Development of a PHN

Professional Practice Model (PPM)

using

Participatory Action Research (PAR)

Community Health Nurses of Canada 9th Annual Conference, Ottawa, June 1-4, 2014

Research undertaken as a component of a PhD in

Applied Health Sciences at University of Manitoba

Overview

- · Framing and Background
- Research Objectives and Approach
- Data Generation and Analysis
- · Study findings and future implications

Commission on SDH (WHO, 2008)

Growing and avoidable global health inequities

An inequality or difference that is not fair or just, and is preventable and avoidable

- <u>Challenge:</u> Improve the social, political, and economic conditions contributing to inequities in a generation
- Society should be judged on population health fair distribution of health across social spectrums



Inequities..... Influence or damage across lifespan?

What is the Evidence?

- · Equity from the start
- Parent/child relationship acts as a buffer

Negative impact of poverty

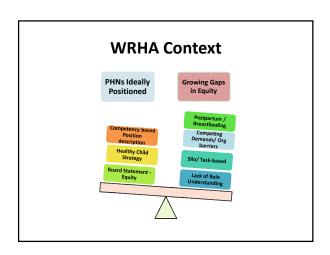
- Critical stages
- Significant differences by age 5

Failing to Act....

- Chronic/ Communicable diseases
- Mental Health Issues
- Financial difficulties/ Food insecurity/ Low literacy/ Education
- Smoking /Substance use
- Lack prenatal care/ Teen mothers
- UNIVERSAL HEALTH CARE: ACTION AREA 9.1

Build health-care systems based on principles of equity, disease prevention, and health promotion

Recommended: Full scope; Social justice; Determinants of health; Population-based; Prevention; Inter-professional; Evidence-based PHNs ideally positioned to address inequities by: improving daily living conditions; facilitating distribution of resources, measuring and assessing impacts (WHO, 2008) Current: Task-based; Lack of vision, PHN involvement and evidence; Under resourced; PHNs powerless



Objectives and Approach

1.To develop a

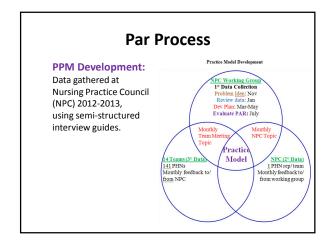
Professional Practice

Model (PPM) for PHNs in
an urban health region.

2.To explore Participatory
Action Research (PAR) in
developing a model to
clarify the PHN role.

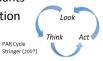
PAR Defining Features:

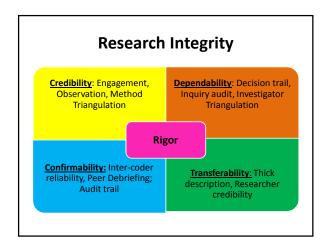
- 1. Participant engagement
- 2. Lived experiences
- 3. Empowerment
- 4. Consciousness raising
- 5. Individual/System change Address power inequities

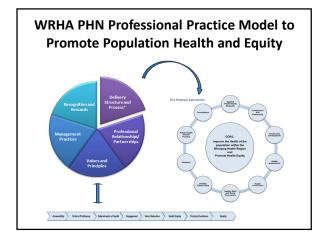


Data Generation and Analysis

- · Audio-taped and transcribed verbatim
- Reflexive journal, field notes
- Inductive content analysis
- · Organize/summarize into draft documents
- Develop draft action plan, agendas
- · Elicit feedback from participants
- · Reflect, discuss, agree to action







