

# Colorado Nurses Association Approved Provider Process Manual 2022

2022-2024 CNA Nursing Continuing Professional Development Advisory Council

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# Introduction

This document provides step-by-step instructions on the requirements to become an Approved Provider of Nursing Continuing Professional Development (NCPD) through the Colorado Nurses Association (CNA).

- 1. All information in this document is obtained from the 2015 Primary Accreditation Approver Application Manual, published by the American Nurses Credentialing Center (ANCC) and also reflects revisions of ANCC Accreditation in NCPD criteria and requirements for providers of NCPD.
- 2. The Approved Provider Unit (APU) must have the authority to assess, plan, implement, and evaluate NCPD activities and operate approved provider units using ANCC Accreditation Program criteria.
- 3. The Approved Provider Unit is responsible to assess, plan, implement and evaluate nursing continuing professional development activities. They are NOT authorized to approve activities developed by others without involvement of an Accredited Approver Unit.
- 4. Commercial entities cannot be providers or joint providers of nursing continuing professional development activities.
- 5. Employees of commercial entities cannot be planners or presenters for activities in which the content is related to the products or services of the company.

Approval as a provider of Nursing Continuing Professional Development is recognition of a provider unit's capacity to demonstrate excellence in providing evidence-based content based on ANCC criteria. Your organization, upon achieving approval as an APU, is authorized to assess, plan, implement, and evaluate NCPD activities according to the criteria and award **contact hours** for those activities. The APU may offer an unlimited number of educational activities during the three-year period of approval. Provider units never have the authority to approve their own or anyone else's activities. **The words "approved," "application," or "applicant" should never be used in connection with any NCPD activity the APU plans and presents**.

Nursing Continuing Professional Development activities provided by the APU must be related to professional development of the nurse. The content of the educational activity should enable the learner to acquire or improve knowledge, skills and/or practice beyond basic knowledge and enhance professional development or performance as a nurse.

Nursing Continuing Professional Development activities include but are not limited to courses, seminars, workshops, lecture series, distance learning activities (audio/video conferences), web-based enduring materials, journal clubs, learner directed independent study activities or point of care learning. Knowledge and use of adult learning principles should be reflected in all aspects of the educational design.

# **Chapter 1: The Application Process**

#### **Approved Provider Eligibility**

A Provider Unit (PU) is defined structurally and operationally as the members of an organization who support the delivery of nursing continuing professional development activities. The Provider Unit may be a single focused organization devoted to offering NCPD activities or a separately identified unit within a larger organization.

The Provider Unit may be placed within the Education/Professional Development Department of a hospital or school of nursing.

The applicant applying for approval is the Provider Unit, not the organization. Provider Units assess learners' needs and plan, implement, and evaluate nursing continuing professional development activities according to Colorado Nurses Association's guidelines, which are based on ANCC accreditation criteria.

Provider Units are responsible for developing individual education activities and awarding contact hours to nurses for use in fulfilling their own goals for professional development, licensure, and certification. Each NCPD activity is led by a Nurse Planner in collaboration with at least one other planner. Contact hours may not be awarded for activities developed without the direct involvement of a Nurse Planner. Provider Units may jointly provide activities, but they may not approve activities.

To be eligible to apply for Approved Provider status, an organization must:

- Be one of the following:
  - o ANA organizational affiliate
  - Constituent and State Nurses Association (C/SNA) of the American Nurses Association (ANA)
  - o College or University
  - o Healthcare Facility
  - Health-Related Organization
  - Multidisciplinary Educational Group
  - Professional Nursing Education Group
  - Specialty Nursing Organization
- Be operational for a minimum of six months prior to application
- Be administratively and operationally responsible for coordinating the entire process of assessing, planning, implementing, and evaluating NCPD activities
- Not be a commercial interest entity (an entity that produces, markets, resells, or distributes healthcare goods or services consumed by or used on patients or an entity that is owned or controlled by an entity that produces, markets, resells, or distributes healthcare goods or services consumed by or used on patients).
- Identify one Nurse Planner (NP) who will act as the Primary Nurse Planner (PNP) and serve as the liaison between Colorado Nurses Association and the APU.

- ▶ The Primary Nurse Planner must
  - hold a current, unencumbered license as an RN and a baccalaureate degree or higher in nursing
  - $\circ$  have authority within the organization to ensure compliance with ANCC Accreditation criteria
  - be accountable to the Accredited Approver Program Director (AAPD) of CNA for all APU activities
  - ensure that all Nurse Planners in the APU hold current valid licenses as RNs with a baccalaureate degree or higher in nursing
  - o be responsible to orient, educate and monitor all APU Nurse Planners
  - ensure that each NCPD activity has a qualified Nurse Planner who is an active participant in the planning, implementing, and evaluation process
- The target audience for at least 51% of the APU's educational activities must be within or contiguous to the unit's geographic region. (see <u>http://www.hhs.gov/about/agencies/iea/regional-offices/</u> for map).
- Compliance is required with all applicable federal, state, and local laws and regulations that affect the organization's ability to meet CNA's guidelines.
- Disclose previous denials, suspensions, and/or revocations received from other ANCC Accredited Approver Units and/or other accrediting /approving organizations.
- Initial applicants must contact the AAPD at CNA (programdirector@coloradonurses.org) and have completed the process of assessment, planning, implementation, and evaluation for at least three separate individual educational activities within the last 12 months that have been approved by CNA or another ANCC Accredited Approver that:
  - o demonstrate active involvement of a Nurse Planner
  - o adhere to current ANCC accreditation criteria
  - were each a minimum of one hour (60 minutes) in length
  - were not jointly provided

# Approved Provider Eligibility Form

The Approved Provider Eligibility form is utilized to verify that organizations applying to become an Approved Provider of Nursing Continuing Professional Development (NCPD) are eligible under ANCC eligibility requirements. Organizations deemed ineligible will not be considered for approval by the CNA.

This form requests information on the applicant's demographic data and the type of organization. All questions must be answered to determine eligibility.

- 1. Retrieve the Approved Provider Eligibility Form from the CNA website at <u>www.Coloradonurses.org</u>
- 2. Complete the form as identified and submit to CNA at info@coloradonurses.org
- 3. You will receive notice when the form has been reviewed and you are eligible to proceed with the Approval application process. If there are any questions about your eligibility, you may be asked to submit further information to be reviewed.
- 4. Once eligibility has been confirmed, make an appointment for a phone consultation with the AAPD to review the application process and be sure your questions are answered.

