

Describing the contribution and value of Public Health Nurses to health system outcomes

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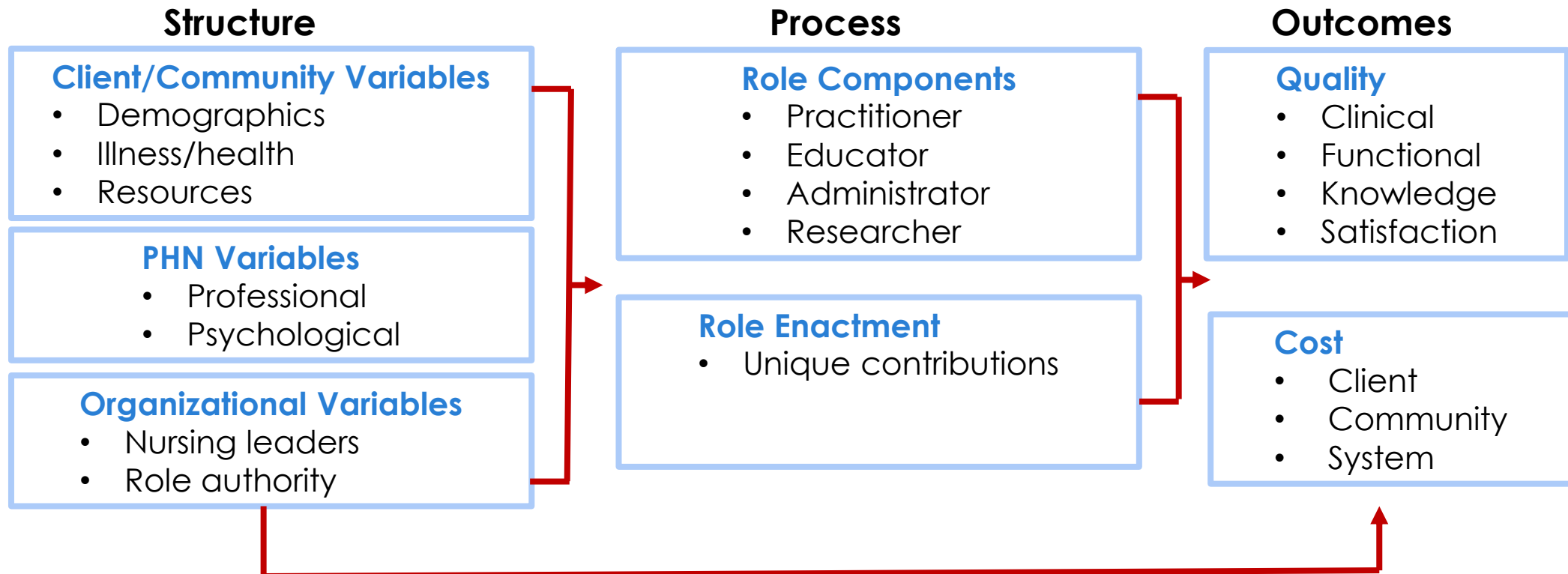
The Ontario Association of Public Health Nursing Leaders
Leading the Way for Public Health Nursing

Background

- Largest group within the public health workforce, better utilization of PHNs would optimize the financial investment (NHSRU, 2009)
- PHN vulnerability to replacement by less expensive practitioners (National Advisory Council on Nurse Education and Practice, 2013)
- Many aspects of PHN practice are invisible and need to be made explicit (Royal College of Nursing, 2016)
- Paucity of literature on PHN outcomes

Conceptual Framework

Adapted Role Effectiveness Model (Sidani & Irvine, 1999)



Study Overview

- **Purpose:** describe the value of PHNs to health system outcomes by capturing the perspectives of PHNs and Nursing Leaders
- **Methods:** qualitative cross-sectional design, individual telephone interviews (45-60 min.)
- **Sample :** member CHNIG/OPHNL, ≥ 2 years experience
- **Analysis plan:** conventional content analysis

Descriptive results

PHNs=22

Region:

Central East = 10

Eastern = 2

Central West = 4

South West = 3

Northern = 3

Program:

