

Beacon Award for Excellence







Contents

About AACN & Beacon Award	4
Acknowledgments	5
Executive Summary	7
Beacon Award Value	
Influence and Recognition	7
Recruitment and Retention	8
Credibility	8
Beacon Award for Excellence - Reimagined	8
Our Logo	9
Making an Impact on Healthcare	9
AACN shapes nursing and the healthcare system.	
Work environments are healthy.	10
Nurses make their optimal contribution.	11
Patients receive optimal care	12
Participating in the Beacon Award for Excellence Program	
Beacon Award Application	
Patient Outcomes	13
Quantitative Data Measures	13
Process Measures	13
HWEAT Scores	
Qualitative Exemplars	13



Work Environment	14
Quantitative Data Measures	14
Process Measures	14
HWEAT Scores	
Qualitative Exemplars	14
Nursing Workforce	15
Quantitative Data Measures	15
Process Measures	15
HWEAT Scores	
Qualitative Exemplars	
Beacon Award Evaluation Framework	16
Measure Level	16
Dimension Level	16
Module Level	17
Award Level	17
Audits	17
Recognition	18
Determining Your Level of Participation	18
Applicants From International Hospitals	18
Beacon Award Annual Cycle	19
Pricing	20
Demographic Questions	20
Beacon Program Comparisons	
Peferences	22



About AACN & Beacon Award

AACN Mission

AACN drives excellence in acute and critical care for nurses, patients and families.

AACN Vision

AACN is dedicated to creating a healthcare system driven by the needs of patients and families where acute and critical care nurses make their optimal contribution.

AACN Values

As AACN works to promote its mission and vision, it is guided by values that are rooted in and arise from the Association's rich history, traditions and culture. Our values are the foundation upon which we build our relentless pursuit of excellence. AACN's members, volunteers and staff will honor the following:

- 1. Integrity We demonstrate sound judgment, ethical behavior and accountability in all we do.
- 2. Inclusion We build an equitable culture, inviting the full contribution of all people.
- **3. Transformation** We drive change and innovation to positively impact the healthcare system and improve the lives of patients, families and nurses.
- **4.** Leadership We advocate and influence to achieve optimal outcomes and healthy work environments.
- **5. Relationships** We collaborate and advance partnerships, honoring each individual to strengthen the collective.

Beacon Award Program Mission

The Beacon Award provides unit-based recognition to nurses for their unwavering commitment to enhancing nursing practice and providing exceptional patient care in a nurturing and supportive work environment.

Beacon Award Program Vision

The Beacon Award provides nurses with the knowledge to improve outcomes that influence both patient care and the overall work environment, fostering a culture of continual improvement and excellence in healthcare.

Beacon Award Program Goals

- 1. Recognize Unit Achievement
 - a. Excellence in units or teams that provide patients with acute, progressive and critical care services
 - b. Successful performance in quality measures, processes, structures and outcomes based on evidence
 - c. Collaboration, communication and partnerships that support equity, diversity and inclusion in a healing environment
- 2. Contribute to AACN's mission, vision, values and strategic plan as evidenced in the AACN annual report



Acknowledgments

The American Association of Critical-Care Nurses (AACN) is grateful to the experts who have contributed to the development of the Beacon Award for Excellence (Beacon Award) application and evaluation framework. Their expertise and experience with the program are crucial to the program's continual evolution to ensure the Beacon Award is relevant and based on current evidence and trends in healthcare.

Selected for their diversity of roles, perspectives, geographic locations, knowledge and counsel, they were instrumental to AACN in making this important contribution to establishing the standards for acute, progressive and critical care at the unit level.

A special thank you to the institutions that supported participants in this work along with providing unit data to support design and content validity.

Editor and Project Coordinator

Michelle Sanchez, MSN, RN, CPHQ, CENP, Beacon Award Program Manager, Practice Excellence, American Association of Critical-Care Nurses, Aliso Viejo, CA

Contributing Editor and Task Force Chair

Andrea Schmitt, MSN, RN, CCRN-K, NPD-BC, Clinical Practice Specialist, Beacon Award Program, Practice Excellence, American Association of Critical-Care Nurses, Aliso Viejo, CA

Contributors

Connie Barden, MSN, RN, CCRN-K, FAAN, Chief Clinical Officer (retired), American Association of Critical-Care Nurses, Aliso Viejo, CA

Tracey Birosak, MBA, Product Portfolio Manager, American Association of Critical-Care Nurses, Aliso Viejo, CA

Devin Bowers, DNP, RN, NE-BC, Director of Practice Excellence, American Association of Critical-Care Nurses, Aliso Viejo, CA

Sarah Delgado, DNP, RN, ACNP, Clinical Practice Specialist, Strategic Advocacy, American Association of Critical-Care Nurses, Aliso Viejo, CA

