# **Nursing Bylaws**

Aspirus Wausau Hospital Wausau, Wisconsin

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# **Aspirus Wausau Hospital Nursing Bylaws**

The Nursing Bylaws document was designed by professional nurses for professional nurses in an effort to recognize the impact nursing has on patient care at Aspirus Wausau Hospital (AWH) and within the Aspirus organization. This document is an affirmation that nursing excellence is the standard of care that is expected within the organization and the profession, and optimal patient outcomes are the goals we strive to meet. These goals can be met through professional accountability and ownership of the nursing profession. This comprehensive document strives to delineate the contributions that nursing makes to AWH, define the role of the professional nurse at AWH and identify those tools available to nurses in the pursuit of excellence.

This document was created by nurses, for nurses. All professional nurses have the ability to make recommendations to Hospital-wide Coordinating Council for changes to this document. The understanding is that this document is a fluid document that will need to have periodic reviews and modifications to meet the changes within the organization and the nursing profession.

# Aspirus Wausau Hospital Nursing By-Laws

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#### Article I Definitions

#### **Section 1: Purpose of Nursing Bylaws**

The purpose of nursing bylaws is to delineate the role of the registered nurse in the delivery of care at Aspirus to the community, in accordance with the Nurse Practice Act of the State of Wisconsin which defines the scope of nursing practice in Wisconsin. (Wisconsin State Statute 441 updated 04-13 and Chapter N6 Standards of Practice for Registered Nurses and Licensed Practical Nurses. Register, July 2006). These bylaws are based upon the tenet that nursing is a self-directed and self-governing profession, which is accountable to the community in which the nurse serves. This community includes patients within Aspirus Wausau Hospital (AWH) as well as those in the community that AWH serves. The professional registered nurse will ensure the delivery of quality care using evidence-based practice while keeping the individual patient's needs in mind. The professional registered nurse will encourage collaboration among nursing staff, physicians and other disciplines for the patient's benefit. The professional nurse will foster learning, stimulate professional growth of the nursing staff and will promote nursing research. The professional nurse will continuously seek information that improves patient care in an innovative and cost effective manner. AWH nurses continuously strive to achieve the AWH mission with a passion for excellence and compassion for people. This pertains to all nurses at AWH that require a registered nurse license as part of their job description.

#### **Section 2: Definition of the Registered Nurse**

A Registered nurse is a person who practices professional nursing. "Professional nursing means the performance for compensation of any act in the observation or care of the ill, injured or infirm, or for the maintenance of health or prevention of illness of others, which act requires substantial nursing skill, knowledge or training, or application of nursing principles based on biological, physical and social sciences". Professional nursing includes the observation and recording of symptoms and reactions, the execution of procedures and techniques in the treatment of the sick under the general or special supervision or direction of a physician…and the execution of general nursing procedures and techniques." (Taken from Chapter 441 Board of Nursing subchapter I Regulation of Nursing).

#### **Section 3: Nursing Philosophy**

Nurses at Aspirus Wausau Hospital have adopted the view that health and illness states are an important aspect of the journey that involves patients and their families. This journey is traveled throughout their lives. Nursing assists patients and their families along the journey through the healthcare system via collaboration, integration and facilitation. The patient is the focus of this process and optimal patient outcomes are the goals. These goals are achieved through use of evidence-based practice, commitment to nursing excellence, and the compassionate care provided through application of the principles of Relationship-Based Care (RBC). Nurses achieve excellence through professional accountability and use and application of research to improve the quality of care delivered to our patients. The nursing profession is advanced through professional accountability, research and application of evidence-based practice. This enhances the nursing care delivered at AWH. Nursing is empowered with the authority and accountability to guide patients and their families through the healthcare system and the achievement of optimal patient outcomes.

#### **Section 4: Values**

AWH nurses endeavor to meet Aspirus Core Values as set forth below:

**Compassion:** We care for our patient above all.

**Excellence:** We create, innovate, and embrace change.

**Integrity:** We honor our commitments.

**Collaboration:** We work well together across the Aspirus system. **Fiscal Accountability:** We prepare for the future of health care wisely.

#### **Section 5: Standards of Magnetism**

Professional nurses at the Magnet-designated AWH follow the tenet that professional nursing is self-governed and self-directed. This tenet can be delineated in the Standards of Magnetism, from the American Nurses Credentialing Center as listed below:

http://nursecredentialing.org/Magnet/ProgramOverview/New-Magnet-Model

#### **Transformational Leadership**

Knowledgeable, strong, innovative leaders work to solve problems and empower staff and to transform the organization to meet the challenges of the future. The CNO and senior leadership create the vision, and then provide the systems and environment necessary to meet that vision. Nurses serving in leadership positions are visible, accessible, and committed to communicating effectively with staff.

Continuing assessment by the CNO and nursing leadership provide strategic and quality plans for nursing and patient care. Nursing council members participate in the decision-making process and the implementation for these plans. Feedback is encouraged and valued and is incorporated from staff at all levels of the organization.

#### **Structural Empowerment**

The organizational structure is flexible and decentralized, allowing for nurse participation in self-governance. Communication structures are in place which allow for decision-making and transfer of information between and among staff members and the leadership team. The CNO reports to the COO and serves on high level committees. Other nurse leaders also serve on councils and committees which address high quality, safe patient care.

The organization has systems and processes in place which support professional learning and advancement. Nurses at all levels are involved in professional and community groups to develop strong partnerships to improve patient outcomes and encourage educational advancement. Nursing is recognized for their contribution to patient/family outcomes.

