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"Go Live in '05"—From Hierarchy to Shared Governance in Higher Education

Peter A. Maresco
Sacred Heart University, marescop@sacredheart.edu

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Higher education is in the midst of a major transformation evidenced by several factors: greater demands from stakeholders; pressure to increase student enrollment, financial uncertainty, limited resources, and a responsibility to contribute to the community's civic and economic development. Faculty and staff in higher education are challenged to deliver education in innovative ways. This innovation requires an expedient method of governance and necessitates careful examination of the organization's structural, cultural, and decision-making processes. To meet these demands, leaders in higher education must examine decision-making processes and design governance models that respond quickly and efficiently to their myriad of constituents.

Coakley and Randall (2006) believe that leadership models in higher education must be challenged to be more responsive to the stakeholders. And Currie (2005) believes that faculty and staff must be active participants in the systems that govern academe. Porter-O'Grady, Hawkins, and Parker state, "There is not an enterprise in the United States that is not going through some form of renewal" (1997, xv) suggesting that organizational renewal demands greater efficiency, effective communication, and a comprehensive reassessment of all organizational functions.

The term 'shared governance' provides an organizing framework for creating an empowered workforce and point-of-service decision-making. Shared governance is not a rigid design, but instead is a dynamic process focused on empowerment and accountability. Shared governance provides a language and a structure to formalize empowerment and collective decision-making in organizations (Porter-O'Grady 2001).

In the spring of 1999, the administration and faculty in the Department of Nursing at Boise State University voted to revise the curriculum and by the close of spring semester in 1999 redesigned their governance model. The curriculum changes were expected to be radical as well as labor-intensive. For the curricular changes to be successful the departmental culture needed to be reengineered and its organizational structure redesigned. With this type of change, each person's role would be affected throughout the organization (Porter-O'Grady, Hawkins, and Parker 1997). In this article, the authors describe and illustrate the six-year process of cultural, structural, and curricular changes that occurred during the evolution from a hierarchical style of management to a shared governance model. The American Federation of Teachers in Higher Education (2002) defines shared governance as a set of practices under which faculty and staff in colleges and universities participate in the decision-making processes concerning the operation of their institutions.

In the Beginning

One of the most important curriculum changes impacting all stakeholders was the department's decision to combine three separate and distinct nursing programs into one integrated program by fall of 2002. When the transformation began, the department consisted of three separate programs; practical nursing (PN), associate of science (AS) degree, and baccalaureate of science (BS) degree. Decisions were made within each program exclusive of the other two programs. The structural design

for the department was formalistic and hierarchical [Figure 1: Hierarchical Model]. The program directors and the department chair approved all decisions made by faculty. This process slowed decision-making, impeded communication, and stifled change. As the department moved through the change to become one program and from a hierarchical structure to a shared governance model, John Kotter's eight-step model for organizational change was used to guide the process (Kotter 1996).

Applying Kotter's Eight-Step Model for Organizational Change

Organizational change is time consuming and complex. Using a theoretical model to guide the change process is essential. John Kotter (1996) outlines an eight-step process to transform organizations. The first two steps in Kotter's model (1996) involve creating a sense of urgency and a guiding coalition to direct the change. The three existing nursing programs would no longer be separate and instead they would be fused into one comprehensive program with one entry point and three exit options. All of the courses would be new, and teaching assignments would be reallocated. The changes were time limited with a 'Go-Live' date of Fall 2005. This created an intense sense of urgency and a need for skilled leadership. Several teams comprised of faculty, staff, and students were established to implement the radical changes occurring within the department. Along with teams like admissions and curriculum, an Organizational, Culture, and Design (OCD) team was developed and charged with redesigning the social architecture of the organization and crafting a structural model for effective governance and efficient decision-making.   Implementing a shared governance model requires effective communication and skilled leadership. Many believed that making the decision to adopt this model would be the most difficult decision we would face. However, this was just the beginning. Porter-O'Grady, Hawkins, and Parker (1997) note that the political, personal, and structural challenges are impossible to conceive at the outset of such an immense endeavor. Knowing where we were going and how we intended to get there required a shared vision.

