



Strengthening Shared Governance Through Evaluation, Reform, and Education

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sentara nurse

Introduction

Sentara Martha Jefferson Hospital (SMJH) has had an active nursing Shared Governance since 2006. While the structure and processes underwent an evaluation and modifications approximately four years ago, much has changed in the time since those modifications were implemented including integration with a large healthcare system, a new hospital president, and a new Chief Nurse Executive. Hospital-based Shared Governance council attendance has been declining, which has impaired communication between units and hospital councils. At the same time, as part of a healthcare system, there is a need to strengthen communication between the Shared Governance levels in order to influence evidence-based practice changes. ***Can restructuring and education improve nurses’ perceptions of their influence over their professional practice?***

- A Shared Governance Steering Committee with representatives from all key levels and areas in the organization: CNO, directors, managers, current council chairs and other staff nurses, educators, and case management met weekly to perform three major tasks:
- **Evaluation** to identify focused areas for improvement
 - **Modification** of existing structures
 - **Education** to inform staff of recommended changes

Methods

- Evaluation**
- The Index of Professional Nursing Governance (IPNG) Survey along with questions specifically geared to analyze SMJH’s current processes and structures was administered to all nursing staff at the hospital via Qualtrics.
 - Focus groups were held with 3 separate groups: managers, educators, and staff nurses
 - Information from other hospitals within and outside of the Sentara system and the literature were analyzed

- Modification**
- Structure modifications were made to better align with the healthcare system councils
 - Process modifications were made to improve communication throughout shared governance levels

- Education**
- Two Shared Governance Academies were offered to all staff.
 - A Shared Governance Fair was held to provide an opportunity for learning and questions.

Measures

- A pre and post evaluation survey was administered at the Shared Governance Academy.
- All nurses were re-surveyed using the additional questions included with the original IPNG survey.



Discussion

The full IPNG survey will be repeated in 2019, after the changes have been in place for at least one year. The organization will continue to evaluate shared governance function, offer support to councils and/or individuals, and modify procedural guidelines as needed via the Shared Governance Coordinating Council. An evaluation of our shared governance status using the IPNG survey should be completed bi-annually and evaluated by the Shared Governance Coordinating Council that will remain in place and continue to meet monthly.

Conclusion

Modifying shared governance structures and providing a variety of educational offerings in order to address knowledge deficits and barriers and improve communication have proven to be successful in improving nurses’ perceptions of their influence over their professional practice. Engaging staff by including them in the decision-making process, focus groups, and regular updates on the work being done are critical to success.