#### **Exemplary Professional Practice**

Exemplary professional nursing practice is the hallmark of a Magnet organization. Nurses must understand the role of nursing and the application of that role with patients, families and the interdisciplinary team. Nurses are expected to practice autonomously, consistent with professional standards. Disciplines collaborate to provide care that is comprehensive and coordinated. All members of the healthcare team make essential and meaningful contributions to clinical outcomes.

Nurses participate in quality and safety initiatives to improve care. Data are analyzed to determine the quality of care received. Action plans are developed and implemented which lead to improvements in care.

The professional practice model provides a framework for nursing practice and the care delivered by all disciplines. The model depicts how nurses practice, collaborate, and communicate to provide the highest quality care.

#### New Knowledge, Innovations, and Improvements

Research, evidence-based practice, and quality improvement processes are integrated into the clinical and operational structures. Nurses are educated about evidence-based practice and research to allow them to explore and implement best practices.

#### **Empirical Quality Outcomes**

Quality outcomes related to nursing leadership and clinical practice are measured and reported to demonstrate the contribution of nursing to patient, nursing workforce, and organizational outcomes. Outcome data shows both areas of improvement and those that require additional effort. Outcome data are compared to baseline data and national benchmarks whenever available.

#### **Section 6: Changes in Nursing Bylaws**

All professional nurses have the ability to make recommendations to Hospital-wide Coordinating Council for changes to this document. The understanding is that this document is a fluid document that will need to have periodic reviews and modifications to meet the changes within the organization and the nursing profession.

#### Article II Roles and Services

#### **Section 1: Role of the Professional Registered Nurse**

Professional nurses at AWH have roles that are outcome oriented in order to meet the needs of our patients, as noted below:

- 1. Advocate for the health, safety and rights of each patient.
- 2. Monitor nursing practice and patient care outcomes that assure that the care rendered is consistent with evidence-based practice while keeping the patient's needs in mind.
- 3. Implement best-practice systems for patient care delivery to maximize productivity while providing the highest level of safe, efficient and effective nursing practice.
- 4. Promote a healthy work environment, promote collaboration and open communication with other health professionals.
- 5. Assure the application of RBC principles at all times in all relationships.
- 6. Participate in assessing the health needs of the community and assist with program development to address these needs.
- 7. Assure maintenance of nursing competencies and encourage participation in those activities that contributes to the ongoing development of the individual nurse, the profession and other health professions.
- 8. Support nursing research and research-based clinical practice.
- 9. Collaborate with clinical nurses, nurse managers and advance practice nurses to identify the learning needs of the patients and staff to determine priorities for educational programs.
- 10. Develop evidence-based procedures and protocols to improve the quality of health care delivery.
- 11. Provide leadership for the development, implementation and evaluation for the standards of practice.
- 12. Facilitate nursing participation on hospital-wide and unit based councils/committees in an effort to improve patient care and outcomes as well as effective administrative systems.
- 13. Participate in the nursing community and professional organizations.

#### **Section 2: Services of Nursing**

Professional nursing at AWH utilizes the nursing process that centers on patient care. These actions include:

- 1. Assessing human responses to actual health conditions.
- 2. Establishing a therapeutic relationship with the patient/family unit.
- 3. Establishing a primary nurse to coordinate care for each patient while the patient resides in that department.

- 4. Identifying a nursing diagnosis and/or need that reflect the status of an individual, family or group.
- 5. Developing and implementing a treatment regimen in accordance with established evidenced-based practice and regulatory standards of care.
- 6. Educating patients and family.
- 7. Advocating for patients, families, and the profession.
- 8. Collaborating with other health care professionals.
- 9. Promoting quality health care within a resource-efficient and fiscally-responsible framework.
- 10. Evaluating a patient's response to the treatment regimen.
- 11. Implementing diagnostic and therapeutic regimens prescribed by medically privileged practitioners.
- 12. Administering, supervising, delegating, and evaluating nursing activities within the AWH nursing service guidelines and the Nurse Practice Act of the State of Wisconsin.

#### **Section 3: Nursing Scope of Services**

The services provided by professional registered nurses at AWH include, but not limited to:

- Ambulatory Care
- Cardiac Care Services, including Critical Care and AHVI clinic
- Cardiac / Pulmonary Rehabilitation
- Diagnostic Imaging
- Education
- Emergency Care Services
- Employee Health
- Family/Community
- Geriatric
- GI Services, including endoscopy
- Hospice
- Human Resources
- Maternity and NICU

- Medical/Surgical Services, including Critical Care
- Oncology
- Pain Management
- Palliative Care
- Pediatric
- Pre-Hospital Transport Services, including flight
- Quality Management
- Rehabilitation
- Renal Services, including dialysis (inpatient)
- Surgical, including PACU and Day Surgery
- Wellness
- Women's Health
- Wound care/Hyperbaric therapy

#### **Section 4: Nursing Care Delivery**

Professional registered nurses at AWH deliver care to their patients utilizing the Relationship Based Care (RBC) Model. The RBC model provides a conceptual framework with a vision for care and underlying values and principles, a practical infrastructure for putting it into action, the education and leadership necessary to make it happen and ways to measure evidence of success.

Care takes place in a caring and healing environment with the patient and family at the center. Six dimensions are critical for successful transformation (Koloroutis, 2004):

- Leadership: Leaders know the vision, act with purpose, remove barriers, and consistently hold patients, families, and staff as their highest priority.
- Teamwork: Teamwork requires a group of diverse members from all disciplines and departments to define and embrace a shared purpose and to work together to fulfill that purpose.
- Professional Nursing Practice: Professional nursing exists to provide compassionate care to individuals and their loved ones. Nursing is a primary component in a complex, interdependent healthcare delivery system.

