staff category. Upon satisfactory completion of 90 days in probationary status, the new staff member shall be accorded all rights and privileges of the full professional nursing staff.

Section 5—Credentials Review Process

A credentials review process shall be initiated and maintained in the Department of Nursing, which reviews specific credentials of applicants to the nursing staff for potential membership thereupon. Credentials review shall be based upon, but not limited to, the following items:

A. Evidence that the applying individual has the appropriate licenses, certificates, diplomas, degrees, or other evidence indicating adequate preparation for the role for which the candidate is applying.
B. Applicant has successfully interviewed with the Patient Care Manager of the clinical service in which the applicant is applying for privileges.
C. Applicant has met the criteria of the level of the Professional Advancement System for which the candidate is applying.
D. Applicant has been recommended for approval by the Patient Care Manager of the unit in which the applicant is seeking privileges.

The credentials review process will be invested in a subcommittee of the Quality Assurance Council. This subcommittee is appointed by the Council on Nursing Quality Assurance and is known as the Credentials Committee. It will take up the business of credential review for initial and permanent appointments.

The Credentials Committee may be called into session by the chairperson any time it is necessary to fulfill the business of the Committee. However, the Committee will meet at a minimum of once a month. After establishing a framework for credentials approval within the nursing organization, and consistent with these bylaws, the Credentials Committee shall invest responsibility in the recruiter for Nursing for the following:

- Review and accept credentials supplied by the applicant to the nursing staff
- Obtain appropriate approval of the Patient Care Manager of the unit the candidate is applying for
- Accept the candidate as a probationary member of the nursing staff, subject to the 90-day probationary period

As the credential review officer, the recruiter for Nursing shall meet with the Credentials Committee at all its scheduled meetings. Final approval of all applicants to the institution’s nursing staff, once the credentials have been reviewed and the physical examination has been cleared by Occupational Health, rests solely with the appointed credentials committee.

ARTICLE V: GOVERNANCE STRUCTURE OF THE NURSING STAFF

The governance structure shall be clearly identified through and within which the nursing staff will organize, integrate, and manage the delivery of nursing care services. The governance structure will recognize participation from all nursing staff
members and will give evidence of shared decision making within the formal structure of the nursing staff.

Section 1—Governance Councils

There shall be four (4) governance councils that will assume responsibility for the management, operation, and integration of the Department of Nursing. They shall be identified as follows:

- Council on Nursing Management
- Council on Nursing Practice
- Council on Nursing Quality Assurance
- Council on Nursing Professional Development

Each council will be clearly identified in the bylaws and will operate consistent with the mandates of its roles and responsibilities as articulated in the bylaws.

Section 2—Council on Nursing Management

A. Membership. The Council on Nursing Management shall consist of all those nurse managers holding line management positions at the department head level. Membership shall consist of at least the following:

- Nursing Administration/Senior Vice President for Patient Care
- Directors of Nursing
- Assistant Director(s) of Nursing
- Patient Care Managers
- Recruiter for Nursing
- One staff nurse representative from the professional nursing staff

Each member of the Council on Nursing Management has one position on the council and may hold one vote. Unexcused absences will be reflected in the annual performance review. Excused absence will be granted for vacation and other reasons determined acceptable by the council. Membership on the Council for Nursing Management will be consistent with tenure in one of the above positions.

B. Role of the Council. The council on Nursing Management is responsible for human, material, and support resources within and affecting the continued operation of the Department of Nursing. All matters relating to the allocation, distribution, and assignment of resources to the individual units and the department as a whole, shall be determined, defined, and undertaken by the Council on Nursing Management.

C. Responsibility. The Council on Nursing Management shall devise, maintain, and control financial budgets, staffing schedules, materials acquisition and allocation mechanisms, and interdepartmental communication for effective utilization and support of nursing services. Further, the Council on Nursing Management shall determine the adequacy of support for clinical activities and shall maintain policies, procedures, rules and regulations of the hospital, and bylaws of the nursing staff, consistent with the management role.

D. Officers. The Chairperson of the Council on Nursing Management shall be a
nurse manager. The term of the Chairperson begins in January and lasts for one (1) year. The Chairperson may be elected to serve a second consecutive one (1)-year term. A chairperson may not serve more than two consecutive terms as Chairperson of the Council on Nursing Management. A Chairperson-elect is elected each year in December. The Chairperson-elect may serve two consecutive one (1)-year terms whenever the Chairperson is elected to serve a second consecutive one (1)-year term. The Chairperson-elect is then eligible to serve two consecutive one (1)-year terms as Chairperson.