# Approved Provider Self-Study/Written Documentation

Retrieve the CNA Approved Provider Application/Self Study from the CNA website <u>www.Coloradonurses.org</u>. Read the entire Application/self-study to be sure you understand what is required. The PNP is responsible and accountable for completing each section, with assistance of nurse planners and other people influencing and contributing to the application.

The following five sections are required written documentation for Approved Provider applicants:

- Organizational Overview (OO)
- Approved Provider Criterion 1: Structural Capacity (SC)
- Approved Provider Criterion 2: Educational Design Process (EDP)
- Approved Provider Criterion 3: Quality Outcomes (QO)
- Approved Provider Activity Submission Requirements

**Note**: All documents will be reviewed for adherence to ANCC Accreditation criteria and Approver Unit requirements at the time NCPD activities were planned, implemented, and evaluated.

#### Approved Provider Organizational Overview (OO)

The Organizational Overview (OO) is an essential component of the application process that provides a context for understanding the organization of the Approved Provider Unit. The applicant must submit the following documents and/or narratives:

#### **Structural Capacity**

#### OO1. Demographics

Submit an executive statement and/or high-level strategic summary of the Provider Unit (E.G., Overall description on how the provider unit functions, the mission of the provider unit as it relates to its NCPD offerings, including the impact the provider unit has on the organization and its learners). (1000-word limit).

#### OO2. Lines of Authority and Administrative Support

- Submit a list of the names, credentials, positions, and titles of the Primary Nurse Planner, other Nurse Planner(s) (if any), in the Provider Unit.
- Submit position descriptions of the Primary Nurse Planner, Nurse Planners (if any), in the Provider Unit. Position descriptions should be specific to the role in the provider unit, not the "job description", unless they are the same.

# Approved Provider Criterion 1: Structural Capacity (SC)

The capacity of an APU is demonstrated by commitment, identification and responsiveness to learner needs; continual engagement in improving outcomes, accountability, leadership .and resources. Applicants will write narrative statements that address each of the criteria under Commitment, Accountability, and Leadership, to illustrate how structural capacity is operationalized.

Each narrative must include a specific example that illustrates how the criterion is operationalized within the Provider Unit.

**Commitment**. The Primary Nurse Planner demonstrates commitment to ensuring RN's learning needs are met by evaluating Provider Unit processes in response to data that may include but is not limited to aggregate individual educational activity evaluation results, interested parties, feedback (staff, volunteers), and learner/customer feedback.

# Describe and, using an example, demonstrate the following:

SC 1. The Primary Nurse Planner's commitment to learner needs, including how Provider Unit processes are revised based on aggregate data, which may include but are not limited to individual educational activity evaluation results, associates' feedback (staff, volunteers) and learner/customer feedback.

**Accountability.** The Primary Nurse Planner is accountable for ensuring that all Nurse Planners in the Provider Unit adhere to the ANCC accreditation criteria.

#### Describe and, using an example, demonstrate the following:

**SC 2.** How the Primary Nurse Planner ensures that all Nurse Planner(s) of the Provider Unit are appropriately oriented and trained to implement and adhere to the ANCC accreditation criteria.

**Leadership.** The Primary Nurse Planner demonstrates leadership of the Provider Unit through direction and guidance given to individuals involved in the process of assessing, planning, implementing, and evaluating nursing continuing professional development (NCPD) activities in adherence to ANCC accreditation criteria.

#### Describe and, using an example, demonstrate the following:

**SC 3.** How the Primary Nurse Planner and/or Nurse Planner provides direction and guidance to individuals involved in planning, implementing, and evaluating NCPD activities in compliance with ANCC accreditation criteria.

#### Approved Provider Criterion 2: Education Design Process (EDP)

The Provider Unit has a clearly defined process for assessing needs as the basis for planning, implementing, and evaluating NCPD. NCPD activities are designed, planned, implemented, and evaluated in accordance with adult learning principles, professional education standards, and ethics.

# Each narrative must include a specific example that illustrates how the criterion is operationalized within the Provider Unit.

Examples for the narrative component of the provider application (EDP 1-7) may be chosen from but are not limited to those contained in the three activity files. Evidence must demonstrate how the Approved Provider Unit complies with each criterion.

**Assessment of Learning Needs.** NCPD activities are developed in response to, and with consideration for, the unique educational needs of the target audience.

#### Describe and, using an example, demonstrate the following:

**EDP 1.** The process used to identify a problem in practice or an opportunity for improvement (professional practice gap) **Identify the Gap** 

#### Describe and, using an example, demonstrate the following:

**EDP 2.** How the Nurse Planner identifies the underlying educational need(s) (knowledge, skills, and/or practice) that contribute to the professional practice gap(s) (PPG).

#### **Evaluation**

#### Describe and, using an example, demonstrate the following:

**EDP 3.** How the Nurse Planner identifies, and measures change in knowledge, skills, and/or practice of the target audience that are expected to occur as a result of participation in the educational activity.

**Planning.** Planning for each activity must be independent from the influence of commercial interest organizations.

#### Describe and, using an example, demonstrate the following:

**EDP 4.** The process used to identify, mitigate, and disclose all relevant financial relationships for all individuals in a position to control educational content.

**Design Principles.** The educational design process incorporates best available evidence, and appropriate teaching methods.

#### Describe and, using an example, demonstrate the following:

**EDP 5.** How content of the educational activity is developed based on best available current evidence (e.g. clinical guidelines, peer-reviewed journals, experts in the field) to foster achievement of desired outcomes.

#### Learner Engagement

# Describe and, using an example, demonstrate the following:

**EDP 6.** How strategies to promote learning and actively engage learners are incorporated into educational activities

**Evaluation.** A clearly defined method that includes learner input is used to evaluate the effectiveness of each educational activity. Results from the activity evaluation are used to guide future activities.

# Describe and, using an example, demonstrate the following:

**EDP 7.** How summative evaluation data for an educational activity are used to analyze the outcomes of that activity and guide future activities.

#### Approved Provider Criterion 3: Quality Outcomes (QO)

The Provider Unit engages in an ongoing evaluation process to analyze its overall effectiveness in fulfilling its goals and operational requirements to provide quality NCPD.

Each narrative must include a specific example that illustrates how the criterion is operationalized within the Provider Unit.

**Provider Unit Evaluation Process.** The Provider Unit must evaluate the effectiveness of its overall functioning as a Provider Unit.