- Patient Care Delivery System: The patient care delivery system is the infrastructure for organizing and providing care to patients and families. The system determines the way in which the activities of care are accomplished and is built upon the concepts and values of professional nursing practice.
- Resource Driven Practice: A resource driven practice is one which maximizes resources, staff time, equipment, systems, and budget.
- Outcomes Measurement: Achieving quality outcomes required planning, precision, and perseverance. It begins with defining specific, attainable, and measurable results.

#### **Article III**

#### **Collaborative Practice Decision Making Model (Shared Governance)**

#### **Section 1: Definition**

Nursing at AWH is governed by the Nursing Collaborative Practice Model. Collaborative practice empowers nurses to make decisions about their own nursing practice. All nurses collaborate in problem-solving and decision-making, thereby improving the practice environment and the patient care environment.

Collaborative Practice and shared decision-making is based on the four principles of empowerment that are: partnership, accountability, equity, and ownership. All structures and processes are built around these principles, always focusing on the collaborative and interactive process.

- Partnership: Means all members have a role/relationship in the structure. A key partnership is the RN/MD one that drives patient care.
- Accountability: Is the 'why' of our work. It is the results and the difference those results have on patient outcomes. This is different than responsibility, which refers to the actual work processes and doing.
- Equity: Refers to value and not the concept of equal. It is our obligation to define our value as a profession of nursing and prove our value individually.
- Ownership: Refers to the investment we have to participate in improving value. We are all stakeholders and participants in the process.

#### **Section 2: Vision Statement**

We are a committed team of visionary staff collaboratively creating a professional work environment, enhancing practice and patient care. There are eight councils: Leadership, Research, Practice, Education, Quality, Advanced Practice, Nursing Coordinating, and Patient Care Coordinating. Each council has defined accountabilities which are listed below.

#### **Nursing Leadership Council**

<u>Purpose</u>: Organize and manage the resources of the nursing organization at AWH; Develop an environment that promotes and advances the practice of professional nursing at AWH; Actualize the initiatives outlined in the nursing strategic plan for the organization.

<u>Membership:</u> Chief Nursing Officer, Chair of Coordinating Council, Nursing Directors and Managers representing all AWH nursing entities, one Hospital Supervisor, and one Department Supervisor.

Accountabilities: The Leadership Council will:

- Manage the fiscal process
- Define, manage, and improve the mechanisms to provide materials and the environment essential to nursing operations
- Ensure the provision of human resources to meet applicable standards in delivering nursing care

- Ensure collaboration between nursing and other disciplines
- Ensure processes are in place to hold staff accountable to practice within the nursing model and policies/protocols
- Provide management information to the other Councils to facilitate decision-making
- Establish methods of communicating among its own members, other councils, and all disciplines involved in nursing care
- Mentor nursing staff at the house wide level and bring the financial perspective of ideas/processes to house wide councils
- Provide authentic leadership/healthy work environment

#### **Nursing Research Council**

<u>Purpose</u>: Research is critical to the development of evidence-based practice (EBP) and living our Magnet designation. The purpose of the Research and EBP Council is to promote the conduct, evaluation, and utilization of nursing research to advance nursing practice and patient care at Aspirus.

<u>Membership</u>: Any professional employed at Aspirus Wausau Hospital with an interest in research and evidence-based practice. Ad hoc membership includes CNO, VP Quality Services, Library Manager, Performance Improvement Analyst from Quality Services, Advance Practice Nurses with NP accountabilities.

#### Accountabilities: The Research Council will:

- Create a link between research and evidence-based practice.
- Increase involvement of Aspirus clinical staff in research.
- Demystify the research process for clinical staff.
- Serve as a liaison between the Institutional Review Board and clinical staff.
- Provide a forum for creative/innovative thinking.
- Manage a budget for nursing research and allocate funds to individual researchers.
- Mentor clinical staff to understand, evaluate, and conduct nursing research.
- Mentor clinical staff on the process to evaluate and implement best practice.
- Increase the visibility of Aspirus research through application and dissemination.
- Mentor researchers in dissemination such as poster presentation and publication.
- Evaluate existing clinical practice and identify opportunities to translate new knowledge into practice.
- Collaborate with nursing administration and other departments to coordinate and improve data availability for use in measurement of improvement and research.
- Utilize external experts and other resources to develop and/or improve infrastructures, capacities, and/or processes.

#### **Nursing Practice Council**

Purpose: The Nursing Practice Council will define and manage issues related to clinical practice.

Membership: All Registered Nurse members, as well as a nurse leader liaison.

#### Accountabilities:

- Define and maintain the Nursing Philosophy and Model of Care at AWH.
- Address obstacles that reduce clarity of and adherence to the Model of Care.
- Develop and implement Standards of Care; address obstacles that reduce clarity of and adherence to Standards of Care; and approve policies and procedures governing nursing practice.

- Maintain a clinical documentation system that adheres to regulatory body mandates, reflects standards of practice, and promotes complete, streamlined recording of patient care.
- Maintain nursing job descriptions, performance appraisal standards, a credentialing and privileging process and adherence to the Nurse Practice Act, that facilitates the expectation that every nurse will continually advance his/her education and improve his/her practice.
- Maintains itself by continually evaluating the membership and internal processes of the Council.
- Be accountable to establish methods of communicating among its members, other councils, and the individual nurse.

#### **Nursing Education Council**

<u>Purpose:</u> The Nursing Education Council will advise on the structure for nursing education for the hospital, provide educational framework for all levels of nursing care providers, and create an environment conducive to learning.

Membership: All RN Members, (may include an LPN), as well as a nurse leader liaison.

