

Presented By:

- Marie Mulligan MSN, RN, NEA-BC, CNOR Chief Nursing Officer
- Brandy Feliu BSN, RN
 Magnet® Program Director
- Judith Moran-Peters DNSc, RN, NE-BC, RN-BC Coordinator-Nursing Research and Professional Development

John T. Mather Memorial Hospital:

The Magnet® Vision:

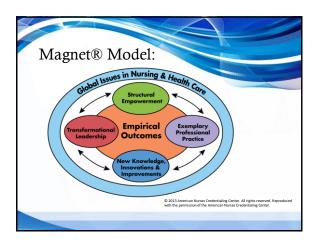
Magnet® organizations...

"Serve as the fount of knowledge and expertise for the delivery of nursing care globally."

"Solidly grounded in core Magnet® principles, flexible and constantly striving for discovery and innovation."

"Lead the reformation of healthcare; the discipline of nursing; and care of the patient, family and community."

The Commission on Magnet® Recognition (2014 Magnet® Application Manual)



Magnet® Model Component:

New Knowledge, Innovations and Improvements (NK)

- NK Magnet® Component has 6 Standards in 3 Categories: Research, Evidence-Based Practice and Innovation.
- 4 (66%) NK Standards require Empirical Outcomes (EO).

NK Includes the "Forces of Magnetism":

6 Quality of Care (Research/EBP, Ethics, and Patient Safety).

#7 Quality Improvement (Quality Infrastructure).

NK Component: 8 Key Constructs...

Magnet®-recognized Organizations:

- 1. Conscientiously integrates EBP and Research into clinical and operational processes.
- Educates nurses about EBP and Research, enabling them to appropriately explore the safest and best practices for their patients and practice environment to solve problems and generate new knowledge.
- 3. Published Research is systematically evaluated and used.

NK Component: 8 Key Constructs...

Magnet® -recognized Organizations:

- 4. Nurses serve on the board (ie., IRB) that reviews proposals for Research.
- Knowledge gained through Research is disseminated to the community of nurses.
- 6. Have established evolving programs related to EBP and Research.

NK Component: 8 Key Constructs...

Magnet®-recognized Organizations:

- Infrastructures and resources are in place to support the advancement of EBP and Research in all clinical settings.
- Targets for research productivity are set with participation and leadership from nurses in a multitude of research activities within the framework of the practice setting.

(2014 Magnet® Application Manual, pp. 55)

		- -		_
ш	11	١,	\ \ \ /	- 1
	ľ	,	vv	- 1

 How do Magnet® -recognized organizations operationalize and integrate the 6 NK Standards and the 8 NK Key Constructs into the culture of Nursing practice environment(s)?

Evidence shows the following:

- 1. Barriers to Research are identified and overcome.
- 2. Essential elements are present.

(Ingersall etal., 2010; Barrett, 2010 & Black, 2015)

Barriers to Research:

• Over 25 years of extensive research identifying Barriers and Essential Elements for Nursing Research.

Barriers to Research Utilization Scale. (Funk, Champagne, Wiese & Tornquist, 1991)

Most Common Barriers:

- 1. Lack of strong, visionary nursing leadership.
- Lack of infrastructure (structures and processes to support and advance the Nursing Research agenda).

Growth of Centers for Nursing Research and EBP:

• New Magnet® Model (2007):

Became the turning point that accelerated the creation of "Research Centers" to promote Nursing Research and EBP initiatives.

These "Centers", some virtual and some real, have different titles, but...their <u>Ultimate Goal</u> is the same:

to conduct scholarly activities (Research and EBP) that improve the quality of nursing practice and patient care outcomes.

"Centers" for Nursing Research and EBP:

- 1. Ignite and Maintain a "Spirit of Scientific Inquiry" among nurses.
- 2. Identify "Opportunities for Improvement" (clinical practice, management and education).
- Challenge the "status quo"....based on application of evidence (scientific findings/knowledge in professional literature) and innovative nursing practices.
- Develop an empirical basis by which to measure the extent of the practice change achieved by nursing interventions.
- Demonstrate, disseminate and celebrate the high quality nursing care and patient care outcomes achieved in their organizations.

