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**Montana Nurses Association’s Accredited with Distinction Approver Unit.**

**The original document was shared through the courtesy of**

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**Completing the WNA Provider Application, Including Narrative Self Study**

There are two components for applying or re-applying to be a WNA approved provider: sample activity files and a narrative application.

**Sample Activity Files**

In addition to completing the narrative application, you must submit three activity files (including the Educational Activity Record Form and all attachments) that document your use of the ANCC criteria as adopted by WNA. The activity files must be from activities held within the previous year.

* If you have jointly provided one or more activities in the past year, you must include a jointly provided activity file.
* If you have accepted commercial support in the past year, you must include an activity for which commercial support was accepted.
* If you have offered enduring materials (on-demand learning) in the past year, you must include an enduring material activity file.

**Narrative Application Document**

There are four components to the narrative application: Organizational Overview (OO), Quality Outcomes (QO), Structural Capacity (SC), and Educational Design Process (EDP).

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.

***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:

**STRUCTURAL CAPACITY**

OO1a. “Please provide an Executive Statement / High Level Summary to indicate how your Provider Unit functions and how it relates to your overall organization. In your summary, you must address the following elements at a minimum (see list of elements “a” through “I” to address in the application).”

If your organization does not already have an Executive Summary specific to the scope of your Provider Unit, just respond to points a – i in a narrative format.

If your organization has an Executive Summary specific to the scope of your Provider Unit, include it as an attachment, note the location of the attachment, and be sure it addresses points a – i.

If you have an Executive Summary specific to the scope of your Provider Unit but it does not address all points a – i, then include it as an attachment, note the location of the attachment, and also respond in a narrative with any points a – i that it does not address.

OO1b. “ Please provide an Executive Summary of your Organization. In your summary, you must address the following elements (see list of elements “a” through “d” to address in the application ).

If your organization does not have an organizational Executive Summary, just respond to points a – d in a narrative format.

If your organization has an organizational Executive Summary, include it as an attachment, note the location of the attachment, and be sure it addresses points a – d.

If you have an organizational Executive Summary but it does not address all points a – d, then include it as an attachment, note the location of the attachment, and also respond in a narrative with any points a – d that it does not address.

OO2. Lines of Authority and Administrative Support

1. Submit a **list** of the names, credentials, and titles of the Primary Nurse Planner and Nurse Planners (if any) in the Approved Provider Unit.

Include for each person that they hold a BSN/BAN or higher in nursing.

For example, list: “Nick Smith, RN, BSN, MS, CHCP.” Do not just list “Nick Smith, RN, MS, CHCP.” We can’t tell if his MS is in nursing or not, and we can’t tell if he has a BSN or not.

1. Submit **position descriptions** of the Primary Nurse Planner and Nurse Planners (if any) in the Approved Provider Unit.

This is a description of what they do in their roles as PNP and NPs (if any), not a job description from your organization.

1. Briefly describe how you ensure that all Nurse Planners in your Provider Unit are registered nurses with a Baccalaureate Degree or higher in Nursing (BSN, BAN) and have a current, unrestricted nursing license.

If your HR or nursing department does not verify current licensure, the PNP needs to do this every two years. Educational background can be checked by reviewing and verifying information on a resume or biographical information document.

OO3. Data Collection and Reporting

 **Use NARS to pull a report with the following elements:**

1. Submit a complete list of all Nursing Continuing Professional Development (NCPD) offerings provided **in the past 12 months**. Your three sample activities must be in your NARS report. Include only the following columns in your NARS report:
* Activity Title
* Activity Type (live, enduring, etc.)
* Activity city, state, country (for live activities)
* Activity Start Date
* Activity End Date
* If activity was jointly provided or not
	+ If so, name of joint provider
* Target audience
* If activity received commercial support or not
	+ If so, the amount and names of funding organizations (financial and/or in-kind)
* Hours of instruction (Total Hours of Educational Instruction Provided)
* Number of Nursing Credits (Maximum Number of Nursing Credits Provided)
* Number of Nurses who completed the activity

March applicants – include January – December of the previous calendar year.

