

## 2013-2014 Bylaws

Of the University of Virginia Health System Professional Nursing Staff Organization

### Preamble

Whereas, the University of Virginia Health System is an integral part of the University of Virginia which is a public corporation organized under the laws of the Commonwealth of Virginia; and,

Whereas, under the laws and regulations of the Commonwealth of Virginia, nursing has a scope of practice which is the responsibility of professional nurses; and,

Whereas, each nurse within the Health System has responsibility for his/her individual nursing practice; collectively, members of the professional nursing staff hold aggregate accountability for the quality of nursing care provided within the institution; and,

Whereas, the discipline of nursing intends to establish and uphold its commitment to nursing excellence in accordance with the *ANA Code for Nurses* and the institutional core values of respect, integrity, stewardship and excellence; and our relationship-based model of care,

Whereas, an organizational framework provides a mechanism for the discipline of nursing to establish and uphold its values and standards subject to the authority of the Chief Nursing Officer (CNO) and Clinical Staff Executive Committee of the Health System;

Therefore, the nurses of the professional nursing staff of the University of Virginia Health System, as defined herein, hereby organize themselves into the Professional Nursing Staff Organization (PNSO).

### ARTICLE I – Name

The name of the organization shall be the Professional Nursing Staff Organization (PNSO) of the University of Virginia Health System.

### ARTICLE II – Purpose

The purpose of the PNSO is to be the mechanism for the discipline of nursing to establish, uphold and communicate its values and standards within the University of Virginia Health System.

Specifically, the purposes of the PNSO are as follows:

1. **Shared Governance** - The PNSO shall provide the structure for establishing standards of nursing practice and professional advancement throughout the University of Virginia Health System.
2. **Clinical Practice** - The PNSO shall promote excellence in nursing practice by establishing, upholding and advancing clinical practice in all clinical settings.
3. **Professional Development** - The PNSO shall promote the ongoing development of members through education, mentorship, peer review and recognition opportunities.
4. **Research** - The PNSO shall promote knowledge acquisition through the conduct, evaluation, application, and dissemination of nursing research.
5. **Nursing Quality**- The PNSO shall promote a commitment to quality through case review, monitoring of outcomes data and ongoing improvements.
6. **Healthy Work Environment** – The PNSO is responsible to evaluate the work environment and influence improvements.

## ARTICLE III – Members

### Section 1. Membership

Membership in this organization shall include all registered nurses employed by the Medical Center, all nursing faculty in the School of Nursing and all registered nurses employed by the School of Medicine. Participation in shared governance is a professional responsibility.

### Section 2. Responsibilities and rights of members

Members:

1. Are individually accountable for their nursing practice
2. Are collectively accountable for the outcomes of nursing care provided by the institution.
3. Are expected to participate in self-evaluation and peer review processes.
4. Utilize the mechanisms of the organization to address nursing matters.
5. Are responsible for being informed about the actions and activities of the PNSO.
6. May nominate candidates for office in the PNSO.
7. Vote in the annual election.
8. Participate in shared governance activities.

## ARTICLE IV – Officers

### Section 1. Elected Officers

The elected officers of the PNSO shall be President and President-elect.

1. The **President** shall serve for a term of one year. The **President-elect** shall serve a term of one year as President-elect, succeeding to the office of President at the end of that year. The term of office shall begin on January 1. Officers shall serve until their successors take office.
2. The **President-elect** shall fill a vacancy in the office of President. A vacancy in the office of President-elect shall be filled at the discretion of the Executive Committee to serve until a successor is elected.
3. The President shall be known as **Immediate Past-President** after the completion of his/her Presidential term, and shall serve in this capacity for the time period of one year.

### Section 2. Appointed Officers

**Chief Nursing Officer** - The Chief Nursing Officer (CNO), by administrative appointment, holds authority and responsibility for the practice of nursing within the University of Virginia Health System.

**Dean of the School of Nursing** - The Dean of the School of Nursing (the Dean), by appointment of the University of Virginia Board of Visitors, holds authority and responsibility for the academic and clinical preparation of nurses graduating from the University of Virginia School of Nursing.

