

Governance Structure for Nursing Informatics: Toward Model Development and Recommendations

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Introduction and Background

The past few years have resulted in an unprecedented level of rapid implementation of electronic health records (EHRs) combined with initiatives for care redesign. EHR configuration and implementation is complex and requires attention to potential patient safety issues and impact on interprofessional workflow and communication. The Institute of Medicine's 2010 report, *The Future of Nursing*, emphasized the critical importance of expanding nurses' leadership and collaborative decision making roles to redesign health care, advance the collection of health data, and improve information infrastructure. Specifically, the IOM's report states that nurses should practice to the full extent of their education and training, and this includes assuming leadership roles with decision-making rights and accountability. Fostering nursing leadership, collaboration, and innovation is critical at all levels within a hospital and is often dependent on a robust shared governance structure that facilitates involvement. Yet, there is a significant lack of recommended models for nursing informatics governance and shared decision-making. The expertise required to make nursing informatics decisions within an organization stretches beyond existing collaborative governance models to integrate informatics expertise and interprofessional collaboration. We know that poor teamwork and communication is associated with patient safety errors, inefficient use of resources, and excessive lengths of stay.

Methods

To work toward a model and recommendations for nursing informatics governance, interviews were conducted with 12 nursing informatics leaders from integrated healthcare systems that have pioneered in EHR implementation projects. The aim of these interviews was to understand and evaluate the governance structure and informatics roles at each organization. Institutional Review Board approval was obtained. Interviews were audio-recorded and transcribed. We analyzed the data for common themes and developed a generic model of clinical informatics governance, roles, and councils for informatics and EHR adoption/optimization work. All of the health systems that participated in the interviews had a mature clinical information system and infrastructure with a current goal of EHR work to standardize the EHR across the health system.

Results

Results include a representation of key critical elements, roles and partnerships for nursing informatics at each level within a health care system and a model for informatics councils' structure. Specific lessons learned will be presented, organized by facilitators and barriers for successful clinical informatics governance and the top-down and bottom-up communication required for success. Conclusions and future steps to investigate nursing and clinical informatics will be presented.

Discussion

Optimization of electronic health records (EHRs) will require an understanding of why and how to leverage innovative collaborative technologies, such as mediums for computer-supported collaborative work and interprofessional tools (e.g., shared plans of care) to enhance interoperability and patient centered care. Organizations that have pioneered as early adopters of EHRs have engaged with their nursing governance structure and employed a large number of hospital-based nurses to work on EHR implementation projects due to their clinical expertise and skills in coordination of care among multiple health professionals.