



# Effect of Professional Nursing Governance on Nurse-Related Outcomes

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## Background/Objectives

- While professional nursing governance exists in nursing professional practice structures, effects of governance levels on nurse related-outcomes [i.e., nurse sensitive indicators (NSI), and patient and nursing satisfaction] has not been well studied. This is one of the first studies to measure associations between levels of governance and nurse-related outcomes. The Index for Professional Nursing Governance (IPNG) 50-item survey, version 3.0, measures professional nursing governance continuum levels from traditional to shared to self governance.<sup>1\*</sup>
- Study objectives: Examine relationships between IPNG governance scores to nurse-related outcomes, by both overall IPNG scores and the 6 IPNG subscale scores.
- Hypothesis: Study units with IPNG shared governance scores will have statistically significant associations with nurse-related outcomes outperforming unit level benchmarks.

## Study Methods

- This multicenter study was conducted at 20 hospitals in 4 countries (US=17; Saudi Arabia=1; United Arab Emirates=1; Jordan=1).<sup>2,3</sup>
- These results report findings from one of the 20 sites, Johns Hopkin's Bayview Medical Center's (JHBMC) study units (16 units: 15=inpatient; 1=ambulatory), as well as JHBMC's hospital-wide IPNG survey.
- The Institutional view Board (IRB) deemed the study exempt.
- IPNG Survey Research: RNs (both study units and hospital-wide) completed a 58-item survey (demographics=7; nurse satisfaction=1; IPNG=50) electronically after consenting. Traveler / agency RNs were excluded.
- Of the 1065 JH Bayview RNs, 323 completed the survey hospital wide (response rate=30.3%), and 173 from the study units [average response rate=42.7%; unit range=12.1% - 100.0%].
- Outcome Measures (NSI, patient and RN satisfaction): For each study unit, nurse investigators provided the number of 4 quarters (range=0-4) that NSI and patient satisfaction outperformed unit benchmarks, and if RN satisfaction outperformed unit benchmarks.

## IPNG Survey Results

- Nurse type: Most of the study unit RNs (148 of 173, 85.3%) and hospital-wide nurses (263 of 323, 81.4%) who participated in the survey were clinical nurses,
- Nurse satisfaction: On average, study unit RNs ranked overall satisfaction at 7.3 (1=not satisfied; 10=very satisfied); hospital-wide = 7.5.
- IPNG scores: Traditional governance was found for both study units and hospital-wide overall and subscale (3 of 6, 50.0%: resources, participation and goals) scores.

IPNG Average Scale Score (SD)	Governance Type*		Overall Study N=2170
	Traditional=Red	Shared=Green	
<b>Overall IPNG Score</b> [Scale range: trad=50-100; shared=101-200; self=201-250]	<b>Study Units</b>	<b>Hospital-Wide</b>	
	<b>100.1 (18.03)</b>	<b>99.7 (20.17)</b>	<b>105.4</b>
<b>6 Subscale IPNG Scores</b>			
<b>1. Personnel</b> [trad=12-24; shared=25-48; self=49-60]	<b>14.2 (3.61)</b>	<b>14.4 (4.30)</b>	<b>17.3</b>
<b>2. Information</b> [trad=9-18; shared=19-36; self=37-45]	<b>18.4 (5.16)</b>	<b>18.0 (5.42)</b>	<b>20.1</b>
<b>3. Resources</b> [trad=9-18; shared=19-36; self=37-45]	<b>26.1 (6.69)</b>	<b>26.4 (7.06)</b>	<b>24.9</b>
<b>4. Participation</b> [trad=8-16; shared=17-32; self=33-40]	<b>17.3 (4.69)</b>	<b>16.9 (4.96)</b>	<b>16.4</b>
<b>5. Practice</b> [trad=7-14; shared=15-28; self=29-35]	<b>13.7 (3.89)</b>	<b>13.6 (4.01)</b>	<b>15.3</b>
<b>6. Goals</b> [trad=5-9; shared=10-20; self=21-25]	<b>10.6 (3.45)</b>	<b>10.4 (3.44)</b>	<b>11.5</b>

\*Traditional governance (lowest) = management / administration only;  
 Shared governance=combination of staff and management / administration; and  
 Self-governance (highest) =staff only [note: there were no self-governance scores].

## References

- Hess, R.G. (2017). *The Measurement of Professional Governance: Scoring Guidelines And Benchmarks*. Hobe Sound, FL: Forum for Shared Governance.
- Speroni, K.G., Wisner, K., Stafford, A., Haines, F., AL-Ruzzieh, M.A., Walters, C., & Budhathoki, C. (2021). Effect of Shared Governance on Nurse Sensitive Indicator and Satisfaction Outcomes: An International Comparison. *Journal of Nursing Administration*, 51(5): 287-296.
- Speroni, K.G., Wisner, K., Ober, M., Haines, F., Walters, C., & Budhathoki, C. (2021) Effect of Shared Governance on Nurse Sensitive Indicator and Satisfaction Outcomes by Magnet Recognition Status. *Journal of Nursing Administration*, 51(7/8): 379-388.

## Outcomes Results

No statistically significant associations were found; however, it appears descriptively that study units scoring traditional governance had better outcomes than the units scoring shared governance: 3 of 4 (75.0%) NSI outcomes; 3 of 4 (75.0%) patient satisfaction categories; and 4 of 4 (100.0%) RN satisfaction categories.

Outcomes	Traditional Gov Units N=3	Shared Gov Units N=13	Total N=16
<b>NSI: Mean (SD), # of Quarters Above Unit Benchmark</b>			
Falls with injury	2.0 (2.00)	2.2 (1.21)	2.1 (1.31)
Hospital-acquired pressure injury stages ≥2	3.0 (-), n=1	2.9 (0.86)	2.9 (0.83), n=14
Central line-associated blood stream infection	4.0 (-), n=1	3.5 (0.66)	3.6 (0.65), n=14
Catheter-associated urinary tract infection	3.0 (-), n=1	2.7 (1.38)	2.7 (1.33), n=14
<b>Patient Satisfaction: Mean (SD)</b>			
Courtesy and respect	2.7 (2.31)	2.3 (1.25)	2.4 (1.41)
Careful listening	2.7 (2.31)	2.0 (1.22)	2.1 (1.41)
Patient Education	2.3 (2.08)	2.8 (0.69)	2.8 (1.00)
Responsiveness	2.7 (2.31)	2.2 (1.30)	2.3 (1.45)
<b>RN Satisfaction: Satisfied, n (%)</b>			
Autonomy	2 (66.7%)	6 (46.2%)	8 (50.0)
RN-to-RN teamwork	2 (66.7%)	6 (46.2%)	5 (31.3)
Leadership and Responsiveness	2 (66.7%)	4 (30.8%)	6 (37.5)
Adequacy of resources and staffing	2 (66.7%)	6 (46.2%)	8 (50.0)

## Conclusions

- For both the study units and hospital-wide, traditional governance was the predominant finding per the IPNG survey. Shared governance was found for the 20-site study.
- To enculturate shared governance, and ultimately to achieve staff self-governance, opportunities exist for nursing management / administration to work with nursing staff to develop and disseminate targeted interventions that facilitate personnel controlling related structures, having access to information, and control over practice.
- Once targeted interventions are implemented, governance level re-evaluation with a higher response rate is warranted.

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