



# Magnet 101

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**2017 Re-designation  
Site Visit Preparation**

# Goals

- Articulate impact of Magnet designation
- Describe the 5 Magnet Model components
- Provide examples of the 5 components
- Review MGH Practice Model (PPM)
- Review MGH Patient Care Delivery Model (PCDM)
- Discuss expectations for upcoming Magnet site visit

# The Magnet Vision



Magnet-recognized organizations will serve as the fount of knowledge and expertise for the delivery of nursing care globally. They will be solidly grounded in core Magnet principles, flexible, and constantly striving for discovery and innovation. They will lead the reformation of health care, the discipline of nursing, and care of the patient, family, and community.

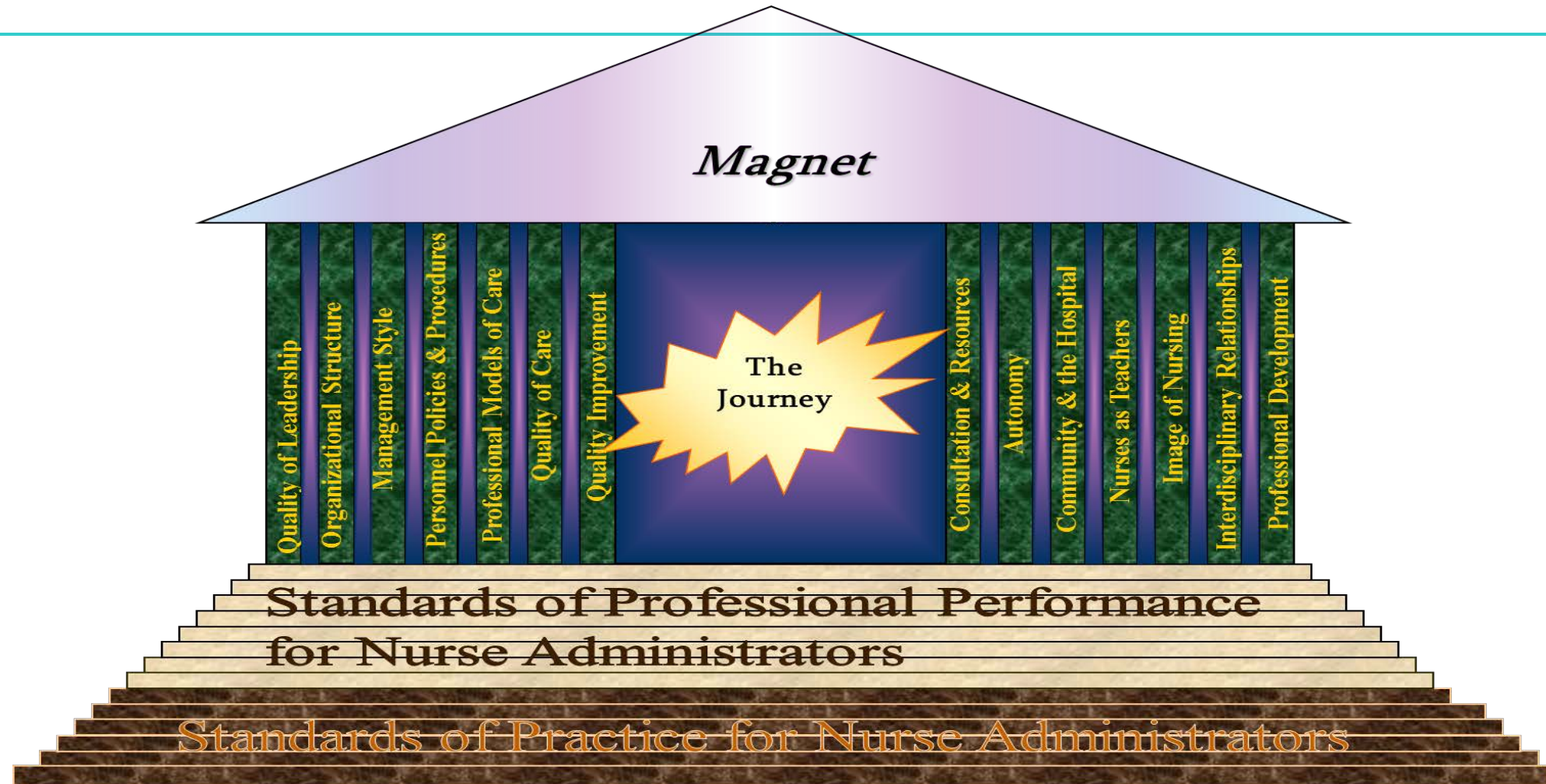
*The Commission on Magnet Recognition, 2008*