Creating a vision for the future is the third step in Kotter's model. The OCD Team worked with faculty and staff to create a shared vision and recommended developing the shared governance model in accordance with the National League for Nursing Standards for Accreditation [Figure 2: Projected "Go Live" Model for AY 05-06]. The evolution of the model would be gradual and incremental, based on predictions of where the department hoped to be in fall 2002 when the new curriculum would begin, and fall 2005, the target date for completing the transition from a formalistic hierarchal model to a fully functional shared governance system. The faculty and staff developed the motto "Go Live in '05" which inspired us as we progressed through this cultural and curricular transformation.

The fourth step in Kotter's model is to communicate the change. The department motto "Go Live in '05" became a rallying point for faculty and staff and helped communicate the change. The OCD Team conducted a series of open forums for faculty, staff, and students declaring the "Go Live in '05" motto and explained that the model would be a dynamic work-in-progress and would evolve as the department progressed toward the target date of 2005. The evolving model of shared governance was discussed at virtually every monthly department meeting from 2001 to 2005, and the OCD Team provided in-depth descriptions and explanations of the new model using various mediums including written materials, pictures, electronic mail, and forums for open discussion. In this way, the OCD Team was influential in motivating faculty and staff to adopt the change and to meet its goals for implementation.

The next two steps in Kotter's model are to empower others to achieve the vision and to establish short-term goals. These steps were implemented by empowering the OCD Team to assume a

leadership role to accomplish the change and by developing the department's organizational models for shared governance. Each spring, the OCD Team presented a revised model to faculty and staff where it was discussed, further revised, and approved by way of majority vote.

In Phase I of the Department of Nursing's shared governance model, the Department Chair was retained as the main decision maker and new teams were established to implement the projected curricular and cultural changes [Figure 3: Phase 1 AY 00-01]. Phase I of the emerging model included a matrix suggesting ways to merge the three separate nursing programs into the integrated program. The model also included a Steering Committee (SC) comprised of faculty and staff representatives elected by their respective teams. The purpose of the SC was to bring faculty and staff from the three distinct nursing programs together to improve communication and build relationships. They began phasing out the 'old' curricula and implementing in the 'new' integrated nursing program.

Phase I of the shared governance model was the first time faculty from the three different programs worked collaboratively and the first time staff was included in department governance. Changes during the first year were astonishing. We discussed the purpose and function of shared governance and how it affected each individual in the department.   This phase of the process helped us appreciate the value of each individual's contributions and allowed us to work and learn together.

The model continued to evolve [Figure 4: Phase II AY 01-02] and in Phase II of our shared governance design, the Department Chair was integrated into the model and served as a working member of the newly designed Shared Leadership Council (SLC), an equivalent level to that of members from other governance teams. The new SLC replaced the Steering Committee and consisted of one member of each governance team.   In this phase, additional teams and individuals were added to the model including the program directors of the three existing nursing programs and the management assistant. The matrix for curriculum discussion remained a part of the model and represented the relative separateness of each existing nursing program. The SLC met on a semi-weekly basis focusing on program integration, system improvement, policy development, and team performance. Team representatives reported their progress to the SLC. This process provided a feedback loop to enhance communication and to improve decision-making throughout the department. The SLC discussed how to empower teams in the model. Shared decision-making is a vital strategy to improve organizational productivity in higher education (American Federation of Teachers 2002) and promotes individual and collective responsibility and accountability. These issues reinforced the need to continue the SLC in Phase III of the department's shared governance model.

When Phase III of the department's shared governance model [Figure 5: Phase III AY 02-03] was put into action in fall 2002, the new curriculum was also implemented. Students began to play an integral role in the new governance structure. Phase III of the shared governance model evolved to include two existing student-focused department committees: the Student Affairs Committee and the Scholarship Committee. These two committees would eventually be combined to create the Student Team whose functions included scholarship decisions, policy development, and student affairs. As the CHARM Team evolved to include functions of the Faculty Search Committee and grant acquisitions, it renamed itself the Vision Team. The NLNAC (Accreditation Team) also expanded its functions and evolved into the Outcomes and Assessment Team. The program directors in the 'old' programs were being phased out and were no longer represented on the SLC.