Caryl Goodyear, PhD, RN, NEA-BC, CCRN-K, FAAN, Chair, School of Nursing, and Director, Nursing Partnerships, School of Nursing, Avila University, Kansas City, MO

Brad Gottschalk, Community Insights Analyst, American Association of Critical-Care Nurses, Aliso Viejo, CA

Nina Merchant-Kunciewicki, MPA, Community Insights and Analytics Manager, American Association of Critical-Care Nurses, Aliso Viejo, CA

Jennifer Nelson, BSN, RN, CCRN-K, Clinical Practice Specialist, Clinical Scene Investigator Academy, Practice Excellence, American Association of Critical-Care Nurses, Aliso Viejo, CA

Laurali Uxa, Beacon Program Coordinator, American Association of Critical-Care Nurses, Aliso Viejo, CA



Production Coordinators

Monica Garcia, MA, Community Impact Project Manager, American Association of Critical-Care Nurses, Aliso Viejo, CA

Nicole Pacholl, BA, Project Manager,

American Association of Critical-Care Nurses, Aliso Viejo, CA

Editorial Contributors

Jeremy Stevens, BA, Marketing Communications Specialist, American Association of Critical-Care Nurses, Aliso Viejo, CA

Judy Wilkin, BA, Associate Editor, Communications, American Association of Critical-Care Nurses, Aliso Viejo, CA

Graphic Design

Deborah DeLisi, Sr. Designer,

American Association of Critical-Care Nurses, Aliso Viejo, CA

Christie DeSanctis, Design Specialist,

American Association of Critical-Care Nurses, Aliso Viejo, CA

Andrea Testa, Sr. Designer,

American Association of Critical-Care Nurses, Aliso Viejo, CA

Task Force Members

Kayleigh Dodds, BSN, RN, CCRN-CMC, TCRN

Jennifer Elbrichi, MSN, RN, CCRN, CSC

Alvin Jeffery, PhD, RN, CCRN-K, FNP-BC

Deborah Laughon, MSN-ED, DBA, CENP, CCRN-K

Vicki Lindgren, MSN, RN, CNS, CCRN (retired), CCNS

Megan Money, DNP, MBA, RN, PCCN, NE-BC

Annie Payne, DNP, APRN, CCNS, CSSBB, CAPM

Lesley Rehak, MSN, RN, CCRN-K, NE-BC

Katie Schatz, MSN, ARNP, ACHPN

Whitney Staub-Juergens, DNP-HSL, MSN, RN, CCRN-K, NE-BC

Martha E. Turk, MSN, RN, CCRN-K

Denise White, MSN, RN, CCRN, CPHQ, GC-C

Board Liaison

Anna Dermenchyan, PhD, RN, CCRN-K, CPHQ



Executive Summary

As nurses, we frequently discuss the importance of excellence in our practice, patient care and profession. Pursuing excellence can lead us on various paths, such as continuing education, professional growth, certification and achieving a better work-life balance.

In healthcare organizations, excellence is the sum of many complex parts. To recognize excellence at the unit level, where direct care nurses have the greatest impact on outcomes, the American Association of Critical-Care Nurses (AACN) established the Beacon Award for Excellence (Beacon Award) in 2003. As the undisputed leader in acute, progressive and critical care nursing, AACN possesses the knowledge and data to set the standard for acute and critical care nursing and the environments where this care is provided. When the Beacon Award program began, AACN aspired to provide hospitals and healthcare systems with a way to respond to increasing concerns about quality and safety and to monitor the evolution of clinical care. Disseminating data insights and trends to key partners and influencers supports shared learning from Beacon Award participants to improve patient care.

For patients and their families, the Beacon Award signifies exceptional care in a unit that puts them first.

For nurses, this award can mean a positive and supportive work environment with greater collaboration, higher morale and lower turnover (Ulrich B, Cassidy L, Barden C, Varn-Davis N, Delgado S, 2022). Every unit uses innovation and implementation science to improve outcomes; the Beacon Award application allows your unit to showcase its accomplishments and be recognized for them. As individual units strive for excellence, the Beacon Award program's three levels of designation – bronze, silver and gold – recognize significant milestones along the unit's journey to excellence.

Beacon Award Value

AACN provides qualifying units with meaningful recognition and feedback to support their ongoing improvement. In addition, units that have been recognized with a Beacon Award report the following:

Influence and Recognition

Units that receive the Beacon Award set the standard for excellence in patient care environments by collecting and using evidence-based information to improve patient outcomes, as well as patient, family and staff satisfaction. Patient safety and quality programs, along with other recognition programs, regard the Beacon Award as a significant achievement in their evaluation process.



