

## Question 1

What is the Magnet Recognition Program?

## Question 2

What are the benefits of  
Magnet Recognition?

## Answer 1

- Magnet Recognition is the highest recognition the American Nurses Credentialing Center grants to healthcare organizations for excellence in nursing practice.
- It is a hospital award.

## Answer 2

- **For patients...** Patient outcomes are more favorable in Magnet hospitals:
  - Increased patient satisfaction
  - Decreased mortality rates
  - Decreased pressure ulcers
  - Decreased falls
  - Patient safety and improved quality
- **For nurses...** Professional nurses consider Magnet designation as the gold standard:
  - Increased RN retention and lower nurse burnout
  - Decreased RN vacancy rate and RN turnover rate
  - Increased RN satisfaction
- **For the hospital...** Magnet signifies high quality care to consumers:
  - Increased press and media coverage focused on quality nursing care reducing marketing expenses.
  - Gain and maintain competitive advantage in regional markets.

### Question 3

What are the five components of the Magnet Recognition Model?

### Question 4

What are the components of Donabedian's Model of Quality of Care?

## Answer 3

- The five components of the Magnet Recognition Model:
  - Transformational Leadership
  - Structural Empowerment
  - Exemplary Professional Practice
  - New Knowledge, Innovations & Improvements
  - Empirical Outcomes

## Answer 4

- Structure
  - The attributes of settings where care is delivered
- Process
  - Whether or not good clinical practices are followed
- Outcome
  - The impact of the care on health status

## Question 5

What are some characteristics of a transformational leader?

## Question 6

What are some ways that transformational leaders empower staff at MGH?

## Answer 5

- Transformational leaders are:
  - Visionary
  - Inspiring
  - Strategic
  - Engaging
  - Respectful
  - Trusting
- All levels of nurses at MGH are transformational leaders.

## Answer 6

- Transformational leaders create structures that ensure access to:
  - Information
  - Resources
  - Support
- MGH examples include the Collaborative Governance structure and the Clinical Recognition Program.

## Question 7

What are some components of exemplary professional practice at MGH?

## Question 8

What is an example of how MGH encourages the development of new knowledge, innovation and improvements in care or the work setting?

## Answer 7

- Patient Care Delivery Model
  - Interdisciplinary, Patient- and Family-Centered Care
- Professional Practice Model
- Ethical decision-making processes
- Professional development opportunities

## Answer 8

- Innovation Units
- Evidence-Based Practice
- Process improvement projects guiding by Plan-Do-Check-Act (PDCA) framework
- The Yvonne L. Munn Center for Nursing Research and Munn Awards

## Question 9

What are the key quality indicators that are being collected at MGH (i.e. empirical outcomes)?

## Question 10

What are the appraisers' goals for the Magnet site visit scheduled for March 4-7, 2013?

## Answer 9

- Nursing Sensitive Indicators (NSI)
  - Clinical outcomes related to patient care such as hospital acquired pressure ulcers, falls, restraint utilization, catheter associated urinary tract infections, and central line infections.
  - Patient satisfaction (HCAHPS)
  - Nurse satisfaction

## Answer 10

- A team of appraisers from the American Nurses Credentialing Center (ANCC) will want to find “physical” evidence that supports our written evidence.
- The overall purpose of the site visit is to **verify, clarify, and amplify** the content of the written documentation and evaluate the organizational setting in which nursing is practiced.
- The appraisers want to know that we walk the talk.

## Question 11

What types of evidence will the appraisers look for during their visit to MGH?

## Question 12

How can I prepare for the Magnet site visit?

## Answer 11

- Interdisciplinary patient-and family-centered care demonstrated through practice: the Patient Care Delivery Model
- How MGH values, supports, recognizes and rewards employees: Award and Recognition Programs, Clinical Recognition Program
- Quality, safety and performance improvement initiatives: Innovation Units
- A commitment to culturally-competent and safe care: diversity initiatives
- Strong and visible leaders at every level
- Staff having a voice in decision-making regarding practice: Collaborative Governance
- Robust employee development programs: Knight Nursing Center CE Offerings
- Strong presence of MGH Nursing beyond the hospital's walls: Community and international involvement

## Answer 12

- Review the Magnet web site on the Excellence Every Day portal: [mghpcs.org/EED](http://mghpcs.org/EED)
- Review the Magnet Q&A portion of the *Excellence Every Day Magnet Journey Resource Guide*
- Review the *Magnet Monday* newsletter every week
- Familiarize yourself with your practice area's Nursing Sensitive Indicators and outcomes including quality indicators, patient satisfaction and staff satisfaction

## Question 13

What types of things will the Magnet appraisers want to discuss with staff during their visits to the units/practice areas?

