Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.

# Professional Practice Attributes Within Public Health Nursing

A thesis presented in partial fulfilment of the requirements for the degree of

Master of Philosophy In Nursing

At Massey University, Turitea
Palmerston North
New Zealand

Chiquita Hansen

2004

### ABSTRACT

Modifiable organisational attributes that reflect a professional nursing practice environment are important determinants of both the experience of people who access health care services and the job satisfaction of nurses who work within health care organisations. Research relating to acute care settings, commonly known as the Magnet phenomenon has made an outstanding contribution to health sector knowledge by identifying features that attract and retain nurses, promote excellence in patient care, and achieve superior patient outcomes. These features have been studied by the Nursing Work Index Revised which measures attributes that reflect a professional nursing practice environment. More recently there has been an interest in the potential applicability of these attributes in the community setting. A recent study surveyed United States home health nurses and New Zealand district nurses to ascertain which of the Nursing Work Index Revised attributes were perceived by them as important to the support of their professional practice. In this study 92% of items previously tested in acute settings were considered important in community settings.

This descriptive study extends the previous work by investigating how another group of primary health care nurses in New Zealand (public health nurses) perceive the importance of specific organisational attributes within their practice setting. The Nursing Work Index Revised was utilised and participants were asked to rate their agreement or disagreement with the importance and presence of 48 attributes on the Nursing Work Index Revised against a 4-point Likert scale. The findings of the study validate the use of the Nursing Work Index Revised as a tool in the community setting. The study's findings, implications for nursing practice, future research and the potential use of this tool to support the development of primary health care nursing in the New Zealand health sector is presented.

### ACKNOWLEDGMENTS

Once I never contemplated I would be completing post-graduate study, let alone writing a thesis. This has only been possible with the support of my family, MidCentral Health work colleagues and my academic supervisors. Firstly I would have 'never survived' post-graduate study without the commitment and positive encouragement of my husband Richard and my two daughters Ali and Ashley (who when I last *really* looked at them, were little girls and now have grown into beautiful teenagers). Secondly I would have never started post-graduate study without the support of MidCentral Health and my many work colleagues and friends, who have inspired me to 'make it'. Thirdly I would have never completed this thesis without my two supervisors, Professor Jenny Carryer and Dr Claire Budge who have both supported and encouraged me to 'keep going'.

"The secret of success is making your vocation your vacation"

Mark Twain.

I wish to acknowledge the public health nurses who took the time to participate in this study, Ann McNicol for her support in agreeing to be a contact for Maori nurses, and to Breast Screening Aotearoa for supplying me with blue pens. In addition I want to acknowledge the following people for the range of data sources provided to me in completing this study. Professor Linda Aiken for her United States hospital data (which was part of a survey funded by a grant - RO1NR 0228), Dr Linda Flynn for her United States home care data (which was funded by a grant from the American Nurses Foundation) and Professor Carryer and Dr Budge for access to their district nurses data.

## TABLE OF CONTENTS

Abstra	acti		
Acknowledgementsii			
Table	of Contentsiii		
List of	Figuresvii		
List of Tablesviii			
Chapte	er 1: Introduction1		
1.1	Background to the Study1		
1.2	Professional Practice Environment3		
1.3	New Zealand Health Sector5		
1.4	Public Health7		
	1.4.1 Public Health Nursing8		
1.5	Primary Health Care12		
	1.5.1 Primary Health Care Nursing14		
1.6	Research Questions17		
1.7	Overview of Thesis17		
1.8	Summary19		
Chapt	er 2: Literature Review21		
2.1	Public Health Nursing21		
2.2	Magnet Hospital Studies24		
2.3	Development of the Original Nursing Work Index25		
2.4	Nursing Work Index Revised Development26		

2.5	NWI-R Sub-scales33
	2.5.1 Autonomy
2.6	Summary40
Chapt	er 3: Study Methods41
3.1	Research Methodology41
3.2	Participant Selection42
0	3.2.1 Data Collection42
3.3	The Survey Questionnaire43
3.4	Data Analysis45
	3.4.1 Quantitative Analysis45
	3.4.2 Qualitative Analysis46
3.5	Ethics47
	3.5.1 Cultural Safety47
	3.5.2 Informed Consent
	3.5.3 Confidentiality48
	3.5.4 Researcher-Participant Relationship48
	3.5.5 Risks and Benefits48
	3.5.6 Dissemination of Results49
3.6	Summary49
Chapt	er 4: Quantitative Results and Discussion50
4.1	Demographics50
4.2	NWI-R Results53
	4.2.1 Ideal Attribute Ratings54

