

Implementation of a Toolkit to Improve Engagement in Nursing Professional Governance

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Background

Nursing professional governance (PG) is associated with improved nursing job satisfaction and healthcare quality and safety ratings.

COVID-19 resulted in high staff turnover in nursing leadership and bedside nursing positions resulting in the loss of nursing professional governance council activity, members, and chairs.

Decreased unit practice council (UPC) engagement results in underrepresentation of nursing staff which prevents unit level nursing practice enhancement from being the driving force of a professional nursing governance model.

Project Purpose & Goals

Quality Improvement (QI) Project:

Development of customized Toolkit as a strategy to increase nursing engagement and strengthen the existing professional governance model

Structure Goals:

- Development of customized, evidence-based professional governance Toolkit
- Online publication of Toolkit

Process Goals:

- To operationalize a UPC on a nursing specialty unit utilizing Toolkit

Outcomes:

- Nurses will report increased satisfaction with UPC structure, activities, and membership as measured by Council Health Survey
- 100% of nurses in attendance of UPC meetings will utilize Toolkit
- Specialty unit will operationalize a UPC by :
 - Establishing members
 - Establishing officers
 - Completing UPC Charter template

Methods

Pre-intervention: Creation of a customized Toolkit guided by the evidence-based Council Health Survey (CHS) and the strategic goals of the organization

Intervention:

- Toolkit introduced to the nursing specialty unit to operationalize a UPC including:
 - Recruiting members
 - Securing officer(s)
 - Completing UPC charter

Implementation Strategies:

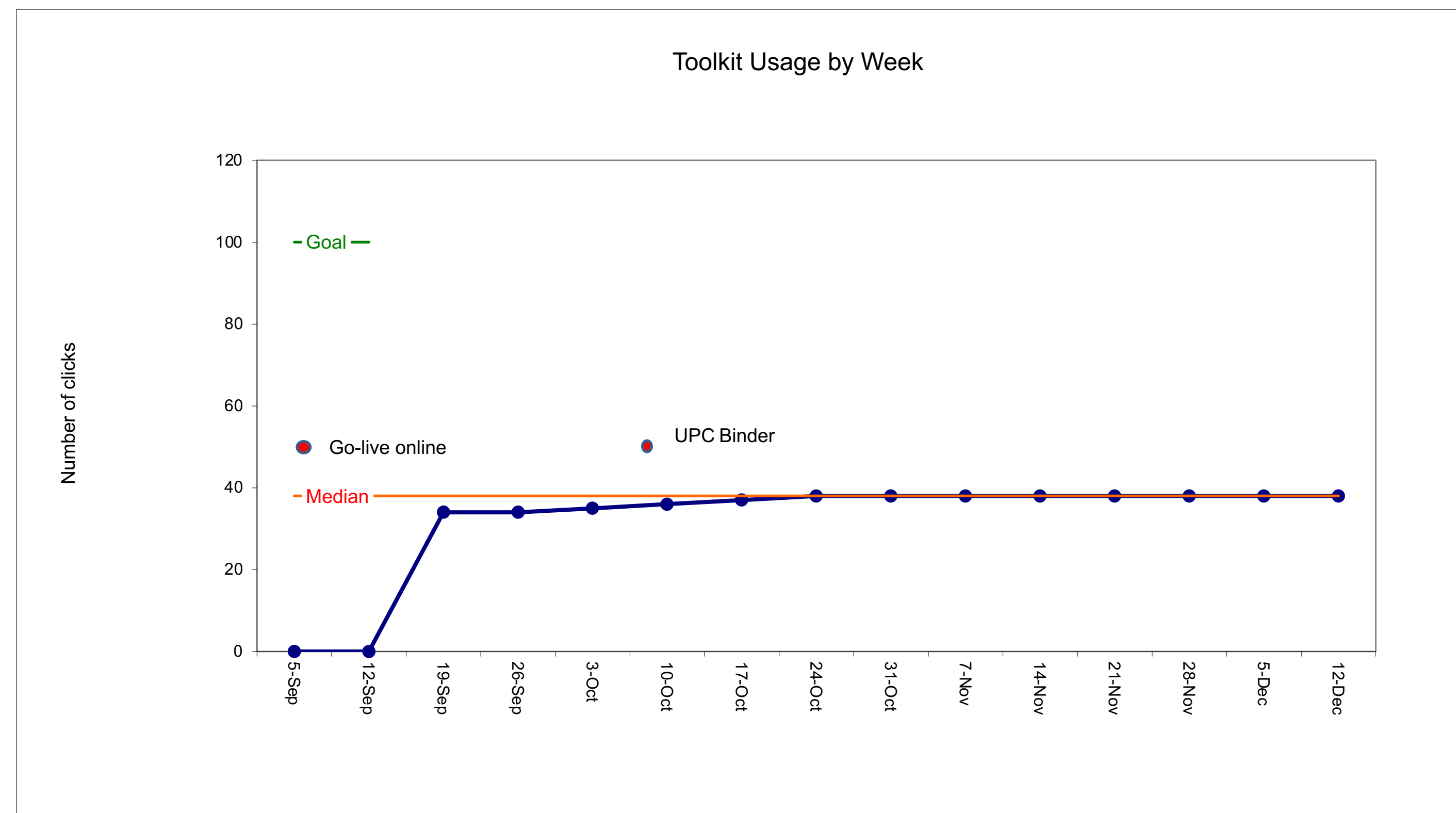
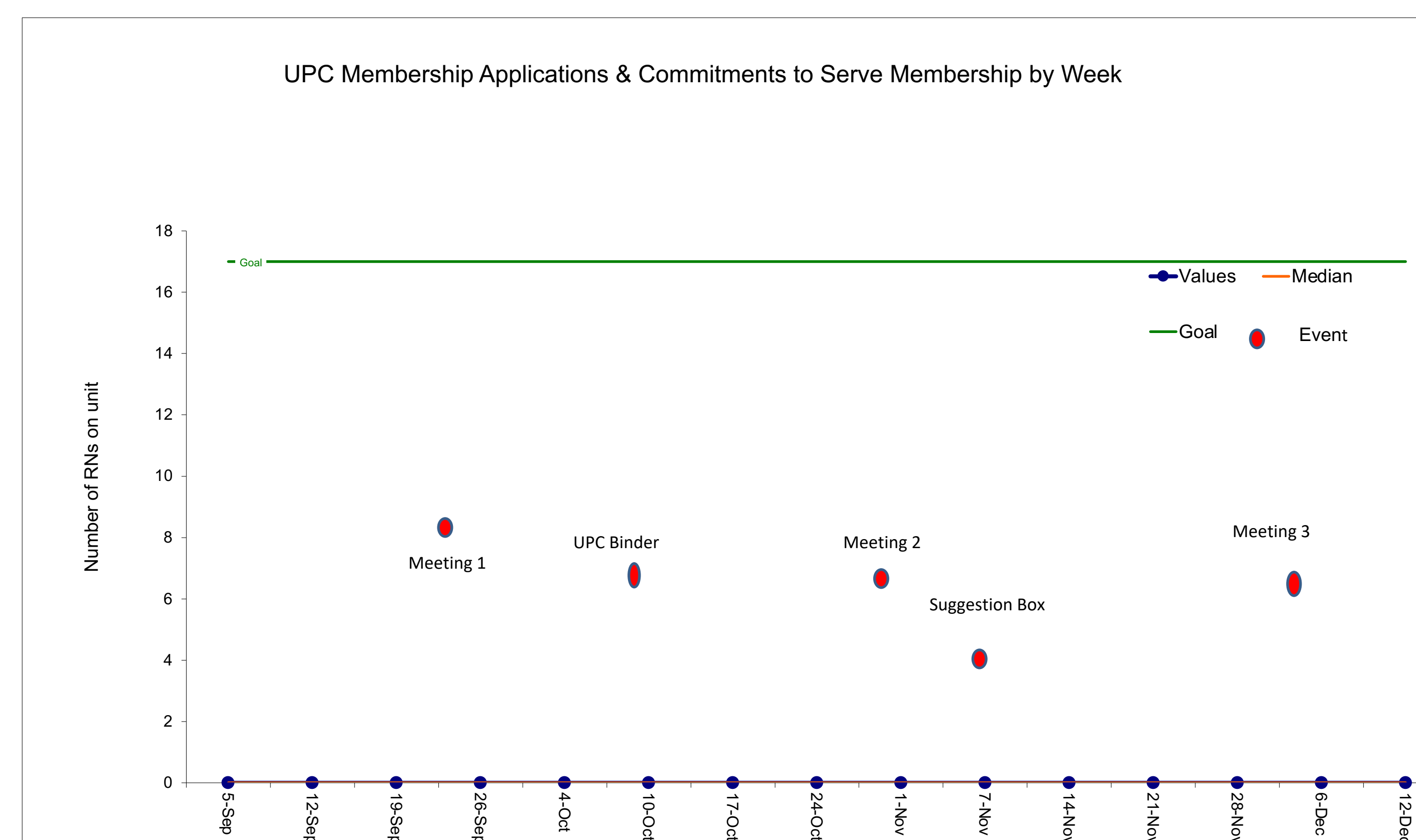
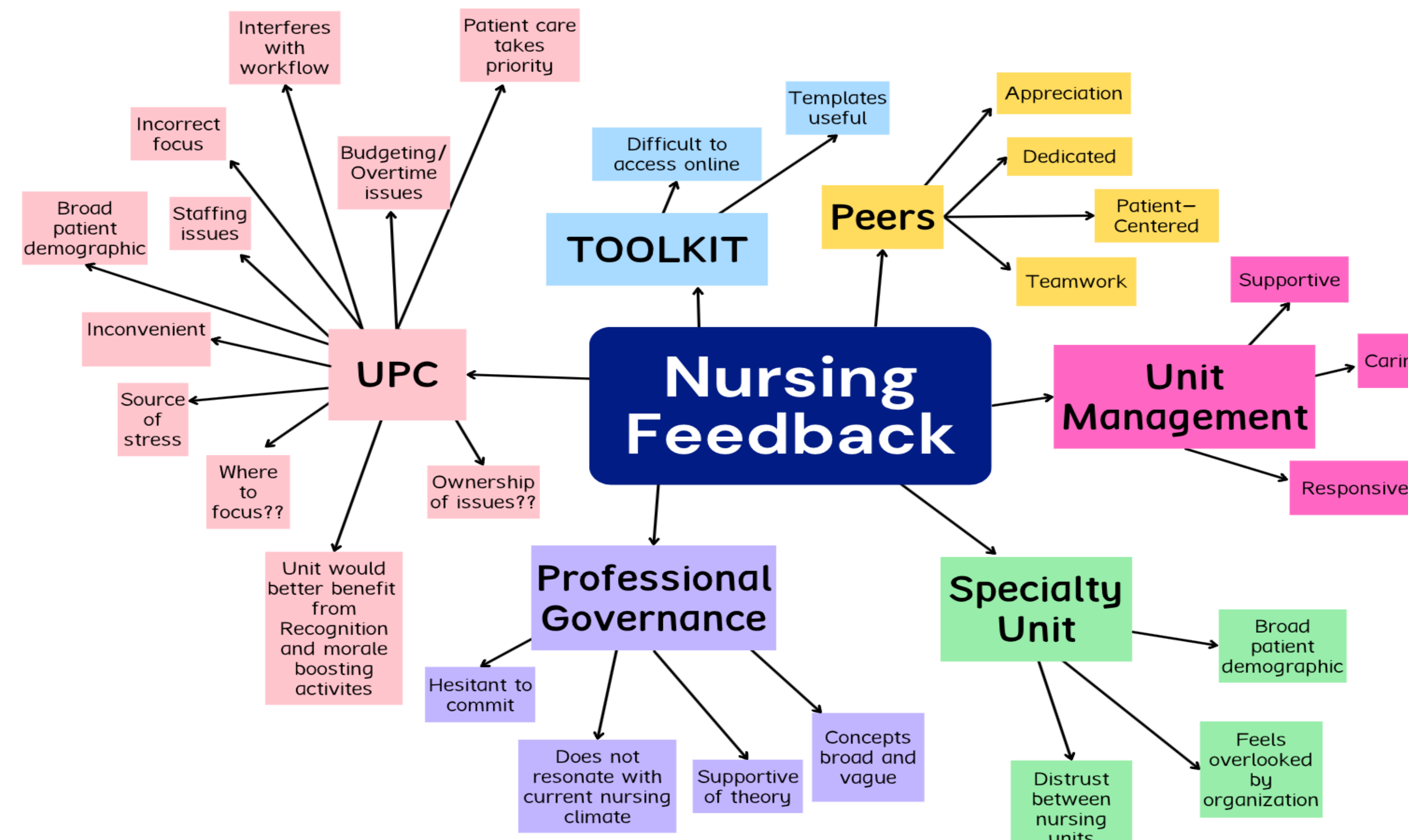
- Changes to existing structures:
 - Expanded membership eligibility
 - Updated service requirement
 - Online access to Toolkit