Identity of "Nursing Research Centers" @ Magnet®-Recognized Organizations:

Center for Nursing Research and Quality Outcomes

Department of Nursing Practice, Education and Research

Center for Nursing Innovation and Quality Outcomes

Center of Nursing Excellence

Nursing Institute for Knowledge Translation and Innovation

Characteristics of "Nursing Research Centers" In Magnet®-recognized Organizations:

- Visionary
- · Constantly Evolving
- Comprehensive/ Inclusive in Nature
- · Outcomes-driven
- Empirically-grounded
- Innovative (Novel/Unique)
- Creative
- · Global/Diverse
- · Interdisciplinary

Visionary Nurse Leader:

- Cornerstone of Magnet®-recognized organizations.
- Impetus behind the creation of "Centers for Nursing Research".
- Champion of the "Spirit of Scientific Inquiry" that characterizes Magnet® nurses.

Marie Mulligan MSN, RN, NEA-BC, CNOR Chief Nursing Officer

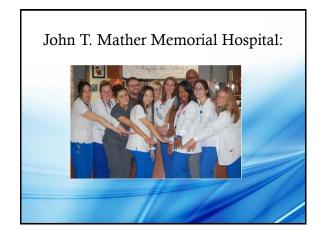
The Magnet® Journey and Building the Foundation for Nursing Research at John T. Mather Memorial Hospital

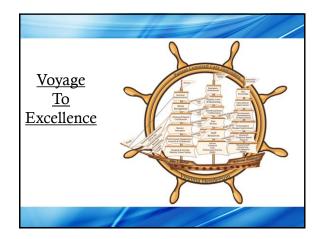
Setting:

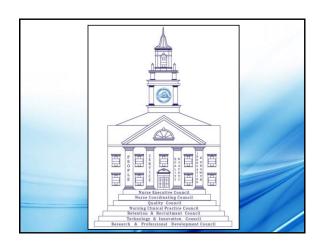
John T. Mather Memorial Hospital...

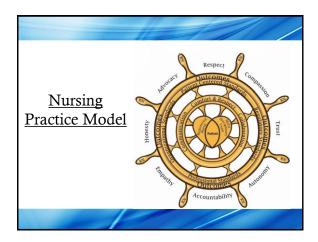
- 248-beds, Urban Setting
- Community-Teaching Hospital (2014)
- Founded in 1929 (85 years)
- · Not-for-Profit
- Located in Port Jefferson on Long Island in New York State
- Clinical site for 15 Nursing Programs
- Centers of Excellence (Stroke, Breast & Bariatric Surgery)
- 4 Star Rating from CMS (HCAHPS)....one of only two hospitals among the 22 hospitals on Long Island, N.Y.
- Magnet®-designated in 2013

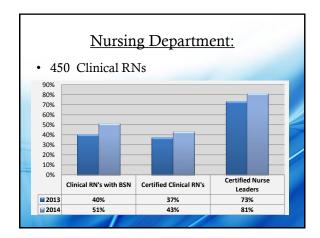
_				
_				
_				
_				
_				
_				
_				
_				
_				
_				
_				
_				
_				
_	 	 	 	

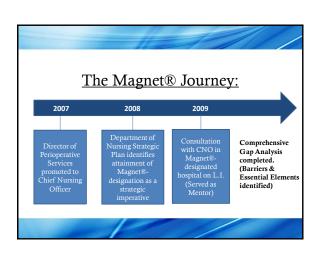












Barriers To Nursing Research Identified and Overcome:

Barriers identified:

- 1. Lack of Knowledge (Education)
- 2. Interest/ "Buy In" (Motivation)
- 3. Finance/Budget
- 4. Recruitment of Talent
- 5. "Creating and Sustaining the Dream"
- 6. Time Management
- 7. Keeping the Journey "On Track"

The Magnet® Journey:

- 2010-2013 Magnet® Infrastructure...
- Essential Elements:

Magnet® Program Director (full time) Statistician (part time) Nurse Researcher (per diem) Magnet® Motivators (Clinical RNs)

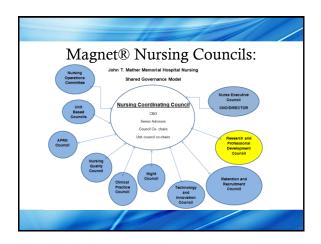
2012: Brandy Feliu BSN, RN, Clinical Educator, takes a lead role in writing Magnet® documents.

