

Creating Healthy Work Environments 2019

A New Way to Look at the Professional Practice Environment

Sandra L. Siedlecki, PhD

Office of Nursing Research and Innovation, Cleveland Clinic, Cleveland, OH, USA

Everyone in healthcare worries about the impact the professional practice environment has on patient care (Stimpfel, Rosen, & McHugh, 2015) and nurse satisfaction (Lambrou, Merkouris, Middleton, & Papastavrou, 2014); and many leaders have tried to develop policies and procedures to eliminate the bad behavior of those who practice within the healthcare environment. However, most investigators have been preoccupied with elimination of poor behavior (Rosenstein & O'Daniel, 2005) and have failed to look at those things that make a positive impact on the environment (Siedlecki & Hixson, 2015). The professional practice environment has been implicated in a number of untoward or adverse events (medication errors, wrong site surgeries, and failure to rescue), suggesting that both safety and quality of care is dependent upon characteristics of the environment where patients and their families are being cared for (Rosenstein & O'Daniel, 2005; Stimpfel et al., 2015). It is time to look beyond bad behavior and begin to look at characteristics that demonstrate a positive practice environment (Siedlecki & Hixson, 2015).

Purpose: The presenter will share with the audience information gleaned from several studies that used the Positive Professional Practice Assessment Scale (PPEASE). She will include information about the development and psychometric evaluation of PPEAS, including its theoretical underpinnings that take into account the diversity of healthcare services as provided in all parts of the world (Siedlecki & Hixson, 2011). In addition, the presenter will share with the audience ways to use the tool to monitor environmental quality and to track changes (improvements) in the environment over time.

Methods: The presenter will assist attendees as they rethink ways to enhance the professional practice environment, and demonstrate how to assess the impact of these new ideas using the Positive Professional Practice Environment Scale (PPEAS).

The PPEASE is useful in diverse cultures and countries. The theoretical underpinnings of the PPEAS is based on the premise that the practice environment is the place where both medical and nursing care take place; and that perceptions of both groups is a good indicator of the overall quality of the practice environment (Lambrou et al., 2014). The professional practice environment is unique to each organization, country, civilization, and/or time. The practice environment is affected by the historical development of both nursing and medicine as well as societal norms (Siedlecki & Hixson, 2011). Because of this, time (past, present, or future) and location (country or civilization) will impact both the practice environment and the behaviors of those who work in that environment. The model for the PPEAS is based upon the assumption that a positive professional practice environment is more than and different from the absence of disruptive, rude, disrespectful or abusive behavior (Siedlecki & Hixson). According to this model, the quality of the professional practice environment can be assessed by exploring perceptions of the presence of mutual respect, communication, and collaboration between nurses and physicians.

The PPEAS (Siedlecki & Hixson) is a 13-item scale that assesses both nurse and physician perceptions of the same environment at the same time. The overall quality of the professional practice environment is assessed by summing the score on the 13-items, which are rated each on a scale of 1 to 10. Higher scores indicate a more positive impression of the practice environment. Construct validity was established through principle component analysis with varimax rotation that confirmed a four-factor solution explaining 72% of the variance. Internal consistency for the PPEAS was confirmed with Cronbach's alpha of .856 for the nurse group and .842 for the physician group.

Implications for practice: Exploring factors that impact an organization (historical and societal) the audience can discuss ways to enhance their practice environment and think about ways to monitor the health and well-being of the environment where care is given and received.

Title:

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Keywords:

Nurse-physician relationships, Practice Environment and Practice Environment Assessment

References:

Lambrou, P., Merkouris, A., Middleton, N., & Papastavrou, E. (2014). Nurses' perceptions of their professional practice environment in relation to job satisfaction: a review of quantitative studies. *Health Science Journal*, 8(3), 298-317.

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Abstract Summary:

The presenter explores a new way to look at the professional practice environment where nursing and medical care is delivered. She believes that relationships drive the culture of the practice environment; and that a positive environment is more than and different from just the absence of bad behavior.

Content Outline:

Outline

1. Introduction
 1. A new Look at the Professional Practice Environment through the eyes of doctors and nurses
 2. Theoretical Underpinnings
 1. Historical development of professions
 1. Development of nursing and medicine in the US
 2. Development of nursing an medicine around the world
 2. Societal influences and expectations
 1. The role of women in society
 2. Gender bias
 3. Cultural influences on society
 3. Nurse-physician perceptions
 1. Differences
 1. Doctors see the environment in a more positive light than do nurses
 2. Doctors see collaboration as nursing job
 2. Similarities

1. Both nurses and physicians report being fearful of each other
 2. Both nurses and physicians have similar beliefs about the impact of the practice environment on patient outcomes
 - 3.
2. Conclusions
1. Advantages of the PPEAS for assessment of environment
 1. Short and easy to use in multiple formats
 2. Valid & reliable in both nurse & physician groups
 2. Assessing change over time using the PPEAS
 1. Before and after implementation of changes to enhance the environment
 2. Quarterly or yearly monitoring

First Primary Presenting Author

Primary Presenting Author

Sandra L. Siedlecki, PhD
 Cleveland Clinic
 Office of Nursing Research and Innovation
 Senior Nurse Scientist
 Cleveland OH
 USA

Professional Experience: 2005-present Senior Nurse Scientist and APRN-CNS @ Cleveland Clinic- Research consultant for nurse/physician practice group (responsible for the development and testing of the PPEAS); Guest Speaker at Lerner College of medicine, where I teach research methods courses; Contributing faculty Walden University where I teach in the leadership Track in the College of health Sciences 1995-2005 Faculty at the University of Akron, taught undergraduate and graduate level courses in research, education, leadership, and critical care 1986-2005 PRN nurse in critical care and ED/Trauma at Kaiser Permanente

Author Summary: Dr. Siedlecki is a senior nurse scientist at the Cleveland Clinic, in Cleveland Ohio. As a researcher she maintains her own program of research and mentors others who are interested in becoming researchers. She has presented over 80 times in the past decade at national and international events and conferences. In addition Dr. Siedlecki, has published over 30 peer reviewed professional article, 4 book chapters, and 2 books.

Any relevant financial relationships? Yes

Relationship	Description of Potential Conflict
Royalty	I own the copyright for the PPEAS tool and may receive royalties