#### **Communication Officer**

The Director of Nursing Governance Programs shall serve as the Communication Officer for nurses of the UVA Health System.

#### **Chairpersons of Central PNSO Committees**

1. Chairpersons of Central PNSO Committees shall be appointed annually by the Executive Committee and approved by Cabinet.
2. The term of office shall be one year beginning on January 1. Chairpersons may serve for more than one term, but no more than two terms.
3. Central PNSO Committee Chairs will be afforded ex-officio status to the Cabinet during tenure as chair.

**Additional committee chairpersons and officers** may be nominated by the Executive Committee, and approved by a majority vote of the Cabinet membership, to accomplish the work of the organization.

### Section 3. Nominations and Elections

1. The Nominating Committee shall be composed of 5 PNSO members: 4 shall be elected from the membership and one shall be a past-President of the PNSO.
  - a. A past-President shall be appointed by the Cabinet to serve a one-year term as chairperson.
  - b. The term of service for remaining committee members shall be two years with two members elected each year.
  - c. Elected members of the committee shall be chosen by the membership annually during balloting for President-elect.
  - d. No member may serve more than two consecutive terms.
  - e. In the event that an elected position becomes vacant during a term, the Cabinet may appoint an interim replacement on behalf of the PNSO membership, until the next election is held.
2. The Committee shall solicit nominations and prepare a ballot with qualified candidates for the office of President-elect and Nominating Committee. The slate shall be published on or before September 15, via electronic and paper announcements.
  - a. To be eligible to serve as President, a member must be a nursing leader and active member of the PNSO with Clinical Career Ladder Panel experience. A President-elect may obtain Clinical Career Ladder Panel experience while concurrently fulfilling the President-elect role. PNSO Present-Elect will serve on the panel at the level of their practice (i.e. President-Elect who is a Clinician III or IV will serve on a Clinician III/IV panel; and a President-Elect who is an APN will serve on the APN Career Ladder Panel).
  - b. To be eligible to serve as President, nominee must have a BSN or higher degree in nursing.
3. No elected officer shall be eligible to serve more than 2 consecutive terms in the same office.
4. Elections will be held annually beginning in October; balloting will be conducted for a minimum of 15 days, to include at least two full weekends, to facilitate voting opportunities for all shifts.
5. The Cabinet shall elect two tellers at the first Cabinet meeting following September 30 to count and certify the results of the vote. Tellers may not be elected officers or members of the Nominating Committee.
6. The Chair of the Nominating Committee will abstain from voting. In the event of a tie, the Chair will cast the deciding vote.

## ARTICLE V – Duties of Officers

All officers shall perform the duties prescribed by these Bylaws and such other duties applicable to the offices as prescribed by the adopted parliamentary authority.

### Section 1. Duties of the President

The President shall:

1. Serve as leader and official representative of the PNSO.
2. Lead the PNSO in achieving the purposes of the organization.
3. Partner with CNO to lead strategic planning for the discipline of nursing.
4. Preside over meetings of the membership, the nursing leadership, the Cabinet, and other groups as required to accomplish the work of the PNSO.
5. Advise the Health System leadership on matters affecting the practice of nursing in consultation with the Cabinet and in partnership with the Chief Nursing Officer.
6. Assure processes for ongoing innovation and evaluation of nursing care delivery models.
7. Facilitate the conduct, dissemination, and utilization of research applicable to nursing and health care delivery systems.
8. Receive and consider professional nursing concerns.
9. Be an ex-officio member of all Central PNSO committees except the Nominating Committee.

### Section 2. Duties of the President-elect

The President-elect shall:

1. Succeed to the office of President after one year.

## Exhibit OO4.e

2. Assume the duties of President upon request of the President or in the event the President is unable to serve.
3. Assist the President in the work of the PNSO.
4. Receive and consider professional nursing concerns.
5. Chair the Nursing Summit Planning Committee.