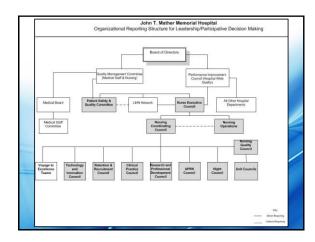
The Magnet® Journey:

April 2013: Magnet® Site Visit

June 2013 Magnet®-designation granted

 Marie Mulligan MSN, RN, NEA-BC, CNOR, CNO recognized as an exemplar in Transformational Leadership for visibility and accessibility to nursing staff.







Magnet® Program Director:

- Many organizations seeking Magnet® designation create a position and hire a Magnet® Program Director (MPD).
- Other organizations assign MPD functions with another job description, such as:
 - ⇒ MPD and V.P. for Nursing Professional Development and/or Nursing Quality

No matter the scope of the MPD role... to be successful certain professional attributes, responsibilities and requirements must be present. (\underline{NOTE} : Research on the role of the Magnet® Program Director has not been conducted)

(ANCC, 2011)

Self-Directed

Diplomatic Politically Savvy

Self-Confident

Magnet® Program Director:

Characteristics/Attributes:

- Organized
- Detailed-Oriented
- Able to Multi-Task
- Energetic
- Enthusiastic

(ANCC, 2011)

Magnet® Program Director:

• Skills Set:

Project Management Quality/Performance Improvement Education and Curriculum Development Research Development and Implementation Verbal, Written and I.T. Skills Public Speaking and Persuasion Conflict Management Team Facilitation (ANCC, 2011)

Magnet® Program Director:

- Facilitate all aspects of the Magnet® application and submission process.
- Create periodic Magnet® Journey status reports and present at various meetings in a variety of settings to a variety of attendees.
- Review and interpret Magnet® Program components and communicate these findings to team members.
- Facilitate an interdisciplinary approach to problem-resolution and communication to promote the delivery of high quality healthcare.
- Maintain a spirit of inquiry utilizing EBP findings and research methodologies to improve care delivery.

Magnet® Program Director:

- Understand and support nursing shared governance and decision making.
- Understand and articulate the process of operational and capital **budget** allocations.
- Understand **nursing-sensitive quality indicators** and participate in PI Council.
- Assist and support nursing leadership in creating and sustaining a **culture of nursing excellence**.
- Role model personal and professional growth by continuing your education and obtaining professional certification in an area of specialization.

Autonomy, Responsibility Accountability and Authority:

Magnet® Program Director ...

- · Reports directly to the CNO
- Clear delineation of responsibilities and scope of autonomy
- Clear, measurable accountability milestones and time lines
- Authority to make process decisions
- Member of Nurse Executive Council/Leadership Team
- Authority over team for processes (and outcomes)

(ANCC, 2011)

_				
-				
-				
_				
-				
_				
-				
_				
_				
_				
-				
_				
_				
_				
-				
-				
_				

Judith Ann Moran Peters DNSc, RN, NE-BC, RN-BC Coordinator-Nursing Research and Professional Development

Creating The Nursing Institute for Knowledge Translation and Innovation

Coordinator of Nursing Research/Professional Development:

 Judith Moran-Peters DNSc, RN, NE-BC, RN-BC BSN D'Youville College (Buffalo, N.Y.)
 MSN Boston College (Boston, MA.)
 DNSc University of California (San Francisco, CA.)

43 years of professional experience in a wide range of clinical, teaching and leadership roles.