The Chairperson shall appoint committee members and task forces and shall convene and manage the business of the Council on Nursing Management. For immediate operational decisions and/or emergency situations and/or between regularly scheduled meetings, the Chairperson may act for the council. Such action must be reported to the council membership at its next regularly scheduled meeting for their review and approval. In the absence of the Chairperson, the Chairperson-elect will carry out these duties.

The Council on Nursing Management shall meet at least once a month at a regularly scheduled time.

If during the term of office, the Chairperson resigns, the Chairperson-elect finishes out the Chairperson’s term and serves for the term that he/she has been elected. Within 1 month, a Chairperson-elect must be elected.

Section 3—Council on Nursing Practice

A. Membership. Membership on the Council of Nursing Practice shall be drawn from the professional nursing staff with representation from each of the four major clinical services. Members may be nominated or may volunteer from the professional nursing staff. Applications for membership are to be submitted to the Chairperson of the council. The Chairperson of the Council shall be elected by the membership. Staff nurse membership shall be at least ten (10) members. Additional members must include one (1) voting Nurse Manager IV or V, one (1) nonvoting representative from the Department of Training, Education, and Development, one (1) voting Clinical Specialist, and a nonvoting nursing administrative advisor.

B. Role of the Council. The Council on Nursing Practice will define, implement, and maintain the highest standards of clinical nursing practice consistent with national standards of practice promulgated by the appropriate national nursing specialty organization, regional, and community practice standards and those promulgated by Suburban Hospital. Standards of nursing practice and standards of nursing care shall be clearly defined and shall provide a framework of all nursing clinical activity to which frequent and ongoing reference can be made.

C. Responsibility. The Council on Nursing Practice is responsible for the review and approval of all materials and activities related to clinical nursing practice. Such review shall include but not be limited to the following:

- Review and approval of all standards that relate to or specifically affect clinical nursing practice
- Review and approval of all standards of nursing practice from every clinical specialty within which nursing practice occurs
- Assessment and review of, and response to, all problems, concerns, issues, and other related activities with an impact on the clinical operation of the Department of Nursing at Suburban Hospital
- Determination and dissemination of needed changes in practice to other appropriate councils and committees and to the nursing staff for review, education, and implementation

D. Officers. The Chairperson of the Council on Nursing Practice shall be elected in December of each year from the council membership. The term of the Chairperson begins in January and lasts for one (1) year. The Chairperson may be elected to serve a second consecutive one (1)-year term. A Chairperson may not serve more than two consecutive terms as Chairperson of the Council on Nursing Practice. A Chairperson-elect is elected each year in December.

The Chairperson-elect may serve two consecutive one (1)-year terms whenever the Chairperson is elected to serve a second consecutive one (1)-year term.

The Chairperson-elect is then eligible to serve two consecutive one (1)-year terms as Chairperson.

The Chairperson shall appoint committee members and task forces and shall convene and manage the business of the Council on Nursing Practice. For immediate operational decisions and/or emergency situations and/or between regularly scheduled meetings, the Chairperson may act for the council. Such action must be reported to the council membership at its next regularly scheduled meeting for their review and approval. In the absence of the Chairperson, the Chairperson-elect will carry out these duties.

The Council on Nursing Practice shall meet at least once a month at a regularly scheduled time.

If during the term of office the Chairperson resigns, the Chairperson-elect finishes out the Chairperson’s term and serves for the term that he/she has been elected. Within 1 month, a Chairperson-elect must be elected.

Section 4—Council on Nursing Quality Assurance

A. Membership. The Council on Nursing Quality Assurance membership shall be representative of the major clinical services in the Department of Nursing. Represented on the Council on Nursing Quality Assurance shall be at least one member from each of the following:

- Medical Nursing
- Surgical Nursing
- Orthopedic Nursing
- Critical Care Nursing
- Cardiology Nursing
- Perioperative Nursing
- Emergency Nursing
- Any other clinical specialty deemed appropriate by a majority vote of the members of the Council
Membership shall be drawn from the professional nursing staff. Total professional nursing staff membership shall be at least ten (10) members. Also represented on the Council of Nursing Quality Assurance is one (1) voting Nurse Manager IV or V, a clinical specialist with voting privileges, and a nonvoting nurse representative from the Department of Training, Education, and Development. A nursing administrative advisor shall also be a nonvoting member of the council.

