Charter
Oregon Nurses Association’s Professional Nursing Care Committee
at Sacred Heart Medical Center (SHMC)

Title of the group: ONA’s Professional Nursing Care Committee at SHMC

Purposes: The PNCC shall

1) Coordinate and collaborate with the Medical Center (MC) to problem solve professional nursing practice issues;
2) Consider the improvement of patient care;
3) Consider issues related to the practice of nursing;
4) Work to improve patient care and nursing practice;
5) Recommend ways and means to improve patient care and nurse staffing at the Medical Center.

Membership:

• 7 RN members employed at SHMC and covered by the contract;
• When practical, members come from differing clinical disciplines such as OR, CC, Medical, Surgical Obstetrical, MH, and ER;
• There shall be two alternates named to fill positions should they arise;
• Vacancies are filled at the discretion of the association and the PNCC.

Terms of appointment: Elected every two years with appointments staggered

Membership responsibilities:

• Attend a minimum of 66% (~8) monthly meetings;
• Arrange an alternate (backup) to attend in the PNCC representative’s absence;
• Take the lead for one of the PNCC projects.

Roles

• Chairperson who is elected annually by the PNCC;
• Secretary
• Reviewer of monthly Staffing Documentation and Request Forms that are filed;

• Each PNCC member is responsible for maintaining contact on a regular basis with a group of clinical units.

Responsibilities:

• Make written recommendations to the CNE;

• Advise and assist the MC regarding guidelines and priorities for expenditures from the professional development funds specified in Article 14.3;

• Attend and advise the Staffing Committee on problems with nursing staffing;

• Attend and advise the Nurse Executive Committee on practice and other issues;

• Attend and advise other SHMC committees whose purposes relate to nursing practice;

• Maintain contact with the ONA Negotiating Team;

• Alert ONA Labor Relations Representative of patient care situations which are unsafe;

• Invite the CNE to attend a PNCC meeting at least quarterly;

• Provide consultation, education and collaborate with Unit Based Practice Committees;

• Recommend five or more nurses employed by the MC to be appointed to the MC Safety Committee and to maintain contact with these PNCC representatives;

• Monitor the number and focus of Rapid Process Improvement Projects (RPIPs) for the number of bargaining unit members involved, relevance and efficacy in relation to nursing practice; receive reports on RPIPs (pg. 86 in contract) and serve as the primary nursing liaison between the entity conducting the RPIP and staff nurses (pg87 in contract, #7);

• Recommend disbursement of continuing education days and expenses;

• Recommend disbursement of tuition reimbursement dollars;

• Determine compliance with continuing education days, expenses, and tuition reimbursement dollars and revise and/or recommend change in policies;
• Establish yearly goals and a work plan with outcomes/products and activities;
• Maintain timely contact with staff nurses through a variety of mechanisms; and
• Engage in clinical performance peer review in some disciplines related to clinical performance and judgment issues (pg. 14).

Meeting dates and times:

Monthly meetings are held on a Wednesday at 1545. Exact date and location are posted in advance via the PNCC monthly minutes.

Record Keeping:

The secretary of the PNCC records and disseminates minutes of the PNCC to UBPC Chairs, chief nurse executive, Staffing Committee, MC administrator, and ONA (Labor Representative, Asst. ED for Nursing Practice, Education & Research).

Authority:

The basic authority of the PNCC is established in Article 15 of the contract. The PNCC’s authority is evidenced in written recommendations to the CNE.