

If your organization is pursuing Magnet® recognition, the 2023 Edition of the *Magnet® Application Manual* is essential for understanding the full scope of application and documentation submission requirements. It is the only authorized publication that provides detailed information on the instructions and process for documentation submission. To obtain additional information about the Magnet Recognition Program® or to order a copy of the *2023 Magnet® Application Manual*, visit the website at https://www.nursingworld.org/organizational-programs/magnet/

Educational Requirement and Validation of Credentials

International organizations considering applying for Magnet-designation must demonstrate that nurses meet eligibility requirements for academic preparation and licensure. Information regarding international eligibility considerations is located on the International webpage on the Magnet Recognition Program website: https://www.nursingworld.org/organizational-programs/magnet/international/.

If the baccalaureate degree (or higher) **in nursing** was obtained outside the United States, the CNO, Nurse AVP/Nurse Directors and Nurse Manager, do not need to have the degree evaluated for comparability to US degree requirements.

If the CNO, Nurse AVP/Nurse Directors and Nurse Manager is educated outside the United States and **does not hold a baccalaureate (or higher) nursing degree**, they must have their credentials evaluated for comparability to US degree standards through Commission on Graduate of Foreign Nursing Schools (CGFNS).

The ANCC and CGFNS International have formed an exclusive partnership to verify and evaluate educational comparability for nurses educated outside the United States who do not hold a baccalaureate in nursing degree or higher. This evaluative information will be used to verify whether applicants meet the eligibility requirements for applicable nursing roles within the ANCC Magnet Recognition Program. To validate international credentials, applicants must present verification from CGFNS International. ANCC will not accept verification documents from other credential evaluating organizations.





SE3 and SE5 - Commitment to Professional Development

Source of Evidence Statement

International Interpretation

SE₃

Provide a narrative description of the organization's action plan for registered nurses' progress toward obtaining professional board certification, narrative must include:

- How the target was established.
- What strategies were utilized to achieve or maintain target.
- How the nurses are supported to achieve or maintain professional board certification.

SE5

Provide a narrative description of a unit's or division's action plan for registered nurses' progress toward obtaining professional board certification. The narrative must include:

- How the target was established.
- What strategies were utilized to achieve or maintain target.
- How the nurses are supported to achieve or maintain professional board certification.

Nursing professional development activities for registered nurses can be an alternative for professional board certification.

Nursing professional development is defined as: "A vital phase of lifelong learning in which nurses engage to develop and maintain competence, enhance professional nursing practice, and support achievement of career goals. Nursing professional development practice is a specialty that facilitates the lifelong learning and development activities of nurses aimed at influencing the actualization of professional growth and role competence and proficiency" (American Nurses Association and National Nursing Staff Development Organization 2010, 1).

Relevant Nursing Professional Development Activities:

- Accredited Certification (validates an individual's knowledge, skills, and abilities in a defined role and clinical area of practice, based on pre-determined standards)
- Accredited skills-based training courses (STTI, ICN, country regulatory bodies, ANCC, international nursing associations, WHO collaborating centers in nursing and midwifery)
- Accredited workplace-based courses (STTI, ICN, country regulatory bodies, ANCC, international nursing associations, WHO collaborating centers in nursing and midwifery)
- Formal university-based courses
- Individual, self-directed accredited CE activities



SE4EO and SE6EO – Continuous Professional Development

Source of Evidence Statement

International Interpretation

SE4EO

Provide graphed data (displayed as a percentage) of baseline data, plus two years of data, demonstrating nursing has met or exceeded a targeted goal at the organizational level, for improvement in professional board certification.

Note:

- There must be an increase in percentage of nurses certified (only one professional board certification can be counted for each eligible nurse).
- Present data using the required Professional Board Certification Data Display Requirements.

SE6EO

Provide graphed data (displayed as a percentage) of baseline data, plus two years of data, demonstrating nursing has met or exceeded a targeted goal(s) at the unit or division level, for improvement in professional nursing certification.