### Section 3. The Immediate Past-President shall:

1. Chair the Nominating Committee.
2. Serve on the Executive Committee.
3. Serve on the Nursing Summit Planning Committee.
4. Provide continuity for ongoing initiatives

### Section 4. Duties of Appointed Officers

**The CNO**, in collaboration with the PNSO, shall:

1. Plan, implement, and evaluate the practice of nursing through the mechanisms of the PNSO.
2. Procure and provide administrative support for the activities of the PNSO.
3. Receive and consider professional nursing concerns.
4. Provide leadership in the determination of clinical and administrative goals for professional nursing in the UVA Health System.
5. Participate in the determination of functions and processes to achieve clinical and administrative goals.
6. Be an ex officio member of the Cabinet.

**The Dean of the School of Nursing** shall:

1. Collaborate with the PNSO on nursing matters.
2. Be an ex-officio member of the Executive Committee.
3. Be an ex-officio member of the Cabinet.
4. Be an ex-officio member of the APN Committee.
5. Be an ex-officio member of the Career Ladder Committee

**The Communication Officer** (or their **designee**) shall:

1. Serve as communication coordinator for the President, the Executive Committee, Cabinet and the PNSO by:
  - a. Establishing and maintaining mechanisms for informing the PNSO membership of meetings, activities and actions of the organization.
  - b. Disseminating information about the PNSO meetings, activities and actions.
2. Collaborate with the recording secretary to maintain an accurate record and archive of the business of the PNSO.
  - a. A recording secretary shall:
    - i. Record, distribute and archive approved minutes of the meetings of the PNSO.
    - ii. Maintain the official membership roster of the PNSO.
    - iii. Serve as staff support for Cabinet and other activities of the PNSO.
3. Fulfill such other duties as prescribed for a Secretary in the adopted parliamentary authority.

## ARTICLE VI – Meetings

### Section 1. Major Event

The PNSO shall hold events throughout the year, addressing the organization's goals & priorities, and giving opportunities to broadly network to promote staff nurse professional development, nursing leadership development, nursing practice and research, nursing shared governance, and recognition of exceptional individual and collective nursing achievements. At minimum, the PNSO shall hold a late-year "Summit on the State of UVA Nursing" open to all PNSO members, reflecting on the year's achievements and upcoming plans.

### PNSO Summit on the State of Nursing

## Exhibit OO4.e

1. The PNSO Summit will be convened with representation from care sites throughout the Health System in the last quarter of each calendar year. This representation will include all of the Local PNSO committee chairs. The Nursing Summit will collaborate with Cabinet to deliver content on selected nursing issues that are relevant to nursing staff.
2. The purpose of the Summit shall be to reflect on the year's achievements and to identify upcoming plans. The date for the Summit will be established by the Executive Committee in January for the current year and publicized at least three months prior to the meeting.
3. The PNSO Cabinet shall approve the agenda for the Summit and publicize it at least two weeks prior to the meeting.

## Section 2. Additional Meetings

1. Any member of the Executive Committee may call additional meetings of the PNSO as deemed necessary to accomplish the work of the organization.
2. Called meetings shall be for the purpose of disseminating information, seeking input on urgent matters, or providing professional development. Notice of called meetings will be given in advance of such meeting via electronic and paper announcements and will include date, time, place, and agenda.

## ARTICLE VII – PNSO Cabinet

The PNSO Cabinet shall conduct the business of the PNSO and perform such other duties as specified in these Bylaws. None of its actions shall conflict with the policies of the University of Virginia Health System.

### Section 1. Cabinet Membership

1. The PNSO Cabinet shall be composed of the Executive Committee and at least five additional voting members appointed by the Executive Committee from the PNSO membership roster. Each appointed Cabinet member shall be an officer of the organization, serve a term of one year and is eligible for re-appointment. A member may resign when circumstances prevent the member from fulfilling his/her duties. A member may be removed from the Cabinet upon two-thirds vote of the voting membership of the Cabinet. Any vacancy occurring among the appointed members of the Cabinet may be filled by appointment of the President, President-elect, and CNO for the balance of the vacated term.
2. Members of the PNSO Cabinet shall:
  - a. Participate actively in the work of the Cabinet and the PNSO,
  - b. Consistently attend Cabinet meetings,
  - c. Lead nursing initiatives as directed by the Cabinet,
  - d. Adhere to established group norms of the Cabinet.
3. Ad hoc members may be appointed by the Executive Committee as needed to provide expertise regarding specific issues of relevance to the work of the PNSO. Ad hoc members will not be voting members of the Cabinet and may be re-appointed for additional terms.

