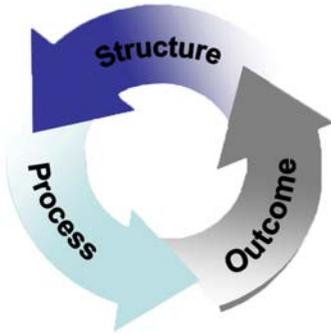




structure.
process.
outcomes.

MAGNET MONDAY

JANUARY 2, 2013



Donabedian, 1966; 1990
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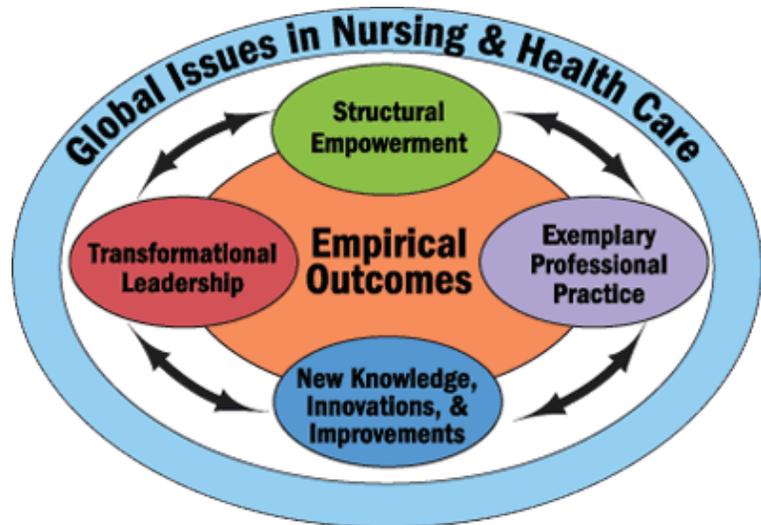
“Although structure and process create the infrastructure for excellence, the *outcomes* of that infrastructure are essential to a culture of excellence and innovation.”

— 2008 Magnet Recognition Manual

Empirical Outcomes

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

How can we know that we’ve *truly* made a difference, that we’re providing excellent patient care with the best possible outcome? We have to measure it and track what we do and the related outcomes. “Empirical” refers to a result or outcome that has been validated by data to show that real change has occurred because of a particular action.



Why are outcomes particularly important to the upcoming Magnet site visit?

While the Magnet recognition process examines structure, process and outcomes, the Magnet Commission pays particular attention to outcomes for hospitals such as Mass General that are going through the redesignation phase process. Outcomes answer the question: “Did a particular action make a difference?”

In the Magnet evidence submitted, Mass General was required to show “actual change” for 19 specific areas of Empirical Outcomes (EO). As the Magnet Model above illustrates, the Empirical Outcomes (measurable outcomes) overlaps with each of the other 4 components of the model. Measurable outcomes presented in each component demonstrate an innovative and strong Magnet environment.



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Magnet Lunch Forum 12-1pm, every Thurs., Lunder 234 (lunch provided)

An opportunity for leadership, Collaborative Governance champions and other staff to learn more about Magnet Recognition and the Magnet Monday topic-of-the-week.

Did You Know?

Ernest A. Codman, MD, an MGH physician in the early 1900s, was a pioneer in the field of quality improvement and the concept of outcomes. He proposed a uniform approach to performance improvement, suggesting that physicians should not only measure what they did in the hospital setting but should also track the results of their work over time. He presented what he called the “end result idea” as a way of determining what happened to patients for up to a year after they received care in the hospital.

What is an example of evidence that Mass General submitted to the ANCC?

In the “New Knowledge, Innovations and Improvements” section, a particular source of evidence (SOE) required an empirical outcome to be submitted along with a narrative of our structure and process. This required us to “describe and *demonstrate* an improvement in practice due to nurse involvement in technology and information system decision-making or due to nurses’ participation in architecture and space design.”

We described an improvement in the new Lunder Building related to the throughput process in the Post-Acute Care Unit (PACU). Nurses who were involved in the process change—moving a manual system to an electronic system—improved the efficiency of the transfer process from $\leq 60\%$ up to 85-95%.

Involving nurses in the improvement process adds tremendous value. They understand the workflow challenges that contribute to a given problem area. In this particular example, it is the nurse who knows the patients, their status (arrival), and can communicate their assessment and transport status. By improving this process, the nurse’s time is now spent at the patient’s bedside rather than making or answering multiple phone calls regarding transfer status. The resource nurse and staff are able to quickly determine the status of all patients and identify available staff to assist colleagues and patients, expediting the readiness of the surgical patient for transfer. The operations associate is able to answer other provider questions without interrupting the nurse caring for the patient.

Think about your own area of practice...

How would you respond to a Magnet Appraiser who asked: “Can you tell me about an improvement project on your unit/department that resulted in an actual measurable change?”

Some ideas:

- What information is posted in your area that describes a quality improvement project that shows a positive change in outcomes?
- During a staff meeting, talk with colleagues about a project that the unit has been involved in that produced a positive outcome(s).
- Can you describe how you communicate positive outcomes in your area? How do you celebrate?
- What is your process to evaluate an outcome that doesn’t meet expectations?

The next Magnet Monday will focus on “Nursing Sensitive Indicators—Clinical.”

For more information, visit mghpcs.org/PCS/Magnet



MASSACHUSETTS
GENERAL HOSPITAL