Note:

- There must be an increase in percentage of nurses certified (only one professional board certification can be counted for each eligible nurse).
- Present data using the required Professional Board Certification Data Display Requirements.

SE4EO and SE6EO: Continuous Professional Development—Professional Board Certification Data Display Requirements

The tables and graphs in this section represent the required format for illustrating that:

- 1. The organization has met a targeted goal for improvement in professional board certification**.
- 2. Nursing has met a targeted goal for improvement in professional board certification** by unit or division.

See the 2023 Magnet® Application Manual for additional details regarding data display requirements.

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- Accredited workplace-based courses (STTI, ICN, country regulatory bodies, ANCC, international nursing associations, WHO collaborating centers in nursing and midwifery)
- Formal university-based courses, and
- Individual, self-directed accredited CE activities





EP3EO – Registered Nurse Satisfaction/Registered Nurse Engagement

Source of Evidence Statement

International Interpretation

Provide all eligible registered nurse satisfaction/registered nurse engagement data to demonstrate outperformance of the benchmark provided by the vendor's national database. Provide unit- or ambulatory care setting-level data for all settings (inpatient care, ambulatory care setting, and administrative settings) and include all registered nursing levels where collected and benchmarked by the vendor.

- Submit results of the most recent survey completed within the thirty (30) months prior to document submission.
- Provide overall registered nurse participation rate.
- Select four (4) of the seven categories and present data for each setting. The four categories selected must be consistent across the organization.
 - > Adequacy of resources and staffing
 - Autonomy
 - Fundamentals of quality nursing care
 - Interprofessional relationships (includes all disciplines)
 - Leadership access and responsiveness (includes nursing administration or chief nursing officer [CNO])
 - Professional development (education, resources, etc.)
 - RN-to-RN teamwork and collaboration
- Organizations that do not outperform on the original full registered nurse satisfaction/registered nurse engagement survey are able to submit results from a nationally benchmarked vendor pulse survey to demonstrate overall outperformance.

Note: The *original* full survey would be the most recent completed full survey within the most recent 30 months prior to documentation submission. Provide full completed survey in addition to pulse survey for evaluation.

The word "vendor" is often used when describing a company that collects data from multiple organizations and provides the external benchmarks. For Magnet purposes, the word "vendor" is the same as the phrase "externally managed database". International organizations must contribute to an externally managed database that accepts data from similar organization types.

The Magnet Recognition Program® has an established process for aligning externally managed database survey questions to the 2023 Magnet® Application Manual EP3EO Nurse Satisfaction categories. Applicant organizations must have their externally managed database liaison contact the Magnet Program Office to engage in the established process.

International organizations are required to present Registered Nurse Satisfaction/Registered Nurse Engagement using data benchmarked against other healthcare organizations nationally or an equivalent international benchmark (U.S. benchmark or other international benchmark).

Data presentation requirements:

- See the 2023 Magnet® Application Manual for all details regarding data display requirements.
- See Appendix L for more information on data requirements.



EP19EO Nurse-sensitive Clinical Quality Indicators [Inpatient]

Source of Evidence Statement

International Interpretation

Provide four (4) <u>nurse-sensitive clinical quality indicators</u> for all eligible <u>inpatient units</u>. Data provided must reflect eight of the most recent consecutive and complete quarters of inpatient, unit-level graphed data to demonstrate outperformance of the benchmark provided by the vendor's national database.

Inpatient Nurse- Sensitive Clinical Quality Indicator (NSI)	International Applicants Provide Four (4) NSIs
Falls with Injury	Required *
HAPI stages 2 and above Assaults by psychiatric	Alternative option(s) for international organizations.
patients Assaults on Nursing	Provide three (3) other
Personnel	NSIs selected by the
CAUTI	organization.
CLABSI	Requires:
CDIFF	Nationally handbrarked for at
Device-related HAPI	benchmarked [or at the highest level
MDRO Design be real instruction as to	available*]
Peripheral intravenous infiltrations (PIV)	Unit-level data
,	Narrative describing
	how the selected
	option is nurse sensitive in the
	organization

*Organizations may benchmark internally, only when a national database is not available. The established benchmark must be based on professional standards, literature review, or internal trended data, or all three. **NOTE:** Effective through 1/1/2028. The word "vendor" is often used when describing a company that collects data from multiple organizations and provides the external benchmarks. For Magnet purposes, the word "vendor" is the same as the phrase "externally managed database". International organizations must contribute to an externally managed database that accepts data from similar organization types.

