



# **Fakeeh Care Nursing Shared Governance Bylaw**

**Edition Two**

**(2022-2023)**

Edition One : 2020-2021

Reviewed by Nursing Dept

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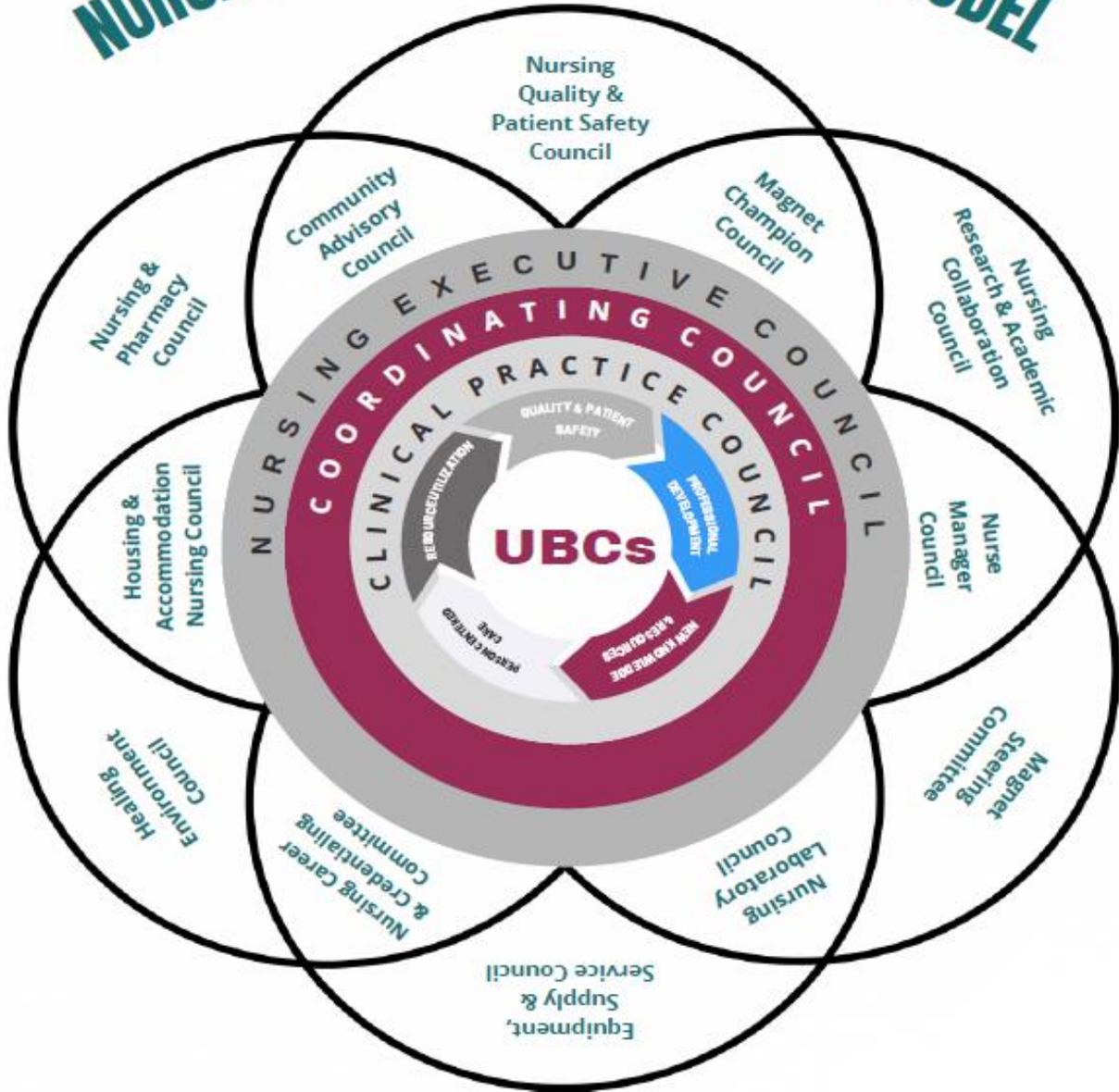
**Approved by:**

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# FAKEEH CARE

## NURSING SHARED GOVERNANCE MODEL



## **I. Background**

The shared governance model emphasizes nursing staff participation in decision-making, encourages collegial relationships, and attempts to build consensus in professional practice matters. It allows employees at all levels of the organization to engage in the development, implementation, evaluation, and improvement-- of nursing practice.

