

## Sinai Hospital Patient Care Services Shared Decision-Making Councils

Committee	Purpose
<b>Patient Care Leadership Council</b>	Patient Care Leadership Council serves as a forum where Patient Care Directors and Advanced Practice Nurses (Clinical Specialists), under the leadership of the Chief Nursing Officer, provide the mechanism for the discipline of nursing to establish, uphold, and communicate the department's values and standards within the Sinai Hospital system.
<b>Clinical Practice Council</b>	The Clinical Practice Council exists to promote excellence in nursing by establishing, upholding and advancing clinical practice in all clinical settings. This is done through oversight and maintenance of current policies and procedures and the development of new policies and procedures, all shaped by sound scientific evidence.
<b>APN Council</b>	The APN (CNS) at Sinai Hospital collaborates with multiple disciplines to facilitate the achievement of intra-and interdisciplinary best practice. To accomplish this, the group meets on a regular basis to identify and resolve issues of best practice. The bedside nurse is a key stakeholder in the best practice environment and our role, as APNs, is to mentor nursing staff to understand and use the expertise of others and to mentor professional leadership and accountability for nursing's role within the healthcare team. Time is spent at each meeting developing a common vision of care for the bedside and determining how we will work with each individual nurse to achieve that vision.
<b>PCS Nurse Manager Council</b>	The Patient Care Services Nurse Manager Council convenes monthly in the spirit of camaraderie and provides the organization's nurses managers with the opportunity to debrief regarding organizational initiatives and their role as leaders. Nurse managers use this time to share "best practices" and discuss opportunities for further development within their ranks.
<b>Nurse Manager Premium Labor Council</b>	Guided by our belief that the Nurse Manager serves as the Chief Retention Officer for direct care nurses, members of the Patient Care Services executive leadership team developed the Nurse Manager Premium Labor Council (NMPLC). The Council empowers Nurse Managers to positively impact the recruitment and retention of direct care nurses. In addition, the Council focuses on ancillary roles which directly impact the work of the direct care nurses in the organization. These roles include, but are not limited to: Patient Care Associates, Critical Care Technicians, Administrative Associates, and other clerical/administrative support personnel depending upon the unit. The Council also functions as a liaison to other hospital departments which service the clinical units. Service from these areas is monitored and expectations are clarified. These areas include, but are not limited to: Food Service, Distribution, Clinical Engineering, Lab/Pathology, Nurse Recruitment/HR, Purchasing, Pharmacy, and Security.
<b>Performance Improvement Committee</b>	<p>The Performance Improvement Committee (PIC) assists in supporting the various hospital departments in achieving continuous excellence in patient care, education and community service. Specifically, the PIC:</p> <ol style="list-style-type: none"> <li>1. Provides a forum for identification and problem-solving of common safety and patient care issues and trends, fostering communication among hospital departments</li> <li>2. Selects and monitors house-wide indicators including clinical and patient safety issues</li> <li>3. Identifies and analyzes trends having house-wide implications for patient care services</li> </ol>
<b>Professional Development Council</b>	The Professional Development Council (PDC) shall facilitate and promote the ongoing development of nurses through education, mentorship, certification, and the creation and support of learning opportunities at the organizational level. In addition, the PDC shall serve as the oversight committee responsible for acting on information and professional development needs as reported through the unit/service line based staff education committees.

