

GROW, EXCEL & REIMAGINE: EVOLVING TO PROFESSIONAL GOVERNANCE

Jody Collins, MSN, RN, NPD-BC, Caitlin McVey, MBA, RN, CPHQ, CLSSBB, Laura Gobeli, MSN, RN, NPD-BC, MEDSURG-BC; Rowena Chona O. Sano, DNP, BSChE, RN, CNL, CPHQ, NEA-BC, CQA(ASQ), CLSSMBB, Audrey Kobina, MSN, RN, CPN, EBP-C, Bryan Sisk, DNP, MPH, RN, NE-BC, CENP
Memorial Hermann Health System | Houston, Texas | USA



ABSTRACT

Explore an innovative and strategic transformation across a health system from shared to professional governance, where interprofessional strategies and evidence-based analysis redefine frontline decision-making, professional growth and accountability, empowering frontline nursing staff to pursue and advance a culture of clinical excellence.

- Robust professional governance improves staff engagement, job satisfaction and retention, resulting in improved patient outcomes and patient safety.³
- Increased health care complexity and its impact on nursing, drives a need to further advance nurse ownership and accountability of practice to achieve clinical excellence.²
- A call to action was made to establish an evolved and empowering work culture emphasizing accountability, professional obligation, collateral relationships and decision-making.²

By transitioning to professional governance, health care professionals can positively impact the work environment and elevate professional contributions to deliver quality, patient-centered care.