The Nursing Executive Council (NEC), as part of this shared governance model, evaluates current processes and, as needed, makes changes to the shared governance model and Statement of Governance to improve department-wide participation by staff at all levels. This document detailing the shared governance model is reviewed and revised by the NEC every year.

The Nursing Executive Council (NEC), relays the choices, revisions, and plans made by the unit-based councils to the hospital committees. This could help to improve nurse practice while also advancing the hospital's strategic goals, purpose, and vision.

Fakeeh Care's nursing division has recently shown a heightened interest in critically analyzing the nursing care provided to patients. This was a major source of worry, prompting the hospital's nursing staff to reject intuition-based nursing practices in favor of providing nursing care based on methodically derived sets of understandings about patients and their nursing care needs.

This necessitated Fakeeh Care making a shift toward nursing and establishing itself as a separate set of activities from medicine and other paramedical professions.

## **II. Shared Governance**

Fakeeh Care nursing uses the leadership concept of shared governance. Nurses must be empowered in order to care for their patients and have faith in their abilities. Nursing practitioners are familiar with and use the notion of collaboration. Nurse leaders work with their staff to develop, train, and execute new patient-care processes. Collaboration, problem-solving, and accountability are all part of this process, with the ultimate goal of increasing employee satisfaction, increasing productivity, and enhancing patient outcomes.

All nursing decisions are shared with all nursing members, which is another part of shared governance. This doesn't just apply to nursing; it also applies to sharing information with other members of the healthcare team for the benefit of the patient. The overarching goal behind this empowerment is to improve nursing practice.

## **III. Purpose:**

Fakeeh Care's shared governance model is an organizational structure in which clinical nurses have a say in nursing practice, standards, and care quality.

- To provide high-quality nursing care to patients who are admitted to or treated at any of Fakeeh Care's facilities, departments, or services.
- To encourage professional nurses to achieve high levels of performance.
- To define and assess the practice of professional nursing.
- Encourage nurses to participate in initiatives that promote excellence in patient care, education, and scientific research.
- To establish a channel or system for effective communication among members of the Nursing Shared Governance.
- To encourage and foster collaboration among the nursing, medical, and administrative staffs, as well as community resources.
- To encourage nursing professional development.
- To advance professional knowledge and expertise in nursing care by promoting clinical competency and basic research.

- To give Fakeeh College students with a stimulating clinical setting.
- Establish and maintain nursing practice requirements that are in accordance with the institution's corporate bylaws, policies and procedures, and governance rules.
- Conduct a needs assessment and subsequent community outreach, with a focus on vulnerable populations. The provision of education and access to care, as well as other needs recognized by the NEC and associated committees/Councils, is classified as outreach.
- To promote the presence and voice of nurses in national healthcare problems. (e.g., professional associations and periodicals)

#### **IV. Members**

Through appointed representatives on the councils, all registered nurses will be eligible to participate in Shared Governance.

- Members are responsible for their own nursing practice.
- Unit representatives on each council are chosen or voted by their peers.
- Using the Councils' processes to resolve nursing issues.
- Members are responsible for keeping updated about the Shared Governance Councils' actions and activities (SGC).
- Members are eligible to vote in the Council elections.
- Members may participate in the organization's activities.
- Members must not be involved in any disciplinary action (written or verbal) or a Performance Improvement Plan in their department in the last 12 months.

