

Magnet Recognition Program®

Applicant User Manual

Applicant User Manual

Overview

This User Manual provides detailed instructions with step-by-step guidance to Magnet applicants who would like to register and submit an application. Users will gain knowledge of various interface elements and their functions. Applicants will be able to review and manage important documents and submit necessary payments.

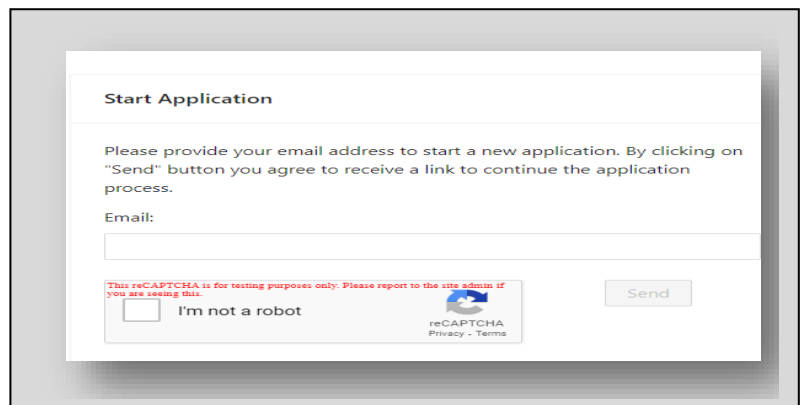
Users will find valuable information throughout this manual for individual and group learning. The OARS2 System has been designed to provide consistency across all modules and programs to ensure a cohesive and User-friendly experience.

Pre-Registration

Pre-registration Page

The applicant or an applicant representative can pre-register their organization through the organization's registration page.

1. Click [here](#) to access OARS2 (via nursingworld.org)
2. Follow the prompts on the Registration Page
3. Insert Email Address, Check "I am not a robot," and Hit Send.
4. A Verification Code will be sent to the email address provided in Step 3. The verification code will expire 15 minutes after the email has been received.
Note: if your verification code expires before you can use it, you must restart the process.
5. Retrieve and Enter the verification code in the space provided and Hit Next.



Start Application

Please provide your email address to start a new application. By clicking on "Send" button you agree to receive a link to continue the application process.

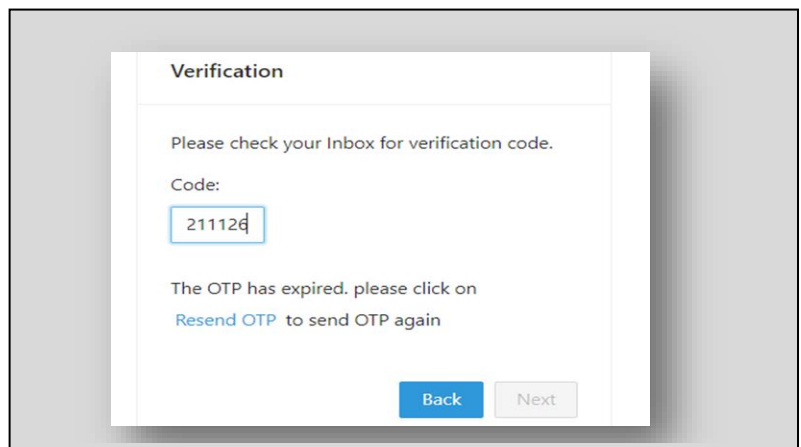
Email:

This reCAPTCHA is for testing purposes only. Please report to the site admin if you are seeing this.

☐ I'm not a robot

reCAPTCHA Privacy - Terms

Send



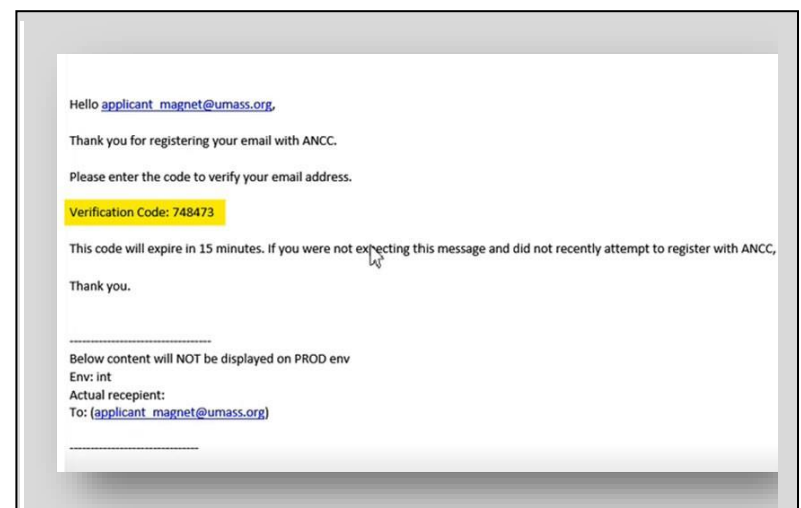
Verification

Please check your Inbox for verification code.