See the glossary in the 2023 Magnet® Application Manual for a definition of "clinical quality indicators".

International organizations are required to present Nurse Sensitive Clinical Quality Indicators using data benchmarked against other healthcare organizations nationally or an equivalent international benchmark* (U.S. benchmark or other international benchmark).

Data presentation requirements:

- See the 2023 Magnet® Application Manual for all details regarding data display requirements.
- See Appendix L for more information on data requirements.



EP20EO Nurse-sensitive Clinical Quality Indicators – [Ambulatory setting]

Source of Evidence Statement

Provide three (3) <u>nurse-sensitive clinical quality</u> <u>indicators</u> for all eligible ambulatory care settings. Data provided must reflect the most recent eight consecutive and complete quarters of <u>ambulatory care setting</u> graphed data to demonstrate outperformance of the benchmark provided by the vendor's national database or at the highest available level.

At least two (2) of the ambulatory nurse-sensitive clinical quality indicators presented must be nationally benchmarked.

- Include narrative describing how the selected nursesensitive clinical quality indicators are nurse sensitive in the organization.
- Include narrative describing the benchmark used, including national benchmarks.

Suggested ambulatory care setting nurse-sensitive clinical indicators measures may include, but are not limited to:

- Advanced care planning
- Ambulatory surgery hospital unplanned transfer/admission
- Asthma care and follow-up
- Body mass index (BMI) screening and follow-up
- Cancer screening and follow-up
- Comprehensive diabetes care: hemoglobin A1c (HbA1c) control
- Depression screening and follow-up
- Health literacy
- Hypertension screening and follow-up
- Multi-drug resistant organism
- Patient burns
- Patient falls with injury
- Surgical errors (e.g., wrong site, wrong side, wrong patient, wrong procedure, wrong implant)

For ambulatory-only organizations:

Provide six (6) nurse-sensitive clinical quality indicators for all eligible <u>ambulatory care settings</u>. Data provided must reflect the most recent eight consecutive and complete quarters of ambulatory care setting graphed data to demonstrate outperformance of the benchmark provided by the vendor's national database or at the highest available level.

At least two of the ambulatory nurse-sensitive clinical quality indicators presented must be nationally benchmarked.

International Interpretation

The word "vendor" is often used when describing a company that collects data from multiple organizations and provides the external benchmarks. For Magnet purposes, the word "vendor" is the same as the phrase "externally managed database". International organizations must contribute to an externally managed database that accepts data from similar organization types.

Nurse-sensitive clinical quality indicators:

Indicators that are sensitive to the input of nursing care, reflecting structure, process, and outcomes (National Quality Forum [NQF], 2004). Measures that "reflect the quality of care given to patients by nurses" (American Nurses Association 2016, p. 14). Nurse-sensitive indicators (NSIs) articulate the value of nursing's contributions by measuring elements of patient care and patient outcomes that are directly affected by nursing practice. The identification and measurement of NSIs is critical in describing the contributions and value of registered nurses (RNs) in ambulatory care settings (AAACN, 2019).

International organizations are required to present Nurse Sensitive Clinical Quality Indicator using data benchmarked against other healthcare organizations nationally or an equivalent international benchmark (U.S. benchmark or other international benchmark).

Data presentation requirements:

- See the 2023 Magnet® Application Manual for all details regarding data display requirements.
- See Appendix L for more information on data requirements.





- Include narrative describing how the selected nursesensitive quality clinical indicators are nurse sensitive in the organization.
- Include narrative describing the benchmark used, including national benchmarks.

