

CHANGES TO THE 2014 MAGNET® APPLICATION MANUAL, DECEMBER 2014

Page 11, 3. Fees b. Appraiser Documentation Review Fee

Initial	Change
<p>Refer to the ANCC website, http://www.nursecredentialing.org/MagnetscheduleFees.aspx, for fee table. The average time for review of written documents or request for and review of additional documents is approximately 3 to 4 months. If additional documentation is requested, the organization has up to 20 business days to produce the documentation.</p>	<p>Clarification:</p> <p>Appraiser Documentation Review Fee</p> <p>Refer to the ANCC website, http://www.nursecredentialing.org/MagnetscheduleFees.aspx, for fee table. The average time for review of written documents or request for and review of additional documents is approximately 3 to 4 months. If additional documentation is requested, the organization has up to 60 business days to produce the documentation.</p>

Page 25: (first bullet)

Initial	Change
<p>Unless otherwise specified, narrative statements and exhibits should refer to data for the 30-month period before the submission of written documentation and to events/activities that were ongoing during that 30-month period.</p>	<p>The Magnet timeline for narrative statements and exhibits has been changed from 30 months to 48 months.</p> <p>The data analysis (quantitative) or findings (qualitative), including the pre data and intervention/initiative, must have occurred within the 48 months before documentation submission.</p> <ul style="list-style-type: none"> ▶ Change is effective immediately ▶ Applies to all documents submitted (Magnet-recognized organizations and initial applicants). ▶ All EOs (except those mentioned below): Pre-intervention data, intervention and post-intervention data must all occur within the 48 months. <p>Exception:</p> <ul style="list-style-type: none"> ▶ EP3EO (Nurse Satisfaction) must demonstrate the most recent nurse satisfaction survey within the previous 30 months prior to documentation submission. ▶ EP22EO (Nurse Sensitive Clinical Indicators) and EP23EO (Patient Satisfaction) must demonstrate the most recent 8 consecutive quarters of data.

Page 29, Organizational Overview

Initial	Change
<p>0019 The Organization’s policies, procedures, charters, or bylaws designating that at least one nurse must be a voting member of the governing body responsible for the protection of human research participants, and that at least one nurse votes on nursing-related protocols</p>	<p>Clarification:</p> <ul style="list-style-type: none"> ▶ Provide evidence (policy/procedure, charter OR bylaws) that validates that a nurse votes on nursing-related protocols and is a voting member of the governing body responsible for the protection of human research participants. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide a letter signed and dated by the chair of the governing body responsible for the protection of human research participants that attests to this requirement. A template for the letter is available at http://www.nursecredentialing.org/Magnet/Magnet-FormsTemplates.

Page 39

Initial	Change
<p>SE7: The organization facilitates the effective transition of <u>registered nurses</u> and <u>advanced practice nurses</u> into the work environment. <u>Choose two (2) of the four (4) below:</u></p> <ul style="list-style-type: none"> ▶ Provide one (1) example, with supporting evidence, of how the organization facilitates effective transition of new graduate nurses into the nurse practice environment. Describe how the transition process is evaluated for effectiveness. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one (1) example, with supporting evidence, of how the organization facilitates effective transition of newly hired experienced nurses into the nurse practice environment. Describe how the transition process is evaluated for effectiveness. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one (1) example, with supporting evidence, of how the organization facilitates effective transition of nurses transferring within the organization from one specialty care area to a different specialty care area. Describe how the transition process is evaluated for effectiveness. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one (1) example, with supporting evidence, of how the organization facilitates effective transition of advanced practice nurses into practice. Describe how the transition process is evaluated for effectiveness. 	<ul style="list-style-type: none"> ▶ Provide one (1) example, with supporting evidence, of how the organization facilitates effective transition of new graduate nurses into the nurse practice environment. Describe and demonstrate how the transition process is evaluated for effectiveness. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one (1) example, with supporting evidence, of how the organization facilitates effective transition of newly hired experienced nurses into the nurse practice environment. Describe and demonstrate how the transition process is evaluated for effectiveness. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one (1) example, with supporting evidence, of how the organization facilitates effective transition of nurses transferring within the organization from one specialty care area to a different specialty care area. Describe and demonstrate how the transition process is evaluated for effectiveness. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one (1) example, with supporting evidence, of how the organization facilitates effective transition of advanced practice nurses into practice. Describe and demonstrate how the transition process is evaluated for effectiveness.

