Magnet Recognition and the Role of the Wound, Ostomy, and Continence Nurse  
FACT SHEET

Originated By:
WOCN® Professional Practice Committee

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The Wound, Ostomy and Continence Nurses Society™ (WOCN®) shares the American Nurses Credentialing Center (ANCC) Magnet Recognition program’s passion for quality patient care and supports the vital role of the wound, ostomy and continence (WOC) nurse in the application process. This is evidenced by the WOCN Society's mission statement, which expresses similar objectives to the Magnet Recognition program:

The WOCN Society "is a professional nursing organization, which supports its members by promoting educational, clinical and research opportunities to advance the practice and guide the delivery of expert health care to individuals with wound, ostomy and continence concerns" (WOCN, 2012, p.6). Furthermore, the Wound, Ostomy and Continence Nursing Scope and Standards of Practice (2010) states:

The foundation of WOC nursing practice is influenced by the theoretical principles of self-care, self-efficacy, change, growth and development, adult learning, and health promotion…WOC nursing influences patient care both directly, through the provision of hands-on care, and indirectly, by serving as an educator, consultant, researcher, or administrator guiding the provision of optimal patient care to patients with wound, ostomy, or continence concerns (WOCN, 2010, p. 3).

The Magnet Program

In 1993, the ANCC formally developed the Magnet Recognition program to recognize healthcare organizations that promote nursing excellence and provide superior quality patient care.
The objectives of the Magnet Recognition program are to:

- Recognize nursing services that use the Scope and Standards for Nurse Administrators (American Nurses Association, 2004) to build programs of nursing excellence for the delivery of nursing care to patients.
- Promote quality in a milieu that supports professional nursing practice.
- Provide a vehicle for the dissemination of successful nursing practices and strategies among health care organizations using the services of registered professional nurses to promote positive patient outcomes (ANCC, 2008a, 2008b).

According to the ANCC and Magnet-recognized organizations, in addition to reinforcing a professional environment, there are a number of other benefits of Magnet status:

- Community recognition for the nursing care given by the organization.
- Improved patient care outcomes.
- Enhanced respect and acknowledgement of the nursing staff's contributions to positive patient care outcomes.
- Competitive marketing advantages.
- Improved recruitment and retention of nurses, physicians, and other healthcare professionals.
- Reinforced positive collaborative relationships.
- Enriched nursing staff satisfaction and productivity (ANCC, 2008a, 2008b).

WOC nurses have embraced evidence-based practice and the focus on quality to ensure that patients receive the specialized care they require. As experts, WOC nurses influence processes across the continuum of care to promote resource utilization for quality and cost effective care and prevent adverse complications such as pressure ulcers. The autonomy, knowledge and clinical expertise possessed by WOC nurses are extremely valuable commodities that reflect the quality of a Magnet-designated organization.

The Magnet Application Process

Eligibility requirements for Magnet Recognition include:

- Standards for nurse administrators
  - The facility must have the ANA scope and standards for nurse administrators implemented throughout nursing.
- Protected feedback procedures
  - Policies and procedures that permit and encourage nurses to confidentially express concerns regarding their professional practice environment without retribution.
- Regulatory compliance
  - Compliance with all federal laws as they relate to nurses in the work place.
- Data collection
  - Nursing sensitive quality indicators at the unit level, with data benchmarked against the highest and/or broadest level possible to support research and quality improvement initiatives.

Applying for Magnet Recognition involves four basic stages:

- Application.
- Document preparation.
- Site evaluation.
- Approval.

The Magnet Model

The Magnet Model is based on five components that focus on measurable outcomes. The WOC nurse has an integral role in each of the components and many aspects of WOC nursing practice overlap into more than one area (ANCC 2008a, 2008b).

- Transformational Leadership
- Structural Empowerment
- Exemplary Professional Practice
- Empirical Quality Results
- New Knowledge, Innovations and Improvements

Conclusion

- Facilities are assisted in meeting standards for Magnet Recognition through contributions of the WOC nurse.
- The WOC nurse impacts patient care across the continuum of care and in all healthcare settings.
- WOC nursing practice is rooted in evidence-based nursing care, and daily practice embraces the outcomes focus of the Magnet Model.

The following table outlines the five Magnet Components in addition to the key concepts for each of these components (ANCC, 2008a, 2008b). This guide provides WOC nurses with examples of various activities within the WOC nurse role that support the Magnet Recognition program.
### Table

**Examples of the WOC Nurse Role and Activities that Support Magnet Recognition**

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<th>Magnet Model Component</th>
<th>Key Concepts</th>
<th>Relevance to WOC Nursing Standards of Professional Performance</th>
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| Transformational Leadership | Strategic Planning | - Organizational leaders support WOC (Wound, Ostomy and Continence) nurse experts and promote their roles and individual endeavors.  

