



Adopted from Montana Nurses Association Accredited Approver Unit
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Completing the WNA Provider Application Narrative Self Study

There are four components to the application: the Organizational Overview (OO), Structural Capacity (SC), Educational Design Process (EDP), and Quality Outcomes (QO). The Organizational Overview provides us with data to form a “big picture” understanding of your provider unit. The three subsequent sections give you an opportunity to clearly describe your provider unit in detail.

For each SC, EDP, and QO response, you will be asked to provide a **description of your process**, followed by a **specific example**.

- For the process description, think about your responses in relation to describing step-by-step and in detail: the who, what, when, where, why, and how components of the questions. Who’s involved? What do you do? When is it done? Where do you do it, or where do you get the resources to do it? Why do you do it, and what’s the desired outcome? Think about how you carry out your policies, procedures, and/or processes in order to be sure you’re always adhering to criteria.
- Your example should be very concrete and specific (e.g. “When we offered the course on Wound Care for long-term care nurses was held on August 15, 2015, we identified the professional practice gap as...”) and tell us the story of how your process was used in day-to-day operations.

Organizational Overview (OO)

This section helps us understand your provider unit, and, if applicable, the organization within which the provider unit operates. Provide detailed information to address each item as follows:

OO1: Demographics (Structural Capacity)

1. Submit a **description** of the features of the provider unit.
 - a. Address all points noted in the application question segments
2. If your provider unit is part of a larger organization, **describe** how your provider unit fits within that organization
 - a. Address all points noted in the application question segments

OO2: Lines of Authority and Administrative Support (Structural Capacity)

1. Submit a **list** of the names, credentials, positions, and titles of the Primary Nurse Planner and any other nurse planners in your provider unit.
 - a. Includes name, credentials, positions, and titles for each person.
2. Submit **position descriptions** for the Primary Nurse Planner and other Nurse Planners listed in #1.
 - a. These are specific to the qualifications and responsibilities of each person ***related to his/her role in the provider unit.***
3. Submit a **chart** showing the structure of the provider unit.
 - a. Include the Primary Nurse Planner and other nurse planners (if applicable).
 - b. The relationship of members of the provider unit to the Primary Nurse Planner should be clearly evident.
4. Submit a **chart** showing how the provider unit fits within the larger organization.
 - a. Be sure the provider unit is clearly evident.
 - b. If you have a decentralized provider unit, made up of nurse planners from various departments, use dotted-line connections to show the provider unit in context with the other departments.

OO3: Data Collection and Reporting (Educational Design Process)

1. Submit a complete **list** of all continuing nursing education (CNE) activities provided in the past 12 months, including activity dates, titles, target audience, total number of participants, number of contact hours offered for each activity, joint providers (if any), and any commercial support, including monetary or in-kind support. (Note that this is also the data you are required to submit as part of your annual report to the accredited approver.)

OO4: Quality Outcomes (quality outcomes)

1. USE THE HANDOUT ON WRITING QUALITY OUTCOME MEASURES.
2. Submit a **list** of quality outcome measures you evaluated in the past year related to the operation of your provider unit (STRUCTURE / FUNCTION).
 - a. Be as specific as possible. For example, if an outcome is to offer more diverse learning activities, your outcome measure might be “Increase the proportion of enduring materials from 10% to 30% within 12 months.”
3. Submit a **list** of quality outcome measures you evaluated in the past year related to the professional development of your nurse learners (NURSING PROFESSIONAL DEVELOPMENT).

NOTE: The following three sections of your application are the narrative portions – where you describe your process and give an example related to each criterion. Remember that you should be addressing the who, what, why, where, when, and how aspects of each item in order to provide a complete answer.

In addition, look for key words in the heading of the section or the criterion to help you answer the question at hand. For example, SC1 talks about the Primary Nurse Planner’s commitment to learner

needs. The focus is on commitment to learners in the big picture of the provider unit's operations, not on how you collect needs assessment data for a particular learning activity. We have provided "food for thought" questions to help you develop your answer. These are NOT the specific questions that need to be answered in your description.

