



PRIMARY  
ACCREDITATION

NURSING ACTIVITY REPORTING SYSTEM  
(NARS) USER MANUAL

*For Annual Reporting*

## ANCC Nursing Activity Reporting System (NARS)

The ANCC's Nursing Activity Reporting System (NARS) is a web-based portal designed to streamline and support the collection of program and activity data from Accredited Providers, Accredited Approvers, and Approved Providers (Providers approved by an ANCC Accredited Approver Unit). The ANCC uses the information in NARS to evaluate/support provider accreditation criterion which is a part of the educational design process for initial accreditation, reaccreditation, and progress report reviews (refer to chapter 4 of the provider/approver manual). In addition, the ANCC will use data from NARS to produce annual reports as a service to ANCC Accredited Organizations and other stakeholders. This system will replace the current Annual Reporting. All Providers and Approvers accredited directly by the ANCC are required to use NARS. Providers approved by a Constituent State Nursing Association (C/SNA) or Federal Nursing Service (FNS) (Approved Providers), should check with their Approver Unit for details.

## When, and how frequently, do I need to enter data into NARS? When is my annual report due each year?

ANCC Accredited Providers and Approvers may determine when and with how much frequency to enter their activity data. ANCC encourages providers to begin inputting data as soon as possible. You can enter basic information about an activity before it has taken place and complete the entry after the activity occurs.

You must enter all of your organization's program and activity data for a completed Reporting Year **AND** complete the Attestation **by April 1<sup>st</sup> of each reporting year** to allow for the calculation of the ANCC Annual Report data.

## How do I use NARS to complete my year-end reporting?

**There are three (3) components of your organization's year-end reporting to the ANCC:**

1. **Enter** all of your activities for the reporting year and ensure that they are "Closed".
2. **Complete the required information** on the Program Summary tab.  
*Once you have entered the appropriate information on the Program Summary tab, be sure to click on the "Save Program Summary" button.*
3. **Attest** that your data is complete and ready for ANCC review.

## What are the different ways I can input data into NARS, and which option is right for my organization?

1. **Web-Based Interface** - By clicking "Add an Activity" on the Activities page, you can enter data about activities one at a time. The web-based interface is a good option for organizations that only provide a moderate number of activities throughout the year, or do not already have a CNE tracking system of their own.

Providers also have two options for uploading data in batches (*you can click on the link below to learn more about each of these options*):

2. **Tab-Delimited File Upload**
3. **XML File Export**

## What is a tab-delimited batch upload?

The tab-delimited batch upload enables providers to export multiple activity records at one time into NARS. The tab-delimited batch upload process originates with the use of an MS Excel template which closely mirrors the CNE Activity List used previously by ANCC accredited providers to report activities for reaccreditation purposes.

Organizations that already have their own CNE tracking system and have the ability to match the fields in this system to the fields in the template might elect to use this format. The tab-delimited format might also be a good choice for organizations that provide the same activity in multiple locations throughout the year. In this case, ANCC expects you to count each of these events as separate activities. Because the process originates with a Tab-Delimited Activity File Template, a simple way for you to enter many activities with similar data is to copy data from one row to another.

## What is an XML file upload?

XML File Export: XML stands for eXtensible Markup Language, a Web standard that makes it easier for computer systems to exchange data over the Internet. In order to collect information in a manner that is consistent with the data communications standards being adopted by medical education content providers, NARS includes a data upload tool that accepts XML files formatted to conform with the Medical Education Metrics (MEMS) XML standard created by Medbiquitous. Providers that have CNE activity tracking systems that support exports to XML files may wish to explore this option for uploading data to ANCC. Some technical knowledge of your tracking system and XML may be required.

*\*\*ANCC highly recommends that you work with your LMS providers/vendors or IT Support to utilize this functionality and gain optimal use of your systems. \*\**

## What is the significance of "Reporting Year?"

Annually, ANCC aggregates the activity data that is reported by providers and publishes an Annual Report that provides information to the CNE community about the size and scope of the CNE enterprise. The "Reporting Year" tells ANCC in which Annual Report the activity belongs. Most providers operate on a calendar year basis, and for these providers the Reporting Year is equivalent to the year of the Activity Date (For instance, Activity Date = September 1, 2016, and Reporting Year = 2016).

However, certain providers, such as some hospitals and medical schools, operate on an academic year calendar, and may need to pay special attention to the "Reporting Year" field for each activity they enter. For instance, if a provider offers a Regularly Scheduled Series that begins September 1, 2016 and ends June 1, 2017, the Activity Date would be September 1, 2016, and the Reporting Year would be 2017.

## ACTIVITY TYPES

### What kind of CNE activity types can be reported in NARS?

Below is a list of the different CNE activity types that can be reported in the NARS System.

Please visit the *NARS FAQs page* for a chart of activity types, a definition, and additional information: [NARS](#)

#### FAQs

- Course
- Regularly Scheduled Series
- Internet Live Course
- Enduring Material
- Internet Activity (Enduring Material)
- Journal Based CNE
- Manuscript Review
- Test Item Writing
- Committee Learning
- Performance Improvement
- Internet Searching and Learning
- Learning from Teaching

### How does the ANCC define a course?

A *course* is a live CNE activity where the learner participates in person. A course is planned as an individual event. Examples: annual meeting, conference, seminar.

For events with multiple sessions, such as annual meetings, accredited providers report one activity and calculate the hours of instruction by totaling the hours of all educational sessions offered for CNE credit. To calculate the numbers of learners, accredited providers report the number of learners registered for the overall event. Accredited providers are not required to calculate participant totals from the individual sessions.