#### **V. Chairpersons and Co-chairpersons**

- The elected Chairperson of the SGC shall be Chairperson and Co-Chairperson.
- The Chairperson shall serve for a term of 1 year
- The Co-Chairperson shall serve a term of one year following the completion of the 1-year term of the Chairperson.

- A vacancy in the position of Chairperson will be filled by the Co-Chairperson. A vacancy in the office of Co-Chairperson shall be filled at the discretion of the individual Council to serve until a successor is elected.
- Following the completion of their term, the Chairperson will be recognized as Immediate Past Chairperson, and will serve in this role for a year.

#### **VI. Chief Nursing Officer**

By administrative appointment, the Chief Nursing Officer (CNO) has power and accountability for the practice of nursing within Fakeeh. Care. The CNO, in collaboration with SGC shall:

- Obtain and provide administrative support for the SGC's work.
- Listen to and consider the concerns of professional nurses.
- Assist in the development of clinical and organizational goals for competent nursing at Fakeeh.
- Assist in the development of activities and procedures to meet clinical and administrative objectives.
- Assist others by acting as a facilitator

#### **VII. Nominations and Elections**

##### **Members:**

- The term of service for council members shall be two years, with a member from each unit elected every two years except for specifically designated positions
- Members of the councils shall be involved through peer election on their unit/area.
- No member may serve more than two consecutive terms with the exception of specifically designated positions.
- If an elected position becomes vacant during a term on a hospital council, the Unit Based Council will appoint an interim replacement membership.

##### **Chairpersons and Co- Chairperson:**

- An eligible member to serve as a UBC Chairperson or Co-Chairperson must be a Registered Nurse, not a nursing leadership position.



- The individual councils shall solicit nominations with qualified candidates for Chairperson-elect. The names shall be published via electronic and paper announcements on or before December 15th.
- Elections will be held annually beginning in January; and will be communicated to all units to facilitate voting opportunities for all shifts.
- The Council shall select two tellers at the January election meeting to count and validate the results of the vote. Tellers may not be elected chairpersons or chairpersons-elect of the Council.
- The Chairperson of the Council will abstain from voting in electing the Chairperson. The Chairperson will cast the deciding vote in the event of a tie.

#### **VIII. Duties of the Chairperson**

- Serve as a leader and official representative of the individual Council.
- Lead the SGC in achieving the purposes of the organization.
- Preside over meetings of the membership, the nursing leadership, and other groups as required to accomplish the work of the SGC.
- Advise on matters affecting the nursing practice in consultation with the other Chairpersons.
- Assure processes for ongoing innovation and evaluation of nursing care delivery models.
- Facilitate the conduct, dissemination, and utilization of research applicable to nursing and health care delivery systems.
- Receive and consider professional nursing concerns.

#### **IX. Meetings**

- The SGC meetings shall be held no less than monthly and chaired by the Chairperson.
- In the absence of the Chairperson, the Co-chairperson shall chair the meetings.
- Special meetings of the Councils may be held upon the call of the Chairperson.

**X. Shared Governance: Unit-Based Councils**

The size and structure of the individual unit-based councils reflects the unique characteristics of each unit. Membership includes registered staff nurses, Clinical Resource Nurses, and Charge nurses.

