



2023 Magnet® Application Manual Source of Evidence Example – 2024 Pathway to Excellence® Manual Elements of Performance Crosswalk

(Magnet-Pathway Crosswalk)

In April 2018, the Commissions on Magnet Recognition Program® and Pathway to Excellence Program® completed an evaluation of each program's standards to determine if any conceptual relationships existed between required elements. Ongoing evaluations have occurred to align with each newly published manual. The evaluation of the 2023 Magnet to 2024 Pathway criteria resulted in nine (9) required Sources of Evidence (SOE) and 12 required Elements of Performance (EOP) that were determined, while uniquely different, to be highly correlated. The information and chart below describe each program's standard and the written documentation evidence requirements for applicant organizations pursuing either **dual designation** as Magnet-Recognized and Pathway to Excellence (PTE) or a **single designation** in one program and transitioning to the other.

Effective date of crosswalk: February 1, 2025

Current Dual designation

Organizations that are currently dually designated under the 2024 Pathway to Excellence Application Manual and 2023 Magnet Application Manual must follow each program's application and appraisal process. Applicants must address all requirements of the primary designation (designation expiring first) program's application manual. Applicants must also follow the secondary designation program's application process and the table below for required elements that may already be met through the dual designation process. This written documentation deemed status to select elements is applicable through one 4-year dual designation cycle.

Subsequent dual designations require organizations to fully address all standards of one program, alternating each designation cycle.

See example in Table 1.

Table 1. Example of current dual designation requirements

DUAL Designation #1	Designation expiring first: <i>PTE</i>	Re-designation: <i>Magnet Recognition</i>
Hospital XYZ	Address all PTE EOPs - Submit ODF	Address Magnet SOEs with exceptions per crosswalk table below - Submit DCCT
DUAL Designation #2	Designation expiring first: <i>Magnet</i>	Re-designation: <i>PTE</i>
Hospital ABC	Address Magnet SOEs - Submit DCCT	Address PTE EOPs with exceptions per crosswalk table below - Submit ODF

New Dual Designation (never held simultaneous designations)

Organizations that are currently designated as Pathway or Magnet-Recognized and desire dual designation must follow each program's application and appraisal process. The organization must be currently designated in one program at time of Written Documentation submission for the second program. Extensions are honored as per policy; however, if the first program's current designation expires, it is no longer a dual designation, and the applicant must address all standards as a single applicant for that program. The organization's current program designation must address all standards per that program's application manual. The second program's designation follows its program's application process and the table below for required standards that may already be met through the dual designation process. This by-pass approach to the written documentation phase standard is applicable through one 4-year dual designation cycle. Subsequent dual designations require organizations to fully address all standards of one program, alternating each designation cycle. See example in Table 2.

Table 2. Example of new dual designation requirements

DUAL Designation #1	Documentation Deadline	Current designation: Magnet
		Then apply for: <i>PTE</i>
Hospital XYZ	Must be currently designated in one program at time of document submission	Address all PTE EOPs with exceptions per crosswalk table below - Submit ODF

DUAL Designation #2	Documentation Deadline	Current designation: PTE Then apply for: <i>Magnet</i>
Hospital ABC	Must be currently designated in one program at time of document submission	Address Magnet SOEs with exceptions per crosswalk below - Submit DCCT

Subsequent Dual Designations

Each dually designated organization must follow the policies and requirements of each respective program. Failure to remain designated (e.g., voluntary withdrawal, failure to reapply, evidence of non-compliance) in one program does not limit the organization from continuing designation (as a single applicant) in the second program. The written documentation standards by-pass process outlined in the crosswalk table below is the single benefit to organizational applicants seeking dual designation. The other steps in the appraisal process for each program remain. Each Commission will determine designation based on the organization's proven ability to meet and sustain program requirements.