Scan for CHS

Data Collection:

- CHS pre- and post-surveys on perceptions regarding UPCs
- UPC meeting attendance
- Toolkit utilization
- UPC membership applications & Commitments to Serve



- Limited response to Council Health Survey
- Zero membership or commitment applications collected
- Limited attendance to council meetings
- Toolkit access likely from IT department vs nursing staff
- Nursing feedback indicates wrong focus and timing to implement UPC

Discussion

Achievements:

- Creation, adaptation and online publication of customized Toolkit
- Nurses educated on PG fundamentals, process, and significance and on Toolkit purpose, contents, function, and accessibility
- Suggestion Box and Toolkit Binder provide alternative opportunities for engagement in PG activities

Barriers:

- Unit staffing
- Staff workload
- Budgeting
- Post-COVID nursing climate
- Overturning of leadership positions

Facilitators:

- Project designated by the nursing executive leadership of the healthcare organization and the UMSON
- Unit with established UPC

Limitations:

- Limited timeframe
- Nature of specialty unit:
 - Broad patient population
 - Messaging did not resonate with nursing staff
 - Early stages of development

Conclusion

Customized professional governance Toolkit:

- Provides standardization, purpose, and direction
- Successful in increasing engagement in established UPCs
- Limited strategy in operationalizing UPCs

Professional governance is a continuous and dynamic process where support and resources must be customized to facilitate each individual UPC's success. Ongoing nursing engagement relies heavily on **organizational leadership stability, existing council structures, and the organizations commitment to supporting nurses and prioritizing professional governance activities.**

Sustainability: Future endeavors include:

- Utilizing evidence-based tools such as the CHS to assess UPC function and health
- Utilizing PG Welcome Packets included in Toolkit in new hire orientation
- Improving end-user experience for online Toolkit usage
- Optimizing structural changes introduced in by-laws
 - Expanded membership
 - Mentoring roles
 - Incorporating nursing clinical ladder in by-laws

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The dedicated nurses from specialty unit



Scan for Toolkit



Scan for References