	4.2.2	Actual Attribute Ratings and Comparison to Ideal Ratings57	
4.3	NWI-R Sub-scales		
	4.3.1	Presence and Importance of the NWI-R Sub-Scales63	
	4.3	Autonomy Sub-Scale64	
	4.3	Control Over Practice Sub-Scale65	
	4.3	Nurse-Physician Relationship Sub-Scale66	
	4.3	Leadership Sub-Scale	
	4.3	3.1.5 Education Sub-Scale	
4.4	Sumn	nary 69	
Chapt	er 5: Ç	ualitative Results and Discussion70	
5.1	Organ	isational Attributes not Covered by the NWI-R71	
	5.1.1	Recognition of Speciality Practice71	
	5.1.2	Resources72	
	5.1.3	Networking72	
	5.1.4	Education/Research73	
	5.1.5	Suggested Organisational Attributes73	
5.2 Characteristics of Public Health Nurse Services and Support of Nursing Practice			
	5.2.1	Leadership Category76	
	5.2.2	Orientation/Education Category82	
	5.2.3	Support Category85	
	5.2.4	Recognition Category87	
	5.2.5	Quality Category89	
	5.2.6	Resources Category91	

	5.2.7	Summary of Categories92		
5.3	Employment Setting Preference93			
	5.3.1	Employment Setting Advantages and Disadvantages94		
5.4	Summ	nary104		
Chapter Six:		Discussion and Conclusion105		
6.1	Summary of Findings Relating to Ideal Professional Practice Environment10			
6.2	Implications for Practice107			
	6.2.1	Aligning Nursing Practice with Community Need108		
	6.2.2	Nursing Structures109		
	6.2.3	Integrated Relationships111		
6.3	Implications for Further Research114			
6.4	Limitations of this Study115			
6.5	Concl	uding Statement116		
References117				
Appendix A		Summary Table of Magnet Literature Reviewed129		
Appendix B		Study Questionnaire145		
Appendix C		Study Information Sheet151		
		Response Frequencies for Each Attribute – Actual Environment153		
Appendix E		Response Frequencies for Each Attribute –		

### LIST OF FIGURES

Figure 1.	Organisational attributes, not covered by the NWI- R, which public health nurses identify as being specific to the community setting	71
Figure 2.	Characteristics that make public health nursing services a "good place to practice nursing"	74
Figure 3.	How public health nursing services can support nursing practice	75
Figure 4.	Public health nursing services characteristics and support features categories	75

# List of Tables

Table 1	Number and percentages of public health nurses in each DHB region according to 2003 NCNZ statistics and participants' responses
Table 2	Public health nurses most highly endorsed attributes compared to the NZ district nurses, US home health and US hospital nurses
Table 3	Public health nurses' least endorsed attributes compared to the district nurses, US home health and hospital nurses
Table 4	Differences between reported presence (actual) and importance (ideal) for highly endorsed attributes
Table 5	Differences between reported presence (actual) and importance (ideal) for least endorsed attributes
Table 6	Differences between reported presence (actual) and importance (ideal) for remaining attributes
Table 7	Means, standard deviations and Cronbach's alpha scores for selected sub-scales of this study and other studies
Table 8	The actual and ideal percentage agreements, the difference between agreements of each attribute that makes up the autonomy sub-scale and the overall mean difference

Table 9 The actual and ideal percentage agreements, the difference between agreements of each attribute that makes up the control over practice sub-scale and the overall mean difference

Table 10 The actual and ideal percentage agreements, the difference between agreements of each attribute that makes up the nurse-physician relationship sub-scale and the overall mean difference

Table 11 The actual and ideal percentage agreements, the difference between agreements of each attribute that makes up the leadership sub-scale and the overall mean difference

Table 12 The actual and ideal percentage agreements, the difference between agreements of each attribute that makes up the education sub-scale and the overall mean difference

Table 13 Number and categories of advantages and disadvantages given for each employment option