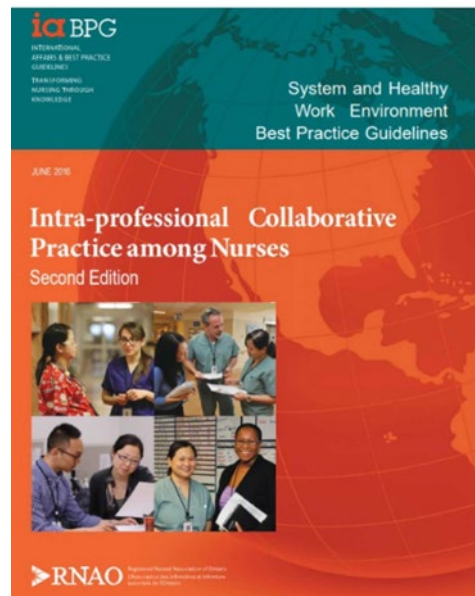


Gap (opportunity) analysis worksheet: Comparing your practices to best practices

Intra-professional Collaborative Practice among Nurses, Second Edition 2016



Download this guideline for free at: [Intra-professional Collaborative Practice among Nurses | RNAO.ca](https://www.rnao.ca/guidelines/intra-professional-collaborative-practice-among-nurses)

Review RNAO's evidence-based implementation resource, Leading Change Toolkit, Fourth edition, at [RNAO.ca/leading-change-toolkit](https://www.rnao.ca/leading-change-toolkit)

What is a gap (opportunity) analysis?

This is a process widely used to determine if best practices have been met after the practice change has been completed. A gap (opportunity) analysis helps you compare your organization's current practice with evidence-based best practice recommendations and/or good practice statements to determine:

- Existing practices and processes that are currently implemented and supported by best practices. This information is useful to reinforce practice strengths.
- Recommendations/good practice statements that are currently partially implemented in practice. These would be good first targets for change efforts.
- Recommendations/good practice statements that are not currently being met.
- Recommendations/good practice statements that are not applicable to your practice setting.

Why should we conduct a gap (opportunity) analysis?

- Contributes to annual evaluation by allowing you to compare practice from year to year and choose which areas to focus on changing within the year.
- Focuses on needed practice change which prevents a total overhaul of practice and builds on established practices and processes.
- Informs next steps such as development of infrastructure to support implementation, internal/external partner engagement, identification of barriers and facilitators, resource requirements, selection of implementation strategies and evaluation approaches.
- Leads to sustained practice change by informing plans related to process, staff and organization and reinforces current evidence-based practices.

How can we get started conducting a gap (opportunity) analysis?

Review the best practice guideline (BPG) in its entirety including its purpose, scope, guiding frameworks, good practice statements and evidence. This will help you gain a full understanding of the actionable best practices, implementation strategies and resources available to you.

If you are new to reading evidence-based guidelines, please [watch our 2024 video](#) "How to read, use and interpret a best practice guideline".

Engage the team and internal and external partners as needed in gathering information for the gap (opportunity) analysis. Collect information on:

- Current practice – is it known and is it consistent? (met, unmet, partially met)
 - Partially met recommendations/good practice statements may only be implemented in some parts of the organization, or you may feel it is only half done.
- Are there some recommendations/good practice statements that must be implemented before others?
- Can any recommendations/good practice statements be implemented quickly? (TIP: These are, “easy wins” and build confidence in the change.)
- Are there recommendations based on higher levels of evidence than others?
- Are there any barriers to implementation? (Examples include: staffing, skill mix, budget, workload issues, etc.)
- What are the time frames in relation to specific actions and people or departments who can support the change effort?
- Are there links with other practices and programs in your organization?
- Are there existing resources and education that your organization can access?
- Are there any must-do recommendations/good practice statements crucial to client/resident/patient and staff safety?
- What alignment do we consider with legislation, policy, accreditation, etc.?

Important note for long-term care homes: Completing this gap (opportunity) analysis each year helps you compare your current practices with evidence-based standards set by the Ministry of Health and Long-Term Care, as required by the [Fixing Long-Term Care Act, 2021](#) and [Ontario Regulation 246/22](#).

Next steps

1. Celebrate the recommendations/good practice statements you are meeting.
2. Prioritize the areas you want to work on. Start with practice changes that can be made easily or are crucial to client/resident/patient and staff safety. Start by reinforcing success and focusing on quick wins.

3. These priority areas become the foundation for planning your program or implementing practice change.
4. For more information on taking your gap (opportunity) analysis to the next level, see the RNAO [Leading Change Toolkit, Fourth edition](#)
5. **For long-term care homes:** Contact your LTC implementation coach, – by visiting [Find your implementation coach | RNAO.ca](#) for assistance with completing a gap (opportunity) analysis.
6. **For all other BPSOs:** Contact your implementation coach.
7. Not a LTCH or a BPSO and have questions about using this worksheet-[Send us a message | RNAO.ca](#)

For more information about the interpretation of evidence and recommendation statements, please see RNAO's explainer, [Advancements in RNAO Best Practice Guideline Methodology: Transition to the GRADE Approach](#).

