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The Magnet Application and Appraisal Process

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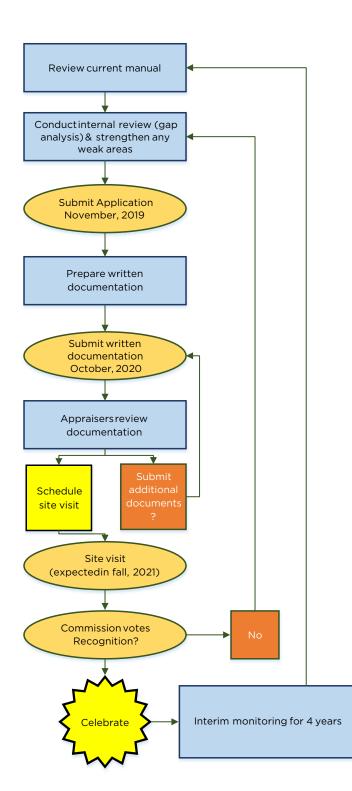
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The Magnet Application and Appraisal Process

By: Heather Warlan, PhD, RN, CPH



HISTORY OF MAGNET

In 1983, the American Academy of Nursing commissioned the Taskforce on Nursing Practice in Hospitals to identify and replicate "magnet" hospitals: organizations with success in recruiting and retaining nurses. The resulting study, Magnet Hospitals: Attraction and Retention of Professional Nurses, was published and became the impetus for the ANCC Magnet Recognition Program® (2019 Magnet® Application Manual, 2017, page 115).

THE MAGNET® MODEL

The Forces of Magnetism that were identified more than thirty years ago have remained remarkably stable-a testament to their enduring value. The Magnet Recognition Program® evolved over time in response to changes in the healthcare environment (2019 Magnet® Application Manual, 2017, page 1).

MODEL COMPONENTS	FORCES OF MAGNETISM
Transformational Leadership	>> Quality of Nursing Leadership Force #1 >> Management Style Force #3
Structural Empowerment	>> Organizational Structure Force #2 >> Personnel Policies and Programs Force #4 >> Community and the Healthcare Organization Force #10 >> Image of Nursing Force #12 >> Professional Development Force #14
Exemplary Professional Practice	>> Professional Models of Care Force #5 >> Consultation and Resources Force #8 >> Autonomy Force #9 >> Nurses as Teachers Force #11 >> Interdisciplinary Relationships Force #13
New Knowledge, Innovations, and Improvements	>> Quality Improvement Force #7
Empirical Quality Outcomes	>> Quality of Care Force #6



Heather Warlan, PhD, RN, CPHQ (certified professional in healthcare quality)

Heather Warlan is currently the Assistant Director of Magnet & Nursing Quality where she oversees both of those programs as well as several others related to nursing professional development, orientation, and students. Prior to this role Heather worked in Regulatory Affairs where she supported the organization through CDPH and Joint Commission investigations and surveys. Heather's clinical background is in critical care nursing, she worked in the CCU where she also served as a code nurse and precepted new graduate nurses and students. Heather received her masters of nursing and PhD in nursing from the University of San Diego. Hahn School of Nursing and Health Science, where is also adjunct faculty.

In 2007, with input from a broad representation of stakeholders, the Commission on Magnet Recognition developed a model for Magnet that reflected current research on organizational behavior (2019 Magnet® Application Manual, 2017, page 115).

A fundamental shift occurred with the 2008 introduction of the Magnet Model to incorporate outcomes (ANCC, 2008). Previous Magnet application manuals emphasized structure and process. Although structure and process create the infrastructure for excellence, the outcomes of that infrastructure are essential to a culture of excellence and innovation. (2019 Magnet® Application Manual, 2017, page 116).

The Magnet® Model is a graphic representation of the standards that reflect a work environment that supports excellence in nursing. The standards are grouped into 4 categories: Transformational Leadership, Structural Empowerment, Exemplary Professional Practice and New Knowledge, Innovations & Improvements. Empirical Outcomes are the result of the enculturation of the standards to benefit patients, the nursing workforce and the organization.

Structure is defined as the characteristics of the organization and the healthcare system, including leadership, availability of resources, and professional practice models.

Process is defined as the actions involving the delivery of nursing and healthcare services to patients, including practices that are safe and ethical, autonomous, and evidence-based, with efforts focused on quality improvement.

Outcomes are defined as quantitative and qualitative evidence related to the impact of structure and process on the patient, the nursing workforce, the organization, and the consumer. These outcomes are dynamic and measureable and may be reported at an individual or organizational level.

(2019 Magnet® Application Manual, 2017, page 116).

CALL TO ACTION

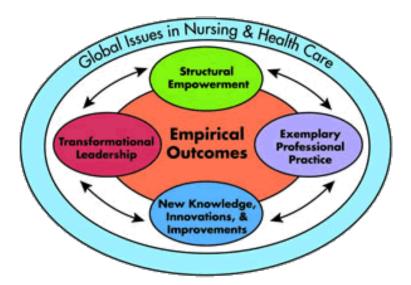
CREATE A MAGNET BOARD ON YOUR UNIT AND INCLUDE:

- Blank spot with header, "We are Magnet Because..." ask
 RNs to fill out ideas
- Quality improvement projects
- Certification rate for your unit

POST UNIT GOALS TO YOUR DES ALIGNMENT BOARD

ROUND ON UNIT, ASK THE FOLLOWING QUESTIONS:

- Tell me about an improvement project on your unit.
- What are you (your unit) working on for patient satisfaction?
- Let's walk to your quality board - what are you doing to reduce falls?
- Tell me about one of your unit or hospital nursing councils.



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