B. Role. The Council on Nursing Quality Assurance shall review all current clinical practices to determine compliance with standards and the need to initiate new standards of practice determined through the quality assurance mechanism. The Council on Nursing Quality Assurance shall report to the appropriate council, committee, department head, or division head any outcome data that affect compliance with standards of practice, the quality of nursing care, and the potential for implementing new standards, processes, and practices related to nursing care activities.

C. Responsibilities. The Council on Nursing Quality Assurance shall devise measurement tools for monitoring ongoing nursing care activities; shall review and compile data reflecting compliance with activities; shall make and forward recommendations to the appropriate council, committee, department head, or division head for action regarding care as revealed by current state-of-the-art literature and nursing research. The council will be responsible for disseminating information in order to ensure continued compliance with appropriate and defined levels of nursing practice within Suburban Hospital’s Department of Nursing. This council shall also mandate standing committees for the review of nursing staff credentials, and approval/rejection/appeal of applications for promotion through the Professional Advancement System.

D. Officers. The Chairperson of the Council on Quality Assurance shall be elected in December of each year from the council membership. The term of the Chairperson begins in January and lasts for one (1) year. The Chairperson may be elected to serve a second consecutive one (1)-year term. A Chairperson may not serve more than two consecutive terms as Chairperson of the Council on Quality Assurance. A Chairperson-elect is elected each year in December. The Chairperson-elect may serve two consecutive one (1)-year terms whenever the Chairperson is elected to serve a second consecutive one (1)-year term. The Chairperson-elect is then eligible to serve two consecutive one (1)-year terms as Chairperson.

The Chairperson shall appoint committee members and task forces and shall convene and manage the business of the Council on Quality Assurance. For immediate operational decisions and/or emergency situations and/or between regularly scheduled meetings, the Chairperson may act for the council. Such action must be reported to the council membership at its next regularly scheduled meeting for their review and approval. In the absence of the Chairperson, the Chairperson-elect will carry out these duties.

The Council on Quality Assurance shall meet at least once a month at a regularly scheduled time.

If during the term of office, the Chairperson resigns, the Chairperson-elect
finishes out the Chairperson’s term and serves for the term that he/she has been elected. Within 1 month, a Chairperson-elect must be elected.

Section 5—Council on Nursing Professional Development

A. Membership. Every nursing unit shall have representation on the Nursing Professional Development Council. Each nursing unit shall have one (1) voting professional staff representative on the Professional Development Council. Professional nursing staff membership shall be limited to the number of nursing units. The council will not exceed 18 staff nurse members. There shall be representation by one (1) nonvoting nurse representative of the Department of Training, Education, and Development, one (1) clinical specialist voting member (may have two {2}) and one (1) voting Nurse Manager IV or V. A nursing administrative advisor shall also be a nonvoting member on the Council on Nursing Professional Development.

B. Role. The Council on Professional Development shall review all continuing education programs prior to instituting the education process. The council shall further define education needs on a division and department basis and shall review and approve those educational offerings submitted for review by each nursing unit representative. All nursing educational programs are integrated and approved for implementation by the council. The council is accountable for maintaining the highest levels of nursing care through education that is related to the ongoing portion of the responsibility of the professional practice of nursing in the hospital.

C. The Professional Development Council is responsible for the review of all annual, monthly, and special education programs undertaken within the Department of Nursing and/or under the Department of Training, Education, and Development on nursing’s behalf. Specific educational needs, as identified by the Council on Nursing Practice, the Council on Nursing Quality Assurance and the Council on Nursing Management, are also reviewed, approved, and undertaken by the Council on Nursing Professional Development. Maintenance of the institution’s ongoing education recording and documentation is assured through the activities of the Council on Nursing Professional Development.

D. Officers. The Chairperson of the Council on Nursing Professional Development shall be elected each year from the council membership. The term of the Chairperson begins in January and lasts for one (1) year. The Chairperson may be elected to serve a second consecutive one (1)-year term. A Chairperson may not serve more than two consecutive terms as Chairperson of the Council on Nursing Professional Development. A Chairperson-elect is elected each year in December. The Chairperson-elect may serve two consecutive one (1)-year terms whenever the Chairperson is elected to serve a second consecutive one (1)-year term. The Chairperson-elect is then eligible to serve two consecutive one (1)-year terms as Chairperson.

