Expanding Nursing's Voice in Governance: Preparing Leaders for Board Service

Holly Hall, EdD, RN, MSHA, Elizabeth A. Madigan, PhD, RN, FAAN, Cole Edmonson, DNP, RN, NEA-BC, FAAN, FNAP, FAONL, Jayne Gmeiner, MS, RN, NEA-BC, Donna Miles Curry, RN, PhD, and Michele L. Dodds, DNP, APRN, BC-FCP

This article offers practical information for nurses aspiring to serve on boards by presenting insights from 4 experienced nurse leaders who participated in a board readiness continuing education program. Although nurses contribute essential expertise to health systems, they remain underrepresented in governance roles. Panelists highlighted the strengths nurses contribute, including systems thinking, communication skills, and a mission focused perspective. Six of the following themes emerged: the case for nurse representation, identifying board fit, building visibility, pathways from local to international service, the role of mentorship and networking, and the value of experience in preparing nurses for governance.

Nurses are essential in shaping policies and decisions that influence health care delivery, yet their representation in governance remains disproportionately low. The *Future of Nursing: Leading Change, Advancing Health* report emphasized that preparing nurses to assume leadership roles at all levels is a shared responsibility of nurses, nursing education programs, and professional associations. It also noted that public, private, and governmental health care decision makers should ensure that leadership positions include nurses.[1]

More than a decade later, the following concern remains: despite this call to action for increased representation in governance by national organizations such as the Nurses on Boards Coalition (NOBC),[2] no comprehensive data exist describing how many nurses serve on boards across public, private, nonprofit, or governmental sectors. Available national estimates suggest that nurses hold only 5% of board seats overall,[3] indicating substantial underrepresentation. This gap underscores the urgent need to strengthen pathways that support and encourage nurses to participate in board service.

Susan Hassmiller, PhD, RN, FAAN, a prominent nurse leader and former Senior Adviser for Nursing at the Robert Wood Johnson Foundation, where she led nursing strategies for 25 years, asserted, "Board service can be rewarding to nurses both personally and professionally. It not only allows them to exercise leadership, but it also expands those skills to advance their capabilities and knowledge. It gives nurses the chance to meet people and enhance their professional network. And it can be inspirational and empowering."[2]

PURPOSE

This paper summarizes interviews from a continuing education offering titled *Navigating Your Way to Board*

KEY POINTS

- **Begin with committees or community boards to build early governance experience.**
- **Maintain a visible professional profile and share work on key issues.**
- **Network with leaders, volunteer for assignments, and deliver on commitments.**
- **Cultivate both sponsors and mentors to expand opportunities and strengthen your board readiness.**
- **Clarify board expectations, including time, responsibilities, insurance, reimbursement, and fundraising obligations.**

Service: Local, State, National, and International, provided by the Zeta Phi At-Large Chapter of Sigma Theta Tau International. The program was designed to build the capacity of nurses, regardless of years of experience, prior board involvement, market sector, or organizational setting, with the knowledge and confidence needed to pursue governance roles at every level. Nurses provide critical contribution to governance, diverse representation in leadership structures, and strengthen leadership capacity while elevating the voice of nursing across settings.[4,5]

The educational session featured a panel of distinguished experts and board leaders from diverse organizational settings, each bringing unique perspectives and extensive governance experience. They provided in-depth insight into the purpose, value, and impact of board service within the nursing profession and the broader community. The panel also shared evidence-informed perspectives on why nurse representation is essential to shaping organizational strategy, advancing health equity, and strengthening decision-making across sectors.

SETTING THE FOUNDATION: INTRODUCTION TO NOBC

Dr. Edmonson opened the offering with an overview of the NOBC, a national initiative established in 2014 to expand the presence of nurses in governance roles across sectors in response to the Institute of Medicine's *Future of Nursing* report, which called for greater nurse representation in decision-making positions. Comprising 28 national nursing, non-nursing, and nonprofessional member organizations, the coalition advances its mission to improve community health through the service of nurses on boards and other bodies by ensuring that nurses' expertise informs board-level strategy, policy, and oversight. NOBC offers tools to support and engage nurses in learning and practicing governance, all of which can be found at https://www.nursesonboardscoalition.org/resources/for-nurses/.[6]