12 years leadership experience in L. I. Hospital designated Magnet® three consecutive times (Coordinated NK Component of Magnet® documents)

Establishing the Role...

- Role created in May 2014.
- Started in July 2014.
- Part time (0.6)
- Focus on operationalizing Magnet® Component: New Knowledge, Innovations and Improvements (NK).
 - 6 Standards (Research, EBP and Innovation)
 - 8 Components

Conducted Needs Assessment.

Identified Key Responsibilities of Role.

Coordinator of Nursing Research/Professional Development:

Key Responsibilities:

- Advocate
- · Teacher/Coach
- Mentor
- Consultant
- · Researcher

Key Responsibilities:

Advocate:

- 1. Enthusiastic and verbal supporter of nursing research and EBP.
- 2. Builds confidence and competence in nurses.
- 3. Supports the meaning and importance of the Magnet® Recognition Program.

Key Responsibilities:

Teacher/Coach:

- Teaches nurses HOW to evaluate
 current nursing practice based on evidence.
 (ie.,professional literature, empirical data)
- 2. Educates nurses about NR/EBP.
- 3. Coaches nurses engaged in all phases of nursing research and EBP.
- 4. Provides editorial assistance.

-			
•			
•			
•			
•			
•			
•			
•			

TZ	Resp	1	-:1:4	Li
KEI	/ Kesn	OHSII)1111	nes:
,	TEED	CILCI		

Mentor:

- Teams with nurses to support and guide scientific inquiry, research and EBP activities.
- 2. Provides educational opportunities and resources for nurses.
- 3. Includes nurses in learning activities.

Key Responsibilities:

Consultant:

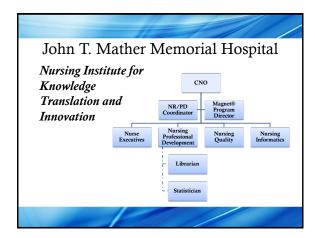
- 1. Serves on nursing, as well as, interdisciplinary councils, committees and task forces to advance the nursing research/EBP agenda.
- 2. Participates in community health activities to educate the public about nursing research and EBP aimed at wellness promotion, etc.
- 3. Meets with CNO and Magnet® Program
 Director to assess compliance with Magnet® standards.

Key Responsibilities:

Researcher:

- 1.Collaborates with nurses in conducting IRB-approved nursing research as Principal Investigator or Co-Investigator.
- 2. Maintains own body of work as Nurse researcher and scholar.

1	5



Key Terms Defined:

- **Knowledge Translation...** is a "process of moving what was learned through research into actual application of such knowledge in a variety of practice settings and circumstances." (Sudsawad, 2005, pp. 5)
- Over 30 Planned Action (Knowledge Translation) Theories and
- Innovation... "a novel set of behaviors, routines and ways of working that are directed at improving health outcomes, administrative efficiency, cost effectiveness or user's experience and are implemented through planned change." (Greenhalgh RG, 2004 in 2014 Magnet® Application Manual, pp. 68)

Nursing Institute for Knowledge Translation and Innovation:

Essential Elements:

Primary:

- Visionary (Authentic) Leadership:
 - CNO and Nurse Leadership Team
- 2. Support from CEO and Board of Directors
- 3. Budget (Financing)
- 4. Mission/Values/Purpose (Strategic Plan)
- 5. Table of Organization
- 6. Metrics/Goals
- 7. Internal Experts (Faculty/Mentors)
- 8. Educational Classes
- 9. Educational Space/Facility
- 10. Nursing Research Council

Nursing Institute for Knowledge Translation and Innovation:

Essential Elements:

Secondary/Support:

- Institutional Review Board
- 2. IRB Membership (RNs)
- 3. Librarian.
- 4 Statistician
- 5. Grant Writer.
- 6. Secretarial Support.
- 7. Editorial Support.
- ۷s)
- $10. \ A cademic \ Research \ Partnerships.$
- 11. Newsletters/Annual Report.
- 12. Nursing Research Guide (Intranet).
- 13. Scholar's Lecture Series.
- 14. Fellowship Program.