Code:

The OTP has expired, please click on [Resend OTP](#) to send OTP again

Back Next



Hello [applicant_magnet@umass.org](#),

Thank you for registering your email with ANCC.

Please enter the code to verify your email address.

Verification Code: 748473

This code will expire in 15 minutes. If you were not expecting this message and did not recently attempt to register with ANCC, Thank you.

Below content will NOT be displayed on PROD env

Env: int

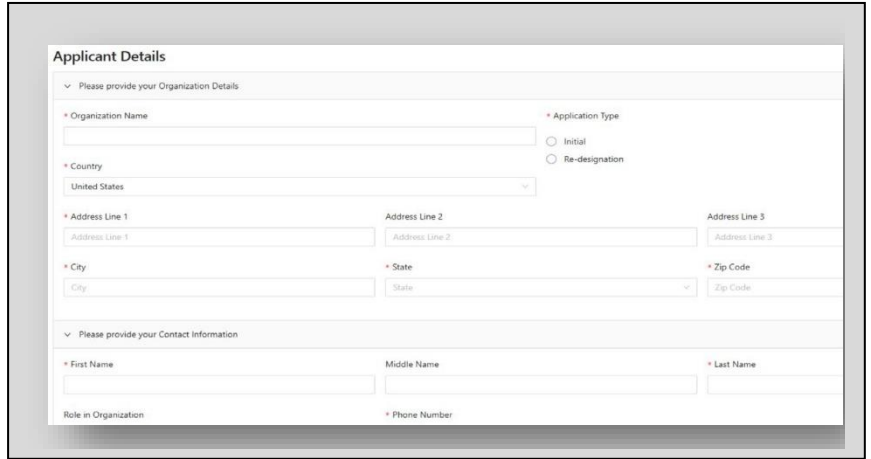
Actual recipient:

To: ([applicant_magnet@umass.org](#))

Applicant Details

The User will see an online registration form, which must be completed.

1. *Enter Organization Full Name*
(Refrain from using acronyms or initials)
2. *Select Application Type*
 - Initial (New Applicant)
 - Redesignation (Existing Applicant)
3. *Enter Country/Region*
4. *Enter Full Address*
5. *Enter Phone Number*
6. *Enter Contact Information*
7. *Click Submit*



The screenshot shows the 'Applicant Details' form. It is divided into two main sections: 'Please provide your Organization Details' and 'Please provide your Contact Information'. The first section includes fields for Organization Name, Country (a dropdown menu currently showing 'United States'), Address Line 1, Address Line 2, Address Line 3, City, State (a dropdown menu), and Zip Code. There are also radio buttons for 'Application Type' with options 'Initial' and 'Re-designation'. The second section includes fields for First Name, Middle Name, Last Name, Role in Organization, and Phone Number. All mandatory fields are indicated by an asterisk (*).

Congratulations! You have successfully submitted your registration request and should now see a Confirmation Page with information about the next steps.

Registration Approval

Registration Approval and Application Onboarding

Once your registration has been approved, you will receive a "Registration Approved" email containing your username and temporary password.

1. Click the website displayed in the email <https://magnet.nursingworld.org/>
2. *Insert* your Login Credentials, also located in the email, and *Click* the Login.
3. Follow the prompt to reset your password.
4. An "Important Announcements" page will appear.
5. *Select* "Continue Application" to proceed.

Application

Instructions

The Instructions tab will appear once you've successfully logged into the OARS system. Each stage of the application will be presented as a Step Wizard. All mandatory fields are required to successfully complete each section. The "X" indicates one or more mandatory fields have not been completed.

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1. You will be able to navigate through each section of the form by clicking the Continue button or selecting a button on the Step Wizard.
2. Data entered is saved in the respective fields as it is entered.
3. You will be able to see the section you are currently working in within the Step Wizard.

