PROFESSIONAL NURSING GOVERNANCE

Please provide the following information. The information you provide is IMPORTANT. Please be sure to complete ALL questions. Remember confidentiality will be maintained at all times.   Today's Date_____

1.   Sex: ____Male   ____Female   2. Age: _____

3.   Please indicate your BASIC nursing educational preparation:

   ____Nursing Diploma   ____Associate Degree in Nursing

   ____Baccalaureate Degree in Nursing

4.   Please indicate the HIGHEST educational degree that you have attained at this point in time:

   ____Nursing Diploma   ____Master's Degree, Non-nursing

   ____Associate Degree in Nursing   ____Doctorate, Nursing

   ____Baccalaureate Degree in Nursing   ____Doctorate, Non-nursing

   ____Master's Degree in Nursing, Specialty

5.   Employment Status:

   ____Full-time, 36-40 hours per week

   ____Part-time, less than 36 hours per week (specify number of hours/week):_____

6.   Please specify the number of years that you have been practicing nursing_____

7.   Please indicate the title of your present position_____

8.   Please indicate the type of nursing unit that you work on:

____Medical	____Maternity
____Surgical	____Pediatrics
____Critical Care	____Psychiatry
____Operating Room	____Education
____Recovery Room	____Quality Management
____Emergency Room	____Outside Nursing
____Clinic	____Other (please specify):_____

9.   Please specify the number of years you have worked in this institution_____

10. Please specify the number of years you have been in this present position_____

11. Have you received any specialty certifications from professional organizations?
   ____Yes   ____No
   If YES, please specify the type of certification
   and year received_____

In your hospital, please circle the group that CONTROLS the following areas:

1 = Nursing management/administration only
2 = Primarily nursing management/administration with some staff nurse input
3 = Equally shared by staff nurses and nursing management/administration
4 = Primarily staff nurses with some nursing management/administration input
5 = Staff nurses only

PART I

1. Determining what activities nurses can do at the bedside.	1	2	3	4	5
2. Developing and evaluating patient care standards and quality assurance/improvement activities.	1	2	3	4	5
3. Setting levels of qualifications for nursing positions.	1	2	3	4	5
4. Evaluating (performance appraisals) nursing personnel.	1	2	3	4	5
5. Determining activities of ancillary nursing personnel (aides, unit clerks, etc.).	1	2	3	4	5
6. Conducting disciplinary action of nursing personnel.	1	2	3	4	5
7. Assessing and providing for the professional/ educational development of the nursing staff.	1	2	3	4	5
8. Making hiring decisions about RNs and their nursing staff.	1	2	3	4	5
9. Promoting RNs and other nursing staff.	1	2	3	4	5
10. Appointing nursing personnel to management and leadership positions.	1	2	3	4	5
11. Selecting products used in nursing care.	1	2	3	4	5
12. Incorporating research ideas into nursing care.	1	2	3	4	5
13. Determining methods of nursing care delivery (e.g. primary, team, case management).	1	2	3	4	5

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In your hospital, please circle the group that INFLUENCES the following activities:

1 = Nursing management/administration only
2 = Primarily nursing management/administration with some staff nurse input
3 = Equally shared by staff nurses and nursing management/administration
4 = Primarily staff nurses with some nursing management/administration input
5 = Staff nurses only

PART II

14.	Determining how many and what level of nursing staff is needed for routine patient care.	1	2	3	4	5
15.	Adjusting staffing levels to meet fluctuations in patient census and acuity.	1	2	3	4	5
16.	Making daily patient care assignments for nursing personnel.	1	2	3	4	5
17.	Monitoring and procuring supplies for nursing care and support functions.	1	2	3	4	5
18.	Regulating the flow of patient admissions, transfers, and discharges.	1	2	3	4	5
19.	Formulating annual unit budgets for personnel, supplies, equipment and education.	1	2	3	4	5
20.	Recommending nursing salaries, raises and benefits.	1	2	3	4	5
21.	Consulting nursing services outside of the unit (e.g. administration, psychiatric, medical-surgical).	1	2	3	4	5
22.	Consulting hospital services outside of nursing (e.g. dietary, social service, pharmacy, human resources, finance).	1	2	3	4	5
23.	Making recommendations concerning other departments' resources.	1	2	3	4	5
24.	Determining cost effective measures such as patient placement and referrals (e.g. placement of ventilator-dependent patients, early discharge of patients to home health care).	1	2	3	4	5
25.	Recommending new hospital services or specialties (e.g. gerontology, mental health, birthing centers).	1	2	3	4	5
26.	Creating new clinical positions.	1	2	3	4	5
27.	Creating new administrative or support positions.	1	2	3	4	5

According to the following indicators in your hospital, please circle which group has OFFICIAL AUTHORITY (i.e. authority granted and recognized by the hospital) to control practice and influence the resources that support it:

1 = Nursing management/administration only
2 = Primarily nursing management/administration with some staff nurse input
3 = Equally shared by staff nurses and nursing management/administration
4 = Primarily staff nurses with some nursing management/administration input
5 = Staff nurses only

PART III

28.	Written policies and procedures that state what nurses can do in direct patient care.	1	2	3	4	5
29.	Written patient care standards and quality assurance/improvement programs.	1	2	3	4	5
30.	Mandatory RN credentialing levels (licensure, education, certifications) for hiring, continued employment, promotions and raises.	1	2	3	4	5
31.	Written process for evaluating nursing personnel (performance appraisal).	1	2	3	4	5
32.	Organizational charts that show job titles and who reports to whom.	1	2	3	4	5
33.	Written guidelines for disciplining nursing personnel.	1	2	3	4	5
34.	Annual requirements for continuing inservices.	1	2	3	4	5
35.	Procedures for hiring and transferring nursing personnel.	1	2	3	4	5
36.	Policies regulating promotion of nursing personnel to management and leadership positions.	1	2	3	4	5
37.	Procedures for generating schedules for RNs and other nursing staff.	1	2	3	4	5