8. Graphic Designer.9. External Experts.

(Ingersoll, 201<u>1</u>)

Achievements:

- Advanced the "Spirit of Scientific Inquiry" among nurses at all levels and in all clinical specialties.
- Increased number of IRB-approved Nursing Research Studies and EBP Projects completed and presented at local, regional and national conferences.
- 3 abstracts accepted for podium presentations at the 2015 ANCC National Magnet® Conference in Atlanta, Georgia.
- Improved attendance at Magnet® Nursing Councils (Nursing Research and Professional Development).

Reflection on Nursing: Virginia Henderson (1897-1996) 20th Century Florence Nightingale "Nurse(s) should have knowledge to practice individualized human care and should be a scientific problem solver." (Nursing Component of Nursing Need Theory, 1978)

References:

- 2014 Magnet® Application Manual. American Nurses' Credentialing Center (ANCC), Silver Spring, Maryland.
- Atkinson M, Turkel M & Cashy J. "Overcoming Barriers to Research in a Magnet® Community Hospital." Journal of Nursing Care Quality, December 2008, 23 (4), pp. 362-368.

 Albert, NM & Siedlecki, SL. "Developing and Implementing a Nursing Research Team in a Clinical Setting." The Journal of Nursing Administration, February 2008, 38 (2), pp.90-96.
- Barrett R. "Strategies for Promoting the Scientific Integrity of Nursing Research in Clinical Settings." <u>Journal For Nurses In Staff Development</u>, September-October 2010, 26 950, pp. 200-205.
- Black AT, etal. "Promoting Evidence-based Practice Through a Research Training Program for Point-of-Care Clinicians." The Journal of Nursing Administration, January 2015, 45 (1), pp. 14-20.
- Estabrook CA, etal. "A Guide To Knowledge Translation Theory." Journal of Continuing Education in the Health Professions, Winter 2006, 6 (1), pp. 25-36

References:

- Funk S, Champagne M, Wiese R & Tornquist E. "BARRIERS: The Barriers to Research Utilization Scale." <u>Applied Nursing Research</u>, 1991, 4 (1), pp. 39-45.
- Funk S, Champagne M, Wiese R & Tornquist E. "Barriers to Using Research Findings In Practice: The Clinician's Perspective." <u>Applied Nursing Research</u>, 1991, 4 (2), pp. 90-95.
- Greenhalgh RG, Macfarlane F, Bates P, & Kyriakidou O. "Diffusion Of Innovations In Service Organizations. Systematic Review and Recommendations." <u>Milbank Quarterly</u>, 2004, 82, pp. 581-629.
- Henderson V. Principles and Practice of Nursing. MacMillian Pub. Co. $6^{\rm th}$ Edition, January 1978.
- Ingersoll, GL etal. "Meeting Magnet® Research and Evidence-based Practice Expectations Through Hospital-Based Research Centers." Nursing Economics, July-August 2011, 28 (40), pp. 226-235.

References:

- Kelly KP, etal. "National Survey of Hospital Nursing Research, Part 2." Journal of Nursing Administration, January 2013, 43 (1), pp. 18-23.

 Magnet® Resource Toolkit, ANCC, 2010.
- Magnet® Program Director: Coordinating the Journey to Excellence, ANCC, 2011.
- McLaughlin, MK, etal. "National Survey of Hospital Nursing Research, Part 1." <u>Journal of Nursing Administration</u>, January 2013, 43 (1), pp. 10-17.

- 17.

 Phelan, CH, Schumacher, S & Roiland, R. "Building Capacity for the Conduct of Nursing Research at a Veterans Administration Hospital." The Journal of Nursing Administration, May 2015, 45 (5), pp. 270-275. Sudsawad P. "Knowledge Translation: Introduction To Models, Strategies, and Measures." The National Center On Knowledge Translation For Disability And Rehabilitation Research (KTDRR), 2005, pp. 141.

 Wilson, B etal. "Creative Approaches to Increasing Hospital-Based Nursing Research." Journal of Nursing Administration, February 2013, 43 (2), pp. 80-88.