Infectious Disease = 2

Family Health = 6

Chronic Disease = 4

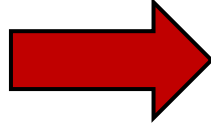
Other = 10

Mean years experience = 19.6

Results

Unique Contributions and Value

Advocacy



Navigation

Nursing knowledge base

Health promotion and prevention

Collaboration

Putting the pieces together

- Influence all levels of policy (micro, meso, macro) to promote access, decrease barriers and increase resources
- the voice of the client and community

...bringing information to decision makers to say yes this is an issue, yes we should be doing this...

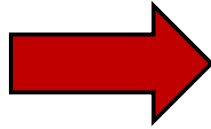
...you need to know what is in the heart of the people and what their voices are...

Results

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- Navigate the system for vulnerable and marginalized populations
- Reaching out
- Manage complexity and apply social determinants of health (SDOH)

Especially for our refugees, we do a lot of interpreting, navigating the system.

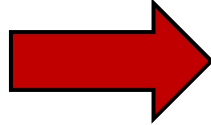
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Putting the pieces together

Nursing Lens/Skill Set

- Real world perspective, knowledge of the community, their voice
- The 'Big Picture': holism, comprehensive, understand the complexity
- Caring and therapeutic relationships
- Responsive to client's needs
- Experts in the field

Nursing is the right profession to be handling some of these situations (sexual health) where it requires time, it requires listening and the patience to extrapolate from someone what is bothering them.

Results

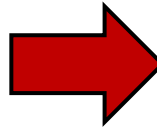
Unique Contributions and Value

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Collaboration

Putting the pieces together

- Primary and secondary prevention
- Implementing and informing health policy
- Reducing the burden of disease for families and the system
- Partnerships
- Support in the most effective way, tools for life

We are out there protecting the health of populations and communities.

Results

Unique Contributions and Value

Advocacy

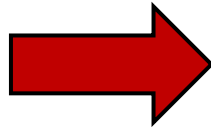
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Putting the pieces together



We bring the large lens that community piece, being able to work with community partners, working well with others, that collaborative model, that's what we do very well.

- Working with agencies/partners and other disciplines internally and externally
- Consultant and subject matter expert to support public health policy implementation
- Expedite client service needs

Results

Unique Contributions and Value

Advocacy

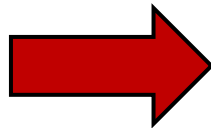
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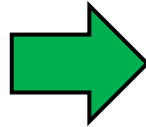
...putting the pieces together that don't look related...

- Work with vulnerable/marginalized clients who would otherwise fall through the gaps
- Looking across the layers from individual to community and population
- Making sure everything is covered
- Understand the complexity

Results

Outcomes

Outputs: Process indicators



Outcomes: Program-specific

Self development

Challenges to measurement

- Monitoring metrics, work driven by targets
- Shows a small fragment of what we do

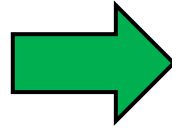
We get our monthly information on the number of cases, trends within, and number of screenings that we've done, the number of people served, we're always kept in the loop.

Results

Outcomes

Outputs: Process indicators

Outcomes: Program-specific



Self development

Challenges to measurement

- Awareness and behaviour change
- Client experience along the journey: client satisfaction, goals met
- Stopping the spread of disease
- Reducing costs to the health care system

I know I am changing the trajectory for a lot of kids and how they are achieving their milestones and their development.

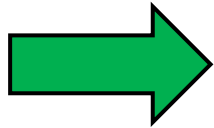
Results

Outcomes

Outputs: Process indicators

Outcomes: Program-specific

Self development



Challenges to measurement

Using a reflective practice framework,
having time to actually examine what
the PHN is doing in their home visiting
....what is going on within the family
....it's not only about the numbers...

