# Case Study: Nursing Professional Practice Councils: The Quest for Nursing Excellence

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### **Abstract**

The quest for nursing excellence requires enthusiasm, commitment and a dedicated team of nurses. The desire to create an environment where nurses were valued, supported and empowered led to the development of a Nursing Professional Practice Council within an Ontario Public Health Unit. The journey is described in detail, from planning and implementation through lessons learned and recommendations for organizations embarking on a similar quest. As a direct result of the Nursing Professional Practice Council, experiences within the organization have exceeded expectations, justified the financial costs and improved relationships among all parties.

The quest for nursing excellence began with the desire to create and sustain an environment in which nurses were valued, supported and empowered. Quests are never easy. The mere mention of the word conjures up images of planning and preparation, collaboration and consultation, a keen sense of direction and the desire to work towards a common goal. This quest was no exception. Although the concept of a Nursing Professional Practice Council (NPPC) was new to this Ontario Public Health Unit, determination to improve the workplace environment for nursing staff, the organization and the clients they serve helped keep the project on target and moving forward.

# Why a Nursing Professional Practice Council?

Every Canadian who uses the healthcare system expects that the providers of care are practising in a competent and professional manner. Nurses make decisions daily that affect patient outcomes, influence the healthcare organization and reflect on nursing competency. Organizations must be encouraged to provide an environment for nurses to practise in a safe, competent and ethical manner

"Imagine...
A Health Unit where Nurses are valued.
Imagine...
A Health Unit where Nurses are
supported.
Imagine...
A Health Unit where Nurses are
empowered.
Imagine...
Nursing Professional Practice...
Make it a reality."

(Farrugia and Rietdyk 2004)

(Canadian Nurses Association [CNA] 2004). Nurses play an important role in enhancing professional practice through continuing education, ongoing reflective practice, supporting peers and colleagues and developing formal communication pathways between staff and management.

For nursing staff, Professional Practice Councils improve the quality of the work-place environment. The Canadian Nurses Association (2004) has proclaimed that a direct correlation exists between high-quality practice environments and nursing job satisfaction, productivity, quality of care and client outcomes. When nurses are supported and empowered to provide high-quality care, everyone wins: nursing, the organization and the clients receiving healthcare (Green and Jordan 2004). Healthy organizations have lower staff turnover rates, resulting in financial savings for the organization; from decreased recruitment, retention and retraining strategies as well as improved patient care (Ferguson 2005).

### **Getting Started**

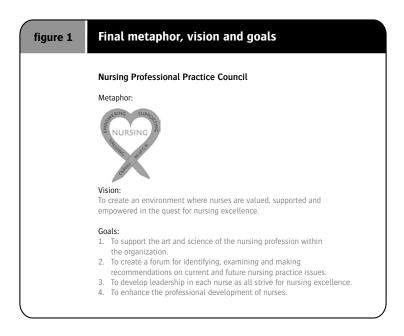
Following an extensive literature review, two nurse managers created a project plan to guide the development and monitor outcomes of the NPPC. It began with a stakeholder grid and a review of various stakeholders' support and influence. It was felt that all nurses would support the NPPC but would have varying influence, depending on their experience and time with the organization. Non-professional staff and senior management varied in levels of support, but had an extremely wide range of influence on the success of the NPPC. Strategies were developed to solicit buy-in from low-support stakeholders, including information packages and face-to-face meetings. Being fully aware of support and influence was important for council acceptance and development progression.

Next, potential NPPC members were reviewed by the lead managers, ensuring that council membership participation would be rich, varied and representative of nursing staff within the organization. Nurses were selected from work teams, ensuring representation of diploma, degree and extended-class prepared staff. Eight front-line and three management staff were selected for the first council, including a new graduate with less than four months' experience and a manager with over 20 years in community nursing.

The third step involved the development of a communication plan to inform staff and other stakeholders about the NPPC, its functions and its importance to the organization. This included messages to be communicated, the medium to be used and a communication timeline. Finally, the overall project plan was documented listing milestones, target dates, activities, accountability and performance measures. The goal was to have the first council meeting within two months of initial plan development.

### **Moving Forward**

Invitations were sent to nurses for the first NPPC meeting. Each invitation included a personalized note providing a brief introduction to the council and some of the reasons the nurse was selected. Each nurse accepted the challenge and expressed thanks and pride at being selected. Nurses also expressed gratitude to management for addressing nursing professional practice within the organization.