The Chairperson shall appoint committee members and task forces and shall convene and manage the business of the Council on Nursing Professional Development. For immediate operational decisions and/or emergency situations and/or between regularly scheduled meetings, the Chairperson may act for the
council. Such action must be reported to the council membership at its next regularly scheduled meeting for their review and approval. In the absence of the Chairperson, the Chairperson-elect will carry out these duties.

The Council on Nursing Professional Development shall meet at least once a month at a regularly scheduled time.

If during the term of office, the Chairperson resigns, the Chairperson-elect finishes out the Chairperson’s term and serves for the term that he/she has been elected. Within 1 month, a Chairperson-elect must be elected.

Section 6—Meeting Times

All nursing councils shall meet at least monthly and each shall be responsible for the respective work consistent with these bylaws. Minutes must be taken and recorded in the format accepted by the Department of Nursing. Minutes are distributed to all nursing units for review. Eight hours are allotted for all council meetings except for the Management Council which meets for 4 hours. One half (½) of the total representation of a council or a constituent committee shall constitute a quorum and shall be deemed appropriate for conducting business of the council or committee.

Section 7—Selection of Governance Council Membership

Members to any one of the governance councils shall be selected from the designated departments, clinical services, or management roles. Membership is limited to registered nurses (R.N.s) only. Potential members may volunteer or may be nominated by peers, recommended by current council members or managers, or suggested by staff for council membership. All suggested and recommended potential members must be approved by majority vote of the council in which the candidate is seeking membership.

Section 8—Service of Council Members

Membership shall be rotated 1 year from the date of appointment. Members may be reappointed for no more than two consecutive one (1)-year terms. One exception to this rule is the Chairperson-Elect, who has already served one or two terms as a council member. This individual is eligible to serve two (2) years as Chairperson-elect or two one (1)-year terms as the Chairperson. Members are required to attend three fourths of all scheduled council meetings. Members not complying with attendance requirements may be removed and replaced through a majority vote of members attending the meeting at which the decision is rendered. Other than the Management Council, members may not serve another consecutive term on any governance council. After 3 months of not serving on a governance council, the registered nurse is again eligible for council membership. Possible exceptions to this rule are the Clinical Nurse Specialist and Education Specialist. The Councils on Nursing Practice, Quality Assurance, and Professional Development each require a Clinical Nurse Specialist as a voting member. The Chairperson will not also serve as the unit representative. An Administrative Advisor shall be appointed by the Senior Vice President for Patient Care to serve as a nonvoting member of each council. The Administrative Advisor shall serve a term of not longer than 2 years.
Section 9—Standing Committees

Standing committees are established in Nursing to meet long-term, broad goals and objectives that support ongoing nursing programs within the hospital. A committee will be established only after it has been determined by the Coordinating Council that the stated goals and objectives cannot be met by the appointment of a task force.

Every standing committee in Nursing functions under the auspices of the council to which the respective program is responsible. At least one member of the committee shall also be a member of the council to which that committee reports.

Minutes are kept at every committee meeting and these minutes shall be sent to the appropriate council chairperson within 2 weeks of the date that the committee meeting has taken place. An annual report of the work of each committee is forwarded by the committee chairperson to the chairperson of the council each year in November. At the December meeting of the Coordinating Council, all committee reports are reviewed and a recommendation may be made whether to continue or to abolish the group as a standing committee.

The composition of a committee, as well as the frequency of meetings, is determined by the council to which the committee reports. The chairperson of the council will appoint the chairperson of each committee. This is done annually in January. The term of a committee chairperson is not to exceed 2 years. The Coordinating Council may request, however, that a committee chairperson extend beyond a 2-year term in order to maintain continuity in the committee’s work.

ARTICLE VI: DISCIPLINE, APPEALS, PEER REVIEW PROCESS, REVIEW, AND REMOVAL FROM THE NURSING STAFF

Section 1—Discipline and Appeals

All members of the professional nursing staff, regardless of category, are subject to Suburban Hospital’s standards of employment practices and disciplinary and appeals process, as mandated through the policies and procedures of the Personnel Department. All nursing staff members have the same rights and privileges and access to protection policies and procedural support regarding the discipline and appeals processes as all other employees of Suburban Hospital.

Section 2—Peer Review Process

In addition to evaluation of competence by self and one’s manager, all members of the professional nursing staff who work at least 40 hours a pay period shall participate in the peer review process a minimum of once a year at the time of the annual evaluation. The methods used to select the peer may vary from unit to unit. An evaluation by only one peer is required, although some units may choose to have two peer evaluations.