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<b>Diversity Council</b>	The Diversity Council (DC) will work in concert with already-established LBH councils charged with creating and maintaining a diverse working and healing environment. The DC will develop strategies that celebrate diversity from all perspectives and will work to ensure that both patients and employees are comforted and cared for. Furthermore, the Diversity Council recognizes the broad scope of “diversity” and extends its meaning beyond religion and ethnicity to include aspects of physical health (obesity, physical disabilities), age, sexual orientation, and gender.
<b>Nursing Research Council</b>	The Nursing Research Council (NRC) shall promote knowledge acquisition through the conduct, evaluation, application, and dissemination of nursing research. A primary responsibility of this committee is to create a culture of clinical inquiry, broad sharing, and data-driven practice. Furthermore, this committee shall act promptly on clinical practice issues that have been raised by unit/service line –based outcomes and practice committees, MDCs or any other committee charged with oversight for clinical practice at the unit/service line level. In addition, this committee will be responsible for organizing journal clubs and creating stress-less opportunities for direct care nurses to learn basic statistics and principles of evidence-based practice and nursing research.
<b>Patient Care Board</b>	Patient Care Board provides an opportunity for the administrative patient care leadership group to convene on a regular basis with the purpose of addressing organizational issues that impact the delivery of patient care. While much information dissemination occurs, this is a decision-making forum. In the interest of collaborative practice, members of the following disciplines outside of Patient Care Services are invited as ad-hoc members: Clinical Educators, Infectious Disease Practitioners, Wound Care Specialists, Patient Safety Officer, Risk & Quality Nurses, Trauma Nurse Coordinator, Health Information Management, Respiratory Care and Radiology representatives.
<b>Family Centered Care Advisory Council</b>	It is the mission of the Family Centered Care Advisory Council to develop and maintain an organizational culture that is respectful, empowering, supportive, flexible and responsive to the needs of the patient and family. The Family Centered Care Advisory Council is charged with creating and maintaining a culture where patients, families and the healthcare team work collaboratively in an environment of mutual respect and shared goals, to promote optimal health outcomes.
<b>Nursing Advisory Council</b>	The primary purpose of the Nursing Advisory Council is to assist the CNO of Sinai Hospital by serving in an advisory capacity. Members of the NAC will make recommendations for improvements as they relate to the structure, process, and outcomes of nursing practice. Additionally, members of the NAC will serve as the voice of their colleagues, representing their concerns over issues directly impacting the delivery of care as well as sharing praise and positive comments for noted improvements. The Nursing Advisory Council is composed of 80% direct care nurses and 20% nursing leaders.
<b>Nursing Leadership Assembly</b>	The Nursing Leadership Assembly serves as an informal gathering of nurse leaders across all levels of the Department of Patient Care Services. The primary purpose is to serve as a forum where updates about various nurse-driven initiatives are shared, information is clarified, and if necessary, action plans are developed. In addition, the Assembly serves as a forum for the CNO to ensure that all initiatives are moving forward and are aligned with her vision for the Department of Patient Care Services.

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<b>Outcomes and Practice Council</b>	The Outcomes and Practice Council is a unit or service-based council comprised of direct-care nurses and Clinical Nurse Specialists. The primary functions of the Outcomes and Practice Council are to: 1) examine nursing practice issues, questions or discrepancies across practice areas and seek clarification through application of the Rosswurm and Larrabee Model for Evidence-Based practice; 2) identify the resources necessary for the development and implementation of best practice; 3) evaluate nursing-sensitive quality indicator data on a routine basis using the highest level benchmarks available and creating action plans when necessary; 4) conduct routine review of policies, procedures, standards, and protocols specific to the nature of nursing in the unit or service line, and 5) assess factors that may impact the work environment, implementing and evaluating actions plans as necessary to maintain safe, productive, reliable, and effective methods of delivering patient care.
<b>Staff Education Committee</b>	The Staff Education Committees shall promote the ongoing development of nurses through education, mentorship, and certification. Nurse educators and direct care nurses provide a coordinated approach to support the achievement of specific educational outcomes and competencies at the unit or service level. In addition, the Staff Education Committees will serve to support the dissemination of knowledge and information through the use of traditional and creative teaching techniques as requested by the Nursing Research Council, Patient Care Board, Performance Improvement Committee and other committees or councils charged with oversight of patient care and nursing practice.
<b>Peer Review Committee</b>	Peer Review has an essential role in strengthening professional nursing practice and creating a highly reliable practice culture. Peer review occurs through both formal and informal mechanisms at Sinai Hospital and is deemed important in guiding professional development. Peer Review committees are unit-based and serve as mechanisms whereby clinical performance is measured and assessed by peers. In addition, Peer Review Committees set up practical experiences such as share-days and shadow-days to help both prospective employees and current staff determine mutual fit for a position.
<b>Scheduling Committee</b>	Self-scheduling is essential in creating adequate balance between work and life and is associated with increased nurse and patient satisfaction. . The Scheduling Committees at Sinai Hospital are unit-based and serve primarily to ensure that nurses, under pre-set rules and guidelines, have the flexibility to request optimum work shifts. All schedules are reviewed by nursing leaders on the unit before being approved to ensure that appropriate coverage, skill mix, and patient needs have been considered.
<b>Premium Labor Council</b>	<p>The Premium Labor Council is multidisciplinary in nature. While originally intended as a temporary council to address issues associated with the use of premium labor at the bedside, the outcomes and creative solutions generated by council members proved to be valuable and thus moved the Council from temporary to permanent status.</p> <p>The Premium Labor council exists to: 1) develop creative strategies for recruitment of nurses and patient care assistants, 2) reduce premium labor costs and dependence on agency nurses, and 3) develop creative strategies aimed at nurse and patient care associate retention.</p>