#### Describe and, using an example, demonstrate the following:

**QO 1**. The process utilized for evaluating the overall **effectiveness of the Provider Unit** in carrying out its work as a provider of nursing continuing professional development (NCPD).

**QO 2a.** Identify at least one quality outcome the provider unit has established and worked to achieve over the past twelve months to improve provider unit operations. Identify the metrics used to measure success in achieving that outcome.

Examples of quality outcomes might include, but are not limited to:

Changes in format of activities in response to learner feedback

Cost savings for the provider unit or other interested parties in response to analysis of financial data

Volume of participants

Satisfaction of learners, staff, volunteers in response to feedback surveys

**QO 2b.** Using one of the quality outcomes identified in QO2a, explain how the most recent evaluation process (QO1) resulted in the development and/or improvement of an identified outcome for provider unit operations, including how that outcome was measured and analyzed.

Example: Aggregate data from feedback surveys of all attendees indicated a desire to have more online activities. This led to the development of an outcome to increase the percentage of online activities by 10% from one year to another. Plan was developed to determine which activities were most appropriate for online presentation and activities were developed. The number and quality of the activities were measured through further feedback surveys.

Value/Benefit to Nursing Professional Development. The Provider Unit shall evaluate data to determine how the Provider Unit, through the learning activities it has provided, has influenced the professional development of its nurse learners. Nursing Professional development is defined as "The lifelong process of active

participation by nurses in learning activities that assist in developing and maintaining their continuing competence, enhancing their professional practice, and support achievement of their career goals" (Nursing Professional Development: Scope and Standards of Practice, ANA, 2016). Examples of Professional Development Outcomes include, but are not limited to:

- Changes in leadership skills Certification
- o Professional practice behaviors
- o Changes in nursing practice, patient outcomes, nursing care delivery

# Describe and, using an example, demonstrate the following:

- **QO 3a.** Identify at least one quality outcome the provider unit has established and worked to achieve over the past twelve months to improve the professional development of nurses. Identify the metrics used to measure success in achieving that outcome.
- **QO 3b.** Using one of the outcomes identified in QO3a, explain how the most recent evaluation process (QO1) resulted in the development and/or improvement of an identified outcome to improve the professional development of nurses, including how that outcome was measured and analyzed.

#### **Directions for submitting Approved Provider Self-Study**

Information should be organized in accordance with the outline presented on the Approved Provider Application/Self Study form, with sections clearly titled and pages numbered. Be sure to follow the outline and complete all sections, typing directly on the form.

- 1. The following documents must be included and submitted in the following order:
  - Approved Provider Application/Self Study
  - Required attachments
  - Three (3) complete Individual Activity files from the previous 12 months
- 2. Submit the application and attachments electronically to CNA at info@coloradonurses.org

3. Ensure that all documentation reaches CNA before the deadline (3 months before expiration of your current provider status if renewing).

4. Submit the application fee. A Provider approval decision will not be rendered until the application fee is paid in full.

#### **CNA Peer Review Process**

- Upon receipt of a provider self-study, a quantitative review will be completed to determine that all required elements are present in the application. Missing documentation will be requested from the Primary Nurse Planner and must be submitted within 15 working days of the request. Failure to do so will result in denial of the application. The application will not be given to a Nurse Peer Reviewer until it is complete.
- 2. The application is sent to nurse peer reviewers, (NPR) who conduct an independent qualitative review.
- 3. After the NPR completes their review, the Accredited Approver Program Director (AAPD) conducts a qualitative review.
- 4. The final decision is made by the AAPD based on evidence of adherence to criteria.
- 5. Possible actions on a provider application are:
  - a. **Approval with distinction for 3 years** evidence supports exemplary work of the provider unit in adherence to criteria
  - b. Approval for 3 years evidence supports the ability of the organization to adhere to criteria
  - c. Provisional approval for up to 1 year evidence supports the need for close monitoring of the organization to ensure adherence to criteria. If monitoring demonstrates that the organization is effectively meeting criteria, approval will be extended for the balance of the approval period. Failure to demonstrate adherence to criteria during the provisional approval period will result in suspension or revocation of approval.
  - d. **Denial** evidence demonstrates that the applicant is not in adherence to criteria and has not recognized deficiencies or established plans to address deficiencies. An organization whose

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application has been denied has the right to appeal that decision. The appeal procedure is available from AAPD upon request. Denial of an application precludes the applicant from submitting another provider application for 12 months, although individual activity applications may be submitted by the organization at any time.

e. Appeals process is available upon request from CNA.

#### **CNA Approval Decision**

- 1. You will be notified in writing of the approval decision by the AAPD. If additional information is required, the details of the required information and due date will be specified.
- 2. You will receive a certificate of approved provider status once your provider unit is approved.
- 3. You will receive instructions for annual monitoring activities as required by ANCC/CNA.

#### **Fee Structure**

Fees are to be submitted with the application materials and are not refundable once the review process has begun. Colorado Nurses Association reserves the right to change fees at any time without notice. Fees may be paid by credit card online with the application submission. Please contact the CNA office at 720-457-1194 if you wish to pay fees through check or money order. See the complete Fee Structure on the CNA website at <u>www.coloradonurses.org</u>

An annual fee may also be charged as determined by Colorado Nurses Association.

# **Chapter 2: Educational Design Process**

#### **Educational Design Process**

This chapter describes the process of planning, implementing and evaluating individual educational activities according to 2020 ANCC Accreditation Program criteria. Retrieve the CNA Approved Provider Activity Documentation Form from the CNA website and follow the processes described in this section to plan your activity.

The educational design expectations described in this section and applicable at the individual activity level are fundamental to high-quality nursing continuing professional development. Accordingly, applicants must ensure that these expectations are met, and the APU offers individual educational activities that adhere to ANCC Accreditation criteria.

ANCC's Accreditations Program specifies a comprehensive set of educational design criteria to ensure that individual educational activities are effectively assessed, planned, implemented, and evaluated according to educational standards and adult learning principles.