#### Accountabilities: The Nursing Education Council will:

- Participate in the development of the hospital-wide needs assessment for the nursing organization in collaboration with Educational Services.
- Participate in the development of the annual plan for nursing continuing education and general inservices in collaboration with Educational Services.
- Collaborate with Educational Services to ensure general orientation topics meet the needs of the nursing staff.
- Collaborate with Educational Services and other departments regarding required training.
- Participate in the development and coordination of a council orientation process for new council chairs and members from education, practice, and quality councils.
- Update council structure and membership on the intranet annually.
- Participate in the process to meet Magnet standards relevant to the council.
- Recommend the appropriate number of CEUs required for nursing staff.
- Coordinate the communication for the nursing organization through the Navigator and other appropriate methods.
- Empower individual nurses to take responsibility for their own continuing education.
- Provide a framework for the unit-based education councils.
- Assist other councils in planning and structuring educational components of their work.
- Coordinate nursing celebrations.
- Maintain itself by continually evaluating the membership and internal processes of the Council.

#### **Nursing Quality Council**

<u>Purpose:</u> The Nursing Quality Council will provide a quality framework for nursing practice, evaluate processes, and facilitate activities related to continuous improvement of nursing care.

Membership: All RN members, as well as a nurse leader liaison.

#### Accountabilities: The Nursing Quality Council will:

- Design Aspirus Nursing Quality activities to align with the Triple Aim and the Aspirus Quality Pyramid.
- Facilitate accountability of unit quality council activity to align with the nursing plan.
- Establish a mechanism to detect trends and patterns of performance that affect more than one department. This includes:

- Developing monitoring and measuring tools
- o Monitoring effectiveness of established practices
- o Identifying trends from data and utilize the Plan-Do-Check-Act (PDCA) format for performance improvement technology
- o Communicate trends/opportunities to improve the affected worksites, committees and/or members of the healthcare team.
- Educate unit-based practitioners and worksites about quality tools
- Maintain itself by continually evaluating the membership and internal processes of the council.
- Establish methods of communicating among its members, other councils, and the individual nurse.
- Take appropriate action when nursing quality issues are identified

#### **Advanced Practice Nursing Council**

<u>Purpose</u>: To provide the vision and leadership to advance the practice of professional nursing at AWH.

<u>Membership</u>: Registered nurses functioning in advance practice roles including clinical nurse specialists, nurse practitioners, educators, administrators, researchers, clinical care coordinators, and those practicing at the clinical point of care (may include interested nurses near the completion of their Master's Degree). The CNO will serve as an ad hoc member.

#### Accountabilities:

- Support the mission and philosophy of AWH.
- Facilitate communication between councils and individual nurses.
- Provide support to other councils to be sure that best practice is being promoted and implemented
- Develop, apply, evaluate, adapt, and modify the Professional Practice Model.
- Evaluate existing nursing practice and identify opportunities to translate new knowledge into practice.
- Identify process improvement opportunities and refer to other councils as appropriate.
- Promote the visibility of APNs within the organization.
- Support and mentor nurses who are pursuing advanced degrees.
- Promote the principles of advanced leadership and standards of theory, education, research, and practice
- Promote collaboration among APNs within AWH, Aspirus affiliates, and other organizations and entities.

#### **Nursing Coordinating Council**

Purpose: To coordinate, integrate and facilitate Collaborative Practice at AWH.

<u>Membership</u>: This council is comprised of chairs of all councils. The Chief Nursing Officer is an ad hoc member.

#### Accountabilities:

- Approve the Annual Nursing Plan of Action.
- Resolve accountability conflicts between councils.
- Chair has critical power: right to speak without calling council into session.
- Assign appropriate nursing council to address issues brought forth by other bodies to this council.

#### **Patient Care Coordinating Council**

<u>Purpose</u>: To identify and prioritize issues that impact patient care and to streamline communication across disciplines. This council has decision-making authority for multidisciplinary issues.

Membership: Chairs of each nursing council, plus representation from Lab, Respiratory Therapy, Therapies, Radiology, Nutrition Services, Pharmacy, Information Technology, Informatics, and Social Services. A non-nursing clinical director also sits on the council. The VP of Clinical Services and the CNO are ad hoc members.

#### Accountabilities:

- To provide a forum for clinical providers to work collaboratively to provide patient centered care.
- To provide a forum for multi-disciplinary clinicians to collaboratively make decisions that support quality patient care.

#### **Unit Structure Accountabilities:**

The majority of nursing shared governance will, by definition, take place at the department level. Each department with nursing staff will establish and maintain a department-level council structure. The unit council will have a communication link with their representatives to each house wide council so that clear communication lines are established and used.

Relationship-Based Care (RBC) defines structure and process for Unit Councils. As nursing departments proceed through the preparation, planning, and implementation phases of RBC they will become more fully able to make decisions and implement changes regarding their professional practice.

Accountabilities of the department level councils include:

- Determine the unit Council structure including: number of members, representatives, rotation, frequency of meetings, and ensuring full staff participation using the established framework.
- Have a working knowledge of the model of care and maintain/adhere to the Model through work with their peers.
- Determine and ensure adherence to unit level performance standards.
- Address obstacles at the unit level, taking ownership to problem solve and resolve the obstacles.
- Ensure continual evaluation of the unit structure and process to maintain function and flow.
- Write policies/procedures related to unit specialty, educating staff and ensuring adherence.
- Maintain a communication link from the Unit Council to the individual members of nursing staff.
- Establish unit-specific competencies.
- Demonstrate a basic understanding of performance improvement as it relates to their work.
- Be knowledgeable of process improvement activities utilizing PDCA, and regulatory standards/requirements as they apply to point of care.
- Measure processes and evaluate outcomes at the unit level
- Have a working knowledge of change management and awareness of resources to advise them on change management.
- Gather information to raise awareness and improve performance regarding nurse-sensitive indicators and other patient outcomes.
- Identify variances that do not align with good nursing practice.
- Develop unit-based/point-of-service activities that align with and contribute to key hospital-wide initiatives.
- Participate in unit-based/worksite specific activities that will lead to improvement and positive outcomes
- Create new stories that enhance the communication of process improvement activities.
- Be empowered to introduce new ideas and better ways of doing things.
- Chairs (and members as desired) will participate in the general council orientation process.

