2.3 Professional Nursing Council Bylaws

PREAMBLE

A. Nursing Practice is responsible for the nursing care and nursing management of patients admitted to and/or treated at UR Medicine. In addition to caring for patients and their families, professional nursing staff contribute to the education of students and other health professionals through teaching and role modeling, and by creating and maintaining an environment conducive to quality patient care and quality learning experiences. Through participation in research activities and evidence-based practice, professional nursing staff contribute to the advancement of knowledge of nursing practice, health care and health care delivery systems.

B. The Chief Nursing Officer is responsible for nursing practice at UR Medicine and reports directly to its Chief Executive Officer. The Chief Nursing Officer executes her responsibilities for the management and operation of Nursing Practice programs and the delivery of nursing services through its shared governance philosophy and structures. The Professional Nursing Council provides advice to the Chief Nursing Officer relative to the practice of nursing at UR Medicine.

NAME

• The name of this organization is the Professional Nursing Council of UR Medicine/Strong Memorial Hospital, commonly referred to as the PNC.

PURPOSE

A. The Professional Nursing Council (PNC) is a well-developed shared governance model that provides nurses of all levels with the opportunity to participate in decision making at unit, service, and organizational levels. It works to support the autonomy and empowerment of nurses and is an important element of nursing practice’s infrastructure. This structure is a component of the Strong Memorial Hospital (SMH) Professional Practice Model (PPM). The PPM demonstrates the centrality of the patient and family at SMH and represents nursing’s commitment to patient safety and quality outcomes through interdisciplinary collaboration and clinical leadership. The model contains shared decision-making processes and a multi-directional communication structure that includes the CNO, nursing organization leadership, and nursing staff.

B. The Professional Nursing Council is established to guide the continuing development of nursing practice at UR Medicine. The Professional Nursing Council provides advice to the Chief Nursing Officer of UR Medicine/Strong Memorial Hospital relative to the practice of nursing. Specifically the purposes of the...
organization are to:

1. address the nursing practice needs at SMH of all members of the nursing staff.
2. identify the nursing practice needs at SMH of all members of the nursing staff.
3. provide an integrated structure for professional nursing practice.
4. participate in the development of an promulgation of the standards of nursing practice in conjunction with the medical center quality and safety programs and the tenants of Magnet.
5. address the nursing practice needs at SMH of all members of the nursing staff.
6. identify and problem solve issues that affect Nursing Practice staff.
7. provide an integrated structure for professional nursing practice.
8. participate in the development of and promulgation of the standards of nursing practice in conjunction with the medical center quality and safety programs and the tenants of Magnet.
9. promote quality nursing care of patients and families.
10. influence, contribute to and support the professional education of students and staff.
11. encourage and support scientific inquiry for the continual improvement of nursing practice and health care.
12. promote the continuing development of professional nursing within URMC/Strong Memorial Hospital.
13. promote University-sponsored community service activities throughout the hospital and surrounding communities.

MEMBERSHIP

- The membership of the Professional Nursing Council of UR Medicine consists of those registered professional nurses employed by URMC/Strong Memorial Hospital.

MEETINGS

- UR Medicine's Registered Nurses are invited to attend monthly meetings of the Professional Nursing Council and an annual educational retreat (See Article VI). Special meetings of the membership may be called as needed to address specific Nursing Practice professional development and other needs as they arise.

PROFESSIONAL NURSING COUNCIL

A. Composition

The Professional Nursing Council is composed of staff representatives from:

1. each inpatient unit
2. ambulatory care areas

In addition, the following are included in the Council membership:

1. one nurse manager from each service
2. one advanced practice nurse from each service
3. one assistant nurse manager from each service
4. Nursing Practice Financial Manager
5. the Chief Nursing Officer.

The Professional Nursing Council maintains eight Sub-Councils. An advisor for each Council is appointed on advice from the Chief Nursing Officer. Each Council is co-chaired by an Advanced Practice Nurse and a staff nurse appointed by the Professional Nursing Council on advice from the Chief Nursing Officer.

The eight Councils have been named:
1. Clinical Practice Council
2. Cultural Inclusion Council
3. Economic Awareness Council
4. Magnet Champion Council
5. Professional Development Council
6. Quality and Safety Steering Council
7. Research and Evidence Based Practice Council
8. Electronic Medical Records/Nursing Advisory Council

B. Advisory Council

The Professional Nursing Council maintains an Advisory Council that is composed of the Chief Nursing Officer, and the Advisors, APN Co-Chairs and Staff Co-Chairs of the eight Sub-Councils. The PNC Advisory Council meets twice per year, with agendas set by the CNO and PNC Chairperson. Special meetings of the Advisory Council may be called as needed to address specific Nursing Practice needs as they arrive.

C. Distribution of Membership by Department/Service/Group

Distribution of PNC membership is based on the number of authorized full-time equivalent positions in each department, service or group. Each unit and/or service area is expected to identify an appropriate number of staff to serve as members of the Professional Nursing Council.

D. Eligibility

To be eligible to serve as a Professional Nursing Council Unit Representative, one must be a full or part time employee who has completed one full year of employment or its equivalent as an RN at URMC/Strong Memorial Hospital.

