Like budgets and performance appraisals, you can’t avoid the word “Magnet” in today’s health care world. The American Nurses Credentialing Center (ANCC) developed the Magnet Recognition Program in 1993 to recognize health care organizations with nursing excellence. Currently, 238 health care organizations in 44 states have Magnet designation.

Your organization may be pondering whether it should “go Magnet.” Maybe you wonder if it’s worth the time and expense. Or maybe your organization has Magnet status but is wondering whether to renew. A factor in your decision should be the positive effects of Magnet status on recruitment and retention.

Magnet has become the “gold standard” for many nurses, who seek out these facilities.

“Nurses now know what Magnet means,” says Cynthia Sweeney, RN, MSN, CNOR, assistant director, conferences and consulting, for ANCC. “It helps recruit nurses, including top nurse leaders and those with a ‘can do’ attitude.”

“Potential hires say they know retention rates are higher in Magnet hospitals and nurses are treated better, so why look anywhere else?” says Mary Kroetch, CRNFA, patient care director, cardiovascular OR (CVOR) at Inova Heart & Vascular Institute in Falls Church, Va. Nurses also believe Magnet facilities have better patient outcomes, a perception confirmed in studies by researchers such as Linda Aiken, RN, PhD, FAAN, FRCH, director of the Center for Health Outcomes and Policy Research at the University of Pennsylvania.

Magnet is particularly inviting for those who are relocating. “When nurses don’t know the area, they want to work in Magnet hospitals,” says Kimberley Murray, RN, MS, CNOR, director of surgical services for St Joseph’s Hospital Health Center, Syracuse, NY.

Part of the attraction is a strong orientation program. At St Joseph’s, a full-time, OR-based staff member coordinates the orientation program, which can last as long as a year if necessary. This staff person meets regularly with preceptors and orientees and tracks progress so the orientation stays on target.

Magnet facilities promote their status by highlighting it during recruitment fairs, on websites, in advertising, and in other recruiting efforts such as the special dinner programs offered at Ochsner Medical Center in New Orleans.

Andrea Alliston, RN, BSN, CNOR, director of perioperative services, says nurses and graduating nurses are invited to the dinners to learn more about nursing at Ochsner. Participants eat much better than “cafeteria food” — shrimp cocktails and filet mignon or swordfish have been on the menu.

“All the leaders from the different nursing departments are there,” says Alliston. “We show a touching video about the storm [Hurricane Katrina], have roundtable discussions, and provide tours of the OR.”

Magnet status helps ORs attract and hold on to their nursing staff

It costs from $48,000 to $64,000 to replace an RN. Magnet can help cut down on staff turnover. For example, Murray says overall nurse turnover at St Joseph’s dropped from 19% in 2000, before Magnet status, to an average of 12%, and the vacancy rate fell from 19% in 2000 to about 5% for the first quarter of 2007.

Magnet facilities offer a variety of retention programs to meet employees’ needs,
including opportunities for professional growth. Such opportunities pay off. Kroetch says 80% of perioperative nurses are in the clinical ladder program, 86% have CNOR certification, and 60% have at least a BSN.

Empowerment in Magnet facilities equals staff participation in governance. “We have a very flat OR structure,” says Murray. It includes a manager, specialty coordinators, which are staff level positions, and the clinical staff of registered nurses and surgical technologists. Specialty coordinators make sure the clinical staff has the education and equipment they need to function at a high level in their roles.

Perioperative staff nurses and leaders at Ochsner participate in task forces charged with working on quality improvement issues such as first case starts and timing of antibiotic delivery.

Magnet facilities offer more than traditional education rewards such as tuition reimbursement. Murray says specialty coordinators work with surgeons to have quarterly education dinners off site, which promotes learning and collaboration. Funding comes from a variety of sources, including the hospital and physicians.

At Ochsner, managers are required to earn 24 hours of continuing education (CE), directors 40 hours, and staff nurses 8 hours per year through the hospital’s organizational development training center. Alliston has a complete training center in the OR. A nurse can sit down at a computer, don headphones, and with a click of the mouse, watch education videos.

Retention includes fun and recognition, says Kroetch. Members of the CVOR morale committee successfully submitted a grant application to the hospital and received money to fund activities. They celebrated Mardi Gras with the traditional beaded necklaces, have quarterly birthday celebrations, and update a bulletin board that showcases CVOR accomplishments. Surprise celebrations such as cookies in the break room are particularly popular. These simple activities have boosted morale rankings on the employee satisfaction survey.