NOBC promotes principles of inclusive equity in leadership and maintains a national registry of more than 30,000 nurses, documenting 15,000 individuals who are engaged in or aspiring to board service.[2] The coalition achieved its initial goal of 10,000 board seats held by nurses by 2020, ultimately recording just under 12,000 seats as of December 2022, and has assisted with placing nearly 300 nurses on boards since 2023, demonstrating substantial progress in elevating nurse leadership.[2] Through partnerships, competency-building resources, and efforts to measure the impact of nurse participation in governance, NOBC continues to strengthen the influence of nursing on organizational and population health outcomes.[2]

METHOD

Transcripts from the panel that were originally collected as part of a governance-focused continuing education program were analyzed. The interviews were not conducted for research purposes; rather, they were designed to prompt panelists to reflect on their experiences serving on boards. Panelists were asked open-ended questions that encouraged them to share in-depth narratives of significant events, challenges, and reflections on their roles. The questions were developed through a comprehensive review of the existing literature[2,4,5] and aligned with the study's aim. They were subsequently discussed and approved by the panelists (*Table 1*).

These responses provided both experiential and factual information, allowing panelists to describe what occurred and how they interpreted those experiences. This approach was well suited to capturing the complexity of their perspectives and allowed their voices and interpretations to guide the findings.

PANELISTS

This section is informed by interviews conducted with 4 panelists: Cole Edmonson, CEO of the NOBC, Elizabeth Madigan, former CEO of Sigma Theta Tau International; Jayne Gmeiner, CNO at Dayton Children's Hospital and Past President of the Ohio Organization of Nurse Leaders; and Donna Miles Curry, Professor Emeritus in the College of Nursing and Health at Wright State University and member of the Friends of the Florence Nightingale Museum.. The discussion was moderated by Holly Hall, Nurse Researcher at Premier Health, past president of the Zeta Phi at Large Chapter of Sigma Theta Tau International and a member of the Sigma Theta Tau International Governance Committee.

The interviews revealed 6 interconnected themes that reflect how nurses navigate, influence, and advocate in governance roles. The following sections outline the major themes that emerged from the interviews.

Theme 1: The Case for Nurses on Boards

Globally, nurses represent the largest segment of the health care workforce. In the United States, they lead care delivery, manage complex systems, design quality improvement processes, and navigate ethical, financial, and human challenges every day. Yet nurses occupy only about 4%–5% of hospital and health system board seats, a proportion that has changed very little in more than a decade.

Boards determine strategy, approve budgets, set priorities, and define organizational success. When nurses are not present in these conversations, decisions lack the insights of professionals who understand patients, families, communities, and frontline realities.

Table 1. Panelists and Corresponding Questions

Panelists	Questions
Executive National Nursing Coalition	• Why is board service important for nurses in shaping the future of health care? • What unique perspectives do nurses bring to boards outside of health care, and how can they leverage those strengths? • How do you identify which boards align best with your values, expertise, and long-term goals? • Are there nursing boards that welcome early-career nurses or those without prior board experience? • What are the first 3 steps a nurse should take today to begin their board journey? • Are there specific leadership programs or fellowships you recommend for nurses pursuing board roles? • Are there courses, certifications, or leadership programs that help prepare nurses for board service?
CNO, Pediatric Hospital	• How can nurses translate clinical experience into board-relevant language on resumes or applications? • How do you ensure your voice is heard and respected in multidisciplinary boardrooms? • How does serving on a nursing board enhance your leadership and professional growth? • How can bedside nurses or those in nonleadership roles position themselves as strong candidates? • How can nurses demonstrate impact in their current roles to strengthen their board applications? • Can you share a moment when your nursing background made a critical difference in a board decision?
Former CEO, International Nursing Organization	• What strategies helped you build relationships with decision-makers outside of health care? • What are the first steps a nurse should take to pursue a board position? • What are the key differences between serving on local, national, and international nursing boards? • What credentials, experiences, or leadership roles do nursing boards typically look for? • What barriers do nurses face when pursuing board positions, and how can they be overcome? • How do you manage time and responsibilities between board service and clinical or academic roles?
CEO, National Heritage Organization	• What credentials, experiences, or skills are most valued by boards in sectors like education, finance, or public policy? • Can you share examples of how social media or professional platforms like LinkedIn helped raise your visibility? • What barriers did you face as a nurse entering non-healthcare board spaces, and how did you overcome them? • How can nurses build a pathway from local involvement to national or global board service? • What are the best ways to connect with current board members or decision-makers?

