Editorial

AMERICAN NURSES CREDENTIALING CENTER (ANCC) PATHWAY TO EXCELLENCE™ PROGRAM: ADDRESSING MEETING THE NEEDS OF SMALL AND RURAL

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Recently while attending the National Rural Health Association 32nd Annual Conference held in Miami Florida (May 5-8, 2009) I became aware of an important quality initiative offered by the American Nurses Credentialing Center at the organization’s exhibit: http://www.ruralhealthweb.org/. The program was developed by Texas Nurses Association to address the concerns of rural nurses; but, recently was purchased by the ANCC.

In 2003, the Texas Nurses Association (TNA) began work to positively affect nurse retention by improving the workplace for nurses and established the Nurse-Friendly™ designation of Texas Nurses Association: http://nfp.etxahec.org/. Well known name among rural nurses, Mary Wainwright, MSN at the East Texas Area Health Education Center (ETAHEC) played a leading role in developing, implementing and disseminating information about this Texas initiative: http://www.easttexasahec.org/.

The Nurse Friendly Program™ was partially funded with a five-year grant from the U.S. Health Resources and Services Administration (HRSA). The goal of this program was to improve both the quality of patient care and professional satisfaction of nurses working in rural and small hospitals in Texas. The first Nurse-Friendly™ hospitals were designated in May 2005.

From its inception TNA received many inquiries from other states about expansion of Nurse-Friendly hospital designation. TNA sought to transfer the program to a robust, collegial organization that could build on the program’s success, while assuring the program’s integrity as it was made available to facilities nationwide. Subsequently, from ANCC’s perspective, the high quality and superb reputation of the Texas Nurses Association Nurse-Friendly™ program made it a perfect addition to ANCC’s existing portfolio of credentialing activities and complimented the existing Magnet Hospital™ program. In 2007 ANCC acquired Nurse-Friendly designation of the Texas Nurses Association. Recently, in re-launching the Nurse-Friendly™ hospital designation to a national audience, ANCC renamed the program, as the Pathway to Excellence Program™: http://nursecredentialing.org/Pathway.aspx.

The Pathway to Excellence designation is granted to a facility based on the confirmed presence of characteristics known as “The Pathway to Excellence Criteria”. Based upon expert input and nursing literature, the Pathway to Excellence Standards represent qualities that both nurses and research evidence support as being important to the provision of the highest quality of patient care, nursing practice, professional development and job satisfaction, thereby encouraging retention of nurses. The following practice standards may be utilized to develop
policies and processes that demonstrate a commitment to a practice environment consistent with providing excellent patient care and raising job satisfaction among nurses (ANCC, 2008, p.6).

- Control of nursing practice
- Safety of the work environment
- Systems exist to address patient care concerns
- Nurse orientation
- Chief nursing officer
- Professional development
- Competitive wages
- Nurse recognition
- Balanced lifestyle
- Exemplary intradiscipline collaboration
- Leadership accountability
- Quality initiatives

According to Susan Sportsman PhD, RN, President of the Texas Nurses Association and Dean of the College of Health Sciences and Human Service at Midwestern State University (Wichita Falls, TX) (ANCC, 2008, p.6):

*The Practice Standards – which include strong nurse leadership, control of practice, and safety in the work environment for nurses and the patients for whom they advocate – are important components in providing quality patient care and nurse job satisfaction. When hospitals utilize the research-identified Practice Standards in their policies and practices they demonstrate a commitment to a practice environment that is consistent with quality patient care and nurse retention.*

The above criteria are integrated into operating policies, procedures, and management practices of all Pathway to Excellence-designated healthcare organizations. For an organization to earn the Pathway to Excellence designation, it must successfully undergo a thorough review process that documents foundational quality initiatives in creating a positive work environment—as defined by nurses and supported by research. Nurses in the organization verify the presence of the criteria in the organization through participation in a completely confidential online survey.

**Recommended Preliminary Organizational Self-assessment**

The first step in pursuing recognition as a Pathway to Excellence healthcare organization is an Organizational Self-Assessment. This assessment must be deliberate and honest if it is to serve as an organizational measure of whether or not to pursue the Pathway to Excellence.
Are all members of the nursing staff actively engaged in and aware of the Pathway to Excellence application?

