

## Evaluating and Monitoring this Guideline

Organizations implementing the recommendations in *Intra-professional Collaborative Practice among Nurses* are encouraged to consider how to monitor and evaluate the implementation and its impact. Table 2 is based on a framework outlined in the *Toolkit: Implementation of Best Practice Guidelines (2<sup>nd</sup> ed.)*, (RNAO, 2012) and illustrates some specific indicators for monitoring and evaluation of this guideline.

Once these guidelines are successfully implemented, organizations will have a healthy workplace environment that supports all staff, from the front line to leadership. All units will have strong governance models that support the manager, charge nurse, front-line staff and students. All staff and students will feel they have equal input into discussions, and all will feel respected while working collaboratively with each other.

**Table 2. Example of Indicators for Evaluating and Monitoring this Guideline**

LEVEL OF INDICATOR	STRUCTURE	PROCESS	OUTCOME
Objective	These indicators refer to the supports and resources required for a health system or health service organization to enable the successful implementation of the Guideline, <i>Intra-professional Collaborative Practice among Nurses</i> .	These indicators evaluate whether best practices directed at the education, training, and practice of health-care professionals to improve intra-professional collaborative practice have been implemented.	These indicators evaluate the impact of implementing the Guideline recommendations on health-care organizations, health care professionals, and client outcomes.

LEVEL OF INDICATOR	STRUCTURE	PROCESS	OUTCOME
<p>Organization/ Unit</p>	<p>System-wide integration of policies consistent with best practices related in intra-professional collaborative practice.</p>	<p>Specific organizational initiatives to establish and implement the following educational programs to nursing staff:</p> <ul style="list-style-type: none"> <li>■ Conflict management</li> <li>■ Team building</li> <li>■ Mentorship</li> <li>■ Preceptorship</li> </ul>	<p>Nurses report satisfaction with education and training received related to intra-professional practice.</p> <p>Nurses are able to articulate the principles and components of effective intra-professional collaborative practice.</p> <p>Nurses' report increased participation in intra-professional collaboration.</p> <p>Percentage of nurses who attend continuing education/training session related to conflict management; mentorship; team building and preceptorship.</p>
	<p>The organization adopts and implements policies and procedures that support and are consistent with Guideline recommendations.</p>	<p>Pre and post guideline implementation of staff and patient satisfaction are measured.</p>	<p>Outcomes such as high quality care, demonstration of intra-professional competencies are evident and measureable through patient and staff satisfaction surveys.</p>
	<p>Organizations integrate technology to facilitate access to information, and the exchange of information across organizations.</p>	<p>Ongoing monitoring of effects of intra-professional collaboration processes, resources.</p>	<p>Percentage of clients who are satisfied with the care provided by their intra-professional team.</p>

LEVEL OF INDICATOR	STRUCTURE	PROCESS	OUTCOME
	Organizations support Professionals working to full scope of practice.	Organizations establish Shared governance committees.  Workload measurement tools are in place and utilized appropriately	Absenteeism rates in nursing staff.  Sick time in nursing staff.  Turnover rates in nursing staff.
	Availability of education and supports for the six domains of interprofessional competencies:  1. Care expertise 2. Shared power 3. Collaborative leadership 4. Optimizing professional/role/ scope 5. Shared decision making 6. Effective group functioning	Each of the 6 domains are measured by individuals and assessed at performance appraisals, through the use of an inventory of quantitative tools measuring collaborative practice outcomes.	Individual in all roles demonstrate competencies in communication and quality of care as measured through patient and staff surveys.
	Organizations utilize a <u>Nursing Work Index Scale</u> , to measure role ambiguity/clarity and control over practice.	Results re role ambiguity/clarity and control over practice is measured and shared with staff.	A plan is developed to address outcomes of nursing work index scale.

LEVEL OF INDICATOR	STRUCTURE	PROCESS	OUTCOME
Patient/ Client	High quality care plans are in place, shared and monitored by and with the intra-professional collaborative team member responsible for the patient/client.	Ongoing monitoring of care processes directed by the care plan.  Patient/client is provided with and educated on feedback process for care provided.	Process is in place for patients and staff to provide feedback on intra-professional collaborative practice.  Percentage of clients who are satisfied with the care provided by their intra-professional practitioner.
Financial	Availability of adequate financial resources to support and implement Guideline recommendations.		Demonstrated cost-efficiency and effectiveness through: <ul style="list-style-type: none"> <li>■ Recruitment and retention cost savings</li> <li>■ Sick time cost savings</li> <li>■ Overtime cost savings</li> </ul>

RECOMMENDATIONS

