

ADVANCING KNOWLEDGE FOR THE LICENSED PRACTICAL NURSE PROFESSION

2015 - 2017



COLLEGE OF
LICENSED PRACTICAL NURSES
OF ALBERTA



CONTENTS

2	Message from the CEO
3	Message from the Director of Research
4	Research Advisory Committee
6	Research at the CLPNA: Building a Foundation
8	1 Advancing Knowledge: Creating Knowledge through Research Collaborations <ul style="list-style-type: none">- Connecting with People with Dementia: A Knowledge Translation Project- Utilization of Licensed Practical Nurses in Alberta Health Services- Facilitators and Barriers to the Use of Licensed Practical Nurses in Alberta Health Services- The Influence of Healthy Work Environments on the Intent to Stay Among Nurses: Perspectives from Canada and the United Kingdom- Epidemiology of Non-Reported Work-Related Injuries among Licensed Practical Nurses in Alberta- Building Capacity for Evidence-Based Practice: Understanding how Licensed Practical Nurses (LPNs) Source Knowledge in Alberta, Canada- Innovative Evidence-Based Practice Education: Battling Dr. Google and Nurse Jackie- Evidence-Based Practice in the Classroom: A Survey of Practical Nurse Educators- Information Literacy Skills and Training of Licensed Practical Nurses (LPNs) in Alberta, Canada: Results of a Survey- Mental Injury: Exploring the Factors Related to Abusive Behavior Among Health Professionals
20	2 Building Capacity: Licensed Practical Nurse Related Research <ul style="list-style-type: none">- Advancing Knowledge in Practical Nursing Research Grant
22	3 Inform Decisions: Using Research to Make Impacts and Transform the System <ul style="list-style-type: none">- Advancing Policy to Optimize the Role of Licensed Practical Nurses- Update of Licensed Practical Nurse Competencies in Alberta- Harmonizing the Approval Process of Canadian Practical Nurse Programs: An Environmental Scan and Jurisdictional Review
26	Knowledge Translation at the CLPNA
27	Conclusion: Research from the Ground Up

MESSAGE FROM THE CHIEF EXECUTIVE OFFICER

A key characteristic of an evolving profession is the ability to create new knowledge that will inform and enhance its practice. In October 2015, the CLPNA created the Department of Research with the mandate to advance knowledge for the Licensed Practical Nurse profession. It is a pleasure to present this report, *Advancing Knowledge for the Licensed Practical Nurse Profession*, outlining the significant progress made over the past two years.

The report highlights collaborative projects with CLPNA partners that will advance knowledge, build capacity, and inform decision making to contribute to quality nursing care in a patient centred system. Going forward, the CLPNA will continue to participate in research, innovation, and new initiatives that contribute to the health system and the Licensed Practical Nurse profession.

Thank you to our partners and collaborators, our Research Advisory Committee, and most of all, Alberta's LPNs, for helping make our research projects successful and relevant.

Linda Stanger, BN, MSA
Chief Executive Officer, CLPNA



MESSAGE FROM THE DIRECTOR OF RESEARCH

The CLPNA strongly believes that research and innovation contributes to our vision of transforming the Licensed Practical Nurse profession and influencing a quality person-centred system.

The aim of the Department of Research is to encourage research in support of excellence in nursing practice, regulatory and policy decision-making, and to facilitate positive changes in our health system and for the health of Albertans.

The Department of Research is responsible for developing and implementing a research agenda that aligns with the vision and mission of the CLPNA. The CLPNA's research goals are to:

- 1. Lead and facilitate research activities to advance knowledge
- 2. Build capacity for research activities
- 3. Create an evidence base for practice and policy-related decisions

This report, *Advancing Knowledge for the Licensed Practical Nurse Profession*, describes LPN and stakeholder investment in research at the CLPNA. This document details the results of these research activities and highlights the impact this work has had on Alberta's LPN community over the past two years.

Leah Phillips, PhD
Director of Research, CLPNA



RESEARCH ADVISORY COMMITTEE

In collaboration with the Department of Research, the CLPNA Research Advisory Committee provides consultation for determining priority areas for CLPNA supported research on a year-to-year basis. This external committee provides guidance on proposed research projects in terms of appropriateness, feasibility, and acceptability.

The responsibilities of the Research Advisory Committee are to:

- suggest annual priority areas for research developed, led, conducted, and supported by the CLPNA.
- consult on research projects led, directed, and supported by CLPNA.
- ensure research priorities are aligned with other CLPNA initiatives, particularly in policy and practice areas.
- facilitate knowledge translation of LPN-related research projects.
- provide assessment of grant submissions to the Annual CLPNA/Alberta Innovates Health Solutions research grant.