Magnet Application Form:

1. Instructions
2. Org Name and Location
3. General Information
4. Chief Nursing Officer
5. Primary Magnet Program Director
6. Secondary Magnet Program Director
7. Supporting Documents
8. Statement of Understanding
9. Review & Submit Application

Org Name and Location

Specific fields will be automatically populated from the Pre-registration page and will be non-editable. There will be options for some of the data to be updated and saved in the application.

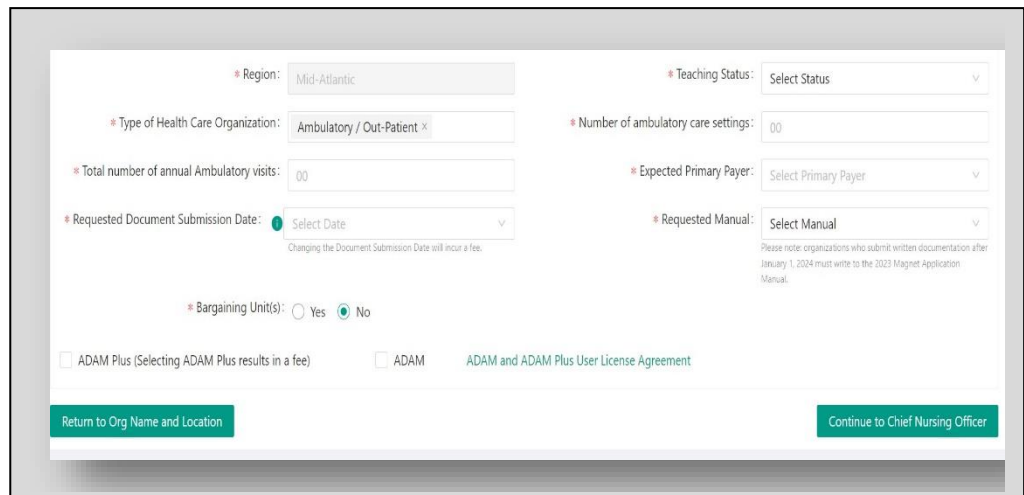
General Information

Legacy Health Care System: To determine your organization's status, please review the 2023 Manual.

Region: Your organization's region is determined by its location. If the organization is outside of the United States, the region will be displayed as "International".

Type of Health Care Organization: One of two forms will appear, based on the organization's selection type.

If Ambulatory / Out-Patient is selected, this form will display.



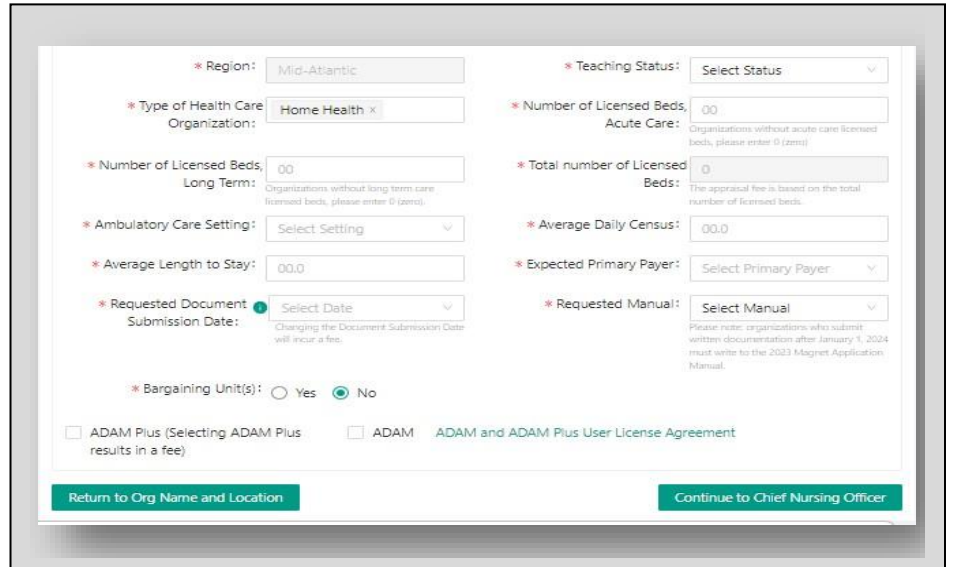
The screenshot displays the Magnet Application Form for Ambulatory / Out-Patient organizations. The form includes the following fields and options:

- Region:** Mid-Atlantic
- Teaching Status:** Select Status
- Type of Health Care Organization:** Ambulatory / Out-Patient
- Number of ambulatory care settings:** 00
- Total number of annual Ambulatory visits:** 00
- Expected Primary Payer:** Select Primary Payer
- Requested Document Submission Date:** Select Date (with a note: "Changing the Document Submission Date will incur a fee.")
- Requested Manual:** Select Manual (with a note: "Please note: organizations who submit written documentation after January 1, 2024 must write to the 2023 Magnet Application Manual.")
- Bargaining Unit(s):** Yes (radio button) / No (radio button, selected)
- ADAM Plus (Selecting ADAM Plus results in a fee):** ☐ ADAM Plus ☐ ADAM ☐ ADAM and ADAM Plus User License Agreement

At the bottom of the form, there are two buttons: "Return to Org Name and Location" and "Continue to Chief Nursing Officer".

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This form will appear for all other selected types.



The screenshot shows a web form for the Magnet Application. It includes the following fields and options:

- Region:** Mid-Atlantic
- Type of Health Care Organization:** Home Health x
- Number of Licensed Beds, Long Term:** 00 (Note: Organizations without long term care licensed beds, please enter 0 (zero).)
- Ambulatory Care Setting:** Select Setting
- Average Length to Stay:** 00.0
- Requested Document Submission Date:** Select Date (Note: Changing the Document Submission Date will incur a fee.)
- Teaching Status:** Select Status
- Number of Licensed Beds, Acute Care:** 00 (Note: Organizations without acute care licensed beds, please enter 0 (zero).)
- Total number of Licensed Beds:** 0 (Note: The appraisal fee is based on the total number of licensed beds.)
- Average Daily Census:** 00.0
- Expected Primary Payer:** Select Primary Payer
- Requested Manual:** Select Manual (Note: Please note: organizations who submit written documentation after January 1, 2024 must write to the 2023 Magnet Application Manual.)
- Bargaining Unit(s):** ☐ Yes ☒ No
- ☐ ADAM Plus (Selecting ADAM Plus results in a fee) ☐ ADAM ☒ ADAM and ADAM Plus User License Agreement

At the bottom, there are two buttons: "Return to Org Name and Location" and "Continue to Chief Nursing Officer".

Chief Nursing Officer

Enter the CNO's email address and *Select* the search button. If there is a matching email within the system, you can verify and accept the information. If there is no match, you will be prompted to complete form.

Primary Magnet Program Director

Enter the Primary MPD's email address and *Select* the search button. If there is a matching email within the system, you can verify and accept the information. If there is no match, you will be prompted to complete form.

Secondary Magnet Program Director (Optional)

Enter the Secondary MPD email address and *Select* the search button. If there is a matching email within the system, you can verify and accept the information. If there is no match, you will be prompted to complete form.

Supporting Documents

The supporting documents page displays the file upload guidelines and allows you to upload documents.

1. Click Upload Additional Supporting Documents Tab
2. Choose File to open a dialog window and upload the file.
3. Choose Description in the drop-down menu.
4. Add Additional Info (Optional)
5. Hit Save (Required to save uploads)
6. Uploaded files will appear in the 'Supporting Documents' window.

Required Supporting Document

1. CNO CV
2. Facility Org Chart
3. Nursing Org Chart
4. Externally managed databases
5. IRB attestation letter
6. Nurse Leadership Education and Reporting Table
7. List of campuses

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Additional Notes:

- Max file size per upload - 60MB
- Max file size name - 255 characters
- File Formats: Word, PDF, PPT, Excel
- At least 1 file should be uploaded for each document.

Upload Additional Supporting Documents				
Date and Time	Document Name	Description	Additional Info	Modified by
10/31/2022 6:22:25 PM	2mb.pdf	CNO CV	test	Shelley Farrow
10/31/2022 6:23:03 PM	2mb.pdf	Facility Org Chart	test2	Shelley Farrow
10/31/2022 6:23:25 PM	2mb.pdf	Nursing Org Chart	test3	Shelley Farrow
10/31/2022 6:23:54 PM	2mb.pdf	Externally managed databases	test4	Shelley Farrow
10/31/2022 6:24:20 PM	2mb.pdf	IRB attestation letter	test5	Shelley Farrow
10/31/2022 6:24:52 PM	2mb.pdf	Nurse Leadership Education and Reporting Table	test6	Shelley Farrow
10/31/2022 6:25:24 PM	2mb.pdf	List of campuses	test7	Shelley Farrow

Return to System MPD

Statement of Understanding

The CNO must review and submit the Statement of Understanding, indicating that they have reviewed, understands, and complies with all the Magnet Recognition Program's® eligibility requirements.