(continued on next page)

Table 1. (continued)

Panelists	Questions
Other	• How important is mentorship in this journey, and how do you find mentors in nonnursing sectors? • How do you handle imposter syndrome or doubts when stepping into unfamiliar board environments? • How important is networking in securing a board position? • Can you share how mentorship played a role in your journey to board service? • Can you share a story where your voice as a nurse made a meaningful difference on a board? • What advice would you give to nurses who feel intimidated by the idea of board service?

Nurses contribute credibility, public trust, and a holistic understanding of health that connects clinical outcomes with operational and financial performance.

Nurses offer boards a set of strengths that leaders consistently say they need, including systems thinking and the ability to see interdependencies, quality and safety expertise rooted in real-world outcomes, practical financial and business insight even when nurses underestimate this skill, generative communication such as asking questions others may overlook, and a mission-focused approach that keeps organizations centered on who they serve and why. Despite these strengths, many nurses hesitate to pursue board service because of perceived gaps, particularly in finance.

> "If you can calculate an NICU drip, you can understand a profit and loss statement." *Cole Edmonson*

The panelists explained that nurses bring important strengths to any board. Nurses understand how systems work, how to lead change, and how to keep patients safe. They also know what staff need to do their jobs well and what patients and families experience every day. Because of this, nurses can help boards make better decisions about services, products, and policies.

These competencies position nurses to influence decisions that shape organizational strategy and community health. Panelists also stressed that nurses' contributions extend beyond healthcare, noting that sectors such as housing, transportation, education, and technology directly affect social drivers of health. As (E.M.) advised, nurses should not limit their board aspirations to health care alone.

> "Don't limit yourself to health care." *Elizabeth Madigan*

Theme 2: Identifying the Right Board Fit

Nurses bring a uniquely valuable skillset to board service, including the ability to communicate with individuals at every level of an organization, ask insightful questions, and listen with depth and respect. These qualities contribute to their longstanding status as the most trusted profession. Their contributions extend well beyond health care boards, since community organizations, housing boards, nonprofits, and advisory councils also benefit from a nursing perspective, particularly because social factors such as housing and health are closely connected.

Many of the limitations that nurses perceive in pursuing board roles are self-imposed and recognizing the breadth of their skills can help them identify opportunities they may have overlooked. Board service spans a wide range of environments, and many nurses begin on community or advisory boards before moving into more strategic roles. Before joining any board, nurses should consider mission alignment, financial health, board structure, time commitments, expectations around fundraising and liability, and the presence of director and officer insurance. Ultimately, board service is not about representing nursing alone but about stewarding an organization's mission responsibly and ethically.

> "What matters is not where you start, but that you start with intention." *Cole Edmonson*

Theme 3: Building Visibility and Credibility

Building visibility and credibility begins with being intentional about how nurses present themselves and engage with professional communities. Social media, particularly LinkedIn, offers a practical way to showcase skills, experience, and interests while also creating opportunities to connect with others. Credibility develops over time through a progression of experiences that increase in complexity, often beginning with early volunteer roles in youth organizations, faith communities, or school groups. Many nurses build confidence and leadership capacity by saying yes when

opportunities arise, whether serving on committees, joining professional organizations, or taking on roles that expand their understanding of how systems function. Volunteerism in many forms opens doors, fosters relationships, and helps nurses gain the knowledge needed for future governance roles. Each step, whether small or significant, contributes to a professional identity that others recognize as capable, committed, and ready to serve.

> "Visibility is built through consistent engagement, not perfection." *Donna Miles Curry*

Theme 4: Pathways From Local to international Boards

The pathway from local to national and international board service begins with understanding the type of board nurses want to join. Operational boards involve hands-on work, while strategic boards focus on direction and policy and usually have staff to carry out the work. Knowing the difference helps nurses assess their skills and identify what they need to learn, especially since many nurses are more familiar with operational roles and may need to stretch into strategic thinking.