Remember:

- *One or two sentence responses will not provide adequate descriptions or examples. Typically, a thorough description of an example that will lead to a passing score is several sentences long.*
- *Do not respond, "See attachment" or "See question X". Do not repeat the same exact example.*

Structural Capacity (SC)

SC 1: COMMITMENT: *The primary Nurse Planner's commitment to learner needs, including how approved provider unit processes are revised based on aggregate data, which may include but is not limited to individual educational activity evaluation results, stakeholder feedback, and learner/customer feedback.*

Key words/phrases here are commitment, learner needs, how processes are revised.

Consider the following in developing your answer:

1. How does the Primary Nurse Planner use feedback to change or improve provider unit processes or learning activities? What feedback is used?
2. How do you know what styles of learning fit your learners best or what learning modalities (live, webinars, independent study, etc.) they prefer?
3. What do you do with this information?

First, describe your process, and then in the next box provide a very specific example. The process description should provide insight into your usual process for collecting, analyzing, and acting on feedback data that helps the provider unit remain responsive to changing learner needs.

The beginning of an example might look something like this: "Over the past six months, our hospital has hired a significant number of new registered nurses. Our RN demographic mix is now 53% millennial generation, 35% generation X, and 12% baby boomers. Based on this data, we surveyed all of our RNs to determine their preferred learning styles. We had an 82% response rate to our survey, and based on this data we found that.... Therefore we"

Provide a description of your process, and then include a specific example.

SC 2: ACCOUNTABILITY: *How the Primary Nurse Planner ensures that all Nurse Planners in the provider unit are appropriately oriented/trained to implement and adhere to the ANCC Accreditation Criteria.*

Key words/phrases here are primary nurse planner, nurse planners, oriented/trained, implement, and adhere.

Consider the following in developing your answer:

1. How do you orient new nurse planners to your provider unit?

2. How do you keep them updated on changes?
3. How do you monitor to be sure they are doing the right things on a consistent basis?

Provide a description of your process, and then include a specific example.

SC 3: LEADERSHIP: *How the Primary Nurse Planner provides direction and guidance to individuals involved in planning, implementing, and evaluating continuing nursing education (CNE) activities in compliance with Accreditation criteria.*

Key words/phrases here are Primary Nurse Planner, direction and guidance, compliance

Consider the following in developing your answer:

1. How do you make your expectations clear to other nurse planners and others involved with CNE activities?
2. What process do you implement to support others who participate on planning committees or engage in the work of providing CNE?
3. How do you help nurse planners problem-solve when challenges or questions arise?

Provide a description of your process and include a specific example.

Educational Design Process (EDP)

You are expected to have a clearly defined process for developing continuing nursing education activities in accordance with adult learning principles, professional education standards, and standards related to ethical practice and behavior.

In this section, your descriptions should clearly show the process you use to conduct each step of the activity planning and evaluation processes for any given learning activity (this section is specific to learning activities, whereas the SC and QO sections are more general). The examples should be related to how you implemented your process in one specific instance. Note that you may use different examples as you explain your processes; all of the examples do not come from one activity.

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

Key words/phrases here are process, identify, problem or opportunity

A professional practice gap can be considered to be the “distance” (gap) between where a learner is now (point A) and where a learner should be (point B) in relation to a particular piece of knowledge, skill set, or ability to apply knowledge and skills in the practice setting. An educational activity is designed to move the learner from point A to point B. The activity will not be effective unless and until the professional practice gap is clearly identified, so this is a critical first step in developing an educational activity.

Consider the following in developing your answer:

1. How do you define a professional practice gap?
2. How do you know when one exists?
3. How do you determine **what** the real issue is that needs attention?
4. What sources of data might alert you to the existence of a professional practice gap?

Provide a description of your process, and then include a specific example.