# The Magnet Vision



- Highest honor bestowed by American Nurses Credentialing Center (ANCC) for excellence in Nursing services.
- MGH: First Massachusetts hospital to achieve ANCC Magnet status (2003); redesignated in 2007 and 2013
- Submitted evidence for 3<sup>rd</sup> re-designation on June 1, 2017

# Science Behind Magnet



**Grounded in Research:** McClure, M.L., Poulin, M., Sovie, M., & Wandelt, M. (1983). *Magnet hospitals: Attraction and retention of professional nurses*. Kansas City, MO: American Nurses Association.

# Foundation for Magnet Standards

## The Steps

ANA Standards of Professional Performance and Practice for Nurse Administrators

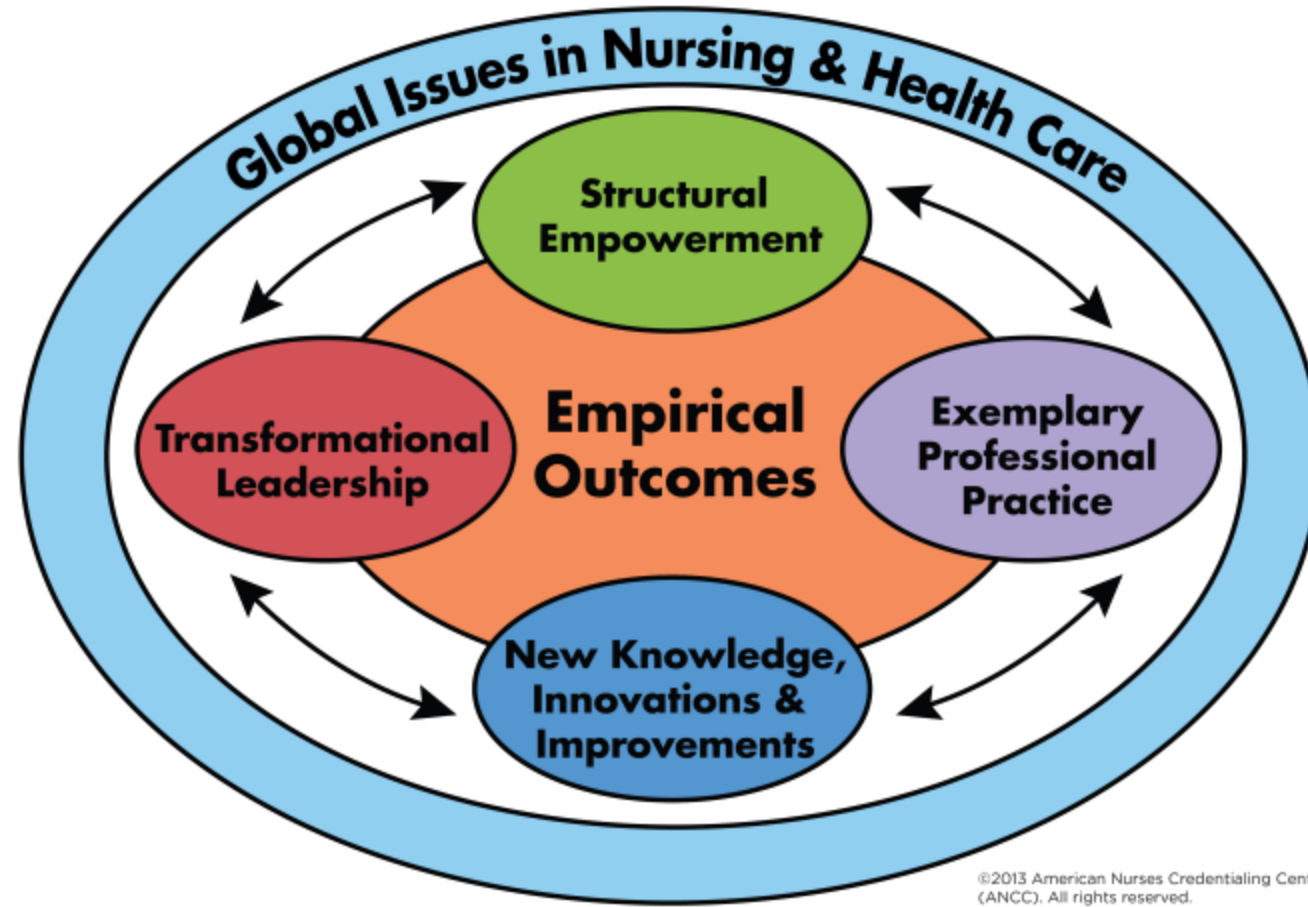
## The Columns

The 14 Forces of Magnetism:

- Quality of Leadership
- Organizational Structure
- Management Style
- Personnel Policies & Procedures
- Professional Models of Care
- Quality of Care
- Quality Improvement
- Consultation & Resources
- Autonomy
- Community and the Hospital
- Nurses as Teachers
- Image of Nursing
- Interdisciplinary Relationships
- Professional Development



# Magnet Model Components



Provides a framework to achieve excellence in practice

# Transformational Leadership

*How we lead for today and the future*

## Characteristics

- Leadership for today and the future
- Visionary/influential leaders—at all levels—create a shared vision; lead others to meet needs of the future
- Challenging existing systems and proposing strategic, creative solutions to mitigate problems
- Ability to deal with constant change; comfortable with uncertainty



## Examples at MGH

- Nursing strategic plan aligns with organizational plan and provides clear direction
- Nurses at all levels advocate for/participate in practice-related decision-making
- Philosophy of Excellence Every Day
- Ongoing mentoring and succession planning at all levels



# Structural Empowerment

*How we support practice*

## Characteristics

- Transformational leaders create foundations that bring mission, vision and values to life and encourage professional nursing practice to achieve its highest level
- Multi-directional communication among nurse leaders, bedside nurses, and interdisciplinary teams
- Strong, collaborative relationships with other disciplines internally and in the community

## Examples at MGH

- Flat organizational structure provides access to leadership by all
- Institute for Patient Care—comprised of four centers: Norman Knight Nursing Center for Clinical & Professional Development | Yvonne L. Munn Center for Nursing Research | Maxwell & Eleanor Blum Patient and Family Learning Center | Center for Innovations in Care Delivery
- Interdisciplinary Collaborative Governance program
- Outreach to community
- Clinical Recognition Program
- Robust Awards and Recognition Program