E. Duties/Expectations of PNC Representatives

All PNC representatives are expected to represent their clinical area in a professional and respectful manner. Representatives provide input when requested at PNC meetings and by the CNO. Representatives are also responsible for disseminating information obtained at monthly PNC meetings to their clinical areas in a timely fashion.

F. Unit Representation Selection
Representatives and alternates to the Professional Nursing Council are selected or elected by unit staff and management. In the event that a representative and/or alternate is unable to complete his/her term, the unit's nurse manager will designate a replacement. Length of representation is at the discretion of the individual clinical areas.

G. Vacancies

The Chairperson, on advice of the Chief Nursing Officer, has the authority to fill vacancies as they occur. The successor serves until the next scheduled election.

H. Functions

The functions of the Professional Nursing Council are:
1. conduct the affairs of the Professional Nursing Council.
2. plan the agendas for meetings of the Strong Nursing Council.
3. receive professional nursing concerns related to nursing practice and to refer these to the appropriate committee(s) of the Strong Nursing Council or the shared governance structure of nursing practice.
4. monitor the performance of committees and to consider and act upon the recommendations of the committees through referrals to the appropriate offices or committees in the shared governance structure of nursing practice.
5. disseminate information to the general membership.

I. Meetings

The Professional Nursing Council meets monthly and/or at the discretion of the Chief Nursing Officer. Special meetings may be called at the request of the Chairperson. Professional Nursing Council meetings are open to all nursing staff.

J. Quorum

A quorum shall consist of the members of the Professional Nursing Council present at the meeting. Recommendations to the Chief Nursing Officer require the approval of a majority of the Strong Nursing Executive Council.

K. Voting

All members of the Professional Nursing Council are eligible to vote.

OFFICERS

• The officers of the Professional Nursing Council shall be elected by the Professional Nursing Council membership. The officers shall be a Chairperson, Vice-Chairperson, and Secretary

A. Eligibility of Office

Nominees for officers must be members of the Professional Nursing Council for a minimum of one year.

B. Election of Officers
Election of officers of the Professional Nursing Council will take place by secret ballot of the Professional Nursing Council members. The Chairperson presents a slate of candidates to the Professional Nursing Council. Election to office is by a majority of the Professional Nursing Council. Officers serve until their successors are elected by the Professional Nursing Council.

C. Term of Office

The election of Professional Nursing Council officers is conducted at the December meeting. The Professional Nursing Council elected officers serve a term of one year with the option of running for a second one year term. Elected members assume office on January 1st. All terms expire December 31st of the year elected to office.

D. Vacancies

In the event of a vacancy occurring in the office of Chairperson, the Vice-Chairperson will assume the responsibilities of the office. If there are simultaneous vacancies in Chairperson and Vice-Chairperson offices, the Chief Nursing Officer will appoint an Acting Chairperson until an election by the Professional Nursing Council can be held. The voting requirements for special elections shall be the same as set forth in Section 2.

E. Duties of Office

The duties of the **Chairperson** are:

1. preside at all meetings of the Strong Nursing Council and the Professional Nursing Council.
2. manage the activities of the Professional Nursing Council.
3. assist the sub-council chairpersons in the appointment of leaders for the standing committees on advice from the Professional Nursing Council.
4. call special meetings of the Professional Nursing Council.
5. appoint ad hoc committees as the need arises.
6. serve as an ex-officio member of all committees.
7. Provide support to sub-council chairpersons

The duties of the **Vice-Chairperson** are:

1. assume the duties of the Chairperson in the absence of the Chairperson
2. assist the Chairperson in the performance of duties.
3. conduct and lead sub-council meetings.

The duties of the **Secretary** are:

1. To assume the duties of the Vice Chairperson in the absence of the Vice Chairperson
2. To assume the duties of the Chairperson in the absence of the Chairperson and Vice Chairperson.
3. To assist the Chairperson and Vice chairperson in the performance of duties
4. To maintain records of member attendance and activity
5. To enhance communication between the Professional Nursing Council and Nursing Practice
Administrative support for the Professional Nursing Council is provided by assigned Administrative Assistant. The duties of the Administrative Assistant include:

1. Support the activities of the Professional Nursing Council to include:
   a. Maintain the records of the Professional Nursing Council with the assistance of the Secretary.
   b. Facilitate catering needs, meeting room reservations and conducting the general correspondence of the Professional Nursing Council.
   c. Distribution of meeting notices and agendas of the Professional Nursing Council.
   d. Distribution of all minutes of meetings of the Professional Nursing Council.

AMENDMENTS

These bylaws should be reviewed every three years to ensure they are still appropriate and pertain to current PNC activities and can be amended at any time by the Chief Nursing Officer.

Original: 1998
Document Number Changed 7/31/03 [From 1.1.2 to 2.3]
Revised: 11/99 (Strong Nursing Council), 11/00, 10/03, 12/03 Chief Nursing Officer, 12/06, 4/10 (PNC Advisory Council), 1/13 (PNC Advisory Council), 12/15/16 (PNC Advisory Council, CNPD)

Attachments: No Attachments