Sigma's 30th International Nursing Research Congress Assessing the Alberta Professional Responsibility Concern (PRC) Process: Perceptions of Managers and Front-Line Nurses Christy Raymond, PhD, MEd, RN

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The primary purpose of this study is to examine point of care, or front-line nurses', and managers' perceptions of, and engagement with, the Professional Responsibility Concern (PRC) process in Covenant Health, across multiple care sites in Alberta, Canada. The PRC process is a platform in Alberta for nurses, embedded in their collective agreements, to formally advocate for quality and safe patient care, in collaboration with management, to promote a safe and effective work environment (Smith, 2015). This project will help provide insight on the perceptions, engagement, and collaboration of front-line nurses and managers regarding the PRC process to better understand the general milieu surrounding its current implementation. This prospective cohort design study is using pre and post surveys to measure both managers and front-line nurses' perceptions of and experiences with the PRC process over a 12-month period (February 2018-February 2019), during which time a formal collaborative effort from key administrators in Covenant Health and the United Nurses of Alberta (UNA) nursing union provided education sessions about the PRC process and recent changes to that process. The following overall question guides this study: How do nurses and managers in Covenant Health sites in Alberta engage, perceive, and collaborate in the Professional Responsibility Concern (PRC) process? Significance - Most provinces in Canada have PRC language or similar provisions within nursing collective agreements that allow nurses to report patient safety and other quality of care concerns; however, there has been no formal research of these processes to date, of which we are aware. Nurses are a significant part of the professional health care provider team and find themselves in situations that may present risks to care, for those they serve. As such, they need an avenue to raise their concerns in a collaborative and problem solving forum to prevent ongoing or future risk to patients and families. As well, literature examining ways nurses' and managers collaboratively engage in facilitating safe patient care environments, is not evident. Perceptions of the current process need to be known in order to strengthen the innovative work underway in Alberta. By knowing how the milieu is changing, more targeted development initiatives can be implemented, and results shared, to advance this work internationally. Findings from this study will highlight the leading efforts in Alberta to study and improve nurses and managers capabilities to foster environments that provide positive work environments for staff and enhance safe patient care.

Methods:

The design of this study is a prospective cohort design using time one and time two pre and post-tests with pre-survey participants and post-survey participants as the two cohorts. A prospective cohort design compares a cohort, or a group of individuals, who share similar characteristic with another group over a period of time. Surveys for both times one and two were delivered using an online platform, REDCap, at the University of Alberta. The survey consisted of Likert style and short answer items, asking researcher created and advisory committee vetted, questions related to familiarity with terms, engagement in and perceptions of the PRC process. A separate survey was created for nurses and managers, reflecting their different roles in the PRC process. At this

time, the study is currently gathering data from both nurses and managers, using the time two or post surveys. Sampling and Recruitment – After obtaining both ethics and operational approvals, both managers/administrators and nurses who are employees of Covenant Health were invited to participate in the pre-survey. Nurses need to be affiliated with the United Nurses of Alberta to participate, which means both Registered Nurses (RNs) and some Registered Psychiatric Nurses (RPNs) are included in the sampling frame. Emails were sent by the employer to applicable managers, who were then asked to forward emails to their nurses. Nurse participants also received the study invitation through available union (UNA) communication channels. Survey reminders are sent out twice more using a modified Dillman method to increase participation rates. Analysis – Likert responses for time one and time two will be gathered, cleaned and analyzed using descriptive statistics. Some correlations between responses and demographic information may be possible, dependent of the number of responses. Demographic data will be compared between times one and two to evaluate similarity and comparability of cohorts. Individual tracking of participants over time was not possible given privacy policies. Should the two cohorts be statistically comparable, more advanced multivariate statistics can be done to test significant changes over time. Short answer responses will be collated and analyzed for frequently of responses and main themes.

Results:

This poster presentation will present the full survey results from this study, specifically the respondent perceptions of the PRC process and whether there was any change to the overall responses over time. The context of the process, specifically key elements in Alberta, will be offered to situate the results in the complex and unique landscape of Alberta nursing. Lessons learned from this pilot study will be shared, illuminating how a larger study across Canada might explore how processes are implemented beyond Alberta.

Conclusion:

The study addresses a key process underway in Alberta whereby nurses and managers have a platform to raise and address issues in their workplace that impact patient care. There is growing interest in this process as a key initiative to address nurses' accountability and professional responsibility to advocate for safe care environments. The collaboration between union representatives (UNA) and employers (Covenant Health) is a key partnership that is often not seen elsewhere. This collaboration has fostered a united message whereby both employer, union and employees (nurses) strongly support mechanisms for promoting nurse professional responsibility in identifying contextual factors that impede safe nursing care and optimal patient outcomes. Results from this study will highlight this unique platform and offer areas in which it could be further developed. Results will also be of interest to other contexts interested in ways to promote professional responsibility amongst nurses.

Title:

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Keywords:

Patient Safety, Professional Responsibility Concerns and Safe Nursing Care Environments

References:

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Abstract Summary:

An exciting poster highlighting important work on the Professional Responsibility Concern (PRC) process in Alberta. Results from a prospective cohort design study, highlighting managers' and front-line nurses' perceptions of, and engagement with, the process, are presented. Lessons learned and recommendations for future work, will be highlighted.

Content Outline:

The poster will have the following sections:

- 1. Background/Context
- 1. Importance of nurses' professional responsibility in Canada and Alberta
- 2. PRC history and development
- 3. Collaborative partnership formation history and importance (UNA and Covenant Health)
 - 2. Importance
- 1. Need to know more about the process and impact on creating safe work environments
- 2. Limited research in this area
- 3. Limited work in this area nationally and internationally
 - 3. Methods
- 1. prospective cohort study design: choice and rationale
- 2. sampling methods and rationale survey design methods and challenges
- 3. data collection methods and process
 - 4. Results
- 1. time one survey results Likert responses and open ended comments
- 2. time two survey results Likert responses and open ended comments
- 3. comparison of time one and two results and whether this was procedurally possible
 - 5. Conclusions
- 1. significant results presented in context (TBD)
 - 6. Recommendations and Lessons Learned
- 1. recommendations for practice, education and further research
- 2. lessons learned from the study to help others researching or developing processes in this area Contact details for the researcher will be provided at the bottom of the poster

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Author Summary: Dr. Christy Raymond has extensive experience in nursing education, both teaching and researching in the areas of nursing education, critical thinking, leadership and work environments. Christy has a passion for fostering excellence in nursing education and nursing practice, evidenced by her work on fostering safe patient care environments and positive patient outcomes.

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Author Summary: Raechelle is passionate about nursing care and safe nursing care environments. As an honors student, Raechelle's work was based on investigating the Professional Responsibility Concern process.