

# Best Practice Spotlight Organization

FACT SHEET 2025



Join the movement



## RNAO Best Practice Spotlight Organizations® (BPSO®)

### THE REGISTERED NURSES' ASSOCIATION OF ONTARIO (RNAO)

RNAO is the professional body representing registered nurses, nurse practitioners and nursing students in Ontario, Canada. We advocate for healthy public policy, promote excellence in nursing practice, and power nurses to actively influence and shape decisions that affect the profession and the public we serve.

### THE RNAO BEST PRACTICE GUIDELINES PROGRAM

Since its launch in November 1999, RNAO's Best Practice Guideline (BPG) Program has produced:

- more than 50 clinical, system and healthy work environments [guidelines](#)
- the [Leading Change Toolkit](#), which provides a wide range of tools, supports and strategies to help change agents and teams make lasting improvements in health care
- many other resources that support the uptake, implementation and sustainability of RNAO BPGs in academic and practice settings across Canada and internationally

Our multi-pronged approach covers:

- individual capacity development through the [Best Practice Champion Network®](#), RNAO clinical institutes and fellowships
- organizational implementation through the [Best Practice Spotlight Organization® \(BPSO®\)](#) designation, and [BPG Clinical Pathways](#);
- implementation across entire health systems through the National Host Best Practice Spotlight Organization (BPSO) program

Visit [RNAO.ca/bpg](https://rnao.ca/bpg) to access the BPGs and related tools and implementation resources.

### BPSO DESIGNATION PROGRAM OVERVIEW

The BPSO designation program, established in 2003, supports BPG implementation at the organizational and systems levels. Internationally renowned, the program has been widely successful in demonstrating the uptake and use of RNAO BPGs.

The program's strategic approach has been proven to promote the development of evidence-based cultures, improves patient care and enriches the professional practice of nurses and other health-care providers. The end goal: to optimize care, patient and organizational outcomes through the use of RNAO BPGs by promoting a culture of evidence-based practice and management decision-making.

There are three models of the BPSO designation—BPSO direct, BPSO host, and BPSO Ontario Health Teams (BPSO OHT)—and various types of BPSO that participate within these models.

MODELS OF BPSOS	TYPES OF BPSOS
<p><b>BPSO Direct:</b> Organizations sign a contract directly with RNAO/BPSO host to systematically implement BPGs.</p> <p><b>BPSO Host:</b> BPSO Hosts allow scaling up on the national and international levels. These are governments or reliable organizations that run the program in countries, regions or specialty areas using RNAO’s methodologies and materials. BPSO Hosts report progress to RNAO and receive continuous coaching.</p> <ul style="list-style-type: none"> <li>▪ <b>National</b> – Prominent are the governments of Spain, Chile and Nigeria serving as nationwide BPSO Hosts.</li> <li>▪ <b>Regional</b> – Regional Hosts are present in Spain and Colombia</li> <li>▪ <b>Specialty</b> – Specialty Hosts may be sector-specific, such as long-term care, or they may address another specialized need such as language (e.g, Francophone)</li> </ul> <p><b>BPSO OHTs</b> work in integrated health-care systems – Ontario Health Teams – to collectively implement BPGs and report outcomes to RNAO.</p>	<p><b>Service BPSOs</b> focus on BPG implementation in their sector* to impact health outcomes.</p> <p>*Public health, primary care, mental health and social services, acute care, home care, long-term care and other sectors</p> <p><b>Academic BPSOs</b> focus on evidence based education, to impact faculty teaching, student learning, and patient/client outcomes.</p> <p><b>Indigenous-focused BPSOs</b> collaborate with RNAO to create a tailored BPSO program to honour Indigenous ways of knowing and to support holistic community wellness.</p>
<h3>BPSO CONSORTIUMS</h3>	
<p>BPSO Consortia provide a forum for knowledge exchange, support and collaborative activities within specific jurisdictions or specialty areas. Currently in Canada, Latin America, China and among Academic BPSOs worldwide.</p>	

## Program objectives

1. Establish dynamic, long-term partnerships that focus on making an impact on patient care through supporting evidence-based practice.
2. Demonstrate creative strategies for successfully implementing BPGs at the individual, organizational and systems level.
3. Establish and use effective approaches to evaluate implementation activities through structure, process and outcome indicators.
4. Identify effective strategies for system-wide dissemination of BPG implementation and outcomes.
5. Support achievement of the Quintuple Aim and the United Nations Sustainable Development Goals.

