MGH Instruments for use in the Conduct of Research

Over the years, multiple instruments have been developed, tested, revised, and translated by nurses and research teams at the Massachusetts General Hospital (MGH) and the Yvonne L. Munn Center for Nursing Research. These instruments are available for use in research investigations and available by contacting SGOODRIDGE@partners.org. Upon approval of each request, investigators receive the instrument requested, a scoring procedure and a copy of the publication.

Evaluation of the Professional Practice Environment

Evaluating the staff’s perception of the professional practice environment at the MGH has been underway since 1996. The Professional Practice Model for Nursing and Patient Care Services (Ives Erickson, J., Jones, D., & Ditomassi, M., 2013) guides instrument development. Evaluation data are used to a) identify specific aspects of the work environment that may require change, help to inform strategic planning, improve various components of an individual unit or department practice settings and/or provide evaluative feedback about the impact of changes or innovations have had on the practice setting.

The original instrument, The Professional Practice Environment Tool (PPE) was used to evaluate 8 components of professional practice (2004). The Revised Professional Practice Environment tool (RPPE) was developed in 2013. In 2017, the Professional Practice Work Environment Inventory was introduced with added questions to strengthen overall sub scale structure and reliability.

NOTE* The RPPE and THE PPWEI are two instruments developed to evaluate staff’s perception of the professional practice environment. The psychometric testing and evaluation of both measures have found each instrument suitable for use in research investigations measuring staff perception of the professional practice environment. Researchers are encouraged to read the publications for both instruments before choosing an instrument for their investigation. Both instruments are used to measure of work satisfaction with nursing and professional staff (e.g. Physical Therapy, Social Work, Occupational Therapy, Respiratory Therapy, Orthopedics, and Pharmacy) across health care settings, worldwide. The instruments are translated into other languages.


B. The Revised Professional Practice Environment (RPPE) is a 39-item scale is a revision of the original PPE, designed to measure staff’s perception of the professional
practice environment with an internal consistency reliability total score of .93 and 8 sub scales with alpha reliabilities range from .82-.93, explaining 64.6% of the variance. The 8 sub scales are Leadership and Autonomy over practice, Staff relationships with physicians, Control over practice, Communication about patients, Teamwork, Handling disagreement and conflict, Internal work motivation, Cultural sensitivity. Reference: Ives Erickson, J., Jones, D., Ditomassi, M., Duffy (2013). Psychometric Evaluation of the Revised Professional Practice Environment (RPPE) Scale. Journal of Nursing Administration, 39(5): 236-243.

C. **Professional Practice Work Environment Inventory (PPWEI)** is a 61 item, multidimensional, measure of the Professional Practice Environment with an internal consistency reliability total score of .93 and 8 sub scales with alpha reliabilities range from .82-.93, explaining 64.6% of the variance. Subscales are designed to measure supportive leadership, autonomy and control over practice, teamwork, communication about patients, cultural sensitivity, handling disagreement and conflict, sufficient time, staff and resources or quality patient care, work motivation, staff relationship with physicians, staff and hospital groups. Reference: Ives-Erickson, J., Duffy, M. E., Ditomassi, M., & Jones, D. A. (2017). Development and Psychometric Evaluation of the Professional Practice Work Environment Inventory. Journal of Nursing Administration, 47(5), 259-265.

D. **The Patient Care Associate’s Work Environment Scale (PCA-WES)** is a 35 item measure of patient Care Associate’s work environment in the acute care setting with internal consistency reliability total score of .95 and 5 subscales (.84 - .93) explaining 57.2% of the variance. The 5 sub scales are Staff attitudes toward the PCA role, PCA’s attitude toward work, PCA’s communication with nursing managers/leader, PCA’s teamwork, PCA’s respect for patients and their families. Reference: Ives-Erickson, J., Duffy, M. E., & Jones, D. A. (2015). Development and Psychometric Evaluation of the Patient Care Associates’ Work Environment Scale. Journal of Nursing Administration, 45(3), 139-144.

F. Power Influencing Professional Practice Change Scale (PIPPCS) is a 17-item scale intended to measure nurses perception of power as knowledge influencing changes in practice. The tool is grounded in Barret’s mid-range theory of Power as Knowing Participation in Change (Barret, E., 2003) with an internal consistency reliability for the total scale 0.97 with 2 sub scales (.97-.78) accounting for 74.4% of the variance. The 2 sub scales: Power as knowing participation in change, Power Environment are (Jones, D., Ditomassi, M., Duffy, M. Psychometric Evaluation of the Power Influencing Professional Practice Change Scale, 2019 (PUBLISHING IN PROCESS)).