EDP 2: ASSESSMENT: *How the nurse planner identifies the educational needs (knowledge, skills, and/or practices) that contribute to the professional practice gap.*

Key words/phrases here are nurse planner, identifies, educational needs, contribute to

Consider the following in developing your answer:

1. What evidence do you use to determine **why** the professional practice gap exists? (**Or** – how do you figure out the problem causing the gap?)
2. How does your needs assessment data support you in doing this gap analysis? Or, conversely, how does identifying the gap help you do a more targeted assessment of the needs of the learners expected to participate in this activity?
3. What resources do you use to identify those underlying needs (example: new national standards; hospital quality data nurse input shows that one department has an above-benchmark rate of infection)
4. How do you determine whether the gap is in knowledge, skills, or application in practice?
5. How do you use this evidence to determine whether there is an educational need at all, versus an individual compliance or competency issue?

Provide a description of your process, and then include a specific example.

EDP 3: PLANNING: *The process used to identify and resolve all conflicts of interest for all individuals in a position to control educational content.*

Key words/phrases here: process, identify, resolve, conflicts of interest, control educational content

NOTE: It is always required to identify presence or absence of conflicts of interest. “Not applicable” is not an acceptable response.

Consider the following in developing your answer:

1. How do you define “conflict of interest” (COI)?
2. Who has the ability to “control content” for an activity?
3. Of all involved in CNE, who needs to disclose relevant relationships?
4. What process and documents do you use to determine if anyone has a COI?
5. How do you determine whether there really is a conflict of interest for someone involved with the learning activity or if they just listed something on their disclosure form that isn’t really a relevant relationship?
6. What do you do if a person states that he/she has a conflict of interest?
7. What if the person states that he/she does not have a conflict of interest, but the nurse planner thinks there may be one?
8. What happens if someone declines to provide evidence related to conflict of interest for self or spouse?
9. Who reviews the nurse planner’s disclosure?

10. What happens if the nurse planner has a conflict of interest?
11. What options do you consider in resolving the conflict? When would you choose one option over another? How do you choose?
12. Provide a description of your process, and then include a specific example.

EDP 4: DESIGN PRINCIPLES: *How content of educational activities is developed based on best available current evidence to foster achievement of desired outcomes (e.g. clinical guidelines, peer-reviewed journals, experts in the field).*

Key words/phrases here: content, best available current evidence, desired outcomes

Consider the following in developing your answer:

1. How does the content selected relate to the professional practice gap and evidence supporting the need for the activity (data from EDP 1 and 2)?
2. How do you define “best available current evidence”?
3. What are sources of evidence typically used to meet identified educational needs?
4. How does the planning committee work with the speaker/author to assure that content and references/resources relate to closing the identified practice gap?
5. How do you validate that the presenter/author is using best-available evidence to present the information?
6. Have you ever used content reviewers to evaluate content to be sure it is based on best available evidence?

Provide a description of your process, and then include a specific example.

EDP 5: DESIGN PRINCIPLES: *How strategies to promote learning and actively engage learners are incorporated into educational activities.*

Key words/phrases here: strategies, promote learning, actively engage learners

Consider the following in developing your answer:

1. Why is it important that your learners be actively engaged?
2. What are common strategies you use to engage learners?
3. How do you select strategies to use for specific educational activities?
4. How do you evaluate the effectiveness of learner engagement strategies in your educational activities?
5. What do you do if learners don’t “engage”?
6. How are the selected teaching methods related to the identified professional practice gap and contribute to the learners’ ability to achieve the desired outcome of the activity? (**Or** why do you choose the methods you choose?)

Provide a description of your process, then include a specific example.

EDP 6: EVALUATION: *How summative evaluation data for an educational activity are used to guide future activities.*

Key words/phrases here: summative, guide future activities

Consider the following in developing your answer:

1. How do you collect evaluation data? (NOTE: An evaluation FORM is not required; you are required to have an evaluation process.)
2. How do you select evaluation strategies based on whether the identified gap is in knowledge, skill, or application in practice?
3. What data can you collect to assess whether a practice gap has been closed for an activity?
4. How do you summarize evaluation data?
5. Who is responsible for this process?
6. How is it shared, and with whom?
7. What is the purpose of sharing summative evaluation data?
8. How does this data help in planning future learning activities

Provide a description of your process, then include a specific example.