Members of Research Advisory Committee

- Leah Phillips, Director of Research, CLPNA
- Nyla de Los Santos, Research Coordinator, CLPNA
- Teresa Bateman, Director of Practice & Communications, CLPNA
- Sean Clark, Professor and Associate Dean, Connell School of Nursing, Boston College
- Greta Cummings, Dean of the Faculty of Nursing, University of Alberta
- Quintin Dare, LPN
- Sandi Davies, LPN
- Chris Eagle, Health Policy Expert
- Szjermae Joseph, LPN
- Christy Obeng, LPN
- Tania Stafinski, Director of the Health Technology and Policy Unit, School of Public Health, University of Alberta
- Jeanne Weis, Practice, Research, and Policy Consultant, CLPNA
- Linda Stanger, Chief Executive Officer, CLPNA

CLPNA MANDATE

To regulate and lead the profession in a manner that protects and serves the public through excellence in Practical Nursing.

CLPNA VISION

Transforming the licensed practical nurse profession and influencing a quality person-centred system.

MISSION FOR THE PROFESSION

Licensed Practical Nurses (LPNs) of Alberta are progressive nursing professionals who provide quality, safe, competent, and ethical care in collaboration with clients, families and other providers.

- LPNs provide holistic person-centred care including physical, psychosocial and spiritual health.
- LPNs advocate for and respect client choice and dignity.
- LPNs are accountable for the care they provide.

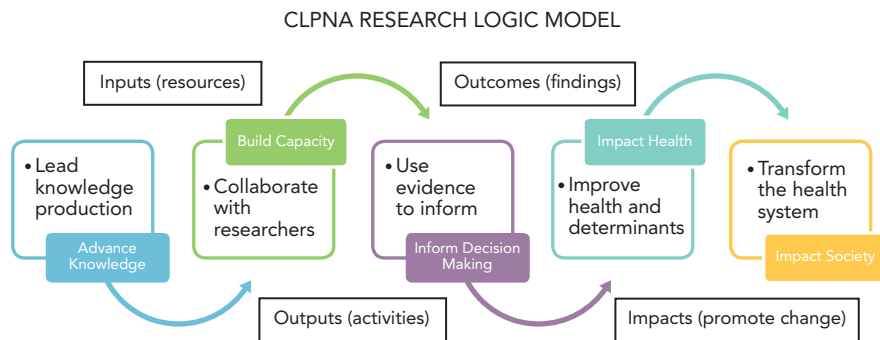
RESEARCH AT THE CLPNA: BUILDING A FOUNDATION

The Architecture for Research

Goal three of the CLPNA's three-year business plan states the CLPNA will participate in research, innovation, and new initiatives that contribute to the health system and the Licensed Practical Nurse profession. The Department of Research will achieve this goal by meeting three objectives:

1. Lead and facilitate research activities to advance knowledge about the LPN profession.
2. Collaborate with stakeholders and LPNs to build capacity to translate and utilize evidence in practice.
3. Engage and build coalitions that contribute to advances in nursing, regulation, healthcare, and health systems.

The mandate of the Department of Research is to invest in research activities that are relevant to the returns of the organization. The CLPNA invests resources into health research, therefore, it is important to measure the activities that are related to Practical Nurse research and to evaluate the impact these activities have on the advancement of the CLPNA vision and the execution of the Strategic Plan. The Department of Research has developed an evaluation framework reflected in the following logic model.



The CLPNA will invest 'inputs' (resources) that lead to 'outputs' (activities) that produce 'outcomes' (findings) that have 'impacts' (promote change).

Measuring Impact

Our activities are evaluated using five broad indicators; these indicators are meant to align with the research objectives within the CLPNA's Strategic Plan 2017-2020, Goals 3.1 to 3.3.

Research Indicators

1. Advancing Knowledge

The CLPNA champions high quality research activities that build foundational knowledge about the Practical Nurse profession and practice. We will encourage innovation that produces 'new discoveries' related to practical nursing and contributes to quality scientific literature. The Department of Research ensures that CLPNA research activities are empirically driven, methodologically sound, ethical in nature, and informative to our stakeholders (our community and our clients).

2. Capacity Building

The Department of Research works with other CLPNA departments and stakeholders to develop mechanisms that will advance the LPN professional community's understanding, use, and translation of research evidence. By using professional development activities related to research methods (quantitative and qualitative), evidence to inform practice and innovation, nursing education and technologies, we will build capacity for research about and for the Practical Nurse profession. Other activities related to increasing research capacity include but are not limited to, setting research priorities (through engagement with our community and stakeholders), advising on relevant research questions, supporting research activities (providing resources), developing training programs on research methods and data analysis, and supporting research related infrastructure.

