Excellence in Nursing Care: Magnet™ Recognition

History and Concept

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March 12, 2010
Special welcome to all attendees from Turkey
With great pride we say Thank You to our outstanding Nurses.

Hopkins Nursing, 1st and only in Maryland to receive the Magnet Recognition Award
for more information please visit www.hopkinsnursing.org

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Circle No. 108 on Reader Inquiry Card
Cedars-Sinai Medical Center staff with the magnet hospital award, Linda Burnes Bolton, DrPH, is second from left. Photo courtesy of Cedars-Sinai Medical Center.
For the second time, The Miriam Hospital has been named a recipient of the prestigious Magnet Services Recognition Award for Excellence in Nursing.

From our earliest days, The Miriam has been recognized throughout the region for the superior, compassionate care our nurses provide. It has been well-documented that nurses have a positive effect on patient care outcome, which is why nurses at The Miriam have a strong voice in influencing policies affecting patient care.

If you are interested in professional nursing and working with doctors, staff and other nurses in a genuinely collaborative setting, it’s time to investigate a career with The Miriam.

Interested candidates, please send resume to:
Human Resources,
The Miriam Hospital,
164 Summit Avenue,
Providence, RI 02906.
Email: estaples@lifespan.org,
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The Miriam Hospital
A Lifespan Partner
Quality care with a personal touch
Miami Children’s Hospital awarded Magnet status in July 2003

In 2004 202 hospitals gained Magnet recognition

A religious feeling of simple pride and happiness abounded July 15, when a group of CHW’s nurses shared a few “Magnet moments” with ADVANCE.

The Milwaukee facility was notified July 9 of its Magnet status, making it the seventh freestanding pediatric hospital in the country to receive the elite recognition.

“There is a passion here to provide quality care to children and their families that is contagious,” said Nancy Korom, MSN, RN, vice president of patient care services at CHW. “We are committed to having nurses grow with us professionally, and take advantage of opportunities for professional development and advancement, staying in our system.”

Korom and several other nurses attended a Magnet conference in October 2002 in Minneapolis, and they realized many of their practices at that time already met Magnet criteria.

“Magnet criteria are really about leadership and the way formal leaders have created a system supporting professional nurse practice at the bedside,” she said.}

*HIGH FIVE: Nurses at the Children’s Hospital of Wisconsin in Milwaukee celebrate the call announcing their recognition as a Magnet hospital. The facility is the seventh freestanding pediatric hospital in the country to receive this prestigious designation. Courtesy Children’s Hospital of Wisconsin*
Magnet Movement: The History

- Nurses provide 95% of the care patients receive while in hospitals.

- Nursing care service receive a perfunctory review from accreditation bodies (American Hospital Association, undated)
Research has shown that nursing care is critical to quality care for:

- Patient safety
- Mortality
- Length of hospital stay
- Patient satisfaction
- Infection control
- Cost control


Moreover,

When seeking employment, nurses themselves judge critically if the health care agency provides the best nursing care!
• Until 1983, there was not a vehicle to inform both consumers and professionals themselves about the quality of nursing care existing in various hospitals.

Is nursing care also good?
In 1983 an empirical research study first identified what is now known as Magnet hospital characteristics. These characteristics differentiated the organizations that were best able to:

- recruit,
- advocate, and
- support and maintain the best nursing care.

During the nursing shortages of the 1970s and 1980s.

• Ample evidence suggests that patient care would be improved significantly if health care institutions adhere to the characteristics found in Magnet hospitals.

• These 14 characteristics became the “Forces of Magnetism” that provide the conceptual framework for the Magnet appraisal process.
Forces of Magnetism

Force 1: Quality of Nursing Leadership

- Knowledgeable, strong, risk-taking nurse leaders are present and in the day-to-day operations of nursing services.

Nurse leaders follow a:

- well-articulated,
- strategic, and
- visionary philosophy.

- Nursing leaders, at all levels of the organization, convey a strong sense of advocacy and support for the staff and for the patient.

- The results of quality leadership are evident in nursing practice at the patient’s side.
Forces of Magnetism Cont’d

• Force 2: Organizational Structure

• Organizational structures that are generally flat, rather than tall

• There is decentralized decision-making
  • The organizational structure is:
    • dynamic and
    • responsive to change.

• Strong nursing representation is evident in the organizational committee structure where:
  – Executive-level nursing leaders serve at the executive level of the organization.
  – The Chief Nursing Officer typically reports directly to the Chief Executive Officer.
  – The organization has a functioning and productive system of shared decision-making.
• **Force 3: Management Style**

• Healthcare organization and nursing leaders create an environment supporting participation.

• Feedback is encouraged and valued and is incorporated from the staff at all levels of the organization.

• Nurses serving in leadership positions are visible, accessible, and committed to communicating effectively with staff.
Forces of Magnetism Cont’d

- **Force 4: Personnel Policies and Programs**
  - Salaries and benefits are competitive.
  - Utilization of Creative and flexible staffing models that support a safe and healthy work environment.
  - Personnel policies are created with direct care nurse involvement.
  - Significant opportunities for professional growth exist in administrative and clinical tracks.
  - Personnel policies and programs support professional nursing practice, work/life balance, and the delivery of quality care.
Forces of Magnetism Cont’d

• Force 5: Professional Models of Care

  • There are models of care that give nurses the responsibility and authority for the provision of direct patient care.