**If a course is held multiple times for multiple audiences, then each instance is reported as a separate activity.**

### How does the ANCC define a regularly scheduled series?

A course is identified as a *regularly scheduled series (RSS)* when it is planned to have

1. a series with multiple sessions that
  2. occur on an ongoing basis (offered weekly, monthly, or quarterly) and
  3. are primarily planned by and presented to the accredited organization's professional staff.
- Examples of activities that are planned and presented as a Regularly Scheduled Series are Grand Rounds, Tumor Boards, and M&M Conferences.

### How does the ANCC define an enduring material activity?

An *enduring material* is a printed, recorded, or computer-presented CNE activity that may be used over time at various locations and which, in itself, constitutes a planned activity. In an enduring material the provider creates the content.



**Enduring materials should be reported in NARS for each year in which they are active**, either for the entire year or any part thereof. For each year that you provided the activity, please report the number of learners (nurses or other learners) who participated in it during that year, as well as the commercial support related to the activity for that year. Do not report cumulative data for an activity spanning multiple years.

When reporting the number of nurse and other learner participants for an enduring material activity, you should count all learners who completed all or a portion of the activity and whose participation can be verified in some manner. ANCC would not consider individuals that only received the enduring material activity but did not actually complete all or a portion of it to be participants.

## How does the ANCC define an internet enduring material activity?

An *internet enduring material* activity is available when the nurse participant chooses to complete it. It is “enduring,” meaning that there is not just one time on one day to participate in it. Rather, the participant determines when he/she participates. (Examples: online interactive educational module, recorded presentation, podcast).

Internet enduring material activities should be reported in NARS for each year in which they are active, either for the entire year or any part thereof. For each year that you provided the activity, please report the number of learners (nurse or non-nurse) who participated in it during that year, as well as the commercial support related to the activity for that year. Do not report cumulative data for an activity spanning multiple years.

When reporting the number of nurse and non-nurse participants for an internet enduring material activity, you should count all learners who completed all or a portion of the activity and whose participation can be verified in some manner. ANCC would not consider individuals that only downloaded or accessed the activity but did not actually complete all or a portion of it to be participants.

## How does the ANCC define a journal-based CNE activity?

A *journal-based CNE activity* includes the reading of an article (or adapted formats for special needs), a provider stipulated/learner directed phase (that may include reflection, discussion, or debate about the material contained in the article(s)) and a requirement for the completion by the learner of a pre-determined set of questions or tasks relating to the content of the material as part of the learning process.

## How does the ANCC define a manuscript review activity?

*Manuscript review* CNE is based on a learner’s participation in the pre-publication review process of a manuscript.

## How does the ANCC define hours of instruction?

*Hours of instruction* equals the total hours of educational instruction provided. For example, if a one-day course lasts eight (8) hours (not including breaks or meals), then total hours of instruction reported for that course is 8.

See the [ANCC NARS FAQs \(Under FAQs > About NARS\)](#) about regularly scheduled series, manuscript review and learning from teaching for additional specific examples regarding calculating hours of instruction for these types of activities.

## What is the difference between direct providership and joint providership of CNE activities?

A directly provided activity is one that is planned, implemented and evaluated by the accredited provider. Joint Providership is planning, developing, and implementing an educational activity by two or more organizations or agencies.

## What type of information is ANCC looking for in the "Description of Content" field?

"Description of Content" is an **optional field** for a description of the information and topics that were discussed during the CNE activity. There is no specified format for this field, although it is limited to 2500 characters. If your organization produced an abstract for the activity, we encourage you to copy and paste it into the Content field. If you did not produce an abstract, you may include the written outcomes of the activity, or simply describe the content in your own words. In the future, this information may assist ANCC and its providers in demonstrating the value and scope of CNE.

## COMMERCIAL SUPPORT

### How do I report Commercial Support for an activity?

You are required to complete the following fields regarding commercial support at the individual CNE activity level.

1. **Commercial Support Received?** – Indicate by clicking “Yes” or “No” whether commercial support was received for this activity. You should check “Yes” for this question if support was received regardless of whether it was paid directly to your organization, as the Accredited Provider, or to a joint provider.
2. **Support Source:** Complete this field for each commercial supporter for your activity. Select a name from the drop-down box, or, if the commercial supporter for your activity does not appear in the drop-down, type the supporter’s name into the text field.
3. **Monetary Support Received:** Use this field to indicate the amount of monetary support received from each commercial supporter.
4. **In-kind Support Received:** Use this field to indicate the nature of any in-kind support received from each commercial supporter.

### How do we report in-kind support?

Report any in-kind (non-monetary) commercial support received for an activity by indicating the nature of the in-kind support. You *should not* estimate the dollar value of in-kind support. The following are the options in NARS to describe the nature of in-kind support:

- Durable equipment
- Facilities/Space
- Disposable supplies (Non-biological)
- Animal parts or tissue
- Human parts of tissue
- Other

### If an accredited provider is working in joint providership with another entity, and it authorizes the commercial support to be paid directly to the other entity, does the accredited provider have to report that commercial support?

Yes, the accredited provider must report the full amount of commercial support received, even if the commercial support is distributed to other non-accredited joint providers. In the event that more than two organizations will be providing an educational activity receiving Commercial Support (jointly providing), the organization identified as the “Provider” of the activity is responsible for managing Commercial Support funds in adherence with the ANCC Accreditation criteria. A Commercial Interest Organization *may not* jointly provide educational activities. For more information on Commercial Interest Organizations, please view [ANCC’s Content Integrity Standards](#). **Under FAQs > Content Integrity.**

## **How should commercial support associated with jointly provided activities be reported?**

If your organization is the accredited provider for a jointly provided activity, ANCC requires you to report the same financial data that you do for directly provided activities, even if the joint provider was the recipient of the funds.

## What is the "Provider Activity ID"?

If your organization assigns an internal code or identifier to each of its CNE activities, you may enter it into this field.

