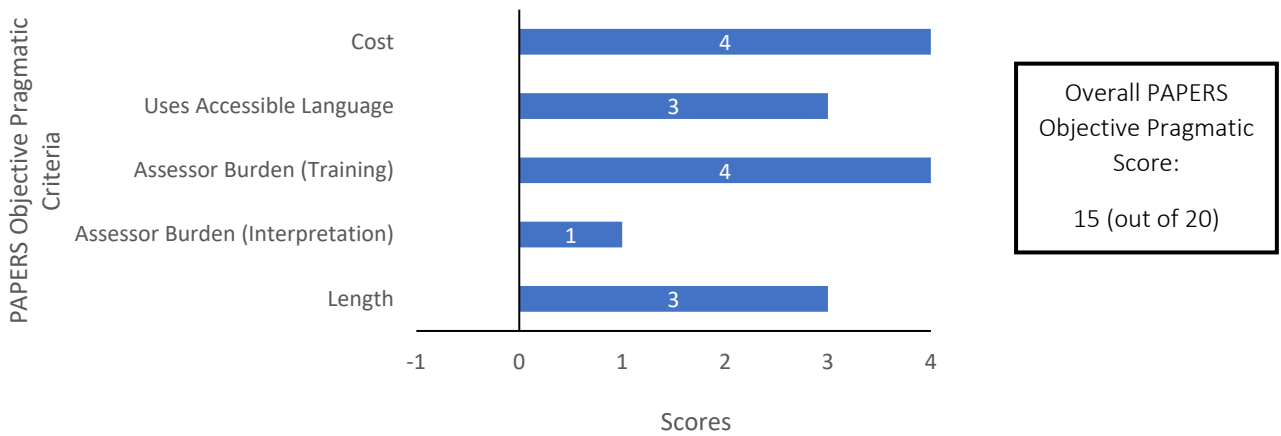
Tool Pragmatic Properties

Tools were assessed for pragmatic properties with the PAPERS tool (Stanick et al. 2019); a validated tool for measuring a tool's acceptability, ease of use, appropriateness, and usefulness. Objective pragmatic properties were assessed by two research assistants independently and with consensus for each tool. Stakeholder facing pragmatic properties were assessed independently by at least two stakeholders (e.g., champions) for each tool. A mean score was calculated from participants' responses for each of the stakeholder facing PAPERS survey questions.

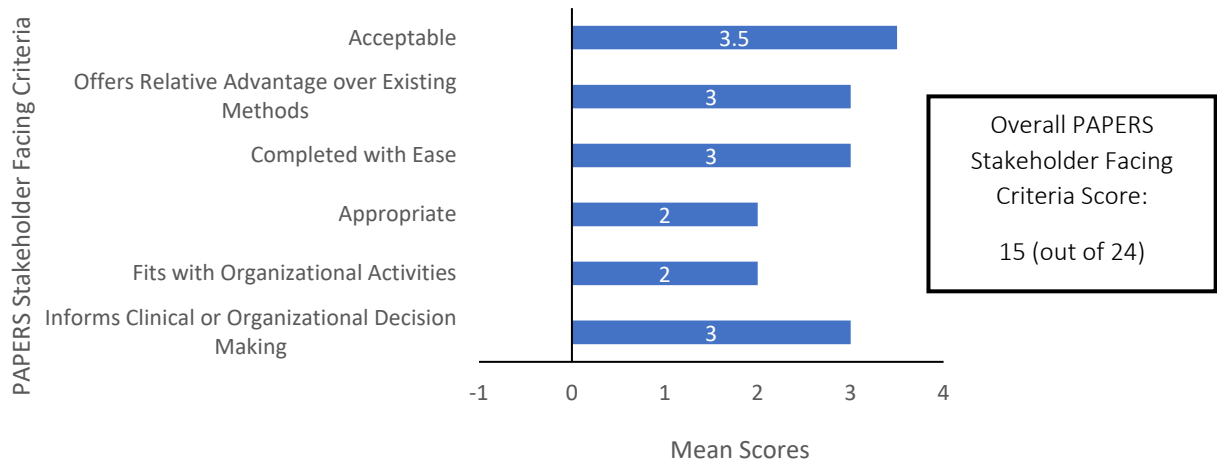
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PAPERS Objective Pragmatic Criteria - Scoring details below