2023 Magnet Application Manual-2024 Pathway Application Manual Crosswalk Table

Topic	Pathway 2024 EOP (Element of Performance)	EOP	Evidence Requirements	SOE	Magnet 2023 (Source of Evidence)
mentoring	EOP 6.6 a. Describe how the organization fosters a mentoring environment. AND b. Provide a narrative written by a direct care nurse describing a specific mentor and how that relationship influenced the direct care nurse's professional growth. Include dates of the mentoring relationship within the required 36-month timeframe. AND	6.6	Proof of designation meets this standard for either program	TL9	TL9 Choose two of the following (one example must be from the ambulatory care setting, if applicable): a. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for clinical nurse(s). b. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for Nurse Manager(s). c. Provide one example, with supporting evidence, of an

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	c. Provide a narrative written by a non-direct care nurse describing a specific mentor and how that relationship influenced the non-direct care nurse's professional growth. Include dates of the mentoring relationship within the required 36-month timeframe.				individual mentoring plan or an established mentoring program for Nurse AVP(s)/Nurse Director(s). d. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for APRN(s). e. Provide one example, with supporting evidence, of an individual mentoring plan or an established mentoring program for CNOs.
succession planning	EOP 2.3 a. Describe how the organization uses succession planning to develop nurses for nursing leadership roles. AND b. Provide a narrative written by a nursing leadership team member describing how the nursing leadership team member benefited from the organization's leadership succession planning as described in EOP 2.3a. Include the date the nurse was impacted by the organization's leadership succession planning within the required 36-month timeframe. EOP 6.8 a. Describe how the organization fosters the growth of direct care	2.3 6.8	Proof of designation meets this standard for either program	TL10	TL10 Choose two of the following (one example must be from the ambulatory care setting, if applicable): a. Provide one example, with supporting evidence, of succession-planning activities for the Nurse Manager role. b. Provide one example, with supporting evidence, of succession-planning activities for the Nurse AVP/Nurse Director role. c. Provide one example, with supporting evidence, of succession-planning activities for the APRN role. d. Provide one example, with supporting evidence, of succession-planning activities for the CNO role.

Topic	Pathway 2024 EOP (Element of Performance)	EOP	Evidence Requirements	SOE	Magnet 2023 (Source of Evidence)
	nurses as emerging nurse leaders within or outside the organization. AND b. Provide a narrative by a direct care nurse describing how the organization fostered the direct care nurse's professional growth as an emerging nurse leader.				
transition to practice	EOP 6.2 a. Describe the strategy(ies), other than orientation, that the organization has in place for (1) newly graduated nurses and (2) newly hired experienced nurses to transition to practice. AND b. Provide a narrative written by a newly graduated nurse describing how the strategy(ies) described in EOP 6.2a prepared the newly graduated nurse to transition to practice. AND c. Provide a narrative written by a newly hired experienced nurse describing how the strategy(ies) described in EOP 6.2a prepared the newly hired experienced nurse to transition to practice.	6.2	National accreditation acceptable for PTE and Magnet. If not nationally accredited program, need to address EOP 6.2 and/or SE11.	SE11	SE11 a. Provide evidence of a nationally accredited transition to practice program. OR Select three examples; for each example, include narrative description of the five domains of the transition to practice program and evidence of quality outcomes to demonstrate the effectiveness of the selected transition to practice program. b. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program for new graduate nurse(s). c. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program of a newly hired experienced nurse into the nursing practice environment. d. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program of a nurse transferring within the

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					organization to a new nurse practice environment. e. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program of an APRN into the practice environment. f. Provide one example, with supporting evidence, that demonstrates the effectiveness of the transition to practice program of Nurse Managers into the new role.
community, population health	EOP 4.8 a. Describe the process the organization uses to (1) identify health disparities in the local community and (2) how the identified health disparities are addressed to contribute to improving population health. AND b. Provide one example of how a nurse's (nurses') contribution addressed a health disparity as identified through the process described in EOP 4.8a. Include the date of the contribution within the required 36-month timeframe. EOP 5.6 a. Describe how the organization (1) supports and (2) recognizes nurses' involvement in volunteer	4.8 5.6	Proof of designation meets this standard for either program.	SE12	SE12 a. Provide one example, with supporting evidence, of the organization's support of a nurse(s) who volunteer(s) in a local or regional community healthcare initiative which aligns with Healthy People 2030 or the United Nations' Sustainable Development Goals. AND b. Provide one example, with supporting evidence, of the organization's support of a clinical nurse(s) who volunteer(s) in a population health outreach initiative, either local or global.