Recruitment and Retention

Prospective employees consider the Beacon Award an indicator of a healthy work environment and a place where the quality of care is tied directly to the quality of staff. Nurses who work in these units know their skills and expertise are appreciated and valued. This appreciation, in turn, boosts retention and employee engagement while attracting new staff.

Credibility

Consumers, who now pay close attention to quality of care when making decisions about their healthcare, consider Beacon Award recognition when choosing a hospital for treatment.

Beacon Award for Excellence - Reimagined

Since AACN believes excellence is a continual journey, the Beacon Award program evolves alongside the dynamic healthcare environment, which is influenced by changes in evidence, practice, regulation and operations.

The experiences of applicants, awardees, reviewers and AACN staff led to the current philosophy and structure of the program. It is recognized that units and facilities influence performance based on the methods and initiatives to support nurses in providing optimal care and ensuring a healthy work environment. When assessing nursing excellence, AACN believes the outcomes achieved are as important as the methods used to achieve them.

Using a robust data-driven approach, AACN has validated the outcomes, unit processes and team characteristics, which have a profound impact on nursing excellence based on the research, current industry standards and input from AACN subject matter experts and community members.

The program design focuses on the stories that showcase excellence in your unit while standardizing the collection of data from process measures, including the AACN Healthy Work Environment Assessment Tool (HWEAT).

The Beacon Award program encourages units at all stages on their journey toward excellence to engage with AACN to support continual measurement and improvement.

When a unit partners with AACN through the Beacon Award program, in addition to meaningful recognition, they receive valuable feedback from their application and recommendations for improvement using current evidence and best practices.



Our Logo

The new Beacon Award program logo reflects the progression of the program. The graphic representation of a beacon of light, or sun, is dimensional, uplifting and radiant. The Beacon Award guides nursing units on their journey toward excellence by measuring their successes. For participants, it illuminates the path for those on a journey, so that obstacles are seen, identified and overcome.

The colors in the light ray represent the spectrum from night to day. From the darkness of unexpected events that challenge a unit to the successes gained from implementing forward-thinking strategies, the spectrum represents a unit's experiences and its 24-hour operations. This symbolism extends to each nurse individually and to the unit collectively.

The bold font is symbolic of a unit taking pride and ownership, announcing their achievement with dignity and assurance. The traditional "Beacon blue" color is carried into the new logo; reinforcing evolution, not reinvention.



Making an Impact on Healthcare

AACN strives to improve healthcare by helping nurses influence and improve patient safety, outcomes and healthy work environments. We believe patient safety is better achieved when nurses advocate for changes to the healthcare system that improve the delivery of patient care. Consumers believe this too, as evidenced in the <u>Gallup Poll</u> that measures how Americans view the honesty and ethics of professions. Nurses have been rated as having the highest ethical standards year over year (Brenan, 2023).



AACN uses **four impacts** to drive the work of the Association. Healthcare facilities strive to achieve the same four impacts in their daily operations. Participating in the AACN Beacon Award program is an example of how work at the unit level can have a significant effect on the hospital and health system. Having multiple units participate in the program extends the ability to appreciate these outcomes on a broader scale. Next, we'll describe the connection between these areas and the Beacon Award.

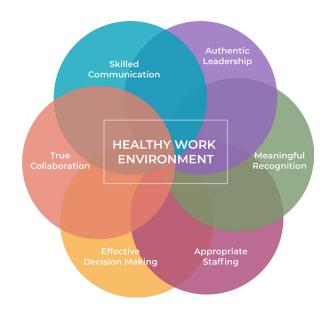


AACN shapes nursing and the healthcare system.

In addition to providing meaningful recognition for units and their staff, the Beacon Award program serves as one of AACN's platforms to gather data for setting standards of excellence. In the application, units demonstrate how they use implementation science and process improvements to achieve optimal outcomes. Nurses lead and collaborate with interdisciplinary teams to improve overall patient outcomes to reach the standards of excellence set by AACN, regulatory organizations or other industry leaders. All units that participate in the Beacon Award program describe improvements that shape their practice, processes and outcomes.

Work environments are healthy.

Having a healthy work environment is a necessary foundation for providing highquality patient care.



AACN has established six essential Healthy Work Environment (HWE) standards that produce effective and sustainable outcomes for patients and nurses.

Elements of the HWE standards have always been integrated into the application and evaluation framework for the Beacon Award, and now this connection has been formalized in the application process. In the process of applying for Beacon, units begin by assessing the health of their work environment using the <u>AACN Healthy Work Environment Assessment Tool</u> (HWEAT) and use the information to implement changes based on the HWE standards. Nurses in units applying for or that have been recognized with a Beacon Award report healthier work environments and higher quality of patient care (Ulrich, Cassidy, Barden, Varn-Davis, Delgado, 2022).