Page 103 and page 105

Initial	Change
<p>Appendix D Paper Documentation Submission Requirements</p> <p>Appendix E Electronic Documentation Submission Requirements</p>	<p>▶ Effective February 1, 2016, all documents submitted to the Magnet Recognition Program must be web-based or on a thumb drive—hard copy submissions will not be accepted.</p>

REPORTING GUIDANCE FOR EP3EO/EP22EO/EP23EO

EP3EO: Nurse Satisfaction (2014 Magnet Application Manual)

Presentation

- ▶ Each unit/clinic using guidance provided on page 44 of *2014 Magnet Application Manual*
- ▶ Most recent Survey within the 30 months prior to documentation submission

Categories/Subscales

- ▶ Select four (4) of seven (7) categories noted on page 43 of *Manual*
- ▶ Refer to Manual Updates available at <http://www.nursecredentialing.org/Magnet/MagnetManualUpdates>
- ▶ Refer to vendor to align survey with categories
- ▶ Four (4) categories must be consistent across the organization (inpatient and outpatient)

Level of data

- ▶ Unit/clinic-level data. If data are not available at the unit/clinic level, present at the next aggregated level available from the vendor (e.g., clinic groups).
 - ▶ Explain units/clinics within aggregated data
 - ▶ Explain any units not included

Benchmark statistic

- ▶ Use of mean, median or other measure of central tendency provided by the vendor's national database benchmark

Comparison Group/Cohort

- ▶ Use of an appropriate comparison group may change between units/clinics
- ▶ Comparison group label must be depicted on table and graph

Graph presentation

- ▶ Up to four (4) units/clinics may be presented on one graph
 - ▶ If multiple units on one graph, all elements (i.e. benchmark, cohort) must be consistent
- ▶ Single Unit/Clinic presentation
 - ▶ A different mean or median may be used for each graph

EP22EO: Nurse-sensitive Clinical Indicators

Presentation

- ▶ Each unit/clinic using guidance provided on pages 48 - 52 of *2014 Magnet Application Manual*
- ▶ Most recent eight (8) quarters prior to documentation submission

Nurse-sensitive Clinical Indicators

- ▶ Refer to Table 5 on page 51 and 52 of *2014 Magnet Application Manual* for requirements specific to organization type
- ▶ Refer to Manual Updates available at <http://www.nursecredentialing.org/Magnet/MagnetManualUpdates>

Level of data

- ▶ Unit/clinic-level data. If data are not available at the unit/clinic level, present at the next aggregated level available from the vendor (e.g., clinic groups).
 - ▶ Explain units/clinics within aggregated data
 - ▶ Explain any units not included

Benchmark statistic

- ▶ Use of mean, median or other measure of central tendency provided by the vendor's national database benchmark

Comparison Group/Cohort

- ▶ Use of an appropriate comparison group may change between units/clinics
- ▶ Comparison group label must be depicted on table and graph

Graph presentation

- ▶ Single Unit/Clinic presentation
 - ▶ A different mean or median may be used for each graph
- ▶ Up to four (4) units/clinics may be presented on one graph
 - ▶ If multiple units on one graph, all elements (i.e. benchmark, cohort) must be consistent

EP23EO: Patient Satisfaction with Nursing

Presentation

- ▶ Each unit/clinic using guidance provided on page 54 of *2014 Magnet Application Manual*
- ▶ Most recent eight (8) quarters prior to documentation submission

Categories/Subscales

- ▶ Select four (4) of nine (9) categories noted on page 53 of *Manual*
- ▶ Refer to Manual Updates available at <http://www.nursecredentialing.org/Magnet/MagnetManualUpdates>
- ▶ Refer to vendor to align patient satisfaction questions with categories
 - ▶ Select only patient satisfaction questions which the vendor has assigned to categories. Establish (with the vendor) that the vendor has collaborated with the Magnet Recognition Program on alignment of questions to categories.
- ▶ Four (4) categories must be consistent across the organization (inpatient and outpatient)
- ▶ Within each category, the specific question may vary from unit/clinic to unit/clinic

Level of data

- ▶ Unit/clinic-level data. If data are not available at the unit/clinic level, present at the next aggregated level available from the vendor (e.g., clinic groups).
 - ▶ Explain units/clinics within aggregated data
 - ▶ Explain any units not included

