Purpose
The purpose of this guideline is to describe the basic operating guidelines common to all committees of the PNSO, and to establish a template for all committees to create their individual committee guidelines.

Principles
Group norms will be discussed in committee orientation during the first meeting of the calendar year. Robert’s Rules of Order will be the reference for the process of meetings. To facilitate consistency, committees will use PNSO-developed templates for Agendas, Minutes, and Outcomes Reporting, and will archive meeting materials in a centrally-available shared drive. The PNSO Support Office will provide a website and annual training opportunities, outlining committee resources and expectations for the year.

Process
1. A committee membership roster for Central PNSO Committees will be established and presented to the PNSO Support Office for archiving and web posting. Membership rosters for Local PNSO Committees should be maintained locally and archived in Z:/Clinical/Shared Governance. If a nurse wishes to join a committee at a later time, s/he may do so at the Chair’s discretion in a non-voting status. Attendance will be tracked, and may be shared with members’ manager at the Chair’s discretion. If a listed member does not participate for 3 meetings without prior communication with the committee chair, that member’s name will be removed from the membership; such removal and potential replacement will be at the Chair’s discretion.

2. Meetings will follow an agenda approved by the Chair(s) and distributed in advance. The Chair(s) will use the agenda to facilitate effective use of meeting time.

3. Minutes will be taken at each meeting by a designated committee member and be archived with The Office of Nursing Governance Programs via the shared folder Z:/Clinical/Shared Governance. Minutes should include:
   a. Topic and presenter
   b. A brief summary of discussion points, decisions reached, and the rationale for those decisions
   c. Action Items and Follow-Up Tasks, with owners and deadlines
   d. A brief summary of Outcomes Achieved at the meeting, and Key Takeaways to communicate with colleagues outside the committee
   e. Attendance tracking based on a list of members present, as well as any guests. If members or guests are non-RNs, indicate the discipline they represent.

4. In general, committee decisions, actions and recommendations will be approved by majority vote; a quorum of the listed membership must be present in order to hold a vote at a meeting. Outcomes from the committee will be voted on, documented in quarterly Committee Outcomes Reports, and (for Central PNSO committees) announced to the PNSO membership via the Nursing Cabinet meetings. As appropriate, the evidentiary basis for outcomes and decisions should be documented, and archived with The Office of Nursing Governance Programs.

5. The PNSO allows for the conduct of committee business by technological means in lieu of face-to-face meetings. At the discretion of the Chair(s), a matter may be decided by electronic communication between meetings, with the outcome of the vote determined by the responses of a majority of the committee members. Participation of a person in a meeting by conference call or by other electronic means constitutes presence of that person at the meeting. Given the confidential nature of many nursing/health care topics, the Chair should consult with the PNSO
Support Office regarding taking appropriate security measures before any electronic posting of information, teleconferencing, or video conferencing.

- **AUDITORY-VISUAL MEANS:** If using teleconferencing or videoconferencing all participants must be able to hear each other’s contributions during the meeting. For large-group interactions, Chairs should arrange for peripheral microphones as needed. Specific rules must be stated at the beginning of the committee meeting that specify how recognition is to be sought and the floor obtained during such meetings. Instructions for joining should be disseminated sufficiently in advance to facilitate all members’ participation.

- **“COLLAB” / “SHANTI”:** Collab/Shanti are suites of electronic collaboration tools developed by UVA to serve both as virtual classrooms and facilitate virtual project teams. Many PNSO Committees have adopted Collab to conduct some or all committee business. The opportunity for training/tutorials will be provided. While many other tools are available in these suites, the most commonly used Collab tools include Resources for posting files and enabling shared editing; Discussion/Chat/Forum for posting and replying to comments and questions; and Polls for anonymous voting by members only, enforcing one vote per member. Participation via Collab is either at designated times or at member’s convenience during the month, according to the committee’s group norms established at the beginning of the year. Committees should also set rules and deadlines for posting materials for team input. Using Collab Resources to read prework materials is a frequent expectation, and for some committees, so is voting in Polls. NOTE: For Collab-only committee business: Members should be aware that Resource- and Poll-based activities are anonymous, and that adding Discussion/Chat items is the only record giving credit that a member’s User ID actively participated. IMPORTANT: Collab is NOT secure and should never house any protected health information or other sensitive patient, quality, financial or employee data. Also, remember to save Minutes/Outcomes Reports to Z:/Clinical/Shared Governance, as the primary PNSO archive accessible to all (Collab is restricted to just that group’s members).

- **E-MAIL:** If at all possible, requesting decisions by email will allow for a minimum 48 hours for committee members to respond, in alignment with UVA email standards. Time-sensitive responses and specific deadlines will be flagged as such in the email’s Subject line.

- **OTHER:** Other tools may be used as needed, at the Chair’s discretion and within the allowances of UVA policy and technological limits, such as Doodle.com or SurveyMonkey.com for scheduling and decisionmaking; Microsoft SharePoint for filesharing; etc.

6. The Chair is responsible for ensuring appropriate follow-up on action items, and networking with the appropriate groups or leaders, in order to implement committee decisions in a timely manner.

7. The Chair and Vice-Chair are equally responsible for ensuring appropriate succession planning experiences, to ease the transition between committee leaders while sustaining the momentum of committee activities.

8. Quarterly Outcomes reports will be made to the Nursing Cabinet as defined in Nursing Shared Governance Toolkit. A description of accomplishments will be reflected in the year-end PNSO President’s Report. Subcommittees of Central PNSO Committees should also coordinate with that Central Committee’s chair to provide progress updates as appropriate.

**Resources**