Nurses make their optimal contribution.

Inappropriate nurse staffing is a persistent and significant barrier to delivering optimal patient care and one of the most dangerous threats to patient safety and nurse well-being. In partnership with the American Nurses Association, American Organization for Nursing Leadership, Healthcare Financial Management Association and the Institute for Healthcare Improvement, AACN led an initiative to identify strategies that address the staffing crisis in acute and critical care. AACN convened Partners for Nurse Staffing, which launched a Nurse Staffing Think Tank and Nurse Staffing Task Force. Together, this group created new staffing solutions that advance patient outcomes while ensuring a better work environment for nurses and all other members of the healthcare team.

The Beacon Award application is an opportunity for units to showcase how nurses make their optimal contributions and what outcomes result from their contributions. Several areas reflect this approach, including:

- Maximizing nurses' roles considering:
 - · Individual scope of practice
 - Education and preparation of individual nurses
 - · Regulatory requirements
- Aligning patient needs and nurse competencies
- · Providing meaningful recognition
- · Ensuring quality, safety and satisfaction
- Orienting and validating competencies
- Establishing a personal and professional learning and development structure
- Resolving ethical issues and moral distress
- Collaborating with others to provide patient care

Nurses' collective experiences prepare and position them to lead innovation and change management to improve areas of opportunity. Participating in the Beacon Award program creates a pathway to encourage all nurses to improve their work environments and the care of patients and families.

As units share their successes and learnings, these improvements can be expanded across the hospital and health system.





Patients receive optimal care.

The best patient care delivery can be achieved when there is a commitment from hospital leaders to partner with all staff to identify and address challenges. Creating a culture that supports change requires empowering and engaging nurses to use their expertise to advocate and implement what is best for their patients. Through education, innovation and standard setting, AACN sets the bar for the care of patients and families. While other organizations offer resources designed for nurse leaders, the Beacon Award program is a collaborative approach between unit leaders and staff to improve the care and experiences of everyone on the unit.

Participating in the Beacon Award for Excellence Program

Beacon Award Application

The comprehensive Beacon Award program modules reflect the areas in which nurses have the most significant influence on healthcare: Patient Outcomes, Work Environment and Nursing Workforce.

Each module helps units share the processes used by direct care nurses, nurse leaders and collaborative partners to achieve positive unit outcomes. The unit is required to provide supporting evidence that includes the following dimensions:

- Predetermined quantitative data measures
- Specific process measures
- Healthy Work Environment Assessment Tool (HWEAT) scores
- · Qualitative measures unit exemplars

All reported data must be from the calendar year before submission. <u>Demographics</u> are also collected to enable an appropriate analysis of Beacon Award program data. Details and definitions related to the award criteria may change and are included in the module-specific handbooks, which are updated as needed.

Please note: The current Patient Outcomes module includes data monitored by most acute and critical care inpatient units. Specialty units such as PACU, teleICU, cath lab/interventional radiology, etc. may not have this data for their unit. If a unit does not have the required data they can not complete or submit the Patient Outcomes module and are not currently eligible for the Beacon Award. In the future, AACN will develop additional Patient Outcomes modules for these areas with subject matter experts from the AACN community.





Patient Outcomes

In the Patient Outcomes Module, units are asked to share their patient outcomes as well as how the unit has improved or sustained their performance levels.

Quantitative Data Measures

- Catheter-associated urinary tract infections (CAUTIs)
- Central line-associated bloodstream infections (CLABSIs)
- Ventilator-associated events (VAEs)
 - Possible ventilator-associated pneumonia (PVAP) Adult
 - Pediatric ventilator-associated events (PedVAEs) Pediatric and/or Neonatal
- Pressure injury prevalence
- Falls
 - Total falls
 - Falls with Injury
- · Barcode medication administration

Process Measures

· Patient quality and safety

HWEAT Scores

- Effective Decision-making
- True Collaboration

Qualitative Exemplars

For this dimension, provide two responses related to innovations, initiatives, improvements or unit achievements that positively impacted **patient outcomes** on your unit. The applicant will provide a written response for each question with a word count of up to 1,000. **Note:** While there is only one question, the unit will be asked to provide two different responses.

The topics for your exemplars must relate to the questions within this module in the quantitative, process or HWEAT dimensions. In alignment with this module, possible topics may include but are not limited to:

- Hospital-acquired conditions
- Safe medication practices
- Alarm or alert fatigue
- Safe patient handling/mobility support
- Implementation of new technology



Work Environment

In the Work Environment Module, units are asked to share information about processes, initiatives and outcomes that reflect crucial elements for the success of the unit's team that are related to the work environment.

