

## BACKGROUND

University Medical Center of Southern Nevada (UMC) has undergone a broad organizational culture shift that is directly aligned with its Magnet journey goals. From a traditional structure of tall hierarchy to its second Pathway to Excellence designation, a growing shared governance culture has set the stage for heightened transformational leadership, structural empowerment, and exemplary professional practice.

Overcoming the immeasurable challenges of the COVID-19 pandemic, healthcare workers worldwide have developed protective resilience patterns that may inadvertently promote interprofessional silos, limit cross-disciplinary career growth, undermine a culture of safety, and jeopardize the emergence of open matrix organizational structures.

## PURPOSE

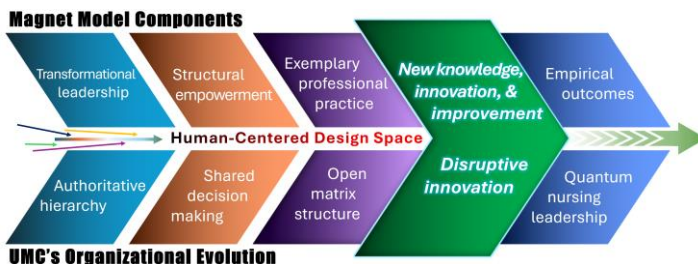


Figure 1. Magnet model components in parallel to UMC's organizational evolution. [Original graphic].

To increase participation, transdisciplinary collaboration, and projects in evidence-based practice (EBP), quality improvement, and interprofessional nursing research, the EBP & Research Council employed a human-centered design approach, focusing on the lived experiences of the council members. They aimed to support UMC's transformational journey by accelerating the council's impact on the fourth Magnet model component: *New Knowledge, Innovation & Improvements*. Catalyzing existing resources, they sought to increase empirical outcomes by broadening members' knowledge and stimulating collaboration.

## INNOVATIVE PROCESS

***What if***  
**the last 30 minutes**  
**could transform everything?**

The EBP & Research Council employed a novel disruptive innovation technique, implementing a low-cost, high-yield intervention meant to stimulate and activate the council's power:

### 30-MINUTE THINK-TANK

The council designated the last 30 minutes of each council meeting as an open forum "think-tank," distinctly different from the earlier hour. Aimed at flattening any inherent hierarchies within the council, it creates a container for members to share informal insights, concerns, learning opportunities, and reflection. Rather than formal problem-solving, the 30-Minute Think-Tank invites open ideation and spontaneous collaboration, fostering a psychologically safe space for creative, non-linear growth where the individual and the group coexist.

## EVIDENCE & THEORY



Figure 2. Innovation theories supporting the disruptive strategy. [Original graphic].

## CONCLUSIONS & INSIGHTS

The 30-Minute Think-Tank is a low-cost, high-yield accelerator of purposeful innovation deployed within an existing shared governance structure. It promotes a culture of continuous improvement by leveraging human-centered design, innovation science, and quantum nursing leadership. Building on the council's strength in valuing interprofessional perspectives, the think-tank has energized agile team dynamics and boosted member engagement by creating a psychologically positive space where diverse voices are not only heard but celebrated. The emergence of unrecognized skills, passion, and expertise has begun breaking down persistent silos among diverse council members, sparking critical dialogue about non-nurse roles in Magnet excellence. Emphasizing collective intelligence in future innovation pathways, it reveals UMC's organizational vision through the Magnet lens and illuminates beyond to our potential contributions to the evolving healthcare landscape.

## RECOMMENDATIONS

1. Continue the 30-Minute Think-Tank and consider scalability:
  - Evaluate data on council member engagement, project initiation and completion, and empirical impact.
  - Explore broader organizational and council strategies.
2. Monitor feedback loops to ensure object responsiveness.
3. Consider a mentorship component that pairs project managers with less experienced members initiating change.

## REFERENCES