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38. Acuity and patient classification systems for determining how many and what level of nursing staff is needed for routine patient care.   1   2   3   4   5

39. Mechanisms for determining staffing levels when there are fluctuations in patient census and acuity.   1   2   3   4   5

40. Procedures for determining daily patient care assignments.   1   2   3   4   5

41. Daily methods for monitoring and obtaining supplies for nursing care and support functions.   1   2   3   4   5

42. Procedures for controlling the flow of patient admissions, transfers and discharges.   1   2   3   4   5

43. Process for recommending and formulating annual unit budgets for personnel, supplies, major equipment and education.   1   2   3   4   5

44. Procedures for adjusting nursing salaries, raises and benefits.   1   2   3   4   5

45. Formal mechanisms for consulting and enlisting the support of nursing services outside of the unit (e.g. administration, psychiatric, medical-surgical).   1   2   3   4   5

46. Formal mechanisms for consulting and enlisting the support of hospital service outside of nursing (e.g. dietary, social service, pharmacy, physical therapy).   1   2   3   4   5

47. Procedure for restricting or limiting patient care (e.g. closing hospital beds, going on ER bypass).   1   2   3   4   5

48. Location of and access to office space.   1   2   3   4   5

49. Access to office equipment (e.g. phones, personal computers, copy machines).   1   2   3   4   5

In your hospital, please circle the group that PARTICIPATES in the following activities:

1 = Nursing management/administration only
2 = Primarily nursing management/administration with some staff nurse input
3 = Equally shared by staff nurses and nursing management/administration
4 = Primarily staff nurses with some nursing management/administration input
5 = Staff nurses only

PART IV

50. Participation in unit committees for clinical practice.   1   2   3   4   5

51. Participation in unit committees for administrative matters such as staffing, scheduling and budgeting.   1   2   3   4   5

52. Participation in nursing departmental committees for clinical practice.   1   2   3   4   5

53. Participation in nursing departmental committees for administrative matters such as staffing, scheduling, and budgeting.   1   2   3   4   5

54. Participation in multidisciplinary professional committees (physicians, other hospital professions and departments) for collaborative practice.   1   2   3   4   5

55. Participation in hospital administration committees for matters such as employee benefits and strategic planning.   1   2   3   4   5

56. Forming new unit committees.   1   2   3   4   5

57. Forming new nursing departmental committees.   1   2   3   4   5

58. Forming new multidisciplinary professional committees.   1   2   3   4   5

59. Forming new hospital administration committees.   1   2   3   4   5

PROFESSIONAL NURSING GOVERNANCE

In your hospital, please circle the group that has ACCESS TO INFORMATION about the following activities:

1 = Nursing management/administration only
2 = Primarily nursing management/administration with some staff nurse input
3 = Equally shared by staff nurses and nursing management/administration
4 = Primarily staff nurses with some nursing management/administration input
5 = Staff nurses only

PART V

60.	The quality of hospital nursing practice.	1	2	3	4	5
61.	Compliance of hospital nursing practice with requirements of surveying agencies (Joint Commission, state and federal government, professional groups).	1	2	3	4	5
62.	Unit's projected budget and actual expenses.	1	2	3	4	5
63.	Hospital's financial status.	1	2	3	4	5
64.	Unit and nursing departmental goals and objectives for this year.	1	2	3	4	5
65.	Hospital's strategic plans for the next few years.	1	2	3	4	5
66.	Results of patient satisfaction surveys.	1	2	3	4	5
67.	Physician/nurse satisfaction with their collaborative practice.	1	2	3	4	5
68.	Current hospital status of nurse turnover and vacancies.	1	2	3	4	5
69.	Nurses' satisfaction with their general practice.	1	2	3	4	5
70.	Nurses' satisfaction with their salaries and benefits.	1	2	3	4	5
71.	Management's opinion of bedside nursing practice.	1	2	3	4	5
72.	Physicians' opinion of bedside nursing practice.	1	2	3	4	5
73.	Nursing peers' opinion of bedside nursing practice.	1	2	3	4	5
74.	Access to resources concerning recent advances in nursing practice (e.g.journals and books, library).	1	2	3	4	5

In your hospital, please circle the group that has the ABILITY to:

1 = Nursing management/administration only
2 = Primarily nursing management/administration with some staff nurse input
3 = Equally shared by staff nurses and nursing management/administration
4 = Primarily staff nurses with some nursing management/administration input
5 = Staff nurses only

PART VI

75.	Negotiate solutions to conflicts among professional nurses.	1	2	3	4	5
76.	Negotiate solutions to conflicts between professional nurses and physicians.	1	2	3	4	5
77.	Negotiate solutions to conflicts between professional nurses and other hospital services (respiratory, dietary, etc).	1	2	3	4	5
78.	Negotiate solutions to conflicts between professional nurses and nursing management.	1	2	3	4	5
79.	Negotiate solutions to conflicts between professional nurses and hospital administration.	1	2	3	4	5
80.	Create a formal grievance procedure.	1	2	3	4	5
81.	Write the goals and objectives of a nursing unit.	1	2	3	4	5
82.	Write the philosophy, goals and objectives of the nursing department.	1	2	3	4	5
83.	Formulate the mission, philosophy, goals and objectives of the hospital.	1	2	3	4	5
84.	Write unit policies and procedures.	1	2	3	4	5
85.	Determine nursing departmental policies and procedures.	1	2	3	4	5
86.	Determine hospital-wide policies and procedures.	1	2	3	4	5