- Reflective practice framework
- Personal learning goals
- PHN competency performance

Results

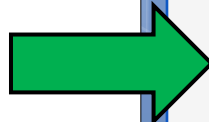
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Outcomes: Program-specific

Self development

Challenges to measurement



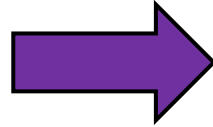
We see outcomes at the end of the program if they have achieved their goals but we don't actually see change unless it was a huge change.

- Difficult to measure impact in public health
- Long term outcomes needed
- Feedback might be verbal
- Value of PHNs is immeasurable

Results

Facilitators

Autonomy



Professional development

Teamwork

Nurse Leaders

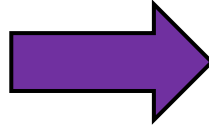
Having autonomy is really important as a nurse, to be able to serve your community really well.

Results

Facilitators

Autonomy

Professional development



Teamwork

Nurse Leaders

- Opportunities for leadership development and growth

....broadened the definition of nursing development away from just clinical development or nursing-specific topic into more development around professional practice

Results

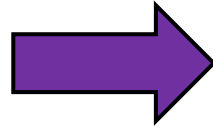
Facilitators

Autonomy

Professional development

Teamwork

Nurse Leaders



Being able to access your own colleagues, and checking in with them, and being able to just have an informal chat about a case...knowing we are not alone, it's a team effort.

- Strong team orientation
- Shared workload
- Consult and share expertise

Results

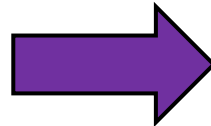
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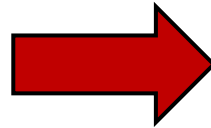
They understand what we are doing so the ability to have the creativity and autonomy to do things is really important, because every school or workplace is different.

- Nursing knowledge base and experience
- Advocacy
- Sitting at the table, well connected
- Manager support and access

Results

Barriers

Time and resources



Outside of our control

Shifting priorities

Role not understood

- Competing priorities
- Nature of the work
- Funding and human resources

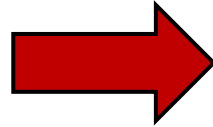
Well the big one is money and funding and human resources. That always seems to be decreasing. I guess that has to do with how we are funded and the politics of that funding and where our priorities are.

Results

Barriers

Time and resources

Outside of our control



Shifting priorities

Role not understood

- Multiple levels of approval

When you want to make something happen or make a change, it takes some time, there are many people who need to look at it before approving it...hard to respond in real life when you have these processes.

Results

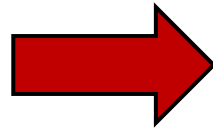
Barriers

Time and resources

Outside of our control

Shifting priorities

Role not understood



- Changing political system influences work priorities and resources
- Community or agency readiness
- Organizational restructuring

We are influenced by the political climate at the time. As you get a new group – do they really know what you do? Some things we were doing actively were pulled back because they weren't familiar with it.

Results

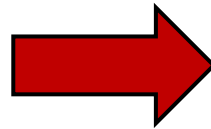
Barriers

Time and resources

Outside of our control

Shifting priorities

Role not understood



Not everyone really knows exactly what public health nursing or home visiting is. Our families are very vulnerable.

- RNAO, CNO not understand PHN practice
- Stakeholders not aware you are a nurse

Summary

Structure

Client/Community Variables

- Demographics, illness/health, resources

PHN Variables

- Professional, psychological

Organizational Variables

- Nursing leaders
- Autonomy
- Professional development
- Teamwork
- Shifting priorities
- Time and resources
- Lack of control
- Role not understood

Process

Role Components

Unique contributions:

- Advocacy
- Navigation
- Nursing knowledge base
- Health promotion and prevention
- Collaboration
- Putting the pieces together

Role Enactment

Outcomes

Quality

- Outputs:
Process indicators
- Outcomes:
Program-specific
- Self development

Cost

- Client
- Community
- System



For consideration

- Strategies to communicate role and unique contributions to various audiences (public, other disciplines, partners)
- Capture and communicate impact of programs/services staffed primarily by PHNs

Next Steps

- Complete data analysis
- Knowledge translation dialogue (OPHNL – Nov. 2017)
- Formulate action strategies and research agenda

