



structure.
process.
outcomes.

MAGNET MONDAY

NOVEMBER 19, 2012

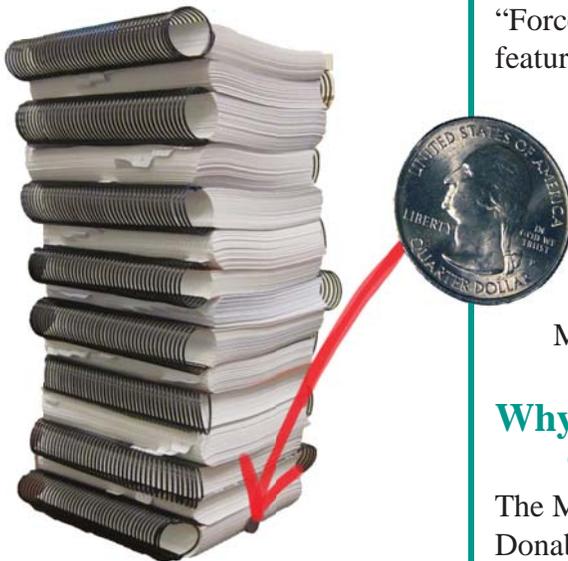
Magnet Lunch Forum, 12-1pm, every Thurs.

In response to feedback from staff, beginning November 29th, a “Magnet Lunch Forum” will be held every Thursday, from 12-1pm, in Lunder 234. (Please note: The Nov. 29th lunch will be held next door in Lunder 235.) Leadership, Collaborative Governance Champions and other staff are invited to learn more about Magnet and the *Magnet Monday* topic-of-the-week. Talk to your unit-based leadership about attending. (The Magnet Lunch Forum replaces the Magnet “Open Forum,” originally scheduled for Thursday afternoons.)

The Magnet Model

How is Magnet recognition determined?

The American Nurses Credentialing Center (ANCC) recently redesigned the Magnet Recognition Program to incorporate the original 14 forces “Forces of Magnetism” into a new Magnet Model (*pictured, next page*), featuring five inter-related components.



MGH’s Magnet evidence!

What about MGH’s Magnet evidence?

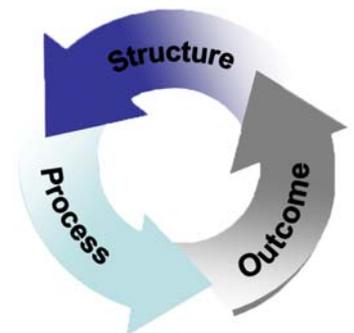
In October, MGH submitted 5,024 pages of evidence (*pictured, left*) to speak to each component in detail. It is helpful to understand how the ANCC frames its Magnet designation process, so that we can better showcase our practice when ANCC appraisers conduct their MGH site visit in early 2013.

Why do I need to think about “structure, process, outcome”?

The Magnet evidence for MGH (*pictured, left*) is organized around the Donabedian Model of STRUCTURE, PROCESS, OUTCOME. When the Magnet appraisers conduct a site visit, they’ll be looking for us to frame our responses around structure, process, outcome.

The Donabedian Model of Quality of Care is one of the most commonly used models for thinking about healthcare quality. The original model has been refined into a causal chain of the three interrelated components of:

1. **Structure**—the attributes of settings where care is delivered;
2. **Process**—whether or not good clinical practices are followed; and
3. **Outcome**—the impact of the care on health status.



Donabedian, 1966; 1990
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The Magnet Model Components

Transformational Leadership:

The organization's leadership team creates the vision for the future, and the systems and environment necessary to achieve that vision. Nurses at all levels of the organization are transformational leaders.

Structural Empowerment:

Innovative environments support strong professional practice that flourishes and where mission, vision and values come to life. Patient outcomes are improved from strong relationships and partnerships across the organization and the MGH community. Examples include Collaborative Governance and the Clinical Recognition Program.

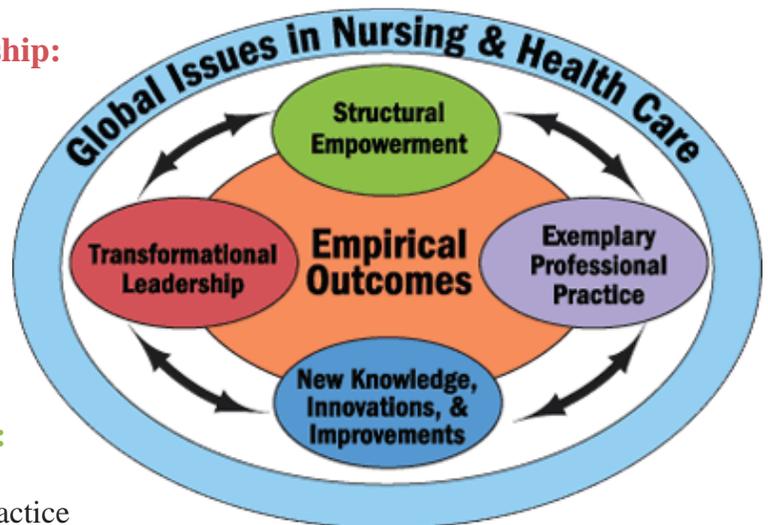
Exemplary Professional Practice: The true essence of a Magnet organization is exemplary professional nursing practice. This component is more than the establishment of strong professional practice; it is what nursing can achieve. Examples include MGH's Professional Practice Model, care delivery systems, ethical decision-making processes, and professional development opportunities.

New Knowledge, Innovation, and Improvements: Magnet organizations promote, foster and encourage new models of care, application of existing evidence, creation of new evidence, and visible contributions to the science of nursing.

Empirical Quality Outcomes

Historically, the Magnet survey focused on "process and structure." Now, the Magnet survey will focus heavily on outcomes. Outcomes are categorized in terms of clinical outcomes related to patient care; workforce outcomes; nursing-sensitive indicators (NSIs); and patient satisfaction. All outcomes are compared to benchmark data and used to describe the organizational commitment to excellence.

In the following weeks, each edition of Magnet Monday will address these components individually, focus on data and outcomes, and outline how you can prepare for our Magnet survey in early 2013. Stay tuned!



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



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