

# Assessing the Continuing Education Needs of Nurse Practitioners in Rural Ontario

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# Context

## Provincial monitoring of NP education

- a) **CRaNHR**
- b) **NP tracking study**
- c) **Support for continuing education**

# Project Objectives

- **Guide continuing education strategy**
- **Determine perceived needs of NPs**

# Overview

1. Survey
2. Re-analysis of NP tracking study\*
3. Key informant information
4. Literature Review

**\* FOR MORE INFO...**

[www.laurentian.ca/cranhr](http://www.laurentian.ca/cranhr)

# Research Team

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- **Kate Tilleczek, B.Ed., PhD (candidate)**
- **Raymond Pong, PhD**
- **Isabelle Michel, RN, MA**
- **Sandy Lemieux, BA**
- **Mark Richards, BA**

# Key Lessons from Literature

- Both clinical and professional content
- Content defined by current practice context
- Prior learning assessments are useful
- Utilize existing infrastructure and supports
- Enhance networking and mentoring
- Delivery that is flexible, practical and short
- Most satisfied with face-to-face approaches
- Increased comfort with distance technologies

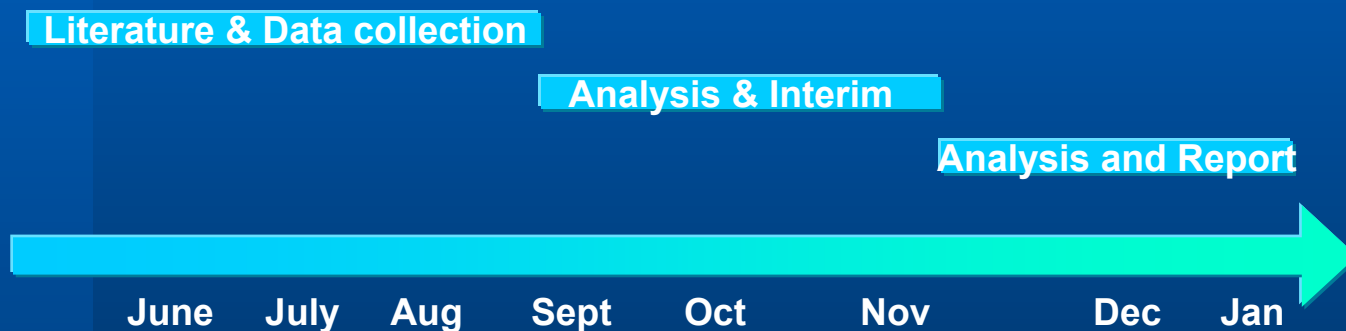
**FOR MORE INFO...**

**See reference section and literature review**

# Procedures

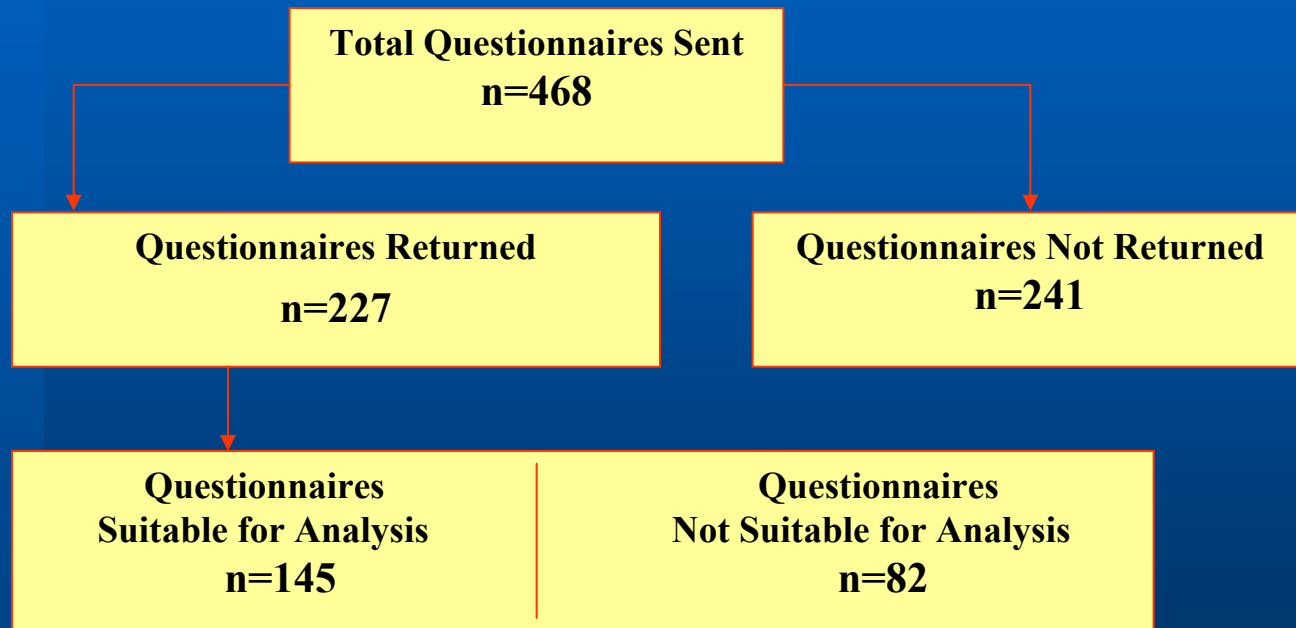
- **Ethics Review**
- **Questionnaire development**
- **Complex Sampling Frame**  
(combined 4 lists and approached Health Canada)
- **Data collection**