### Section 2. Meetings of the PNSO Cabinet

1. Meetings shall be held no less than monthly. The Executive Committee will establish the meeting schedule in January for the calendar year. The President shall chair all meetings of the Cabinet. The President-elect shall chair the meetings in the absence of the President.
2. Special meetings of the Cabinet may be held upon the call of the President or upon written request of a majority of members of the Cabinet.

## Exhibit OO4.e

3. Executive Session – If a matter of great sensitivity is to be discussed, a closed meeting of the Cabinet called “executive session” may be called by the President.

### Section 3. Duties of the PNSO Cabinet

The Cabinet shall:

1. Be the governing body of the PNSO.
2. Fulfill the purposes of the PNSO.
3. Establish, evaluate, and revise mechanisms to assure the achievement of the purposes of the PNSO.
4. Establish guidelines, procedures and other standards for the professional practice of nursing within the Health System.
5. Establish and implement standards for nursing orientation, competency, inservice and continuing education outcomes.
6. Receive and consider professional nursing concerns from members of the PNSO.
7. Advise the Health System leadership on matters affecting the practice of nursing.
8. Appoint SON committee representatives in accordance with the University of Virginia School of Nursing Faculty Organization Bylaws.
9. Approve Central PNSO committee chairs nominated by the Executive Committee.
10. Conduct an annual review of the Bylaws of the PNSO to recommend any changes necessary to maintain the efficient and effective functioning of the organization.
11. Review proposed Bylaws changes submitted by any member. Report all proposed changes with recommendations to the membership.
12. Review activities of the PNSO for compliance with these Bylaws of the organization and advise the President concerning procedural variances.
13. Review Operational Guidelines every three years and as needed.

## ARTICLE VIII – Executive Committee

The Executive Committee shall be composed of President, President-elect, CNO, the Immediate Past-President, the Magnet Program Manager, Administrator for Workforce Development and Business, and the Director for Nursing Governance. The current President presides over the meetings of the Executive Committee. The Dean of the School of Nursing is an ex-officio member of this committee.

### Section 1. Duties of the Executive Committee

The Executive Committee shall:

1. Appoint the members of the Cabinet.
2. Nominate chairpersons of the Central PNSO Committees for the Cabinet’s approval.
3. Utilize the mechanisms of the PNSO to achieve the purposes of the organization.
4. Establish the schedule and provide planning input for meetings of the PNSO.
5. Act on urgent nursing matters between Cabinet meetings.
6. Report any action taken to the Cabinet at the next scheduled meeting of that body.

### Section 2. Meetings of the Executive Committee

The committee shall meet at least monthly and at the call of any member of the Executive Committee.

## ARTICLE IX – Central PNSO Committees

Central Committees shall be established by the Cabinet, CNO or President as necessary to fulfill the purposes of the PNSO. Each committee shall include some representation from members not currently serving on Cabinet, including representatives drawn from Local PNSO Committees. Central Committees should establish a mechanism for active

communication and networking with the Local Committees. Chairpersons of Committees are appointed by the Executive Committee.

## Section 1. Central PNSO Committees

**Clinical Practice Committee** - The Clinical Practice Committee is accountable to the Cabinet for guiding the development, implementation and evaluation of nursing practice guidelines, procedures, documentation and standards.

1. **Membership:** Members of the Clinical Practice Committee are appointed by the Cabinet, serve for two-year terms and may serve two terms. Exceptions to this apply to Local Practice Committee Chairs, CPC Chair and CPC Vice-Chair. The Immediate Past-Chair will be an ex officio member for one additional year as a resource to the CPC.
2. **Duties:** The Clinical Practice Committee shall:
  - a. Promote evidence-based clinical practice through discovery, education and dissemination of information and research.
  - b. Review and define professional nursing practice and documentation to promote consistency across clinical settings.
  - c. Receive and consider nursing practice and professional concerns from all areas within the Health System.
  - d. Report to the Cabinet at least quarterly providing a summary of activities and bringing forward any recommendations pursuant to the purpose of the Committee or the PNSO.

