

QPEI OVERVIEW

The College of Registered Nurses of Manitoba (CRNM) recognizes the importance of quality practice environments in which nurses work to deliver expert health care services to Manitobans. In a quality practice environment, the “needs and goals of nurses are met and patients are assisted in meeting their individual health objectives. This takes place within the cost and quality framework mandated by the organization in which the care is provided” (ICN, 2007, p. 5). Quality practice environments support nurses in being autonomous, practicing to their full scope, and in employing initiative (ICN, 2007).

The mandate of the CRNM is to protect the public. Research has shown a direct correlation between the quality of nurses’ practice environments and productivity, recruitment and retention, job satisfaction, sick time usage and most importantly, the quality of patient care and patient outcomes. As such, in order to assist nurses in working together with stakeholders to advocate for, and achieve quality practice environments, CRNM has implemented a quality practice initiative called the Quality Practice Environment Initiative (QPEI).

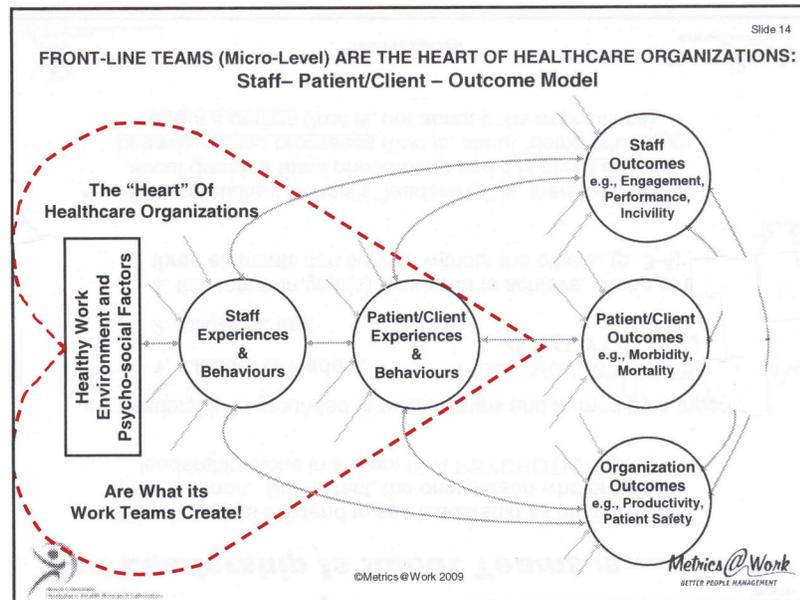
The Canadian Nurses’ Association *Code of Ethics* emphasizes the importance of quality work environments by indicating that “nurses as individuals and as members of groups advocate for practice settings that maximize the quality of health outcomes for persons receiving care, the health and well-being of nurses, organizational performance and societal outcomes” (p. 5). The QPEI reinforces the importance of this value. This initiative is based on the Registered Nurses Association of On-

tario (RNAO) best practice guidelines as well as other evidence-based research findings in the area of quality practice environments. The QPEI initiative consists of five guidelines that will establish benchmarks for nurses and their employers to use in creating quality practice environments in their workplace. The guidelines are broad in scope so they may be applied in all domains and to all settings. The guidelines are not written in the order of priority. The accompanying indicators and strategies within each guideline can serve as a foundation on which to build a plan to implement change. The indicators are not all-inclusive.

Each of the QPEI guidelines provides a functional yardstick for performance and development of individuals, units, and organizations. They reaffirm that safe and respectful environments are imperative (AACN, 2005). It is the intent of CRNM that registered nurses and other stakeholders will explore each guideline and accompanying indicators for relevance to their own environment and develop ways to identify and implement the improvements required to create a quality practice environment.

