

## Lehigh Valley Health Network Nursing Shared Governance Model

The framework for the shared governance model at Lehigh Valley Health Network is based upon concepts inherent within the American Nurses Credentialing Center’s Magnet Recognition Program® model.<sup>1</sup> The specific Magnet model components and concepts are as follow:

### Transformational Leadership

- ◆ Wherever nursing is practiced, there are structures, processes and expectations for staff nurse input and decisional involvement.

### Structural Empowerment

- ◆ Nurses are involved in shared governance and decision-making structures and processes that establish standards of practice and address opportunities for improvement.

### Exemplary Professional Practice

- ◆ Nurses create patient care delivery systems that delineate the nurses’ authority and accountability for evidence-based nursing practice, clinical decision-making and outcomes, performance improvement initiatives, and staffing and scheduling processes.
- ◆ The autonomous nurse provides care based on the unique needs and attributes of the patient and family/support system.
- ◆ Nurses at all levels analyze data and use national benchmarks to gain a comparative perspective about their performance and the care patients receive. Action plans are developed that lead to systematic improvements over time.

### New Knowledge, Innovations, and Improvements

- ◆ Nurses are educated about evidence-based practice and research, enabling them to appropriately explore the safest and best practices for their patients and practice environment and to generate new knowledge.

### Empirical Outcomes

- ◆ Nursing makes an essential contribution to patient, nursing workforce, organizational, and consumer outcomes.
- ◆ The empirical measurement of quality outcomes related to nursing leadership and clinical practice is imperative.

These core values and beliefs not only serve as the underpinnings of the shared governance model, they also prompt the identification of key components of care delivery nurses and their colleagues are empowered to effect through decisional involvement. These decisional components are:

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| <p><b>I. Clinical Practice</b></p> <p><b>II. Quality</b></p> <p><b>III. Evidence-Based Practice &amp; Research</b></p> | <p><b>V. Professional Excellence</b></p> <p><b>V. Collegial Review and Recognition</b></p> <p><b>VI. Operations</b></p> |
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The shared governance model is operationalized within the organization as a whole, as well as individual departments/patient care units. A councilor structure<sup>2</sup> is utilized at both the organizational and department/unit level. Development of the model is an evolutionary process, with continual maturity and refinement of the conceptual framework and key decisional components occurring on an ongoing basis.

*Continued*

<sup>1</sup>American Nurses Association. (2014). 2014 *Magnet® Application Manual*. Silver Spring, MD: American Nurses Credentialing

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Center.

**Appendices**

Appendix A -- schematic diagram of the organization shared governance structure

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# Nursing Practice Decisional Involvement

Structure and Opportunities at the Organizational Level

Decisional Components					
Operations	Collegial Review and Recognition	Professional Excellence	Evidence-Based Practice/ Research	Quality	Clinical Practice
<b>Councils/Work Groups/Improvement Teams</b>					
Night Shift Nurses	Professional Excellence	Professional Excellence:	Nurse Evidence-Based Practice and Research	Peer Review	Nurse Practice
Nursing Strategic Vision		<ul style="list-style-type: none"> <li>• Career Development and Awareness;</li> <li>• Community Outreach</li> </ul>		Catheter Associated Urinary Tract Infections	Patient Care Coordinators
Patient Care Operations				Falls: <ul style="list-style-type: none"> <li>• Clinical Practice</li> <li>• Education</li> </ul>	Patient Care Specialists
RN Advisors				Lab Labeling	
				Restraints	
				Skin: <ul style="list-style-type: none"> <li>• Practice &amp; Education</li> <li>• Critical Care</li> </ul>	
				Ventilator Associated Pneumonia	