#### Article IV Healthy Work Environment

#### **Section 1. Definition**

AWH has made a commitment to actively promote the creation of healthy work environments that support and foster excellence in patient care wherever nurses practice. This commitment is based on the American Association of Critical Care Nurse's (AACN) model and dedication to optimal patient care. AACN identifies six standards for establishing and sustaining a healthy work environment. AWH recognizes the inextricable links among quality of the work environment, excellent nursing practice and patient care outcomes.

The standards align directly with the core competencies for health professionals recommended by the Institute of Medicine. They support the education of all health professionals "to deliver patient-centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches, and informatics." A copy of the Healthy Work Environment Standards can be found at: <a href="http://www.aacn.org/WD/volunteers/docs/ambassadordocs/2011-hwe-guide.pdf">http://www.aacn.org/WD/volunteers/docs/ambassadordocs/2011-hwe-guide.pdf</a>, as well as on the AWH intranet at:

http://aspirusintranet/index.php?option=com\_docman&task=cat\_view&gid=149&Itemid=90as.

#### Section 2. Healthy Work Environment Standards

1. **Skilled Communication:** Nurses must be as proficient in communication skills as they are in clinical skills.

Critical elements:

- The healthcare organization provides team members with support for and access to education programs that develop critical communication skills including self-awareness, inquiry/dialogue, conflict management, negotiation, advocacy, and listening.
- Skilled communicators focus on finding solutions and achieving desirable outcomes.
- Skilled communicators seek to protect and advance collaborative relationships among colleagues.
- Skilled communicators invite and hear all relevant perspectives.
- Skilled communicators call upon goodwill and mutual respect to build consensus and arrive at common understanding.
- Skilled communicators demonstrate congruence between words and actions, holding others accountable for doing the same.
- The healthcare organization establishes zero-tolerance policies and enforces them to address and eliminate abuse and disrespectful behavior in the workplace.
- The healthcare organization establishes formal structures and processes that ensure effective information sharing among patients, families and the healthcare team.
- Skilled communicators have access to appropriate communication technologies and are proficient in their use.
- The healthcare organization establishes systems that require individuals and teams to formally evaluate the impact of communication on clinical, financial and work environment outcomes.
- The healthcare organization includes communication as a criterion in its formal performance appraisal system and team members demonstrate skilled communication to qualify for professional advancement.

**2. True Collaboration:** Nurses must be relentless in pursuing and fostering true collaboration.

Critical elements:

- The healthcare organization provides team members with support for and access to education
- Programs that develop collaboration skills.
- The healthcare organization creates, uses, and evaluates processes that define each team member's accountability for collaboration and how unwillingness to collaborate will be addressed.
- The healthcare organization creates, uses, and evaluates operational structures that ensure the decision making authority of nurses is acknowledged and incorporated as the norm.
- The healthcare organization ensures unrestricted access to structured forums, such as ethics committees, and makes available the time needed to resolve disputes among all critical participants, including patients, families and the healthcare team.
- Every team member embraces true collaboration as an ongoing process and invests in its development to ensure a sustained culture of collaboration.
- Every team member contributes to the achievement of common goals by giving power and respect to each person's voice, integrating individual differences, resolving competing interests and safeguarding the essential contribution each must make in order to achieve optimal outcomes.
- Every team member acts with a high level of personal integrity.
- Team members master skilled communication, an essential element of true collaboration.
- Each team member demonstrates competence appropriate to his or her role and responsibilities.
- Nurse Managers and medical directors are equal partners in modeling and fostering true collaboration.
- 3. **Effective Decision Making:** Nurses must be valued and committed partners in making policy, directing and evaluating clinical care and leading organizational operations. Critical elements:
  - The healthcare organization provides team members with support for and access to ongoing education and development programs focusing on strategies that assure collaborative decision-making. Program content includes mutual goal setting, negotiation, facilitation, conflict management, systems thinking and performance improvement.
  - The healthcare organization clearly articulates organizational values and team members incorporate these values when making decisions.
  - The healthcare organization has operational structures in place that ensure the perspectives of patients and their families are incorporated into every decision affecting patient care.
  - Individual team members share accountability for effective decision making by acquiring necessary skills, mastering relevant content, assessing situations accurately, sharing fact-based information, communicating professional opinions clearly and inquiring actively.
  - The healthcare organization establishes systems, such as structured forums involving all departments and healthcare disciplines, to facilitate data-driven decisions.
  - The healthcare organization establishes deliberate decision making processes that ensure respect for the rights of every individual, incorporate all key perspectives and designate clear accountability.
  - The healthcare organization has fair and effective processes in place at all levels to objectively
  - Evaluate the results of decisions, including delayed decisions and indecision.

4. **Appropriate Staffing:** Staffing must ensure the effective match between patient needs and nurse competencies.