The five guidelines of the QPEI are:

1. Leadership
2. Collaborative Practice & Communication
3. Professional Nursing
4. Workplace Health, Safety, and Well-being of the Nurse
5. Control Over Practice



Each of the five guidelines aims to improve the work environment of registered nurses. As depicted in the model above, a healthy work environment directly impacts registered nurses' experiences and subsequent behaviors. These experiences and behaviors then impact on the patient/client. This interplay directly relates to patient/client outcomes, staff outcomes, and organization outcomes. The framework used for the QPEI is the *Standards of Practice for Registered Nurses*, a practice expectation for all registered nurses in Manitoba. Each of the five QPEI guidelines is supported by the *Standards of Practice* as follows:

1. Leadership

- a) Registered nurses act as a resource and role model for student nurses, colleagues, and others in accordance with Standard I: Professional Responsibility and Accountability.
- b) Registered nurses promote a practice environment that supports professional responsibility, accountability, and development. As well, they identify and respond to professional practice issues that interfere with their ability to practice according to the *Standards of Practice* and the *Code of Ethics* in accordance with Standard I: Professional Responsibility and Accountability.
- c) Registered nurses encourage, support, facilitate, and/or participate in research relevant to the profession in accordance with Standard II: Competent Application of Knowledge.

2. Collaborative Practice & Communication

- a) Registered nurses communicate and collaborate with clients, health care professionals, and others in providing nursing services in accordance with Standard IV: Communication and Collaboration.

3. Professional Nursing

- a) Registered nurses take personal responsibility for professional conduct and fitness to practice in accordance with Standard I: Professional Responsibility and Accountability.
- b) Registered nurses assume responsibility for maintaining competence in their own nursing practice in accordance with Standard III: Competence in Nursing Practice.
- c) Registered nurses share nursing knowledge with clients, other health care professionals, and the public in accordance with Standard IV: Communication and Collaboration.
- d) Registered nurses promote and uphold the ethical standards of the nursing profession in accordance with Standard V: Ethical Practice.

4. Workplace Health, Safety, and Wellbeing of the Nurse

- a) Registered nurses take personal responsibility for professional conduct and fitness to practice in addition to identifying and responding to professional practice issues that interfere with their ability to practice according to the *Standards of Practice* and *Code of Ethics* in accordance with Standard I: Professional Responsibility and Accountability.
- b) Registered nurses promote and uphold the ethical standards of the nursing profession in accordance with Standard V: Ethical Practice.

5. Control Over Practice

- a) Registered nurses base their practice on the application of current knowledge from the sciences, the humanities and other disciplines in accordance with Standard II: Competent Application of Knowledge.
- b) Registered nurses use appropriate knowledge, skills, attitudes, and judgment in the practice of nursing in accordance with Standard III: Competence in Nursing Practice.
- c) Registered nurses articulate the role of registered nurses in planning, development, implementation and evaluation of health care as well as sharing nursing knowledge with clients, other health care professionals, and the public in accordance with Standard IV: Communication and Collaboration.

Action Research

The utilization of the QPEI is loosely based on the action research process:

→ Diagnosing → Action Planning → Taking Action → Evaluating → Specifying Learning →
(O'Brien, 1998).

The philosophy of action research is that people learn best and are more willing to apply what they have learned when they do it themselves (O'Brien, 1998, p. 3). As such, CRNM through the QPEI, will provide nurses with the tools to work together with their key stakeholders to improve the quality of their workplace environment. These guidelines are intended to stimulate strategic thinking about how to design and initiate changes that will flourish over time.

A guideline, by definition, is a detailed plan or explanation to guide you in setting standards or determining a course of action, but is not meant to be mandatory.

CRNM encourages nurses in all domains to use these guidelines to evaluate their current practice environment and to provide inspiration to make improvements. Creating a quality practice environment is both a collective and an individual responsibility. As such, each guideline in the QPEI contains recommendations at three different levels: the organization, registered nurse manager/unit, and the individual registered nurse.

As stated by the Quality Worklife - Quality Health Care Collaborative (2007) "it is unacceptable to work in, receive care in, govern, manage and fund unhealthy health care workplaces." In accordance with the *Standards of Practice for Registered Nurses*, it is the responsibility of the individual registered nurse to identify, and respond to professional practice issues as well as to promote a practice environment that supports professional responsibility, accountability, and development. The QPEI provides a vehicle for registered nurses to use to drive the change process in their workplaces.