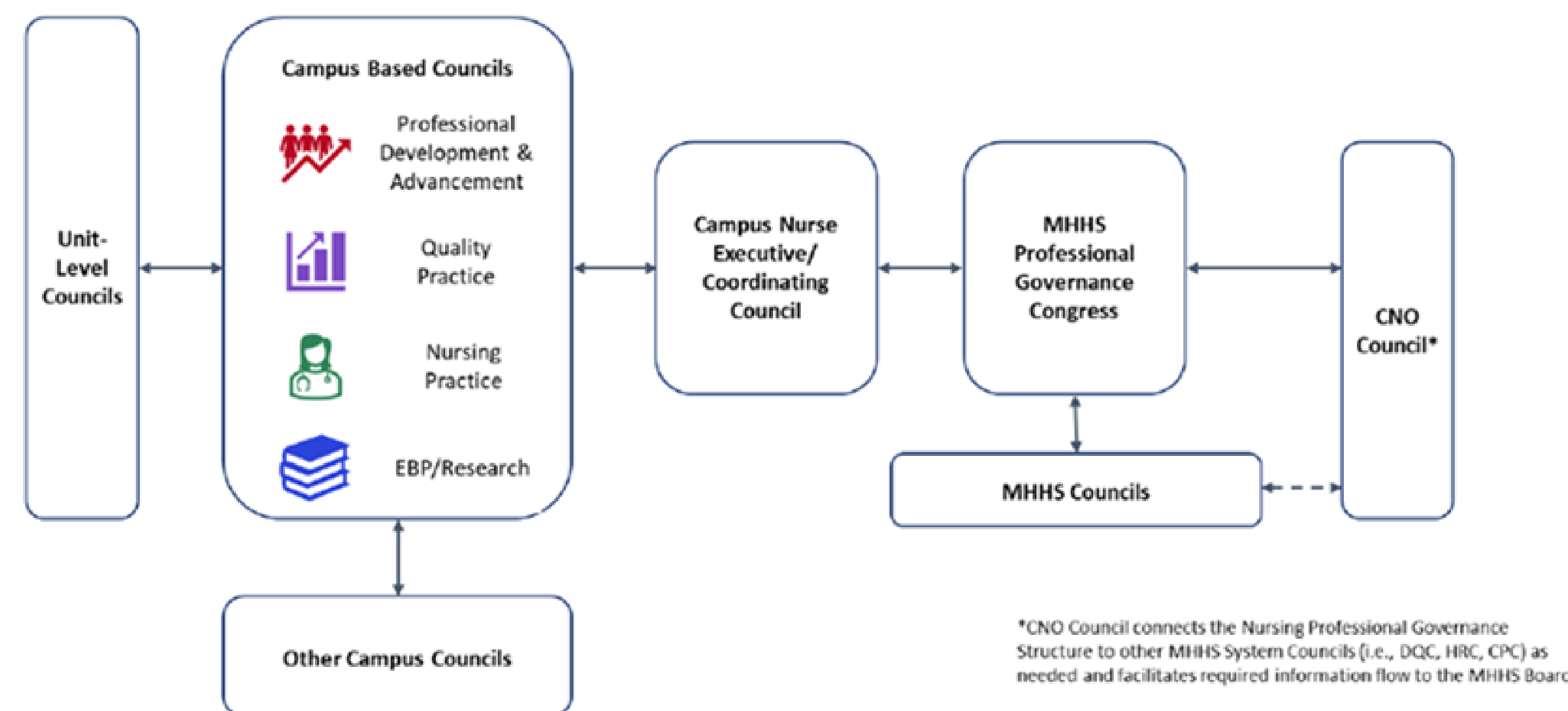
BACKGROUND

Shared Governance Councils were established in all 13 hospitals of the health system. A gap analysis revealed that each hospital had varied:

- council structures
- engagement levels
- council activities
- available tools, resources and educational opportunities

The opportunity to create a more sustainable infrastructure to elevate nursing professional practice and to increase ownership of practice decisions as part of the interdisciplinary care team was identified.

Evidence indicates that the transition to professional governance enhances staff engagement, job satisfaction and retention while positively impacting patient safety and care.^{2,3}



PURPOSE

To use evidence-based trends and detailed outcome analysis to change organizational culture from shared to professional governance, establishing a new framework for frontline decision-making and accountability, contributing to clinical excellence.

METHOD/DESIGN

A nurse-led team, including 80 frontline staff, established a Professional Governance framework, with a standardized yet adaptable structure to meet individual campus needs and cultures. The goal was to create a sustainable infrastructure to elevate nursing professional practice and to increase ownership of practice decisions.

Method: Robust Process Improvement and implementation science
The project team was divided across multiple subgroups and a 1-year project timeline was established. A project charter, project goals, and team expectations were established.

1. Establish interprofessional team

- All campuses represented
- Included frontline staff (unit practice chair/co-chairs) and leaders

2. Evaluate current state and create standardized framework

- Completed gap analysis and assessed current state
- Aligned hospital-based council structure
- Standardized by laws and council charters
- Standardized meeting templates
- Established framework for system-level congress

3. Measured baseline campus-based council health

- Completed Council Health Assessment to measure campus-based councils' foundational structures, decision-making and leadership activities, and membership.¹

4. System-wide leadership and member training

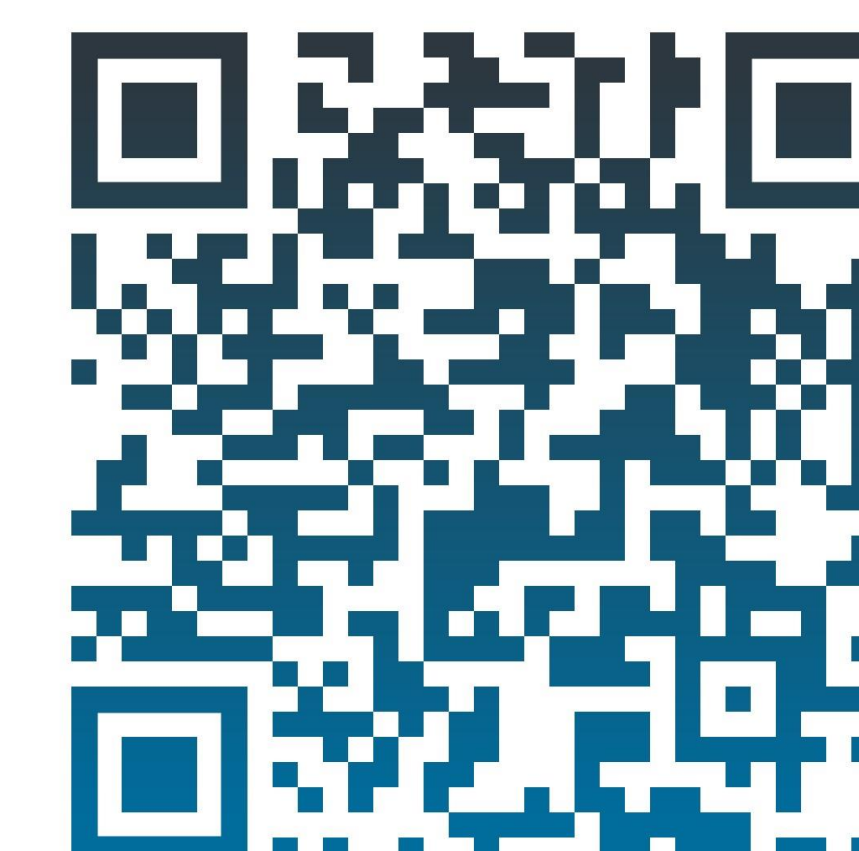
- Professional Governance training included:
 - Organizational overview, including alignment with the ANCC Magnet Model
 - Overview of the Professional Governance Structures, By-Laws, and Charters
 - Roles and Responsibilities of the Chair, Co-chair, Members and Nurse Leaders
 - Strategies for effective meetings
 - Tools, resources, templates
 - Leading Evidence-Based Practice and Quality Improvement Projects
 - Data Management, SMART Goals and measuring project outcomes.
- Training course was revised based on feedback