## Question 14

What are the components of the MGH Professional Practice Model?

## Answer 13

- Efforts to promote nursing autonomy and control over practice
- How you develop and communicate the patient's plan of care
- The process used for interdisciplinary care planning
- How you ensure continuity of care
- The process for orientation, mentoring and professional development
- How you make staffing decisions
- Examples of interdisciplinary teamwork
- How you use evidence-based information to inform your practice
- Your unit's Nursing Sensitive Indicators and outcomes/impact on practice
- How you appropriately delegate tasks to assistive personnel
- Examples of collaborative performance improvement activities

## Answer 14

- Vision & Values
- Standards of Practice
- Narrative Culture
- Patient-Centeredness
- Professional Development
- Clinical Recognition and Advancement
- Collaborative Decision-Making
- Research and Evidence-Based Practice
- Innovation and Entrepreneurial Teamwork

## Question 15

What is the  
Patient Care Delivery Model  
at MGH?

## Question 16

What is the process used for quality  
improvement projects at MGH?

## Answer 15

- Interdisciplinary, patient-and family-centered care.
- Within the Patient Care Delivery Model, a philosophy of relationship-based care guides our practice, emphasizing the basic tenets of the caregiver's relationship with:
  - Self (self-awareness)
  - Team/Colleagues
  - Patient and Family
  - Environment of Care

## Answer 16

- **Plan Do Check Act (PDCA)** is the standard tool used for quality initiatives at MGH
  - **PLAN:** Identify the problem and current processes - create a plan for improvement.
  - **DO:** Implement or carry out the plan.
  - **CHECK:** Evaluate the change – did you get the results you wanted?
  - **ACT:** Continue with the change or modify the plan until you get the results you want to achieve.

## Question 17

How does MGH support the professional development of MGH nurses?

## Question 18

What does the term “empirical outcomes” refer to in the Magnet Model?

## Answer 17

- Examples of structures and processes include:
  - Financial support for education-related activities through the Institute for Patient Care (IPC) Award and Recognition Program (vouchers, grants, scholarship, fellowships)
  - The Norman Knight Nursing Center for Clinical & Professional Development (Knight Center) is an ANCC-Approved Provider for Continuing Education (CE) for Nurses
  - The Knight Center's Evaluation of Professional Learning Environment for Nurses (PLEN) learning needs survey of inpatient and outpatient direct care staff
  - Advice and mentoring for nursing wishing to advance their careers through the IPC and during the performance appraisal process.
  - Flexible unit scheduling practices to allow nurses to attend classes (degree granting programs or CE)
  - Paid education time, as negotiated with manager, to attend continuing education programs

## Answer 18

A result or outcome that has been validated by data to show that real change has occurred because of a particular action.

## Question 19

What are Nursing Sensitive Indicators?

## Question 20

What will the appraisers want to know about Nursing Sensitive Indicator data when they visit my unit?

## Answer 19

- Nursing Sensitive Indicators (NSI) are measures that reflect the structure, processes and outcomes of nursing care (American Nurses Association, 2004).
- These measures reflect the impact of nursing care.
- Three types of NSIs were presented in our Magnet evidence: Clinical Quality, Patient Satisfaction and Nurse Satisfaction.

## Answer 20

- You should be familiar with:
  - The type of data that was submitted for your clinical area
  - How your department's performance compares to the national benchmark
  - What your unit/department has done to maintain or improve performance
- The Communication Board on your unit will have some of this information; otherwise, ask your Nursing Director or Clinical Nurse Specialist for help.

## Question 21

What kind of clinical Nursing Sensitive Indicators data do we collect at MGH?

## Question 22

How do we measure Patient Satisfaction and why is it important?