Benchmark statistic

- ▶ Use of mean, median or other measure of central tendency provided by the vendor's national database benchmark

Comparison Group/Cohort

- ▶ Use of an appropriate comparison group may change between units/clinics
- ▶ Comparison group label must be depicted on table and graph

Graph presentation

- ▶ Each graph must include the category and the specific vendor-aligned question
- ▶ Single Unit/Clinic presentation
 - ▶ A different mean or median may be used for each graph
- ▶ Up to four (4) units/clinics may be presented on one graph
 - ▶ If multiple units on one graph, all elements (i.e. benchmark, cohort) must be consistent

CHANGES TO THE 2014 MAGNET® APPLICATION MANUAL, JUNE 2014

Page 52, Table 5. EP22EO Requirements: Nurse-Sensitive Clinical Indicators

Initial			
Nurse-Sensitive Clinical Indicators	Acute Care Organization With Ambulatory/Outpatient Services	Acute Care Organization Without Ambulatory/Outpatient Services	Organization With Ambulatory/Outpatient Services Only
Falls with injury	Required	Required	
Hospital-acquired pressure ulcers (HAPU) stages 2 and above	Required	Required	
Central line-associated bloodstream infection (CLABSI)	Required	Required	
Catheter-associated urinary tract infection (CAUTI)	Required	Required	
	Select ONE nurse-sensitive clinical indicator from the Core Measure Sets	Select TWO nurse-sensitive clinical indicators from the Core Measure Sets	
	Select ONE nurse-sensitive clinical indicator from Primary OR Specialty Outpatient Services		Select TWO nurse-sensitive clinical indicators from Primary OR Specialty Outpatient Services
	Total Submitted = 6	Total Submitted = 6	Total Submitted = 2

See next page for changes – ONLY for international and speciality organizations.

**Change – Update ONLY for international and specialty organizations
(e.g., mental health, rehabilitation)**

Nurse-Sensitive Clinical Indicators	Acute Care Organization With Ambulatory/Outpatient Services	Acute Care Organization Without Ambulatory/Outpatient Services	Organization With Ambulatory/Outpatient Services Only
Falls with injury	Required	Required	
Hospital-acquired pressure ulcers (HAPU) stages 2 and above	Required	Required	
Central line-associated bloodstream infection (CLABSI)	Required – Alternative option ONLY for international and/or specialty organizations (e.g., mental health, rehabilitation): Must select a nationally benchmarked nurse sensitive clinical indicator that is a patient outcome measure/indicator.	Required – Alternative option ONLY for international and/or specialty organizations (e.g., mental health, rehabilitation): Must select a nationally benchmarked nurse sensitive clinical indicator that is a patient outcome measure/indicator.	
Catheter-associated urinary tract infection (CAUTI)	Required – Alternative option ONLY for international and/or specialty organizations (e.g., mental health, rehabilitation): Must select a nationally benchmarked nurse sensitive clinical indicator that is a patient outcome measure/indicator.	Required – Alternative option ONLY for international and/or specialty organizations (e.g., mental health, rehabilitation): Must select a nationally benchmarked nurse sensitive clinical indicator that is a patient outcome measure/indicator.	
	Select ONE nurse-sensitive clinical indicator from the Core Measure Sets. See next page	Select TWO nurse-sensitive clinical indicators from the Core Measure Sets. See next page	
	Select ONE nurse-sensitive clinical indicator from Primary OR Specialty Outpatient Services. See next page		Select TWO nurse-sensitive clinical indicators from Primary OR Specialty Outpatient Services. See next page
	Total Submitted = 6	Total Submitted = 6	Total Submitted = 2

Change – Update **ONLY** for international and specialty organizations (e.g., mental health, rehabilitation)

