**Magnet4Europe – Information for UK Hospitals (1 July 2020)**

**Aims**

Magnet4Europe is an interventional study aimed at redesigning and improving the clinical work environment to improve the mental health and wellbeing of hospital clinicians e.g. job satisfaction, burn-out, absenteeism, retention.

The purpose of the trial is to determine if redesign of hospital work environments guided by Magnet® principles [as described in the American Nursing Credentialing Center (ANCC) Magnet® Manual] and in collaboration with an experienced Magnet® designated hospital, is feasible, effective and sustainable in Europe, and whether it results in an improvement in workforce wellbeing.

Magnet4Europe will take place in six European countries, i.e. Belgium, Germany, Ireland, United Kingdom and Sweden. The objective is that within each of these 6 countries at least 12 general hospitals will enrol, resulting in 60 participating European hospitals in Magnet4Europe. A major aspect of this study design encompasses a 1:1 twinning of each European hospital with an internationally designated Magnet® hospital for guidance on implementation.

**The Magnet® Initiative**

The Forces of Magnetism serve as foundation for the current ANCC Magnet® model and are aimed at continuous improvement and innovation. The Magnet® model comprises five key components, i.e. (1) transformational leadership, (2) structural empowerment, (3) exemplary profession practice, (4) new knowledge, innovation and improvement supported by (5) empirical data. The Magnet® model of organisational redesign of clinical healthcare work environments has been proven to be effective in improving workers’ mental health, reducing burn-out and turnover and positively impacting productivity and economic results of hospitals1.

The American Nursing Credentialing Center (ANCC) controls all rights related to the Magnet® model and provides Magnet4Europe and the participating hospitals access to this knowledge and experience. To accommodate this unique relationship, a specific partnership and cooperation agreement between ANCC and the Magnet4Europe consortium is constructed.

*The Magnet intervention is a multicomponent intervention, comprising of the three key components.*

*1. Twinning with a designated Magnet® hospital:* Every participating European hospital will be paired with an internationally designated Magnet® hospital (twinning). The pairing of hospitals will be governed by a matching process that includes consideration of factors such as size, teaching status, and available specialities. Preference will be given to any existing hospital relationships or activities within a specific country. The ultimate goal is to obtain the optimal match between hospitals. Designated magnet® hospitals are experienced in the translation and implementation of the Magnet® principles into practice. The first part of the intervention comprises gap-analyses to provide insight in the as-is situation and the aspirational organizational features as delineated in the Magnet®blueprint. Subsequently an implementation plan will be developed allowing for spread and acculturation of the Magnet® principles within the hospital. At kick-off, we expect virtual meetings between the two twinning partners to take place in the respective European hospital, followed by monthly virtual meetings between the Magnet® hospital and the European hospital. Depending on the context (taking account of Covid-19 restrictions for example), there may be opportunity for the European hospitals to engage in a virtual visit to their twinning Magnet® partner in the USA. Each hospital has significant discretion to design the details of the scheduling of visits and virtual meetings, and composition of project teams in a manner that best meets the needs of both.

*2. European Learning Collaborative:* An annual European Learning collaborative will be hosted in one of the participating European countries, bringing together European hospitals with each other and exemplary Magnet® and Pathway® hospitals, as well as ANCC experts, international policy makers and academics from the participating universities within the Magnet4Europe consortium. Key elements of the learning collaborative are:

1. Learning sessions: allowing you - and other participating hospitals - to present your progress, share accomplishments, best practices, experiences, areas of challenge and discuss these with all participating Magnet®-partners, ANCC-experts and academics with exemplary knowledge regarding evidence-based change processes. This network encompasses a unique mix of skills and knowledge on magnet® implementation.
2. Action periods between Learning Sessions allow your hospital to work with your Magnet® twinning partner to test and implement changes in your local setting and collect data to measure the impact of those changes.
3. An online dedicated Magnet4Europe Collaborative Extranet is established. This secured online platform will allow for communicating and sharing information directly with your Magnet® twinning partner. It will serve as a secure web platform to provide information and networking opportunities and facilitate collaborative problem solving. Moreover, discussion boards, answers to frequently asked questions, a repository of literature and evidence-based practices to support improvement activities are provided here.

*3. International benchmarking:* Systematic data collection and exchange will be provided as described in the Magnet® Manual. You will be provided with an individual report specific to your hospital, allowing you to benchmark yourself with other (anonymised) participating hospitals. Moreover, your hospital will be provided with high quality (aggregated) data on clinician well-being, burnout and patient outcomes allowing to facilitate in any operational decision making.

**Research design**

Magnet4Europe is an intervention study where the effect of the intervention on outcomes will be studied. A multi-country, hospital-based, matched pair waitlist cluster randomized controlled trial design will be used in this study.

A first baseline measurement will take place within all participating hospitals prior to the start of the intervention (potentially autumn 2020). The first baseline measurement encompasses a sample of clinicians being surveyed with a questionnaire, which will be repeated annually for four years. The measurements will be organised in a manner requiring minimal time and effort (i.e. by means of a hospital specific online link where clinicians will be invited to participate).

Promptly following baseline measurement, all hospitals will be randomised in to two groups: group I (the immediate intervention group) will start the intervention set-up straight away and group II (the wait-list group) will start the intervention approximately 10-12 months later. The phasing of the start of the implementation between the two randomised groups inherently impacts the start of the twinning relationship with your paired Magnet® hospital. We understand that there may be well reasoned grounds for hospitals to start sooner or later with the intervention but ultimately the research team have to determine the groups, to ensure the integrity of the research design and allow for proper scientific evaluation. Hospitals in group II will go through the full intervention and will be provided with the accumulated experience and expertise, gained by group I.