June applicants – include April 1 of the previous year through March 31 of the current year.

September applicants – Include July 1 of the previous year through June 30th of the current year.

Be sure that all three sample activities that you submit are on the NARS report you submit.

**Quality Outcomes (QO), Structural Capacity (SC), and Educational Design Process (EDP) Sections**

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 one 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. To write a response, think about the “food for thought” questions, read the criterion, and look for key words to help you describe your processes.

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 above”.*
* *Do not repeat the same exact example.*
* ***The Quality Outcomes section and the Structural Capacity section are about your Provider Unit as a whole, not about your activities.***

**Quality Outcomes (QO)**

The Quality Outcomes section of the narrative application is about your provider unit as a whole, not about individual activities. Approved providers are responsible for regular, self-evaluation to assess whether or not they are effective. At a minimum, this entails review and improvement of quality outcome measures for the approved provider unit.

WHEN YOU DEVELOP OR IMPROVE YOUR PROVIDER UNIT QUALITY OUTCOME MEASURES, BE SURE TO USE THE HANDOUT ON WRITING QUALITY OUTCOME MEASURES FROM THE WNA WEBSITE.

The Approved Provider unit must evaluate the effectiveness of its overall functioning as an Approved Provider Unit, in the areas of structure/processes and nursing professional development.

***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 used for evaluating the overall effectiveness of the approved provider unit in carrying out its work as a provider of continuing nursing education.

Key words: evaluating effectiveness, your work as a provider

Food for thought:

1. What is the evaluation plan that you implement for your provider unit?
2. **What processes do you use to evaluate your provider unit effectiveness?**
3. How often does your provider unit evaluation process occur and who is involved?
4. How do you define “effectiveness” for your provider unit? How do you know you’re effective?
5. **What things, besides your individual activities, do you consider in your evaluation of the effectiveness of your provider unit? (For example, personnel, finances, material resources?)**

Provide a description of your process. Note: No example is needed here, as QO 2 and 3 will be your examples.

**QO2**: EVALUATION PROCESS:

**QO2a:** Identify the quality outcomes 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 the outcomes.

Key words: quality outcome, improve provider unit operations, metrics

Food for thought:

1. **What quality outcomes did we established last year to improve the operation of our provider unit?**
2. **What did we want to achieve for each (what was our target)?**
3. **How did we measure each? (What data was collected / analyzed?)**
4. **Why did we choose these outcomes?**

**QO2b:** 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.

Key words: evaluation process, development/improvement of quality outcome measure, how outcome was measured and analyzed

Food for thought:

1. **How did the evaluation data from your most recent evaluation (as described in QO1) help you select this outcome measure?**
2. **What have you done over the past year to implement and evaluate that outcome?**
3. **What were your results?**

**QO 3:** VALUE/BENEFIT TO NURSING PROFESSIONAL DEVELOPMENT

**QO3a:** Identify the quality outcomes 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 the outcomes.

Key words: quality outcome, improve professional development of nurses, metrics

Food for thought:

1. **What are the quality outcomes we established last year to improve the professional development of nurses (this could include improving their professional behavior, their practice, and/or patient outcomes)?**
2. **What did we want to achieve (what was our target for each)?**
3. **How did we measure each?**
4. **Why did we choose these outcomes?**

**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.

Key words: past 12 months, enhanced nursing professional development

Food for thought:

1. How were your learning activities designed to help nurses learn and grow?
2. **What evidence do you have that nurses were able to implement what they learned?**
3. **How did nurses improve their professional development or the care they provided for their patients as a result of what they learned?**
4. How do you know this?
5. **What metrics provided supporting evidence that professional growth or change in practice occurred and that professional practice gaps were closed?** (This should be aggregate data over the course of a year, not related to one specific activity.)

**Structural Capacity**

SC1. The Primary Nurse Planner’s (PNP) commitment to learner needs, including how Approved Provider Unit processes are revised based on data, which may or may not include but are not limited to individual activity evaluation results, stakeholder feedback (staff, volunteers), and learner/customer feedback.