The Provider Activity ID field is **optional ONLY WHEN** entering single activities using the NARS **web page interface**. However, **you will need to enter a value for this field in cases where your organization offers multiple activities in the same format on the same date.**

**\*\*The Provider Activity ID is required for all activities included in batch upload files. \*\***

NOTE: If an activity is provided on the same date and in a different location, you will need to enter a unique Provider Activity ID for the NARS system to recognize the activities as separate activities. If you do not use a unique identifier, you will receive an error message when uploading the file.

The Provider Activity ID is a code or identifier that your organization creates. It is used in combination with the data in the fields Reporting Year, Activity Type, and Activity Date to uniquely identify your activity records. For this reason, providers should not use their ANCC-assigned provider ID number as a Provider Activity ID, since this number would be the same for all activities you provide.

## What data are providers/approvers required to enter in NARS to "open" or "close" an activity?

**The following fields are required to establish, or "open" an activity in NARS:**

1. Activity Type (e.g. Course, Regularly Scheduled Series (RSS), Enduring Material, etc.)
2. Activity Title
3. Activity Date
4. Activity Location (**Courses and RSS only**)
5. Reporting Year

**The following fields are required to complete, or "close," an activity in NARS.**

1. Providership (Direct or Joint)
2. Hours of Instruction
3. Designed to change (Competence, Performance or Patient Outcomes)?
4. Changes in (Competence, Performance or Patient Outcomes) evaluated?
5. Number of nurses who participated in the activity
6. Number of other learners who participated in the activity
7. Commercial Support Received? (Y/N)  
- If Yes, Total Monetary Amount of Commercial Support Received and/or Nature of In-Kind Commercial Support Received
8. Competencies Addressed
9. Name(s) of Joint Providers (**jointly-provided activities only**)
10. Name(s) of commercial supporter(s) and monetary amount/nature of in-kind support received from each supporter.
11. Number of Contact Hours Awarded

**You must enter all of your organization's program and activity data for a completed Reporting Year and complete the Attestation by April 1<sup>st</sup>** to allow for the calculation of the ANCC Annual Report data. Please note that "open" and "closed" refers to the data fields that require text for the NARS system

to consider the activity open or closed. This does not mean that this information is required by ANCC for reporting purposes. For more information, please refer to the chart in [Appendix A Figure 1](#).

## **Can I use the ANCC Excel template to create an XML file upload?**

**No.** The Excel template that the ANCC has published for use with the tab-delimited .txt file upload process cannot be used to add activities through an XML file upload in NARS.

In order to successfully add activities to NARS using the XML file upload, you must structure your data as described in the XML file upload process documentation. Saving the ANCC tab-delimited text template Excel file as XML will not create a file that conforms to the Medical Education Metrics (MEMS) XML standard as required by the NARS upload process.

## **How do I report Journal Based CNE in NARS?**

When you report Journal-Based CNE in NARS, report each article as one activity. For hours of instruction, specify the amount of time required to complete the activity. The number of participants should equal the total number of individuals who completed the activity.

For example, a provider produces a journal that contains an article that is associated with a CNE activity. Twenty nurses read the article, reflect on the content, and complete questions related to the content of the article. The nurses spend 1 hour on this activity. In NARS, the provider would report this as a Journal-Based CNE activity with 20 nurse participants, and 1 hour of instruction.

## **How do I report Manuscript Review CNE in NARS?**

When you report Manuscript Review CNE in NARS, report each journal for which the manuscript is being reviewed as an activity regardless of how many manuscripts there are and regardless of how many persons have reviewed manuscripts as CNE. For hours of instruction, specify the amount of time you believe a learner would take to complete the Manuscript Review CNE activity. The number of participants should reflect the total number of learners engaged in reviewing manuscripts as CNE.

For example, a provider published one journal. During the course of the year, 25 nurses reviewed manuscripts for this journal. Each nurse spent 2 hours on his/her review. In NARS, the provider would report this as 1 Manuscript Review CNE activity, with 25 Nurse Participants and 2 Hours of Instruction.

For example, a provider created a Learning from Teaching activity for 10 nurses. Each nurse completed their CNE activity in 2 hours. In NARS, the provider would report this as a Learning From Teaching CNE activity, with 10 Nurse Participants and 2 Hours of Instruction.

## **How do I report activities that are available for more than one year?**

Activities offered over the course of multiple reporting years - such as Enduring Materials - should be reported in NARS for each year in which they are active, regardless of whether they are active for the entire year or just a part of it.

For each year that you provided the activity, you will report the number of learners (nurses or other learners) who participated during *that year*, as well as the commercial support related to the activity *for that year*. Do not report cumulative data for an activity spanning multiple years.

As an example, if a provider offers an enduring internet material activity that was launched on July 1, 2010 and remains available through December 2011, and they are reporting on a calendar year\*, then they should:

1. Report one activity in NARS for 2010 (with a start date of July 1, 2010) and then one activity for 2011 (with the same start date of July 1, 2010);
2. For each year, calculate and report the attendance **during that year ONLY**. Do not count attendance for both years when reporting for 2011;
3. For each year, calculate and report the commercial support received or incurred during that year only. If the activity received monetary commercial support, report the amount of support received in the years in which it was received. **In subsequent years, for the question, "Commercial Support Received," answer "yes" and type zero ("0") in the "Total Monetary Amount Received" field.**

## Do you have any tips about using the Tab-delimited Batch Upload feature in NARS?

**YES!** The ANCC has put together several tools for you to use related to uploading your activity data in batches using the Tab-Delimited Batch Upload feature in NARS. Below we have provided a Tab-delimited File Upload Instructions ('Upload Instructions') document which walks you through the process.