**WOC Nurses**
- Serve as resources to inpatient and outpatient services and in all practice settings (e.g., nursing homes, adult homes and residential homes).
- Increase accessibility to and adapt care to meet the needs of the bariatric population (e.g., incorporate equipment, products and protocols for skin care to include pressure ulcer prevention and prevention and treatment of intertrigenous dermatitis).
- Expand/promote outpatient services (e.g., use knowledge and skills to develop a business plan for outpatient services to provide for the needs of WOC patients).
- Maintain active membership in professional organizations. |
| Advocacy and Influence | | - Participate in resource allocation initiatives to facilitate cost containment (e.g., value analysis committee membership, introduction/evaluation of new products).  
- Respond to changing societal and health care trends:  
  - Aging patient population.  
  - Changes in public policy.  
  - Never events.  
- Maintain knowledge of third party payor regulations in an effort to provide quality WOC care in a cost-conscious economy. |
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<tr>
<th>Visibility, Accessibility and Communication</th>
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<tr>
<td>• Initiate activities through formalized council/team structures to generate change for positive outcomes (e.g., quality improvement, professional practice, research).</td>
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<td>• Maintain lines of communication to ensure that outcomes as well as areas of opportunity are acknowledged by the organization's leadership.</td>
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<td>• Formally and informally act as resources and role models for staff regarding the care of patients with wounds, ostomies, and continence issues.</td>
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<td>• Engage in the dissemination of WOC nursing practice initiatives through educational presentations, research and publications.</td>
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<td>• Participate in event reporting and implementation of corrective measures (i.e., analysis of root cause, Just Culture Algorithm; ANA, 2010).</td>
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<td>• Support policies and procedures that permit and encourage nurses to confidentially express concerns regarding their professional practice environment without retribution (ANA, 2010).</td>
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<td>• Demonstrate specific examples of transformational leadership in WOC nursing practice:</td>
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<td>• Unit based skin care teams.</td>
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<td>• Welcome new graduates through shadowing and in servicing.</td>
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<td>• “Teach the teachers” (clinical educators) on WOC related topics.</td>
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<td>• Serve as resources to patient safety teams.</td>
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<td>• Serve as resources for IHI (Institute for Healthcare Improvement) initiatives.</td>
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<td>• Participate in emergency room projects related to pressure redistribution and skin tear protocols.</td>
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<td>Structural Empowerment</td>
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<td><strong>• Engage in activities that promote the role of the WOC nurse within the organization.</strong></td>
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<td><strong>• Participate as active members of the nursing department and institutional Performance Improvement initiatives as related to the scope of WOC nursing practice.</strong></td>
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<td><strong>• Participate in value analysis initiatives (e.g., wound/incontinence products, therapeutic beds/surfaces, ostomy products).</strong></td>
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<td><strong>• Participate in research initiatives.</strong></td>
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<td><strong>• Foster positive interdisciplinary collaborations (e.g., physicians, care coordination, social work, pharmacy, nutrition service).</strong></td>
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<td><strong>• Facilitate multidisciplinary patient care conferences.</strong></td>
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<td><strong>• Collaborate with physicians in disease management (i.e., diabetic foot care, wound care, neuropathy, offloading, connecting resources in the community, lower extremity arterial disease (LEAD), treatment of edema/lymphedema, management of ongoing ostomy care, issues related to continence).</strong></td>
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<th>Commitment to Professional Development</th>
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<td><strong>• Maintain WOC nursing certification.</strong></td>
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<td><strong>• Seek new certifications appropriate to the role of the WOC nurse (i.e., foot/nail certification).</strong></td>
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<td><strong>• Participate in continuing education offerings to maintain current WOC nursing knowledge using a variety of mediums (e.g., courses, conferences, journal, online activities).</strong></td>
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<td><strong>• Attend local, regional and/or national WOCN® Society conferences.</strong></td>
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<td><strong>• Maintain active membership in the WOCN® Society.</strong></td>
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<th>Teaching and Role Development</th>
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<td><strong>• Provide formal education to all levels of staff (e.g., medicine, nursing, nutrition, ancillary) in order to appropriately manage patients with WOC issues.</strong></td>
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<td><strong>• Incorporate evidenced-based practice into the care of WOC patients.</strong></td>
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<td><strong>• Participate in informal teaching/learning opportunities with all levels of staff.</strong></td>
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<td><strong>• Serve as preceptors for new WOC nurses.</strong></td>