“People celebrate special events around here. They care about each other and there is a ‘family’ or ‘team’ feeling,” says Kroetch.

Magnet facilities also don’t forget the basics. Murray takes flexible staffing to the next level. “We use a self-scheduling model and offer as many types of shifts as possible—12 hours, 7 hours, 3.5 hours—whatever it takes to help staff maintain their lifestyle and keep them satisfied at work.”

In the marketplace

Magnet has moved beyond its “nice to have” status to an essential factor for success in a crowded marketplace. Each year U.S. News & World Report publishes its annual list of “America’s Best Hospitals,” and Magnet status now contributes to the total score for quality of inpatient care. According to anecdotal reports, Magnet status may increase bond ratings for borrowing and reduce insurance and legal fees.

Sweeney has fielded calls from insurance companies. “They are hearing about Magnet and the positive outcomes of patients in those facilities,” she says. “They want to learn more about what it means to be recognized as a Magnet organization,” she says. “There are research studies that link Magnet with quality outcomes,” adds Kroetch. “It makes sense that in the future payers will be doing their homework before signing contracts.”

The public has Magnet status in sight, too. Wirthlin Worldwide, a strategic research and consulting firm, reported that 93% of the public had more confidence in hospitals meeting Magnet standards. With increasing amounts of outcomes data available to the public, participating in a program associated with good outcomes could be an important competitive tool.

Get ready

You may already be practicing the 14 forces of magnetism, so why not be recognized for it? Sweeney says that Magnet status can help promote the OR as an area of professional practice.

“The OR nurse provides primary nursing care, so our patients are directly impacted by our perceptions of our professional practice,” she says. “We also col-
laborate with nursing staff in other areas of the hospital, and surgeons, anesthesiologists, and interdisciplinary team members. Anyone of those groups, and the patient, benefit from an enhanced environment of professionalism.” In fact, Murray says, “The respect that the nursing staff receives from the medical staff has made a very positive impact. Our medical staff will say it is the reason they are at St Joseph’s.”

If support for Magnet status is lacking, Sweeney suggests starting with creating a Magnet environment in the OR.

Kroetch has parting words of advice for those considering working toward Magnet status. “The significance of Magnet is in the journey. It’s the process of improving the quality of nursing. It really promotes the value of nursing to the organization.”

**The cost of going Magnet**

Magnet status is not inexpensive. The application fee is $3,500. Appraisal fees for acute care inpatient settings range from about $9,800 to more than $47,000, depending on the number of beds. There is also a fee structure for ambulatory sites. Other costs include the documentation review fee, site visit fee, and travel costs for the appraisers. Appraisal fees will increase in 2008. Fees are listed at www.nursecredentialing.org/magnet/apply/fees.html. In addition, there is the cost for the time it takes to prepare the application and ready the facility for the appraisers.

—Cynthia Saver, RN, MS

_Cynthia Saver is a freelance writer in Columbia, Md._

For more information on the ANCC Magnet Recognition Program, visit www.nursecredentialing.org.

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**Magnet strategies for attracting and keeping nurses**

Some strategies Magnet facilities use for recruitment and retention:

- Promotion of magnet status in recruitment materials, including the facility’s website
- Thorough orientation
- Clinical ladder program
- Tuition reimbursement
- Morale committee
- Visits to area nursing schools
- Senior extern program for nursing students
- High school education observation program that allows students to view open-heart surgery
- OR fellowship programs for nurses new to the OR
- Nursing excellence awards
- Salaries above market average
- Preceptor development programs
- Encouragement of surgical technologists to become RNs.
14 forces of Magnetism

The Magnet Recognition Program is based on quality indicators and standards of nursing practice, particularly the American Nurses Association’s Scope and Standards for Nurse Administrators (2004). All Magnet facilities are appraised on these 14 factors, developed through research conducted in 1983:

- Quality of nursing leadership
- Organizational structure
- Management style
- Personnel policies and programs
- Professional models of care
- Quality of care
- Quality improvement
- Consultation and resources
- Autonomy
- Community in the hospital
- Nurses as teachers
- Image of nursing
- Collegial relationships
- Professional development.

AORN Inc is the first specialty organization to partner with the American Nurses Credentialing Center to apply the forces of magnetism to the specialty setting.

Source: ANCC Magnet Recognition Program.