# Quintuple Aim Framework



### Enhancing patient experience

Implementing *Transitions in Care and Services* and *Person- and Family-Centred Care* foundational best practice guidelines (BPGs) in BPSOs across health and social service sectors help:

- ↑ patient satisfaction and involvement
- ↑ caregiver experience
- ↑ care coordination

### Improving population health

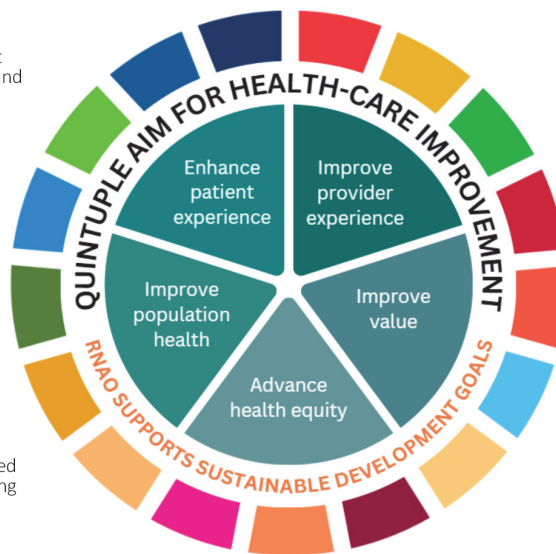
By collaboratively implementing and evaluating the impact of BPGs that address health concerns of priority populations, BPSOs impact patient outcomes, such as:

- ↓ falls and injuries from falls
- ↓ pressure injuries
- ↑ wound healing from diabetic foot ulcers

### Advancing health equity

Prioritizing strategies that explicitly target health inequities by engaging persons and groups with lived experience in planning, designing, and implementing community interventions. BPSOs aim to increase:

- ↑ culturally safe care environments
- ↑ provider competence in inclusive care practices
- ↑ access to care for marginalized populations by decreasing barriers



### Improving provider experience

RNAO offers many BPGs to assist organizations creating and sustaining healthy work environments. BPSOs utilize social movement actions to energize and engage staff in collaborative and meaningful work, aiming to:

- ↑ provider confidence
- ↑ job satisfaction
- ↑ meaningful work engagement

### Reducing costs, improving value

Systematically implementing evidence-based practices that improve outcomes and reduce complications, can support organizations to:

- ↓ unnecessary health-care utilization
- ↓ adverse events
- ↑ overall quality of care

### Supporting Sustainable Development Goals (SDGs)

Wholistic, evidence-based care that addresses social and environmental determinants of health advances the United Nation's SDGs.

Conceptual framework of "Quintuple Aim" for health care improvement and innovations surrounded by the United Nations' Sustainable Development Goals colour wheel. Adapted from Registered Nurses' Association of Ontario (RNAO), (February 2021). *Nurse Practitioner Task Force Report: Vision for Tomorrow*.

BPSOs commit to a three-year BPSO qualifying experience – or four years for BPSO OHTs – by entering into formal partnerships to define RNAO's role and the deliverables expected from the BPSO. During this "pre-designation period," BPSOs enhance their evidence-based practice and decision-making cultures, and implement and evaluate multiple clinical practice guidelines.

At the end of the pre-designation period –assuming all deliverables are met – the BPSO organizations become "Designated BPSOs," with a designation renewable every two years. Their focus then shifts to sustainability, and to continued implementation and evaluation of best practice guidelines in their organization and within the system.

## STEPS TO BECOMING A BPSO DIRECT

1. Submit a proposal containing evidence of readiness and commitment to implement and evaluate three to five clinical BPGs (depending on type and location of BPSO) as a BPSO pre-designate. This proposal should include information for each BPG identifying why they were selected, strategies that will be utilized for implementation, expected outcomes for patients, providers and the organization, and means of evaluating these outcomes.
2. Sign a letter of agreement committing to a three-year partnership to become a BPSO Designate.

## RESPONSIBILITIES OF THE BPSO DIRECT

1. Identify a BPSO lead from your organization.
2. Develop a Steering Committee and program structure.
3. Identify a cadre of champions – 20 per cent of interprofessional staff – to participate in a champions orientation and support the uptake of evidence-based practices.
4. Systematically implement RNAO BPGs using two complementary frameworks: the [Knowledge-to-Action Framework](#) and the [Social Movement Action Framework](#).
5. Participate in RNAO Clinical BPG Institutes and other enhanced capacity-building activities.
6. Meet monthly with other BPSO leads in virtual knowledge exchange meetings.
7. Commit to sending one or two staff to the annual BPSO Knowledge Exchange Symposium.
8. Enter data in the Nursing Quality Indicators for Reporting and Evaluation<sup>®</sup> (NQUIRE<sup>®</sup>) data system for structure, process and outcome indicators tailored to BPGs implemented.
9. Submit an online report every six months and meet with the RNAO BPSO team virtually to review progress towards completing deliverables.
10. Disseminate outcomes, tools and resources from the BPSO qualifying experience.
11. Following achievement of the BPSO Designation\*, commit to sustaining, expanding and spreading BPG implementation, and providing support to other BPSO pre-designates in a mentor role.

