

Nurse Decision-Making

Reference	Sample	Design	Topic	Recommendations	Strength and Quality
<p>Frith, K., & Montgomery, M.</p> <p>Perceptions, knowledge, and commitment of clinical staff to shared governance. <i>Nursing Administration Quarterly</i>, 2006, 30(5): 273-284.</p>	<p>687 RNs, LPN, care technicians, medical receptionists in the pre - implementation survey and 961 staff members in the post-implementation survey.</p>	<p>Nonexperimental, survey research design where pre-implementation responses were compared to post-implementation responses. A nonprobability sampling method was used.</p>	<p>Explore the perceptions, knowledge, and commitment of clinical staff to shared governance</p>	<ol style="list-style-type: none"> 1. Results showed a decrease in perception and knowledge of shared governance between the 2 survey periods –contributed to the idealism of shared governance compared to the reality of implementing shared governance. 2. Commitment to shared governance increased during the same time. 3. Overall, the participants and non-participants were committed to shared governance. The clinical staff recognized shared governance as a process, not a project, and that it takes time to share responsibility, accountability, and authority for nursing practice. 	
<p>Krairiksh, M., & Anthony, M.K.</p> <p>Benefits and outcomes of staff nurses' participation in decision-making. <i>JONA</i>, 2001, 31(1): 16-33.</p>	<p>647 RNs working on 28 adult medical and surgical units in 3 hospitals</p>	<p>Cross-sectional descriptive study. Secondary analysis of the Variations in Nursing Practice Model study.</p> <p>The data was derived from the responses of staff nurses in a questionnaire asking about their participation in decision-making, their perception of the competency of nurse manager leadership, and their collaboration with physicians.</p>	<p>Investigate the relations among staff nurses' participation in phases of the decision-making process related to decisions in nursing practice, competencies of nurse manager leadership, and nurse-physician collaboration</p>	<ol style="list-style-type: none"> 1. Nurse-physician collaboration contributed to greater participation in all phases of both care giving and condition- of -work design. 2. The competency of nurse manager leadership had a small but significantly positive correlation with participation in both types of decision-making, but did not have a significant effect on phases of participation in both types of decisions. 	

Reference	Sample	Design	Topic	Recommendations	Strength and Quality
				3. Conclusions: Evidence supports the relations among an organizational structure, an organizational process, and a provide process of healthcare.	
Mangold, K.L., Pearson, K.K., Schmitz, J.J, & Specht, J.P. Perceptions and characteristics of registered nurses' involvement in decision-making. Nursing Administration Quarterly, 2006, 30(3): 266-272.	196 RNs	Convenience sample	Determine the level of actual and preferred decisional involvement; and ascertain whether there is decisional dissonance among RNs	A statistically significant difference was found between RNs' actual and preferred decisional involvement, with RNs preferring more decisional involvement than they actually experienced.	
Cox, K., Teasley, S., Lacey, S., & Sexton, K. Work environment perceptions of pediatric nurses. Journal of Pediatric Nursing, 2007, 22(1): 9-14	Convenience sample of 4,584 RNs working direct patient care in either pediatric or non-pediatric practice settings in multiple facilities across multiple states. Data were collected throughout 2003, 2004, and 2005	Data collection tools requested demographic info from the respondents and the completion of the Individual Workload Perception Scale (IWPS). Data were analyzed using descriptive statistics and inferential statistics.	Assess whether pediatric nurse perceptions of the work environment differed (1) from nurses employed in non-pediatric settings, (2) by the type of pediatric practice setting, or (3) by year of birth.	1. Nurse perception of manager support was low across all groups evaluated in the study. Enhanced communication and visibility of nurse managers may be an important strategy for improving nurse perceptions of manager support. 2. Pediatric nurses report more positive perceptions of unit support than nurses in non-pediatric settings. 3. Pediatric nurses report more positive perceptions of overall nursing satisfaction. 4. Nurses employed in critical care units and younger pediatric	

Reference	Sample	Design	Topic	Recommendations	Strength and Quality
				nurses appear to report the most positive perceptions of key aspects of the work environment. 5. Opportunities may exist to address work environment issues for mid-career nurses and those working in non-critical care areas.	
Cullen, L. & Titler, M. Promoting evidence-based practice: An internship for staff nurses. Worldviews on Evidence-Based Nursing, 2004, 1(4): 215-223	Convenience sample. Evaluation questionnaire (N=6); Focus group findings: Staff nurse (N=6); Nurse Manager (N=5); APN (N=8)	Program evaluation has both qualitative and quantitative components	An evidence-based practice staff nurse internship was developed at the University of Iowa Hospitals and Clinics to offer support to nurses in making it a reality in care delivery. Article focused on the evaluation of the internship and pertinent implications.	1. Classroom days have been condensed to allow more facilitated work sessions 2. Program was extended from 12 months to 18-24 months to allow time for project evaluation and integration into unit quality improvement and educational programs 3. Team coordination and communicating project developments with colleagues in the clinical area are challenging and important. 4. Best projects come from topics identified by staff nurses. Need identified for additional expertise in mentoring others in evidence-based practice.	
Lacey, S., Cox, K., Lorfing, K., Teasley, S., Carroll, C., and Sexton, K. Nursing support, workload, and intent to stay in Magnet, Magnet-	3337 nurses from 11 states, 15 institutions, and 292 diverse units.	Individual Workload Perception Scale.	To examine the differences between nurses' scores on organizational support, workload, satisfaction, and intent to stay between Magnet, Magnet-aspiring, and non-Magnet Hospitals.	The Magnet program is meeting its intended goal to provide a professional practice environment for staff nurses.	

Reference	Sample	Design	Topic	Recommendations	Strength and Quality
Aspiring, and non-Magnet hospitals. JONA, 2007, 37(4) 199-205.					
Erickson, J., Hamilton, G., Jones, D., & Ditomassi, M. The value of collaborative governance / staff empowerment. JONA, 2003, 33(2): 96-104	Convenience sample of 657 RNs and other healthcare professionals over a 3.5 year period	Descriptive, comparative design	Collaborative governance was introduced as one of nine structures within the patient care services' professional practice model to facilitate communication and optimize staff participation in decision-making across disciplines. The committee structure allows the disciplines to interface with each other and bring the unique perspective of each group to discussions of mutual concern. The concept of empowerment was used to evaluate the impact of the collaborative governance structure on members.	<ol style="list-style-type: none"> 1. The collaborative structure appears to influence empowerment. 2. Initiating collaborative governance requires support and the presence of the vice president for patient care services, director of the center for clinical and professional development, committee co-chairs and coaches. 3. Experienced growing unity within each group and a visible respect for unique perspectives. 4. Collaborative governance committees are an effective forum for aligning clinicians' efforts with patient care services' strategic plan. 	