**A. Quality and Patient Safety Council:**



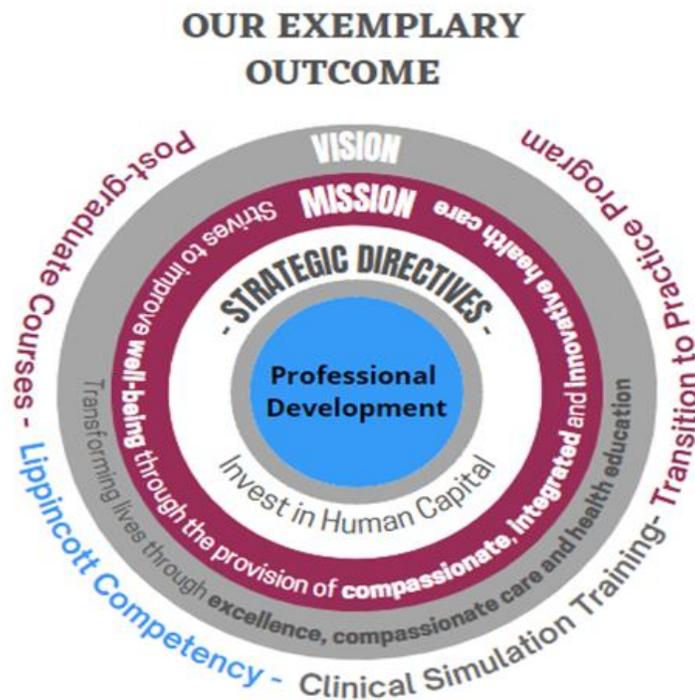
Exist at the departmental level, led by nursing staff to evaluate nursing quality performance metrics and nurse-sensitive indicators to maintain clinical nursing practice safety standards consistent with evidence-based practice and requirements of regulatory agencies.

**Objectives:**

- To make action plans based on the discussed indicators which need improvement
- Establish and participate in the performance improvement projects

- Participate in policy development and revision based on evidence-based practices
- Ensure that the indicators are distributed to nursing areas to update the quality board quarterly.
- To discuss the policy updates.
- To provide feedback about changes put into place based on event reports.
- To determine activities to be referred to peer review.

**B. Professional Development Council:**



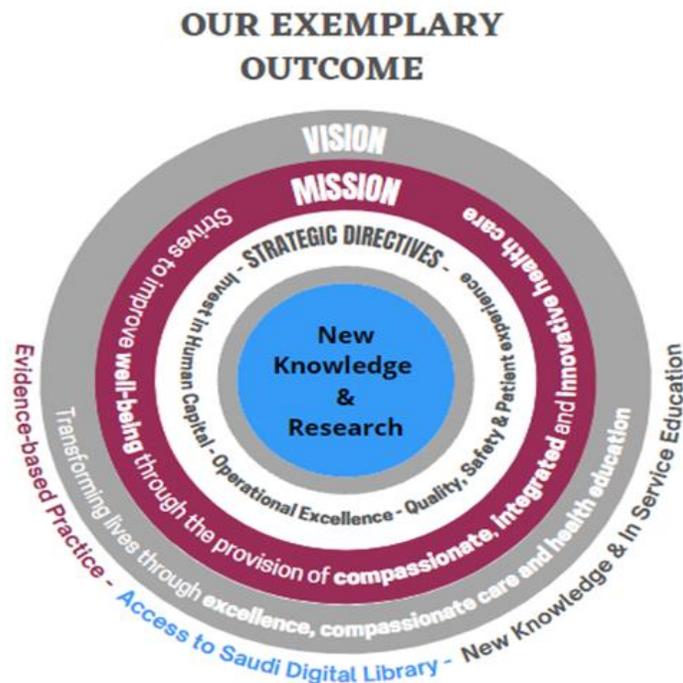
Exist at the departmental level, led by nursing staff to foster support and resources for professional growth of Fakeeh Care nurses. To assess the educational needs of staff and plan, implement and evaluate the effectiveness of educational programs developed and presented.

**Objectives:**

- To assist in planning, development, and teaching of the nursing competencies.
- To encourage the professional growth of bedside staff through positive acknowledgments of achievements of individuals and the team.

- To promote the leadership of professional growth for succession planning.
- To create support systems for certifications and educational achievement.
- To provide an opportunity for nurses to utilize clinical simulation to develop and enhance nursing knowledge, communication, and critical thinking skills.
- To assist in identifying and facilitating the learning needs of nurses.
- To support nurses' transition into the organization and nursing workforce.
- Provide assistance with "hands-on" clinical support in collaboration with the Clinical Resource Nurse.

C. New Knowledge & Research Council:



Exist at the departmental level, led by nursing staff to contribute to nursing knowledge through research endeavors and foster staff member knowledge and skills in nursing research and evidence-based practice.