Critical elements:

- The healthcare organization has staffing policies in place that are solidly grounded in ethical principles and support the professional obligation of nurses to provide high quality care.
- Nurses participate in all organizational phases of the staffing process from education and planning including matching nurses' competencies with patients' assessed needs through evaluation.
- The healthcare organization has formal processes in place to evaluate the effect of staffing decisions on patient and system outcomes. This evaluation includes analysis of when patient needs and nurse competencies are mismatched and how often contingency plans are implemented.
- The healthcare organization has a system in place that facilitates team members' use of staffing and outcomes data to develop more effective staffing models.
- The healthcare organization provides support services at every level of activity to ensure nurses can optimally focus on the priorities and requirements of patient and family care.
- The healthcare organization adopts technologies that increase the effectiveness of nursing care delivery. Nurses are engaged in the selection, adaptation and evaluation of these technologies.
- 5. **Meaningful Recognition**: Nurses must be recognized and must recognize others for the value each brings to the work of the organization.
  - The healthcare organization has a comprehensive system in place that includes formal processes and structured forums that ensure a sustainable focus on recognizing all team members for their contributions and the value they bring to the work of the organization.
  - The healthcare organization establishes a systematic process for all team members to learn about the institution's recognition system and how to participate by recognizing the contributions of colleagues and the value they bring to the organization.
  - The healthcare organization's recognition system reaches from the bedside to the board table, ensuring individuals receive recognition consistent with their personal definition of meaning, fulfillment, development and advancement at every stage of their professional career.
  - The healthcare organization's recognition system includes processes that validate that recognition is meaningful to those being acknowledged.
  - Team members understand that everyone is responsible for playing an active role in the organization's recognition program and meaningfully recognizing contributions.
  - The healthcare organization regularly and comprehensively evaluates its recognition system, ensuring effective programs that help to move the organization toward a sustainable culture of excellence that values meaningful recognition.
- 6. **Authentic Leadership:** Nurse leaders must fully embrace the imperative of a healthy work environment, authentically live it and engage others in its achievement. Critical elements:
  - The healthcare organization provides support for and access to educational programs to ensure that nurse leaders develop and enhance knowledge and abilities in: skilled communication, effective decision making, true collaboration, meaningful recognition, and ensuring resources to achieve appropriate staffing.
  - Nurse leaders demonstrate an understanding of the requirements and dynamics at the point of care and within this context successfully translate the vision of a healthy work environment.

- Nurse leaders excel at generating visible enthusiasm for achieving the standards that create and sustain healthy work environments.
- Nurse leaders lead the design of systems necessary to effectively implement and sustain standards for healthy work environments.
- The healthcare organization ensures that nurse leaders are appropriately positioned in their pivotal role in creating and sustaining healthy work environments. This includes participation in key decision making forums, access to essential information and the authority to make necessary decisions.
- The healthcare organization facilitates the efforts of nurse leaders to create and sustain a healthy work environment by providing the necessary time and financial and human
- The healthcare organization provides a formal co-mentoring program for all nurse leaders. Nurse leaders actively engage in the co-mentoring program.
- Nurse leaders role model skilled communication, true collaboration, effective decision making, meaningful recognition and authentic leadership.
- The healthcare organization includes the leadership contribution to creating and sustaining a healthy work environment as a criterion in each nurse leader's performance appraisal. Nurse leaders must demonstrate sustained leadership in creating and sustaining a healthy work environment to achieve professional advancement.
- Nurse leaders and team members mutually and objectively evaluate the impact of leadership processes and decisions on the organization's progress toward creating and sustaining a healthy work environment.

## **Article V Nurse Credentialing**

#### **Section 1. Definition**

Credentialing is a process of reviewing, verifying, and evaluating credentials. Credentials are a listing of the nurses' education, training, experience, certifications, licensure and other professional qualifications. Credentialing will assure nurses are held to the highest standards of professional practice care for patients. The process includes self-verification, peer evaluation, and supervisor review. This should be initiated at the point of hire. It becomes the responsibility of the individual to keep his/her credentials up to date for annual review.

<u>Section 2. Background</u>
The profession of nursing has become increasingly complex, and has come to the forefront of national policy makers (Institute of Medicine, 2010). The nursing profession has the potential to affect change in health care, from the bedside to the board room. This requires nurses to remain current in their practice, which is ever-changing as health care continues to evolve. As a profession, each nurse must choose his/her path of professional growth while meeting certain standards of professional practice.

Although initial educational standards for Registered Nurses exist, standards of continued nursing competence have yet to be developed. Competence must be ensured in the clinical setting. Through credentialing, the nurse can demonstrate his/her competence and professional achievements to ensure that caregivers are held to the highest professional practice standards of care for patients. The process includes self-evaluation, peer evaluation, and supervisor review.

#### Section 3. Vision & Philosophy

The development of a Registered Nurse Credentialing Program at AWH evolved from the need for a method to both encourage and facilitate the professional growth of the Registered Nurse in the clinical setting. AWH uses the program to initiate and guide the nurse in the provision of excellence in nursing care.

#### Section 4. Conceptual Framework

Nursing professional development refers to professional nurses' effort to actively seek and participate in learning activities that enhance their practice, competence, and career goals. These activities build on the experiences and education associated with the careers of nurses with the primary goal of promoting the delivery of excellent healthcare to the public. A mindset of lifelong learning motivates nurses to seek activities that improve their competence and increase their contributions to the profession. Positioning within the profession to achieve this flexibility and expertise requires career commitment, continuous self-development, a passion for nursing, and a strong foundation as a leader" (Dadich and Yoder-Wise, 2003).

#### **Section 5. Benefits**

Some of the key benefits of the Registered Nurse Credentialing Program for the nurse are:

- 1. The opportunity to work at a level commensurate with his/her professional development.
- 2. The opportunity to evaluate his/her own clinical performance and to identify developmental deficiencies specific to his/her current and anticipated levels of practice.
- 3. Monetary incentives for those who chose to advance their degrees and/or further upgrade clinical skills.
- 4. The recognition of proficiency in clinical and leadership skills.