The study will be submitted to an ethical committee for approval by the UK research team. It ensures commitment to ensuring that ensure all participating organisations and people are fully compliant with relevant European and national regulations, and with standards of practice defined by the participant hospitals’ ethics committees and R&D departments. Processing of personal data will respect relevant EU regulations (i.e. GDPR), all relevant national legislation and regulations and the specific regulations of the institutions in which trials will take place.

**Expectations towards participating hospitals**

The main expectation is that any participating hospital in the study is truly willing and engaged to effectively implement Magnet® related principles and interventions in the hospital. If there is no true intent to implement any of these principles, we dishearten participation in the Magnet4Europe study. The following items provide insight in the expectations towards participating hospitals:

1. Demonstrate readiness to effectively implement actions and interventions for change identified throughout gap analysis, in accordance to the Magnet® principles.

2. Stimulate and maintain an effective twinning relationship with your Magnet® designated hospital. For this purpose, the following elements are of importance:

1. Identify a designated Magnet4Europe team within your hospital, comprising of an intervention coordinator (estimated to involve 0.5 FTE) and an interdisciplinary Magnet4Europe coordination team to lead the initiative and guide implementation. The appointed coordinator within your hospital will also serve as principal contact with the Magnet4Europe research team. You have the full discretion to determine the most effective team, based on content expertise and size, within your hospital. There is no minimum or maximum number of team members.
2. Engage in biannual working sessions with your Magnet® designated twinning partner focused on gap-analysis and follow-up of the implementation. This can coincide with visiting or participation in the annual European Learning Collaborative, and may be virtual
3. Actively engage in monthly virtual meetings with the Magnet® twinning hospital to keep the momentum of collaboration going strong between the biannual site visits. These meetings should be structured in partnership with the Magnet® hospital and focus on identifying areas to improve based on Magnet® requirements and developing and implementing strategies to effectively make those changes.
4. Use the dedicated Magnet4Europe collaboration e-platform.

3. Attend and actively participate in the annual European Learning Collaborative with your designated Magnet4Europe team. The learning collaborative will serve as a booster to the individual twinning intervention component.

**Expected costs for participating hospitals**

All “research” related costs (i.e. evaluation of the effect) are entirely at the expense of Magnet4Europe study team and are funded by the European Union.

The cost related to the implementation of the Magnet® intervention are to be borne by the participating hospital (i.e. the time allocated to the intervention by the Magnet4Europe coordinator, implementation of specific interventions identified by the gap analysis, activities and initiatives undertaken in collaboration with your twinning partner).

Given the research context of the study, hospitals will be exempted from all the usual costs and charges associated with Magnet. The following will be provided free of charge: consultancy/advice, application fee for hospitals (charged by ANCC when application for Magnet®2 designation arises) appraiser costs related to on-site visits by the Magnet® partners. Participation in the European Learning Collaborative is also free of charge.

We expect that costs incurred by the Magnet® hospital for any face to face meeting or visit hosted by the European hospital (travel and lodging) would be borne by the host hospital. However, travel restrictions and our increased level of virtual working world-wide, as a resul6t of the Covid-19, may lead to more of the interactions between hospitals and their Magnet twins to happen on-line. Travel and lodging costs of your own staff l (e.g. to participate in any face to face meetings of the European Learning Collaborative, or visit the Magnet® hospital, etc.) would be at your own expense.

**The role of the Magnet4Europe consortium**

The ‘consortium’ are the researchers coordinating this study. The first and main responsibility of the research consortium is to evaluate if the redesign of clinical work environments in European hospitals based on the Magnet® principles as delineated in the ANCC Magnet® Manual leads to increased job satisfaction, reduced burn-out rates among clinicians and improved quality of care. This evaluation must take place under the best possible conditions. To accommodate this, an appropriate research design (i.e. a randomised design) is employed in combination with a scientific measurement cycle. Second, we aim to ensure that the implementation of this complex intervention can thrive in the best conditions possible (i.e. provide access to Magnet® manual, twinning with best Magnet® designated hospitals, organise European Learning Collaboratives, availability of an online Magnet4Europe extranet, provide periodical benchmark reports allowing hospitals so hospitals can compare and track change in implementation). Third, we will transform the scientific findings in policy recommendations.

**For more information:**

* Read the [Nursing Times article](https://www.nursingtimes.net/news/hospital/exclusive-new-european-study-overhauling-hospitals-for-nurse-wellbeing-24-02-2020/) and Interview with Jane Ball
* Contact the UK study director, Jane Ball [jane.ball@soton,.ac.uk](mailto:jane.ball@soton,.ac.uk), or phone on 07788 313170
* Signal interest and ask for more info and to be kept updated by contacting study researcher, Syd Anstee, [s.anstee@soton.ac.uk](mailto:s.anstee@soton.ac.uk)
* University of Southampton study page

[www.southampton.ac.uk/healthsciences/research/projects/magnet4europe-improving-mental-health-wellbeing-of-health-professionals.page](http://www.southampton.ac.uk/healthsciences/research/projects/magnet4europe-improving-mental-health-wellbeing-of-health-professionals.page)

**Magnet4Europe:**

* [www.magnet4europe.eu](http://www.magnet4europe.eu)