The following notes and guidelines are offered for providers who choose to upload activity data into NARS using a tab-delimited text file format. Although we reference the Tab-Delimited Activity File Template ('Excel Template') below, this information is applicable regardless of the method used to create a text upload file. Adhering to these guidelines will reduce the potential for validation errors during the file upload process. These tips can be found on pages 7-8 of the Upload Instructions:

- The tab delimited text file must be saved and uploaded as a .txt file.
- **Each activity record must have the minimum number of fields required as specified in the instructions for the version of the template being used.** Even if data is not required in a field, the system will expect the field to appear in the record with a blank (NULL) value, and the null value should be separated by tab-delimiters. If you use the Excel Template file, leave the cells that do not contain data completely blank (do not enter a zero or a space – enter no character at all). The columns left empty will create the appropriate blank (or null) values automatically when you save the file as a tab-delimited .txt file.  
**Note:** *It is possible for a record to exceed the minimum number of required fields if the last eight fields are repeated for multiple sources of commercial support.*
- If you are reporting details about your activities' **sources of commercial support, and an activity receives commercial support from multiple sources**, then the final eight columns must be repeated for each source of commercial support. It is important to include **ALL** of the columns **for EVERY source** of commercial support, even if they must be left blank because they were not applicable to the support received from that source.
- **Number values cannot include commas.** Currency amounts cannot include \$ characters or commas.

- When you prepare an Excel file that will be used to create a tab-delimited .txt file for upload to NARS, **there are certain characters that should be avoided in the text entries.** These characters, known as control codes, impart formatting to text within a cell and can include tabs within cells, carriage returns, and line feeds. When your Excel file is saved in tab-delimited .txt format, these characters will cause the columns and rows in your .txt file to break unexpectedly, and you will receive validation errors when you attempt to upload the file. Control characters should be removed from text in Excel before you create the .txt file for upload.
- **Do not re-arrange the order in which the columns appear in the Excel Template.** If you add any columns to the spreadsheet during your data entry process (other than repeating columns for additional sources of commercial support), the columns must be removed prior to creating the .txt file for upload.

## How do I copy activities in NARS?

If you provide the same activity in multiple locations (e.g., update course) or provide the same activity year after year (e.g., annual meeting), you can save time entering data about these activities by using the copy function in NARS. The copy function allows providers to select an existing activity and create a new activity that contains the same data for the following fields:

- Activity Type
- Activity Sub-category (if applicable)
- Activity Title
- Provider Activity ID (if applicable)
- Hours of Instruction
- Contact Hours
- Description of Content (if applicable)
- Designed to change Competence?
- Changes in Competence evaluated?
- Designed to change Performance?
- Changes in Performance evaluated?
- Designed to change Patient Outcomes?
- Changes in Patient Outcomes evaluated?

Once you copy the activity, you may modify all of the above fields in the new activity record, if needed. You must still enter the Reporting Year, Activity Date, and Activity Location (if applicable) for the new activity in order to be able to save it in NARS.

To copy an existing activity in NARS, visit the View Activities screen, select the applicable Reporting Year from the drop-down list, and find the activity that you want to copy on either the Open or Closed tab. Click on the copy button next to the activity. A dialogue box will appear that will require you to select a Reporting Year for the new activity. Select a Reporting Year and click Continue. The new activity record will appear. You will need to enter the Activity Location (if applicable) and the Activity Date in order to save the new activity in NARS.

## How do I delete more than one activity at a time?

If you need to delete more than one activity at a time from NARS, you may do so by visiting the View Activities screen and selecting the applicable Reporting Year. Expand the list of either closed and/or open activities, and click the Select for Deletion checkbox next to each activity that you want to delete. When



you have selected the activities you want to delete from both the open and closed lists, click the Delete Selected Activities button that appears above the list of activities. You will receive a warning message asking you to confirm whether you want to delete the selected activities.

***Note that you cannot delete activities that fall in a Reporting Year for which you have already provided an Attestation. If you need to delete activities to which you have already attested, please contact the ANCC.***

## How long is an enduring material "good for"?

**No longer than three years.** The ANCC policy on enduring materials requires both an original release date and an expiration date. In addition, the ANCC policy requires that you review each enduring material at least once every three years or more frequently if indicated by new scientific developments. So, while you can review and re-release an enduring material every three years (or more frequently), the enduring material cannot be offered as an accredited activity for more than three years without some review on the part of the provider to ensure that the content is still up-to-date and accurate. That review date must be included on the enduring material, along with the original release date and an expiration date. For more information, see the ANCC's policies regarding enduring materials.

## I entered all the required activity information into the form, but I don't see it on the Activities page now. Where did it go?

