

## Structural Empowerment

### SE2EOa

#### **Q-Does the professional organization need to be a nursing organization?**

The clinical nurse's or clinical nurses' affiliation is not limited to nursing professional organizations but must be with a professional organization.

Collaboratives, consortiums, think-tanks, and conferences are examples that do not meet the definition of professional organization in the 2019 Magnet manual because they do not offer individual membership or set standards of practice for the profession.

#### **Q: What is the definition of affiliation? (updated June 2020)**

For Magnet purposes, affiliation does not require membership of a professional organization. Affiliation activities may involve a clinical nurse(s) reading an article or attending a conference of a professional organization that may stimulate your organization to rethink an evidence-based change in nursing practice, resulting in an improved patient outcome.

### SE2EOb

#### **Q: What is the definition of participation?**

Participation in a nursing professional organization may include membership, conference attendance, meeting attendance, etc. The clinical nurse(s) in the example must have participated in a nursing professional organization and learned of the application of nursing standards of practice resulting in an improved patient outcome.

### SE3/SE5

#### **Q: Is it okay for the target to be established outside the 48-month window? (updated September 2019)**

If an organization has established a target outside of the 48-months, there must be narrative *and* supporting evidence that shows how this goal was re-established during the 48-month timeframe.

## **SE4EO**

### **Q-What certifications are acceptable to use for Magnet designation? (updated February 2020)**

Please refer to the Magnet website for a list of National Certifications Currently accepted  
<https://www.nursingworld.org/~49346b/globalassets/organizational-programs/magnet/magnet---nationalcertificationddct-20190301.xlsx>

### **Q-Do we need to provide a certification goal for each year presented, or can we develop a goal for our organization to meet by the end of year two? (FAQ December 2016, updated February 2020)**

- You may provide a yearly goal OR a goal for improvement by the end of year two. In either case, three years' worth of graphed data must be provided.
- If you choose to develop a goal for improvement by the end of year two, you must include progression data for year one.
- You must demonstrate that nursing has met the targeted goal for improvement (or maintenance as applicable) in professional nursing certification.

### **Q-If we choose to use a maintenance goal, does it have to be the same as the current level (i.e. current level is 60%, can maintenance goal be 55%)? (updated February 2020)**

Maintenance is based on if the organization is  $\geq 51\%$ . If the current level is 60% it is acceptable to have a maintenance goal as low as 51%

### **Q: What do we do if a certification is not listed as an option in the DDCT? (updated June 2020)**

If the certification meets the criteria for inclusion of the National Certifications, it is the decision of the certifying body to submit a Credentialing Body Review Request.

- Additional information about criteria for inclusion can be downloaded from: <https://www.nursingworld.org/~48e841/globalassets/organizational-programs/magnet/criteria-inclusion---magnet-certification-list-2017.06.21.pdf>
- The Credentialing Body Review Request can be downloaded from <https://www.nursingworld.org/organizational-programs/magnet/accepted-certifications/>.

**Q-For SE4EO, what can be considered as organization level? For example, can organizational level be all clinical nurses or all nurse managers/directors or all specialty nurses?**

An organization-level group includes nurses from all departments or divisions, e.g., all nurse managers across the applicant organization both inpatient and outpatient, or all specialty nurses.

### **SE4EOa**

**Q-Are cohort groups at the organizational level an acceptable presentation for an improvement in organizational level professional nursing certification?**

An organization-level cohort is an acceptable presentation, e.g. all nurse managers across the organization.

### **SE4EOb**

**Q-Are cohort groups at the unit or division level an acceptable presentation for an improvement in unit or division level professional nursing certification?**

A unit or division level cohort is an acceptable presentation.

### **SE4EO/SE6EO**

**Is narrative required for SE4EOa and b and SE6EO? (updated February 2020)**

No, narrative is **not** required.

An explanation is required if an organization experiences a merger, acquisition or expansion occurs within the three years altering the ability to meet the established goal, the organization is allowed to reestablish a goal and show progress toward the revised goal.