EDP 7: EVALUATION: *How the Nurse Planner measures change in knowledge, skills, and/or practices of the target audience that are expected to occur as a result of participating in the educational activity.*

Key words/phrases here: measures change, result of educational activity

Consider the following in developing your answer:

1. What data do you look for to indicate that your educational activity has contributed to nsg. professional development?
2. What evaluation data do you collect to indicate that the previously identified gap has been filled for a given learning activity?
3. How and when do you measure change in learner knowledge, skill and/or practice? (Both short term and long-term strategies.)
4. What resources do you use to help you measure change? (e.g.; quality improvement data, surveys, or other existing sources of evidence within your system)
5. What evidence do you look at to show whether or not a learning activity changed nursing practice?

Provide a description of your process, then include a specific example.

Quality Outcomes (QO)

The Approved Provider Unit engages in an ongoing evaluation process to analyze its effectiveness and its contributions to improving nursing professional development.

QO 1: EVALUATION PROCESS: *The process utilized for evaluating effectiveness of the Approved Provider Unit in delivering quality CNE.*

Key words/phrases here: evaluating effectiveness, delivering quality CNE

Consider the following in developing your answer:

1. How do you evaluate the effectiveness of your provider unit? What is the PROCESS?

2. How often does your provider unit evaluation process occur?
3. Who engages with you in the evaluation process?
4. What does “effectiveness” mean for your APU? How do you know you are effective?
5. What things, besides your individual activities, do you consider in your evaluation of the effectiveness of your provider unit? (e.g., What about strategic plan, mission, stake holder input, customer satisfaction, opportunities for improvement, and or human and financial resources?)
6. Why is it important that you conduct this type of evaluation?

Provide a description of your process, then include a specific example. An example would ideally include the results of your most recent approval.

QO2: EVALUATION PROCESS: *How the evaluation process for the Approved Provider Unit resulted in the development or improvement of an identified quality outcome measure (from OO4a).*

Key words/phrases here: evaluation process, development/improvement of quality outcome measure (NOTE: This criterion refers directly back to OO4a – be sure to review the quality outcome measures for your provider unit before addressing this criteria. Remember that QO2 relates to the effectiveness of the provider unit and is specific to provider unit operations – not learner outcomes.)

Consider the following in developing your answer:

1. What outcomes measures (identified in OO4a) are you using to evaluate your provider unit’s structure and processes?
2. When do you determine what your outcome measures will be?
3. What data have you collected to assess your progress on meeting these outcome measures?
4. From whom have you collected data about the effectiveness of your provider unit in meeting the quality outcome measures?
5. How do you analyze this data to determine your effectiveness?
6. Based on that data, what changes have you made to an existing outcome measure? Why?
7. What new outcome measures, if any, have you added? Why?
8. What outcome measures, if any, have you deleted from your priorities? Why?

Provide a description of your process, then include a specific example.

QO 3: VALUE/BENEFIT TO NURSING PROFESSIONAL DEVELOPMENT: *How, over the past 12 months, the Approved Provider Unit has enhanced nursing professional development (refer to identified quality outcomes listed in OO4b).*

Key words/phrases here: past 12 months, enhanced nursing professional development (NOTE: This criterion refers directly back to OO4b – be sure to review your quality outcome measures for nursing professional development before addressing this criteria. Remember that QO3 relates to how your provider unit has contributed to improving the practice of nursing.)

Consider the following in developing your answer:

1. How are your learning activities designed to help nurses learn and grow?
2. What evidence do you have that nurses are able to implement what they learned?
3. How does what nurses learn improve their professional development or the care they provided for their patients?

4. How do you know this?
5. What metrics provide supporting evidence that professional growth or change in practice occurred and that professional practice gaps were closed?
6. How do you report and/or share your quality outcomes data with others in your organization?
7. Why does it matter? How do your outcomes benefit the organization as a whole?

Provide a description of your process, then include a specific example.

Resources

American Nurses Association and Association for Nurses in Professional Development (2010). *Nursing Professional Development Scope and Standards of Practice*. Silver Spring, MD; Author.

American Nurses Credentialing Center (2015). *2015 ANCC Primary Accreditation Approver Application Manual*. Silver Spring, MD., author.

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