MAGNET: A NEW FOCUS ON OUTCOMES

The American Nurses Credentialing Center (ANCC) recently unveiled a new vision for Magnet recognition. The overall goal is to ensure that Magnet organizations lead the reformation of health care, discipline of nursing, and care of the patient, family and community.

To achieve this, the 14 Forces of Magnetism have been streamlined into five main components and there is greater focus on measuring outcomes.

“The ANCC is further challenging Magnet hospitals and there is no option for any facet of nursing to ‘stand on the sidelines,’” said Sabrina Downs, director of Nursing Professional Practice. “To retain our Magnet designation, we have to show how nursing is a change agent throughout the entire Medical Center.”

The new system was designed by an appraisal team with input from more than 30 groups over a three-year period. The five foundational elements include:

- **Transformational Leadership**, the vision, influence, clinical knowl-
edge and expertise to chart a new direction. The ANCC believes it is “relatively easy to lead people where they want to go; the transformational leader must lead people to where they need to be” to meet future demands.

- **Structural Empowerment**, the process that allows professional practice to flourish and where the organization’s mission comes to life. This component includes developing and empowering staff to achieve goals as well as developing strong relationships with community groups.

- **Exemplary Professional Practice**, a thorough understanding of the role of nursing as it relates to patients, families, communities, interdisciplinary teams and research. The ANCC calls this the “essence of a Magnet organization.”

- **New Knowledge, Innovation & Improvements (Research)**, the ethical and professional responsibility to contribute to patient care, the organization and the profession. This component includes models of care, applications of existing and new evidence and visible contributions to nursing science.

- **Empirical Quality Results**, a report card for determining the difference nursing makes in an organization. This is the biggest change in the new Magnet criteria and includes setting benchmarks and measuring clinical outcomes related to nursing, workforce, patient/consumer and organization.

“While all of these elements are important, the last one — empirical quality results — is the most crucial since it is 40 percent of our overall score,” said Downs. “It’s necessary for us to show how our research, quality improvements and evidence-based practice result in continuous quality improvement that makes a difference. We are doing it. We just need to showcase it.”

For more information on the new Magnet re-designation changes, visit the ANCC’s Magnet Web site.

**Magnet: Timeline**
Deadline to submit application: November 2009
Site visit: late 2010 or early 2011

**Magnet: By the Numbers**
APPLICATIONS: 150 per year
CURRENT TOTAL MAGNET DESIGNATIONS: 316
STATES WITH MAGNET ORGANIZATIONS: 43 plus D.C.
MAGNET DESIGNATIONS IN 2008:
More than 80
Approximately 5.69% of all health care organizations in the United States have achieved ANCC Magnet Recognition status.
MAGNET DESIGNATIONS IN MIDDLE TENNESSEE:
1 (VMC)
MAGNET DESIGNATIONS IN TENNESSEE:
2
DOCUMENTATION LIMIT: 15 inches in depth, excluding binding
MAGNET CULTURE ON THE FRONT LINES

The Academy Award of Nursing. That’s how Beki Hacker, R.N., B.S.N., describes the Magnet designation, and with a comparison like that, it’s easy to see why nurse managers are so committed to keeping Magnet enthusiasm elevated in their areas.

Hacker, who is patient care manager for The Vanderbilt Clinic Day Surgery Unit, Vanderbilt Outpatient Surgicenter, and Ophthalmology Surgery, has worked to improve in the “Empirical Quality Results” element by posting quality indicators in the staff lounge.

“Everyone can see if we’re meeting our targets in areas like getting the patient in the room on time, patient satisfaction and normothermia. They can easily see where we’re falling short and change the way they practice,” she said.

Hacker said nurses on her team are enthusiastic about Magnet, although they sometimes don’t connect the term with their everyday work.

“I’m always trying to get across that what we do in our everyday practice is Magnet. We don’t have to do new things to get the designation. We already are Magnet, they just don’t connect with the word,” she said.

Katie Madison, R.N., M.S.N., manager of Cool Spring Oncology Clinic, said the Magnet principles are embedded in the work culture there. Because continuing education is so encouraged, her team excels in the “Exemplary Professional Nursing Practice” element.

“Our most experienced nurse had test-taking anxiety and had never been certified because of the four-hour test,” Madison said, “but I encouraged her, and when she passed, it set a whole new standard. We now have a majority of certified nurses in the office.”

Barb Shultz, R.N., B.S.N., manager of the Pediatric Emergency Department, said the nurses she works with “are committed to the mission that Magnet brings.”

That commitment is especially evident in the “Structural Empowerment” element. Projects in which the nurses and other team members have taken the lead include creating a DVD on bedside report, revising the nursing documentation forms and planning for a new financial committee on the Unit Board.

“The staff has ownership because they know what is best for our patients. I can’t think of anything more Magnet than that,” Shultz said.

Even though it is two years away, all of the managers are looking ahead to the second recognition.

“The redesignation will be harder,” Hacker said. “We have to constantly work to improve. We can’t just sit back and say, ‘We’ve gotten it once, so we’ll get it again.’”

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Magnet: Benchmarks
(Average from all Magnet Designated Organizations)

Percent of staff nurses who hold national certifications: 27.72%
Percent of staff nurses who are B.S.N.: 46.14%
Percent of staff nurses who are M.S.N.: 3.75%
Percent of nurse leaders who hold national certification: 45.91%
Percent of nurse leaders who have an M.S.N.: 45.36%
When Vanderbilt Medical Center attempts its second Magnet recognition, nursing research will be more important than ever. The domain it falls under, “New Knowledge, Innovations and Improvement,” will increase 5 percent in scoring weight.

Nancy Wells, director of Nursing Research, estimates there are 15 to 20 nursing research or evidence-based practice projects each year, but she would like to see more.

“We have about 4,000 nurses, so as we go forward, we would like to see more focus on research,” she said.

Wells said nursing research is crucial for patient care.

“Nurses do so many things because it’s what I like to call tradition. They need to question it and determine that it actually is the best way,” she said.

Wells runs a yearlong fellowship program for nurses interested in applying evidence to practice. The fellows meet monthly to read and evaluate literature and complete project and poster presentations. This year, there are 35 nurses enrolled in the program.

Examples of recent research include a pair of nurses from Cardiac Diagnostic who noticed that some doctors used Lidocaine to pull the sheath after a catheterization procedure, while others didn’t. Their research revealed that patients who received Lidocaine reported more pain. Wells said they took their findings back to the team to discuss future practice.

A neurological nursing team realized that some of their patients experienced sympathetic storming but the nurses didn’t know a lot about the syndrome, so they prepared educational materials.

Members of the Nursing Research Committee are developing a nursing research Web site that will feature descriptions of research projects, a dictionary of research terms and a page to submit questions about practice.

Wells, along with members of the Nursing Research Committee, is also developing programs on how to evaluate a scholarly article and use Eskind Biomedical Library.

“Nurses have access to materials that can be translated into practice, making it easier,” she said.

A new product called ZYNX is also making evidence-based practice more convenient. This computer program can be accessed from all clinical workstations and provides medical and nursing care orders for a variety of conditions. If the orders are supported by research findings, nurses can click on an icon to read the articles.

“It is updated on a regular basis, so it always has the most current information,” Wells said. “The nurses absolutely love it because of all the information at their fingertips.”

Nurses who want to do research can contact Wells. They should also look at current literature for background on the topic and work to develop collaborative relationships with other people on the unit who will be involved in the study.