# **Principles of High-quality Educational Design**

- Activity addresses a professional practice gap
- Incorporates active involvement of a Nurse Planner
- Identifies the underlying educational need of knowledge, skill and/or practice
- Identifies the learning outcomes to be achieved by learners participating in the activity
- Incorporates interactive strategies that engage the learners
- Learning strategies are congruent with learning outcomes
- Chooses content based on best available evidence
- Develops content independent from the influence of commercial interest organizations

# Types of activities:

- Provider-directed, provider-paced: Provider directed, provider paced activities occur when the provider controls the content, time and pace of the activity. Learners participate in "real time" educational experiences (in person course, conference or webinar). Indicate the date(s) that the activity will be offered to learners and the location (city/state) where the event will be held. Retroactive awarding of contact hours is not permitted. Rationale for the number of contact hours awarded should be identified as above, (e.g., real time for a live activity).
- Provider-directed, learner-paced: Provider directed, learner paced activities occur when the provider controls content, but learners can access the education at a time, place, and pace of their choosing. Examples might include independent study articles in professional journals, web-based learning on learning management systems, or archived webinars. For these events, please specify how you determined the number of contact hours you plan to award. See "number of contact hours" above and contact CNA with any questions about how to calculate contact hours for these types of activities. Note that these activities meet the definition of "enduring materials", meaning that they exist over time. All enduring materials must be reviewed and revised at least once every renewal period (if you choose to renew the activity after the 2-year approval period) depending on the time- sensitivity and relevance of the content. Learners must be informed of the expiration date of enduring materials.
- Learner-directed, learner-paced: Learner directed, learner paced: may be live, enduring material or blended.
- Blended activities: Blended activities incorporate components of both "live" and "learner-paced" materials, although the event is not "enduring". For example, a learner may be required to read an article prior to attending an activity and come prepared to discuss it. The learner can get contact hours for both parts of the learning experience. Specify how you determined the number of contact hours you plan to award for each component of the activity.

# Description of the Professional Practice Gap

Professional practice gaps reflect the difference between what learners *currently* know, have the ability to do, or *perform* in practice compared to what they *should* know, have the *ability* to do, or

*perform in practice*. An educational activity is designed to close that gap. Prior to developing an educational activity, it is necessary to identify the gap and determine the reason for its existence. What is the problem in practice or opportunity for improvement? A problem in practice may be that nurses are not using appropriate infection control practices, so the rate of patients getting catheter-acquired urinary tract infections is too high, compared to benchmark data. An opportunity for improvement may exist because learners are not aware of new guidelines for managing the care of stroke patients. The first step in planning an educational activity is to ask, "What is the professional practice gap, and why does it exist?" In this section, you identify the problem the activity is designed to address; this is not the "purpose" of the activity.

# Planning Committee

Planning Committees must have a minimum of one Nurse Planner and one content expert to plan each educational activity. The Nurse Planner must be an RN with a current unencumbered nursing license and hold a baccalaureate degree or higher in nursing. The Nurse Planner is knowledgeable about the nursing continuing professional development process and is responsible for adherence to ANCC accreditation criteria. One planner (Content Expert) needs to have appropriate subject matter expertise for the educational activity being offered.

If additional individuals, such as faculty, presenters, or authors, will be creating or delivering content for the educational activity, Planning Committee members must identify the needed qualifications of the individual chosen. Faculty/presenters/authors must have documented qualifications that demonstrate their education and/or experience in the content area they are developing or presenting. Expertise in subject matter may be evaluated based on characteristics such as education, professional achievements and credentials, work experience, honors, awards, professional publications, or similar.

#### Evidence to Validate the Professional Practice Gap

The evidence that validates a professional practice gap is a description of the current state of practice and how one's practice could be better. Sources of supporting evidence that validate the professional practice gap and support the underlying educational need include, but are not limited to:

- Requests for education
- Input from target audience members, subject matter experts
- Reviewing performance improvement activities to identify opportunities for improvement
- Reviewing evaluations of previous educational activities
- Reviewing evidence in research, quality improvement and evidence-based practice recommendations

#### Identifying the Underlying Educational Need

The Nurse Planner and Planning Committee analyze the data to identify the root causes of the professional practice gap. This group conducts a needs assessment to determine the underlying educational needs, what the nurses do not know (knowledge deficit), do not know how to do (skill deficit), or are not able to do in practice (practice deficit). Once the educational need has been identified the Nurse Planner and Planning committee identify the target audience for the learning activity and formulate learning outcomes.

#### Description of the target audience

Who will be participating in this educational experience? All nurses? Specific groups of nurses, like RNs in the Neonatal Intensive Care Unit? Will there be members of different professions – medicine, pharmacy, pastoral care, social work, and nursing? The target audience must include registered nurses.

#### Learning Outcomes

What will learners know or do differently once they complete the educational activity? How will this change close (or at least lessen) the professional practice gap that created the need for the activity in the first place? The outcome should be specific to the identified level of educational need – if the gap was in knowledge, what measurement will tell you that the learner has gained knowledge (example: score 100% on a post-test)? If the gap was in skill, what measurement will tell you that the learner has gained skill (example: demonstrate steps in completing a procedure with 100% accuracy)? Note that we do not require objectives for an educational activity, and an outcome is not the same thing as an objective. The outcome is a measurable statement of what the learner will know, show, or be able to do when he/she reaches the end of the activity.

#### Developing Content for the Activity based on Current Evidence or Resources

The Nurse Planner and Planning Committee develop content for the educational activity in collaboration with presenters, authors and content experts. Content should be selected based on the most current available evidence and address the educational need and learning outcomes. Evidence to support the content of the learning activity may be found in:

- Evidence-based practices
- Peer-reviewed journals
- Clinical guidelines
- Best practices
- Content experts/expert opinion

List the references or resources used in developing the course content. Typically, references should be dated within the past 5-7 years in order to reflect best available current evidence on the topic

#### **Developing Strategies for Active Learner Engagement**

As part of the design process, the Planning Committee must develop strategies for active learner engagement. This can include but is not limited to having question/answer sessions during or at the conclusion of a learning activity, reflection, engaging learners in dialogue, analyzing case studies and providing opportunities for problem-based learning. This active learner engagement can be utilized as formative assessment by providing the learners with immediate feedback.

#### Criteria for Awarding and Calculating Contact Hours

During the planning phase, the Planning Committee is responsible for determining how participants will successfully complete the learning activity to earn contact hours. Successful completion for both live and enduring material/Web-based activities should be defined for each educational activity, consistent with the teaching/learning strategies. The criteria for successful completion are based on the format of the educational activity and should indicate what constitutes successful completion, the **rationale for the method of determining successful completion**, and whether partial credit is awarded for participation.

Criteria for successful completion may include, but is not limited to:

- attendance at the entire event or session
- attendance for a predetermined percentage of the event
- attendance at one or more sessions
- completion/submission of the evaluation form
- achieving a passing score on a post-test, and/or a return demonstration.

