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Original Article

A qualitative study of nurse practitioner promotion of interprofessional care across institutional settings: Perspectives from different healthcare professionals



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ABSTRACT

Objective: Interprofessional care, an aim of institutional healthcare settings globally, promotes safe, cost-effective, quality care. How professionals act to enable interprofessional care has not been described. The nurse practitioner role, with its expertise in both medicine and nursing, is known to enhance collaboration and promote interprofessional care delivery. The objective of this study was to identify, from the healthcare professionals' perspective, nurse practitioner strategies used to enhance interprofessional care.

Method: A hermeneutic phenomenology design was employed. Healthcare professionals from acute care hospitals and associated long-term care residences (n = 6) in one Canadian province were invited to participate. Individual interviews were held with healthcare professionals (n = 52) who regularly work with a nurse practitioner. The participants were asked to share experiences that held significance or value in promoting interprofessional care.

Results: Four valued role attributes were identified; consistent role presence, time to focus on the patient, effective communication, and respectful centrality. Identified strategies extending from the attributes included knowledge sharing, respectful negotiation, identifying patient issues, being open and transparent, listening to opinions, bridging professions, and working as the hub of the group. Multiple types of interprofessional relationships were perceived, with the hierarchical type as the most common.

Conclusions: Nurse practitioners in acute care hospital and long-term care settings have valued attributes that can promote interprofessional care. Effective strategies to promote interprofessional care emerge from these role attributes. However, the interprofessional

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relationship type perceived could enhance or impede the contribution of the strategies to interprofessional care promotion.

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1. Introduction

Interprofessional (IP) care is comprehensive healthcare delivered by multiple professionals engaged in partnerships and collaboration to enhance care quality [1]. A number of studies suggest effective IP collaboration results in high-quality and cost-effective IP care delivery [e.g. [2,3,4]]. While there have been conceptualizations of IP care in the literature [4–6], only recently have researchers operationalized IP care into six essential elements: interdependence, partnership or collaboration, collective problem-solving, professional relationships, communication, and shared decision-making [7]. Investigation has focused on how teams develop and are enabled to collaborate [8–10]. There is an increasing body of research on teams and teamwork [8,11,12]. However, the strategies through which individuals in institutional health-care settings enable IP care have not been determined.

In this study, the nurse practitioner (NP) role was chosen as a focus because a hallmark of NP practice is sharing expertise (derived from education and legal authority) across two professions, medicine and nursing. It has been proposed that this dualism results in enhanced communication and greater IP collaboration [13]. To investigate this phenomenon, a self-report survey was developed to assess the six essential elements of IP care. The NPs were found to create respectful relationships among professionals, relay information through timely, open, and effective communication, and share decision-making activities to encourage critical discourse supporting a common plan of care. This provides one of the few studies where direct operational activities are described within the context of IP care delivery. Morgan et al. [11], in their integrative review of IP collaborative practice, argue that elements of IP collaboration may not be obvious from self-reports and other approaches to elicit this information must be considered. To address this potential self-report bias in previous work, this current study explored healthcare professionals' (HCP) perspectives of the strategies in which NPs engage to promote IP care within hospitals and long-term care (LTC) residences.

2. Methods

2.1. Study design

A hermeneutic phenomenological approach was employed to ensure the perspectives and meanings of healthcare professionals living the experience of working with the NP role was captured [14]. Interviews with professional colleagues regularly working with NPs in hospitals and LTC residences

were gathered to identify everyday NP strategies and practices experienced by HCPs that held significance and value in promoting the implementation of IP care [14].

2.2. Study aim

The aim of the study was to identify strategies that enhance IP care.

2.3. Setting and sample

Participant recruitment occurred at six hospitals and affiliated LTC residences in different geographic regions of Ontario, Canada. Hospitals were purposefully selected to represent a balance of hospital types (small and large, single and multi-site and community and academic), who employed multiple NPs, and agreed to provide a site lead to assist in recruitment. A purposeful, convenience sample of HCPs was recruited through advertisement within the participating hospitals. Those HCPs with an interest in participating, and worked at least 50% of their time in a program employing a NP, met with a research assistant (RA) to establish an interview time.

2.4. Data collection

Semi-structured interviews were used to collect the HCPs' perspective of what IP meant to them and of their experiences of NP practice strategies related to IP collaboration and care [14]. Individual interviews took place at a time and location convenient to the participant. Participants were invited to describe positive and negative personal experiences of IP practice strategies related to working with NPs and their perception of the resultant care delivery. Interviews averaged 30 minutes to one hour in length and were audio recorded by a RA.

2.5. Data analysis

The audio recorded interviews were explored for perceptions of the term interprofessional, and for themes and exemplars of strategies and contributions to IP care, using an interpretive analysis approach [14]. Thematic exploration was managed with computer software NVivo 10 and consisted of exploring participants' descriptions of their experiences working and interacting with NPs. The emerging interpretation was reviewed by the research team – consisting of nursing and sociology researchers to ensure the emerging analysis was credible and trustworthy [15].

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