3. Informing Decision Making

The Department of Research works in partnership with CLPNA's policy and practice departments to ensure high quality research evidence is used for the development of policy and decision making. As part of the research mandate, the department supports research activities that add to the evidence base (specific evidence) of the practical nurse profession and/or activities that influence decision making that is evidence informed (acting on the knowledge of the evidence).

4. Health Impacts

The CLPNA encourages research activities that impact the health status of the Licensed Practical Nurse community, including the morbidity, mortality, and health-related quality of life of these nurses. The Department of Research supports our members participating and leading research that impacts health system performance, in particular, acceptability, accessibility, appropriateness, competence, continuity, effectiveness, efficiency, and safety as they relate to practical nurse activities.

5. Broad Economic and Social Impacts

The CLPNA recognizes the importance of research that can transcend evidence-based practice and decision making, and recognizes the impacts research can have on broad economic and social factors. The Department of Research supports activities such as economic analysis and evaluation of health system interventions that measure the well-being of LPNs.



1 ADVANCING KNOWLEDGE: CREATING KNOWLEDGE THROUGH RESEARCH COLLABORATIONS

Over the past two years, the CLPNA has sought to build research collaborations, partnerships and networks to create a knowledge foundation for LPN research. We strive to facilitate collaborations with diverse partners from many areas of academic research. What follows is a list of the successful research partnerships the CLPNA has created with an overview of the project and the associated activities used to inform our stakeholders and implement actions based on our results.

Connecting with People with Dementia: A Knowledge Translation Project

CLPNA Partner: Bow Valley College

Overview

Purpose: The purpose of this project was to develop an evidence-based communication toolkit to facilitate the translation of knowledge found in dementia research. The tool is designed by and for the Licensed Practical Nurse (LPN) in a leadership role to facilitate enhanced communication with Health Care Aides (HCA). The project focused on connecting with people with dementia, a phenomenon common to all continuing care settings.

Method: The initial phase of the project consisted of a cursory review of related literature on communication, leadership, connectedness, inclusion, and engagement. Just over 100 articles were synthesized and six themes were found: respect, listen, value, include, engage, and reflect. The examination of the literature led to the development of a model of research utilization and knowledge translation, as well as a toolkit to be used by LPNs and HCAs in their practice. The extensive literature review facilitated a process to enhance and advance the LPN in a leadership role in all settings and to develop core materials related to connecting with people who have dementia.

Twelve participants in a continuing care centre were involved in the project, six LPNs and six HCAs. Information sessions and engagement sessions were held prior to implementation of the toolkit. The initial engagement session for LPNs included information on the project and the toolkit, and a discussion on leadership and support for HCAs. The engagement sessions for HCAs included an LPN-facilitated discussion on the toolkit. One month after the final engagement sessions, interviews were held with the caregivers to determine the impact of the toolkit on care.

Findings and Impact: The toolkit involves a pictorial laminated pocket card with the phrase "Connect...it doesn't take time to act upon it." One side is a picture of a tree with labeled overlapping branches. The branch labels are the tools of the toolkit: respect, listen, value, include, engage, and reflect. On the second side of the pocket card are brief, usable definitions for the tools.

Results of the evaluation interviews:

1. Each of the communication toolkit items was valuable for improving client care.
2. The communication toolkit was viewed as a useful reminder for effective client care.
3. The communication toolkit and engagement sessions improved practice.

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| | <ol style="list-style-type: none">4. Experience of HCAs – improved teamwork, communication, and client care.5. Experience of LPNs – strengthened practice.6. Barrier to Sustainability: incorporating the toolkit into everyday practice. |
| | <p>Knowledge Translation</p> <ul style="list-style-type: none">• Presentation at CLPNA Annual Conference, Edmonton AB, April 2016• Presentation at the Alberta Continuing Care Association's Annual Conference, Edmonton AB, June 2016• Presentation at Canadian Association of Practical Nurse Educators' (CAPNE) Annual Conference, St. John's NL, October 2016• Publication in CARE Magazine, Winter 2016• Presentation at Bow Valley College Brown Bag Lunch, February 2017• Presentation at CLPNA Annual Conference, Calgary AB, April 2017• Presentation at Canadian Society of Nutrition Managers' (CSNM) Annual Conference, Ottawa ON, June 2017 |

