2023 Magnet® Application Manual Sources of Evidence – 2016 Pathway to Excellence® Manual Elements of Performance Crosswalk

(Magnet-Pathway Crosswalk)

In April 2018, the Commissions on Magnet Recognition Program® and Pathway to Excellence Program® completed an evaluation of each program's current standards to determine if any conceptual relationships existed between required elements. This evaluation resulted in ten (10) required Sources of Evidence (SOE) and 12 required Elements of Performance (EOP) that were determined, while uniquely different, to be highly correlated. The information and chart below describe each program's standard and the written documentation evidence requirements for applicant organizations pursuing either **dual designation** as Magnet-Recognized and Pathway to Excellence (PTE) or a **single designation** in one program and transitioning to the other.

Effective date of crosswalk: February 1, 2023

Current Dual designation

Organizations that are currently dually designated under the 2016 Pathway to Excellence Application Manual and 2023 Magnet Application Manual must follow each program's application and appraisal process. Applicants must address all requirements of the primary designation (designation expiring first) program's application manual. Applicants must also follow the secondary designation program's application process and the table below for required elements that may already be met through the dual designation process. This written documentation deemed status to select elements is applicable through one 4-year dual designation cycle. Subsequent dual designations require organizations to fully address all standards of one program, alternating each designation cycle. See example in Table 1.

Table 1. Example of current dual designation requirements

DUAL Designation #1	Designation expiring first: *PTE*	Re-designation: Magnet Recognition
Hospital XYZ	Address all PTE EOPs - Submit ODF	Address Magnet SOEs with exceptions per crosswalk table below - Submit DDCT
DUAL Designation #2	Designation expiring first: *Magnet*	Re-designation: PTE
Hospital ABC	Address Magnet SOEs - Submit DDCT	Address all PTE EOPs with exceptions per crosswalk table below - Submit ODF

New Dual Designation (never held simultaneous designations)

Organizations that are currently designated as Pathway or Magnet-Recognized and desire dual designation must follow each program's application and appraisal process. **The organization must be currently designated in one program at time of Written Documentation submission for the second program.** Extensions are honored as per policy however if the first program's current designation expires, it is no longer a dual designation, and the applicant must address all standards as a single applicant for that program. The organization's current program designation must address all standards per that program's application manual. The second program's designation follows its program's application process and the table below for required standards that may already be met through the dual designation process. This by-pass approach to the written documentation phase standard is applicable through one 4-year dual designation cycle. Subsequent dual designations require organizations to fully address all standards of one program, alternating each designation cycle. See example in Table 2.

Table 2. Example of new dual designation requirements

DUAL Designation #1	Documentation Deadline	Designation expiring first: *Magnet*	Then apply for: *PTE*
Hospital XYZ	Must be currently designated in one program at time of document submission	Address Magnet SOEs with exceptions per crosswalk table below - Submit DDCT	Address all PTE EOPs with exceptions per crosswalk table below - Submit ODF

DUAL Designation #2	Documentation Deadline	Designation expiring first: *PTE*	Then apply for: *Magnet*
Hospital ABC	Must be currently designated in one program at time of document submission	Address Magnet EOPs - Submit ODF	Address Magnet SOEs with exceptions per crosswalk table below - Submit DDCT

Subsequent Dual Designations

Each dually designated organization must follow the policies and requirements of each respective program. Failure to remain designated (e.g., voluntary withdrawal, failure to reapply, evidence of non-compliance) in one program does not limit the organization from continuing designation (as a single applicant) in the second program. The written documentation standards by-pass process outlined in the crosswalk table below is the single benefit to organizational applicants seeking dual designation. The other steps in the appraisal process for each program remain. Each Commission will determine designation based on the organization's proven ability to meet and sustain program requirements.