Contact hours are determined in a logical and defensible manner. Contact hours are awarded to participants for those portions of the educational activity devoted to the learning experience and time spent evaluating the activity. One contact hour = 60 minutes. If rounding is desired in the calculation of contact hours, the provider may round to the nearest quarter (i.e. 2.80 could be 2.75 contact hours, but not 3 contact hours).

Educational activities may also be conducted "asynchronously" and contact hours awarded at the conclusion of the activities.

Time frames must match and support the contact hour calculation for live activities. For enduring materials, print, electronic, Web-based, etc., the method for calculating the contact hours must be identified. The method may include but is not limited to a pilot study, historical data, or a formula.

Contact hours may not be awarded retroactively except in the case of a pilot study. Participants in a pilot study assist in determining the length of time required for completing an educational activity in order to calculate the number of contact hours to award. Those participants may be awarded contact hours once the number is determined. The Planning Committee must determine how participation will be verified. The attendance/participation verification may include but is not limited to sign-in sheets/registration forms, signed attestation statement by participant verifying completion of an entire activity, or a collection of participation verification via computer log.

# **Description of Evaluation Method**

A clearly defined method that includes learner input is used to evaluate the effectiveness of each educational activity. The Planning Committee must determine the method(s) of the evaluation to be used. The evaluation components and method of evaluation should be relative to the desired learning outcome of the educational activity and reflect a change in the underlying educational need of knowledge, skills or practice. Evaluation may be formative during the learning activity, as well as summative, at the conclusion of the learning activity. Evaluations may include both short- and long-term method.

Evaluation Methods		
Short-Term	Long-Term	
<ul> <li>Evaluation of intent to change practice</li> <li>Active participation in learning activity</li> <li>Post-test</li> <li>Return demonstration</li> <li>Case study analysis</li> <li>Role-play</li> </ul>	<ul> <li>Self-reported change in practice</li> <li>Data collection related to quality outcome measures</li> <li>Observation of performance</li> <li>Return on investment</li> </ul>	

Once the evaluations are complete, a summative evaluation is generated. The Planning Committee and/or Nurse Planner review the summative evaluation to assess the activity's effectiveness and to identify how results may be used to guide future educational activities. The summative evaluation is included in each activity file.

#### Ensuring Independence from Commercial Interest and Content Integrity

Planning nursing continuing professional development activities is based on education design principles focused on a professional practice gap, addressing the needs of the target audience and developing activities that are fully independent of the influence of a commercial interest. In order to develop independent activities and meet ANCC accreditation criteria, actions must be taken to ensure that there is no commercial influence in planning and providing nursing continuing professional development activities.

Further guidelines for ensuring independence and content integrity:

- Employees of a commercial interest organization **are not permitted** to serve in any position that influences the content of the activity if the content is related to the products or services of the commercial interest organization.
- Employees of commercial interest organizations are permitted to serve as planners, speakers,

presenters, authors, and/or content reviewers if the content of the activity is NOT a clinical topic.

Individuals with a nonemployee relationship (consultants, speakers bureau etc.) are permitted to serve as planners, speakers, presenters, authors, and/or content reviewers as long as the Nurse Planner has identified, mitigated and disclosed the relationship as identified in the Content Integrity Standards.

The following section is a description of the new (2022) process utilized to ensure independence and content integrity of nursing continuing professional development activities. See ACCMR Standards for Integrity and Independence in Accredited Continuing Education <u>here</u> and available on the CNA website at <u>https://www.coloradonurses.org/education</u> for complete requirements.

#### **Relevant Financial Relationships**

Changes to Content Integrity Standards began January 1, 2022 the ANCC Content Integrity Standards to align more closely with the Accreditation Council for Continuing Medical Education (ACCME). Content Integrity Standards are now Standards for Integrity and Independence in Accredited Continuing Education. This name and content change reflects the need to provide more accurate, balanced evidence-based information in providing interprofessional continuing education. The core principles of content integrity are similar and there will be some terminology changes. The Nurse Planner for an educational activity awarding contact hours for completion of the activity, is responsible and accountable for identifying, mitigating and disclosing relevant financial relationships for anyone who has the ability to control or influence the content of the activity.

#### Identification and Evaluation of Relevant Financial Relationships

The potential for relevant financial relationship exists when an individual can control or influence the content of an educational activity and has a financial relationship with a commercial interest, the products or services of which are pertinent to the content of the educational activity. A commercial interest is any entity producing, marketing, selling or distributing health care goods or services consumed by or used on patients or an entity that is owned or controlled by an entity that produces, markets, resells, or distributes health care goods or services consumed by or used on patients.

The Nurse Planner determines if the content of the activity is clinical or nonclinical. Clinical content, pertains to the care of patients, and you must identify, mitigate and disclose relevant financial relationships. If the content is non-clinical, such as leadership, preceptor education, or communication, you do NOT need to identify, mitigate or disclose. If there is any doubt, it is better to gather financial information and manage as applicable.

If your content is a mix of clinical and non-clinical, you are required to collect relevant financial relationships from anyone involved in the clinical activities. Clearly define in your file who is involved in which section/s of your program.

Data collection for relationships can be collected in several formats, the Approved Education Disclosure Form from the CNA website, an excel spreadsheet or a word document with a table. Individuals should

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disclose all financial relationships with **ineligible companies** within the **past 24 months**. The Nurse Planner reviews the financial disclosure documentation and determines if there is a relevant financial relationship within the past 24 months related to the content of the activity you are planning. Document this on a mitigation worksheet (found on the website) or in the information of the committee individuals on the application.

# **Mitigation of Relevant Financial Relationships**

When an individual has a relevant relationship with a commercial interest organization and the content is related to the products/services of the commercial entity, a relationship exists, and the Nurse Planner must implement processes to resolve the relationship. These actions must be undertaken prior to presenting the educational activity and documented in the activity file. Financial relationships and mitigation must be disclosed to learners before the beginning of the educational activity.

The Planning Committee, during the planning process, may also identify an individual(s) who functions as content reviewer(s). The purpose of a content reviewer is to evaluate an educational activity during the planning process or after it has been planned but prior to delivery to learners, for quality of content, potential **Bias**, and any other aspects of the activity that may require evaluation.