Knowledge Translation

- Presentation at CLPNA Annual Conference, Edmonton AB, April 2016
- Presentation at the Alberta Continuing Care Association's Annual Conference, Edmonton AB, June 2016
- Presentation at Canadian Association of Practical Nurse Educators' (CAPNE) Annual Conference, St. John's NL, October 2016
- Publication in CARE Magazine, Winter 2016
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Utilization of Licensed Practical Nurses in Alberta Health Services

CLPNA Partner: Alberta Health Services

Overview

Purpose: The goal of this study was to examine the roles and opportunities for Licensed Practical Nurses (LPNs) in different practice settings within Alberta Health Services (AHS). Specifically, the utilization of LPNs in emergency departments (EDs, N=64), mental health (MH, N=43), and labour and delivery (L&D, N=12) units was examined.

Method: A descriptive analysis was conducted to examine the distribution and utilization of LPNs across unit types, facilities, and AHS zones, including the distribution of LPNs in relation to patient volume and workload. For ED, the study examined staffing in relation to Canadian Triage and Acuity Scale scores. Finally, LPN staffing was correlated with staffing of other nursing and non-nursing providers.

Findings and Impact: The study showed that LPN staffing was inconsistent across zones and service types, and patient intensity and acuity did not seem to factor heavily into staffing decisions. The results suggest that other factors might have influenced decisions about whether to include LPNs in these units and further study is necessary.

Knowledge Translation

- Research Presentation at the Canadian Association for Health Services and Policy Research: Towards an Accord for Change, Toronto, Ontario, May 2017
- The creation of the CLPNA and AHS working group for utilization of LPNs at AHS.

Facilitators and Barriers to the Use of Licensed Practical Nurses in Alberta Health Services

CLPNA Partner: Alberta Health Services

Overview

Purpose: The goal of this study was to examine the roles and opportunities for Licensed Practical Nurses (LPNs) in different practice settings within Alberta Health Services (AHS). Specifically, the analysis examined frontline and manager perceptions of LPN utilization in emergency departments (EDs), mental health (MH), and labour and delivery (L&D) units.

Method: This qualitative study involved 89 interviews with frontline, management, and leadership staff on units with and without LPNs. In addition, interviews were conducted with individuals involved in developing and interpreting scope of practice policy. The goals of the interviews were to examine how decisions about LPN staffing are made, what barriers and facilitators affect LPNs' ability to work to their full scope of practice, and how decisions are made about what activities LPNs are allowed to perform.

Findings and Impact: LPNs were generally satisfied with their jobs and felt confident about their work. Many non-LPNs were ill-informed about LPNs' scope of practice and noted challenges in accessing accurate information about what restricted activities LPNs are allowed to perform. Some units without LPNs were open to introducing them whereas others were adamantly opposed to it.

Overall, the majority of decisions about LPN utilization were made at a site or unit level, rather than in a systematic manner led by organizational policy. Information about LPNs' education and scope of practice is needed to increase their representation across the province and their acceptance by other nursing providers.

Knowledge Translation

- Research Presentation at the Canadian Association for Health Services and Policy Research: Towards an Accord for Change, Toronto, Ontario, May 2017
- The creation of the CLPNA and AHS working group for utilization of LPNs at AHS.

The Influence of Healthy Work Environments on the Intent to Stay Among Nurses: Perspectives from Canada and the United Kingdom

CLPNA Partner: Faculty of Nursing, University of Calgary

Overview

Purpose: Nurse work environments for RNs and LPNs have been rapidly changing in the last 15 years as hospitals make efforts to reduce costs, streamline services, and cope with a nursing shortage. Many of the definitions of a healthy work environment for nurses refer to practice environments that offer opportunities for autonomy, professional development, accountability, and control over the work environment. New statistics and an accurate description of current Canadian nurse work environments are urgently needed in order to develop strategies to retain nurses and optimize nurse work conditions. This research was conducted to establish the relationship between healthy work environments, nurses, and organization and patient outcomes.

Method: A cross sectional survey was conducted of acute and critical care nurses in Alberta and a cohort of critical care Registered Nurses from Britain. Overall, N=793 LPNs and N=479 RNs were surveyed. Factors examined included, work environment, moral distress, and intent to stay.

Findings and Impact: Perceptions of work environment, perceived organizational support and intent to stay did not differ significantly between LPNs and RNs. Results show moderate ratings, neither clearly favorable or unfavorable, in any setting, but will provide a baseline for interventions targeting nurse work environments. The results will be further analyzed to show the statistical association between nurse work environment and intent to stay.

