

Nursing Research Council Charter

1. Purpose of Council

The Nursing Research Council (NRC) will define, implement and maintain standards of best nursing research and promote evidence based practice (EBP) approach to patient care. The NRC will also provide resources for EVP throughout UNMH. The UNMH NRC will also communicate and coordinate with the practice and education councils for implementation of EBP. These standards will be guided by the American Nurses Association Scope of Practice and the NM BON Practice Act and a desire to promote quality of care and disseminate evidence-based nursing practices.

2. Council Goals

- 2.1. Review and advise on staff development activities based on the standards of nursing research, educational standards and regulatory requirements for these areas
 - 2.1.1. Practice standards
 - 2.1.2. PDSA on each unit
 - 2.1.3. Classes on EBP
 - 2.1.4. Patient care outcomes
 - 2.1.5. Publications
 - 2.1.6. HRRC applications
 - 2.1.7. Membership on NRC
 - 2.1.8. Nursing Research Rounds every month
- 2.2. Address EBP issues brought before this council

Measures of Team Success.

- 3.1. 90% of hospital areas will have member representation
- 3.2. Members attend 75% of meetings every year
- 3.3. PDSA/EVN/Research programs will be on 90% of the units
- 3.4 Obtain PDSA/EVN/Research findings within six months of the

4. Co-Chairs

- 4.1. Permanent appointment of the NRC Chair with rotating co-chairs.
- 4.2. The Co-Chair_shall be elected from the membership of the Council after serving as a member at least one year
 - 4.2.1. Serves a minimum of one year
 - 4.2.2. Ideally, only one Co-Chair will change per year, as of January 1
- 4.3. Nominations, Election, Term of Service
 - 4.3.1. A call for nominations will start in July
 - 4.3.2. Elections will be held in December
 - 4.3.3. Serve for one year, from January through following December
- 4.4. Duties
 - 4.4.1. Will share responsibilities for reporting to the Nursing Executive Council on a monthly basis
 - 4.4.2. Schedule and facilitate regular monthly meetings

- 4.4.3. Prepare an agenda for each meeting after reviewing requests from members and issues brought forth
- 4.4.4. Distribute agenda, previous month's minutes, and received referrals in advance of meeting
- 4.4.5. Ensure that meeting minutes are completed by an appointed scribe
- 5. Members and Responsibilities
 - 5.1. Area Director of Nursing Education and Research (advisory)
 - 5.1.1. Liaise with other departments as needed
 - 5.1.2. Ensure that regulatory standards are followed
 - 5.1.3. Serve as a resource
 - 5.1.4. Advise council on issues that impact patient care and the hospital as a whole.
 - 5.2. Director of Nursing Research
 - 5.3. The following service areas will be represented by a nurse:
 - 5.3.1. <u>Women's Area</u> (Labor & Delivery, Maternity & Family Planning Clinics, Women's Health Clinic, Mother & Baby Unit, Lactation, & Newborn Clinic, REI)
 - 5.3.2. <u>Surgical Services</u> (Main, BBRP, OSIS, Pre-Op: PACU, Pre-Op Clinic; Pre-op Hold area, OR)
 - 5.3.3. <u>Pedatric Ambulatory</u> (Carrie Tingley Hospital –outpatient, Outpatient Clinics, Rehabilitation Services, Children's Heart Center, Peds Clinic)
 - 5.3.4. <u>Adult Ambulatory</u> (All clinics except Women's Health Clinic and Pediatric Clinics listed above.)
 - 5.3.5. <u>Emergency Services</u> (Staffing Assistance Resource Service, Lifeguard, Urgent Care, Emergency Department)
 - 5.3.6. <u>Children's Hospital Inpatient</u> (Peds Specialty Care, Pediatrics, NBICU, ICN, Pediatric Hospice, PICU, CTH Inpatient)
 - 5.3.7. Medical/Surgical Inpatient Services & Progressive Care Units (Ms. Demarest, ED) (Neuroscience, General Surgery/Transplant PCU, Cardiothoracic PCU, Medical/Surgical PCU, Trauma PCU)
 - 5.3.8. Medical/Surgical Inpatient Services & Progressive Care Units (Ms. Dahlke, ED) (General Medicine, Oncology PCU, Dialysis, Family Medicine, Surgical Services PCU, Orthopedic PCU, PICC/VART, Conscious Sedation, Burn and Wound)
 - 5.3.9. Adult Intensive Care Units (TSBICU, MICU, NSICU)
 - 5.3.10. <u>Behavioral Health</u> (Children Psychiatric Center, University Psychiatric Center)
 - 5.4. Ad Hoc members
 - 5.4.1. Representatives of non-nursing areas involved in clinical practice
 Will attend those meetings when their materials or requests are being reviewed
 for approval or when nursing research issues affect nursing within that setting.
 - 5.5. Appointments and Term of Service
 - 5.5.1. Appointments are on a volunteer basis
 - 5.5.2. Serve for one year, from July through following June
 - 5.6. Member responsibilities
 - 5.6.1. Actively participate in discussion and work processes in council meetings or subcommittees
 - 5.6.2. Identify and bring forth research/practice issues from clinical service area
 - 5.6.3. Communicate findings/issues back to clinical service area represented through shared governances

- 5.6.4. Report activities and disseminate minutes/ information to their respective unit or clinical area representatives
- 5.6.5. Assist with identifying speakers for the monthly Nursing Research Rounds

6. Voting

- 6.1. Each Council member shall have only one vote (if there is more than one nurse per clinical service area on the Council, there is still one voting member per service)
- 6.2. Area Director and Ad Hoc members will have no voting privileges

7. Meetings

- 7.1. Monthly
- 7.2. Last one hour
- 7.3. Held on the hospital campus
- 7.4. Members must attend at least 75% of meetings to retain their Council membership
 - 7.4.1. Inability to attend a meeting must be communicated to the Co-Chairs in advance
 - 7.4.2. Missed meetings
 - 7.4.2.1. The Council member may send an alternate to attend this council's meeting
 - 7.4.2.2. The council member may obtain information from the missed meeting and disseminate this to the appropriate groups

7.5. Quorum

- 7.5.1. A simple majority of members present
- 7.5.2. A consensus decision making process is preferred; when necessary
- 7.5.3. A motion will be considered approved when passed by a minimum of 2/3 majority vote
- 7.5.4. An alternate member may vote in lieu of an absent Council member

8. Bylaws amendments

- 8.1. These bylaws may be amended at any meeting of the Council with a quorum of majority of members present
- 8.2. Members shall be notified in writing (14) fourteen days in advance of proposed change
- 8.3. Notification shall include present bylaw section citation and proposed amendment
- 8.4. The Nursing Executive Council shall review and approve proposed amendments

9. Reporting Schedule

- 9.1. As needed, this Council will interact with other Councils at the monthly Nursing Council Chair Committee meeting
- 9.2. A Co-Chair will report monthly to the Nursing Research Council
- 9.3. A Co-Chair will ensure meeting minutes are posted on the Magnet website

10. Ground Rules

- 10.1. Members will be prepared for meetings
- 10.2. All members have an equal right to be heard
- 10.3. Everyone will program pagers and cell phone alarms to vibrate
- 10.4. We will begin and end on time
- 10.5. Information shared in meetings can be shared with others unless a member asks that it be kept confidential

11. Recommendations

- 11.1. Council members will collaboratively make EBP recommendations for referrals; may need to delay if more information necessary
- 11.2. EBP/Research recommendations will be based on troubleshooting, problem solving, and planning for actions to implement the education for nursing research/evidence based practice