# Exemplary Professional Practice

*How we ensure excellence*

## Characteristics

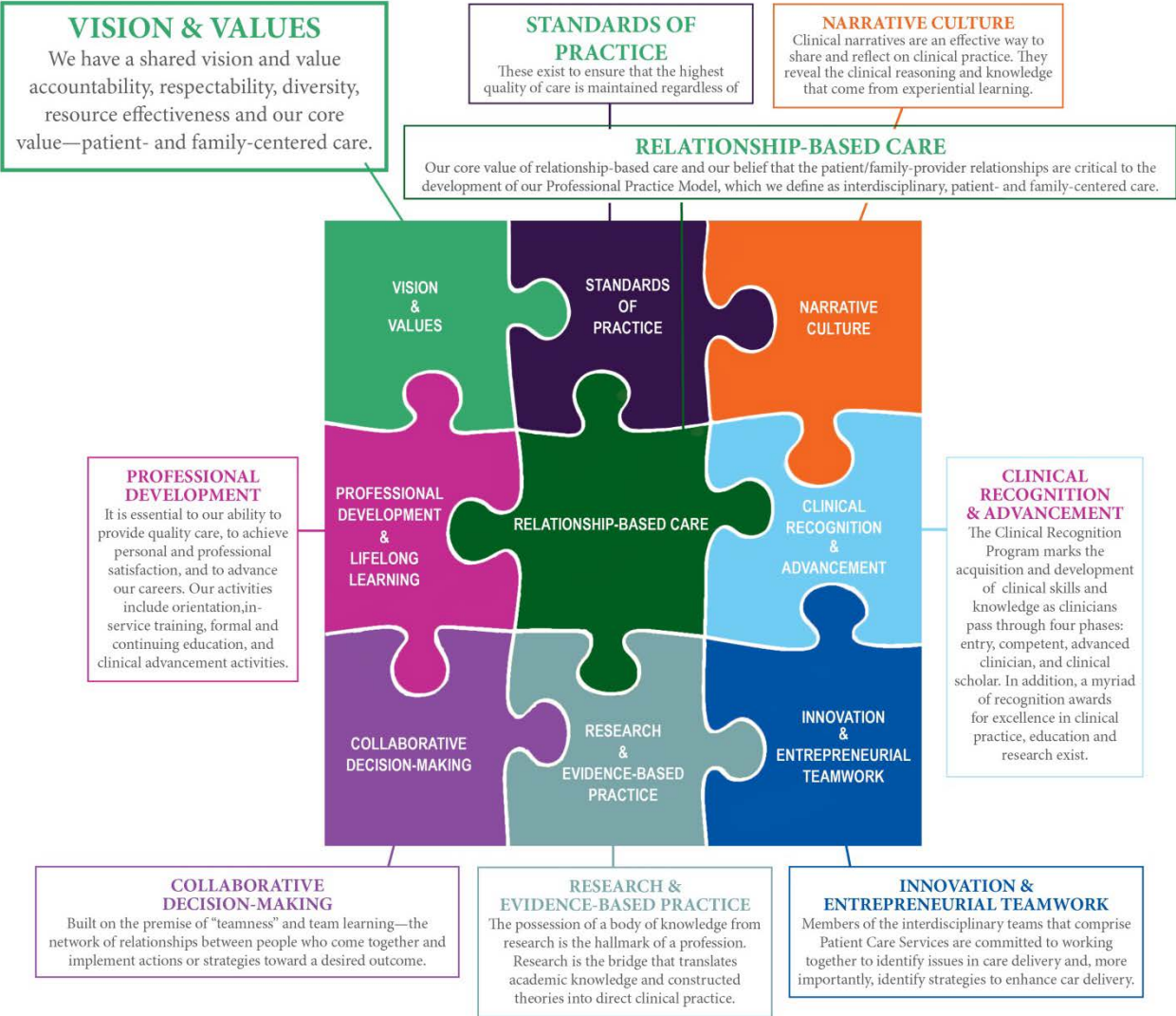
- A true, integrated understanding of the role of nursing, and all it can be, and implementation the role so that new knowledge can be used by interdisciplinary teams to provide care that yields high quality outcomes

## Examples at MGH:

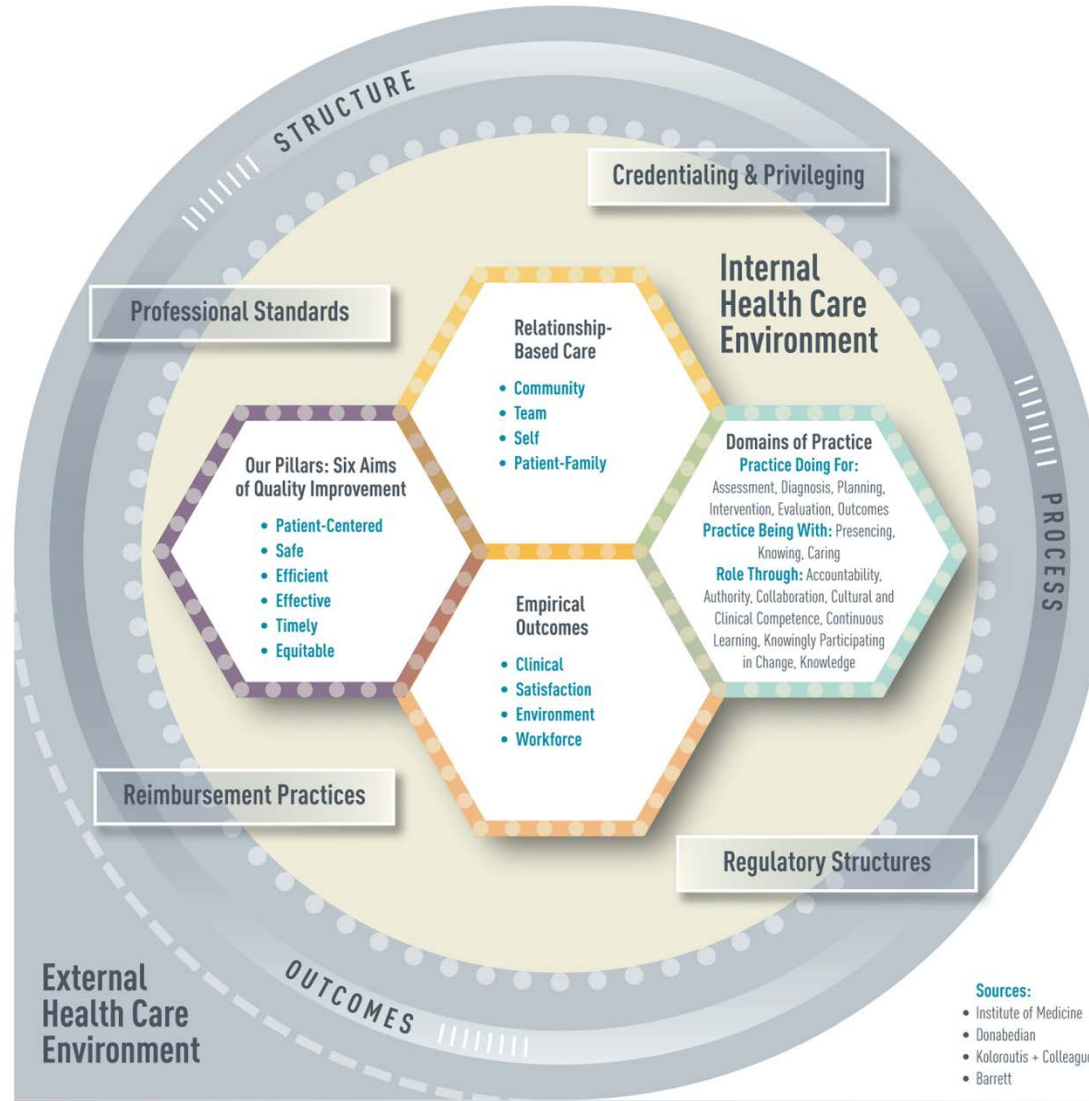
- Professional Practice Model (PPM) framework for practice
- Patient Care Delivery Model (PCDM) that is relationship-based, interdisciplinary and patient- and family-focused
- Autonomous nursing practice
- Use of internal and external experts
- Nurses from all levels involved in staffing, scheduling and budget processes
- Performance appraisal process that includes self-reflection and evaluation, as well as peer review