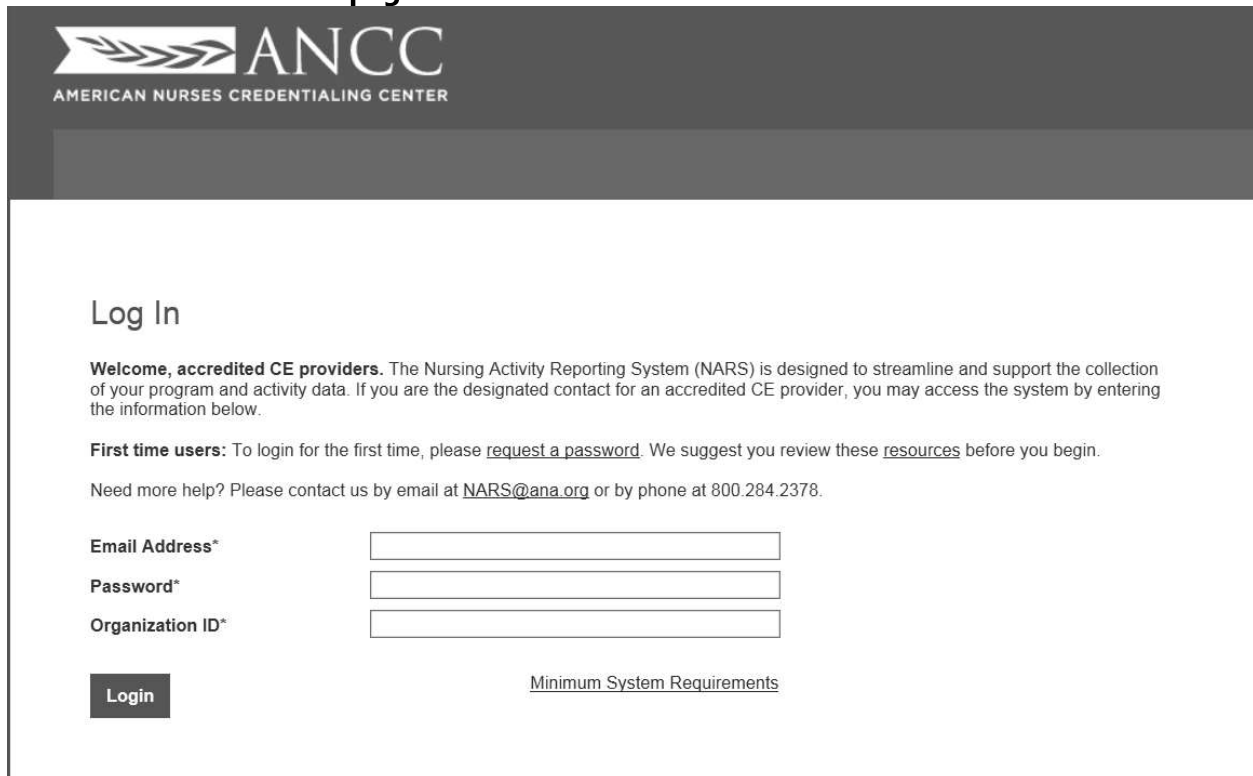
- By default, the Activities page of NARS displays "open" activities that occur during the current Reporting Year. If you enter all required activity information, but no longer see the activity listed in the default view, first make sure that the "Reporting Year" is set to the appropriate year for the activity, and then click on the "closed" tab on the Activities page. Activities that contain all required information are considered "closed."

## LOGGING IN TO NARS (Figure 1)

Please visit this link to log into the NARS System

<https://nars.nursecredentialing.org/Login.aspx?ReturnUrl=%2f>

**You will be taken to this page:**

The screenshot shows the login interface for the NARS system. At the top is the ANCC logo with the text 'AMERICAN NURSES CREDENTIALING CENTER'. Below the logo is a 'Log In' heading. A welcome message for accredited CE providers explains the system's purpose. Instructions for first-time users are provided, including a link to request a password and a suggestion to review resources. A help section provides contact information via email (NARS@ana.org) or phone (800.284.2378). The login form consists of three input fields: 'Email Address\*', 'Password\*', and 'Organization ID\*'. A 'Login' button is located below the fields. A link for 'Minimum System Requirements' is also present.

Enter the organization credentials that were emailed to you from the NARS system.

### Email Address

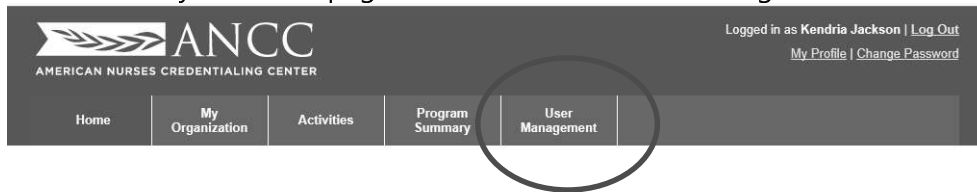
### Password

Organization ID: **N00XXX** or **A00XXX**

*Providers will have an N at the beginning of their organization ID. Approvers will have an A at the beginning of their organization ID. \*Please note that this organization ID is **different** from your Provider number (P#) or Approver Number (A#) given to you in your accreditation letter by the ANCC.\**

## ADDING ADDITIONAL USERS (Figure 2)

1. From your home page click on the tab "User Management"



Welcome to Nursing Activity Reporting System (NARS)

If you need assistance you can click on the help link at the top of each NARS screen or hover over the question mark (?) for context sensitive help on each page. Need more help? Please contact [NARS@ana.org](mailto:NARS@ana.org) or by phone at 1.800.284.2378.

### My Organization Profile

Name: Test Provider

Provider Type: Accredited Provider

Organization ID: N008000

Organization Type: Other (Other)

Accreditor/Approver: American Nurses Credentialing Center

Address: 1234 Main  
Chicago, IL 60606

Phone: 312-333-3333

Web Address: www.test.com

Lead or Primary Nurse Planner

Mr. Steve Janis  
Senior Developer  
1234 Main  
Chicago, IL 60606  
[steve.janis@rwkdesign.com](mailto:steve.janis@rwkdesign.com)  
p. 312-333-3333

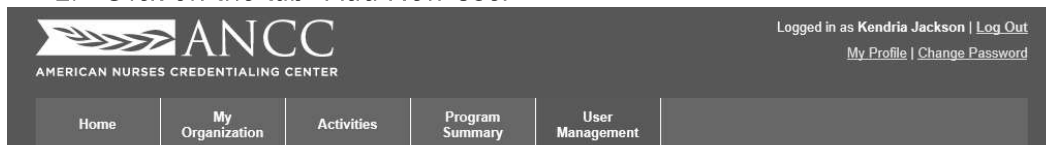
[Change Lead or Primary Nurse Planner](#)

[Edit Organization Profile](#)