Key words: commitment, learner needs, how processes are revised, based on data

Food for thought - Process description:

1. **How does the Primary Nurse Planner use feedback to improve provider unit processes?**
2. What feedback is used to make process improvements?
3. What does the PNP do with this information?
4. How are improvements implemented?

Food for thought - Example:

Describe a time when you as the PNP made an improvement based on data.

1. What was the opportunity for improvement?
2. How did you first identify the opportunity for improvement?
3. What data did you analyze to determine an improvement was needed?
4. How did you make the improvement?
5. What was the result?

SC2. How the Primary Nurse Planner ensures all Nurse Planners in the Approved Provider Unit are appropriately oriented/trained to implement and adhere to the ANCC/WNA CEAP criteria.

Key words: primary nurse planner, nurse planners, oriented/trained, implement, and adhere

Food for thought - Process description:

You need to have a process in place to orient nurse planners even if you currently don’t have any nurse planners to orient. If you don’t have any nurse planners to orient, answer the question as if you do. For the example, give an example of what you would do.

1. **How do you as the PNP orient new nurse planners to your provider unit?**
2. **How do you keep them updated on changes?**
3. **How do you as the PNP monitor to be sure they are doing the right things on a consistent basis?**

Food for thought - Example:

Describe the last time you oriented a new nurse planner.

1. What information did you cover?
2. Who was involved in the orientation?
3. What processes were in place to ensure the nurse planner was successful in using the ANCC/WNA criteria to plan nursing professional development?

SC3. How the Primary Nurse Planner / Nurse Planner provides direction and guidance to individuals involved in planning, implementing, and evaluating CNPD activities in compliance with ANCC / WNA CEAP criteria.

Key words: Primary Nurse Planner or Nurse Planner, direction and guidance, compliance

Food for thought - Process description:

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 guide others who participate on planning committees or engage in the work of providing CNE?**
3. **How do you ensure all planners use the criteria for planning activities?**

Food for thought - Example:

Describe a time when you or one of your nurse planners provided guidance to an individual or group that was planning a nursing professional development activity.

1. Who provided the guidance?
2. Who received the guidance?
3. What was the problem that needed to be addressed?
4. How was the problem addressed?
5. How did this result in the correct use of the ANCC/WNA criteria for planning?

**Educational Design Process**

EDP1. Describe the process used to identify a problem in practice or an opportunity for improvement (professional practice gap).

Key words:process, identify, problem or opportunity

Food for thought - Process description:

A professional practice gap can be considered to be the “distance” (gap) between where a learner is now (point A) and where a leaner 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.

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?**

Food for thought - Example:

Describe a time when you identified a professional practice gap.

1. Who brought the gap to your attention?
2. What was the gap?
3. What data or information did you use to validate that the gap existed?
4. Why did you use that particular data?

EDP2. How the Nurse Planner identifies the underlying educational needs (knowledge, skills, and/or practice(s)) that contribute to the professional practice gap (s) (PPG).

Key words: nurse planner, identifies, underlying educational needs, knowledge, skills and/or practice, contribute to

Food for thought - Process description:

1. Once you identify a gap, what evidence do you use to determine why a professional practice gap exists?
2. **Once you identify a gap, how do you conduct a more targeted assessment of the underlying needs of the learners expected to participate in this activity that will drive the specific content?**
3. What resources do you use to identify those underlying needs that will drive the specific content?
4. **How do you “drill down” to determine whether the gap is in knowledge, skills, or application in practice?**
5. How do your activities differ, based on if the underlying learning need is in knowledge, skill, or practice?

Food for thought - Example:

Describe a time when you identified a gap and then determined the underlying learning needs of the target audience.

1. What was the gap?
2. Once you knew what the gap was, how did you determine if the underlying learning need was in knowledge, skill, or practice?
3. How did you determine the specific content that would address the gap and underlying learning needs?
4. Who provided input into the decisions about what specific content and format to use for the activity?