A practical first step is joining a committee within the organization. This helps nurses learn about the culture, which is important because cultural fit affects one's ability to contribute effectively. Some organizations are more hierarchical than others which require recognizing whether that environment suits the nurse's style.

> "Lead early, start anywhere." Elizabeth Madigan

Theme 5: Networking, Mentorship, and Relational Building

Most organizations need more help than they have, and connecting with decision makers often starts with simply introducing oneself or reaching out online. Courage matters. Leaders can also spot and encourage emerging talent, especially younger people who may not yet see themselves as leaders. Opportunities often come from showing up, volunteering where it aligns with interests, and being prepared when the right moment appears. There is a board role for anyone willing to serve, at any stage of life, as long as it fits with their commitments and passions.

> "Volunteer, volunteer, volunteer." *Donna Miles Curry*

Successful board service grows through relationships. Nurses thrive when they have sponsors who advocate for them, mentors who help them understand governance culture, and coaches who support their development. Access to education and practical tools strengthens confidence in areas like finance and strategy. Organizations such as NOBC view board engagement as a continuum that includes aspiring, serving, and mentoring, and they work to match nurses with boards and demonstrate the value nurses bring to governance. This approach highlights how connection, guidance, and ongoing support are central to building strong board leaders.

> "Relationships build leaders, leaders build relationships." *Cole Edmonson*

Theme 6: Experience Shapes Readiness

Experience and readiness grow from the core skills nurses already use. The nursing process provides a strong foundation for board work because it builds structured thinking, assessment, and organized communication. New board members benefit from observing early on, learning how each board operates, and doing the necessary preparation between meetings. Respect is earned through listening, understanding the board's purpose, asking thoughtful questions, and offering well-prepared, solution-focused input. Confidence develops over time as nurses learn the culture, understand the strategy, and recognize that everyone in the room is learning and contributing.

> "Confidence and skills grow over time." *Jayne Gmeiner*

Serving on boards strengthens nursing leadership competencies by expanding experience, building confidence, and exposing nurses to new ways of thinking through interprofessional collaboration. Board membership offers opportunities to learn from peers, adjust to new structures and ways of thinking, and self-development through real life opportunities and experience. Early challenges, like navigating agendas or finding one's voice, improve over time through listening and observation. This is very similar to the nursing process learned in one's first nursing course, using the skills of assessment, diagnosis, action planning, implementation, and evaluation. Nurses will also develop skills for time management and clarity of the board functions, meanwhile, providing great nursing expertise to the board you are serving. Over time, board membership deepens professional purpose by assisting to focus on personal contributions and abilities to give back to our profession and society based on the board where elected to serve. As nurses we value the art and science of our profession. Board participation allows both aspects of art and science to be developed in a "pay-it-forward" purpose-driven action.

> "Board service provides self-development opportunities by challenging you out of your comfort zone to positively impact those you are serving." *Jayne Gmeiner*

IMPLICATIONS

Preparing nurses for board service requires early exposure to governance concepts and mentorship. Increasing nurses' representation strengthens diversity and improves decision making by bringing real patient care experience and a clear understanding of how policies affect people and communities. Their presence improves teamwork, strengthens the nursing voice in leadership, and supports more equitable outcomes. Board service also builds confidence, strategic thinking, and broader leadership skills. As health care becomes more interconnected across countries and cultures, preparing nurses for board roles supports a workforce ready to lead in a global world.

DISCUSSION

Nurses preparing for board service benefit from practical, accessible steps that build early leadership capacity. Beginning with committees or community-based boards provides foundational experience with governance processes. Maintaining a visible professional profile and sharing work on key issues can help create opportunities for engagement. Direct outreach, including connecting with board leaders and volunteering for tasks, supports credibility and relationship building. Seeking both a sponsor who can facilitate access and a mentor who can offer guidance strengthens long term development. Finally, clarifying expectations related to time, responsibilities, insurance, and reimbursement ensures that nurses enter board roles prepared and supported.