Report Activities

To report activities, [click here](#)

2. Click on the tab "Add New User"




### User Management ?

[Add New User](#)

Accredited Approver	Organization	First Name	Last Name	Email Address/Username	Phone Number	Position	Action
American Nurses Credentialing Center	Test Provider	Steve	Janis	<a href="mailto:steve.janis@rwkdesign.com">steve.janis@rwkdesign.com</a>	312-333-3333	Senior Developer	<a href="#">update</a> <a href="#">delete</a>
American Nurses Credentialing Center	Test Provider	Kendria	Jackson	<a href="mailto:kendria.jackson@ana.org">kendria.jackson@ana.org</a>	123-456-7890		<a href="#">update</a> <a href="#">delete</a>

3. Fill in all of the required fields and click save once you are finished.

**ANCC**  
AMERICAN NURSES CREDENTIALING CENTER

Logged in as **Kendria Jackson** | [Log Out](#)  
[My Profile](#) | [Change Password](#)

Home

My Organization

Activities

Program Summary

User Management

### Add New User

Fields with an asterisk (\*) are required.

First Name\*

Middle Initial

Last Name\*

Title\*

Position

Credentials

Email Address\*

Re-enter Email Address\*

NOTE: When a new user account is created, a system-generated password for the user will be sent to the email address provided.

Address

Street\*

City\*

State\*

Zip Code\*

Country\*

Phone Number\*

Fax Number

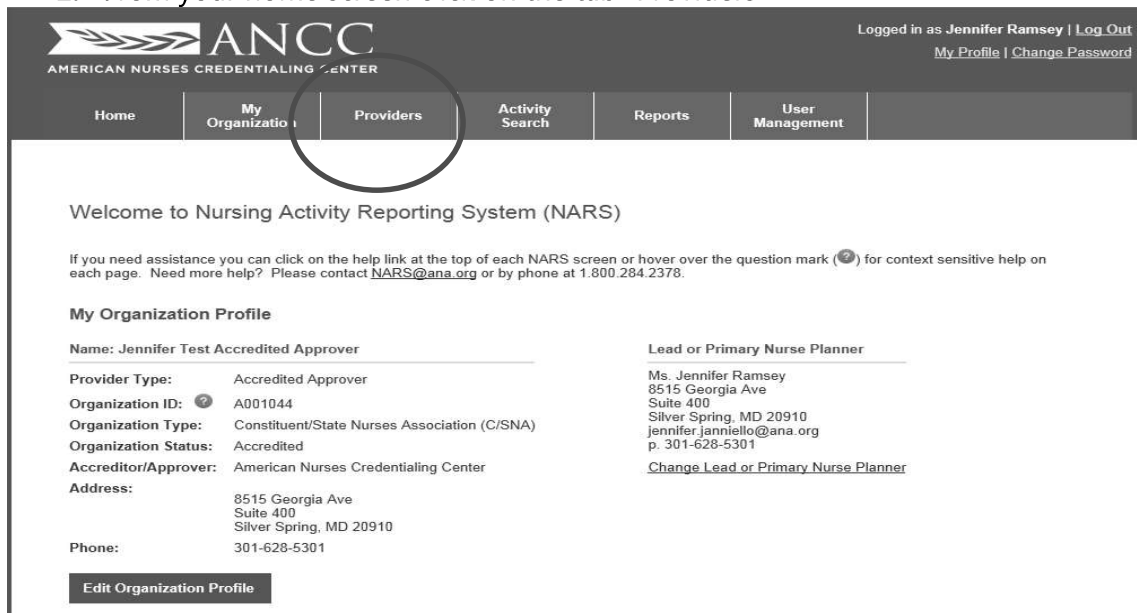
Cancel

Save

# How to add Approved Providers – FOR APPROVER UNITS ONLY

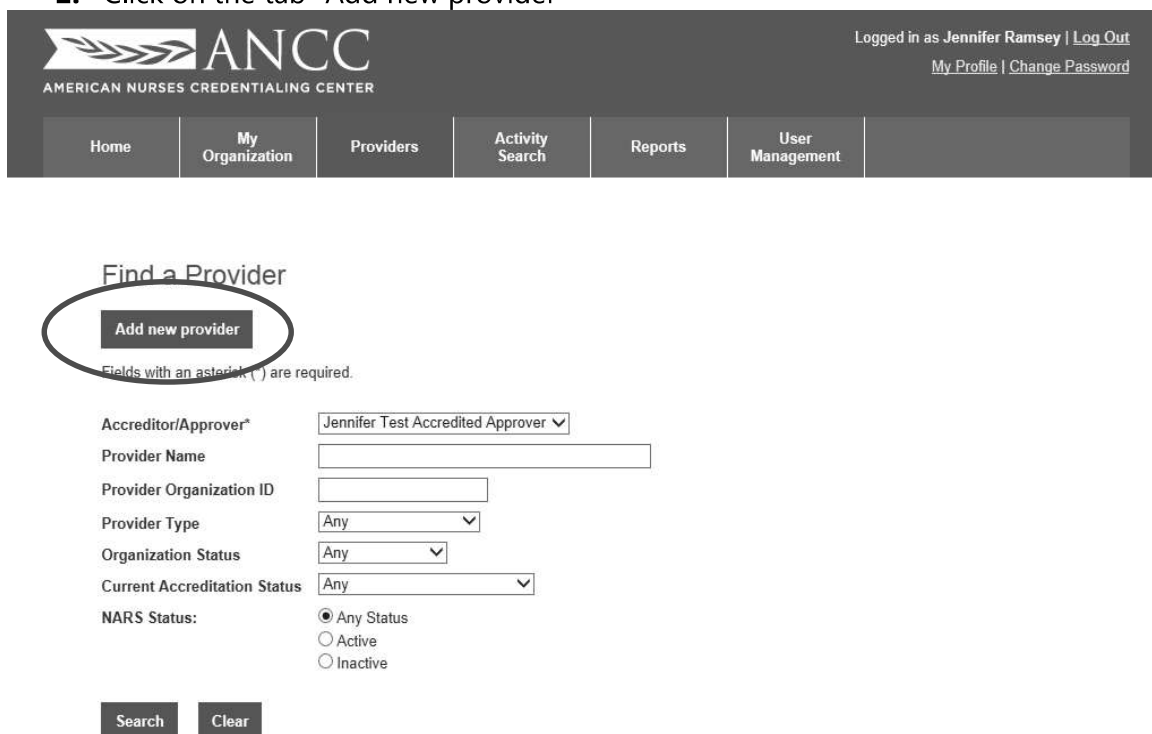
## (Figure 3)