Quantitative Data Measures

- Travel, contract and agency nurses
- RN full-time equivalents (FTEs) budget and actual
- LPN/LVN full-time equivalents (FTEs) budget and actual
- Voluntary RN turnover
- RN HWEAT participation rate calculated and input by AACN

Process Measures

- · Unit leader visibility
- Equity, diversity, inclusion and belonging (EDIB)
- · Nurse well-being
- AACN Synergy Model
- · Approach to staffing

HWEAT Scores

- Appropriate Staffing
- Authentic Leadership

Qualitative Exemplars

Provide two responses related to innovations, initiatives, enhancements or unit achievements that improved the **work environment** in your unit. The applicant will provide a written response for each question with a word count up to 1,000. **Note:** While there is only one question, the unit will be asked to provide **two different** responses.

The topics for your exemplars must relate to the questions in this module in the quantitative, process or HWEAT dimensions. In alignment with this module, possible topics may include but are not limited to:

- Staffing
- Retention
- Recognition
- · Workplace violence



Nursing Workforce

In the Nursing Workforce Module, units are asked to share information about the nurses who work on the unit as well as support for personal and professional growth and development of staff.

Quantitative Data Measures

- Professional nursing certification
- Nursing experience
- RN length of time employed on unit
- RN professional organization membership

Process Measures

- Professional development and continuing education
- · Conference attendance
- Certification preparation, testing, renewal and/or recognition
- Transition to practice
- Transition to nursing leadership

HWEAT Scores

- Skilled Communication
- Meaningful Recognition

Qualitative Exemplars

Provide two responses related to innovations, initiatives, improvements or unit achievements that positively impacted the **nursing workforce** on your unit. The applicant will provide a written response for each question with a word count up to 1,000. **Note:** While there is only one question, the unit will be asked to provide **two different** responses.

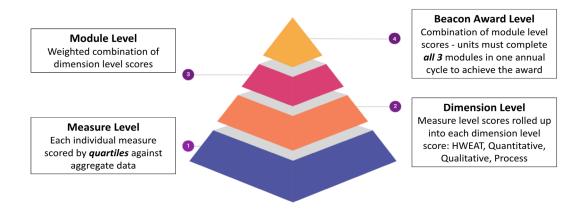
The topics for your exemplars must relate to the questions within this module in the quantitative, process or HWEAT dimensions. In alignment with this module, possible topics may include but are not limited to:

- Orientation
- Competency
- Precepting
- Mentorship
- Professional development



Beacon Award Evaluation Framework

Aside from the <u>demographic questions</u>, all submitted data is evaluated to determine Beacon Award recipients as well as additional recognition for top-tier performance. The four levels of the evaluation framework are measure level, dimension level, module level and award level. Each framework level has a score determined by the unit's performance compared with all other participants during the same Beacon Award cycle. The percentile score from each level contributes to the percentile score at the next level, ultimately ending with a final percentile score for a Beacon Award if the unit has completed all three modules (**Patient Outcomes, Work Environment and Nursing Workforce**) in one annual cycle. The percentiles are 25%, 50% and 75%.



Measure Level

The measure level is each question on the Beacon Award application. Please note that some questions are included that may not have a weight or score associated with them, because they are test questions or are intended to understand your unit's performance without affecting your score.

Dimension Level

The dimension level is the grouping of measure-level questions based on the type of question asked: quantitative, qualitative, process measure or HWEAT score.

- Quantitative measures and HWEAT scores are compared with data submitted by all participants during the same annual cycle.
- Qualitative responses are evaluated and scored by trained individuals who assess the innovation, improvement or excellence reflected in the unit's submission.
- Each process measure has a predetermined number of points based on the question and possible responses.



Module Level

The module level is the weighted combination of the dimension scores for each module - Patient Outcomes, Work Environment and Nursing Workforce. Quantitative data and qualitative responses have an equal weighting and represent the majority of points available for each module. The process measures and HWEAT scores are viewed as contributing factors and scored at a lower weight.

Award Level

The award level reflects the combination of scores for each module. Qualifying units receive a Beacon Award, which includes AACN recognition and promotional materials as well as recognition at NTI.

- 1. Each question or measure is scored:
 - a. Quantitative responses are compared with aggregate data from the cycle.
 - b. HWEAT, process and qualitative responses are compared with AACN's established standards and then compared with aggregate data from the cycle.
- 2. Individual question scores are combined to achieve a score for each dimension (HWEAT, quantitative, qualitative, process).
- 3. The dimension scores are weighted and combined to establish a module score for each completed module.
- 4. If a unit completes all three modules in one cycle, all three module scores are combined to achieve a final score, which determines if the unit earns a Beacon Award.

