

**OO4. The administrative and nursing organizational chart(s). Describe the CNO’s structural and operational relationships to all areas in which nursing is practiced.**

**Structural relationships**

The CNO has ultimate responsibility, accountability and authority for all areas where nursing is practiced. Structurally, the organizational chart reflects the responsibilities described in the CNO job description. Due to the size and complexity of the organization, not all nursing areas report directly to the CNO. Indirect reporting lines have been established and are divided up between the CNO and members of the Executive Management Team. The vice president of Operations and vice president of Human Resources and Support Services have a strong collaborative working relationship with the CNO, as does the chief operating officer. However, all registered nurses within SJO have a reporting relationship to the CNO for their clinical practice.

**OO4 Figure 1**

Direct report to the CNO

Direct Report to the CNO	
Patti Aube, MSN, RN-BC, NE-BC	Executive Director, Nursing Professional Practice, Research and Volunteers
Carmen Ferrell, MSN, RN, CCRN	Executive Director Nursing Operations, Clinical Outcomes and Nursing Support
Kathleen Penzes, DNP, RN, NEA-BC	Executive Director, Women’s Services, Medical/Surgical
Glenn Raup , PhD, MSN, RN, CEN	Executive Director, Emergency Care Center
Gemma Seidl, MSN, MPH, RN	Executive Director, Critical Care and Telemetry Services

The following nurse leaders participate in the Nurse Executive Council (NEC) facilitated by the CNO.

**OO4 Figure 2**

Indirect report to the CNO

Indirect Report to the CNO	
Pamela Hockett, MSN, RN, OCN	Director, The Center for Cancer Prevention and Treatment
Christine Phipps, MBA, BSN, RN, CNOR	Exec Director Surgical Services
Diana Zirschky, MSN, RN, CNOR	Assist Director Operating Room
Susan Parke, DNP, RN, FNP-BC, CPHQ, CIC	Director, Infection Prevention and Control and Employee Health Services
Jennifer Hall, MBA, MSN, RN, OCHN-S	Executive Director, Cardiovascular Services

In addition, some key non-nurse leaders may also attend the NEC meeting when the agenda dictates. These frequently include the executive director of Renal Services and program director for Behavioral Health.

### **Operational relationships**

As the highest ranking nursing leader, the CNO attends the Executive Management Team meetings to represent nursing practice and operations. NEC is led by the CNO with all nursing directors'/leaders' participation. The next level of oversight is the Nursing Leadership Team (NLT), which is also facilitated by the CNO. This group consists of nurse directors/leaders and nurse managers from all areas where nursing is practiced. Within our Nursing Shared Governance structure of Nursing Council and Work Groups, the chairpersons report activities and accomplishments to the CNO and the NEC twice a year. The Nurse Advisory Board, whose membership is composed of the chairpersons from each of the Unit-Based Councils, is chaired by the CNO, providing a direct line of communication from frontline staff to the CNO. A variety of additional methods provide opportunities for the staff nurse to participate and to connect with the CNO. A few examples include bi-monthly employee forums, Breakfast with Katie, weekly rounds, participation in rapid improvement events and participation in monthly clinical excellence meetings such as AMI, congestive heart failure and critical illness meetings. The CNO also attends various families of service leadership meetings and educational sessions. Staff also invites Katie to attend special occasions.

The attached grids describe how the direct and indirect relationships occur between Nursing departments and the CNO. The organizational charts describe the administrative structure. The patient care service organizational chart identifies areas that report directly to the CNO through an executive line relationship. The organizational chart demonstrates the matrix of where nursing is practiced and reported to the CNO.

[OO4.1 SJO Organizational Chart – July 2015](#)

[OO4.2 CNO Clinical Structural and Operational Relationship with Nursing](#)

[OO4.3 Patient Care Services Organizational Chart – June 2015](#)

[OO4.4 Where Nursing Care is Provided and Practiced – June 2015](#)

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