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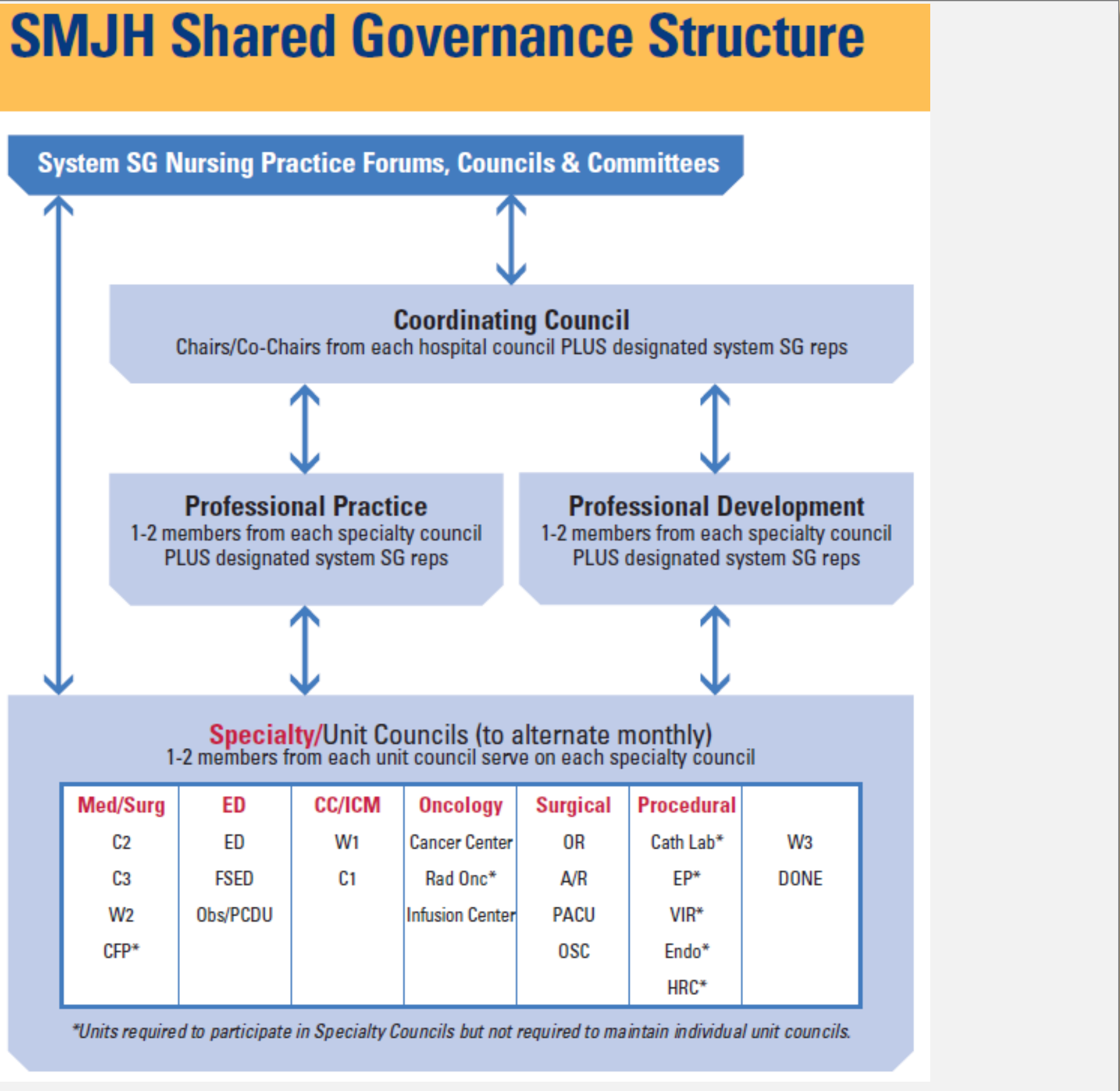
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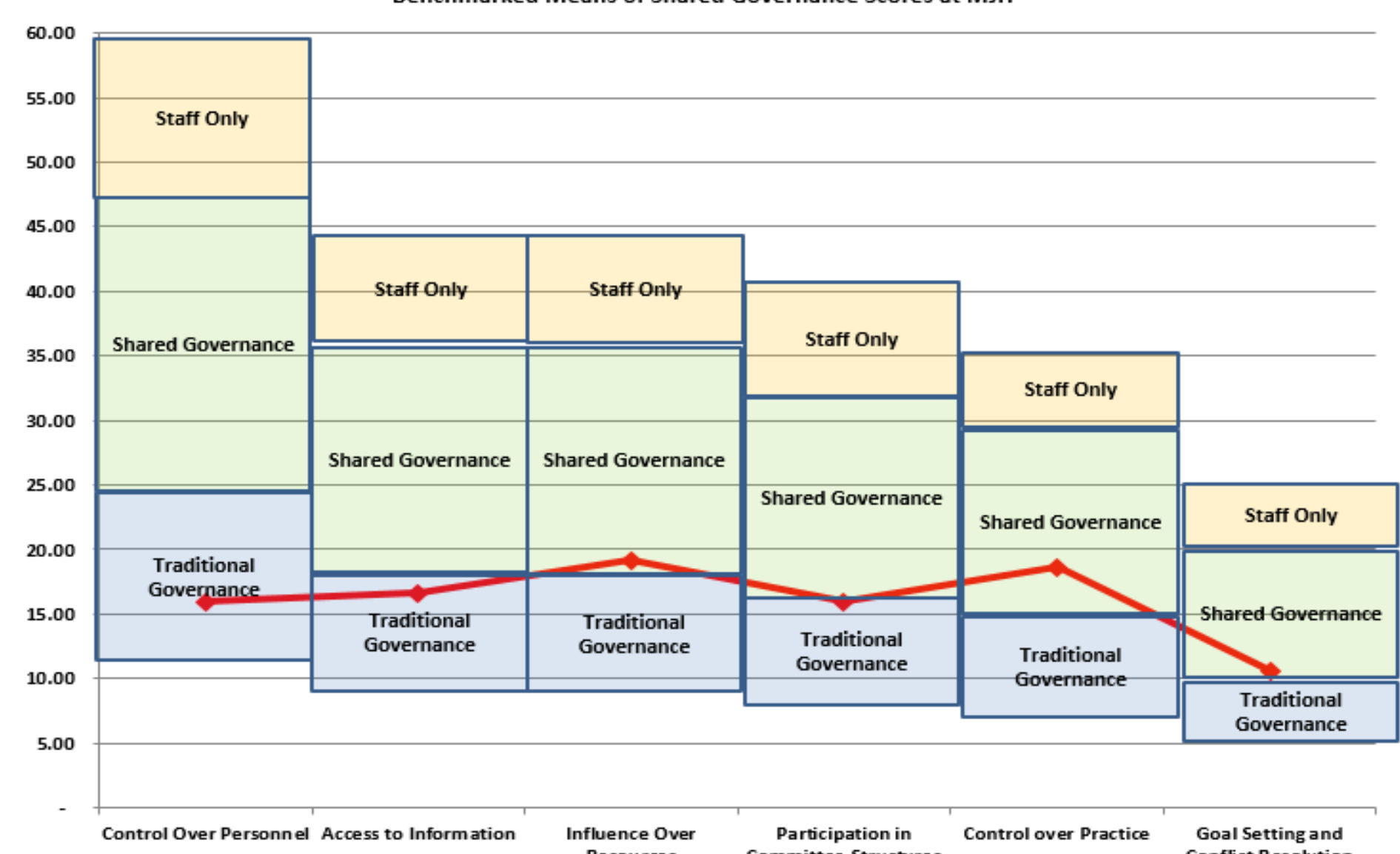
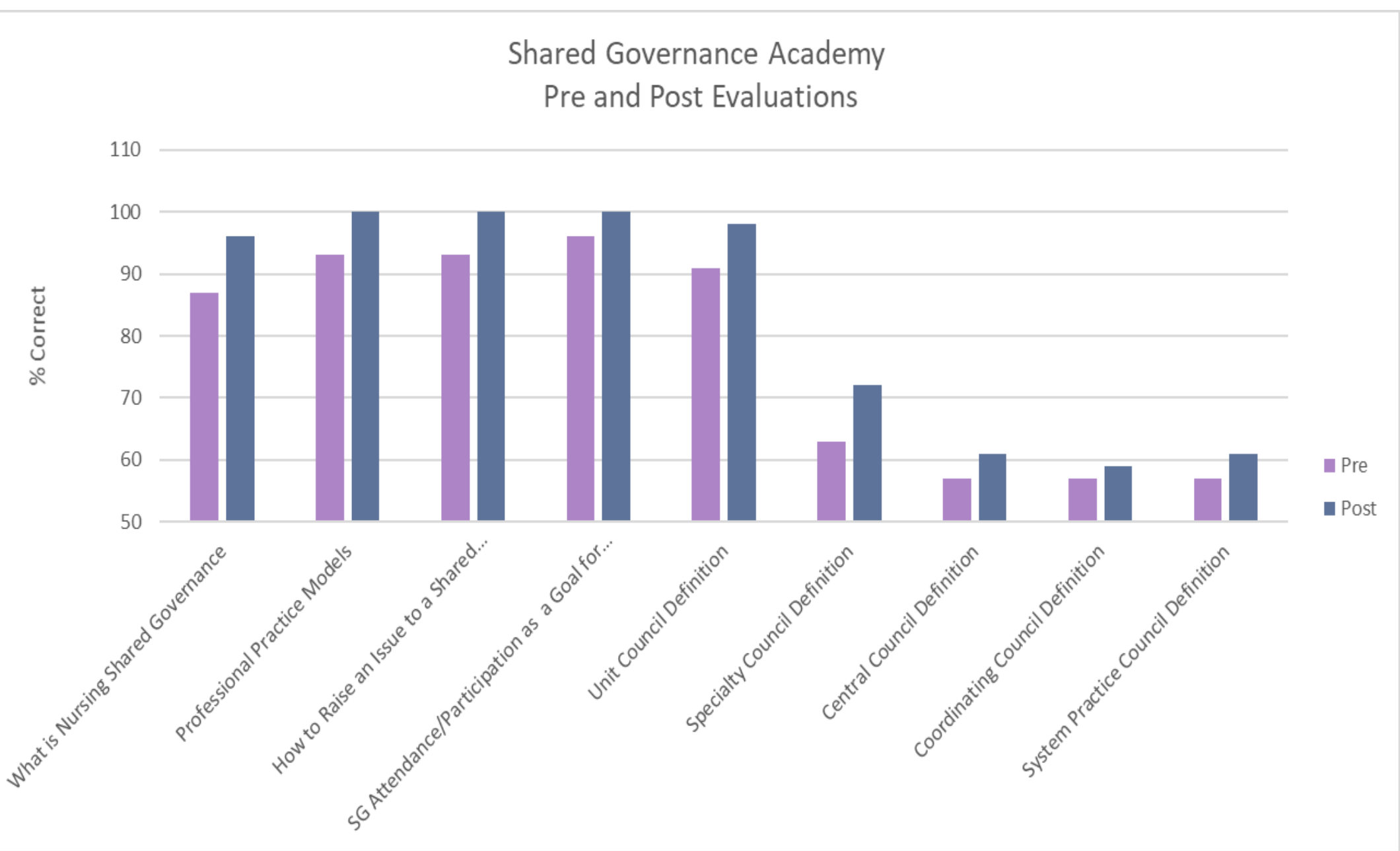