# Project Schedule



**See Methods Section**

# Return Rate



# Survey Results

Respondent Profile

Major Health Problems

Key Continuing Education Issues

Content and Modalities

# Geographic Location

## Rural Southern Ontario

**25% (n=36)**

**Mean population 5,030**

## Northern Ontario

**75% (n=109)**

**Urban-(27%)**

**Rural- (46%)**

**Remote- (27%)**

# Practice Settings

	<b>Frequency</b>	<b>Percent</b>
<b>Nursing station/Outpost nurse clinic</b>	34	23%
<b>Community health centre</b>	31	21%
<b>Physician's office/Family practice unit</b>	18	12%
<b>Aboriginal health access centre</b>	17	12%
<b>Other community health agencies</b>	12	8%
<b>Public health unit</b>	9	6%
<b>Long-term care facility</b>	7	5%
<b>Hospital emergency</b>	5	3%
<b>Hospital ambulatory</b>	4	3%
<b>Health service organization</b>	4	3%
<b>Community care access centre</b>	2	1%
<b>Hospital inpatient</b>	2	1%
<b>TOTAL</b>	145	98%***

# Professional Designation

- **59%** (n=85) **RNs(EC)**
- **22%** (n=32) **RNs in FNIHP**
- **19%** (n=27) **RN** expanded role or medical directives

# Clientele

Combination of age groups and health needs.  
Focus on health promotion, disease prevention,  
treatment and health maintenance.

**81%**

# Major Health Problems/Issues

1. **Diabetes (57%)**
2. **Cardiovascular Disease (56%)**
3. **Psycho-social Problems (47%)**
4. **Lack of access to health services (55%)**

# Key Continuing Education Issues

- **Importance**
- **Access**
- **Barriers**

# Importance

- **Virtually all had previous CE experience especially in clinical topics**
- **Virtually all rated CE as highly important**

# Voices

***“Continuing education is critical in maintaining and expanding my professional competence. With the constant development of new treatments and guidelines, it is difficult to stay current without continuing education....”***

***“Both to meet the College of Nurses of Ontario requirements and from a sense of professional responsibility, I feel it is very important”***

# Access and Barriers

## Lack of access

**Only 27% had high levels of access to courses.**

**However, they could access learning technologies**

## Main barriers

- **Distance to travel**
- **Travel costs**
- **Work obligations**
- **Tuition costs**
- **Lack of employer funds**
- **Family obligations**

# Content Area Needs

Clinical  
&  
Professional

# Clinical Content Needs

1. **Drug Prescriptions and interactions**
2. **Interpreting laboratory tests**
3. **Assessment, diagnosis and differential diagnosis**
4. **Advanced counseling skills**
5. **Endocrine health**
6. **Women's health**

# Professional Content Needs

1. **Community development and mobilization**
2. **Program planning**
3. **Proposal writing**
4. **Program evaluation**
5. **Evidence-based practice**
6. **Health promotion models**

# Voices

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***“I need a community advisory team and must work politically within the new city (recently amalgamated) to develop the NP role”***

***“I am interested in empowering people to improve their health and lifestyles and take control of their health...”***

***“I need to know more about the administrative and organizational and political structure of Health Canada, FNIHB and First Nations Bands”***

# Preferred Modalities

1. **Workshops**
2. **Seminars**
3. **Conferences**
4. **Print-based course materials**
5. **Face-to-face lectures**
6. **Web-based & Internet**
7. **CD-Rom**
8. **Videoconferencing**
9. **Networking**
10. **Computer conferencing**
11. **Teleconferencing**

# Differences in Northern Ontario

Modality	Mean Helpfulness Score*		
	Urban	Rural	Remote
Face-to-Face lectures	4.0	4.2*	3.5*
Conference	4.5*	4.1	3.6*
CD-ROM	3.4	3.0*	4.2*
Seminar	4.3*	4.2*	3.8*
Workshop	4.4*	4.4*	3.8*
Teleconferencing	2.9*	3.4*	3.6*

\* *Significance level =  $p < .05$*

\*\* *Rating scale from 1 “not at all helpful” to 5 “extremely helpful”*

# Convenient times to participate

<u>Time of Day and Year</u>	<u>% Yes</u>
Evenings	62%
In the fall	60%
In the winter	58%
During work hours	57%
In the spring	48%
During weekends	43%
In the summer	19%

# NP Tracking Study

## Secondary Analysis

# Continuing Education Activities

## Clinical

Women's health  
Psychosocial health  
Emergency care  
Endocrine health  
Integumentary health  
Cardiovascular health

## Professional

Professional and regulatory  
issues  
Leadership and management  
Research and evidence-  
based practice

# Key Informant Information

Three themes

# Three themes

- 1. Content Areas**
- 2. Issues and Strategies**
- 3. Delivery of Continuing Education**

# Corroborative Evidence

Literature, Survey, NP Tracking  
Study and Key Informants

# Summary

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**Describe Continuing  
Education Needs**

**Context**

**Issues**

**Content**

**Modalities**

**Guide Continuing Education  
Strategy**

**Context**

**Issues**

**Content**

**Modalities**

# Recommendations

1. **Paradox of modality and barriers**
2. **Focus on current NP practice and context**
3. **Consider modules**
4. **Existing provincial strategies**
5. **Formative and summative evaluation**

# Initiatives

- ✓ **Strategies**

Constructivist model

- ✓ **Modalities**

Mixed

- ✓ **Content Areas**

Both clinical and professional

- ✓ **Implementation and Evaluation**