Each unit receives an extensive feedback report that includes:

- The score for each measure, including a benchmark comparison and dimension, module and/or award-level scores, as appropriate
- Identified areas of strengths and opportunities
- Resources to support the unit's journey

Audits

Audits of Beacon Award applicants are a routine part of the Beacon Award program's approach to quality assurance. Units are not notified in advance of being audited. Audits are conducted randomly after a unit's application has completed the evaluation and scoring process. The primary contact for the unit will be contacted via email to inform them of the audit. It is the responsibility of the unit to ensure a current contact is documented for the unit.

Failure to respond to an audit, pass an audit or provide the requested documentation promptly will result in revocation. Refunds will not be issued in the case of failure or non-response to an audit. Revocation of an award may be appealed.



Recognition

AACN recognizes that units seek the Beacon Award for meaningful recognition on their journey to excellence, as represented by the bronze-, silver- and gold-level Beacon Award. As previously mentioned, the updated Beacon Award program will offer additional recognition opportunities in each module. The primary contact for the unit will receive details about the unit's results and access to recognition and promotional information. We are excited to recognize your unit and staff for the incredible contributions you make every day!

Determining Your Level of Participation

AACN understands the importance of delivering exceptional care in a healthy work environment, especially when healthcare is experiencing resource challenges. Therefore, AACN is pleased to offer units the flexibility to choose their level of participation in the program and invites units at all stages on their journey to excellence to partner with AACN for continual measurement and improvement.

Units can choose their level of engagement with the program by completing one, two or three modules based on available financial and/or leadership support, or based on their ability to report the required data in each module. However, to be eligible for the Beacon Award, all three modules must be completed during the application period. Units that complete one or two modules can achieve recognition for top-tier performance within individual modules.

Included in the purchase of a module is the associated module handbook with questions and resources to help units prepare and report their data. Units will also receive access to additional education, resources and tools to support the development of the unit's application, including additional video presentations, support for quantitative data preparation and a qualitative exemplar writing guide.

Applicants From International Hospitals

We welcome international units to participate in the Beacon Award program and ask that they contact a Beacon team member at beacon@aacn.org before purchasing an application. Applicants from international facilities are required to submit the same data as domestic facilities.



Beacon Award Annual Cycle

The design of the Beacon Award program requires certain activities to be completed and/or submitted at specific times, as the award runs on an annual cycle. Applicants must meet posted deadlines to apply.

1. Preparation: Before Dec. 31

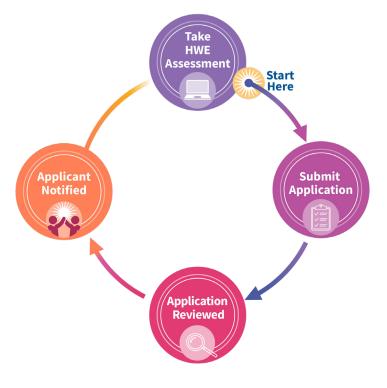
- a. Review AACN resources, and engage with Beacon Award staff as needed to prepare for participation.
- b. Complete the AACN Healthy Work Environment Assessment Tool (HWEAT).
- Start thinking about projects, improvements and achievements your unit is making that could be developed into qualitative exemplars.

2. Purchase and Submission: Feb. 1-Aug. 31

- a. Your purchase provides access to criteria questions and definitions.
- b. Complete the entry of required elements via an online platform.

3. Evaluation and Notification: Sept. 1-Dec. 31

- a. Quantitative responses, processes measures and HWEAT scores undergo automated scoring and benchmarking, as appropriate.
- b. Qualitative responses are reviewed and scored by trained individuals.
- c. All elements are considered in the overall scoring for the Beacon Award.



When the unit receives their results from AACN, they also receive an analysis and evaluation of their responses, including benchmark comparisons. The report includes unit-specific recommendations connected to current evidence and best practices to support continued improvement identified in the feedback. Awarded units receive access to recognition and promotional materials to celebrate their achievement.



Pricing

The Beacon Award for Excellence program is offered at a starting price of \$3,500 per year for all three modules. Considering the enhanced features and benefits, this pricing represents a compelling value proposition for your unit's continual improvement journey. With our annual program design, units can monitor their continual improvement efforts yearly, ensuring progress is regularly assessed and tracked.

Special Introductory Offer: For units applying in the first year (2024 application period), we are delighted to offer a discounted introductory price of \$2,500. We understand the importance of budgeting and hope this discounted rate will make it easier for you to plan and participate in the program this year.

Individual Module Pricing

While we encourage units to take advantage of the comprehensive program by engaging in all three modules, we understand that resource constraints may influence your participation decision.

As part of our commitment to supporting your unit and hospital in achieving excellence, we are pleased to offer the flexibility of participating in individual modules for \$1,300 per module.