\* contingent on meeting all deliverables in the letter of agreement

## RNAO RESPONSIBILITIES TO THE BPSO DIRECT

1. Provide access to published and electronic RNAO BPGs to the BPSO free of charge.
2. Provide the BPSO with an orientation to the RNAO International Affairs and Best Practice Guidelines Centre, the BPSO program and to specific guidelines, as appropriate.
3. Support the BPSO to develop and deliver an orientation to the RNAO BPG program and BPSO designation.
4. Train the BPSO on implementing BPGs using a train-the-trainer approach.
5. Provide implementation support through resources including the Best Practice Champions Network<sup>®</sup> and the Leading Change Toolkit.

6. Provide ongoing expert consultation on guideline dissemination, uptake, implementation, evaluation and sustainability.
7. Help establish a knowledge transfer network of BPSO project leaders, and lead this network in regular knowledge exchange sessions to facilitate effective BPG implementation and evaluation.
8. Meet virtually on a twice-yearly basis or as mutually agreed and needed with the BPSO to review reports, monitor progress and provide recommendations.
9. Provide a coach to act as key RNAO contact, link the BPSO with resources and referrals, and conduct site visits if needed.
10. Identify and direct appropriate research opportunities to the BPSO.
11. Acknowledge the participation of the BPSO and its key individuals, teams, and units in implementing and evaluating the selected best practices guidelines.

## BPSO HOST MODEL

The RNAO BPSO Host model supports large-scale uptake and spread of BPGs at a national and international level. A BPSO Host organization enters into a formal agreement with RNAO to oversee the RNAO BPSO program in the specialty area, country or region where it is located. The BPSO Host is responsible for all aspects of the BPSO program, and acts as the liaison between RNAO and the BPSOs in the specific specialty area, country or region.

BPSO Hosts provide support and monitor progress through regular meetings and reporting processes, as the organizations they oversee work toward becoming designated BPSOs. The BPSO Host then reports to RNAO and provides an overview of successes, challenges, questions and issues of the BPSO program in that specialty area, country or region.

## BPSO HOST ORGANIZATION RESPONSIBILITIES

1. Selecting BPSOs using RNAO proposal methodology.
2. Establishing a contract with the BPSO organizations per the RNAO BPSO agreement prototype, outlining deliverables and requirements for the pre-designation period.
3. Launching the BPSO program in the region through an orientation session of all selected BPSOs, involving nursing staff or faculty and other stakeholders.
4. Committing resources to training in the implementation of RNAO's BPGs using a train-the-trainer approach and RNAO's materials and methodology.
5. Organizing and coordinating training institutes to deliver local training and support implementation of RNAO BPGs, based on RNAO's Leading Change Toolkit, Champion Workshop curriculum and any supporting materials developed in partnership with RNAO.
6. Supporting the development of a network of Best Practice Champions and BPG Institute attendees to build capacity and share implementation/evaluation experiences.
7. Hosting monthly knowledge exchange sessions of BPSO leads to review, support and monitor progress as well to facilitate exchange of challenges, successes and lessons learned among the regional BPSOs.

8. Hosting an annual regional BPSO knowledge exchange symposium for representatives from all BPSOs to share progress, identify strengths and key outcomes, address challenges and make plans to enhance, spread and sustain BPSO activities.
9. Requesting and obtaining progress reports from each BPSO every six months during the pre-designation period, and meetings with each BPSO to identify overall progress, strengths, recommendations for change and further support needed.
10. Identifying a liaison person from the Host Organization for each BPSO to provide additional support to the BPSO organization as needed.
11. Monitor the deliverables and requirements that each BPSO must adhere to.
12. Facilitate the research and evaluation of the BPSO program within the specialty area, country or region, particularly through the NQuIRE data system (comprised of quality indicators related to nursing practice, patient clinical outcomes and organizational structure relevant to the BPGs selected for implementation).
13. Facilitate dissemination activities of the BPSOs within the specialty area, country or region.
14. Engaging in regular knowledge exchange, monitoring, planning and evaluation sessions with RNAO and other Host Organizations.

### RNAO RESPONSIBILITIES TO THE BPSO HOST

RNAO supports implementation activities by providing training and access to all available resources (examples include: draft contract agreement for BPSOs, reporting prototypes, and RNAO's Leading Change Toolkit and Best Practice Champions Network.) RNAO also meets regularly with BPSO Hosts, and offers ongoing expert mentorship and consultation on guideline dissemination, implementation, uptake, sustainability and evaluation. BPSO Hosts and BPSOs in the country or region are also paired with mentor organizations who have experienced the BPSO program.

### FOR MORE INFORMATION

Need more details about the BPSO designation or specific types of BPSOs?

- visit the Best Practice Spotlight Organization program website at [RNAO.ca/bpg/bpso](https://RNAO.ca/bpg/bpso)
- contact us at [BPSO@RNAO.ca](mailto:BPSO@RNAO.ca).