Actions taken to mitigate financial relationships must demonstrate mitigation of the identified relationship **prior to** presenting/providing the educational activity to learners. Such actions must be documented, and the documentation must demonstrate (1) the identified relationship and (2) how the mitigation was accomplished. Actions may include but are not limited to the following:

- Removing the individual with the relationship from participating in all parts of the educational activity
- Revising the role of the individual with the financial relationship so that the relationship is no longer relevant to the educational activity
- Not awarding contact hours for a portion or all the educational activity
- Undertaking review of the educational activity by the Nurse Planner and/or member of the planning Committee to evaluate for potential bias, balance in presentation, evidence-based content or other indicator of integrity, and absence of bias, AND monitoring the educational activity to evaluate for commercial bias in the presentation.
- Undertaking review of the educational activity by the Nurse Planner and/or member of the planning Committee to evaluate for potential bias, balance in presentation, evidence-based content or other indicator of integrity, and absence of bias, AND reviewing participant feedback to evaluate for commercial bias in the activity.
- Undertaking review of the educational activity by a content reviewer to evaluate for potential bias, balance in presentation, evidence-based content or other indicator of integrity, and absence of bias, AND monitoring the educational activity to evaluate for commercial bias in the presentation.
- Undertaking review of the educational activity by a content reviewer to evaluate for potential bias, balance in presentation, evidence-based content or other indicator of integrity, and absence of bias, AND reviewing participant feedback to evaluate for commercial bias in the activity.

Review the content integrity section on the CNA website for further content integrity standards instruction and wording for disclosure statements. Please review the Content Integrity Education for Nurse Planners (20-minute video) on the CNA website page. Contact the Accredited Approver Program Director for any questions at any time.

https://www.coloradonurses.org/individual-educational-activity-application Other Resources: https://www.nursingworld.org/news/news-releases/2020/ancc-nursingcontinuingprofessionaldevelopment-program-adopts--new-consensus-standards-for-integrity andindependence/ Webinar recording - https://www.accme.org/video/implementing-new-standardsfor-integrityandindependence-accredited-continuing-education Standards for Integrity and Independence in Accredited Continuing Education | ACCME

# **Disclosing Relevant Financial Relationships**

The Nurse Planner is responsible for evaluating whether any relationship with a commercial interest is considered relevant to the content of the educational activity and disclosing this information to the learners prior to the beginning of the learning activity. Disclosures may be categorized in the following ways:

- No relevant relationship with a commercial interest exists. No resolution required.
- Relevant relationship with a commercial interest exists. The relevant relationship with the commercial interest is evaluated by the Nurse Planner and determined not to be pertinent to the content of the educational activity. No resolution required.
- Relevant relationship with a commercial interest exists. The relevant relationship is evaluated by the Nurse Planner and determined to be pertinent to the content of the educational activity. Resolution is required.

The Nurse Planner is responsible to disclose the presence or absence of relevant relationships for all persons in a position to control/influence content prior to the beginning of the educational activity. For individuals who have a relevant relationship, the following must be disclosed to the learner prior to the start of the educational activity

- Name of individual
- Name of commercial interest
- Nature of the relationship the individual has with the commercial interest

If no relevant relationship exists, the Nurse Planner must inform the learners that no relevant financial relationships exist for any individual in a position to control/influence content of the educational activity.

#### Approved Provider Statement

The approval statement is the mark of an ANCC-accredited or approved organization. All Approved Providers are required to provide the official statement to learners prior to the educational activity and on the certificate of completion.

The Approved Provider statement must be displayed clearly to the learners and worded correctly according to the 2020 ANCC Accreditation Manual. The official ANCC Approved Provider statement should read as follows:

(Name of Approved Provider) is approved as a provider of nursing continuing professional development by Colorado Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

# Certificate of Completion

A document or certificate of completion is awarded to a participant who successfully completes the requirements for the individual activity. The document or certificate must include:

- ▶ Title and date of the educational activity
- ▶ Name and address of the provider of the educational activity (Web address acceptable)
- Number of contact hours awarded
- Approval statement
- Participant name

#### **Required Disclosures Provided to Participants**

Learners must receive disclosure of required items prior to the start of an educational activity. In live activities, disclosures must be made to the learner prior to initiation of the educational content. This can be provided in writing on the sign-in sheet, as a poster at the entrance to the conference room, in the opening slide of the presentation or other manner that is clear to the learner before the educational activity starts. In **enduring materials** (print, electronic, or Web-based activities), disclosures must be visible to the learner prior\_to the start of the educational content. Required disclosures may not occur or be located at the end of an educational activity. If a disclosure is provided verbally, an audience member must document both the type of disclosure and the inclusion of all required disclosure elements.

#### Disclosures always required include:

- Approval statement of provider responsible for educational activity
- Notice of requirement to receive contact hours which may include but are not limited to:
  - Actual or required time spent in activity (e.g. 100% or commensurate with sessions attended)
  - Successful completion of post-test (e.g., attendee must score X% or higher)
  - Completed evaluation form
  - Return demonstration
- Relevant Financial Relations of all persons in a position to control/influence content with clinical topics. For individuals who have a relevant relationship, the following must be disclosed to the learner prior to the start of the educational activity

- Name of individual
- Name of commercial interest
- $\circ$  Nature of the relationship the individual has with the commercial interest
- Statement that the relationship has been mitigated, the intervention utilized does not need to be disclosed to the learners
- Discloser must be provided where there are no relevant financial relationships with ineligible companies for those involved with the ability to control the content of a clinical activity.
- For non-clinical topics, no statement is required.

# Disclosures required, if applicable, include:

# **Commercial support:**

• Learners must be informed if a commercial interest has provided financial or in-kind support for the educational activity.

# • Expiration of enduring materials:

- Educational activities provided through an enduring format (e.g., print, electronic, Webbased) are required to include expiration date documenting the time period when contact hours will be awarded. This date must be visible to the learner **prior to the start** of the educational content. The period of *expiration of enduring materials should be based on the content of the material but cannot exceed 3 years.*
- ANCC requires review of each enduring material at least once every 3 years, or more frequently if indicated by new developments in the field specific to the enduring material. Upon review of enduring material for accuracy and current information, a new expiration date is established.

#### Joint Providership:

• Learners must be informed of the provider of the educational activity and all other organizations that participated in the joint planning of the activity.