Are staff nurses involved in decision-making and all phases of projects that affect nursing, including quality processes?

Is there evidence that a delineated nursing shared governance model is in place and integrated throughout the organization?

Is the development of policy/procedures evidence-based and are at least two of these being implemented?

Is there direct care nurse input on staffing plans and do they serve on nursing and hospital committees?

Are protective security measures in place for patients and staff?

Are prevention measures in place to decrease injury, illness, stress and accidents?

Do direct care nurses actively participate on safety committees and in product evaluation?

Are employee support structures in place for reporting and addressing work environment events or concerns?

Are supportive processes in the work environment perceived as restorative and/or holistic?

Are non-adversarial, non-retaliatory, and alternative dispute resolution mechanisms in place to address concerns about the professional practice of healthcare professionals?

Are there systems to assess quality of patient care as well as rights and culturally sensitive needs of patients?

Are error prevention and management procedures disseminated to all staff on an ongoing basis?

Do orientation activities incorporate general and specific mandatory training requirements?

Does nursing orientation involve a personalized plan with close supervision of the orientee/new nurse by peers and supervisors providing timely feedback.

Do staffing patterns accommodate the orientation activities of new nurses?

Is a cross orientation program in place if assigned to multiple staffing areas?

Are nurses provided education/training to serve as a preceptor and receive feedback?

Does the CNO have a BSN?

Is the CNO one of the following:
* Master’s prepared in nursing, business or a health related field
* Certified in management or administration
actively progressing under a written plan towards achievement of additional education/course work to meet above criteria?

Is the CNO accessible and an advocate to patients?

Is the CNO accessible and an advocate to nursing staff?

Is continuing education supported and geared toward the nurse’s roles and responsibilities?

Are there examples of development opportunities through mentoring of staff in both the clinical and administrative arenas?

Is there a process for nurses (i.e., nursing clinical ladder) that facilitates the development of competence, recognition and/or advancement.

Can we demonstrate that nurses’ wages and salaries are competitive, market adjusted and commensurate with education, expertise, experience and longevity?

Is incentive pay based on performance and goal achievement?

Are opportunities and rewards or incentives offered to nurses who serve as outstanding role models for exceptional service?

Do external entities, such as community and nursing organizations, recognize the nurses employed at the healthcare organization for the accomplishments and contribution to the community and/or profession?

Are flexible staffing options provided?

In addition to Employee Assistance Programs, are other health and wellness support services in place?

Are direct care nurses involved in developing their work schedule to meet organizational and personal needs?

Are mechanisms in place that foster and support collaborative interdisciplinary initiatives?

Are established procedures utilized to constructively manage interdisciplinary conflict?

Does the nurse manager participate in self evaluation, development, and achievement of predetermined goals?

Is the nurse manager able to describe examples in which s/he has advocated for patients and direct care nurses?

Do both staff and manager peers have input to manager’s/supervisor’s evaluation?

Is the nurse manager’s performance evaluated on outcome measures

Are incentives awards provided for nurse managers achieving outcomes beneficial to the patient and/or organization?

Is there a current, written nursing quality plan?

Do direct care nurses actively participate in outcome based quality initiatives?

Are evidence-based practices utilized by direct care nurses?
The ANCC Pathway designation is best suited for small and medium-sized healthcare organizations. However, the designation is attainable by all healthcare facilities around the world that desire to create work environments in which nurses can flourish. The award substantiates the professional satisfaction of nurses and identifies best places to work. An organization with the designation of Pathway to Excellence is committed to nurses, to what nurses identify as important to their practice, and to valuing nurses' contributions in the workplace. This designation confirms to the public that nurses working in a Pathway to Excellence organization know their efforts are supported. Finally, Kudos’s to Texas Nurses for their efforts in addressing the concerns of rural nurse in providing quality care to patients.

(Information about the Pathways to Excellence program can be found in the References.)

REFERENCES