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Shared Governance Day

Melissa Gomez, BSN, RN-BC; Nicole Grahl, BSN, RN, CRN

Problem

In our 281-bed community hospital it was a challenge to have direct care nurses participate in Shared Governance Council meetings that were held at various times and days throughout the month. Nurses either could not be relieved from their patient load, would not commute from home for a one hour meeting, or could not commit to attending several different meetings throughout the month.

At the 2014 Magnet Conference, the 8-hour Council Day concept was taken from one of the success stories shared. A not-for-profit academic medical center created an 8-hour council day with the intent of increasing the participation of staff nurses and easing the burden of staff scheduling for managers. As part of the lessons learned, the hospital shared the need to hone the membership of councils to include essential staff, as well as providing leadership training to council members and chairs (Moreno, Ford, & Brown, 2014). Following a post-conference meeting with the five staff nurses and four nurse leaders who attended the conference from our hospital, this idea emerged as a practical solution to the issues being faced by Doctors Hospital. It was suggested that the Shared Governance Day proposal be brought to the Unit-based Practice Council (UPC) Chairs and Co-chairs for further discussion, after which it could be brought forward to the Nurse Governance Council for a final decision of whether to implement.

- Objectives included:
- Increase attendance of staff nurses at Shared Governance Council meetings.
 - Increase satisfaction of staff nurses and nursing leadership with the Shared Governance process by easing scheduling concerns.
 - Increase UPC members' leadership acumen through education and participation.

Population

The goal of the evidence-based project was to provide a new structure, time, and resources so direct care nursing attendance could increase at the Shared Governance council meetings. Doing so would accommodate all of the UPCs (ICU/PCU, 3West , 3 South, 2 West, 2 South, and ER) in such a way that night shift nurses could stay over for the morning meetings, and nurses coming from home would have a guaranteed 3-4 hours of paid time thereby justifying their commute into work. In addition, the 3-4 hours added to the nurses' schedule should not cause accrual of overtime, as it is hoped that most staff nurses would not reach the 40-hr ceiling.