One of the most substantial changes to the shared governance model occurred in Phase IV of the

model's development [Figure 6: Phase IV AY 03-04]. The Operations Team was added to coordinate several of the daily departmental functions including developing course schedules, coordinating faculty teaching assignments, and providing oversight of the department budget. These functions were considered some of the most important to faculty and staff because they directly impacted their daily lives and livelihood. They required faculty and staff to negotiate with their peers for limited resources, choice teaching assignments, and desirable course schedules. In 2003-2004 an option to form an Ad Hoc Task Force was added to the model, which provided a temporary mechanism to deal with unusual and time-limited issues. The PN program ended in 2003, and faculty from that program were fully integrated into the department's shared governance model. The SLC continued to develop and evolved into a Coordinating Council (CC) which reflected its primary function of coordinating processes that were aligned with the vision and mission of the organization, rather than making decisions (Scott and Caress 2005).

In Phase V of the shared governance model [Figure 7: Phase V AY 04-05], the AS program was phased out and those faculty were further integrated into the model. No new governance teams were added and the evolving shared governance model took root as an integral part of the organizational culture.

The CC and the OCD Team debated the value of adding a Management Team to the shared governance model. Eventually, the teams decided to include a Management Team for two important reasons. First, the faculty and staff believed that a team with legitimate leadership authority was needed provide a 'unified voice' for the department. Second, a team was needed to deal with faculty and student issues that were confidential. Open forums were held to determine how managers would communicate with stakeholders, interact with the teams without dominating them, and participate collaboratively in the decision-making process. Subsequent to discussions, faculty and staff voted to merge two teams; a newly formed Chairs Team comprised of the Department Chair and three Associate Chairs representing the three program exit options (PN, AS, BS) with the Operations Team since the functions of both teams were similar. In Phase VI of the shared governance model [Figure 8: Phase VI AY 05-06] the two teams merged. The primary functions of the Operations Team included scheduling and budget decisions, and the Chairs Team dealt with personnel and student issues.

In spring 2006, the faculty and staff voted to include a Graduate Program in Phase VII of the shared governance model [Figure 9: Phase VII AY 06-07], and the department sought approval to begin this program. Faculty and staff believed a Graduate Team was needed to specifically deal with the issues associated with graduate education.

The seventh step in Kotter's change model is to celebrate short term wins. It is vital to rejoice in the important work accomplished during the change process. In addition to the pending graduate program, the department has much to celebrate. We celebrated each model revision at the end of every academic year, the phasing out of each program closing, and formally recognized faculty and staff achievements and team accomplishments.

The last step in Kotter's model is to make the change permanent.   In the "Go Live in '05" model, all faculty were teaching together in the new curriculum and working within the shared governance model. While the actual "Go Live in '05" model looked quite different than the predicted original envisioned six years earlier, it provided a necessary vision of the future. The original model prediction shaped

revisions to the department's shared leadership model and provided direction for improvement. The "Go Live in '05" model was successfully implemented and marked not only an 'end' to one journey, but marked a new beginning for continued growth and renewal.

Today's Challenges

While faculty and staff in the department of nursing have accomplished a great deal in the past six years, the "Go Live in '05" year was one of the more tumultuous years in the transition. Although faculty and staff were accustomed to ongoing change, many believed that the motto "Go Live in '05" would not only mark a new beginning, but would represent the end of significant change. Many did not realize that the department's shared governance model would continue to evolve in a dynamic fashion. Implementing a shared governance model is an ongoing process and not an end in itself. Processes within a shared governance model require continuous revision and realignment of each person's authority, responsibility, and accountability (Caramanica 2004). The current focus is to realize a fully empowered workforce that recognizes each person's role and allows that role to be fully and legitimately expressed. The journey to empowerment in a shared governance model is not linear nor can it be assigned. Instead, empowerment is a personal belief about one's work and meaningful contribution in creating and sustaining a thriving system of governance (Porter-O'Grady 2001). Our shared governance model is currently in place, but the need for growth and transformation still exists in this dynamic process. This will be our challenge for years to come.

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