1. Click the checkbox.
2. Click and Sign the Statement of Understanding.
3. A DocuSign page will appear, and the SOU will be visible.
4. The CNO must sign the electronic document.
5. Once the SOU is signed, the User will return to the 'Statement of Understanding' page.

Statement of Understanding

Please complete Statement of Understanding

The Chief Nursing Officer's signature indicates that the Chief Nursing Officer has reviewed, understands, and is in current manual, has also reviewed and understands the Magnet Recognition Program review process and the non-ground for denial of the application at any point during the review process or whenever this information is discovered individual units/wards/clinics and or departments possess at least a baccalaureate degree in nursing upon submission will allow the MPO to use all data and submitted narratives for research purposes, and if Magnet Recognition standards best practices and exemplars identified in the documents submitted in the Magnet Learning Community™ website

Documentation must be original work: All evidence produced in the written documentation or displayed during a presentation editor/writer, due diligence should be undertaken to include a statement of work that clearly states that only original information copied from another organization's documentation and placed in the applicant organization's documentation

☐ I have read and understand the above statement Date: 3/16/2023

CNO/Director of Nursing must sign the following Statement of Understanding before submitting the application.

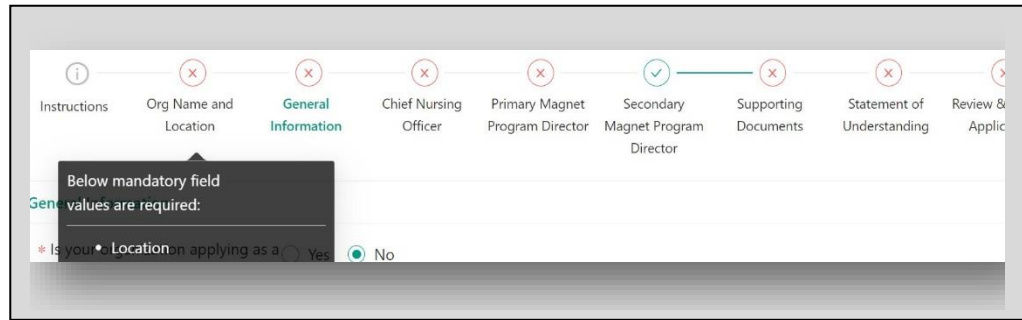
[Click here to sign](#)

Review & Submit Application

You may review your entire application before submitting it for approval. The system will alert the User if there's missing information in a required field. If this happens, return to the section with a red "X" and add the missing information.

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1. Once all required information has been provided, the application is ready to be submitted.
2. Once the application has been submitted, the User can return to the dashboard.
3. If additional documentation is required, the CNO will receive a notification that an update has been placed in the Notes section.



The screenshot shows a progress bar with steps: Instructions, Org Name and Location, General Information, Chief Nursing Officer, Primary Magnet Program Director, Secondary Magnet Program Director, Supporting Documents, Statement of Understanding, and Review & Application. The 'General Information' step is highlighted with a green checkmark, while others have red 'X' marks. A modal box displays the error: 'Below mandatory field General values are required:'. Below the modal, there is a question: 'Is your Location on applying as a' followed by 'Yes' and 'No' radio buttons, with 'No' selected.

Reminder: Review the Notes section periodically for updates.

Invoice

Invoice

Within seven to ten (7-10) business days of applying, the CNO will receive an email notification regarding your Magnet Application Fee and Invoice. The Magnet Program Office must receive your organization's payment before your application can be approved. Follow the steps below to access your organization's invoice.

1. *Select* the "Invoice" tab from the Main Menu
2. *Click* the Invoice History Page to display the previous invoices.
3. *Navigate* to the current Invoice.
4. *Select* the "View/Pay" icon to submit a payment.
5. *Select* your choice of payment and follow the payment prompts.
 - Check
 - eCheck
 - Credit Card (*currently unavailable*)

Note: Select the "View Invoice" button to view and download a copy of the invoice.

Invoice Details

1. Organization Name
2. Application Number
3. Product Name
4. Sent Date
5. Paid Date
6. Status
7. Amount Due
8. Review Cycle
9. Payment Type
10. Action Column
11. View/Pay Icon (Displays the organization's invoice details)

Please contact the following with any questions, concerns, or issues regarding the OARS2 System.

1-800-284-2378 or customerservice@ana.org or Magnet – magnetapplications@ana.org