2023 Magnet Application Manual – 2016 Pathway Application Manual Crosswalk Table

Topic	Pathway 2016 EOP (Element of Performance)	EOP	Evidence Requirements	SOE	Magnet 2023 SOE (Source of Evidence)
mentoring	EOP 6.11 a. Provide a narrative written by a direct care nurse describing how he or she has been mentored in the organization. Include a description of the experience and how the mentoring experience influenced his or her professional development. AND b. Provide a narrative written by a non-direct care nurse describing how he or she has been mentored in the organization. Include a description of the experience and how the mentoring experience influenced his or her professional development.	6.11	Proof of designation meets this standard for either program	TL9	TL9 Choose two of the following (one example must be from the ambulatory care setting, if applicable): a. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for clinical nurse(s). b. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for Nurse Manager(s). c. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for Nurse AVP(s)/Nurse Director(s). d. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for APRN(s). e. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for CNOs.
succession planning	EOP 2.11 a. Describe how the organization fosters leadership succession planning. AND b. Provide a narrative written by a nurse who benefited from the leadership succession planning.	2.11 6.12	Proof of designation meets this standard for either program	TL10	TL10 Choose two of the following (one example must be from the ambulatory care setting, if applicable): a. Provide one example, with supporting evidence, of succession-planning activities for the Nurse Manager role.

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	EOP 6.12 a. Describe how the organization empowers direct care nurses in his or her role as an emerging nurse leader(s) within or outside of the organization. AND b. Provide an example of how the organization empowered a direct care nurse(s) in his or her role as an emerging nurse leader(s) within or outside of the organization.				b. Provide one example, with supporting evidence, of succession-planning activities for the Nurse AVP/Nurse Director role. c. Provide one example, with supporting evidence, of succession-planning activities for the APRN role. d. Provide one example, with supporting evidence, of succession-planning activities for the CNO role.
specialty certification	EOP 6.9 a. Describe how the organization supports direct care nurses to pursue specialty certification. AND b. Provide evidence demonstrating that nurses obtained specialty certification.	6.9	Success Pays enrollment acceptable for PTE but not Magnet. Magnet applicants *must* address SE3.	SE3	SE3 Provide a narrative description of the organization's action plan for registered nurses' progress toward obtaining professional board certification; narrative must include: • State the targeted goal. • How the target was established. • What strategies were used to achieve or maintain the target. • How the nurses are supported to achieve or maintain professional board certification.

Topic	Pathway 2016 EOP (Element of Performance)	EOP	Evidence Requirements	SOE	Magnet 2023 SOE (Source of Evidence)
transition to practice	EOP 6.3 Describe the strategy the organization has in place to transition newly graduated nurses into practice, other than orientation.	6.3	National accreditation acceptable for PTE and Magnet. If not nationally accredited program, need to address EOP 6.3 and/or SE11.	SE11	SE11 a. Provide evidence of a nationally accredited transition to practice program. OR Select three examples; for each example, include narrative description of the five domains of the transition to practice program and evidence of quality outcomes to demonstrate the effectiveness of the selected transition to practice program. b. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program for new graduate nurse(s). c. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program of a newly hired experienced nurse into the nursing practice environment. d. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program of a nurse transferring within the organization to a new nurse practice environment. e. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program of an APRN into the practice environment. f. Provide one example, with supporting evidence, that demonstrates the

Topic	Pathway 2016 EOP (Element of Performance)	EOP	Evidence Requirements	SOE	Magnet 2023 SOE (Source of Evidence)
					effectiveness of the transition to practice program of Nurse Managers into the new role.
community, population health	EOP 5.7 a. Describe how nurses' involvement in community volunteer activities is encouraged and recognized by the organization. AND b. Provide documented evidence on how nurses' involvement in community volunteer activities is encouraged and recognized by the organization. EOP 5.10 a. Describe how the organization contributes to improving population health. AND b. Provide one example of how nurses' engagement has impacted a particular population.	5.7 5.10	Proof of designation meets this standard for either program.	SE12	SE12 a. Provide one example, with supporting evidence, of the organization's support of a nurse(s) who volunteer(s) in a local or regional community healthcare initiative which aligns with Healthy People 2030 or the United Nations' Sustainable Development Goals. AND b. Provide one example, with supporting evidence, of the organization's support of a clinical nurse(s) who volunteer(s) in a population health outreach initiative, either local or global.
Interprofessional care coordination	EOP 3.10 a. Describe how interprofessional decision-making is utilized in the process to transition patients from one level of care to another. AND b. Provide one example of how the interprofessional collaboration process impacted a patient care transition.	3.10	Proof of designation meets this standard for either program.	EP6	EP6 Choose two of the following: a. Provide one example, with supporting evidence, of nurse's(s') participation in interprofessional collaborative practice to ensure coordination of care from an inpatient setting to an ambulatory care setting.