PPH Key Strategic Approach	PHN Practice Definition	Potential PHN Interventions/ Roles
Health Assessment	PHN practice priorities are based on analysis of health status within populations. Health assessment incorporates the nursing process components of assessment, planning, intervention, and evaluation.	Advocacy, Communicable disease prevention; Referral and follow-up
Community Development	PHNs utilize knowledge, assessment, and a strength based approach to empower and build capacity of the community to meet its needs.	Capacity building; Empowering; Partnering; Building coalitions and networks
Collaboration and Partnership	PHNs share resources, responsibility, and influence while recognizing the strengths of others and working towards common goals that premote health. Collaboration and partnership is based on effective PHN communication and consultation with clients, team members, and other agencies and organizations.	Consultation; Advocacy; Service/care coordination; Leadership; Facilitation
Applied Public Health Research	PHNs appraise and apply research evidence from public health and nursing sciences. PHN practice is current, accountable and evidence informed.	Applying public health and nursing theory; Appraising; Synthesizing; Research and evaluation
Surveillance	PHNs collect and interpret surveillance data, as well as apply surveillance information to guide their practice. PHNs monitor community based trends and health assessment data to understand the population they work with and to plan PHN interventions.	Monitoring; Immunizing; Screening; Referral and follow-up; Leadership; Resource management, planning, coordination

Findings:

Professional Practice Model

Key Organizational Tool

- · Articulates full scope
- Clarifies organizational roles and responsibilities
- · Fosters shared vision
- A necessary starting point



Findings Professional Practice Model

"It's a common framework, it's a lens that we can ALL look through and by putting the words on paper and articulating our role in such a beautiful way that it connects the standards of practice and our job description and everything, it's unified..... We can have that common language and conversation, instead of just trying to explain."

Findings:

Professional Practice Model

Links Practice and Theory

- Creates common language
- Assists PHNs to shift to a population-based practice
- Concept of health equity requires clarification
- Highlights organizational role

Findings Professional Practice Model

"It's up to us to look at things differently. Like we've been talking about, this process has helped us all to look at our practice a little bit differently and make decisions about who we're targeting more. That's a really powerful message to get through to nurses as well."

Findings:

Participatory Action Research

PHN Voice

- Par is an effective process to develop a PPM
- Empowerment
- PAR cyclical nature, critical reflection, and discussion enriched the process

Findings Participatory Action Research

- PHN 1: This PAR approach is so important for people to embrace change because it is hard. If they're involved in it then they're going to be more likely to embrace it.
- PHN 2: And they get excited for it, they're hoping for change whereas with [other changes] their backs are up....
- PHN 3: There's an accountability built into the Nursing Practice Council structure too, we're forcing things to move forward that can't be left.

Findings:

Increased Consciousness

Participatory Action Research

- PHN awareness of organizational inefficiencies, inequities and power imbalances
- PHN leadership reorient practice to focus on Health Equity/Early Childhood Development

Findings Participatory Action Research

- PHN 1: We may not see a lot of big opportunities to change practice but
 we can find opportunities in our day to day work. You don't follow your
 post-partum's the same way but maybe you follow your prenatal clients in
 a different way, or you do something with your schools....so within the
 resources that we have there are opportunities, maybe on a smaller scale.
- PHN 2: I see that people are trying to work to their competencies more.
 It's really neat to see how these little things can make subtle changes, and that all makes a difference.
- PHN 3: I've changed my practice too... We can't necessarily see a client
 three times for every family, so I'm trying to free up time to spend with
 families that need more and I'm hoping to free up time for community
 development, which we don't have time for at the moment.

PAR – Factors for Success

Individual

- marvidaa
- Complex issue Change
- Trust / Open
- Commitmen
- Leadership

Organization

- Senior leadership
- support
- Facilitate communication
- Open to learning and change
- Safe environment

Facilitator

- Process facilitation
- Content expertise
- Enthusiasm
- Enthusiasm
 Commitment
- Shared leadership

Study Implications

- Research: PAR in nursing research = Knowledge Translation
- PHN Practice: Distinct body of knowledge = Role Clarity
- Administration: Creating a professional practice environment that values and supports PHN autonomy, practice, and knowledge = Healthy and Productive workforce
- Education: Population-based practice, Inter-professional collaboration to promote health and equity, social determinants = Strong foundation in community concepts
- Policy: PHN role in Health Reform, Social Justice = Population Health Improvements

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