## Answer 21

- Data on our rates for:
  - Pressure Ulcers
  - Falls
  - Use of Physical Restraints
  - Pediatric Peripheral Infiltrations
  - Central Line Blood Stream Infections
  - Catheter-Associated Urinary Tract Infections
  - Ventilator-Associated Pneumonia

## Answer 22

- Providing an excellent patient experience is part of our mission.
- Patient satisfaction surveys are conducted:
  - MGH inpatients are called randomly and asked to complete the HCAHPS Survey, which stands for “Hospital Consumer Assessment of Healthcare Providers & Systems.” The survey is required for all hospitals by the government.
  - Emergency Department and Pediatric patients complete specialized surveys to assess their satisfaction with their patient experience.
  - Radiation Oncology and Infusion Center patients complete a specialized survey administered by Press Ganey.
  - The outpatient population receives the Clinician and Group Consumer Assessment of Healthcare Providers & Systems (CG-CAHPS) Survey. MGH is exploring ways of incorporating nursing-specific questions into this survey.
- These surveys measure patients’ perceptions of “how often” they felt they received high quality clinical and customer service.
- The HCAHPS scores are publicly reported and are tied to the hospital’s reimbursement—so the results impact our reputation and our bottom line!

## Question 23

How do we measure  
Staff Satisfaction at MGH?

## Question 24

What structures and processes support  
Workforce and Career Development for  
nurses, other employees, students, and  
visitors at MGH?

## Answer 23

- **Staff Perceptions of the Professional Practice Environment Survey (SPPPE)** - developed at MGH; the CNO uses this tool as a "report card" for evaluating MGH's practice environment and identifying what is working, and, just as importantly, what's not working, to support care delivery ; measures staffs' perceptions of:
  - Autonomy
  - Control over practice
  - Clinician-MD relations
  - Communication
  - Teamwork/leadership
  - Conflict management/handling disagreements
  - Internal work motivation
  - Cultural sensitivity
- **National Database of Nursing Quality Indicators (NDNQI) survey** - provides mean scores benchmarked nationally against other academic medical centers.
- **Practice Environment of the Nursing Work Index (PES-NWI)** - measures staff satisfaction with five organizational characteristics:
  - RN Participation in Hospital Affairs
  - Nursing Foundations for Quality of Care
  - RN Manager Ability, Leadership, and Support of Nurses
  - Staffing and Resource Adequacy
  - Collegial RN-MD Relations

## Answer 24

- The Institute for Patient Care initiatives include:
  - Awards and Recognitions Program
  - Clinical Affiliations Program
  - Clinical Recognition Program
  - Collaborative Governance
  - International Visitor Consultation Program
  - Workforce Development Program
  - The Norman Knight Nursing Center for Clinical and Professional Development (Knight Center); continuing education, in-service education, and training
- Diversity initiatives
- MGH Workforce Development initiatives

## Question 25

What are the key components of the Performance Appraisal process?

## Question 26

What is Peer Review and why is it important?

## Answer 25

- Self-Reflection/Self-Assessment
- Peer Review
- Manager Review
- Mutual Goal Setting

## Answer 26

- The American Nurses Association defines peer review as:  
*“A process by which professionals from common practice areas systematically assess, monitor, make judgments, and provide feedback to peers by comparing actual practice to established standards.”*
- Self-regulation is the hallmark of any profession and supports our obligations to our patients, families, colleagues, and society.

## Question 27

What is the difference between Performance Improvement (PI), Evidence-based Practice (EBP), and Research?

## Question 28

What do Patient Satisfaction surveys measure?

## Answer 27

- **Performance Improvement:** efforts to improve workflow, processes, productivity, costs, systems and quality - Plan-Do-Check-Act (PDCA).
- **Evidence-based Practice:** helps clinicians make decisions based on best evidence, clinician's expertise, and patient's preferences and values – the Iowa Model of EBP is used to promote quality outcomes.
- **Research:** generating new knowledge through a scientific process - randomized controlled trials (RCT), focus groups, surveys.

## Answer 28

- Patients' perception of "how often" they felt they received high quality clinical and customer service. The goal is to have patients answer "always".
- Measures include nurse communication, physician communication, pain management, cleanliness and quiet, responsiveness, and discharge education.

## Question 29

What is different about Patient Satisfaction with the care experience at a Magnet Hospital?

## Question 30

What Nursing Sensitive Indicators do we measure at MGH that relate to Patient Satisfaction?

## Answer 29

- Patients in Magnet hospitals have higher overall patient satisfaction.

## Answer 30

- Patient Satisfaction Nursing Sensitive Indicators:
  - Response to patient's complaint of pain
  - Nurse courtesy and respect
  - Nurse listening
  - Nurse responsiveness

## Question 31

What are some examples of how we are trying to improve our Patient Satisfaction metrics?

## Question 32

Name one organizational characteristic measured in the NDNQI Nurse Satisfaction Survey.