Topic	Pathway 2016 EOP (Element of Performance)	EOP	Evidence Requirements	SOE	Magnet 2023 SOE (Source of Evidence)
					b. Provide one example, with supporting evidence, of nurse's(s') participation in interprofessional collaborative practice to ensure coordination of care from an ambulatory care to an inpatient setting. c. Provide one example, with supporting evidence, of nurse's(s') participation in interprofessional collaborative practice to ensure coordination among multiple ambulatory care settings.
performance review	EOP 2.9 a. Describe how feedback from peers or direct report staff is incorporated into the performance evaluation of a nurse in a leadership role. AND b. Provide documented evidence that feedback from peers or direct report staff is incorporated into the performance evaluation of a nurse in a leadership role.	2.9	Magnet designation meets PTE EOP 2.9. Magnet applicants must address EP13.	EP13	EP13 Choose three of the following (one must be from ambulatory care setting, if applicable): a. Provide one example, with supporting evidence, of the use of periodic formal performance review that includes a self-appraisal, peer feedback process, and professional development goal(s) for a clinical nurse. b. Provide one example, with supporting evidence, of the use of periodic formal performance review that includes a self-appraisal, peer feedback process, and professional development goal(s) for a nurse manager. c. Provide one example, with supporting evidence, of the use of periodic formal performance review that includes a self-appraisal, peer feedback process, and professional development goal(s) for a nurse assistant vice president AVP)/nurse director. d. Provide one example, with supporting evidence, of the use of periodic formal

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					performance review that includes a self-appraisal, peer feedback process, and professional development goal(s) for an advanced practice registered nurse (APRN).
decision authority	EOP 1.4 a. Provide one example of a change in practice that occurred within the past 24 months that was the result of a shared governance initiative. Include with that example how that change was based on published research or evidence-based practice. AND b. Provide: why the nursing practice change was recommended, a description of the new practice, and bibliographical reference(s) in APA format for the published research finding or evidence used to make this change.	1.4	Proof of designation meets this standard for either program.	EP14	EP14 Provide one example, with supporting evidence, of clinical nurses having the autonomy to make nursing care decisions within the full scope of their nursing practice.
ethical concerns	EOP 1.6 a. Describe the interprofessional process that addresses how ethical concerns are managed within the organization. AND b. Provide one example of a specific situation when the interprofessional process addressing how ethical concerns are managed within the organization was used.	1.6	Proof of designation meets this standard for either program.	EP15	EP15 Provide one example, with supporting evidence, of nurse(s), as participant(s) of an interprofessional team, applying available resources to address ethical issues related to clinical practice.

Topic	Pathway 2016 EOP (Element of Performance)	EOP	Evidence Requirements	SOE	Magnet 2023 SOE (Source of Evidence)
EBP implementation	EOP 4.8 a. Provide one example demonstrating how published research findings or evidence-based practices were evaluated for applicability in the organization and implemented in a patient care area(s). AND b. Provide the date the findings or evidence was adopted into practice. AND c. Include bibliographical references in APA format for the published research findings or evidence-based practices used in this EOP.	4.8	Proof of designation meets this standard for either program.	NK5	NK5 Two examples are required (one must be from ambulatory care setting, if applicable). a. Provide one example, with supporting evidence, of how a clinical nurse(s) implemented an evidence-based practice that is new or a revision to existing practice within the organization. AND b. Provide one example, with supporting evidence, of how a clinical nurse(s) implemented an evidence-based practice that is new or a revision to existing practice in an ambulatory care setting within the organization.