

The Salinas Valley Health Accountability Grids: A Decisional Authority Framework for Professional Governance

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Background

Nursing professional governance is grounded in the understanding that nursing is a profession and members of a profession require structures that enable professional ownership of practice and role accountability. Accountabilities for the clinical or professional nursing role and for nurse leaders and should inform professional governance council work.¹ Professional accountabilities address the content of the nursing profession; are practice-based and focused on practice, quality, competence, and knowledge²; and should be governed and demonstrated by nurses in direct-care roles. Leader accountabilities include the context needed to support operations and the professional role, and are concerned with human, fiscal, material, support, and systems resources.¹ Professional governance provides the structure to operationalize direct-care nurses’ ownership and authority over decisions related to practice, quality, competence, and knowledge.¹⁻²

Literature Synthesis

While the framework for professional governance and concepts surrounding professional accountabilities have been articulated in the literature¹⁻⁹ and in professional standards,¹⁰⁻¹⁵ persistent challenges have been reported with successful professional governance enculturation and role accountability.¹⁶⁻¹⁸ Despite its existence in healthcare for over 40 years, fully empowered, clinical nurse-led professional governance structures are uncommon, even in mature Magnet®-designated organizations.¹⁸⁻²⁰ This may be because resources available to guide organizations as they develop professional governance have thus far been focused on structures and processes, such as governance models and council infrastructure; organizational charts depicting council relationships and reporting; and bylaws focusing on council functions, membership selection, and council meeting supports.^{5,9} While these elements are crucial, they fail to offer guidance about operationalizing and legitimizing professional role-based decision-making authority. Conceptual models supporting decisional authority in professional governance lack the detail needed to translate and apply them.¹⁴ This initiative involved the development of accountability grids to address these literature gaps and serve as a framework for role-based decisional authority in professional governance.

Methods

Guided by professional governance expert Tim Porter-O’Grady, DM, EdD, ScD(h), APRN, FAAN, FACCWS, in late 2021, a workgroup of 19 clinical nurses and nurse leaders was formed to develop accountability grids for the clinical nurse, nurse leader, and nurse executive roles. The clinical nurse chairs and co-chairs of the professional governance coordinating council and four of the five central councils (Practice, Quality, Professional Development, and Clinical Inquiry), were included since they oversaw the clinical nurse accountabilities of practice, quality, competence, and knowledge. Key nursing directors and managers were included. Work on the grids spanned almost 3 years, with the development occurring in 2022 and 2023 and implementation beginning in mid-2023 through 2024.

Table 1

| Professional Resources Used | | | |
|--|---|---|--|
| Source | Grid | Rationale for Use | Application |
| ANCC. (2021). <i>2023 Magnet® application manual</i> . | Clinical Nurse Nurse Leader Nurse Executive | Translates professional standards into exemplars demonstrating nursing excellence. | The respective standards, provisions, or competencies were translated to role-specific behavioral or outcome statements. |
| ANA. (2021). <i>Nursing scope and standards of practice</i> . | Clinical Nurse Nurse Leader Nurse Executive | Defines the scope of practice and professional practice standards for registered nurses. | |
| ANA. (2015). <i>Code of ethics for nurses with interpretive statements</i> . | Clinical Nurse Nurse Leader Nurse Executive | Defines the ethical standard for nurses, guiding ethical decision-making. Articulates nursing’s duty to society. | |
| ANA. (2016). <i>Nursing administration scope and standards of practice</i> . | Nurse Leader Nurse Executive | Defines accountabilities for nursing administration practice. Suggests educational and specialty practice preparation and applies the ANA Code of Ethics to nurse leaders. | |
| AONE, AONL. (2015a). <i>AONL nurse executive competencies</i> . | Nurse Leader | Defines the expertise required for the nurse manager role in three categories (science, leader within, art). Guides reflective practice about individual leadership practice. | |
| AONE, AONL. (2015a). <i>AONL nurse executive competencies</i> . | Nurse Leader Nurse Executive | Establishes the expertise required for nurse executives to effectively lead and manage healthcare delivery. | |
| Workgroup Members’ Statements and Edits. | Clinical Nurse Nurse Leader Nurse Executive | Provided local context and captured members’ unique language. | Used to edit grids for relatability. |
| Note. ANA, American Nurses Association; ANCC, American Nurses Credentialing Center; AONE, American Organization of Nurse Executives; AONL, American Organization for Nursing Leadership. | | | |

The grids were developed in a sequence from clinical nurse, nurse leader, to nurse executive. For the clinical nurse grid, sources of evidence,¹³ provisions,¹⁰ and standards¹² were translated into behavioral or outcome statements that supported achievement of the source standard. Then, statements were evaluated and edited by the team to ensure that the team members’ perspectives and the organization’s nursing culture were captured. A similar stepwise process was used to develop the nurse leader grid, adding leader-specific professional standards.^{11,14,15} Similarly, the team focused on the transformational leadership section of the *2023 Magnet application manual*,¹³ and on the system and resource support needed to successfully achieve standards in the structural empowerment; exemplary professional practice; and new knowledge, innovations, and improvements components.¹¹³ The nurse executive grid was drafted focused on executive competencies¹⁴ and by considering the vision and strategic support needed to achieve the clinical nurse and nurse leader accountabilities. Table 1 summarizes the professional resources used.

Results

The implementation phase included five elements: measurement; name change; appending the grids to position descriptions; integration of the grids into the professional governance bylaws; and an education plan. Workgroup members were assigned to implementation groups based on skills and interest. Leads for each group were role-based; for example, the education plan was led by the director of education; the position descriptions by the CNO and human resources; and the bylaws revision by the chair and advisor of the coordinating council. Implementation occurred in stages from mid-2023 to late 2024.

Conclusions

This initiative involved a novel approach to developing a decisional authority framework for professional governance using accountability grids. Accountability grids use role-specific statements to translate professional standards into expected behaviors. Such a granular interpretation of professional role accountability and its translation into behavioral and outcome expectations provides the detail needed to support professional authority and autonomy. The use of accountability grids may be the missing link needed for the successful enculturation of nursing professional governance. We expect the enculturation of the accountability grids to be ongoing. A research protocol is underway to compare pre- and post-implementation Verran Professional Governance Scale© scores²¹ and results will be used to inform future interventions.

References

Scan here for the full literature review



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