Note: This may include professional organization standard(s), literature-based, or an internal benchmark.



EP21EO Patient Experience with Nursing – [Inpatient]

Source of Evidence Statement

Provide four (4) inpatient <u>patient experience</u> category data for all eligible <u>inpatient units</u>. Provide eight quarters of inpatient, unit-level data to demonstrate outperformance of the benchmark provided by the vendor's national database.

Patient experience categories (select four of the following nine):

- a. Care coordination
- b. Careful listening
- c. Courtesy and respect
- d. Pain
- e. Patient education
- f. Patient engagement or patient-centered care
- g. Responsiveness
- h. Safety
- Service recovery

Note:

- Data must be the most recent eight consecutive and complete quarters of data available from the vendor for all eligible inpatient care units.
- Select only patient experience questions that the vendor has assigned to categories. Establish the external vendor has collaborated with the Magnet Recognition Program[®] on alignment of questions to categories.

International Interpretation

Note: International organizations refer to the 2023 Magnet® Application Manual Appendix L and the Magnet website:

International organizations are required to present Patient Experience using data benchmarked against other healthcare organizations nationally or an equivalent international benchmark (U.S. benchmark or other international benchmark).

Applicant organizations must have their externally managed database contact the Magnet program office to engage in the established process.

The word "vendor" is often used when describing a company that collects data from multiple organizations and provides the external benchmarks. For Magnet purposes, the word "vendor" is the same as the phrase "externally managed database". International organizations must contribute to an externally managed database that accepts data from similar organization types.

The Magnet Recognition Program® has an established process for aligning externally managed database survey questions to the 2023 Magnet® Application Manual EP21EO and EP22EO Patient Satisfaction categories. Applicant organizations must have their externally managed database liaison contact the Magnet Program Office to engage in the established process.

Data Presentation Requirements: See the *2023 Magnet*® *Application Manual* for all details regarding data display requirements.





EP22EO Patient Satisfaction with Nursing –[Ambulatory]

Source of Evidence Statement

Provide four (4) ambulatory care setting <u>patient</u> experience category data for all eligible areas. Provide eight quarters of <u>ambulatory care setting</u>-level data to demonstrate outperformance of the benchmark provided by the vendor's national database.

Patient experience categories (select four of the following nine):

- a. Care coordination
- b. Careful listening
- c. Courtesy and respect
- d. Pain
- e. Patient education
- f. Patient engagement or patient-centered care
- g. Responsiveness
- h. Safety
- Service recovery

Data must be included for the following ambulatory care settings:

- Emergency Department(s)
- Ambulatory Surgery Center(s)
- All areas where clinical nurses provide care

Note:

- Select only patient experience questions that the vendor has assigned to categories. Establish the external vendor has collaborated with the Magnet Recognition Program® on alignment of questions to categories.
- Data must be the most recent eight consecutive and complete quarters of data available from the vendor for all eligible ambulatory care settings.
- Ambulatory-only organizations with non-traditional reporting timeframes: please refer to Appendix D.

International Interpretation

Note: International organizations refer to the *2023 Magnet*® *Application Manual* Appendix L and the Magnet website:

International organizations are required to present Patient Experience using data benchmarked against other healthcare organizations nationally or an equivalent international benchmark (U.S. benchmark or other international benchmark).

Applicant organizations must have their externally managed database contact the Magnet program office to engage in the established process.

The word "vendor" is often used when describing a company that collects data from multiple organizations and provides the external benchmarks. For Magnet purposes, the word "vendor" is the same as the phrase "externally managed database". International organizations must contribute to an externally managed database that accepts data from similar organization types.

The Magnet Recognition Program® has an established process for aligning externally managed database survey questions to the 2023 Magnet® Application Manual EP21EO and EP22EO Patient Experience categories. Applicant organizations must have their externally managed database liaison contact the Magnet Program Office to engage in the established process.

Data Presentation Requirements: See the *2023 Magnet*® *Application Manual* for all details regarding data display requirements.

