UPMC Passavant
Professional Practice Council
UPMC Passavant Mission, Vision, Values
Your Care – Our Commitment

Mission – To enhance the health of the communities we serve through clinical and service excellence.

Vision – To be the healthcare provider and employer of choice providing the best by the best.

Values – Communication, Accountability, Respect, Empathy, Safety/Quality.

Nursing Vision Statement

Guiding Principles
- Staff and leaders live our mission, vision, and values every day.
- Respectful communication and dignity resulting in team work and collaborative practice will be the standard.
- Leaders will be visible, guide, and mentor (Transformational Leadership).
- Our shared governance councils will empower and drive accountability and autonomy for our nurses and staff (Shared Decision Making).
- Evidence Based Practice (EBP) will be utilized for all clinical practice and decisions.
- Quality, safety, and patient/family satisfaction will be our priority.
- The Magnet model will be our structural framework for our strategic plan.

Vision
- As nurses we are leading the transformation of our nursing practice through evidence based research and innovation, while fostering a healthy professional practice environment with our collaborative partners. We are dedicated to ensuring a compassionate patient and family centered experience with a focus on safety and quality.

Values
- Our nurses believe in providing safe exceptional care and service excellence by demonstrating exemplar professional practice through nursing innovation
- We incorporate Dignity and Respect in all that we do to provide a healthy work environment and assure open communication.
- We listen to and care for our patients, their families, the community, and our employees, so we may provide the best patient experience and outcomes.
- We are accountable for our actions through personal integrity and responsibility empowering our leaders through shared decision making, adhering to ANA code of ethics

Professional Practice Council Mission
The mission of the UPMC Passavant Professional Practice Council is to serve as the vehicle by which the voices of all professional nurses within UPMC Passavant act as a catalyst by bringing together knowledge, information, and problem-solving solutions to initiate change that promotes the best nursing practice for our patients. (Adapted from UPMC System Professional Practice Council)
Goals/Objectives

The overarching goals of the Professional Practice Council are to foster a practice of effective Communication, Accountability, and Safety

1. Establish a forum comprised of professional nurses to generate and discuss issues that impact not only the delivery of patient care, but also that affect the morale and work environment for the clinical staff.
2. Collaborate with peers and nursing leadership, discussing and recommending alternatives to achieve mutually satisfying solutions to issues.
3. Plan and provide for the provision of professional nursing practice consistent with patient centered care, and the American Nurses Association (ANA) Standards of Nursing Practice. (Appendix A)
4. Create a communication and feedback loop that will provide all nursing staff an opportunity to be heard and be informed about the direction of nursing for now and into the future.
5. Assist in the advancement of professional practice by providing direction for innovative educational programming and support structures to promote professional growth and development based on the needs of our nurses, employees, patients, and organization. (Appendix B)

Membership

1. Membership will consist of all professional staff nurses and patient care support services at UPMC Passavant, representing inpatient care, ambulatory and outpatient care, surgical services and specialty nursing care, as well as all departments which employ registered nurses, and the Vice President, Patient Care Services/Chief Nursing Officer (CNO) and the Director of Nursing (DON).
2. Council members are appointed with input from the unit director, unit-based council and current hospital representative.
3. An alternate member will be identified at the unit level to attend meetings in the absence of the member. The role of this individual will be to attend meetings when the member is not available and to share meeting information with member and peers. *It will be the responsibility of the member to notify the alternate when the member is unavailable to attend a meeting.
4. If a member and/or alternate member (combined) miss two (2) meetings in a one (1) year period, membership will be re-evaluated at the unit level.
5. Terms of appointment shall be a minimum of two (2) years. Membership should be reevaluated at the unit level every two (2) years or as necessary. A new member will attend two (2) meetings prior to assuming the role to become comfortable and familiar with the meeting process.
6. The council member’s appointment should not exceed two terms.
7. Co-chairs of hospital council will be accepted through a nomination process and selected by the Professional Practice Council for a two-year term.
8. The co-chair may serve a second term; the council members would need to officially re-nominate and a majority vote would need to occur.
9. Interprofessional ad hoc members

Mutual Accountabilities of Staff and Nursing Leaders

1. Encourage and allow everyone to speak.
2. Actively listen.
3. No “meeting” after the “meeting”.
4. Come prepared and pay attention to all levels of speakers.
5. Support from one another – willingness to teach and learn.
6. Follow through on commitments.
7. Uphold the ANA Standards of Nursing Practice.
8. Take risks; respectful disagreement is encouraged.
9. Commit to the achievement of quality patient outcomes.
11. Recognize, develop and celebrate the diversity of every professional nurse.
12. Express opinions objectively and honestly; accept feedback openly and constructively.
13. Challenge nursing practice that is not providing positive work environments or poor patient outcomes.
15. Relate to each other with trust, sincerity, integrity, respect and genuineness.
16. It is the responsibility of the council member to read and respond to emails in the requested time frame.
17. When serving on a sub-committee for PPC (i.e. Daisy) it is the responsibility of the PPC member to comply with set deadlines.
18. It is the responsibility of the PPC Council representative to be a positive influence and to promote professionalism among hospital community.

**Reporting Relationships**
- All council members will be responsible to gather issues and ideas from their peers and represent them at the staff council meetings, and provide information.
- Department based councils/department directors will provide monthly written report of progress and goals to the Professional Practice Council.
- The Professional Practice Council chairperson will refer issues which cross multiple departments and which have relationship to the achievement of an organizational focus goal to the Coordinating Council for review and delegation of ownership.

**Process**
- SOAR – Strengths~Opportunities~Aspirations~Results Appreciative Inquiry Model
- Open Discussion Forums
- Group Consensus
- Review of Literature
- Evaluate Best Practices

**Meeting Frequency**
- Monthly (4th Tuesday)
  - 3-hour meeting (12:00 p.m. - 3:00 p.m.)

**Evaluation**
1. Objectives and outcomes based on the established priorities will be developed and measured in an ongoing fashion.
2. Input will be sought at the conclusion of each meeting to assure that the council format and mechanics are meeting the mutual needs of the membership.
3. Input will be sought formally from nursing leadership and nursing staff to assure the council adequately represents the relevant issues facing professional nursing practice.
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UPMC Passavant