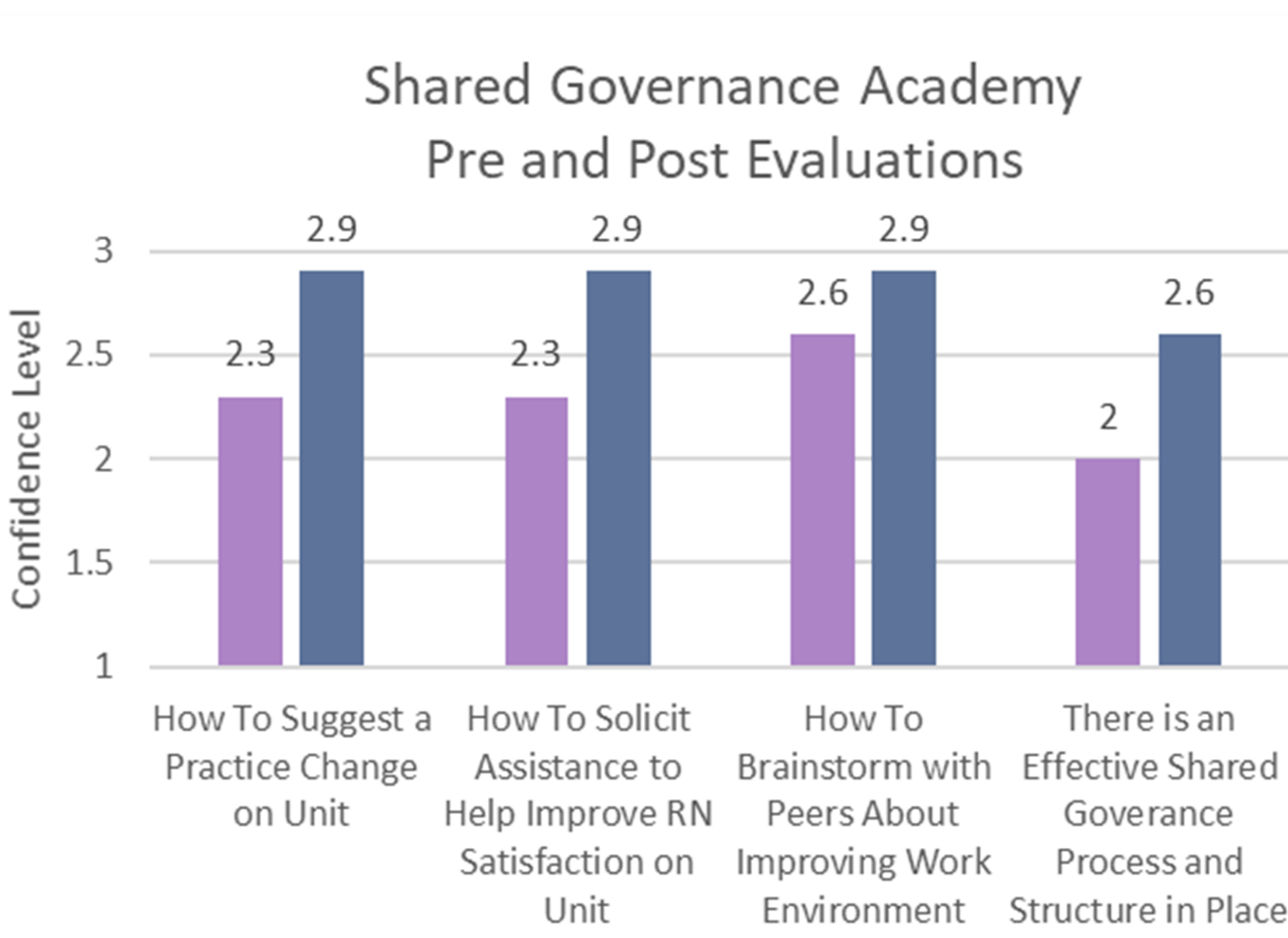
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Results

Redesigned Shared Governance Structure



Quantitative Results



Initial evaluation results show improvement in confidence in and understanding of an effective shared governance process and structure

Pre-intervention IPNG results indicate a “traditional governance/shared governance” model. Results will be compared to post-intervention data.