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| Commitment to Community Involvement | • Serve as clinical experts to various groups and organizations in the community such as support groups (e.g., United Ostomy Associations of America; Crohn's & Colitis Foundation of America, American Cancer Society), local home care agencies, and long-term care facilities to ensure continuity of care.  
• Work with local community health care centers in developing initiatives such as diabetic foot care programs.  
• Work with local school boards and school authorities to ensure that privacy and toileting needs of the school aged/teenaged ostomy patients are met.  
• Provide outpatient services to meet the needs of the community (e.g., clinics, health fairs, wellness days, support groups). |
| Recognition of Nursing | • Act as positive role models and mentors for all levels of staff. |
| Exemplary Professional Practice | | □ Professional Practice Model  
□ Accountability, Competence and Autonomy  
Ensure WOC nursing competence is consistent with current national nursing and WOC clinical practice guidelines as measured by:  
- Wound, Ostomy and Continence Nursing Certification Board (WOCNCB®) specialty certification.  
- Active participation in national and/or specialty nursing societies.  
- Pursuit of continuing education in specialty practice. |
| Care Delivery System | Ensure that the standard of care for WOC patients is consistently met in the organization through:  
- Developing/implementing evidence-based policies/procedures/protocols.  
- Disseminating knowledge via interdisciplinary staff education.  
- Validating skills.  
- Developing/maintaining data collection mechanisms.  
- Evaluating patient outcomes. |
| Ethics, Privacy, Security and Confidentiality | • Serve as ad hoc members of the facility’s Ethics Committee regarding WOC related issues.  
• Serve as role models to staff in protecting patient privacy and confidentiality at all times, particularly when delivering direct patient care (e.g., draping patient during wound/ostomy care, wound photography). |
| Diversity and Workplace Advocacy | • Assist staff in recognizing Stage I and Suspected Deep Tissue Injury (SDTI) pressure ulcers in dark-skinned individuals.  
• Assist staff in obtaining age and developmentally appropriate patient education materials.  
• Plan care that is consistent with the cultural needs of patients with wounds, ostomies and/or incontinence (e.g., dietary needs, language barriers, clothing modification, toileting practices).  
• Advocate for patients’ ongoing health needs related to wound, ostomy and continence care (e.g., third party payers, durable medical equipment providers). |
| --- | --- |
| Staffing, Scheduling and Budgeting Process | • Actively participate as regular or ad hoc members of the hospital's product and/or standards committees for ongoing evaluation of products and supplies related to wound, ostomy and continence care.  
• Develop algorithms for hospital wide product selection to support best practices for the prevention and treatment of wound, ostomy, and continence conditions. |
| Quality Care Monitoring and Improvement | Develop product formularies for resource allocation and cost containment. |
| Interdisciplinary Care | Lead efforts to:  
- Collect pressure ulcer prevalence and incidence data.  
- Benchmark data with a variety of national databanks to include but not limited to the National Database of Nursing Quality Indicators (NDNQI®).  
- Analyze trends in data trajectory.  
- Engage nursing leadership, nursing staff, ancillary staff and interdisciplinary teams in process improvement efforts.  
- Facilitate unit based or interdisciplinary Skin Teams. |
| Culture of Safety | Partner with risk management staff to ensure that risk reduction strategies for high-risk patient populations are implemented:  
- Assist with follow up of patient event reporting.  
- Participate in root-cause analysis and/or health care failure mode effects analysis related to wound, ostomy, and continence issues. |
| Empirical Quality Results | Focus on Outcomes | • Participate in outcome evaluation including NDNQI pressure ulcer prevalence data collection and facility based pressure ulcer incidence tracking.  
• Disseminate results of data collection activities to nursing leadership and nursing staff. |
| Contributions to Patient, Nursing, Workforce, Organization and Consumer Outcomes | • Benchmark data with a variety of national databases to include but not limited to NDNQI.  
• Formulate/participate in corrective action plans using WOC nursing initiatives, if data do not meet the benchmark. |
| Education Information Sharing | • Research wound, ostomy, and continence best practices.  
• Assist staff to translate research findings regarding clinical issues that are specific to WOC nursing into clinical practice. |
| Transition of Research into Nursing Practice | Participate in process improvement initiatives related to WOC nursing practice (e.g., prevention of pressure ulcers, catheter associated urinary tract infections, and surgical site infections). |
| New Knowledge, Innovations and Improvements | Research | Participate in research activities |
| Evidence Based Practice | • Develop practice protocols based on current research and evidence:  
  o Maintain current evidenced-based standards of care that align with national standards (WOCN®, National Pressure Ulcer Advisory Panel, etc.).  
• Conduct value analysis activities:  
  o Product selection (based on current evidence).  
  o Product trials, case studies.  
• Ensure fiscal responsibility:  
  o Material resource allocation (e.g., specialty beds/mattresses; negative pressure wound therapy).  
• Maintain evidence-based practice and prevention protocols to guide the practice of nursing staff in issues related to WOC patients.  
• Participate in journal clubs to review current data and evidence-based literature to influence day-to-day nursing practice and disseminate information through presentations and publications. |
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<td>• Identify innovations in evidence-based care that positively impact WOC patients through collaboration with other specialties, (e.g., infection control).</td>
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<td>• Develop new revenue generating programs (e.g., use knowledge and skills to develop a business plan for an outpatient clinic, that serves the needs of wound, ostomy, continence and/or foot care patients as a new revenue stream for the hospital).</td>
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<td>• Collaborate with Information Technology staff to develop computer screens for the Electronic Medical Record (EMR) that reflect the documentation of best practice.</td>
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References


Suggested Reading


**Date Approved by the WOCN Society Board of Directors:** May 15, 2012