# MGH Professional Practice Model (PPM)



# Patient Care Delivery Model (PCDM)



## Key Components

- Relationship-based care
- Domains of practice
- IOM's six aims of quality improvement
- Empirical outcomes

# New Knowledge, Innovations and Improvements

*How we innovate and improve*

## Characteristics

- Redesign of current systems and practice by integrating new knowledge and innovative ideas that improve care and the practice environment
- New care models, evidence and standards

## Examples at MGH

- Process improvement initiatives
- Evidence-based practice initiatives
- Yvonne L. Munn Center for Nursing Research provides both financial and scholarly support for nursing and collaborative research





# Empirical Outcomes

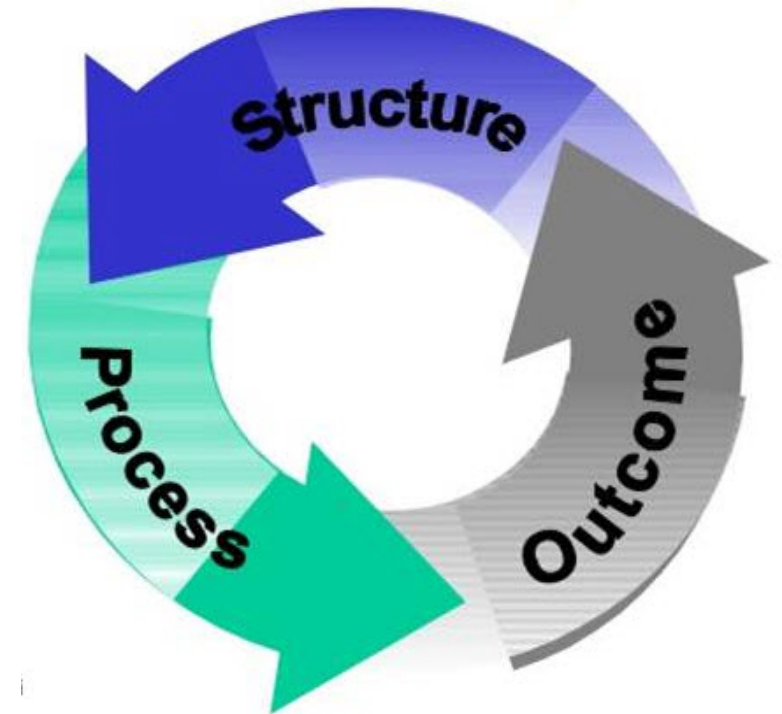
*How we know we've made a difference*

## Characteristics

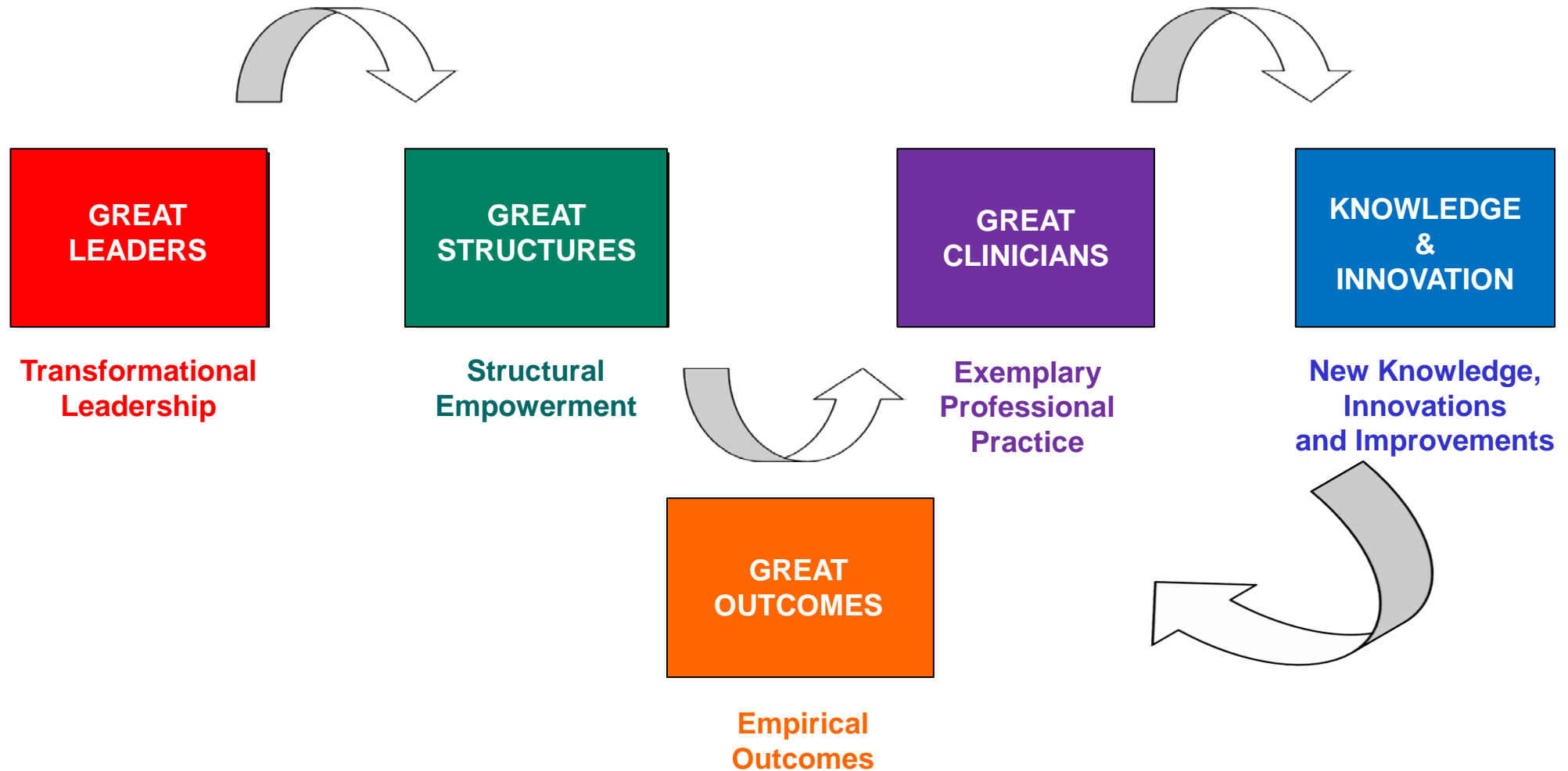
- Empirical outcomes related to nursing practice and the organization, as well as workforce and patient experience/satisfaction that demonstrate the impact made by all aspects of the Magnet model

## Examples at MGH:

- Use of the Donabedian model to plan, implement and measure the impact of change
- Nurse satisfaction
- Patient and family satisfaction
- Quality indicators



