

Magnet hospitals achieve lower mortality, report says

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Lower mortality and other improved patient outcomes achieved at designated "Magnet hospitals" are explained partly—but not completely—by better nurse staffing, education, and work environment, reports a study in the May issue of *Medical Care*.

"Magnet hospitals have lower mortality because of investments in nursing," comments Matthew D. McHugh, PhD, JD, MPH, RN, of University of Pennsylvania School of Nursing, Philadelphia, lead author of the new report. He adds, "Magnet recognition likely stimulates positive <u>organizational behavior</u> that improves <u>patient outcomes</u>."

Magnet Hospitals Have Better Patient Outcomes

The researchers compared patient outcomes at Magnet hospitals versus non-Magnet hospitals in California, Florida, Pennsylvania, and New Jersey in 2006-07. Magnet hospitals are recognized for <u>quality patient</u> <u>care</u>, nursing excellence and innovations in professional nursing practice. The <u>Magnet Recognition Program</u> is a voluntary recognition/certification program administered by the American Nurses Credentialing Center (ANCC), an arm of the American Nurses Association.

Dr McHugh and colleagues linked patient, nurse, and hospital data on 56 Magnet hospitals and 508 non-Magnet hospitals. The goal was to see if Magnet hospitals achieved better patient outcomes, and to identify characteristics of Magnet hospitals that led to improved outcomes.



The results showed important differences in nursing at Magnet hospitals. "Magnet hospitals had significantly better work environments and higher proportions of nurses with bachelor's degrees and specialty certification," the researchers write. Magnet hospitals also had higher nurse-to-patient staffing ratios.

Key patient outcomes were also better at Magnet hospitals. On analysis of more than 600,000 <u>surgical patients</u>, <u>mortality rates</u> were 20 percent lower at Magnet hospitals, after accounting for clinical factors. Magnet hospitals also had better performance on "failure to rescue"—that is, mortality rate among patients with recognized complications.

Magnet Designation Process Promotes Investment in Nursing and 'Culture of Excellence'

Nurse staffing, education, and work environment explained much of the superior patient outcomes at Magnet hospitals. In addition, there was a residual mortality advantage attributable to the ongoing process of maintaining Magnet recognition status. "Even controlling for differences in nursing, hospital, and patient characteristics, surgical patients in Magnet hospitals had 14 percent lower odds of inpatient death within 30 days and 12 percent lower odds of failure-to-rescue compared to patients cared for in non-Magnet hospitals," Dr McHugh and coauthors write.

Nursing services are a vital part of hospital care. A pivotal 1994 paper by the same research team—also published in *Medical Care*—found that hospitals with reputations for excellence in the management of nursing services had lower mortality rates. That study, among others, led to the development of the Magnet hospital designation. However, few studies since then have been done to confirm that Magnet hospitals achieve better patient outcomes.



The updated analysis provides new evidence that patients treated at Magnet hospitals have better outcomes, and that more favorable nurse staffing, more nurses with bachelor's degrees, and better work environments are important contributing factors. However, the mortality advantage of Magnet hospitals also seems related to their membership in a network of institutions where innovation is encouraged through the ongoing process of Magnet redesignation. Dr McHugh notes, "This is the first study to suggest that the Magnet application process itself is an intervention that promotes better quality of care."

Dr Jeroan Allison, Editor-in-Chief of *Medical Care*, comments, "This large study makes an important contribution to an emerging literature attempting to understand what makes some hospitals superior in terms of patient outcomes they obtain, how to best manage hospitals, and whether or not the Magnet designation process as it now exists truly designates institutions where patients fare better."

Provided by Wolters Kluwer Health

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