#### **Section 6: Goals**

The goals for the RN Credentialing Program are to:

- 1. Improve patient outcomes
- 2. Recognize and reward clinical nursing practice at all levels
- 3. Enable professional nursing progression through recognition of clinical levels
- 4. Encourage clinical nurse involvement in organizational growth
- 5. Retain qualified nursing staff
- 6. Strengthen nursing recruitment, retention, and job satisfaction

The Registered Nurse Credentialing Program provides the professional nurse the opportunity to work towards advancement, recognition, and professional growth within a framework that helps prepare nurses to lead change to advance health.

#### **Section 7: Credentialing Components**

All Registered Nurses at AWH must meet these credentialing standards:

- Licensure to practice in the state of Wisconsin
- Nurses are encouraged to obtain unless otherwise defined in their job description: certifications, accreditations, and certificates.
- Completion of Mandatory education, in addition to .7 continuing education units.
- Documentation of continuing education requirements
- Evidence of satisfactory criminal background check
- Possession of the knowledge/skill sets listed on the job description
- Completion of hospital/unit specific orientation
- Health screen/status: Completion of all required health screenings.

#### **Section 8: Performance Review**

AWH's performance review process has three objectives:

- 1. To measure individual job performance
- 2. To identify opportunities for improvement and advancement
- 3. To develop professional skills through open and constructive feedback

Successful job performance requires a clear understanding of what work is to be performed (expectations), desired outcomes, and how well the work has been completed (outcome achievement). Performance appraisal ensures that employee and supervisor expectations are aligned. Through this process, the employee and supervisor collaborate to improve job performance and grow professionally. The appraisal emphasizes the following components:

- Core Behaviors typify AWH's core values. Generally, strengths and areas for improvement in behavioral areas are consistent with strong job performance.
- Job Responsibilities focus on measuring performance related to current job accountabilities and any assigned special projects.
- Professional Development and Growth Plan ask the nurse and supervisor to establish developmental areas of growth or educational goals for the upcoming year.

This process also includes the professional nurse utilizing a professional portfolio to exemplify their contributions towards patient outcomes and advancing the nursing profession. The professional portfolio, developed over time, facilitates both external evaluation and self-reflection. Periodic review of one's portfolio would provide feedback on growth, goal achievement, career path, and competence. The professional portfolio is a showcase of background and expertise.

AWH encourages and values some form of peer evaluation as part of the performance review process. Peer Evaluation is the process by which performance of the Registered Nurse is evaluated by a group of his or her peers. Annually, each unit elects a team of Registered Nurses to comprise the evaluation team, based on nominations from their peers. The team is then required to sign a document to ensure confidentially and that information sharing is only with the unit Director or supervisor. Upon evaluation, the individual nurse may choose to participate in the discussion or receive written feedback.

Upon completion of evaluations, each nurse receives a written synopsis of the peer evaluation. A copy is given to the unit director to be utilized as part of the annual evaluation process. Individuals are encouraged to discuss any components of their evaluation with team members.

#### **Section 9. Mandatory Annual Education**

Once nurses complete their hospital and unit-based orientations, as applicable to their role, they must continue to meet mandatory educational conditions of employment, including, but not limited to:

- Required hospital-wide competencies assigned annually during the anniversary month of their hire.
- Current CPR certification and any other mandatory certifications (e.g., Advanced Cardiac Life Support (ACLS), Trauma Nurse Core Course (TNCC), Pediatric Advanced Life Support (PALS), Neonatal Resuscitation Program (NRP)) deemed necessary to perform their roles
- EPIC proficiency maintained, through classes or review and incorporation of updates into practice.
- Age-specific competency training to ensure that nurses are qualified to care for patients with agespecific needs
- Cultural diversity competency.
- Required unit-based educational opportunities.

#### **Section 10. Continuing Education**

AWH believes that continuing education for all staff is essential to our future.

A minimum of 0.7 Continuing Education Units (CEUs) are required (7 contact hours) annually, measured from March 1<sup>st</sup> to March 1<sup>st</sup>. One tenth of a CEU equals one hour of education. One contact hour equals one hour of education.

A maximum of ten contact hours related to formal credits are allowed. One college credit equals three contact hours as defined by AWH Education Council. The college credit will be allowed if it pertains to nursing. Example: Credits from psychology class will be accepted. Credits from an Art, English, or Geography class will not be accepted.

# Section 11. Clinical Advancement Program (CAP):

The Clinical Advancement Program (CAP) is a voluntary program that is designed to recognize nurses who advance nursing practice through research, mentoring, and collaboration. This program rewards nurses who go beyond excellence in bedside care. CAP is independent from the annual performance appraisal, but the same portfolio can be used for both processes.

Clinician I and Clinician II are designations that indicate proven proficiency or expertise in the field of nursing. The *general* characteristics of nursing performance at each of the two levels follow:

#### Clinician I

Employee in good standing at AWH for a minimum of one year who meets the minimum educational criteria:

- Associate degree in Nursing with Specialty Certification
- Diploma in Nursing with Specialty Certification
- Bachelor of Science in Nursing (BSN)
- Show leadership in the following categories:

Evidence Based practice

Collaborative Practice

Community

Role Modeling

Change Agency

#### Clinician II

Employee in good standing at AWH for a minimum of one year who meets the minimum educational criteria:

- BSN with Specialty Certification
- Masters of Science in Nursing
- Show leadership in the following categories:

Evidence Based practice

Collaborative Practice

Community

Role Modeling

Change Agency

Applications and guidelines for the portfolio are obtained from AWH's Human Resource Department. Nurses who earn Clinician I or II recognition are rewarded an educational stipend to be used for professional development. (Clinical Advancement Program, 2011)

#### **Article VI**

#### **Nursing Ethics**

A Code of Ethics makes explicit the primary goals, values and obligations of a profession. The Code of Ethics for Nurses is a statement of the ethical obligations of every individual who enters the nursing profession. The nurse integrates ethical decisions in all areas of practice in accordance with the ANA Code of Ethics for Nurses and AWH Policies and Procedures. (ANA Code of Ethics, 2011). A link to the nursing code of ethics can be found at:

http://nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of Ethics.pdf, as well as on the S drive at: S:\Nursing Code of Ethics. PDF.