**Professional Development Committee** - The Professional Development Committee promotes education, mentorship, and recognition opportunities for members of the PNSO.

1. **Membership:** Members of the Professional Development Committee are appointed by the Cabinet, serve two year terms and may serve more than one term.
2. **Duties:** The Professional Development Committee shall:
  - a. Develop and evaluate standards for nursing orientation, competency, in-service and continuing education outcomes.
  - b. Provide guidance to orientation, competency, in-service, and continuing education programs.
  - c. Promote the development of and participation in educational programs for nurses.
  - d. The Committee reports to the Cabinet at least quarterly providing a summary of activities and bringing forward any recommendations pursuant to the purpose of the Committee or the PNSO.

**Career Ladder Committee** - The Career Ladder Committee has the responsibility and authority to provide coordination of the peer review process for advancement, validation, and revalidation within the Nursing Career Ladder. The Career Ladder Committee establishes guidelines for the Clinician III/IV Career Ladder and the APN Career Ladder Panels.

1. **Membership:** The Career Ladder Committee is composed of the chair and vice-chair of the Clinician III/IV Career Ladder Panels, the Chair and Vice-Chair of the APN Career Ladder Panel, and the Dean of the School of Nursing. The Executive Committee appoints a chair for the Career Ladder Committee.
2. **Duties:** The Career Ladder Committee shall:
  - a. Provide oversight for the Clinician III/IV and APN Career Ladder Panels.
  - b. Publish the schedule and procedure for the advancement, validation, and revalidation processes.
  - c. Prepare a slate of nominees for future membership on the Panel to present to Cabinet, including recommendations for Chair and Vice-Chair of the Clinician III/IV Career Ladder Panel(s) and Chair and Vice-Chair of the APN Career Ladder Panel.
  - d. Periodically review the criteria for advancement and recommend revisions in the criteria to the Cabinet.
  - e. Report to the Cabinet at least semiannually providing a summary of activities and bringing forward any recommendations.
  - f. In concert with the Director of Nursing Governance Programs, work with nurse managers, Nursing Education Services and Human Resources to assure that the policies and procedures regarding Ladder

## Exhibit OO4.e

activities are relayed appropriately to newly hired nurses and to nurses in the Health System desiring advancement on one of the career ladders.

**APN Committee** – The APN Committee shall serve as the representative body for Advanced Practice Nursing within the institution.

1. Membership: The APN Committee is composed of all Advanced Practice Nurses working within the Health System.
2. Duties: The APN Committee shall:
  - a. Provide recommendations for addressing professional issues related to advanced practice.
  - b. Facilitate the presence of strategic members on key committees and other institutional venues that require APN input.
  - c. Serve as a forum for key information-sharing related to APN practice, legislative initiatives and future directions introduced by professional organizations.
  - d. Provide a forum for the discussion of APN initiatives and related problem solving.
  - e. Report to the Cabinet quarterly providing a summary of activities and bringing forward any recommendations.

### **Nursing Quality Committee**

1. Membership: Members of the Nursing Quality Committee are appointed by the Cabinet, serve for two-year terms and may serve two terms.
2. Duties: The Nursing Quality Committee shall
  - a. Coordinate clinical peer review process for nursing focused on patient safety events referred from the Patient Safety Committee and patient care areas' nursing leadership.
  - b. Create action plans to address practice issues stemming from these reviews.
  - c. Provide oversight to Nurse Sensitive Quality Indicators Sub-committee to assure all indicators achieve a level of excellence aligned with institutional goals.

**Nursing Research Committee** - The Research Committee is accountable to the Cabinet for implementing evidence-based practice by incorporating nursing research into daily interventions.

1. Membership: Membership will be considered based upon research application experience and education. Consistency of the group will be maintained over time to support growth in the development of research utilization skills.
2. Duties:
  - a. Collaborate with PNSO Practice Committees to incorporate the Evidence-Based Practice template into decision making processes.
  - b. Foster understanding of Levels of Evidence.
  - c. Support efforts to increase research utilization.
  - d. Receive updates/reports from PNSO Nursing Research Mentor Program.
  - e. Contribute to Evidence-Based Practice Symposium planning.

