

# A National Study of Australian Nurse Practitioners' Organizational Practice Environment

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## ABSTRACT

The nurse practitioner (NP) workforce in Australia plays a vital role in helping the country meet the current demand for health care. Data from Australian NPs using the Nurse Practitioner Primary Care Organizational Climate Questionnaire demonstrated that one-seventh of the overall Australian NP population completed the study. The response was overwhelmingly positive in the area of practice; 71.6% of NPs had no restriction on their practice and felt valued by their organization. The results of this study enable a benchmark for ongoing national evaluations in addition to international comparative data.

**Keywords:** barriers, enablers, health organizations, nurse practitioner, scope of practice

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## INTRODUCTION

Globally, nurse practitioners (NPs) play an integral role within their health care systems. In most countries, the NP provides care to patients throughout all sectors of the health care industry, including primary, acute, and community care settings.<sup>1</sup> These settings may create different climates for NPs to practice and potentially affect their ability to deliver high-quality care. Little is reported globally about NPs' organizational climate within their employment settings or how it promotes or hinders NP practice and affects the expansion of the NP workforce.

In Australia, the NP scope of practice is set by national regulations and legislation governing NP practice and how organizations support the NP role.<sup>2</sup> Organizational climate directly effects NP practice within employment settings in terms of determining the level of collegial interactions between the NP and practicing medical doctors (MD) and the support the NP receives for delivery of care, as well as how visible the NP role is within the organization. Thus, fundamental to the development and ongoing practice of NPs within Australia is the local organizational climate.<sup>2-5</sup>

The organizational climate in which NPs function can determine how the role can be optimally expanded and implemented in the Australian context to ensure patients receive high-quality care from these health care professionals. The purpose of this article is to examine the current organizational climate from the perspective of NPs in Australia.

## BACKGROUND

The first NP was endorsed in Australia in 2000.<sup>6</sup> Since then, more than 1,500 NPs have been educated and endorsed to deliver care in a variety health care settings across Australia.<sup>7</sup> The NP is the most advanced clinical registered nurse (RN) role within Australia, requiring at least a master's in nursing qualification and 5,000 hours of advanced nursing practice to be considered for certification.<sup>2,8</sup> The NP's responsibilities include advanced patient assessment, diagnosis and management of diseases, referral, medication prescribing, and the ordering and interpretation of diagnostic investigations.<sup>9</sup> NPs are predominantly employed within the public health system, and 28% identify with the private sector.<sup>10</sup> The national health workforce data identifies that 46% worked in the hospital setting followed by

13% in the community health sector. In the hospital setting, the majority of NPs hold a clinical appointment in the emergency department (ED).<sup>10-12</sup> The NP workforce helps the country meet the health care needs of millions of its citizens. However, to deliver this level of care requires the support of the organizations that employ NPs. Internationally, organizational climate affects NP practice and is seen as an important aspect in providing efficient care to meet the increasing demands in the delivery of health care.<sup>13,14</sup>

If NPs are optimally supported within their organizations to realize their full potential as health care practitioners, then they will most likely be able to deliver the highest quality care to patients. Internationally, it has been reported that a supportive organizational climate for NPs is seen as an important aspect in advancing NP scope of practice and to meet the demands in contemporary delivery of health care.<sup>3,15-19</sup>

Since 2011, there have been significant changes in the NP practice environment in Australia. These have included the introduction of limited access for NPs to bulk bill via the country's federal government-funded Medicare Benefits Schedule, which allows NPs to access a limited range of federal government-funded services (items) for their patients/clients.<sup>2</sup> In addition, prescribing medication listed for NP use on the national Pharmaceutical Benefits Scheme allows patients/clients to access medications at a government-subsidized cost.<sup>2</sup>

Despite these changes, only 1 other study to date has partially investigated the NP's organizational climate from the perspective of the Australian NP.<sup>5</sup> This mixed-method study reported data from a mixed group of respondents including 89 NPs, 76 nurse unit managers, and 7 nurse policy makers.<sup>5</sup> The study tool in this survey was developed by its authors to address issues in NP practice from multiple viewpoints, not just that of NPs. Thus, large-scale studies are necessary to better understand how NPs are specifically affected by the organizational climate in Australia.

## METHOD

A cross-sectional survey design was used to collect data from a national sample of NPs in Australia via an

online survey. NPs completed a self-report online questionnaire comprising 33 questions. The survey items collected basic demographic information utilizing a tool developed by the 2009 Australian Nurse Practitioner Study project to assist NPs in developing, implementing, and presenting research.<sup>20</sup> The survey also contained the Nurse Practitioner Primary Care Organizational Climate Questionnaire (NP-PCOCQ). The NP-PCOCQ was developed as a NP-specific tool to measure of organizational climate.<sup>21</sup> The tool has strong psychometric properties and has been validated with different NP samples.<sup>22</sup> The participants were asked to respond to the items on NP-PCOCQ using a 4-point Likert scale ranging from *strongly agree* to *strongly disagree* that captured various aspects of the organizational climate such as the relationship NPs have with physicians or administrators, the support they receive for care delivery, and how well NP role is understood within their employment settings. A copy of the survey tool is available from the corresponding author.

## Sample

Nurse practitioners were recruited via the Australian College of Nurse Practitioners (ACNP) membership listings at the time of the survey that comprised 685 full members (NPs) as well as associate members (RNs training to become NPs and others).<sup>23</sup> All members who were listed as endorsed NPs were sent an e-mail invitation to participate in the study. Associate members (non-NPs) were not included in the study. The invitation to participate contained details regarding the study and provided the online link to the study site. The survey was created using Research Suite survey software. Data were collected over a 2-month period between March and May 2016. There were 287 of 685 NPs (30% of the ACNP NP membership) who accessed the survey, with 208 participants completing the survey. Seventy-nine questionnaires were either incomplete or completed by unendorsed NPs, and thus they could not be used in the analysis. Those who were not NPs were identified by their responses.

## Data Analysis

The data were extracted from the Qualtrics survey software and imported in SPSS V23 for statistical

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