Purpose
• The PNSO seeks to provide communication to its members in a timely way.
• The PNSO seeks to implement a multi-directional reporting and communication structure between the Nursing Cabinet and to the Professional Nursing Staff at large.
• The PNSO Nursing Cabinet provides oversight and approval of communication structure.
• Per the PNSO Bylaws, the Director of Nursing Governance Programs serves as the PNSO’s Communications Officer, and is a member of the PNSO Cabinet and the Executive Committee. The Communications Officer is responsible for assessing communication needs and making proposals to the PNSO Nursing Cabinet on an as-needed basis for change.

Principles
As a nursing organization, we each uphold a commitment to transparent communication that is courteous, collegial, constructive and inclusive, in accordance with the principles of Relationship-Based Care and our UVA core value of Respect.

The Nursing Cabinet, Central and Local Committee Chairs, and Managers are responsible for communicating the business of the PNSO to the nursing staff at large. In turn, the nursing staff are equally responsible for using the available vehicles of communication to seek information and to relay issues, concerns, and ideas back to the Nursing Cabinet.

Electronic communication is the most effective and efficient method of communication for the PNSO. As such, members of the PNSO should maintain an active Outlook account (checked at least every 48 hours, per UVA Email Guidelines and MC Policy 0193) and be familiar with the PNSO website. However, in keeping with the PNSO’s core tenet of Relationship-Based Care, whenever possible, face-to-face communications will remain a vital part of conveying information and soliciting feedback, reinforcing the fact that each nurse’s voice counts in influencing Nursing at UVAHS.

Process
Key PNSO communication items include:
• Cabinet Agendas and Cabinet Minutes
• Regular emails to all RNs of news, recognition, and events/opportunities, consolidated if possible to be sensitive to staff email loads.
• Practice News—newsletter.
• CNO NurseTalk—video newsletter.
• PNSO Central and Local Committee proceedings stored in the Z:/Clinical/Shared Governance folder.
• Publicity for all PNSO-sponsored major events and opportunities.
• The Employee Engagement Survey.
• The annual electronic Ballot.
• The PNSO Annual Report.
• The PNSO Professional Practice Model (PPM).
• The Nursing Strategic Plan.
• Quality data.
Key forms of communication include:

I.  PNSO WEBSITE
    a. The PNSO Website is located at http://www.healthsystem.virginia.edu/pub/pnso/ and may also be reached using the shortcut uvanurses.virginia.edu or via the PNSO Nursing Internet link on the Clinician Portal. Refer to this website for frequent updates to nursing practice, professional development opportunities, and PNSO events. The Communications Officer serves as the Web Master for the PNSO and is responsible for the operational aspects of its content and function, delegating to PNSO Support Office staff.
    b. Names of individual officers and committee chairs can be found on the PNSO website.

II.  E-MAIL
    a. The PNSO maintains an emphasis on electronic communication, especially via email.
    b. Emails may be sent from the identity “PNSO” (pnso@virginia.edu), or from individual PNSO officers, support staff, or nursing leaders.
    c. All nurses are encouraged to email ideas, questions and concerns to pnso@virginia.edu as a central switchboard; the PNSO support staff will route their message to the appropriate committee chairs.

III.  THE SHARED DRIVE “Z:/CLINICAL/SHARED GOVERNANCE”
    a. This storage folder is the location for the vast majority of information about Local and Central PNSO shared governance activities; exceptions are made for extremely confidential materials such as quality reviews and clinical career ladder advancement. While committees may have other storage locations as well, the expectation is to store at least their Agendas, Minutes, and Quarterly Outcomes Reports here at minimum 10 months of the year (bimonthly for Ambulatory Care), for transparency of nursing decision-making and ease of networking across areas.
    b. All Medical Center staff have “read” access to this folder. All committee chairs have “write” privileges to store materials there, with permissions brokered through the PNSO support office.
    c. IMPORTANT: Given the number of people with access, the Z:/ drive is NOT secure and should never house any protected health information or other sensitive patient, quality, financial or employee data.

IV.  TRADITIONAL HARD-COPY DISTRIBUTION AND DISPLAYS
    a. Occasionally there will be handouts/attachments to be printed and posted at the discretion of practice area leadership. Printed communications will be limited in accordance with UVAHS goals for “green” stewardship of resources. Publicly viewable printed materials should look professional (in keeping with UVA Branding principles where possible) and be posted in accordance with Guidelines for Signage/Posting.

V.  IN-PERSON CONVERSATIONS
    a. The PNSO regularly facilitates group discussions during events and committee meetings, and provides annual committee chair training in facilitation skills.
    b. Face-to-face, one-on-one conversations are essential ways to build healthy working relationships, gain a clear understanding of each other’s perspectives, provide constructive peer review, and ensure safe and thorough hand-off of patient care.
    c. The PNSO President and other nursing leaders regularly conduct rounds in various nursing practice areas, to converse with colleagues, share information, and gain insight into the issues facing nurses within the context of everyday work.
    d. Telephone interactions are expected to be courteous and respectful of each other’s time. For time-sensitive needs, or assistance that is difficult to outline via email, nurses are invited to call the PNSO Support Office at 924-9357 or 924-5153.

Revised 10/2014  Copyright © 2014 by the Rector and Visitors of the University of Virginia