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	activities that contribute to the nurse's own well-being. AND b. Provide a narrative written by a nurse that is in line with the support described in EOP 5.6a about the nurse's own experience with volunteer activity(ies), including (1) the activity, (2) the support from the organization, and (3) how it contributed to the nurse's own well-being. Include the date of activity(ies) within the required 36-month timeframe.				
interprofessional care coordination	EOP 3.8 Describe the process of how interprofessional decision-making is used to transition patients from one level of care to another.	3.8	Proof of designation meets this standard for either program.	EP6	EP6 Choose two of the following: a. Provide one example, with supporting evidence, of nurse's(s') participation in interprofessional collaborative practice to ensure coordination of care from an inpatient setting to an ambulatory care setting. b. Provide one example, with supporting evidence, of nurse's(s') participation in interprofessional collaborative practice to ensure coordination of care from an ambulatory care to an inpatient setting. c. Provide one example, with supporting evidence, of nurse's(s') participation in interprofessional collaborative practice to ensure coordination among multiple ambulatory care settings.
performance review	EOP 2.6	2.6	Magnet designation	EP13	EP13

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	a. Describe the process of how feedback from peers or direct report staff is incorporated into the performance evaluation of nurse managers. AND b. Provide Documented Evidence of a completed performance evaluation for a nurse manager that clearly identifies where feedback from peer(s) or direct report staff is included.		meets PTE EOP 2.6. Magnet applicants must address EP13.		Choose three of the following (one must be from ambulatory care setting, if applicable): a. Provide one example, with supporting evidence, of the use of periodic formal performance review that includes a self-appraisal, peer feedback process, and professional development goal(s) for a clinical nurse. b. Provide one example, with supporting evidence, of the use of periodic formal performance review that includes a self-appraisal, peer feedback process, and professional development goal(s) for a nurse manager. c. Provide one example, with supporting evidence, of the use of periodic formal performance review that includes a self-appraisal, peer feedback process, and professional development goal(s) for a nurse assistant vice president AVP)/nurse director. d. Provide one example, with supporting evidence, of the use of periodic formal performance review that includes a self-appraisal, peer feedback process, and professional development goal(s) for an advanced practice registered nurse (APRN).
decision authority	EOP 1.3 Provide one example of a direct care nurse(s)-led change in nursing practice that was the result of an initiative that used the shared	1.3	Proof of designation meets this standard for either program.	EP14	EP14 Provide one example, with supporting evidence, of clinical nurses having the autonomy to make nursing care decisions

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	decision-making structure described in the organizational overview. Include: 1. why the nursing practice change was recommended; 2. how that nursing practice change was based on published evidence; 3. a description of the new practice; 4. the impact of the new practice; 5. author, year, source, and title of bibliographical research finding, or evidence used to make this change; AND 6. the date the practice change was implemented within the required 36-month timeframe.				within the full scope of their nursing practice.
ethical concerns	EOP 1.5 a. Describe the interprofessional process that addresses how ethical concerns are managed within the organization. AND b. Provide a narrative written by a nurse who used the interprofessional processes described in EOP 1.5a for a situation that the nurse identified as an ethical concern. Include date the support processes were utilized within the required 36-month timeframe.	1.5	Proof of designation meets this standard for either program.	EP15	EP15 Provide one example, with supporting evidence, of nurse(s), as participant(s) of an interprofessional team, applying available resources to address ethical issues related to clinical practice.
EBP implementation	EOP 4.3	4.3 4.4	Proof of designation	NK5	NK5

Topic	Pathway 2024 EOP (Element of Performance)	EOP	Evidence Requirements	SOE	Magnet 2023 (Source of Evidence)
	a. Describe educational opportunity(ies) regarding the application of evidence-based practice provided by the organization for (1) direct care nurses and (2) nurse managers. AND b. Describe how nurse managers promote a culture where direct care nurses can apply evidence-based practice. EOP 4.4 Provide one example demonstrating how a nurse(s) implemented evidence-based practice in a patient care area(s). Include (1) the date the example was implemented within the required 36-month timeframe and (2) the author, year, source, and title of bibliographical reference(s) used for the evidence-based practice implementation used.		meets this standard for either program.		Two examples are required (one must be from ambulatory care setting, if applicable). a. Provide one example, with supporting evidence, of how a clinical nurse(s) implemented an evidence-based practice that is new or a revision to existing practice within the organization. AND b. Provide one example, with supporting evidence, of how a clinical nurse(s) implemented an evidence-based practice that is new or a revision to existing practice in an ambulatory care within the organization.