Biweekly meetings, ongoing assessments and gap analyses were conducted to gauge the effectiveness of the governance shift across the system.

PRACTICE IMPLICATIONS

Advancing shared decision-making fosters empowering environments and professional satisfaction.^{1,2,3} Alignment and standardization are key in transforming governance.

This scalable and replicable model suits a range of organizations, offering a blueprint for empowering frontline staff in diverse settings.



RESULTS

- In 2023, the staff-led professional governance congress was established.
- 314 employees across 13 hospitals completed training and were pivotal in transforming campus councils to the new professional governance infrastructure.
- The training program was essential in driving transformative changes leading to streamlined operations, enhanced bidirectional communication, increased efficiency and reduced staff barriers.
- Standardized tools and resources were implemented to support frontline nurses leading the system-level congress and campus-level council meetings.
- Pre and post training survey comparison results showed an improvement in the agreement rating related to the membership of the Shared Governance Councils. In addition, post-survey respondents found that there are clearer avenues for non-council members to contribute to council work after the training.
- Redefining governance infrastructure to align more closely with the ANCC Magnet principles established a more robust, lasting culture of shared decision-making with expanded influence over practice and work environment that enhanced bidirectional communication and broadened the voice of frontline nurses.

| Assessment Question | Weighted Average [Strongly Disagree (1) to Strongly Agree (5)] | % of "I don't know" Responses | Pre-Training | | Post-Training | |
|---|--|-------------------------------|------------------|-------------------------------|------------------|-------------------------------|
| | | | Weighted Average | % of "I don't know" Responses | Weighted Average | % of "I don't know" Responses |
| Strategies to ensure members have dedicated time to complete council work | 3.49 | 8% | 3.92 (1) | 1% | | |
| Formal education or training for new council members/leaders | 3.38 | 5% | 3.78 | 3% | | |
| Process for selecting and deselecting council members | 3.33 | 11% | 3.77 | 5% | | |
| Established clear avenues for non-council members to contribute to council work | 3.26 | 11% | 3.81 (2) | 3% | | |
| A process to assess each other's participation in the council | 3.11 | 12% | 3.67 | 5% | | |
| Number of total responses for assessment questions | 304 | | | | 118 | |

REFERENCES

1. Hess, R. G., Jr, Bonamer, J. I., Swihart, D., & Brull, S. (2020). Measuring Council Health to Transform Shared Governance Processes and Practice. *The Journal of nursing administration*, 50(2), 104–108. <https://doi.org/10.1097/NNA.0000000000000849>
2. O'Grady, T. P., & Clavelle, J. T. (2021). Transforming Shared Governance: Toward Professional Governance for Nursing. *The Journal of nursing administration*, 51(4), 206–211. <https://doi.org/10.1097/NNA.0000000000000999>
3. Sassen, B. (2023). Nursing and Shared Governance and Professional Governance. In: *Improving Person-Centered Innovation of Nursing Care*. Springer, Cham. https://doi.org/10.1007/978-3-031-35048-1_23

ACKNOWLEDGEMENTS

Special thanks and acknowledgement to the Memorial Hermann Health System Magnet Collaborative, CNO Council and professional governance participants from across the enterprise who contributed to this valuable work and transformational success.