**Do the three years of graphed data need to be presented as calendar years? (updated February 2020)**

No, any three completed years of graphed data are acceptable as long as the timeframes are complete.

### **SE6EO**

**Q-If we choose to use a maintenance goal, does it have to be the same as the current level (i.e. current level is 85%, can maintenance goal be 82%)? (updated February 2020)**

- Maintenance is based on if the organization is  $\geq 80\%$ . If the current level is 85% it is acceptable to have a maintenance goal as low as 80%
- You must demonstrate that nursing has met the stated goal for improvement (or maintenance if applicable) in baccalaureate or higher degree in nursing.

### **SE8EO**

**Q: Can the nursing continuing education assessment include multiple professions? (updated September 2019)**

An interprofessional needs assessment is acceptable, however, the supporting evidence must demonstrate the registered nurses are a part of the need's assessment and implementation plan. The example provided, should be specific to nursing.

### **SE9**

**Q- What New Graduate transition programs are on the list of recognized programs in the 2019 manual? (updated September 2019)**

Two national accreditation programs that meet Magnet criteria are ANCC Practice Transition Accreditation Program (PTAP) and Commission of Collegiate Nursing Education (CCNE). The ANCC PTAP program accredits RN Residency, RN Fellowship, and APRN Fellowship programs. CCNE accredits entry-to-practice nurse residency programs.

Learn more about ANCC's PTAP at: <https://www.nursingworld.org/organizational-programs/accreditation/ptap/>

Learn more about CCNE accreditation at [www.ccneaccreditation.org](http://www.ccneaccreditation.org)

**Q-Does the evidence of participation in one of the two approved transition programs need to include more than just the New Graduate transition?**

Any nurse residency or transition program can be evaluated by either ANCC or CCNE and if credentialed by either body, that certification is acceptable and fully meets SE9 (2019 Magnet Application manual).

During site visit, the appraisers will validate that principles of the six elements of transition to practice programs are evident in the organization.

**Q-If an organization obtains the RN residency program accreditation at a corporate level, would that meet the SE9 standard at the organization level? (updated September 2019)**

Since Practice Transition Accreditation Program (PTAP) and Commission on Collegiate Nursing Education (CCNE) accreditations are programmatic credentials, the entities in a System included in the accreditation are all eligible for meeting SE 9 in the 2019 Magnet® Application Manual.

The System certificate (or other documentation) needs to identify the entities within the System associated with the credential. The applicant entity must be named in the certificate to meet the requirement for SE9.

**Q-Can we use system transition to practice programs to meet the required elements for SE9b-f? (updated February 2020)**

It is acceptable to use a system-level organization transition to practice program, as long as the example provided is for an individual employed by the applicant organization, and the required elements show use by the applicant organization.

**Q-Are we able to have six pieces of evidence for SE9 since there are six elements of transition to practice? (updated February 2020)**

No, only five pieces of evidence are permitted per example. One piece of evidence may meet multiple elements.

**SE10**

**Q-I am a nurse who runs a camp for kids with medical issues, that is a part of my role and I am paid to attend (including weekends). Does this meet the intent of organizational support?**

The intent is the nurse is a volunteer, working for or on an initiative outside of their role expectations. Organizational support is related to how the organization supports the RNs who volunteer for these types of initiatives

**SE10a**

**Q-Nurses volunteer for international outreach trips on behalf of our organization. Do international trips meet the intent for this Source of Evidence? (updated September 2019)**

No. The Source of Evidence specifically references local or regional community healthcare initiative(s). Local or regional reflect *geographically* near the healthcare organization.

**SE11**

**Q. Does the example need to describe both culturally and socially sensitive care? (updated September 2019)**

No; it is acceptable to submit an example which describes culturally and/or socially sensitive care.

**SE12**

**Q- I heard that organizations cannot use the DAISY award for this example.**

The DAISY award may be used for SE12 as long as the contributions of the nurse or group of nurses addresses the strategic priorities of the organization.