# Commercial Support

**Commercial support** is financial or in-kind contributions given by a commercial interest that are used to pay for all or part of the costs of an educational activity. Commercial Support must not influence the planning, content, implementation or evaluation of any learning activity and must be disclosed to the learners. Commercial Support financial funds may be used to pay for all, or part of the expenses related to the educational activity, including but not limited to, travel, honoraria, food, support for learner attendance and location expenses. In-kind support is other resources, used by the provider to support the educational activity; this may include, but is not limited to, human resources, marketing services, physical space, equipment and teaching tools.

Content integrity of the educational activity must be maintained in the presence of commercial support. The provider developing the educational activity is responsible for ensuring content integrity. The following requirements must be met by the provider when Commercial Support is accepted:

• The commercial interest organization and the Approved Provider must have a written agreement

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stating the terms of the relationship and support provided.

- All payments for expenses related to the educational activity must be made by the provider.
- The provider is responsible for maintaining an account of expenses related to Commercial Support.
- The provider is responsible for maintaining an account of expenses related to Commercial Support.
- A commercial interest organization may not jointly provide educational activities.

# Joint Providership

Approved Providers may jointly provide educational activities with other organizations. The jointly providing organization may **not** be a commercial interest organization. The Approved Provider is referred to as the *provider* of the educational activity. The other organization(s) is referred to as the *joint provider(s)* of the educational activity. If 2 or more organizations are Approved Providers, one will act as the provider and the other(s) will act as the joint provider(s). Materials associated with the educational activity, such as marketing materials, agendas and certificate of completion must clearly indicate the Provider awarding contact hours and therefore responsible for adherence to ANCC criteria.

# **Chapter 3: Approved Provider Responsibilities**

# **Approved Provider Responsibilities**

The Approved Provider Units are responsible to:

- 1. Maintain adherence to all applicable federal, state, and local laws and regulations that affect the APU's ability to meet ANCC / CNA criteria.
- 2. Identify a Primary Nurse Planner who has overall responsibility for the APU's adherence to ANCC accreditation criteria, including orientation of other nurse planners and key personnel.
- 3. Ensure that a qualified nurse planner is an active participant in the assessment, planning, implementation, and evaluation of each educational activity.
- 4. Ensure that each learning activity planning committee have a minimum of a qualified nurse planner and one other person to plan each activity; the nurse planner to ensure adherence to criteria and at least one person with subject matter expertise related to the activity.
- 5. Ensure that the nurse planner is responsible and accountable to review and evaluate actual or potential relevant financial relationships for each planning committee member, faculty, presenter, author, content reviewer and anyone else who has influence or control over the content of the learning activity.
- 6. Notify CNA in writing within 7 business days of the discovery or occurrence of the following:
  - a. Significant changes or events that impair the ability to meet CNA NCPD requirements or affect eligibility to remain an Approved Provider, including change in commercial interest status.
  - b. Any event that might result in adverse media coverage related to the delivery of NCPD activities.
- 7. Notify CNA in writing, within 30 days, of any changes within the Approved Provider organization, including but not limited to:
  - a. Changes that alter the information provided in the Approved Provider application, including change of name, address, or business status

- b. A decision not to submit a provider application after completing the eligibility/intent to apply form
- c. Change in PRIMARY NURSE PLANNER or suspension, lapse, revocation, or termination of the PRIMARY NURSE PLANNER's registered nurse license
- d. Change in ownership of the organization
- e. Indication of instability (e.g. labor strike, reduction in force, bankruptcy) that may impact the organization's ability to function as an approved provider

#### Using the Accredited Approver Program Director as a Resource

The Accredited Approver Program Director of the Accredited Approver Unit is the person accountable to the ANCC Accreditation Program to ensure that Approved Providers are adhering to criteria and that the Accredited Approver Unit is appropriately providing information, guidance, and support for approved providers. Any time you have questions about provider unit operations, issues that arise with your educational activities, or considerations in relation to completing your provider application, please feel free to contact the AAPD at <u>Programdirector@coloradonurses.org</u> From time to time, you will be asked to evaluate the work of the AAPD in providing support to your APU. Your feedback will help us continue to strengthen our processes.

#### Approved Provider Recordkeeping

The Approved Provider is responsible for maintaining activity file records in a retrievable file (electronic or hard copy) accessible to authorized personnel for 6 years. The criteria delineated under the Provider Educational Design process must be followed consistently during the period of approval. Activity files and attachments contain the required components to retain.

- ► Title and location of activity
- Type of activity format: Provider directed, Provider directed Learner Paced, Learner Directed or Blended
- Date live activity presented, or for ongoing enduring activities, date first offered and subsequent review dates
- Description of professional practice gap
- Evidence that validates professional practice gap
- Educational need that underlies the professional practice gap
- Description of target audience
- Desired learning outcome
- Description of evidence-based content with supporting reference or resources
- Learner engagement strategies used
- Criteria for awarding of contact hour
- Description of evaluation method (evidence that change in knowledge, skills, &/or practices of target audiences was assessed)

- Names and credentials of all individuals in a position to control content (planners, presenters, faculty, authors, &/or content reviewers) and must identify who fills the various roles
- Demonstration of the relevant financial relationship assessment process for all individuals in a position to control content (planners, presenters, faculty, authors, &/or content reviewers)
  - Name of individual
  - Past 24 months
  - Individual providing the information is provided a definition of a commercial interest organization
- Evidence of a mitigation process, if applicable
- Number of contact hours awarded for activity & method of calculation (Note: Provider must keep a record of the number of contact hours earned by each participant. If the activity is longer than 3 hours, agenda was provided for the entire activity.)
- Documentation of completion &/or certificate must include:
  - Title and date of the educational activity
  - Name and address of provider of the educational activity (web address acceptable)
  - Number of contact hours awarded
  - Approved Provider statement
  - Participant name
- Commercial Support Agreement with signature and date (if applicable)
  - Name of the Commercial Interest Organization (CIO)
  - Name of the Provider
  - Complete description of all the commercial support (CS) provided, including both financial and in-kind support
  - Statement that the CIO will not participate in planning, developing, implementing or evaluating the educational activity
  - Statement that the CIO will not recruit learners from the education activity for any purpose
  - Description of how the CS must be used by the Provider (unrestricted use &/or restricted use)
  - Signature of a duly authorized representative of the CIO with the authority to enter the binding contracts on behalf of the CIO
  - Signature of a duly authorized representative of the Provider with the authority to enter the binding contracts on behalf of the Provider
  - Date on which the written agreement was signed
- Evidence of required information provided to the learners (Disclosures):
  - Approved Provider statement of provider awarding contact hours
  - Criteria for awarding contact hours
  - Presence or absence of relevant financial relationships for all individuals in a position to control clinical content (planning committee, presenters, faculty, authors, &/or content reviewers)
  - Commercial support (if applicable)
  - Expiration date (enduring material only)