1. From your home screen click on the tab "Providers"




The screenshot shows the ANCC NARS dashboard. The top navigation bar includes links for Home, My Organization, Providers (circled), Activity Search, Reports, and User Management. The main content area displays the 'My Organization Profile' for Jennifer Test Accredited Approver. The profile includes fields for Provider Type, Organization ID, Organization Type, Organization Status, Accreditor/Approver, Address, and Phone. A button labeled 'Edit Organization Profile' is visible at the bottom.

2. Click on the tab "Add new provider"



The screenshot shows the 'Find a Provider' form. The 'Add new provider' button is circled. The form includes fields for Accreditor/Approver, Provider Name, Provider Organization ID, Provider Type, Organization Status, Current Accreditation Status, and NARS Status. A 'Search' button is located at the bottom left.

### 3. Fill in all of the required fields and click save

**ANCC**  
AMERICAN NURSES CREDENTIALING CENTER

Logged in as Jennifer Ramsey | [Log Out](#)  
[My Profile](#) | [Change Password](#)

HomeMy OrganizationProvidersActivity ReportReportsUser Management

### Add New Provider

Fields with an asterisk (\*) are required.

Provider Name\*

Provider Type\*

Organization Type\*

Organization Status\*Initial Applicant

Accreditor/Approver\*

Address

Street\*

City\*

State\*

Country\*United States of America

Zip Code\*

Phone Number\*

Fax Number

Web Address:

Notes:

Lead Or Primary Nurse Planner

First Name\*

Middle Initial

Last Name\*

Title\*

Position

Credentials

Email Address\*

Re-enter Email Address\*

NOTE: When a new user account is created, a system-generated password for the user will be sent to the email address provided.

Address

Street\*

City\*

State\*

Country\*United States of America

Zip Code\*

Phone Number\*

Fax Number

Billing Contact\*☒ Same as Lead or Primary Nurse Planner

Other Contact\*☒ Same as Lead or Primary Nurse Planner

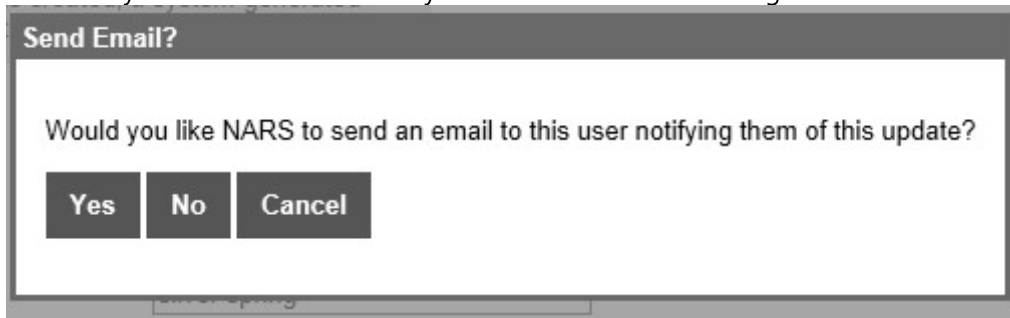
Cancel

Save

17 | Page

Last Revision 02/2019

4. Once you click the save button you will see the below message



**If you would like to notify your Approved Provider** they have access to the system click "Yes"  
**If you do not want to notify your Approved Provider** they have access to the system click "No"

## Conversion Terms for Description of Activity Characteristics in Database to ANCC Terms (Figure 4)

ACRONYM	CURRENT TERM	ANCC HELP TOOL
<b>S</b>	Synchronous	Live
<b>A</b>	Asynchronous	Enduring
<b>B</b>	Blended	Blended
<b>One of the following Activity Type Codes:</b>	Code Key:	
<b>C</b>	Course	<p>A course is a live educational activity where the learner participates in person. A course is planned as an individual event. Examples: annual meeting, conference, seminar.</p> <p>For events with multiple sessions, such as annual meetings, accredited (approved) providers report one activity and calculate the hours of instruction by totaling the hours of all educational sessions offered for CNE credit. To calculate the numbers of learners, accredited (approved) providers report the number of learners registered for the overall event. Accredited (approved) providers are not required to calculate participant totals from the individual sessions.</p> <p>If a course is held multiple times for multiple audiences, then each instance is reported as a separate activity.</p>
<b>RSS</b>	Regularly Scheduled Series	<p>A regularly scheduled series (RSS) as a course that is planned as a series with multiple, ongoing sessions, e.g., offered weekly, monthly, or quarterly; and is primarily planned by and presented to the accredited (approved) provider's professional staff. Examples include grand rounds, tumor boards, and morbidity and mortality conferences.</p> <p>Accredited (approved) providers report each RSS as 1 activity. In addition, accredited (approved) providers follow the following guidelines: The cumulative number of hours for all sessions within a series equals the number of hours for that activity and each nurse is counted as a learner for each session he/she attends in the series.</p> <p>For example: Nursing Activity is planned for the entire year as 1 series. Participants meet weekly during the year for 1 hour each week. The accredited (approved) provider reports the series as 1 activity with 52 hours of instruction. If 20 nurses participated in each session, total nurse participants would be 1,040 (20 nurses per session multiplied by 52 sessions) for that single activity.</p>
<b>IL</b>	Internet Live	An Internet live activity is an online course available via the Internet