**Objectives:**

- To institute the latest evidence-based best practices.

- To cultivate an environment of clinical inquiry that will encourage an increased number of nursing research studies and implementation of best practices at Fakeeh Care.
- Disseminate the results of research projects to the departmental staff
- To utilize provided tools and research resources to integrate into any research projects or activities.

**D. Person Centered Care Council:**



Exist at the departmental level, led by nursing staff to implement effective nursing leadership and management practices to secure the adoption of positive workplace management initiatives.

**Objectives:**

- To promote and sustain a healthy workplace environment for the staff, patients, and their families.

- To participate in the staff satisfaction survey, analyze results and implement action plans for improvement.
- To develop a tool for accurate and timely communication to CPCs regarding council activities and nursing leadership
- To modify action plans based on the feedback of staff, patients, and family.
- To promote care partner program.

**E. Resources Utilization Council:**



Exist at the departmental level, led by nursing staff, and are responsible for developing a budget, putting together a strategy, delivering services, monitoring resources, and keeping up to date.

**Objectives:**

- Maintain adequate staffing and resources required to deliver quality care.

- To maintain staff distribution and time management.
- To improve the patient care delivery system.
- To identify proper and adequate resource utilization.
- To promote the efficient use of resources
- To promote new technologies and innovations aimed at improving resource productivity.

The councils mentioned above communicate with one another to make choices, create a practice, and implement a strategy that will increase patient/staff satisfaction, a better work environment, better patient outcomes, and career advancement.

#### **XI. The hospital councils**

The Hospital councils have to oversee and support the unit-based councils (UBC) and liaise their decisions with the hospital's highest committees for their approvals. The hospital councils are:

##### **a) Clinical Practice Council (CPC)**

Exist at the service line level, led by nursing staff, with executive champions and chairpersons representing each service line's Unit Based Councils. To support the Unit Based Councils' decisions and suggestions, as well as to discuss any issues or concerns that may affect the entire service line but are not addressed or covered by the unit-based councils.

##### **Objectives:**

- To address complicated nursing issues of the Unit Based Council (UBC) and escalate the
- issues to the Coordinating Council to provide appropriate and high-quality health services.
- The CPC serves as a decision-making body on issues related to the practice of nursing and patient care.

**b) Nursing Executive Council:**

This Nursing Shared Governance council was formed to empower all other shared governance councils to create a clinical practice work environment best suited for patient safety. Membership includes Clinical Nursing Directors, Magnet Program Director, and Chief Nursing Officer.

**Objectives:**

- NEC develops and implements action plans in collaboration with unit-based councils

to achieve nursing goals, demonstrating innovation, sustainability, participation, acculturation, and progressive outcomes.

- Participates in the promotion and recognition of the nursing profession.
- It serves as the information hub for Fakeeh. Care nursing initiatives and activities.
- All nursing shared leadership councils are accountable to NEC.

**c) Coordinating Council:**

Exist at the nursing division level, led by the staff nurses who represent each service line to review all issues and is triaged and routed to appropriate committees or council and to ensure that they are being worked on, communicated to staff, and closed along with the Magnet and Professional Development staff and nursing supervisors.

**Objectives:**

- The Coordinating Council serves as a decision-making body on issues related to the practice of nursing and patient care.
- Work together to address each element of the solution, from evidence-based to practice to oversight and accountability.
- To serve as the motivating force of decision-making of the Clinical Practice Councils

(CPC).

- To serve as the request keepers of the Clinical Practice Councils and escalate these requests to the Nursing Executive council/relevant committees to address the issues to a relevant committee accordingly.
- The Coordinating council works with senior nursing leadership, nursing education, and other patient care departments to solve issues escalated by CPC in order to ensure patient safety and facilitate optimal patient outcomes.

