

AUBMC: The First "Magnet" institution in the Region

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Introduction

International recruitment and migration of nurses has been a growing feature of the global health agenda since the late 1990s². Nurses have always taken the opportunity to move across national borders in pursuit of new opportunities and better career prospects³, but in the last few years nurse migration appears to have grown significantly, with the potential to undermine attempts to achieve health system improvement in some developing countries.

Encouraging Retention

Research indicates that nurses are attracted to and retained at their work because of opportunities to develop professionally, to gain autonomy and to participate in decision-making, whilst being fairly rewarded^{4,5}. Workplace factors can be critical both in encouraging retention and in causing turnover of nurses^{6,7,8,9,10,11,12}. There is some evidence that a participative management style, flexible employment opportunities and access to continuing professional development can improve the retention of nursing staff as well as patient care^{13,14,15}. Many of these issues are addressed in the "magnet hospital" model which has developed over the last 20 years. The concept of the magnet hospital was developed initial-

ly in the 1980s in the United States¹⁶. At a time of staffing shortages, policy attention turned to identifying the characteristics of "successful" health care employers in challenging labor markets. The initial focus of that research was to identify the human resource practices and associated organizational characteristics that enabled these hospitals to attract and retain staff, even in difficult labor market conditions. Some of the key characteristics of successful hospitals were:

- Participatory and supportive management style,
- Well prepared and qualified nurse executives,
- Flexible working schedules,
- Clinical career opportunities,
- Emphasis on in-service/continuing education.

The idea of the magnet institution has been sustained and developed over the successive decades through a series of research studies¹⁷ and by the development of a magnet nursing services accreditation program¹⁸.

This and similar approaches are now being

investigated in several countries.

The main message from the various research studies is that "magnetism" does appear to be related to "better" staffing indicators, such as reduced turnover and absenteeism, and to improved quality of care. This has been attributed to the sustained implementation of a "bundle" of human resource



Poster announcing Magnet designation on facade of AUBMC building



Ms. Gladys Mouro receiving the call



A huge crowd celebrate AUBMC's Magnet recognition at Issam Fares Hall

management (HRM) interventions which fit with organizational priorities, and which support autonomous working by nurses, enable participation in decision making, facilitate career development and enable high level skills to be deployed effectively.

The Islamabad declaration on strengthening Nursing and Midwifery¹⁹ (March 07 2007) highlighted the following principles to address positive workplace environments:

- Employment practices that address workload, scheduling, necessary infrastructure and support systems and provide safe, secure working conditions are necessary to assure occupational health and patient and health care provider safety
- Workplace policies that assure gender equity, adequate employee compensation, recognition, professional development opportunities and continuing education are essential contributors to recruitment and retention of a committed, productive and efficient workforce
- Policy frameworks that support participatory decision making, autonomy, authority and accountability along with positive inter-disciplinary relationships and effective nursing and midwifery management are essential to creating and sustaining positive practice environments
- Positive practice environments are facilitated when nursing and midwifery leadership is part of, and actively involved, in all governance structures.

These principles have been adopted by the nursing leadership in the Eastern Mediterranean region of the World Health Organization and are being called for, adopted and pursued in member states of the Region, including Lebanon.

References

1 Dr Nabil Kronfol is a member of the Global Advisory Group on Nursing and Midwifery, World Health Organization.
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3 See e.g. Mejia et al. (1979).
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 18 American Nurses Credentialing Center (ANCC) (2003). *Magnet Nursing Service Recognition Program. Health Care Organizations Instructions and Application Profess Manual 2001-2002*. ANCC, Washington DC, USA.
 19 www.who.int/hrh/nursing_midwifery/en/ accessed July 29th 2009. This Conference was organized by the World Health Organization, the International Council of Nurses, the International Midwives Organization at the invitation of the Federal Government of Pakistan.