

Nursing Health Services Research Unit

a collaborative project of
the University of Toronto
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Faculty of Nursing and
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research that focuses on:

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Best Practice Guidelines in Long-Term Care Phase 1: A Process Evaluation Fact Sheet I of II. OVERVIEW & METHODS

This fact sheet (I of II) is part of a series which presents selected content from a report produced for the Ontario Ministry of Health & Long Term-Care (MOHLTC) entitled, *Promoting Awareness & Uptake of Best Practice Guidelines in Long-Term Care: A Process Evaluation- Summary of Phase 1 Findings*. The full report is available online at www.nhsru.com

INTRODUCTION

In 2005, the MOHLTC announced funding for an initiative to promote the dissemination & uptake of nursing Best Practice Guidelines (BPGs) in the long term care (LTC) sector; to advance awareness & uptake of BPGs in long term care facilities, and to enhance care for seniors in Ontario.

Best Practice Guidelines are:

- Systematically developed evidence based statements to assist with decisions about appropriate health care.
- Resource tools for assessing current practices, developing policies, procedures, protocols, educational programs, quality standards etc.
- Examples include falls prevention, pain management, continence & skin care, & pressure ulcer management.

The Best Practice Guidelines Coordinator Initiative

- In July 2005, 8 regional BPG Coordinators were hired for a 3 year project & allocated to one of 7 geographical regions in Ontario.
- Each Coordinator was assigned to a 'host' LTC facility which acted as a base for their outreach activities.
- Strategies used for the Coordinators' orientation & understanding included: RNAO Summer BPG Institute in 2005, RNAO BPG Champion Workshops, site orientation, networking with other Coordinators including previous Coordinators, & host agencies providing links to key regional contacts.
- The role varies by region & continues to evolve as Coordinators assess the needs of the homes within their regions.

Role of BPG Coordinators

- Initiate activities in their region to raise awareness & engage LTC homes in the implementation of BPGs based on resident needs.
- Strategies employed by the coordinators included sharing information & resources related to BPG implementation or facilitating meetings for networking & updates on the BPG initiative.
- Activities to increase BPG uptake included developing a formalized process for implementing BPGs & conducting workshops & educational programs.

NHSRU STUDY –OVERVIEW

In February, 2006, the Nursing Health Services Research Unit (NHSRU), University of Toronto site, was asked by the MOHLTC to conduct a process evaluation of the BPG Coordinator initiative. The study entitled "*Promoting Awareness & Uptake of Best Practice Guidelines in Long-Term Care*" was a two phase study involving data collection at three points in time between 2005 & 2007.

PHASE 1 STUDY PURPOSE & OBJECTIVES

Phase 1 was designed to determine the progress of the initiative to date. Phase 2 included data collection points to examine the impact of the initiative at the organizational (LTC home) level. The purpose of Phase 1 was to conduct a process evaluation of the Best Practice Guidelines in Long Term Care initiative.

The specific objectives for Phase 1 were:

1. To determine the progress of the BPG LTC project to date. For example, how are the BPG Coordinators progressing in their roles? How many sites have implemented BPGs? What are the factors that enable their work? What are the factors that make their work challenging?
2. To solicit feedback from stakeholders in regards to the process of implementing the BPG Coordinator role (i.e. BPG Coordinators, Directors of Care (DOCs) from LTC facilities, RNAO Project Manager & the MOHLTC Project Liaison).

METHODS

- Interviews with key project stakeholders: BPG Coordinators, DOCs, RNAO Project Manager, & MOHLTC Project Liaison.
- Review BPG Coordinator Regional Plans
- Analysis of the interview data consisting of both quantitative (SPSS analysis) & qualitative (NVIVO) techniques
- Synthesis of the findings.

Study Recruitment

1. **BPG Coordinators.** Letters were sent to the 8 regional BPG Coordinators inviting them to participate in the study. The letters outlined the purpose of the research & invited their participation, which was noted to be voluntary. 7 out of 8 BPG Coordinators participated in the Phase 1 interviews.
2. **DOCs.** During the BPG Coordinator interviews, each coordinator was asked to identify two facilities within their region that were actively involved in the project & two facilities that were not actively involved. The DOCs from those four named facilities were then approached & invited to participate in an interview. A variety of challenges were encountered when trying to recruit DOCs who were willing to participate in the interviews. 13 DOCS from active LTC facilities & 3 DOCs from non-active LTC Facilities participated.
3. **Project Managers.** The RNAO Project Manager & the MOHLTC Project Liaison were sent letters inviting them to participate in the study. Both agreed to participate & the interviews were conducted by phone.