**d) Nursing Quality and Patient Safety Council (NQPS council)**

This Nursing Shared Governance council was formed to periodically evaluate quality performance metrics and nurse sensitive indicators to maintain standards of clinical nursing practice safety consistent with evidence-based practice and requirements of regulatory agencies. This council also will review the annual NDNQI RN satisfaction score to make necessary improvement plan in collaboration with the respective unit based councils to ensure the safe and healing working environment for nurses. Membership includes Clinical Nursing Directors, Magnet and professional development staff, Chief Nursing Officer, Unit managers, QPS-unit based council chairpersons and adhoc members accordingly.

**Objectives:**

- To discuss the nursing sensitive indicators on a quarterly basis
- To make action plans based on the discussed indicators which needs improvement
- Participate in the Performance improvement projects
- Participate in policy development and revision based on the evidence based practices
- To ensure that the indicators are distributed to nursing areas to update quality board on a quarterly basis.
- To discuss the policy updates
- To provide necessary support and guidance to QPS-UBC

**e) Housing and Accommodation Council**

The Housing and Accommodation Nursing Council was created with the goal of improving staff satisfaction by focusing on their well-being. This council is led by a staff nurse with different members from the residents of the different accommodations provided by Fakeeh Care, housing and accommodation personnel, Support Services department leaders, and nursing administrators. Through this council, nurses can voice out their concerns on their way of living that could significantly impact their satisfaction, retention, engagement, and productivity.

**Objectives:**

- To create a clear process of receiving concerns and issues from nursing staff related to housing and accommodation.
- Collaborate with other members of the council to collect concerns and issues raised by nurses.
- . To Collaborate with the Accommodation staff and leadership to discuss issues and concerns raised.
- To propose recommendations to improve well-being of staff.
- To provide feedback to nurses for issues and concerns raised.

**f) Healing Environment Council**

Healing Environment Council was created to promote excellence resilience and nursing excellence through engagement and implementation of nurse driven goals with the drive to increase satisfaction for both patient and staff.

**Objectives**

- To promote and sustain systems that ensure a healthy workplace environment for the staff and patient.
- To monitor Press Ganey Patient Satisfaction survey and engage nursing staff and other interdisciplinary departments to improve scores through action plan.
- To participate in the NDNQI staff satisfaction survey, analyze results and implement action plans for improvement.
- To modify action plan based on the feedback of staff and patient.

- To promote care partner program.
- To promote collaboration among nurses, physicians, and other multidisciplinary departments to coordinate care for patients, maintaining respect, dignity and recognition of each person's contribution.

**g) Community Advisory Council**

It is a team of nursing that aims to spread awareness in the community inside, outside the hospital, locally and globally.

- improve lives and strengthen communities through full awareness inside and outside of the hospital
- is to make the community more informed, alert, self-reliant and capable of participating in all activities and programmers of disaster management in close collaboration with government and non-governmental organizations
- Participate in all world days
- to increase the community's knowledge of the available programs and services offered.
- Participate with different categories of organization
- Identify community needs and requirements
- Engaged with the community
- Endorse nursing role to community.

**h) Magnet Champion Council**

Purpose of this council is to serve as the motivating force of decision-making of the Unit Based Councils.

**Objective is to** teach, promote and maintain shared decision making in all nursing department.

**i) Nurse Manager Council**

The purpose of this council is to serve as the effective resource management in assuring excellence in patient care and nursing practice

**Objectives**

- Obtain departmental nursing feedback and input regarding patient care, nursing practice issues, and changes across the organization
- Inform and make recommendations to nursing administration regarding management issues
- Address management recommendations from various task forces and assists peers in developing and evaluating effective recruitment and retention strategies and goals
- Develop and implements strategies for recognition of exceptional aspects of nursing governance, care, and practice across the organization

**k. Nursing Research and Academic Collaboration council**

Nursing research and academic collaboration was established with the collaboration of Fakeeh. Care nursing and Fakeeh college for medical sciences. The members of these council includes Chief nursing officer, Clinical nursing directors, Magnet and professional development staff, Professors from nursing college and staff nurses. The main purpose of this council is to promote and cultivate the research culture activities of Fakeeh. Care also provide and support education and consultation to nursing staffs regarding conducting research studies, EBP projects, proposal development, resources and grant funding.