## Final terms of reference figure 2 Nursing Professional Practice Council Terms of Reference Membership: This committee will consist of the following members, who are all nurses registered with the College of Nurses of Ontario: · At least two members from the Nursing Management Team At least seven members who are staff RNs, including a minimum of two from each program area • One RN(EC) Members will be appointed for a two-year term. Every year after the first two years of the committee, three members will be replaced save and except nursing management representatives, who will rotate yearly. Meeting Frequency: Meetings will be held monthly for the first year or at the call of the chair. Ouorum will be defined as 50% plus one. Agenda meeting notes, practice reviews and recommendations will be made available to all staff following acceptance at the next meeting of the committee. Each June, the committee will submit a report summarizing the past year's activities to the Board. Chair will be by alphabetical last name on a rotational basis.

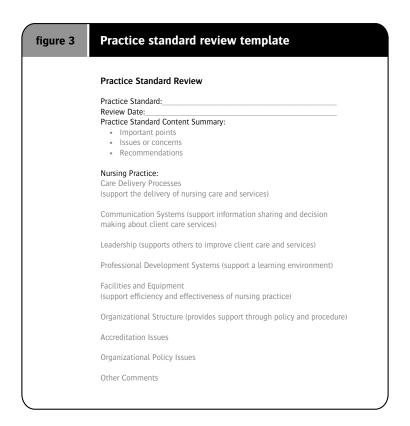
The first meeting was held off site, with lunch provided. A draft vision, metaphor, goals, objectives and terms of reference were presented and reviewed. Several changes and additions were made and, following consensus, they were accepted. The final outcomes are presented in Figures 1 and 2, respectively. The group decided on a rotating chair. Meetings were scheduled monthly for the year, and ongoing membership criteria were included within the terms of reference.

Professional Council models found during the literature search were presented and reviewed. All models were hospital based. While several closely represented the council's vision, a new model was drafted to accommodate the public health nature of the organization. A decision was made to work with a model for one year, then revise and update it prior to formal acceptance.

### **Positive Outcomes**

One objective of the NPPC was to assess current professional practice within the organization. Therefore, the council decided to review the standards of the College of Nurses of Ontario (2004) individually as its first official task. A framework (Figure 3) was developed to ensure consistency of the reviews. The process was discussed; each member agreed to read the standard, complete the review frame-

work and prepare to discuss concerns and practice recommendations during the following meeting. The chair of each meeting assumed responsibility to choose the practice standard, compile the group's discussions and recommendations into one document and post it on the organization's intranet. Recommendations requiring policy changes were forwarded to the nursing director for follow-up, discussion and approval at the management level.



To date, the following practice standards have been reviewed, with recommendations made for nursing practice and implementation of practice changes begun: Confidentiality and Privacy, Documentation, Telephone Practice, Culturally Sensitive Care and Ethics. Following each meeting, the nursing staff were updated regarding the standard reviewed. Missing practice pieces were implemented immediately, and policies were drafted or revised as required.

Communication within the organization has improved with the introduction of the NPPC. Nurses have expressed increased awareness of professional practice; conversations regarding evidence-based practice and best practice guidelines are now commonplace. One work team has successfully implemented a journal club that meets monthly over the lunch hour. Union—management meetings are more productive and remain focused on issues relating to the collective agreement. Other employees within the organization are looking at practice issues specific to their professions, an outcome not anticipated at the inception of this project.

The valuing, supporting and empowering of nurses continue to be the vision of the NPPC. Nurses are expressing and demonstrating increased knowledge and feelings of empowerment when recommendations for professional practice changes are incorporated into nursing practice. It would be remiss to assume that the development of the NPPC has been without difficulties and lessons learned. Working through the difficulties proved important for the ongoing success of the council.

### **Challenges and Recommendations**

The development of a Nursing Professional Practice Council was never identified as a need within the organization by front-line nurses. Early communication with staff, especially the union executive, would alleviate initial hesitation regarding council development and some of the collegial jealousy experienced by nurses not selected for the first council. Explanation regarding rotation of council membership has helped; several nurses have now expressed a desire to be considered when membership changes.

Nursing professional practice issues are complex and require dedicated staff time for assigned tasks to be completed. Ensuring that all front-line managers were aware of the importance of the NPPC and of the necessary staff time provided the opportunity for nurses to work on council business during their workday.

Any newly formed project team experiences initial momentum. Keeping the enthusiasm going by focusing on important, current nursing issues along with the decision to have a rotating chair created team empowerment unprecedented within the organization. Timely follow-through from council recommendations to practice implementation ensured the council's credibility and management's commitment to a professional practice environment.

### Conclusion

Nursing Professional Practice Councils can be successfully developed and implemented in organizations. Nurses and nurse managers can work together as nurses towards a common goal. Although further research is required to document the relationship between NPPCs and positive outcomes for nurses, clients and organizations, the benefits experienced in the first few months of this NPPC far outweigh the costs to the organization.

"Imagine... Nursing Profes

Nursing Professional Practice

Make it a reality in every organization!"

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