Knowledge Translation

- Research presentation at the International Council of Nurses Congress, Barcelona, Spain, June 2017

Epidemiology of Non-Reported Work-Related Injuries among Licensed Practical Nurses in Alberta

CLPNA Partner: Centre of Injury Prevention, University of Alberta

Overview

Purpose: Evidence has found a high risk of work-related injuries in nurses due to the physical demands of their job and the environment in which it is conducted. In particular, previous research has described a high incidence of musculoskeletal injuries as well as sharp and needlestick injuries in nurses with frequent and direct physical contact with patients.

There is a high incidence of work-related injuries in nurses contributing to a significant economic and human burden for their employers, their colleagues and themselves. The economic burden can be mainly attributed to the loss of working time, overtime pay for a replacement, and costs of medical care. This research aimed to explore the epidemiology of non-reported work-related injuries among LPNs, and to identify the reasons influencing failure to report work-related injuries in this occupational group.

Method: This study was a retrospective (case-control) study of LPNs (N=732) in 2016. Data sources used for this research included information available from the CLPNA administrative database and a web-based survey. The survey was designed to inquire about the occurrence of work-related injuries among LPNs in Alberta during the 12 months prior to completing the survey. If an injury occurred, the LPN was asked whether the injury was reported to WBC or not, and the reasons for not reporting when applicable.

Findings and Impact: It is expected that results from this ongoing project will help to estimate the proportion of work-related injuries that are underreported among LPNs in Alberta. Additionally, a better understanding of the epidemiology of those injuries will be gained through an overview of the characteristics and consequences associated with them (i.e., time-lost). Furthermore, identification of the reasons associated with failure to report work-related injuries among LPNs in Alberta can help to support intervention strategies directed to tackle this problem. Overall, results from this study could be used to encourage workers to file compensation claims right away in order to reduce the burden of work-related injuries and the risk of re-injury. This research is expected to provide valuable evidence upon which to base decisions and priorities of knowledge users involved in protecting the safety of LPNs in Alberta.

Final Report due late 2017.

Building Capacity for Evidence-Based Practice: Understanding how Licensed Practical Nurses (LPNs) Source Knowledge in Alberta, Canada

CLPNA Partner: Faculty of Nursing, MacEwan University

Overview

Purpose: Evidence-based practice (EBP) is a global movement in nursing; in Canada, all nurses are required to engage in EBP as an entry-to-practice competency. EBP supports clinical decision-making and positive patient outcomes through the integration of the best available research evidence with nurses' knowledge and expertise and individual patient preferences and values. The purpose of this study was to investigate how LPNs source knowledge in daily nursing practice.

Method: In this descriptive, cross sectional study a survey was sent out to all the practicing LPNs in Alberta. Questions on the frequency with which LPNs used various sources of knowledge were scored on a five-point Likert scale. Responses were correlated with age and years of practice using Pearson (r) correlation analysis. Analysis of Variance (ANOVA) was used to determine if there were significant differences between workplace and how LPNs source knowledge.

Findings and Impact: The main finding of this study showed that when developing an implementation strategy for LPNs to apply EBP principles it is imperative to understand their work context. While the popularity of policy and procedure manuals and in-services as sources of practice knowledge was noted; the access to these sources was not uniform. LPNs working in long-term care settings and community-based organizations will require different strategies than those working in acute care settings.

Knowledge Translation

- Research Presentation: Sigma Theta Tau's 27th International Nursing Research Congress, Cape Town, South Africa, July 2016
- Manuscript submitted for peer review July 2017 to Worldviews on Evidence-Based Nursing

Innovative Evidence-Based Practice Education: Battling Dr. Google and Nurse Jackie

CLPNA Partner: Faculty of Nursing, MacEwan University

Overview

Purpose: Nursing research literature describes a well-known knowledge gap - nurses generally have positive attitudes towards evidence-based practice (EBP) yet often do not use the skills in everyday practice. Research suggests that nurses often rely internet sources (Dr. Google) and their colleagues (Nurse Jackie) to inform their practice. This research project aimed to bridge the EBP implementation gap by creating an accessible education program that targets essential EBP skills. The program emphasized the development of practitioner self-efficacy and the utility of research to practice. Consisting of a series of six interactive webinars, the curriculum was designed to increase nurses' skills in EBP and their self-efficacy for carrying out those skills in practice through a strong clinical focus.

Method: A study was conducted to evaluate the learning awareness, confidence, and agency for using EBP both before and after the educational intervention. The results were collected using a pre and post-test design for each webinar in addition to a quality improvement and evaluation questionnaire.