CONCLUSION

This panel discussion reinforces the growing recognition that nurses are uniquely positioned to influence governance and decision-making across sectors. Consistent with national calls to action, including the landmark Future of Nursing Report, panelists emphasized that nurses bring essential competencies that extend well beyond traditional clinical roles.[7]

Nurses offer clinical insight, systems thinking, and strong communication skills that make them valuable contributors in board roles. Panelists emphasized competencies such as quality improvement, financial awareness, and the ability to translate complex information into clear action. These strengths align with research demonstrating that nurses excel in systems leadership and interprofessional collaboration. Yet nurses remain underrepresented on boards, a gap noted both in national data and by the panel. Signing up with the Nurses on Boards Coalition can help address this gap by connecting nurses with opportunities, preparing them for governance roles, and supporting their pathway into board service.[2]

CREDIT AUTHORSHIP CONTRIBUTION STATEMENT

Holly Hall: Writing – review & editing, Writing – original draft, Conceptualization. **Elizabeth A. Madigan:** Writing – review & editing. **Cole Edmonson:** Writing – review & editing, Resources. **Jayne Gmeiner:** Writing – review & editing. **Donna Miles Curry:** Writing – review & editing. **Michele L. Dodds:** Writing – review & editing, Resources.

FUNDING

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

DECLARATION OF COMPETING INTEREST

The authors have no competing interests to disclose.

DECLARATION OF GENERATIVE AI AND AI-ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

During the preparation of this work, the authors used Microsoft Copilot to generate the initial transcript of the CE offering for accuracy and efficiency. After using this tool, the authors reviewed and edited the content as needed and take full responsibility for the content of the published article.

ACKNOWLEDGMENTS

The author would like to express her sincere appreciation to her colleagues who supported the development of this manuscript. Their insights, encouragement, and commitment to advancing the preparation of nurses for board service strengthened the quality of this work. The authors are grateful for the resources, expertise, and shared perspectives they have contributed throughout the process. Their collaboration reflects our collective dedication to expanding nurses' presence on boards and enhancing their impact in governance roles.

REFERENCES

1. Institute of Medicine. The Future of Nursing: Leading Change, Advancing Health Equity. Washington, DC: National Academies Press; 2011.
2. Nurses on Boards Coalition. Nurses on Boards Coalition website. Available at: https://www.nursesonboardscoalition.org/about/. Accessed April 28, 2026.
3. American Hospital Association. AHA National Health Care Governance Survey Report. Chicago, IL: American Hospital Association; 2022.
4. Cleveland K, Harper KJ, Rudisill P, Vander Horst A. Building evidence that demonstrates a need for increasing the number of nurses on boards. *Nurs Econ*. 2023;41(6):297-300.
5. Sundean LJ, Christopher R, Reede L, Mott J, Mylott L. Board leaders' perspectives of the impact of nurses on boards. *J Nurs Adm*. 2023;53(12):627-633.

6. Nurses on Boards Coalition. Resources for nurses. Nurses on Boards Coalition website. Available at: https://www.nursesonboardscoalition.org/resources/for-nurses/. Accessed May 4, 2026.
7. National Academies of Sciences, Engineering, and Medicine. The Future of Nursing 2020–2030: Charting a Path to Achieve Health Equity. Washington, DC: The National Academies Press; 2021.

Holly Hall, EdD, RN, MSHA, Nurse Researcher, Premier Health, Dayton, Ohio. She can be reached at hhall@premierhealth.com. Elizabeth A. Madigan, PhD, RN, FAAN, Global Nurse Consultant LLC, Mountain Park Associates, Mentor, Ohio. Cole Edmonson, DNP, RN, NEA-BC, FAAN, FNAP, FAONL, CEO Nurses on Boards Coalition, Dallas, Texas. Jayne Gmeiner, MS, RN, NEA-BC, CNO Dayton Children's Hospital, Dayton, Ohio. Donna Miles Curry, RN, PhD, Trustee Florence Nightingale Museum London, Oakwood, Ohio. Michele L. Dodds, DNP, APRN, BC-FCP, Cedarville University School of Nursing, Cedarville, Ohio.

1541-4612/2026/$ See front matter

https://doi.org/10.1016/j.mnl.2026.102842