

Rural and Remote Nursing Practice: An Updated Documentary Analysis Executive Summary

This executive summary highlights a documentary analysis of relevant reports (grey literature, government documents) regarding rural and remote nursing practice. For this report, nursing practice refers to practice performed by registered nurses, nurse practitioners, licensed practical nurses, and registered psychiatric nurses. Our overall goal was to gain a comprehensive understanding of the current policy environment and determine if, and how, it impacts nursing practice. The Rural and Small Town definition, i.e., "a population living outside the main commuting zone of larger urban centers (urban centers numbering 10,000 or more)" (du Plessis, Beshiri, Bollman & Clemenson, 2001, p. 7) was adopted for use in this study.

Only relevant English language documents were located; a total of 29 reports were retrieved and reviewed based upon Rist's (1994) policy cycle. Subsequently, full text reviews were completed on 28 documents. Other documents were specifically searched by thematic area to determine if there were any updates or changes since the original documentary analysis was prepared (Kulig, et al, 2003). In particular, documents related to Canadian frameworks for rural health services and Aboriginal health and Aboriginal nurses were specifically searched for. Other reports were located and assessed for specific points—for example, recent publications on the effectiveness of the Aboriginal Health Human Resources Initiative (AHRRI) were useful in understanding educational efforts for Aboriginal peoples. In total, an additional 28 reports or policy statements were located and reviewed. Finally, news releases were also used in the report although they were not reviewed in the same manner. For example, those from provinces or the federal government on scholarships or loan forgiveness for nurses who choose to work in rural or remote locations were reviewed for specific program details. Telephone calls were

made to the personnel affiliated with one of the tuition support programs to enquire about its uptake since this detailed information could not be located in any report.

The analysis of the documents led to the generation of six themes:

Canadian Frameworks for Rural Health Services. Primary health care is a common framework across Canada and hence is also used in rural and remote contexts. There are examples of health regions applying a rural lens to the development and implementation of their health services delivery. For example, Alberta Health Services has made a concerted effort in ensuring that the delivery of health care services in their rural regions is community-appropriate and incorporates rural community variations.

<u>Descriptions of Rural Nursing.</u> The characteristics of rural and remote nursing as well as the contextual variables that influence the discipline in these locations have been described in several reports. There is an emphasis on the unique circumstances within which nurses practice and the unique practice setting characteristics including knowing the patients and their families and the dual role of living and working in communities.

The Context of Aboriginal Health Care. Two major themes arose from the review of documents about Aboriginal health care: the need to prepare Aboriginal peoples in nursing and the acknowledgement and incorporation of cultural competence and cultural safety by all nurses while caring for Aboriginal peoples.

Recruitment and Retention of Health Care Professionals for Rural and Remote Areas. Recruitment and retention of health care professionals remains a challenge in rural and remote areas around the globe. There is a greater emphasis on the inclusion of community members in addressing this ongoing challenge.

Solutions to Recruitment and Retention Issues. To counter the concerns of recruitment and retention, jurisdictions have offered a variety of solutions. One example is improvements to the workplace including providing access to education and virtual connections to urban health care providers as well as improving living conditions for families. In Canada, there has been an increase in loan forgiveness and tuition support programs for those within the nursing field but it is too early to evaluate their effectiveness. There are also specific initiatives to address the shortage of Aboriginal nurses.

Advanced/Specialized Practice. The meaning and educational preparation of nurses in advanced practice has not been resolved. Even the use of terms: advanced practice, nurse practitioner and clinical nurse specialist can be used interchangeably even though they may have different meanings in different fields.

The overall assessment of the documents revealed the following key messages:

Key Messages

- 1. The terms rural and remote continue to lack accepted and universal definitions.
- 2. There is a paucity of published literature about the contributions of all types of nursing personnel to rural and remote health.
- 3. The strategies to address issues pertaining to rural and remote health are focused on a deficit rather than a strength-based model.
- 4. Recruitment and retention of health care professionals including nurses continues to be a challenge in rural and remote settings.
- 5. There has been a rise in financial supports such as loan forgiveness programs for individual nurses who wish to work in rural and remote settings.
- 6. Provision of care for Aboriginal peoples continues to need investment to ensure that there are sufficient numbers of Aboriginal nurses and that non-Aboriginal nurses' care for this population within a cultural safety framework.

Based upon our review, the following recommendations are offered:

Recommendations

- 1. Identify initiatives used by all nursing personnel to prepare and support registered nurses, registered psychiatric nurses, practical nurses, and nurse practitioners to work in rural and remote settings.
- 2. Initiate forums including webinars with nurse educators and administrators to discuss lessons learned related to nursing education rural-focused initiatives.
- 3. Identify the number of Aboriginal nursing students and practicing nurses planning to work or working in rural and remote settings on a yearly basis to help determine the success of preparing and retaining this specific group of nurses.
- 4. Track the use of scholarships, bursaries and loan forgiveness programs on recruitment and retention of nurses in rural and remote locations.
- 5. Initiate an evaluation of nursing practice in rural and remote settings that will focus on outcomes such as health status and patient satisfaction.
- 6. Initiate an evaluation of advanced practice in rural and remote settings that focuses on outcomes such as health status and patient satisfaction.

References

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