An illustration of three people in a meeting. One person is standing and pointing at a large pie chart that is divided into several colored segments: a large red one, a yellow one, a blue one, and a small orange one. Two other people are seated at a table, looking at the chart. The table has some papers and a small blue object on it. The background is a light gray grid.

**R**ecognized for their unique capacity to understand industry needs, nurse leaders can impact large-scale change and improve a demanding healthcare system. The Institute of Medicine (IOM) report, *The Future of Nursing: Leading Change, Advancing Health*, emphasizes the significance of nursing leadership positions in providing safe, high-quality, and effective delivery of healthcare services. To transform the nursing profession, the IOM calls on nurses to:

- 1) practice to the full extent of their education and scope
- 2) achieve higher levels of education through an improved education system and seamless progression
- 3) be full partners with physicians and other healthcare professionals in redesigning the healthcare system
- 4) participate in workforce planning and policy making through better data collection and an improved information infrastructure.<sup>1</sup>

Nurses can achieve this full partnership, participation, and collaboration through service on committees, commissions, and boards where healthcare decisions are made.<sup>1</sup> Although not widely supported in the literature as the norm, engaging nurses in the governance of healthcare facilities is a move in the right direction. In particular, when nurses attain positions on governing health boards, where they can emphasize cost containment, safety, and quality care in their day-to-day practice, they situate themselves to contribute to the IOM's charge.<sup>2</sup>

This article will provide an overview of governing boards, the necessary competencies for successful board involvement, and information on how nurses can use opportunities in their state action coalitions to participate in high-level leadership.



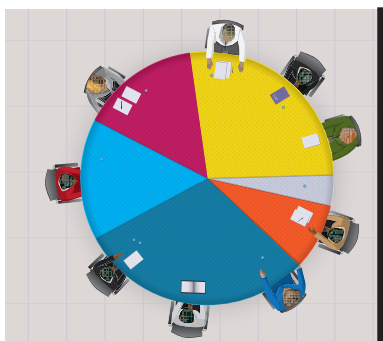
# A place at the table: Positioning nurses where healthcare decisions are made

By Tamara Rose, MSN, RN, and  
Mary A. Nies, PhD, RN, FAAN, FAAHB

### Why boards need nurses

In the face of public issues with access to care, growing costs, and quality concerns, governing boards must increase transparency and accountability. Healthcare boards have a fundamental responsibility to monitor organizational quality

A second factor is the belief held by traditional board leaders that the nursing profession lacks the ability to weigh in on issues of safety and quality. A third attributable factor is the potential conflict of interest created when governing entities place an employee in a voting capacity.<sup>3</sup>



***Because governing boards are situated at the highest level of organizational leadership, nurses need to become more visible and present in the boardroom to initiate change.***

and safety through established standards.<sup>3</sup> Therefore, it's essential to involve a variety of healthcare professionals in the governance process. In preparation for their participation, nurses have to understand the healthcare delivery system, quality improvement methodology, and emerging theories of innovation, and develop practices that incorporate teamwork and interprofessional collaboration.<sup>4</sup>

Although nurses represent the largest component of the healthcare workforce, historically they're overlooked as decision makers.<sup>4,5</sup> A summary of recent national surveys on board composition reveals that, on average, physicians comprise approximately 20% of health-related boards, whereas nurses represent just 2% of the members.<sup>6</sup> This disparity is attributable to several factors. First, gender may play a role. A recent survey of nursing revealed that 90% of RNs in the United States are women.<sup>3</sup> Meanwhile, a review of board membership revealed that women held only 23% of the board seats in non-profit and public hospital systems.

Ultimately, none of these misconceptions are valid reasons for the lack of nurses in board leadership positions. Although barriers exist, nurses must prepare for board work in anticipation of future opportunities.

### A crosswalk of competencies

The traditional role of the nurse is rapidly expanding to include leadership. In a recent Gallup survey, opinion leaders from public and private organizations, along with leaders from academic institutions, viewed nurses as bedside clinicians, not as leaders and healthcare decision makers. However, those polled acknowledged that increased levels of education and training could prepare nurses for leadership.<sup>7</sup> In fact, formal educational preparation of the RNs already includes the development of leadership characteristics and responsibilities.

Leadership competencies are integrated in all levels of nursing education (as indicated in the Commission on Collegiate Nursing Education guidelines) to ensure nurses are ready to take the lead on health-

care reform.<sup>8</sup> Nurses must demonstrate this strong industry knowledge and leadership competency in preparation for board service.<sup>9</sup>

Several leadership competency models exist in both education and practice arenas. One researcher identified eight essential leadership competencies for nurses. First, develop a global perspective of the issues in healthcare and the profession of nursing. The second competency requires a working knowledge of technology, which allows for the portability and mobility of data across the system of care. Nurses also need expert decision-making skills rooted in science and predicated on evidence. Most important, nurses must have the capacity to prioritize quality and safety.<sup>10</sup> Political astuteness, the capacity to role model political astuteness, and the ability to exhibit collaborative and team-building skills are additional competencies. The capacity to balance adherence to one's own values with performance expectations, and the ability to cope with change, round out the list of eight.<sup>10</sup>

Beyond individual nursing leadership competencies, essential competencies have been delineated for leaders on governing boards. The American Hospital Association identifies the following essential competencies for board effectiveness:

- understand and value institutional history and context
- encourage board learning
- nurture and develop the board as a cohesive group
- recognize the complexity of issues
- respect the integrity of the governance process
- envision and shape the future direction of the institution.