## Answer 31

- Regular circulation of unit level HCAHPS results through use of Communication boards (coming soon!)
- Staff education around hourly safety rounds
- Patient white boards: introduce care team members and promote patient engagement
- Use of key words at key times to help set patient expectations
- Pain management: Pain Relief Champion program and patient education
- Patient and Family Notebook: patient engagement tool that promotes relationship-based care
- Discharge Envelope: repository for all patient education materials, including discharge instructions
- Discharge phone calls: calls made to recently discharged patients to follow up and assess their perception of their experience

## Answer 32

- RN Participation in Hospital Affairs
- Nursing Foundations for Quality of Care
- RN Manager Ability, Leadership, and Support of Nurses
- Staffing and Resource Adequacy
- Collegial RN-MD Relations

## Question 33

How does MGH perform when compared to national benchmarks on the following

### Nurse Satisfaction areas:

- RN Participation in Hospital Affairs
- Nursing Foundations for Quality of Care
- RN Manager Availability, Leadership and Support of Nurses
- Staffing and Resource Adequacy
- Collegial RN-MD Relations

## Question 34

What are some of the critical factors that contribute to the success of MGH?

## Answer 33

- RN Participation in Hospital Affairs
  - Better than
- Nursing Foundations for Quality of Care
  - Better than
- RN Manager Ability, Leadership, and Support of Nurses
  - Better than
- Staffing and Resource Adequacy
  - Better than
- Collegial RN-MD Relations
  - Better than

## Answer 34

- **Interdisciplinary teamwork** that supports **patient- and family-centered care delivery model**.
- Nurses are expected to practice with **autonomy** and control over practice.
- **Collaborative clinician-physician relationships**.
- **Compliance with documentation standards**.
- **Voice in decisions** regarding practice and quality of work-life.
- **Integration of quality initiatives** across the entire organization; strong **empirical outcomes**.
- Nurses and patients receive a high **level of support** from hospital and nursing administration

## Question 35

What is the role of the Collaborative Governance Champions in the Magnet redesignation process?

## Question 36

What is the name of the fall prevention program implemented at MGH?

## Answer 35

- Collaborative Governance Champions
  - Influence their colleagues
  - Communicate important information to their colleagues
  - Educate their colleagues

## Answer 36

- The LEAF Program - "Let's Eliminate All Falls" - is a comprehensive, evidence-based, fall-prevention program that has been rolled out on all inpatient units at MGH.

## Question 37

What is the NDNQI?

## Question 38

How do nurses participate in decision-making regarding their practice at MGH?

## Answer 37

- The National Database of Nursing Quality Indicators (NDNQI) was established by the American Nurses Association to collect data related to Nursing Sensitive Indicators (NSI) including clinical indicators (ex: hospital acquired pressure ulcers), patient satisfaction, and nurse satisfaction.

## Answer 38

- In the Department of Nursing and Patient Care Services, an interdisciplinary Collaborative Governance communication and decision-making structure was implemented in 1996 and is comprised of the following seven committees: Practice, Quality, Research, Patient Education, Ethics in Clinical Practice, Diversity, Professional Development and Staff Nurse Advisory.
- Unit-based and hospital committees including interdisciplinary committees
- Participation in staff meetings

## Question 39

What is a Nurse Practice Act?

## Question 40

What are the five rights of delegation?

## Answer 39

- Nurse Practice Acts are laws in each state that define the scope of nursing and are designed to protect public health and promote safety and public welfare. They:
  - List requirements for entry into practice
  - Define the scope of practice for nursing
  - Establish disciplinary procedures
- The Massachusetts Nurse Practice Act can be found on the MGH Magnet Portal page:
  - <http://www.mghpcs.org/magnet>

## Answer 40

- The Massachusetts Nurse Practice Act outlines the requirements for Delegation and Supervision of Selected Nursing Activities by Licensed Nurses to Unlicensed Personnel.
- Registered nurses must assess the patient's care needs prior to delegating any task and are ultimately accountable for all nursing care
- The five rights that guide your judgment and decision to delegate a task are:
  - Right task (can the task be delegated to an assistant?)
  - Right person (is the assistant competent to perform the task?)
  - Right circumstances (are there any patient- or environment-specific nuances that influence your decision to delegate?)
  - Right communication and direction (are your directions and expectations clear?)
  - Right supervision (have you made sure that the task was done correctly and according to your directions?)