



TL3 – Advocacy and Influence

TL3a: Provide one example, with supporting evidence, of an assistant vice president's (AVP's)/nurse director's advocacy for resources to support an organizational goal.

Example TL3a: Advocacy by Gillian Sedgewick BSN RN, MSc, Program Director, and Approval for Financial Resources to Complete Saudi Commission for Healthcare Specialties (SCFHS) Reclassification of Head Nurses (Nurse Managers) from Technician to Specialist

It is an expectation of nurse directors at KFSHRC-J that they will advocate for resources to support departmental and organizational goals, utilizing the available structures and processes. These structures and processes exist at the site level, i.e., KFSHRC-J, and at the corporate level, i.e., KFSHRC General Organization. They serve as the formal mechanisms for resource allocation. Annual funding is allocated to the KFSHRC General Organization by the Ministry of Finance, with separate budgets for the three hospitals within the KFSHRC system. There are specific budget allocations for manpower, capital equipment, materials/supplies, contracts/services, accreditations, and major projects.

Nursing Directors', known as Program Directors within KFSHRC-J, advocacy for resources occurs through executive nursing membership of committees. Their weekly or two-weekly 1:1 management meetings with Kathy Sienko O.B.E., BSN (Hon) RN, MSc, FInstLM, Executive Director, Nursing Affairs (ED, NA) also provide them with the opportunity to advocate for support or resources that are needed. Kathy may need to escalate those advocacy efforts to a higher level. The committee structure that supports resource allocation includes:

1. Staffing Management and Position Control for approval and monitoring of the manpower plan at KFSHRC-J
2. Equipment Purchasing Request Committee for approval of capital equipment expenditure at KFSHRC-J
3. The Accreditation Committee, KFSHRC-J, for approval of accreditations and related expenses

The KFSHRC General Organization Strategic Plan sets the direction for its future and identifies strategic objectives, programs, and projects to ensure success and alignment with the mission, vision, and values. The first strategic objective (SO1) is to **deliver world**

class customer experience, quality and safety of care to our patients. Benchmarking our services against comparable organizations and achieving and maintaining gold-standard accreditations such as Joint Commission International (JCI) and Saudi Central Board for Accreditation of Healthcare Institutions (CBAHI) are regarded as critical quality and safety kite marks.

Table TL3a.1: Strategic Objective and CBAHI Standard

Topic	Strategic Objective and CABHI Standard
Strategic Objective	Deliver world-class customer experience, quality and safety of care to our patients.
Organizational Goal	Obtain Hospital-Wide CBAHI reaccreditation 3rd Edition by Dec 2022.
CBAHI Requirement	NR 9.2 Each unit has a head nurse/nurse manager with the required nursing and managerial experience.
CBAHI Citation from 2020 Assessment	NR 9.2: Ten out of 22 Head Nurses were classified as technicians by the Saudi Council.

Saudi Central Board for Accreditation of Healthcare Institutions Accreditation

Achieving CBAHI accreditation is a key priority for KFSHRC-J as it is an essential component of the quality framework within which the hospital operates **Evidence TL3a.AD1 KFSHRC-Jeddah Organizational Goal for CBAHI**. The accreditation framework is standards-based and includes Essential Safety Requirements (ESRs), the latter being non-negotiable. Without CBAHI accreditation, the hospital will not be allowed to operate as a provider entity.

The requirements for nursing are specifically outlined in the Nursing chapter, which contains twelve standards. Standard 9.2 identifies that “Each unit has a head nurse/nurse manager with the required nursing and managerial experience.” The need for the Head Nurse to be qualified by experience and education is also expressed in other standards, for example:

- NICU 2.1- which relates to Neonatal Intensive Care
- CCU 3.2 - which relates to the Coronary Care
- HM 2.1- which relates to Hemodialysis
- ORT 4.1- which relates to Oncology

Gillian Sedgewick, BSN RN, MSc, in her role as Program Director, Nursing Practice and Research department, was accountable for driving Nursing Affairs’ accreditation requirements and monitoring and addressing gaps, which she would communicate to Kathy via their weekly management meetings. As necessary, Kathy would escalate applicable issues via her membership of the Accreditation Committee and her weekly

management meetings with Nasser Mahdi, M.D., General Manager (GM), KFSHRC-J. Nursing Affairs accountabilities within the CBAHI framework are represented in standard NR2, which states:

NR.2 The nursing director assumes a leadership position in the hospital

- NR.2.1 The nursing director represents the nursing staff as one of the hospital leaders.
- NR.2.2 The nursing director participates with the other hospital leaders in the decision making processes, including planning and budgeting.
- NR.2.3 The nursing director participates in the hospital's multi-disciplinary structures (e.g., committees such as quality improvement, infection control and pharmacy and therapeutics).
- NR.2.4 The nursing director oversees and assures that committees' recommendations are implemented at the nursing level.

Program Director, Nursing Practice and Research, Advocacy for Resources to Meet CBAHI Requirements

In the 2020 CBAHI assessment, KFSHRC-J was cited because 10 of the 22 nurse managers known as Head Nurses (HN) were classified as technicians and not specialists by the Saudi Commission for Healthcare Specialties (SCFHS). The SCFHS is the registration body for qualified healthcare professionals in the Kingdom of Saudi Arabia. On July 15, 2020, Gillian notified Kathy of the citation during their 1:1 meeting. It was agreed that this gap needed to be closed prior to the next CBAHI assessment in 2022.

Evidence TL3a.1 Gillian’s Report from 1:1 Meeting with Kathy, July 15, 2020

Gillian contacted the 10 HNs, and the feedback received was that the process was expensive and unaffordable. Gillian continued to advocate via her weekly 1:1 meetings with Kathy for informational and financial resources to support these HNs to meet the requirement.

Table TL3a.2 below shows the events and the advocacy that Gillian engaged in following her initial report.

Table TL3a.2: Summary of Activities to Advocate for Resources for 10 HNs

Timeline	Action
July 15, 2020	Gillian reported to Kathy that Nursing Affairs was cited in the CBAHI assessment because 10 out of 22 HNs were classified by SCFHS as technicians rather than specialists.
July 2020- August 2020	Gillian continued to discuss this issue with Kathy during weekly 1:1 meetings. They explored potential solutions.

August 2020	<p>Kathy set the expectation that the 10 HNs would make arrangements for reclassification. Gillian conveyed this decision to the HNs via email on August 23, 2020.</p> <p>Evidence TL3a.2 Email to Head Nurses to Complete Specialist Registration</p>
August and September 2020	<p>Some HNs respond to Gillian and Kathy that the application is expensive and complex. Gillian advocated to Kathy for the below resources:</p> <ul style="list-style-type: none"> • Financial support to have HNs complete the Prometrics exam needed to be registered as nurse specialists • Financial support for re-registration as nurse specialists, which is a higher registration fee • Support with time on duty to complete the exam <p>Evidence TL3a.3 Meeting for Financial and Information Resources; Email Feedback from Head Nurse</p>
August 2020	<p>Kathy discussed the CBAHI citation with Dr. Mahdi, GM, and requested his agreement to provide financial resources to support the HNs to pay for their reclassification.</p>
August 2020	<p>On Gillian's behalf, Kathy communicated with the CBAHI Assessor and SCFHS representative in the Human Resources department to clarify the process for reclassification and provided feedback to the HNs.</p>
September 2020	<p>The GM approved funding for the HNs to reclassify on September 07. Evidence TL3a.4 Memo for Approval of Financial Resources</p>
November 2020	<p>Gillian, Kathy, and operational Program Directors followed-up with HNs regarding their progress for application for reclassification.</p>
June 2021	<p>All HNs, but one confirmed that they had been reclassified from technician to specialist. The Finance Department reimbursed HNs as each completed the reclassification process with the submission of their new license.</p>
February 2022 Positive Outcome	<p>The citation was removed following the CBAHI accreditation assessment on February 04, 2022.</p>

Conclusion

This example demonstrates advocacy by Gillian, Program Director, for resources to support an organizational accreditation goal. As a result of that advocacy, financial resources were obtained, and all but one of the HNs are now reclassified as specialists, and the CBAHI requirement has been met. The outstanding HN is currently working on her reclassification.