Special Introductory Offer: For the 2024 application cycle, a discounted price of \$1,100 for the introductory module is available.

Please note that recognition will be given to units who participate in individual modules; however, units who wish to earn the overall Beacon Award status must participate in the full program, which includes all three modules.

Units wishing to participate in the Beacon Award can purchase access to the modules or bundle through our website. Once the information is provided in the purchase process, including contact information and demographics, the unit can pay by credit card or print an invoice to send with a check. Access to the module handbooks and application will not be granted until payment is received.

Demographic Questions

Following are the demographic questions the unit will need to complete as part of the application process.

- Facility type
- Hospital system affiliation
- Hospital setting
- Number of licensed hospital beds
- Unit type
- Number of unit beds
- Patient population (age specific)
- Average length of stay

- Average daily census
- Has your unit obtained the AACN Beacon Award for Excellence within the past three years?
- Do you work in a hospital that has earned ANCC
 Magnet® Recognition within the past three years?
- RN education
- Staff skill mix
- Report if nurses or other healthcare workers in your unit participated in a union or bargaining unit in the past year.



Beacon Program Comparisons

	Original Beacon Award Program (1.0)	Current Beacon Award Program (2.0)	New Beacon Award Program (3.0)
Award Duration	Only 1 award level	Award valid for 3 years	Award valid for 1 year
Recognition Focus	Not all units received an award (only recognized with "achieved" excellence)	All units that meet minimum application requirements receive an award (recognizes "journey" to excellence)	Journey to excellence for all units; recognition of top performance of modules; Beacon Award for top performance in all three modules
Eligibility	Only acute and critical care units (pediatric added in 2007)	Expanded to any unit where patients receive their principal nursing care after hospital admission	Any unit that can report the required measures can apply
Benchmarks/Criteria Measured	Includes qualitative and quantitative: • Frequency of satisfaction surveys • Frequency of meetings for learning, education • VAP, CLABSI, CAUTI rates	Measures selected by unit	Standardized quantitative measures
Application Style	All yes/no and some open-ended "describe the process" questions	All open-ended "describe the process" questions with results reported	Quantitative Questions, Qualitative Questions, Process Measure Questions & HWE Assessment Tool Scores
Application Sections	 Recruitment/Retention Training/Education/ Mentoring Healing Environment Evidence/Research Patient Outcomes 	 Leadership Structures and Systems Appropriate Staffing & Staff Engagement Effective Communication, Knowledge Management, Learning and Development, and Best Practices EBP and Processes Patient Outcomes 	 Patient Outcomes Work Environment Nursing Workforce
Review Process	Reviewed by 10-15 external reviewers, final reviews performed by staff	Three-level review process, including (1) two volunteer reviews, (2) one senior review, and (3) one admin review	 Quantitative, Process and HWEAT - automated Qualitative - volunteer reviewer
Turnaround Time	Up to 1 year	Approximately 4-5 months (on average)	3-4 months following close of cycle



References

2023 NSI National Health Care Retention & RN Staffing Report. NSI Nursing Solutions. Accessed October 19, 2023. https://www.nsinursingsolutions.com/Documents/Library/NSI National Health Care Retention Report.pdf

AACN Leadership podcast series. American Association of Critical-Care Nurses. Accessed October 19, 2023. https://blubrry.com/aacn_leadership_podcast/archive/

AACN Synergy Model for Patient Care. American Association of Critical-Care Nurses. Accessed October 19, 2023. https://www.aacn.org/nursing-excellence/aacn-standards/synergy-model

Alamer F, Alanazi A. The impact of smart pump technology in the healthcare system: a scope review. *Cureus*. 2023;15(3):e36007. doi:10.7759/cureus.36007

Benner P. From Novice to Expert: Excellence and Power in Clinical Nursing Practice, Commemorative Edition. Prentice-Hall; 2021.

Bloodstream infection (BSI) events: central line-associated bloodstream infection (CLABSI) and non-central line-associated bloodstream infection. Centers for Disease Control and Prevention. Accessed November 2, 2023. https://www.cdc.gov/nhsn/psc/bsi/index.html

Board certification. American Association of Critical-Care Nurses. Accessed October 19, 2023. https://www.aacn.org/certification?tab=First-Time%20Certification

Boysen PG 2nd. Just culture: a foundation for balanced accountability and patient safety. *Ochsner J.* 2013;13(3):400–406. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3776518/

Brenan M. Nurses retain top ethics rating in U.S., but below 2020 high. Accessed October 19, 2023. https://news.gallup.com/poll/467804/nurses-retain-top-ethics-rating-below-2020-high.aspx