Findings and Impact: The results showed significant positive increases in factors related to awareness, confidence and agency. The results of the quality improvement evaluation noted that the webinar series was perceived to be relevant and considered at an appropriate level of difficulty.

Knowledge Translation

- Oral presentation at 27th International Nursing Research Congress by The Honor Society of Nursing, Sigma Theta Tau International (STTI: Cape Town, South Africa, July 2016)
- Video series is open access on the CLPNA website and is available world-wide on the Global Health Network

Evidence-Based Practice in the Classroom: A Survey of Practical Nurse Educators

CLPNA Partner: Faculty of Nursing, MacEwan University

Overview

Purpose: Using evidence to inform practice is essential for safe, quality care in nursing. In Canada, RNs and LPNs are required to engage in evidence-informed practice (EBP) as an entry-to-practice competency. Despite this expectation, research indicates there is poor uptake in the application of this process. To improve EBP implementation in Alberta, the CLPNA collaborated with MacEwan University to create an accessible education program (i.e. webinar series) that targets essential EBP skills. Despite the success of the webinar series, it is important to acknowledge that individual skill-building supports only one part of the equation; to create a culture of evidence-based practice, overall educational and system changes must occur. This study collaborated with Alberta PN programs to determine their needs for embedding EBP skills into PN curriculum.

Method: Practical nurse educators from Alberta institutions were invited to participate in an online survey. The survey assessed their capacity for EBP education. Framed within the PRECEDE/PROCEED model, the survey examined factors that influence successful development and implementation of an educational intervention to increase the capacity for EBP. According to the model, there are three categories of factors that can affect behaviour: predisposing, reinforcing, and enabling. These factors influence the provision of EBP education to student nurses and may point to barriers that prevent EBP. A total of 35 PN educators from seven educational institutions participated.

Findings and Impact: There was agreement among educators on predisposing factors that laid the foundation for the success of curriculum-based intervention efforts to improve EBP. Examination of reinforcing factors suggest areas for further skill development (e.g. the ability to integrate evidence with clinical practice), while examination of enabling factors suggests areas of consideration that include time spent on teaching EBP and the availability of useful educational resources. Videos and webinars were identified as helpful in addition to EBP case studies.

Knowledge Translation

- Research Presentation: Sigma Theta Tau's 28th International Nursing Research Congress, Dublin, Ireland, July 2017
- Report prepared and distributed to Alberta Practical Nurse Educator Group

Information Literacy Skills and Training of Licensed Practical Nurses (LPNs) in Alberta, Canada: Results of a Survey

CLPNA Partner: Bow Valley College

Overview

Purpose: Information literacy skills are recognized as important to the curriculum and professional outcomes of two-year nursing programs. There is a lack of research, however, on the information literacy skills and support needed by graduates. This research project aimed to identify the information literacy skills and consequent training and support required by LPNs in Alberta.

Method: An online survey using a random sample of new graduates, (N=506), (graduated within 5 years) from the registration database of the College of Licensed Practical Nurses of Alberta (CLPNA).

Findings and Impact: Approximately 25-38% of LPNs felt they were only moderately or to a small extent prepared to use evidence effectively in their professional practice. LPNs use the Internet and websites most frequently, in contrast to library resources that are used least frequently. Developing lifelong learning skills, using information collaboratively, and locating and retrieving information are areas where LPNs desire more effective or increased training. The results suggest there are significant gaps in the preparedness and ability of LPNs to access and apply research evidence effectively in the workplace. There are several areas in which the training provided by librarians appears either misaligned or ineffective.

Knowledge Translation

- Manuscript submitted to Health Information and Libraries Journal and accepted for peer review, July 2017

Mental Injury: Exploring the Factors Related to Abusive Behavior Among Health Professionals

Investigators: CLPNA Staff

Overview

Purpose: In Canada, Licensed Practical Nurses (LPNs) are a self-regulated profession; they are accountable to the public, the profession, to other members of the healthcare team, and to their employers. LPNs work as part of health care teams that include registered nurses, physicians, allied health professionals, and unregulated care providers. Research demonstrates that the effects of psychological hazards on the mental health of nurses can significantly affect their ability to perform their work in a safe manner. Performing professional practice while mentally injured on the job threatens public safety, therefore, making this an important and serious issue.

This study aimed to describe the incidence of workplace mental injury in a population of Licensed Practical Nurses in Alberta, and to identify factors related to mental injury.

Method: The College of Licensed Practical Nurses of Alberta conducted a cross-sectional survey with registered members. A mental injury composite score was calculated by adding the frequencies of reported abusive behaviours. A multinomial logistic regression was performed to assess the factors associated with moderate and high amounts of reported abusive behaviours.