EDP3n. How the Nurse Planner identifies, and measures change in knowledge, skills, and/or practices of the target audience that are expected to occur as a result of participation in the educational activity. (Formerly EDP7)

Key words: identifies, measures change, result of educational activity

Food for thought - Process description:

1. What data do you look at to indicate that your educational activity has contributed to nursing professional development?
2. **What evaluation data do you collect and analyze that show whether or not the previously identified gap has been closed for a given learning activity?**
3. **If there is a gap in:**
	* **Knowledge, how and when after an activity do you measure change in learner knowledge?**
	* **Skill, how and when after an activity do you measure change in a learner’s actual skills?**
	* **Practice, how and when after an activity do you measure change in a learner’s actual practice?**
4. **For what types of activities do you measure change in the practice setting (“long term” evaluation)?**
5. **What resources do you use to help you measure change in the practice setting?** (e.g., quality improvement data, surveys, or other existing sources of evidence within your system)
6. **What evidence do you look at to show whether or not a learning activity changed nursing practice?**

Food for thought - Example:

Describe a time when you measured a change in learner knowledge, skills, or practice.

1. Was the gap for the activity in knowledge, skill, or practice?
2. Was the activity designed to change knowledge, skill, or practice?
3. How and when did you measure a change in knowledge, skill, or practice?
4. What data did you look at to determine if a change occurred?
5. What did you learn from this process?

EDP4n. The process used to identify and resolve all conflicts of interest for all individuals in a position to control educational content. (Formerly EDP3)

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

Food for thought - Process description:

A conflict of interest exists when an individual is in a position to 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.

An ANCC defined Commercial Interest is 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, or an entity that advocates for use of the products or services of commercial interest organizations. Exceptions are made for nonprofit or government organizations and non-health care-related companies.

Potential for bias is not the same thing as a conflict of interest. If you are confused about the difference between conflict of interest and bias, or about conflict of interest in general, please read the conflict of interest section of the WNA Approved Provider manual or the article on the WNA CEAP Resources page.

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 financial 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 a conflict of interest?**
12. **Why would you choose one option over another? How do you choose?**

Food for thought - Example:

Describe a time when you had a planner or a presenter with a conflict of interest. If you have never had a planner or presenter with a conflict of interest, describe a hypothetical conflict of interest and what you would do if it existed.

1. What was the conflict of interest?
2. What process did you use to discover the conflict of interest?
3. When you discovered the conflict of interest, what did you do to assess if it actually was a conflict of interest?
4. If it was an actual conflict of interest, what did you do to resolve it?
5. Once resolved, how did you disclose the conflict of interest to learners?
6. How did you know if the conflict of interest led to bias in the content / presentation?

EDP5n. How the 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. (Formerly EDP4)

Key words: content, best available current evidence, desired outcomes

Food for thought - Process description:

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?

Food for thought - Example:

Describe a time when you worked with a presenter to ensure best available evidence.

1. How did the presenter know what the desired outcome was for the activity?
2. How did you communicate the content that you wanted included in the presentation to address the practice gap and underlying learning needs?
3. How did you assess the content validity of the planned presentation content?
4. How did you know what references your presenter was drawing upon for content and how did you evaluate the information?

EDP6n. How strategies to promote learning and actively engage learners are incorporated into educational activities. (Formerly EDP5)

Key words: strategies, promote learning, actively engage learners

Food for thought - Process description:

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?)**

Food for thought - Example:

Describe a time that you chose strategies to engage learners.

1. What was the desired outcome for the activity?
2. Was the underlying need in knowledge, skill, or practice?
3. What learning strategies did you choose?
4. Why did you choose the strategies that you chose?

EDP7n. How the summative evaluation data for an educational activity are used to analyze the outcomes of that activity and guide future activities. (Formerly EDP6)

Key words: how used to analyze outcomes, summative, guide future activities

Food for thought - Process description:

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

Food for thought - Example:

Describe a time when you analyzed the outcomes of an activity to guide the development of future activities.

1. What was the activity?
2. Was the gap in knowledge, skill, or practice?
3. What was the desired outcome?
4. How did you measure whether or not the outcome was achieved?
5. How did you analyze the data to help guide future activities?