- ▶ Nurse-sensitive clinical indicators from the Core Measure Sets – alternative option **ONLY** for international and/or specialty organizations (e.g., mental health, rehabilitation): Must select an international and/or specialty Quality/Safety nurse-sensitive clinical indicator. Provide nationally benchmarked unit-level nurse-sensitive clinical indicator data. Organizations may benchmark internally, **only** when a national database is not available. The established benchmark must be based on professional standards, literature review, or internal trended data, or all three.
- ▶ Nurse-sensitive clinical indicator from Primary **OR** Specialty Outpatient Services – no change. Required by all applicants with Ambulatory/Outpatient Services. Provide nationally benchmarked unit-level nurse-sensitive clinical indicator data. Organizations may benchmark internally, **only** when a national database is not available. The established internal benchmark must be based on professional standards, literature review, or internal trended data, or all three.
- ▶ A national database must be used, if available. If a national database is not available for international and specialty organizations **ONLY**, then data may be contributed to and analyzed by the following databases for submission to Magnet: National, Provincial, Territory, State, or District.
- ▶ The Magnet Program Office must be consulted to confirm that the selected databases provide valid and reliable benchmarks.

Pages 53 and 95, EP23EO: Unit or clinic-level patient satisfaction data (related to nursing care) outperform the mean of the national database used.

Initial	Change
Unit or clinic-level patient satisfaction data (related to nursing care) outperform the mean of the national database used. Pediatric and ambulatory patient satisfaction data are required for organizations with these services in place.	<p>Ambulatory areas:</p> <ul style="list-style-type: none"> ▶ Ambulatory data may be compared to internal goals and presented for each indicator until February 2018, if national benchmarks are not available. ▶ Starting April 2018: ambulatory data, compared to national benchmarks, must be presented.
Unit – or clinic-level patient satisfaction data (related to nursing care) outperform the mean of the national database used.	Unit – or clinic-level patient satisfaction data (related to nursing care) outperform the mean or median of the national database used.

CHANGES TO THE 2014 MAGNET® APPLICATION MANUAL, MARCH 2014

Page 28, Organizational Overview

Initial	Change
<p>10. Evidence of the following documents for nurses at all levels (staff nurses up to and including the CNO):</p> <ul style="list-style-type: none"> ▶ Self-appraisal tools ▶ Peer feedback tools ▶ Performance review tools 	<p>Blank templates are required for nurses at all levels (staff nurses up to and including the CNO):</p> <ul style="list-style-type: none"> ▶ Self-appraisal tools ▶ Peer feedback tools ▶ Performance review tools <p>Validation of completed forms will be at site visit.</p>

Page 31, TL1EO: Nursing’s mission, vision, values, and strategic plan align with the organization’s priorities to improve the organization’s performance.

Initial	Change
<p>Nursing’s mission, vision, values, and strategic plan align with the organization’s priorities to improve the organization’s performance.</p> <ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of an initiative identified in the nursing strategic plan that resulted in an improvement in the nurse practice environment. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>AND</p> <ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of an initiative identified in the nursing strategic plan that resulted in an improvement of clinical practice. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. 	<p>Nursing’s mission, vision, values, and strategic plan align with the organization’s priorities to improve the organization’s performance.</p> <ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of an initiative identified in the nursing strategic plan that resulted in an improvement in the nurse practice environment. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>AND</p> <ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of an initiative identified in the nursing strategic plan that resulted in an improvement due to a change in clinical practice. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

Page 33, TL9EO: Nurse leaders (exclusive of the CNO) use input from clinical nurses to influence change in the organization. Choose two of the three below (examples must be different from those provided in TL8).

Initial	Change
<ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of clinical nurse communication with a nurse leader that influenced a change in the <u>nurse practice environment</u>. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of clinical nurse communication with a nurse leader that influenced a change in the <u>patient experience</u>. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of clinical nurse communication with a nurse leader that influenced a change in <u>nursing practice</u>. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. 	<ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of a change in the <u>nurse practice environment</u> that was influenced by the clinical nurses' communication with a nurse leader. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of a change in the <u>patient experience</u> that was influenced by the clinical nurses' communication with a nurse leader. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>OR</p> <ul style="list-style-type: none"> ▶ Provide one example, with supporting evidence, of a change in <u>nursing practice</u> that was influenced by the clinical nurses' communication with a nurse leader. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

Page 35, SE2EO: The healthcare organization supports nurses' participation in local, regional, national, or international professional organizations.

Initial	Change
<ul style="list-style-type: none"> ▶ Provide two examples, with supporting evidence, of improvements in nursing practice that occurred because of clinical nurse involvement in a professional organization. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. 	<ul style="list-style-type: none"> ▶ Provide two examples, with supporting evidence, of improvements resulting from a change in nursing practice that occurred because of clinical nurse involvement in a professional organization. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

Page 38, SE4EO: Nurses participate in professional development activities designed to improve their knowledge, skills, and/or practices in the workplace. Professional development activities are designed to improve the professional practice of nursing or patient outcomes, or both. May include interprofessional activities.

