

Q&A Review with Staci Tosh Magnet Program Analyst

Christine Massey MSN, RN, NPD-BC Englewood Health

Lisa Guinta MSN, RN-BC, NEA-BC Hackensack Meridian Health

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Coordination of Care
across the healthcare
spectrum:

R/T Ambulatory – can it
be physically outside of
the organization or no?

Can you clarify or give
some examples of
settings that are
acceptable?

- The ambulatory care setting maybe outside of the applicant's organization. You want to make sure that the nurses participating in the care of coordination is a part of the organization.
- Nurse from the org. works with a diabetes educator who is outside of the org.
- Inpatient PACU nurse working with a floor nurse.
- Oncology patient at home working with nurses in the hospital setting. Oncology nurse navigator in org working with MDs, pharmacy etc...



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Nursing Sensitive Quality Indicators:

Discussion related to any additional requirements and benchmarking that are needed.

- What is the process for getting permission to use something as an indicator?
 - You can call your analyst to discuss. ANCC does not approve. It is the responsibility of the org to explain the benchmark is a national benchmark or one that is the highest level of comparison.
 - You will have to describe this in your narrative and how it meets the requirements of the SOE.
 - 2023 Manual indicates that you need 3 nursing quality indicators and 2 of them have to be nationally benchmarked.



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Nursing Sensitive Quality Indicators:

Discussion related to any additional requirements and benchmarking that are needed.

Ambulatory – Can we get some examples / guidance on where or what can be used for health literacy

- Think about how nurses educate their patients – they can simplify and talk to them on a different level, so that they can comprehend what you are asking for.
- Patient with low health literacy can be associated with pain because they are not compliant with their meds or know how to take their meds. They may not have known to set up having someone to come to their house for PT, or are not scheduled to go to PT.

** If you google health care literacy – you will find different benchmarks, hypertension screening, depression screening and advanced care planning (this is end of life reach out to CMS & health care plan see what they have for advanced care planning?)

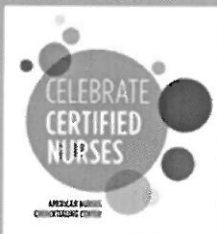
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Benchmark R/T Extravasation Rates

- You look at professional organizations, IV therapy, CMS to see if there is any benchmarks there.

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Certification



- Starting 1/1/2024 – The ANCC will longer provide the certification list. The process is still being developed as to whether you will upload the certifications into the DDCT etc.
- Once it is developed, ANCC will let us know.
- There will be a webinar that will review the process and how it is changing – R/t the 3 accrediting bodies and tips

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Certification:

Regarding the new list of acceptable certifications – Is this list fluid?

- Yes!
- What can we expect over the next few years?
 - It will be the same.
 - We will need to keep up with the 3 governing bodies.
 - We may want to check the lists every quarter to see if anything has been added or removed.

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Ambulatory Settings:

Discussion related to how to handle outpatient practices, when they do not directly report to the CNO.

Are they included?

Should they have a dotted line?

Ambulatory Care
NURSING



- This is determined by each organization
- The requirement is that the CNO is ultimately responsible for sustaining the practice (pg 7 of 2023 manual).
- The CNO is responsible for all of nursing practice regardless of the reporting structure.

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Leader Table:

When a leader leaves in the middle of a project

- There was an interim leader that was placed on the table and utilized in a Magnet Story. The individual switched roles before the project was completed.
- Can the story still be used? Does the individual have to stay in the position for the whole project? The person continued with the project but their title changed, and therefore they no longer met the criteria of the standard. Does an interim leader count?
- The example of standard (EP9) – was discussed. Be sure to write the narrative and make sure the interim leader is listed on the leader table and the leader evaluated the data with the clinical nurse. Be sure that the key elements were met while they were in the role.



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EP11 (2019 Manual): What is the expectation for the professional development plan for this SOE?

- This is part of your periodic performance review.
How your process is created is up to the organization, ANCC is just looking at this being in place.



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Staff / Patient Complaints:

What is the best way to present patient / staff complaints?

A table?

- It is not scripted. It is displayed however you want to display it.
- Have it in an organized manner. There is no best way.



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Unit level Data Crosswalk:

Are there any tips for the Unit level crosswalk?

- Be sure you are pulling your nits from the DDCT and put them in the first column (unit type) then add the unit name in the next column, Next use the vendor names for the unit (if they are different from what the hospital utilizes).
- Be sure to following the instructions on the top of the ULDC. If you have, no data for a particular unit be sure that you have a valid reason as indicated the ULDC.
- Tips: ULDC and DDCT align – any quarter with NO DATA has a valid reason.
- DDCT Webinar: Reviewing the elements of the demographic collection tool" May 25th 1pm

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Managing Supplemental Documents:

- Do you just respond to inquiry?
 - Answer to just what the appraisers were asking for. i.e. if no date or unit name on the graph – then just add this.
 - Can you rewrite the whole story if needed? If it is something you can't get for what they are ask – then yes you can rewrite the story.
- How many supplemental documents can you have to still go straight to site visit?
- It is determined by a threshold and it moves through various phases. Is it determined by score?
 - It is all determined together not just by area it is a threshold



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ADAM:
For the OO's –
Can we have
unlimited uploads?

Currently there is a
limit, which forces
the MPD to group
their policies etc..



- Yes you can have unlimited uploads.
- You only get 5 uploads in the system – so you will have to group them together.
- The ADAM system limits you and it cannot be changed – it is a limitation of the system.

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OO's:

Currently we are notified in 2 weeks that our OO's are intact. Can we receive notification that the full document is intact 2 weeks or so after.

We just want to know that the surveyors see documents for each SOE and they can open them.

We do not expect them to have read all of them at that time.

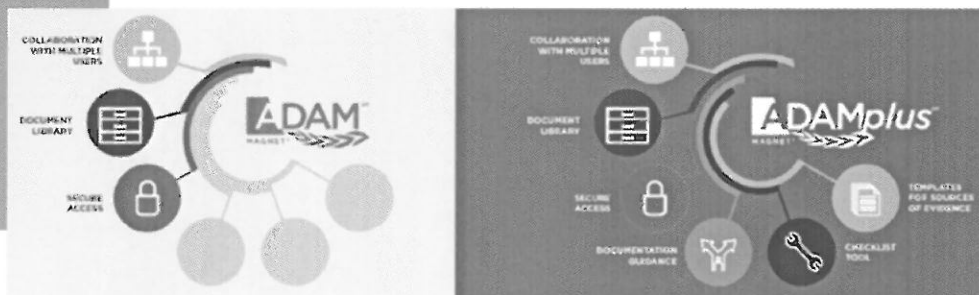
- No - it's not the current process.
 - Appraisers have up to 4 months to review.
- The analyst will try to go into the system to look at a few of the standards and attachments to make sure that they will open and then tell the appraisers that the document is in and ready to review.

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Adam vs. Adam Plus

Access once you submit for designation.

- You will no longer have access after submission until you re-designate and ask for access again, but you will start with a clean slate.
- You do not see your previous documents.



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Mentorship:

Mentor from
another area, not
same department
i.e. ED and another
nurse - ICU nurse

- First it depends on how you write it.
- Staci to follow up and make sure this is not an issue, but can also depend on what they are being mentored for.

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Thank you !



*More specific questions should be referred to your
Senior Magnet Program Analyst*

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