CCRN adult. American Association of Critical-Care Nurses. Accessed October 19, 2023. https://www.aacn.org/certification/get-certified/ccrn-adult

Delgado S. Nurse staffing: ratios, reimbursement and the work environment. Accessed October 19, 2023. https://www.aacn.org/blog/nurse-staffing-ratios-reimbursement-and-the-work-environment

Fall prevention in hospitals training program. Agency for Healthcare Research and Quality. Accessed November 2, 2023. https://www.ahrq.gov/patient-safety/settings/hospital/fall-prevention/index.html



Fung E, Leung B, Hamilton D, Hope J. Do automated dispensing machines improve patient safety? *Can J Hosp Pharm*. 2009;62(6):516–519. doi:10.4212/cjhp.v62i6.852

Guiding principles for nurse leaders. American Organization for Nursing Leadership. Accessed October 19, 2023. https://www.aonl.org/resources/guiding-principles

Hardin SR, Kaplow R. Synergy for Clinical Excellence. Jones & Bartlett Learning; 2017.

Healthy work environments. American Association of Critical-Care Nurses. Accessed October 19, 2023. https://www.aacn.org/nursing-excellence/healthy-work-environments

McDowell P, Cabri A, Davis M. Medication administration errors. Agency for Healthcare Research and Quality. Accessed November 2, 2023. https://psnet.ahrq.gov/primer/medication-administration-errors

Nurse staffing. American Nurses Association. Accessed October 19, 2023. https://www.nursingworld.org/practice-policy/nurse-staffing/

Nurse staffing task force. American Nurses Association. Accessed October 19, 2023. https://www.nursingworld.org/practice-policy/nurse-staffing/nurse-staffing-task-force/

Nurse staffing think tank: Priority topics and recommendations. Partners for Nurse Staffing Think Tank. Accessed October 19, 2023. https://www.nursingworld.org/~49940b/globalassets/practiceandpolicy/nurse-staffing-think-tank-recommendation.pdf

Pediatric ventilator-associated events (PedVAE). Centers for Disease Control and Prevention. Accessed November 2, 2023. https://www.cdc.gov/nhsn/psc/pedvae/index.html

Pressure injury prevention in hospitals training program. Agency for Healthcare Research and Quality. Accessed November 2, 2023. https://www.ahrq.gov/patient-safety/settings/hospital/resource/pressure-injury/index.html

Riess DL. Supporting new graduate nurses' transition to practice. *Nursing*. 2023;53(9):20–23. https://doi.org/10.1097/01.NURSE.0000946776.70784.69

Ulrich B, Cassidy L, Barden C, Varn-Davis N, Delgado S. National nurse work environments - October 2021: a status report. *Crit Care Nurse*. 2021;42(5):58-70. https://doi.org/10.4037/ccn2022798



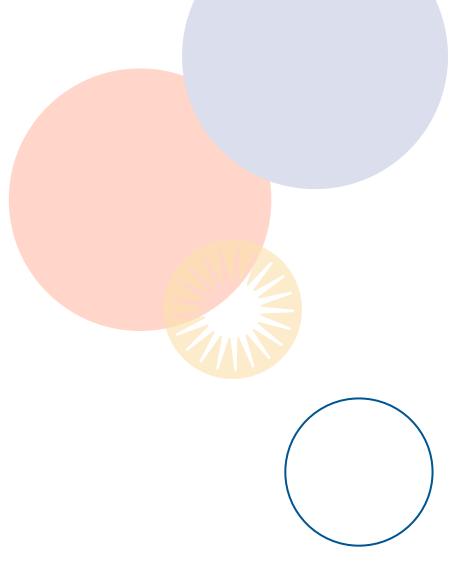
Urinary tract Infections (UTI) events: catheter-associated urinary tract infection (CAUTI) and non-catheter-associated urinary tract infection (UTI) (and other urinary system infection (USI)). Centers for Disease Control and Prevention. Accessed November 2, 2023. https://www.cdc.gov/nhsn/psc/uti/index.html? Provided the state of the state of

Ventilator-associated events (VAE). Centers for Disease Control and Prevention. Accessed November 2, 2023. https://www.cdc.gov/nhsn/psc/vae/index.html

Well-being in uncertain times. American Association of Critical-Care Nurses. Accessed October 19, 2023. https://www.aacn.org/clinical-resources/well-being

Ye Y, Chandrasekaran A. The impact of nurse staffing on turnover and quality: an empirical examination of nursing care within hospital units. *J Oper Manage*. 2023;69(7):1124–1152. https://doi.org/10.1002/joom.1245





Beacon Award for Excellence



aacn.org | beacon@aacn.org

AACN Beacon Award for Excellence

© 2023 American Association of Critical-Care Nurses. All rights reserved.