

# Nursing Health Services Research Unit

a collaborative project of  
the University of Toronto  
Faculty of Nursing and  
McMaster University  
School of Nursing

Our mission is to develop,  
conduct and disseminate  
research that focuses on:

- design
- management
- utilization
- outcomes
- provision  
...of nursing.

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## MAGNET HOSPITALS: CHARACTERISTICS OF MAGNET HOSPITALS FACT SHEET I OF II

This fact sheet provides a review of the magnet<sup>1</sup> hospital literature for the purpose of highlighting the various characteristics that distinguish magnet from non magnet hospitals. It presents selected content from a report entitled *Nurse-Physician Relationships – Solutions and Recommendations for Change*. The full report is available on line at [www.nhsru.com](http://www.nhsru.com).

The magnet hospital concept was first introduced in 1983. The designation remains highly relevant in today's hospital environment in light of current and impending nurse shortages, and the consequent imperative for healthy workplaces for nurses (Baumann, O'Brien-Pallas, Armstrong-Stassen, Blythe, Bourbonnais, Cameron et al., 2001; CNAC, 2002).

### BACKGROUND

Magnet hospitals are organizational settings characterized by an emphasis on professional autonomy, decentralized organizational structures, participatory management, and self-governance (Upenieks, 2003a). The origins of magnet hospitals derive from a policy study commissioned by the *American Academy of Nursing* (AAN) in 1981 (McClure, Poulin, Sovie, & Wandelt, 1983).

The study was commissioned at a time of severe nursing shortages and was intended to identify the organizational characteristics that attracted and retained well-qualified nurses (Buchan, 1999), and supported professional nursing practice (Aiken, Havens, & Sloane, 2000; Upenieks, 2003b). In 1988 Kramer and Schmalenberg published ground-breaking research findings that linked magnet hospitals to "institutions of excellence" and established the concept of magnet hospitals in the literature. The ability of magnet hospitals to recruit and retain nurses even in times of acute nursing shortages has been credited to their practice environments and reputations for valuing nurses.

### CHARACTERISTICS OF MAGNET HOSPITALS

#### *American Nurses Credentialing Centre (ANCC) 14 Forces of Magnetism*

In 1994 the ANCC "Magnet Hospital Recognition Program" was established to recognize magnet institutions. Institutions may apply to earn the designation of magnet hospital through an extensive assessment process (Frazier, 2003). Information about the program is available at <http://www.nursingworld.org/ancc/magnet.html>. "Forces of Magnetism" are key elements of the "Magnet Recognition Program", and serve as the fundamental guidelines for evaluation. These key elements are essential to providing excellent care and improved outcomes (Jones-Schenk, 2001; McClure & Hinshaw, 2002).

1. Quality of nursing leadership	2. Management style
3. Organizational structure	4. Quality of care
5. Personnel policies and programs	6. Level of autonomy
7. Professional models of care	8. Consultation and resources
9. Quality assurance	10. Nurses as teachers
11. Community and the hospital	12. Nurse-physician relationships
13. Image of nursing	14. Professional development

<sup>1</sup> The concept of magnet has evolved to include various healthcare organizations, however, we have used the term magnet hospital to remain true to the original literature.

### ***Kramer and Schmalenberg Studies – The “Essentials of Magnetism”***

To link the ANCC “Forces of Magnetism” to the ability to provide high quality patient care, Kramer and Schmalenberg (2001) conducted a survey of 279 staff nurses within magnet facilities. The survey set out to isolate factors which the nurses identified as crucial to being able to provide high quality care. Eight factors of magnetism were consistently chosen by 2/3rds of the nurses. These factors were found to be directly related to nurse job satisfaction and accounted for over 80% of the variance in job satisfaction scores (Kramer & Schmalenberg., 1988b, Kramer & Hafner, 1989). These 8 factors were named “Essentials of Magnetism”:

1. Working with other nurses who are clinically competent
2. Good nurse-physician relationships and communication
3. Nurse autonomy and accountability
4. Supportive nurse manager/supervisor
5. Control over nursing practice and practice environment
6. Support for education
7. Adequate nurse staffing
8. Concern for the patient is paramount

### ***Other Characteristics of Magnet Hospitals Include:***

- A nurse executive is a formal member of the highest decision-making body in the hospital (Havens & Aiken, 1999; Upenieks, 2003c)
- Administrative structures are in place to support nurses’ decisions about patient care (Havens & Aiken, 1999; Upenieks, 2002)
- Nurse leaders are highly visible and accessible (Kramer & Schmalenberg, 1988b)
- Nurses are provided with the tools to be able to optimally perform their job – new equipment, better staffing, and more assistive help (Upenieks, 2002)
- “Favourable” nurse staffing levels - magnet hospitals consistently evidence higher nurse-to-patient ratios (Aiken, Havens, & Sloane, 2000)<sup>2</sup>
- Additionally magnet hospitals consistently demonstrate three key characteristics (Jones-Schenk, 2001; Scott, Sochalski, & Aiken 1999; Havens & Aiken, 1999):
  - i. Nurses have the status needed to influence people and to get the resources for good patient care (aka ‘professional autonomy over practice’);
  - ii. Good collaboration between nurses, physicians, and administrators is measurable;
  - iii. Established systems ensure nurse participation in policy decisions/autonomy within clinical practice.

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<sup>2</sup> For current evidence on optimal staffing levels please see the report: O’Brien-Pallas, L., Thomson, D., McGillis Hall, L., Pink, G., Kerr, M, et al. (2004). *Evidence-based standards for measuring nurse staffing and performance*. Report for the Canadian Health Services Research Foundation: Ottawa. The full report is available online at <http://www.nhsru.com/reports.html>.