# Application of the Magnet Model





# Evidence-based impact of Magnet Designation

<b>RNs</b> <ul style="list-style-type: none"><li>• High retention/low burnout</li><li>• Lower vacancy rate</li><li>• Lower turnover</li></ul>	<b>Cost</b> <ul style="list-style-type: none"><li>• Low RN agency fees</li><li>• Fewer staff needle stick injuries</li><li>• Improved operating margin</li><li>• Improved bond rating</li><li>• Marketing ROI—publication vs. ads</li></ul>
<b>Experience</b> <ul style="list-style-type: none"><li>• Increased patient and family Satisfaction</li><li>• Increased RN satisfaction</li></ul>	<b>Quality of Care</b> <ul style="list-style-type: none"><li>• Lower mortality rates</li><li>• Fewer pressure ulcers</li><li>• Reduction in ALOS</li><li>• Fewer falls</li><li>• Higher Patient Safety</li><li>• Rankings in <i>US News and World Report</i></li></ul>

# Re-designation Process

June 2015 – June 2017

Evidence collection and writing

June 1, 2017

Submitted evidence to ANCC

November 6-9, 2017

Site Visit

TBD (after site visit)

Magnet Commission Vote

# Anticipated Activities of the Site Visit

(partial listing)

- Visit all inpatient units and ambulatory care areas (main campus and satellites)
- Document Review: personnel records—professional performance appraisals (looking for supervisor's evaluation, self-evaluation, peer review professional goals) and patient records (looking for interdisciplinary plan of care and interdisciplinary teaching)
- Meetings:
  - Clinical (staff) nurses—randomly selected for numerous breakfast, lunch & dinner meetings
  - Department of Nursing committees—including Collaborative Governance
  - Physicians, advanced practice nurses, other disciplines, case managers, support services
  - Interdisciplinary hospital committees
  - Patients, families, volunteers, & community representatives
  - Organizational & Patient Care Services leadership
    - MGH senior management & Board of Trustees
    - Quality and Safety initiatives leadership
    - Patient Care Services Executive Committee
    - Nursing Directors/Managers & CNSs/NPSs
    - Human Resources
    - Education
    - Research

# Communication and Education Plan

- **Weekly Focus Topics**
  - **Magnet Monday e-mails**—targeted info & resources
  - **Weekly forums for staff**—Thursdays, O’Keeffe Auditorium, 1:30-2:30pm (*videostreamed*)
  - **Updates at meetings**—Combined Leadership & Nurse Director
- **Collaborative Governance** committee meeting dialogues
- **SAFER Fair display** (Weds., Oct. 11, 12-2pm, Bulfinch Tent)
- **Magnet Recognition® Journey/Joint Commission Resource Guide** for all staff
- **“Magnet Roadmap”** poster for all units/areas
- **PPM and PCDM graphics** for display boards/staff areas
- **Excellence Every Day Magnet portal**  
[www.mghpcs.org/PCS/Magnet/index.asp](http://www.mghpcs.org/PCS/Magnet/index.asp)



# Weekly Focus Topics

WEEK OF	TOPIC
Sept.18	General Survey Preparation and Magnet 101
<div>5MAGNETMODELCOMPONENTS</div>	
Sept. 25	Transformational Leadership
Oct. 2	Structural Empowerment
Oct. 9	Exemplary Professional Practice
Oct. 16	New Knowledge, Innovations and Improvements
Oct. 30	Empirical Outcomes
Nov. 6	Site Visit Begins !!!!

# Role of Magnet Champions

- Collaborative Governance Champions and identified staff at off-site locations
- Role: actively engage peers in on-going development of practice  
**Discovery | Communication | Motivation**
- With local nursing leadership, leads dialogue with peers about Magnet evidence and site visit preparation



# Critical Success Factors

- **Interdisciplinary teamwork** that supports patient- and family-centered, relationship-based care
- Nurses experience **autonomy** and control over practice
- **Collaborative** clinician-physician and interdisciplinary relationships
- Meet documentation standards of **interdisciplinary plan-of-care** and **interdisciplinary patient teaching**
- **Voice in decisions** regarding practice and quality of worklife
- Integration of quality initiatives across the entire organization; **strong empirical outcomes** (baseline & outcomes data)
- Nurses and patients receive **a high level of support from hospital and nursing administration**





It's all about showcasing *your* practice...

# You've got this!