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- Joint Providership (if applicable)
  - o Materials associated with this activity (marketing materials, advertising agendas, and certificates of completion) must clearly indicate the Provider awarding contact hours and responsible for adherence to the ANCC criteria
- Summative evaluation

# **Required Monitoring Requests**

Accreditation criteria require that Accredited Approvers monitor the activities of Approved Providers on a regular basis, not just at the time of submission of a new provider application every three years. Monitoring activities could occur at any time and will typically focus on one aspect of your APU – submitting a sample marketing brochure, certificate, outcome example, or evidence of financial relationship assessment, mitigation and / or disclosure, for example. Participation in monitoring activities is required. Failure to submit material as requested will result in suspension and/or revocation of provider status.

#### **Responding to Inquiries and/Complaints**

Should a situation arise where the CNA Accredited Approver Unit and Accredited Approver Program Director have a concern about your APU's operations, you will be asked to provide explanations and/or evidence to address the concern. Examples may include data found on an Approved Provider's web site that is not in adherence to criteria or a complaint from a learner. If you are asked to respond to an inquiry or a complaint, you will be provided with detailed information about the nature of the complaint and what is requested (although confidentiality of complainants will be maintained) and a specific time frame for your response. Failure to provide the required information or address the issue at hand will result in suspension and/or revocation of your provider status.

#### **Issues of Nonadherence**

The CNA Approver Unit reserves the right to suspend or revoke the status of an Approved Provider in situations where criteria are not followed, complaints are not resolved, laws/rules are not followed, or fees are not paid. Notification of suspension/revocation will occur by certified mail or by email with read verification. If suspension and/or revocation occur, the organization must immediately cease awarding contact hours, representing itself as an approved provider, and using the approved provider statement. Suspended organizations may apply for reinstatement within 120 days of the suspension date, based on evidence of resolution of the issue(s) in question. Failure to apply for reinstatement within the 120-day limit will result in revocation of approved provider status. Organizations whose approved provider status has been revoked may not apply to CNA for 2 years following the date of revocation. If, after that time, the organization wishes to reapply, it would be considered a new applicant and would be required to meet all new-applicant eligibility criteria. During a period of suspension or revocation, an organization may continue to submit individual activities to CNA for approval but may not operate a provider unit. The organization whose approved provider status has been suspended and/or revoked may appeal the decision.

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# Glossary

# Glossary Adapted from the ANCC 2015 Primary Accreditation Approver Manual

Accredited Approver Program Director A registered nurse who holds a current, unencumbered nursing license (or international equivalent) and a graduate degree, with either a baccalaureate or graduate degree in nursing (or international equivalent) who has the authority within the organization to evaluate adherence to the ANCC Primary Accreditation Program criteria in the approval of CNE.

**Bias** The tendency or inclination to cause partiality, favoritism or influence.

**Commercial Interest** Any entity producing, marketing, reselling, or distributing health care goods or services consumed by or used on patients or an entity that is owned or controlled by an entity that produces, markets, resells, or distributes health care goods or services consumed by or used on patients.

**Commercial support** Financial or in-kind contributions given by a commercial interest that are used to pay for all or part of the costs of a CNE activity. Providers of commercial support may not be providers or joint providers of an educational activity.

# **Continuing Nursing Education Activities (CNE)**

**Contact hour A** unit of measurement that describes 60 minutes of an organized learning activity. One contact hour = 60 minutes.

**Content Subject** matter of education activity that is based on the best available evidence and reflects the desired learning outcomes.

**Content reviewer** an individual selected to evaluate an educational activity during the planning process or after it has been planned but prior to delivery to learners for quality of content, bias, and any other aspects of the activity that may require evaluation.

**Enduring materials** A non-live CNE activity that lasts over time. Examples include programmed texts, audiotapes, videotapes, monographs, computer-assisted learning materials, or other electronic media that are used alone or with printed or written materials. Enduring materials can also be delivered via the Internet. The learning experience by the nurse can take place at any time and in any place rather than only one time or in one place.

**Ineligible company**-an entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients

Multi-focused organization (MFO) An organization that exists for more than the purpose of providing CNE.

**Needs assessment** The process by which a discrepancy between what is desired and what exists is identified.

Nurse Peer Reviewer A registered nurse who holds a current, unencumbered nursing license (or international equivalent) and a baccalaureate degree or higher in nursing (or international equivalent) who is actively involved in evaluating each Approved Provider or Individual Activity Applicant to evaluate adherence to the ANCC criteria.

**Nurse Planner** A registered nurse who holds a current, unencumbered nursing license (or international equivalent) and a baccalaureate degree or higher in nursing (or international equivalent) who is actively involved in all aspects of planning, implementation, and evaluation of each CNE activity. The Nurse Planner is responsible for ensuring that appropriate educational design principles are used, and processes are consistent with the requirements of the ANCC Primary Accreditation Program.

Nursing Continuing Professional Development (NCPD) Learning activities intended to build upon the educational and experiential bases of the professional RN for the enhancement of practice, education, administration, research, or theory development, to the end of improving the health of the public and RNs' pursuit of their professional career goals.

**Outcome** The impact of structure and process on the organization as a provider and the value/benefit to nursing professional development.

**Outcome Measurement** The process of observing, describing, and quantifying the predefined indicator(s) of performance after an intervention designed to impact the indicator.

**Planning committee** At least 2 individuals responsible for planning each educational activity; one individual must be a Nurse Planner and one individual must have appropriate subject matter expertise.

**Position description** Description of the functions specific to the role of Primary Nurse Planner, Nurse Planner that relates to the Provider Unit.

**Primary nurse planner** A registered nurse who holds a current, unencumbered nursing license (or international equivalent) and a baccalaureate degree or higher in nursing (or international equivalent) and who has the authority within an Approved Provider Unit to ensure adherence to the ANCC Accredited Approver Unit and Accreditation Program criteria in the provision of CNE.

**Provider unit** Comprises the members of an organization who support the delivery of continuing nursing education activities.

**Relevant Financial Relationship** An affiliation or relationship of a financial nature with a commercial interest organization that might affect a person's ability to objectively participate in the planning, implementation, or review of a learning activity.

# References

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