**Objectives**

- Promote the professional collaboration between nursing college and nursing division for joint appointment for weaving together nursing practice, education and research.
- Provide a liaison to the department of nursing services and patient care shared governance committees and councils as appropriate.
- Provide direction and support to nursing division in accessing simulation lab to develop critical thinking and clinical decision making skills.

**l. Magnet Steering Committee**

Provides oversight of the Magnet Program and implementation of creative systems, processes, shared decision making and clinical practices that improve patient care delivery. Responsibilities include ensuring the Magnet Program framework and essential

domains are enculturated and hardwired into the organization through coordination, education and consultation with leadership. Coordinates all aspects of the ANCC Magnet application, annual reports and re-designation process.

#### **Objectives**

- To launch an effective gap analysis
- To develop and oversee plans to meet magnet recognition
- To review and discuss budgets and resources needed for acquiring magnet recognition
- To review education plan for magnet standards
- To Maintain correspondence with Magnet recognition bodies
- To create and maintain shared governance bylaws and an infrastructure
- To give quarterly update to ASC committee

#### **m. Nursing Career and Credentialing Committee (NCC)**

The Nursing career and credentialing committee is created to establish and maintain a uniform, fair, just process and criteria to review, implement, maintain credentials and to justify applications and approval to the nursing career ladder.

#### **Objectives**

- Review of the Career Ladder policies and procedures
- Submit the yearly career ladder program for approval on a yearly basis and based on previous year evaluation and outcome.
- Provide individual counseling and consultation when requested so as to assist eligible registered nurses in their career development planning.
- Ensure readily available talent for key positions and titles by internal talent assessment and orientation and assessing external talent so as to assure the agility and preparedness in the event of position vacancy.
- Set the rules (criteria, justification, inclusion and exclusion) for acting up roles in the event of possible transition into new step in ladder.
- Review/approve credentials and dataflow report related to ongoing qualification updates for Fakeeh Care nurses.
- Review and approve privilege to perform high risk nursing procedure.

**n. Nursing and Laboratory council**

This council consist of nurses and laboratory team who shares communicate issues related to both parties in order to improve communication ,process and policies

**Objectives**

- To have a process in raising issues and concern by Nursing.
- To insure that all issues and recommendations related to nursing and laboratory that are raised by nurses are acted upon.
- To review policy and procedure related to laboratory in collaboration with nursing.

**o. Equipment, supply and Services Council**

This council is created to escalate and manage nursing issues related to equipment, supplies or services within the specialty or depts.

**Objectives:**

- To ensure that selected supplies and medical equipment conform with safety and quality standards
- Reports concerns regarding supplies/equipment /services to the relevant parties
- Participate in the evaluation of supplies or equipment
- Collaborate to implement new services in the depts.

**p. Nursing and Pharmacy Council**

A staff nurse chairs this council to coordinate, discuss, and improve the work environment, staff satisfaction, and services related to nursing and pharmacy-related issues.

**Objectives**

- To foster collaboration between Nursing and Pharmacy
- To provide guidance and support on issues related to Pharmacy and IT (e.g. closed-loop administration and pyxis)
- To support the development, planning, and implementation of activities or projects related to IT, Supply Chain Pharmacy, and Nursing Issues

## **XII. Conclusion**

Nursing is a theory that combines art and science, and caring is a skill that nurses are expected to use when working with patients. As the routine has put humanity on hold, away from everyday clinical engagement, it is rebuilding compassion and bringing it back into healing. A nurse is a force that heals and encourages a patient's progress. The potential for healing is great and unparalleled when this energy is accompanied by politeness, generosity, kindness, courage, honesty, tolerance, and compassion. Through their unit-based councils, Fakeeh Care nurses has a strong say in the shared governance processes directly impacting their role.

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