Although these competencies aren't directly reflective of competencies identified for nurse leadership, similarities exist. Team-building skills

are aligned with nurturing and developing a cohesive group. The ability to cope with change correlates with the ability to envision and shape the direction of the future. Other strong parallels exist between political astuteness and understanding and valuing institutional history, the capacity for board learning, a respect for the governance process, and the ability to recognize complex issues.<sup>10,11</sup>

### Enhancing leadership education

Although all of these competencies are important, it's uncommon for a single trustee to have all of the necessary components to be effective on a governing board.<sup>12</sup> However, nurses should cultivate a broad set of leadership skills to enhance board effectiveness.<sup>13</sup>

Leadership-inclusive curricula can be delivered in a variety of ways. Nursing faculty play a role in developing leaders through modeling behavior, facilitating knowledge and skill development, and exposing students to clinical and practical leadership applications.<sup>14</sup> Partnerships between academic institutions and healthcare organizations also instill leadership competencies in nursing students.<sup>15</sup>

Board training, education, and development in particular should include effective orientation to the board process, as well as participation in a board certification program.<sup>13</sup> These certification programs aim to prepare the trustee to competently govern healthcare institutions and organizations on behalf of the patients and their communities.<sup>16</sup>

### Taking action

Action coalitions have been organized in each of the 50 states and the District of Columbia to ensure people receive effective healthcare when and where they need it.<sup>17</sup> The Future of Nursing Campaign for Action, one

such coalition, aims to advance education transformation, leverage nursing leadership, remove barriers to practice and care, and foster interprofessional collaboration.<sup>18</sup> Increasing the number of nurses on governing boards is one important way to leverage nursing leadership. The Campaign for Action seeks to identify and develop strategies to place 10,000 nurses on boards by the year 2020.<sup>18</sup>

As a doctoral student recipient of the Jonas Nurse Leaders scholarship program, I decided to engage with my state's action coalition and join the Campaign for Action. The Jonas Scholars program encourages recipients to commit to meaningful projects aimed at improving health and health outcomes.<sup>19</sup> Although opportunities to engage in leadership projects are abundant, state action coalitions are a natural fit for emerging leaders who want to get involved in meaningful work.

My initial engagement began when a committee member sought information on nurses currently residing on governing boards in the region where I live. As a nurse and a board member of a federally qualified health center, I responded with interest and willingness to work on the initiative in my state. I was also invited to join a national workgroup with the same focus, but broader scope.

To raise awareness about the campaign, I presented a poster at the 2015 Western Institute of Nursing Research Conference. The poster stimulated thoughtful discussions about nursing leadership at the governing level and raised awareness of the Campaign for Action initiatives. One viewer commented, "I wasn't even aware of the Campaign for Action or the opportunities available." Another simply asked, "Why *aren't* nurses on governing boards?" Yet another wanted to know, "How many nurses are on

boards nationally?" These basic questions indicate the need for better education on the value and importance of nurses serving on local, state, and national boards.

Although the state action coalition I'm on has identified several strategies for increasing the number of nurses on governing boards, I'm working to increase the number of nurses prepared for leadership roles in healthcare policy, design, and decision making. Input from current nurse board members about their experience and preparation for their role is invaluable to the project. To that end, the workgroup will conduct a survey to elicit their perspectives. In the early stages of development, we're designing a questionnaire for gathering these insights to better inform the preparation for board readiness.

### Stepping up

As nurses, we need to prepare for engagement in our systems to ensure safe and effective delivery of services.<sup>1</sup> Because governing boards are situated at the highest level of organizational leadership, and are responsible for the integrity of the institution, we need to become more visible and present in the boardroom if we want to initiate change.<sup>20</sup> Although several factors contribute to the lack of nurses on boards, nurses can continue to enhance their board readiness through the development of leadership skills. State action coalitions are positioned to meet nurses' educational leadership needs and initiate campaigns in alignment with IOM recommendations. Opportunities to get involved in moving these campaigns forward are available and accessible to nurses throughout the nation and ultimately strengthen our profession by positioning nurses as leaders and influencers on healthcare governance boards. **NM**

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At Idaho State University in Pocatello, Idaho, Mary A. Nies is a professor and director of Nursing Research in the Health Science division, and Tamara Rose is a PhD candidate. Rose is also a clinical assistant professor and campus associate dean at Oregon Health & Science University in Klamath Falls, Ore.

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