

PROFESSIONAL GOVERNANCE 3.0

*Please provide the following information. The information you provide is IMPORTANT.
Please be sure to complete ALL questions. Remember, confidentiality will be maintained at all times.*

Today's Date:

1. Sex: Male Female

2. Age:

3. Please indicate your profession:

- | | |
|---|--|
| <input type="checkbox"/> Accountant | <input type="checkbox"/> Physician |
| <input type="checkbox"/> Dietitian | <input type="checkbox"/> Registered Nurse |
| <input type="checkbox"/> Pharmacist | <input type="checkbox"/> Respiratory Therapist |
| <input type="checkbox"/> Physical Therapist | <input type="checkbox"/> Social Worker |
| <input type="checkbox"/> Other: | |

4. Please indicate your HIGHEST educational degree:

- | | |
|---|--|
| <input type="checkbox"/> Diploma | <input type="checkbox"/> Master's Degree |
| <input type="checkbox"/> Associate Degree | <input type="checkbox"/> Doctorate |
| <input type="checkbox"/> Baccalaureate Degree | |

5. Employment Status:

- | | |
|--|--|
| <input type="checkbox"/> Full-time, 36-40 hours per week | <input type="checkbox"/> Part-time, less than 36 hours per week
(specify number of hours/week): |
|--|--|

6. Please specify the number of years that you have been practicing:

7. Please indicate the title of your present position:

8. Please indicate the type of nursing unit that you work on:

- | | |
|---|--|
| <input type="checkbox"/> Case Management | <input type="checkbox"/> Operating Room |
| <input type="checkbox"/> Clinic | <input type="checkbox"/> Pediatrics |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Education | <input type="checkbox"/> Quality Management |
| <input type="checkbox"/> Emergency Room | <input type="checkbox"/> Recovery Room |
| <input type="checkbox"/> Maternity | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Other (please specify): |

9. Please specify the number of years you have worked in this institution:

10. Please specify the number of years you have been in this present position:

11. Please rate your overall satisfaction with your professional practice within the organization
(1 = lowest, 5 = highest)

1 2 3 4 5

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PART I

In your organization, please circle the group that CONTROLS the following areas:

- 1 = Management/administration only**
2 = Primarily management/administration with some staff input
3 = Equally shared by staff and management/administration
4 = Primarily staff with some management/administration input
5 = Staff only

1. Determining what your professional colleagues can do in their daily practice.	1	2	3	4	5
2. Developing and evaluating policies, procedures and protocols related to patient care.	1	2	3	4	5
3. Establishing levels of qualifications for positions within your own discipline.	1	2	3	4	5
4. Determining activities of ancillary personnel (aides, assistants, technicians, secretaries).	1	2	3	4	5
5. Conducting disciplinary actions of colleagues within your discipline.	1	2	3	4	5
6. Assessing and providing for the professional/educational development of professionals within your own discipline.	1	2	3	4	5
7. Selecting products used in your professional practice.	1	2	3	4	5
8. Determining methods or systems for accomplishing the work of your discipline.	1	2	3	4	5

PART II

In your organization, please circle the group that influences the following activities:

- 1 = Management/administration only**
2 = Primarily management/administration with some staff input
3 = Equally shared by staff and management/administration
4 = Primarily staff with some management/administration input
5 = Staff only

9. Making work assignments for professional and support staff.	1	2	3	4	5
10. Regulating the flow of services or patients/clients within the organization.	1	2	3	4	5
11. Formulating annual unit budgets for personnel, supplies, equipment, and education for your own unit or work group.	1	2	3	4	5
12. Recommending salaries, raises and benefits.	1	2	3	4	5
13. Consulting and enlisting services outside of your own unit or work group.	1	2	3	4	5
14. Consulting and enlisting the support of services outside of your own discipline (e.g. dietary, social service, pharmacy, human resources, finance).	1	2	3	4	5
15. Creating new clinical positions.	1	2	3	4	5
16. Creating new administrative or support positions.	1	2	3	4	5

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PART III

According to the following indicators in your organization, please circle which group has OFFICIAL AUTHORITY (i.e. authority granted and recognized by the organization) over the following areas that control practice and influence the resources that support it:

1 = Management/administration only

2 = Primarily management/administration with some staff input

3 = Equally shared by staff and management/administration

4 = Primarily staff with some management/administration input

5 = Staff only

17. Mandatory credentialing levels of professionals (licensure, education, certifications) for hiring, continued employment, promotions and raises.	1	2	3	4	5
18. Organizational charts that show job titles and who reports to whom.	1	2	3	4	5
19. Written guidelines for disciplining personnel.	1	2	3	4	5
20. Procedures for hiring and transferring your discipline's personnel.	1	2	3	4	5
21. Policies regulating promotion of professional personnel to management and leadership positions.	1	2	3	4	5
22. Procedures for determining work assignments.	1	2	3	4	5
23. Daily methods for monitoring and obtaining supplies that support the practice of your professional group within the organization.	1	2	3	4	5
24. Procedures for controlling the flow of services and patients/clients within the organization.	1	2	3	4	5
25. Process for recommending and formulating annual budgets for personnel, supplies, equipment, and education for your own work group.	1	2	3	4	5
26. Procedures for adjusting professional personnel's salaries, raises, and benefits.	1	2	3	4	5
27. Formal mechanisms for consulting and enlisting the support of other professionals within your discipline who work outside of your work group.	1	2	3	4	5
28. Formal mechanisms for consulting and enlisting support of organizational services outside of your work group (e.g. dietary, social service, pharmacy, human resources, finance).	1	2	3	4	5

PART IV

In your hospital, please circle the group that PARTICIPATES in the following activities:

1 = Management/administration only

2 = Primarily management/administration with some staff input

3 = Equally shared by staff and management/administration

4 = Primarily staff with some management/administration input

5 = Staff only

29. Participation in unit or work-group committees that deal with professional practice.	1	2	3	4	5
30. Participation in departmental committees that deal with professional practice.	1	2	3	4	5
31. Participation in interprofessional committees (physicians, other healthcare professions) for collaborative practice.	1	2	3	4	5
32. Participation in organizational administrative committees for matters such as employee benefits and strategic planning.	1	2	3	4	5
33. Forming new unit or work-group committees.	1	2	3	4	5
34. Forming new departmental committees within your own discipline.	1	2	3	4	5
35. Forming new interprofessional committees.	1	2	3	4	5
36. Forming new administration committees for the organization.	1	2	3	4	5

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PART V

In your organization, please circle the group that has ACCESS to INFORMATION about the following activities:

- 1 = Management/administration only**
2 = Primarily management/administration with some staff input
3 = Equally shared by staff and management/administration
4 = Primarily staff with some management/administration input
5 = Staff only

37. Compliance of your organization with requirements of surveying agencies (e.g. The Joint Commission, state and federal government, professional groups).	1	2	3	4	5
38. Your work group and departmental goals and objectives for this year.	1	2	3	4	5
39. Your organization's strategic plans for the next few years.	1	2	3	4	5
40. Results of clients' satisfaction surveys.	1	2	3	4	5
41. Professionals' satisfaction with their interprofessional collaboration.	1	2	3	4	5
42. Turnover and vacancy rate of professionals within your discipline in the organization.	1	2	3	4	5
43. Colleagues' (within your discipline) satisfaction with their general practice.	1	2	3	4	5
44. Colleagues' (within your discipline) satisfaction with their salaries and benefits.	1	2	3	4	5
45. Management's opinion of the quality of professional practice provided by your discipline.	1	2	3	4	5

PART VI

In your hospital, please circle the group that has the ABILITY to:

- 1 = Management/administration only**
2 = Primarily management/administration with some staff input
3 = Equally shared by staff and management/administration
4 = Primarily staff with some management/administration input
5 = Staff only

46. Negotiate solutions to conflicts among your professional colleagues.	1	2	3	4	5
47. Negotiate solutions to conflicts between your professional colleagues and other professional groups.	1	2	3	4	5
48. Negotiate solutions to conflicts between your professional colleagues and other organizational departments.	1	2	3	4	5
49. Negotiate solutions to conflicts between your professional colleagues and their immediate managers.	1	2	3	4	5
50. Negotiate solutions to conflicts between your professional colleagues and the organization's administration.	1	2	3	4	5