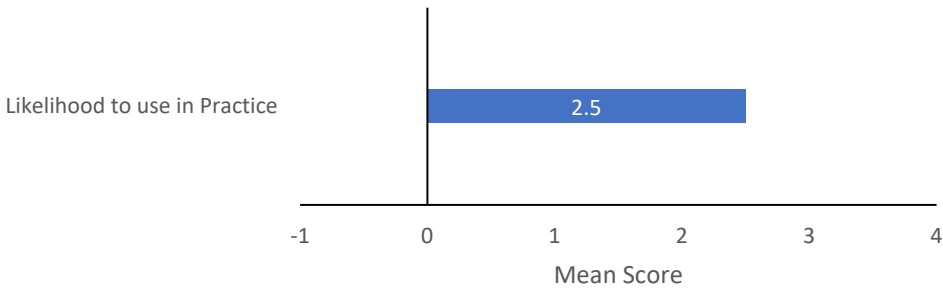


PAPERS Stakeholder Facing Criteria (n = 2 stakeholders) - Scoring details below





Likelihood to Use the Tool in Practice (n = 2 stakeholders). Click [here](#) for Scoring details.



Content Validity

Summary of Content Validity

According to our assessment using an adapted version of a checklist by Mokkink et al. (2010), the Attitudes toward Evidence-Based Dentistry tool has evidence of content validity.

Content validity refers to the degree to which the content of the tool is an adequate reflection of the construct being measured. In the case of the Attitudes toward Evidence-Based Dentistry tool, this refers to the extent that individuals can use the Attitudes toward Evidence-Based Dentistry tool to assess barriers/facilitators to knowledge use and monitor knowledge use according to the following sections:

- Evidence Based Dentistry Knowledge
- Terms related to Evidence Based Dentistry
- Knowledge Sources

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General Requirements	Yes	No
1. Was there an assessment of whether all items refer aspects of the construct to be measured?	X	
2. Was there an assessment of whether all items are relevant for the study population? (e.g., age, gender, disease characteristics, country, setting)	X	
3. Was there an assessment of whether all items are relevant for the purpose of the measurement instrument? (discriminative, evaluative, and/or predictive)		X
4. Was there an assessment of whether all items together comprehensively reflect the construct to be measured?		X

Adapted from: Mokkink, L.B., Terwee, C.B., Knol, D.L., Stratford, P.W., Alonso, J., Patrick, D.L., Bouter, L.M. and De Vet, H.C. (2010). The COSMIN checklist for evaluating the methodological quality of studies on measurement properties: a clarification of its content. *BMC medical research methodology*, 10(1), 1-8.

According to our assessment using an adapted version of a checklist by Mokkink et al. (2010), the Attitudes toward Evidence-Based Dentistry tool has evidence of content validity.

Content Validity Requirement 1:

- The Attitudes toward Evidence-Based Dentistry tool was developed according to other surveys developed and used to assess dentists' attitudes towards evidence-based dentistry (Iqbal et al., 2002; Rabe et al., 2007; Yusof et al., 2008). Two experts in dentistry evaluated whether the items in the survey were "appropriate". The tool developers reported that the two experts deemed all the items as "highly appropriate" (Navabi et al., 2014).

Content Validity Requirement 2:

- Two experts in dentistry evaluated whether the items in the survey were "appropriate". (Navabi et al., 2014). There was no further description of the two experts that evaluated the appropriateness of the items in the Attitudes toward Evidence-Based Dentistry tool.



Content Validity Requirement 3:

- The tool developers did not detail the method followed by two experts in evaluating the appropriateness of the Attitude toward Evidence-Based Dentistry tool items (Navabi et al., 2014).

Content Validity Requirement 4:

- The tool developers did not report whether the items of the Attitude toward Evidence-Based Dentistry tool comprehensively evaluated the dentists' attitude towards evidence-based dentistry (Navabi et al., 2014).

Limitations:

- The tool developers did not provide enough description of how the previous tools informed the formation of the Attitudes towards Evidence-Based Dentistry tool. There was also limited details reported on the credentials of the experts that evaluated the content validity of the tool and the method they used to determine that the Attitudes towards Evidence-Based Dentistry tool's items are "highly appropriate" (Navabi et al., 2014).

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