

Organizational Overview

OO-1

Q-What is the definition of demographics? (updated September 2019)

For Magnet purposes, the population and RN statistical characteristics that are pertinent to the organization. These may include, but are not limited to, age, gender, and education of the population served and nursing (RN) staff.

Q: If the description of the history of the organization is greater than 300 words, what happens? (updated September 2019)

The appraisers evaluate the first 300 words to determine if the Organizational Overview item has been met. If it is not met in the first 300 words, a request for Additional Information will be generated.

OO-5

Q-Does the continuing education assessment provided need to be completed? (Updated September 2019)

Yes, the assessment must be the summary (completed, with results) of the information gathered in the most recent needs assessment.

Q-Must the continuing education assessment include a survey? Our organization uses other tools to build the assessment such as performance appraisals and quality and risk data.

The methods used for the continuing educational needs assessment is an organizational decision. The actual continuing educational needs assessment *may* include a survey or other modalities (i.e., RN self-identified needs, risk assessments, etc.).

Q: What is meant by "all RNs" and "all settings"? (updated September 2019)

A continuing educational assessment must be offered to all registered nurses, in all areas (settings) where registered nurses work in the organization. This should include the CNO, Nurse AVP/Directors, Nurse Managers, Clinical Nurses, APRNs, and any other registered nurse position.

The continuing needs assessment must demonstrate that the needs of nurses in the various settings are being addressed (i.e. inpatient, ambulatory, administration, etc.). For instance, the clinical nurses in the ICU will have very different needs assessment than ambulatory nurses in a primary care clinic

Q: What is the meaning of the word "assessment"? (updated September 2019)

An assessment is the process the organization does to identify any potential gaps in knowledge, skills, and abilities of the registered nurses in areas where they practice. The assessment can be accomplished in numerous ways, including a self-assessment of nurses in the form of a survey or other reporting. An assessment can also be achieved with input from committees and other formal structures such as the education department, risk management, infection control and nursing leadership to identify the continuing education needs for all registered nurses. The assessment must be inclusive of all levels of nursing, including the CNO, AVP/Directors and Managers, clinical nurses, and APRNs.

What levels of nursing need to be included in the education assessment? (FAQ April 2019, updated February 2020)

- All registered nurses who influence or provide care in all settings of your organization must be represented in the education assessment. Use the following table as a tool to guide inclusion of all nurses.

This **sample table is provided to demonstrate how an applicant may choose to organize their documentation for OO5 to ensure that an assessment of continuing education is being completed for “all RNs” in “all settings”**

<p>“All RNs who influence or provide care”</p> <p><i>(Note: It must be clear that the organization completes a continuing education assessment at all levels of nursing)</i></p>	<p>“All Settings where RNs practice”</p> <p><i>(Note: It must be clear that the organization completes a continuing education assessment for RNs in all settings, such as Inpatient, Ambulatory, and medical practice settings.)</i></p>
CNO	Executive setting
AVP/Directors/Nurse Managers	Leadership, Management setting
Clinical Nurses	ICU, Medical, Surgical, Ortho, Neuro, Ambulatory Medical Clinics, Interventional Radiology, setting etc.
APRNs	Inpatient and Ambulatory Care setting
Others, e.g., Centralized Function	Case Managers, Infection Control, and other setting that may have unique educational needs, etc.
<p>Each organization will identify the level of nurse and the settings according to their own organizational processes and provide the most recent continuing educational assessment</p>	

completed with the results. Evidence must support that the organization has completed a continuing education assessment on all RNs in all settings.

OO-6

Q: Are there eligibility criteria for the individual that the CNO chooses to designate to participate in the credentialing, privileging and evaluating of APRNs? (updated September 2019)

The CNO is ultimately responsible for sustaining the standards of nursing practice throughout the organization, including APRN practice, regardless of reporting relationships. The designee must be an RN and must communicate with the CNO.

Q: What is the expectation of the CNO's (or RN designee's) "participation" in the credentialing, privileging, and evaluating process of all advanced practiced registered nurses (APRNs)? Do we need to describe the CNO (or designee) in every phase of credentialing? (updated September 2019)

A description of the CNO's (or RN designee's) participation in the credentialing and evaluation of all APRNs should be a broad description of the process. It should include the CNO's (or designee's) roles in credentialing, privileging, and evaluating and how the CNO (or designee) are involved/participate in the process.

OO10

Can we include evidence-based practice (EBP) and "exempt" nursing research on our research table? (FAQ December 2016, updated February 2020)

- Provide the institutional review board (IRB) approval date and type of review (i.e. full board, expedited, and exempt) of the nursing research study, that is ongoing and/or completed within the applicant organization(s).
- Only nursing research studies are to be listed on the table. Evidence-based projects, process improvement, and quality improvement projects should not be included on the nursing research table.

- This table includes nursing research studies that are completed or ongoing within the forty-eight months before documentation submission. It is acceptable for the study to begin outside the forty-eight timeframe.

Can we include nursing research on our research table that is conducted at our organization by nonemployees (Ph.D./DNP students, university faculty)? (FAQ December 2016, updated February 2020)

- No, the nursing research listed on the research table must be conducted by employees of the organization (i.e., PI, co-PI, and/or site PI).
- As long as an employee of the organization serves in at least one of these roles, the PI, co-PI, or site PI role, a nonemployee may be involved in the nursing research.

What is meant by a completed nursing research study? (updated February 2020)

For Magnet purposes, a “completed study” refers to a study that has concluded to the point of analysis and from which initial implications of the findings have been determined and dissemination has occurred or will occur. The study must be *completed* within the 48-month timeline. The study may *start* prior to the 48-month timeline.