#### **Article VII**

### **Peer Review: Definition and Purpose**

Nursing Peer Review (NPR) is the process by which practicing RN's are systematically assessed and receive recommendations about the quality and appropriateness of nursing care provided from their peers. Standards of Practice are defined by the Nurse Practice Act of Wisconsin and AWH Professional Standards of Care. The NPR committee will make recommendations that facilitate a nurse's successful practice of high quality, competent nursing care. This work occurs solely among peers who are dedicated to an environment of CARE and CARING. NPR is designed to provide a process for fact-finding, analysis, and study of events by nurses in a climate of collegial problem solving. It is focused on obtaining all relevant information about an event, and making recommendations of corrective actions if appropriate. The purpose of NPR is to maintain standards of nursing practice in a non-punitive manner while encouraging peer support (On Base Policy #4397). This creates a Just Culture environment that focuses on learning from mistakes to improve patient safety. This also serves to make nurses responsible for their own actions as well as an opportunity to provide feedback to their peers in a constructive manner that fosters learning and growth within their practice.

#### Article VIII Nursing Leadership

#### Section 1. Role of Nurse Executive in the Professional Organization

The role and responsibility of the Vice President of Patient Care/Chief Nursing Officer (CNO) is to ensure the highest degree of safety and quality in nursing care for the patients served at AWH. The CNO is a collaborative member of the AWH Executive Team and participates on the Accountability Committee of the Board of Directors, the Hospital Quality Review Committee, ad hoc member of the Medical Bylaws and Credentialing committee, and represents nursing at all levels of the organization. In conjunction with the highest standards of nursing practice, the CNO reflects the strength of nursing by leading through a clearly articulated vision and strategic planning process for the organization. The CNO empowers the nursing staff through facilitation of the Forces of Magnetism, Healthy Work Environment, and Collaborative Practice. The CNO is an ad hoc member of all house wide collaborative practice councils. The CNO's professional practice is continuously enhanced and focuses on the energies and abilities of all nurses at AWH to provide superior nursing care. The CNO promotes professional development of nurses and facilitates leadership succession planning.

#### Section 2. Role of Leadership in the Nursing Department

The role of nurse leadership within AWH is to collaborate with staff to set the vision and goals within individual nursing departments consistent with the organization, oversee operations, ensure accountability of its members, and foster an environment conducive for professional practice. This environment promotes individual and team development, continued education, and performance improvement. The

role of leadership in the nursing department is to work collaboratively with its members in evaluating the department's achievements and outcomes and assuring safe patient care with measurable quality outcomes.

#### **CONCLUSION**

Professional nursing must be defined. For years, the profession has floundered, not realizing nursing's impact on society. This document provides definitions that can be utilized to educate those within the profession, the public and other professions as well. We are interdependent practitioners, scientists, contributors to society, and independent decision makers with regards to patient care. With acknowledgement and ownership of our accomplishments, we advance our profession. These advances result in nursing excellence, and the public and our patients reap the benefits. We must strive for excellence, for nothing else is acceptable.

#### REFERENCES

American Association of Critical Care Nurses (2005). AACN Standards for Establishing and Sustaining Healthy Work Environments: A Journey to Excellence. <a href="https://www.aacn.org">www.aacn.org</a>.

American Nurses Association (2011). ANA Position Statement: The Non-negotiable Nature of the ANA Code for Nurses with Interpretative Statement.

www.nursingworld.org/mainmenucategories/thepracticeofprofessionalnursing/ethicsstandards.

American Nurses Association. (2000). Scope and Standards of Practice for Nursing Professional Development. Washington DC: American Nurses Association.

American Nursing Credentialing Center (2008). ANCC Forces of Magnetism. <a href="https://www.nursecredentialing.org">www.nursecredentialing.org</a>

Aspirus Wausau Hospital Clinical Advancement Program (CAP), 2011.

Dadich, K., & Yoder-Wise, P. (2003). Career management: Putting yourself in charge. In P. Yoder-Wise (Ed.), *Leading and managing in nursing* (3<sup>rd</sup> ed.). St. Louis, MO: Mosby.

Institute of Medicine (2010). The future of nursing: Leading change, advancing health. www.iom.edu/nursing

Koloroutis, M. (2004). Relationship-Based care. A model for transforming practice. M. Koloroutis (Ed.). Minneapolis, MN: Creative Health Care Management, Inc.

Shepard, L.H. (2011). Creating a foundation for a just culture workplace. *Nursing 2011*, 46-48. doi: 10.1097.

Porter-O'Grady, T. (2001). Is shared governance still relevant? JONA, 31 (10), 468-473.

Wisconsin State Statute 441: Board of Nursing. Updated April 1, 2013. <a href="http://docs.legis.wisconsin.gov/document/statutes/441.pdf">http://docs.legis.wisconsin.gov/document/statutes/441.pdf</a>

Chapter N6: Standards of Practice for Registered Nurses and Licensed Practical Nurses. June, 2006. http://docs.legis.wisconsin.gov/document/administrativecode/ch.%20n%206.pdf