### **Management Committee –**

1. Membership: Membership will be comprised of selected Managers representing the major care delivery regions, three direct care Registered Nurses who have completed or are currently enrolled in the UTeam Leadership Academy, and a Director or Administrator. Members serve a two-year term and may serve for a maximum of two terms.
2. Duties: The Management Committee shall
  - a. Provide a forum to prioritize new, approved PNSO initiatives and to propose or augment implementation plans.
  - b. Develop the plan to operationalize initiatives and collaborate with the central PNSO committee(s) to modify implementation timelines with consideration for timing, resources or logistics.



## Exhibit OO4.e

- c. Focus on the standardization of nursing initiatives that have impact over broad areas of practice; i.e., single-unit issues or local practice area issues will not be addressed at this level.
- d. Seek to remove barriers in the provision of patient care and education, as identified by the Cabinet and other nursing leaders.

**PNSO Ambulatory Nursing Committee** - The Ambulatory Nursing Committee is accountable to PNSO Cabinet for guiding the development, implementation, and evaluation of ambulatory evidence-based practice, quality, and professional development.

1. **Membership:** Members of the Ambulatory Nursing Committee are appointed by the Cabinet, and serve for two-year terms. Exceptions to this are for standing members. The Immediate Past-Chair will be an ex officio member for one additional year as a resource to the ANC.
2. **Duties:** The Ambulatory Nurse Committee shall:
  - a. Promote evidence-based clinical practice through discovery, education and dissemination of information and research.
  - b. Review and define professional nursing practice and documentation to promote consistency across ambulatory settings.
  - c. Provide guidance and recommendation for annual ambulatory competencies and CBLs.
  - d. Provide a forum for the discussion of ambulatory practice changes and related problem solving.
  - e. Collaborate with PNSO Central Committees to address issues across the continuum of care.
  - f. Collaborate with ambulatory leadership and nursing quality committee to biannually review patient satisfaction results and provide recommendations for action plans.
  - g. Report to the Cabinet quarterly providing a summary of activities and recommendations for future initiatives.

## Section 2. Initiatives

Initiative work groups are appointed by the Cabinet on an as-needed basis, as an outgrowth of any issue that requires an extended process to resolution.

### ARTICLE X – Local Shared Governance (“Local PNSO Committees”)

All units and practice areas will be required to address minimally the following aspects of professional nursing practice at the local level:

- Clinical Practice
- Quality
- Professional Development
- Research

1. This may be accomplished through a structure of individual committees or combined committees.
2. All nurses will participate in local PNSO committee work.
3. Minutes will be kept for all local meetings and should reflect at minimum the four aspects required.
4. Local PNSO committees will identify the relevant Central PNSO Committee(s) with which to communicate issues that cross the boundaries of local practice. Local PNSO Committees will have representation on Central PNSO committees.

### ARTICLE XI – Disciplinary Procedure

Elected officers may be removed for due cause. Due cause shall be defined as unprofessional conduct, mental or physical impairment rendering the officer unable to fulfill the duties of office and/or failure to perform the duties of office as stated in these Bylaws. A process of removal may be initiated by the CNO, the Cabinet, or by petition of 50

## Exhibit OO4.e

PNSO members. The Cabinet will review for due cause and place a recommendation before the membership. Removal from office shall require two-thirds of the votes cast on ballots returned.

### **ARTICLE XII – Parliamentary Authority**

The proceedings of the PNSO shall be governed by the rules contained in the current edition of *Robert's Rules of Order Newly Revised* in all cases to which they are applicable and not inconsistent with these Bylaws or any special rules of order the organization may adopt.

### **ARTICLE XIII – Amendments**

These Bylaws may be amended during the annual election balloting by two-thirds of the votes cast on ballots returned. Proposed amendments shall be disseminated for open comment prior to submitting to the membership for a vote. The PNSO Cabinet is authorized to correct article and section designations, punctuation and cross-references, and to make other such technical and conforming changes as necessary to reflect the intent of the PNSO.

Adopted by vote of the membership - June, 2000

(Revised by vote of membership, November 2002, 2003, 2004, 2005, 2006, 2008, 2009, 2010, 2011, 2012, 2013)