Findings and Impact: Overall, 64% of the 1,195 participating LPNs reported between 4 and 10 forms of abuse in their current work place (moderate = 4-7 behaviours; high = 8+ behaviours). Factors more likely to contribute to moderate abuse included being less than two years on the job and working in home care. In both moderate and high abuse reported by LPNs, RNs were more likely to be reported as the main source of abuse. The survey clearly demonstrates that perceived abusive behavior is prevalent. Collaboration between nurses and employers is needed to address mental injury in the workplace and develop healthy, safe, and respectful practice environments. Serious consideration should go into the inclusion of training around workplace mental injury in all nursing education programs and professional development initiatives.

Knowledge Translation

- Research presentation, Sigma Theta Tau's 28th International Nursing Research Congress, Dublin, Ireland, July 2017

2 BUILDING CAPACITY: LICENSED PRACTICAL NURSE RELATED RESEARCH

The Department of Research works with other CLPNA departments and external stakeholders to develop mechanisms that will advance the LPN professional community's understanding, use, and translation of research evidence. In doing so, we hope to build capacity for research with a practical nursing focus. The department offers funding opportunities as well as in-kind support for academic researchers who would like to conduct studies.

Advancing Knowledge in Practical Nursing Research Grant

CLPNA Partner: Alberta Innovates Health Solutions



The Advancing Knowledge in Practical Nursing Grant is intended to support and foster high quality research and integrated knowledge translation (iKT) projects that build foundational knowledge about the practical nurse profession. The grant focuses on LPN practice, utilization, and the quality of nursing care provided by LPNs in Alberta, which will add to the growing body of knowledge about the LPN role and provide evidence to support the growth of the LPN profession. The grant aims to encourage innovation that produces 'new discoveries' related to practical nursing and contributes to quality scientific literature.

The CLPNA has partnered with Alberta Innovates Health Solutions to ensure these research projects are peer reviewed and of high quality.

Value and Term of Award: Up to \$25,000 is available for each call of the grant. Projects are funded for a 1-year term.

Priority Topic Areas: Priority areas are set for each call of the Advancing Knowledge in Practical Nursing Research Grant under the guidance of the CLPNA Research Advisory Committee.

The CLPNA Research Advisory Committee (RAC) is made up of LPNs, nursing researchers, and health service experts. The committee works collaboratively to use their current knowledge of the health system to develop a set of priority areas where more research is needed to guide LPN practice and utilization.

Grants Awarded:

Dr. Kimberly Fraser, Associate Professor, Faculty of Nursing, University of Alberta, became the first recipient of the Advancing Knowledge in Practical Nursing Grant in January 2017 for the project entitled: *Optimizing the role and function of LPNs in home care and case management*.

Objective: The overall objective of this project is to generate knowledge on the role and scope of the LPN in home care (HC) and case management (CM) that will be used to support evidenced-based policy and practice decisions. Specifically, it will examine the role and scope of LPNs in CM capacities (i.e., in the role or doing case management functions) in multiple Alberta Health Service (AHS) Zones and examine the occupational impact of LPNs in CM on the HC teams.



3 INFORM DECISIONS: USING RESEARCH TO MAKE IMPACTS AND TRANSFORM THE SYSTEM

As well as supporting primary research, the Department of Research strives to use the best available research evidence to inform decision makers about the role of the LPN in Alberta and Canada. This section provides a short summary of evidence-informed policy articles authored by the CLPNA.

Advancing Policy to Optimize the Role of Licensed Practical Nurses

Authors: Leah Phillips, Jennifer Gallivan, Jeanne Weis, Linda Stanger



Summary

In 2015, the Organization for Economic Co-operation and Development (OECD) reported that Canada's overall health status performance lags in terms of quality of care compared to its peer nations, while its health expenditures are among the highest. In response, the Advisory Panel on Healthcare Innovation published a report called *Unleashing Innovation: Excellent Healthcare for Canada*. This report recommended that while we need to continue to provide quality health services, efficiencies need to be found in order to reduce spending and fully utilize existing resources.

This paper argued that health workforce optimization is one way to improve efficiencies in our health systems. However, there are systemic barriers that prevent full optimization for all health professionals, and in particular, for Licensed Practical Nurses (LPNs). We provide compelling evidence that using LPNs optimally in collaborative care settings can improve efficiencies while maintaining high levels of safe, quality care.