Does not include orientation-related education.

Initial	Change
For system applications, refer to system requirements in Appendix C.	<p>Delete</p> <p>Rationale: This Source of Evidence does not apply to system applications</p>

Page 39, SE8: The organization provides educational activities to improve the nurse's expertise as a preceptor.

Initial	Change
<ul style="list-style-type: none"> Describe the organization's preceptor educational programs(s) and how each program is evaluated on an ongoing basis. 	<ul style="list-style-type: none"> Describe the organization's preceptor educational programs(s) and how each program is evaluated on an ongoing basis. Provide supporting evidence.

Page 43, EP2EO: Clinical nurses are involved in the development, implementation, and evaluation of the professional practice model.

Initial	Change
<ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement in clinical practice as a result of clinical nurses' involvement in the implementation or evaluation of the professional practice model. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. 	<ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement resulting from a change in clinical practice that occurred because of clinical nurses' involvement in the implementation or evaluation of the professional practice model. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

Page 45, EP7EO: Nurses systematically evaluate professional organizations' standards of practice, incorporating them into the organization's professional practice model and care delivery system.

Initial	Change
<ul style="list-style-type: none"> Provide one example, with supporting evidence, of a change in clinical practice resulting from the application of professional organizations' standards of nursing practice. The example provided may be at the unit, division, or organizational level. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. 	<ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement resulting from a change in clinical practice due to the application of a professional organizations' standards of nursing practice. The example provided may be at the unit, division, or organizational level. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

Page 45, EP8EO: Nurses use internal and external experts to improve the clinical practice setting.

Initial	Change
<ul style="list-style-type: none"> Describe one improvement in the clinical practice setting that occurred as a result of the use of internal experts. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>OR</p> <ul style="list-style-type: none"> Describe one improvement in the clinical practice setting that occurred as a result of the use of external experts. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. 	<ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement that occurred due to a change in clinical practice setting resulting from the use of internal experts. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>OR</p> <ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement that occurred due to a change in the clinical practice setting resulting from the use of external experts. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

Page 48, EP18EO: Workplace safety for nurses is evaluated and improved.

Initial	Change
<ul style="list-style-type: none"> Provide two examples, with supporting evidence, of workplace safety for nurses resulting from the safety strategy of the organization. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. 	<ul style="list-style-type: none"> Provide two examples, with supporting evidence, of improved workplace safety for nurses resulting from the safety strategy of the organization. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data

Page 57, NK5EO: Nurses are involved with the design and implementation of technology to enhance the patient experience and nursing practice.

Initial	Change
<ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement in <u>nursing practice</u> that resulted from clinical nurses' involvement with design and implementation of technology. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>AND</p> <ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement in the <u>patient experience</u> that resulted from clinical nurses' involvement with design and implementation of technology. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. 	<ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement that occurred due to a change in <u>nursing practice</u> resulting from clinical nurses' involvement with design and implementation of technology. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data. <p>AND</p> <ul style="list-style-type: none"> Provide one example, with supporting evidence, of an improvement in the <u>patient experience</u> that resulted from clinical nurses' involvement with design and implementation of technology. Supporting evidence must be submitted in the form of a graph with a data table that clearly displays the data.

CHANGES TO THE 2014 MAGNET® APPLICATION MANUAL, NOVEMBER 2013

Page 27, Organizational Overview

Initial	Change
Organizational Overview items must be present for the appraisers to score the Sources of Evidence.	<p>If any of the requested documents in the twenty (20) Organizational Overview items are not present:</p> <ul style="list-style-type: none"> ▶ The review is stopped. ▶ The organization is notified and will have five (5) business days to provide the missing documents. ▶ If the missing documents are not provided after five (5) business days, the review is concluded.

Page 29, Number 20, Organizational Overview

Initial	Change
A Table of ongoing or completed nursing research studies within the past four years. Required table located at http://www.nursecredentialing.org/Magnet/Magnet-FormsTemplates/Magnet-TablesTemplates	A Table of ongoing or completed nursing research studies within the past 30 months. Required table located at http://www.nursecredentialing.org/Magnet/Magnet-FormsTemplates/Magnet-TablesTemplates

Pages 43, 44 and 90, EP3EO: Unit or clinic level nurse (RN) satisfaction data outperform the mean or median of the national database used.