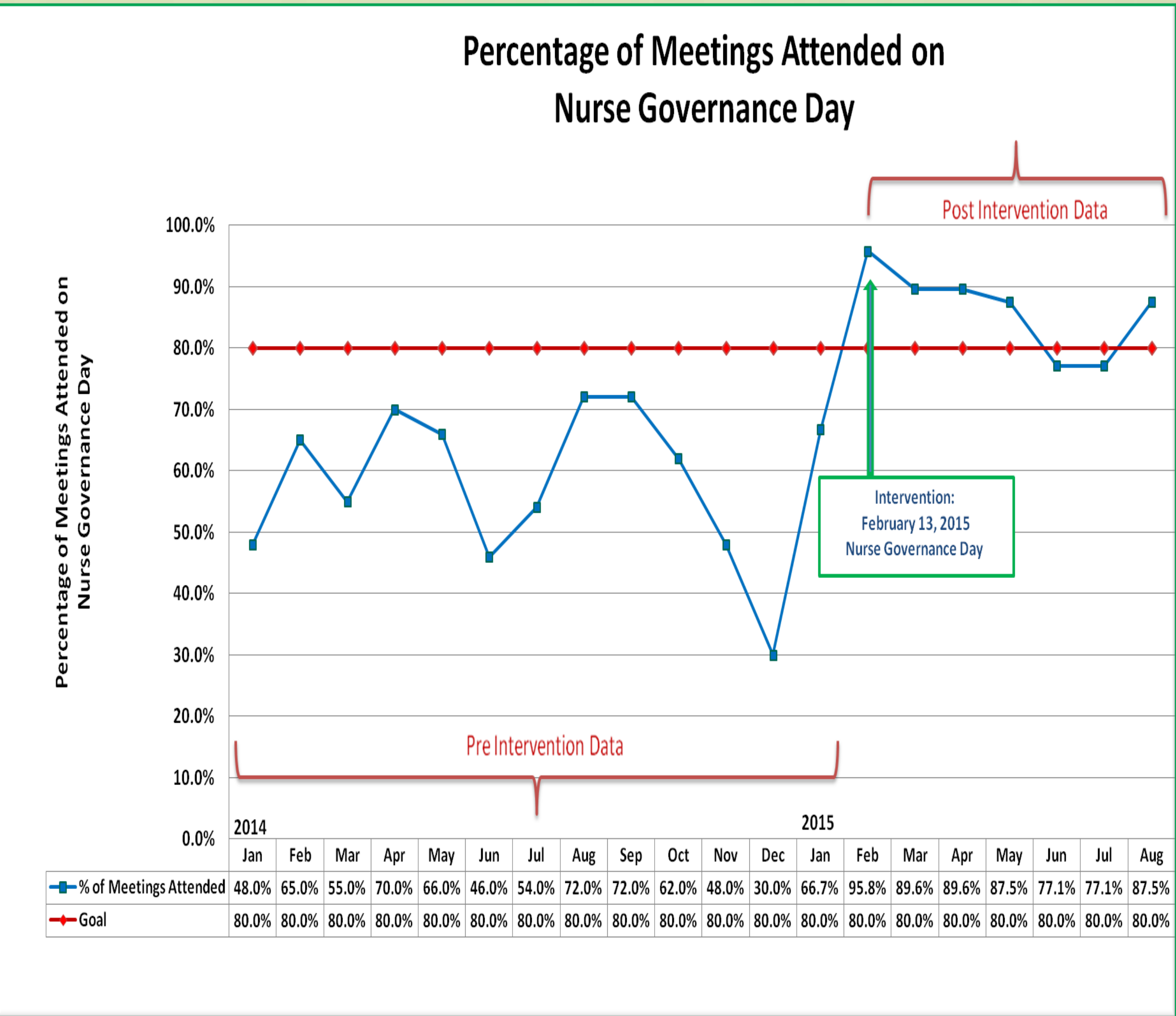
Practice Change

Attached is a diagram of the proposed change to our Shared Governance (SG) meeting schedule which allows for a structured morning where staff nurses would be allotted three to four hours, once a month, to attend their department's UPC meeting. In addition there would be time allotted for UPC members to attend their assigned Governing Council meeting, as well as work on UPC/SG business and/or participate in educational in-services scheduled during breaks or down-time between meetings. Peri-operative and Specialty Unit UPCs would generally meet in the afternoon because of staffing constraints; however these areas would need to accommodate scheduling their representatives for the Governing Council meetings during the 8-hour Council Day.

Time	Council / Activity		
8:00 – 9:00am	Inpatient & ER UPC Meetings		
9:00 – 9:30 am	BREAK Education Posters / New Product or Procedure Information (Informal education shared with healthy snacks outside meeting rooms on 1 st Floor)		
9:30 – 10:30 am	Nursing Quality Council	Professional Development Council	Education Offering or Council Work (intended for UPC members not attending a council meeting)
10:30 – 10:45 am	BREAK Education Posters / New Product or Procedure Information (Informal education shared with healthy snacks outside meeting rooms on 1 st Floor)		
10:45 – 11:45 am	Evidence-based Practice Council	Clinical Practice Council	Education Offering or Council Work (intended for UPC members not attending a Council)
(UPC Chairs & Co-chairs remain for afternoon)			
11:45 – 12:30 pm	LUNCH		
12:30 – 1:30 pm	UPC Chair & Co-Chair Meeting		
1:30 – 2:30 pm	Nurse Governance Council		
2:30 – 3:30 pm	Nursing Leadership Council	Perioperative & Specialty Unit UPC Meetings	

This proposal was brought to the Nurse Governance Council to be voted upon. Each specialty discussed which format would best suit the needs of their unit as well as other specialties involved in shared governance such as pharmacy and social work. It was voted to adopt this new format, Shared Governance Day, to hold all shared governance council meetings on a single day each month.

Outcomes



Conclusion & Implications for Practice

Implementing Shared Governance Day has dramatically increased attendance at all council meetings from a low of 30% to a high of 95.8%. Shared Governance Day has allotted time and resources for nurses to be able to attend Shared Governance Council meetings.

In the future, the hospital will benefit from the attendance of direct care nurses by implementing more quality improvement projects, elevating professional excellence in nursing, and attaining Magnet status. All of these accomplishments will provide better outcomes for the patients of Doctors Hospital.

References

Moreno, J., Ford, W., and Brown, G. Stanford Health Care. "Walking the Talk: Overhauling of Shared Governance to Align with the Magnet Model" (presentation, Magnet Conference, Dallas, TX, October 8-10, 2014).