Gap (opportunity) analysis worksheet

Site: _____

Date completed: _____

Team members participating in the gap (opportunity) analysis:

- | | |
|---------|---------|
| • _____ | • _____ |
| • _____ | • _____ |
| • _____ | • _____ |

| RNAO guideline Intra-professional Collaborative Practice among Nurses | Met, partially met or unmet? | Notes (Examples of what to include: is this a priority to our organization, information on current practice, possible overlap with other programs or partners) |
|--|-------------------------------------|--|
| Individual/team | | |
| <p>Recommendation 1.1: Nurses develop an understanding of the roles, values and behaviours that support intra-professional collaborative practice by:</p> <ul style="list-style-type: none"> • learning about the attributes of supportive teams; and • demonstrating willingness to work effectively with others. | | |
| <p>Recommendation 1.2: Nurses acquire and demonstrate the attributes of team work through:</p> <ul style="list-style-type: none"> • learning about the impact of interpersonal factors on the team; • team building activities; • demonstrating their commitment to the team; and • communicating effectively and openly, based on a clear understanding of their own roles scope of practice, and those of other team members. | | |
| <p>Recommendation 1.3: Nurses initiate collaborative processes to improve patient/client outcomes, in particular when the acuity of the patient/client is increasing:</p> <ul style="list-style-type: none"> • in circumstances when a diagnosis has not been established, the patient should be assigned to an RN to ensure the continuity of care. | | |

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| Recommendation 1.4: Nurse managers model effective team behaviour and demonstrate power-sharing. | | |
| Recommendation 1.5: Nurses enhance the quality of work environments and improve outcomes for patients/clients by establishing processes and structures to promote intra-professional collaboration. Nurses should do this by: <ul style="list-style-type: none"> • collaboratively establishing processes for shared-decision making in a variety of circumstances; and • introducing non-hierarchical, democratic working practices. | | |
| Recommendation 1.6: Nurses promote open, honest and transparent communication by <ul style="list-style-type: none"> • promoting a culture of effective communication; and • establishing processes for verbal, written and electronic communication. | | |
| Recommendation 1.7: Nurses promote intra-professional collaborative practice by creating supportive learning environments and participating as mentors to students. | | |
| Organizational | | |
| Recommendation 2.1: Organizations develop strategies to encourage and enable effective teamwork. | | |
| Recommendation 2.2: Organizations build a transformational or relational leadership culture that provides clear policies and supports effective teamwork. | | |
| Recommendation 2.3: Organizations develop systems and processes that promote collaboration and continuity of patient/client care. They can do that by: <ul style="list-style-type: none"> • implementing shared governance models that empower staff at all levels; | | |

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| <ul style="list-style-type: none"> • supporting all nursing staff working to their full scope of practice; and • encouraging staff to engage in communities of practice for support and mentorship. | | |
| <p>Recommendation 2.4: Organizations develop systems and processes to support nurses engaging in intra-professional practice. They can do this by:</p> <ul style="list-style-type: none"> • developing and providing intra-professional learning opportunities and evaluating effectiveness; • developing competencies for intra-professional practice that are linked to performance appraisals; and • providing opportunities for feedback on intra-professional practice. | | |
| <p>Recommendation 2.5: Organizations develop outcome measures for evaluating the effectiveness of intra-professional collaborative practice. Those indicators could include</p> <ul style="list-style-type: none"> • patient/client and family experience and satisfaction; • nursing turnover rates, overtime, absenteeism, engagement and satisfaction; • infection rates, fall ratios, re-admission rates; • delayed or missed nursing interventions, gaps in continuity of care and caregiver, appropriate staff mix and skill levels; and • eliminating obstacles (e.g. broken or malfunctioning equipment, complacency) to evaluation processes. | | |

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|---|-------------------------------------|--|
| <p>Recommendation 2.6: Organizations encourage and develop preceptors in order to make the intra-professional collaborative environment more welcoming for students and new staff. They can do this by:</p> <ul style="list-style-type: none"> • Assigning preceptors from the same class of nursing (e.g. RN student to RN preceptor); • selecting, assigning and supporting willing preceptors to work with students or new staff placed on the team; • informing preceptors of students' learning objectives and ensuring good communication between academic and clinical settings; and <p>reducing preceptors' caseloads to give them sufficient time to meet student nurses' learning objectives.</p> | | |
| <p>Recommendation 2.7: Organizations develop conflict management policies, practices and interventions by teaching and supporting managers and colleagues to address intra-professional relational challenges.</p> | | |
| External/system | | |
| <p>Recommendation 3.1: Governments promote sustainable intra-professional collaborative nursing by allocating funding for</p> <ul style="list-style-type: none"> • Intra-professional collaborative team development and evaluation initiatives; • nursing leadership development initiatives; • design, implementation and evaluation of approaches for safe and equitable workload; | | |

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|---|-------------------------------------|--|
| <ul style="list-style-type: none"> • technology to support team interaction; • staffing levels to provide person-centred models of care; and • recruitment and retention. | | |
| <p>Recommendation 4.1: Research is needed on how changing work structures affect intra-professional collaborative nursing in all health-care sectors.</p> | | |
| <p>Recommendation 5.1: Health services accreditation bodies include evidence based standards and criteria for collaborative intra-professional practice as part of their standards.</p> | | |
| <p>Recommendation 6.1: Educators and educational institutions promote professionalism and intra-professional collaborative nursing and be role models of both. They can do this by:</p> <ul style="list-style-type: none"> • introducing case studies that depict realistic team issues and scenarios (building the complexity along the continuum of the program); • focusing elective courses on teams and team functioning; • offering courses on respectful interaction and conflict resolution; • setting learning objectives focused on social and relational issues; • demonstrating collaborative teamwork during clinical placements; and • providing students with accurate information on role clarity and responsibilities of all members of the health-care team. | | |
| <p>Recommendation 7.1: Nurse professional and regulatory bodies (provincial and national) work together to help their</p> | | |

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|--|-------------------------------------|--|
| <p>members become more informed about their own and their colleagues' roles in the health system. They can do this by</p> <ul style="list-style-type: none"> • discussing roles and responsibilities associated with their education, skills and knowledge; and • promoting respectful, egalitarian relationships. | | |