Every member of the professional nursing staff who applies to move from one level to another through the Professional Advancement System must be evaluated by a minimum of two peers. In selecting the peers, the manager will submit to the professional nurse a list of not fewer than five names. From this list, the nurse will select the names of two peers. The manager will notify the peers and have them sub-
mit the completed evaluation forms which the manager will place in the nurse’s promotion packet. These evaluations will be presented as a part of the promotion packet.

Section 3—Removal From the Nursing Staff

When a member of the permanent, probationary, temporary, or consulting staff does not meet the standards provided for the individual’s role in Suburban Hospital’s Department of Nursing, removal from the Nursing staff may be undertaken through initiation of the hospital’s disciplinary process. When performance indicators, peer review, evaluation processes, or developmental counseling by the manager reveals that a member of the nursing staff is not acting within the bylaws or consistent with the standards of practice acceptable at Suburban Hospital, the appropriate nurse manager will initiate the disciplinary process. If, after due process, termination is the result, the member of the nursing staff must be informed in writing that privileges have been withdrawn and that the nurse has been terminated from membership on the nursing staff. As herein indicated, all rights of appeal may be accessed by the disciplined or terminated nurse, consistent with the policies and practices of the Personnel Department.

ARTICLE VII: COORDINATION OF THE DEPARTMENT OF NURSING

Section 1—Administration

The Senior Vice President for Patient Care and her delegates are responsible to the President of Suburban Hospital for the coordination, integration, and administration of nursing. In this role, the Senior Vice President for Patient Care shall be accountable for ensuring that these bylaws are promulgated to all of the nursing staff members of Suburban Hospital and that members adhere to the articles and mandates of these bylaws, consistent with all existing rules, regulations, policies, and practices of Suburban Hospital.

Section 2—Coordination of Governance Activities

A Nursing Coordinating Council shall be composed of the elected Chairpersons and Chairpersons-Elect of the four governance councils: Nursing Practice, Quality Assurance, Professional Development, and Nursing Management. These individuals shall be identified as the officers of the nursing staff and shall serve no longer than five (5) years from the date of appointment. The Senior Vice President for Patient Care and the immediate past Chairperson of the Professional Nursing Staff shall also sit as voting members of the Nursing Coordinating Council. Each year in January, the professional nursing staff shall elect the Chairperson-elect of the nursing staff from among the governance council chairpersons. That person will serve as Chairperson-elect for one (1) year and Chairperson for the following year. The Chairperson of the nursing staff shall conduct the business of the Nursing Coordinating Council and the business of the quarterly nursing staff meetings.

Section 3—Role and Meeting Time

The business of the Nursing Coordinating Council shall be directed to coordinating, communicating, and facilitating integration of the work of the nursing
staff. The Nursing Coordinating Council shall meet at least monthly and may be called to meet at other times, at the discretion of the chairperson.

Section 4—Quarterly Professional Staff Meetings
Quarterly meetings of the nursing staff shall be held in January, April, July, and October. They shall undertake the business of the nursing staff and shall review and approve such matters as are brought before it by the Coordinating Council. On matters submitted for staff vote, a majority of those present shall be sufficient for passing the voting issues. At the January meeting, a Chairperson-elect of the Nursing Staff shall be elected from the Chairpersons of the Councils. This election will be done by secret ballot. At this meeting, the annual goals of the Professional Nursing Staff will also be approved.

The business meetings will be chaired by the Chairperson of the Nursing Staff. Reports from the governance councils and their designated task forces shall be made. Issues and motions from the staff can be addressed in this meeting following the accepted protocol.

ARTICLE VIII: BYLAW REVISION
Section 1—Annual Review
These bylaws shall be reviewed annually in October by the Coordinating Council and presented to the nursing staff in January.

Section 2—Amendments
Any professional staff member may recommend changes in the bylaws by submitting any such changes to any nursing council Chairperson. The council Chairperson will present the proposed change to the Nursing Coordinating Council for review and consideration. Revised bylaws shall be presented to the Vice President for Patient Care for review and approval.

ARTICLE IX: RULES AND REGULATIONS
The nursing staff through its constituent councils shall adopt such rules and regulations as may be necessary to implement and maintain these bylaws. All new or changed rules and regulations shall be approved by the Nursing Coordinating Council prior to their implementation. Such changes shall become effective upon approval of the Nursing Coordinating Council.

__________________________  ______________________
President                    Chairperson,
                          Nursing Staff

__________________________
Senior Vice President for Patient Care