Suggestions for using the CRNM Quality Practice Environment Initiative Guidelines & Indicators for Nurses in Manitoba

The Quality Practice Environment Initiative provides nurses with a framework that can be used in a variety of ways. Here are some suggestions on how individuals or groups can use these guidelines to enhance a quality practice environment and improve patient outcomes:

1. Complete the Environmental Scan Tool to help highlight areas of current strength in the workplace as well as areas in need of improvement. Other assessment tools may be used – for example staff satisfaction questionnaire/survey etc. Please see the RNAO Toolkit for further assessment/planning options that may better suit your workplace. <http://tctoolkit.rnao.ca/resources/client-centred-care#Assessment-Tools>
2. Read the guidelines thoroughly and keep as a ready reference. The guidelines should provide you with a benchmark/picture of what a quality practice environment looks like. The indicators/strategies are meant to give you ideas/goals to work towards achieving. They should assist you in developing your plan of action.
3. Assess how your workplace compares to each of the five guidelines and the related indicators.
4. Identify organizational/workplace strengths and plan to reinforce and celebrate them.
5. Identify areas for organizational/workplace improvement within your organization/workplace and make plans to address them.

6. Decide on an area/issue on which to focus – if there is more than one issue, decide on which will be the priority. It is best to start with one issue at a time. ie. communication, leadership, collaboration etc. and be prepared to build on your momentum.
7. Share your assessment and the guidelines with colleagues, managers, and the organization's leaders to enlist their understanding and support. It is necessary to have buy-in from your colleagues as improving your practice environment is a group effort. You may not initially receive buy-in from all of your colleagues, but focus on building a team committed to making a change, and forge ahead. Others may join in as time goes on. Don't give up, as change often seems daunting at the beginning.
8. As you build a team of your colleagues committed to making a change, begin making your plan of action. This includes articulating achievable goals, strategies to meet those goals, key players, outcome measures, and a time frame. You may find the logic model template included in the 'tools' section of the QPEI Web page on the College's website helpful in organizing your ideas and thoughts into a plan. Develop additional indicators/strategies apart from the guidelines if needed. Make your plan as specific to your workplace as possible.
9. List resources required to address the areas for improvement and plan to obtain those resources.
10. Call CRNM's Practice Consultants for further information, or with questions.

(Adapted from CRNBC Guidelines for a Quality Practice Environment)

Planning for Success – Suggested Strategies for Leading and Sustaining Change (RNAO, 2006)

- Educate leaders/management about the link between nursing work environments and patient/client outcomes.
- Understand and acknowledge that uptake of change varies from individual to individual.
- Work with colleagues in human resources, finance and quality improvement to gain access to data to track the outcomes of change.
- Conduct a stakeholder analysis to determine those who can promote or inhibit the change.
- Learn about the perspectives of each stakeholder and how the change can be meaningful to them.
- Be patient and open to opportunities to advance the change.
- Develop a support network to sustain personal energy throughout the change process.
- Engage registered nurses in building a vision.
- Share both the vision and tactics of the change at open forums and through the use of technology.
- Build team confidence in the team's ability to manage the change through skills training for new tasks, teamwork, and focusing on strengths.
- Communicate at regular intervals using multiple methods and strategies.
- Link change plans to the organization's strategic goals.
- Plan communication strategies such as newsletters, meetings, open forums and one-on-one meetings between staff and leaders throughout the change process.
- Consult early and often with staff.
- Offer change management workshops that include delegation and managerial skills, team-building skills etc.
- Use evaluation data from employee surveys and focus groups to track both processes and outcomes and inform decisions.
- Reinforce new behaviors/ways of doing things through positive reinforcement.
- Celebrate successes regularly.

References

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- Registered Nurses' Association of Ontario. (2006). *Developing and Sustaining Nursing Leadership*. Retrieved from www.rnao.org/Page.asp?PageID=122&ContentID=1196&SiteNodeID=241&BL_ExpandID

For more information, please contact a Nursing Practice Consultant at (204) 774-3477 or (800) 665-2027 (Manitoba toll-free).