Initial	Change
The tables and graphs...	The table and graph...
This SOE becomes effective April 1, 2015. Until that time, the 2008 EP3EO is in effect. 2008 <i>Application Manual</i> EP3EO: Nurse satisfaction or engagement data aggregated at the organizational or unit level outperform the mean, median, or other benchmark statistic of the national database used. Include participation rates, analysis, and evaluation of the data.	This SOE becomes effective April 1, 2016. Until that time, the 2008 EP3EO is in effect. 2008 <i>Application Manual</i> EP3EO: Nurse satisfaction or engagement data aggregated at the organizational, clinical groups of like-units or unit level outperform the mean, median, or other benchmark statistic of the national database used. Submit data for the most recent nurse satisfaction survey within the previous 30-months before documentation submission. Include participation rates, analysis, and evaluation of the data.

Pages 48 and 94, EP22EO: Unit or clinic-level nurse-sensitive clinical indicator data outperform the mean or median of the national database used.

Initial	Change
<p>Core measure: nurse sensitive clinical indicator from the Core Measure Sets must be collected and benchmarked at the unit level.</p> <ul style="list-style-type: none"> ▶ Acute care organizations with ambulatory/outpatient settings, present one indicator. ▶ Acute care organizations without ambulatory/outpatient, present two indicators. 	<p>Core measure: nurse sensitive clinical indicators from the Core Measure Sets must be benchmarked and presented at the organizational level.</p> <ul style="list-style-type: none"> ▶ Acute care organizations with ambulatory/outpatient settings, present one indicator. ▶ Acute care organizations without ambulatory/outpatient, present two indicators.

Pages 53 and 95, EP23EO: Unit or clinic-level patient satisfaction data (related to nursing care) outperform the mean of the national database used.

Initial	Change
<p>Unit or clinic-level patient satisfaction data (related to nursing care) outperform the mean of the national database used. Pediatric and ambulatory patient satisfaction data are required for organizations with these services in place.</p>	<p>Ambulatory areas:</p> <ul style="list-style-type: none"> ▶ Ambulatory data may be compared to internal goals and presented for each indicator until February 2016, if national benchmarks are not available. ▶ Starting April 2016: ambulatory data, compared to national benchmarks, must be presented.
<p>Unit – or clinic-level patient satisfaction data (related to nursing care) outperform the mean of the national database used.</p>	<p>Unit – or clinic-level patient satisfaction data (related to nursing care) outperform the mean or median of the national database used.</p>

Page 56, NK1EO: The organization supports the advancement of nursing research.

Initial	Change
<p>Results</p> <ul style="list-style-type: none"> ▶ Results of data analysis (quantitative) or findings (qualitative); must have occurred within the 30 months before documentation submission 	<p>Results</p> <ul style="list-style-type: none"> ▶ Results of data analysis (quantitative) or findings (qualitative); must have occurred within the four (4) years before documentation submission

Page 59, Empirical Outcomes

Initial	Change
<p>Bottom of page: EP22EO – pages 48-50</p>	<p>EP22EO - pages 48-52</p>

Page 60, Outcome(s) section of the EO Formatting Requirements

Initial	Change
<p>Empirical Outcome Source of Evidence Formatting Requirements (Outcomes Section)</p> <p>Empirical Outcomes Presentation Requirements: Outcome(s)</p> <ul style="list-style-type: none"> ▶ Trended data must be displayed to show change(s)/improvement(s)/result(s). 	<p>Empirical Outcomes Presentation Requirements: Outcome(s)</p> <ul style="list-style-type: none"> ▶ Trended data must be displayed to show change(s)/improvement(s)/result(s). At a minimum, three (3) post-intervention data points must be provided to demonstrate a trend.

Page 71, Glossary

Initial	Change
<p>Nurse leaders with line authority over multiple units that have RNs working clinical and nurse leaders who are positioned on the organizational chart between the nurse manager and the chief nursing officer.</p>	<p>Nurse leaders with line authority over multiple units that have RNs working clinical and nurse leaders who are positioned on the organizational chart between the nurse manager and the chief nursing officer. Includes nurse educators.</p>