  • The models of care (e.g., primary nursing, case management, family-centered, holistic) provide for the continuity of care across the continuum.

  • Nurses are accountable for their own practice as well as the coordination of care.

  • The models take into consideration the patient’s unique needs and provide skilled nurses and adequate resources to accomplish desired outcomes.
Forces of Magnetism Cont’d

• **Force 6: Quality of Care**

  • **Quality is the systematic driving force for nursing care and for the organization.**

  • **Nurses serving in leadership positions that are responsible for providing an environment that positively influences patient outcomes.**

  • **There is a pervasive perception among nurses that they provide high-quality care to patients.**
• **Force 7: Quality Improvement**

• The organization has structures and processes for:
  
  -- the measurement of quality and

  -- programs for improving the quality of care and services within the organization.
Forces of Magnetism Cont’d

• **Force 8: Consultation and Resources**

• The healthcare organization provides adequate resources.

• There is support, and opportunities for the utilization of experts, particularly advanced-practice nurses.

• The organization promotes the involvement of nurses in professional organizations and among peers in the community.
Force 9: Autonomy

- Nurses have the ability to assess and provide nursing care as appropriate for patient’s needs based on professional expertise, competence, and knowledge.

- The nurse is expected to practice
  - autonomously

  And

  - nursing care is consistent with professional standards.

  However

- Independent judgment is expected to be exercised within the context of interdisciplinary and multidisciplinary approaches to patient care.
Forces of Magnetism Cont’d

- **Force 10: Community and the Healthcare Organization**

  - Relationships are established with the community organizations to develop strong partnerships that support the health of the communities they serve.

  - The hospital is recognized as a strong, positive, and productive corporate citizen.
Force 11: Nurses as Teachers

- Professional nurses are involved in educational activities within the organization and community.

- There is a **patient education program** that meets the diverse needs of patients in all of the care settings of the organization.

- Students from a variety of academic programs are welcomed and supported in the organization; contractual arrangements are mutually beneficial.

- There are development and mentoring programs for staff preceptors at all levels of learners (including students, new graduates, experienced nurses, etc.).

- Nurses in all positions serve as faculty and preceptors for students from a variety of academic programs.
• **Force 12: Image of Nursing**

  • The services provided by nurses are characterized as essential by other members of the healthcare team.

  • Nurses are viewed as integral to the healthcare organization’s ability to provide patient care.

  • Nursing effectively influences system-wide processes.
Forces of Magnetism Cont’d

- **Force 13: Interdisciplinary Relationships**
  - Collaborative working relationships within and among the disciplines are valued.
  - Mutual respect is based on the premise that all members of the healthcare team make essential and meaningful contributions to the achievement of clinical outcomes.
  - Conflict management strategies are in place and are used effectively, when indicated.
Forces of Magnetism Cont’d

• **Force 14: Professional Development**

  • The healthcare organization values and supports the personal and professional growth of staff.

  **Emphasis is placed on**

  • career development services,

  • programs promoting formal education, and

  • professional certification.

• **Provision of adequate human and fiscal resources for all professional development programs.**
Two pieces of news here:
1) Congress passed the Nurse Investment Act which includes grants to encourage hospitals to implement Magnet criteria.

2) The Joint Commission supports the magnet concept; it states JCAHO recommends that the facilities that adopt the characteristics of Magnet hospitals foster a workplace that empowers the respectful of nursing staff.

This past summer, the Magnet Recognition Program got high accolades from two governmental authorities. In July, Congress passed the “Nurse Investment Act,” which, among other purposes, includes grants to encourage hospitals to implement Magnet criteria for excellence in nursing services. Just days after President Bush signed that legislation into law, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) released a report on the nursing shortage that recommended that facilities adopt the characteristics of Magnet hospitals to foster a workplace that empowers and is respectful of nursing staff.

“We’re pleased to see the growing attention given to the Magnet Recognition Program,” said Kammie Monarch, MS, RN, JD, director of accreditation and Magnet programs at the American Nurses Credentialing Center (ANCC), a subsidiary of the ANA that administers the Magnet program. “Magnet nursing facilities attract and retain nursing staff, even when widespread shortages exist. Through Magnet designated hospitals, nurses can find work that is intellectually stimulating and emotionally rewarding.”
Growth

- To date, the Magnet Recognition Program® has undergone geometric growth.

- Approximately 6.3% of all health care organizations in the United States have achieved ANCC Magnet Recognition® status.

- 2010: 423 hospitals have Magnet Recognition®

- Hospitals in England, Australia, Russia and Beirut have achieved Magnet Recognition®

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- Source: Credentialing Center, American Nurses Association (2010)
Summary

• A Magnet facility embodies a professional environment that:
  • advocates
  and
  • supports
excellence in nursing practice

See references for evidence


**Review articles**