Knowledge Translation

This manuscript was published on Healthcare Management Forum's on-line blog, January 2017

Update of Licensed Practical Nurse Competencies in Alberta

Authors: Glenda Tarnowski, Teresa Bateman, Linda Stanger, Leah Phillips



Summary

The role of the LPN in Alberta has expanded extensively since 2005. In response, CLPNA began reviewing and updating the province's Competency Profile for Licensed Practical Nurses in 2014.

In June 2015, the CLPNA released an updated third edition of the Competency Profile, which identifies base competencies for entry to practice; serves as a tool for LPNs interested in enriching their primary area of responsibility; provides a framework for education programs regarding curriculum components; and guides employers' understandings of the LPN practice across all care settings.

This article describes the development of the competency profile; demonstrates the process that included community engagement, knowledge translation, implementation, and evaluation; and discusses how the profile will be continuously evaluated to facilitate future updates.

Knowledge Translation

- Manuscript published in the Journal of Nursing Regulation; July 2017, Vol. 8, Issue 2

Harmonizing the Approval Process of Canadian Practical Nurse Programs: An Environmental Scan and Jurisdictional Review

Authors: Leah Phillips and Jeanne Weis

Summary

The objective of this paper was to review the approval processes for new and re-entry practical nurse programs across Canada. In 2016, The Canadian Council for Practical Nurse Regulators (CCPNR) sought to harmonize approval processes for practical nurse education programs across Canada. A phased approach was proposed and a steering committee, consisting of subject matter experts and regulators, guided the project. The primary objectives were to review each province's practical nurse educational program's review and approval process; identify opportunities and barriers to harmonization; and identify common standards to facilitate harmonization.

Data collection included jurisdictional documents, informant interviews and a survey. Six common standards with indicators were identified.

1. Evidence of an educational program statement
2. A curriculum that aligns with the Canadian standards for entry-to-practice and standards of practice of the LPN profession
3. A clear set of indicators on faculty requirements
4. Infrastructure that can support clinical and theoretical learning
5. A clear set of policies for student admission
6. A consistent framework for program evaluation

The primary indicators were established through a high degree of consistency across jurisdictions; secondary indicators were areas where consensus could easily be achieved; while tertiary indicators were stand-alone indicators (found in only one or two jurisdictions), which would be potentially relevant for adoption.

Knowledge Translation

- Presented at the Annual General Meeting of Canadian Practical Nurse Regulators (CCPNR) in June 2016
- Under review in the Journal of Nursing Regulation, August 2017.

KNOWLEDGE TRANSLATION AT THE CLPNA

The following is a description of events and activities that CLPNA's Department of Research has led or participated in, with the intention of sharing the results of our research projects and papers.

1. Roundtable Discussion: Canadian Healthcare Workforce Conference, Ottawa, Ontario, November 2017
2. Discussion Facilitation: LPN Annual Conference, Edmonton, Alberta, April 2016
3. Research Presentation: Sigma Theta Tau's 27th International Nursing Research Congress, Cape Town, South Africa, July 2016
4. Research Presentation: Sigma Theta Tau's 28th International Nursing Research Congress, Dublin, Ireland, July 2017
5. Webinars/Videos (Open access):
 - Information Literacy: Make Your Nursing Practice Better and Easier
 - The Map to Evidence: How to Access and Evaluate Evidence Effectively and Efficiently
 - Asking and Answering Clinical Questions: PICO that!
6. Research Presentation: International Council of Nurses Congress: Nurses at the Forefront Transforming Care, Barcelona, June 2017
7. Research Presentation: Canadian Association for Health Services and Policy Research: Towards an Accord for Change, Toronto, Ontario, May 2017

CONCLUSION: RESEARCH FROM THE GROUND UP

In the next two to three years the Department of Research will continue to build and engage with our partners to create a strong and rigorous agenda for research. To do this, the department will direct research on, for, and about Licensed Practical Nurses. Additionally, a priority for the department will be to provide opportunities for trainees interested in how research informs practice and policy, evidence-based practice, and regulation research.

Evaluation

The Department of Research will evaluate its progress on a year to year basis. The department will use an evaluation framework to assess the appropriateness and effectiveness of its research. Evaluation will be on-going; however, a yearly report will provide a detailed description of relevant activities. Using pre-defined outcome measures will inform the CLPNA as to how this work is making an impact for the LPN community and stakeholders.

RESEARCH: CONTRIBUTING TO REGULATORY EXCELLENCE





COLLEGE OF
LICENSED PRACTICAL NURSES
OF ALBERTA

St. Albert Trail Place
13163 -146 Street
Edmonton, AB T5L 4S8

Phone 780.484.8886
Toll Free 1.800.661.5877
Fax 780.484.9069
email info@clpna.com

www.clpna.com