	Course	at a certain time on a certain date and is only available in real-time, just as if it were a course held in an auditorium. Once the event has taken place, learners may no longer participate in that activity unless it is again presented on a specific date and time and is only available in real-time. If an Internet live activity is presented on multiple occasions, each event is counted as one activity. Example: webcast.
<b>EM</b>	Enduring Material (Homestudy)	<p>An enduring material is an activity that is printed or recorded and does not have a specific time or location designated for participation. Rather, the participant determines where and when to complete the activity.</p> <p>Sometimes, accredited (approved) providers will create an enduring material from a live CNE activity. When this occurs, ANCC considers the provider to have created two separate activities – one live activity and one enduring material activity. Both activities must comply with all ANCC requirements.</p> <p>Enduring materials can be available for less than a year, a year, or multiple years. Each enduring material is counted as 1 activity for each year it is available, whether it is active for the entire year or part of the year. The accredited (approved) provider reports the number of learners who participated during the year. Accredited (approved) providers do not report cumulative data for an enduring material activity spanning multiple years. When reporting the number of participants for an enduring material activity, the accredited (approved) provider should count all learners who completed all or a portion of the activity and whose participation can be verified in some manner. ANCC would not consider individuals that only received the enduring material activity but did not actually complete all or a portion of it to be participants.</p>
<b>IEM</b>	Internet Activity Enduring Material	<p>An Internet enduring material activity is an "on demand activity," meaning that there is no specific time designated for participation. Rather, the participant determines when to complete the activity. Examples: online interactive educational module, recorded presentation, podcast.</p> <p>Internet enduring materials can be available for less than a year, a year, or multiple years. Each Internet enduring material is counted as one activity for each year it is available, whether it is active for the entire year or part of the year. The accredited (approved) provider reports the number of learners who participated during the year. Accredited (approved) providers do not report cumulative data for an Internet enduring material activity spanning multiple years. When reporting the number of participants for an internet enduring material activity, the accredited (approved) provider should count all learners who completed all or a portion of the activity and whose participation can be verified in some manner.</p>

		ANCC would not consider individuals that only downloaded or accessed the activity but did not actually complete all or a portion of it to be participants.
<b>JN</b>	Journal-based CNE	<p>A journal-based CNE activity includes the reading of an article (or adapted formats for special needs), an accredited (approved) provider learner engagement strategy (that may include reflection, discussion, or debate about the material contained in the article(s), and/or a requirement for the completion by the learner of a pre-determined set of questions or tasks relating to the content of the material as part of the learning process.</p> <p>The ANCC does not consider a journal-based CNE activity to have been completed until the learner documents participation in that activity to the provider.</p> <p>Each article is counted as 1 activity. To calculate hours of instruction, the accredited (approved) provider specifies the amount of time required to complete the activity. The number of participants reported by the accredited (approved) provider equals the total number of individuals who completed the activity. Each participant is counted once, regardless of how many times they worked on the activity.</p> <p>For example, an accredited (approved) provider produces a journal that contains an article that is designated as a journal-based CNE activity. Twenty nurses read the article, reflect on the content, and complete questions related to the content of the article. The nurses spend 1 hour on this activity. The provider would report this as 1 journal-based CNE activity with 20 nurse participants and 1 hour of instruction.</p>
<b>MR</b>	Manuscript Review	Manuscript review is based on a learner's participation in the pre-publication review process of a manuscript.
<b>TIW</b>	Test Item Writing	Test item writing is an activity based on a learner's participation in the pre-publication development and review of any type of test-item (e.g., multiple choice questions, standardized patient cases).
<b>CML</b>	Committee Learning	Committee learning is an activity that involves a learner's participation in a committee process where the subject of which, if taught/learned in another format would be considered within the definition of continuing education.
<b>PI</b>	Performance Improvement	Performance improvement activities are based on a learner's participation in a project established and/or guided by a provider in which a learner identifies an educational need through a measure of his/her performance in practice, engages in educational experiences to meet the need, integrates learning into patient care and then re-evaluates his/her performance.
<b>ISL</b>	Internet Searching and Learning	Internet searching and learning activities are based on a learner identifying a problem in practice and then accessing content in

		search of an answer from sources on the Internet that are facilitated by a provider.
<b>LFT</b>	Learning from Teaching	<p>Learning from teaching is a descriptive label for a type of activity. (The identification of activity types allows the reporting of data and information on the range of educational formats offered nationally. This helps dispel the myth that accredited CE is mostly lecture, or didactic, in format.)</p> <p>We want to assist accredited providers who are seeking to further support, facilitate, and recognize the personal professional development associated with the preparation and presentation of education. "Learning from Teaching" activities are essentially personal learning projects designed and implemented by the learner with facilitation from the accredited provider. Guidance has been provided for providers on how "Learning from Teaching" activities can be incorporated into the accredited (approved) provider's program.</p> <p>As is the case for all activities, an accredited (approved) provider's "Learning from Teaching" activities are expected to be developed in compliance with all applicable requirements. "Learning from Teaching" represents a range of activities in which an accredited (approved) provider can facilitate practice-based learning and improvement – where the 'practice' could be the person's professional "teaching practice" or "clinical practice" or "research practice".</p> <p>Examples of learning from teaching activities:</p> <ol style="list-style-type: none"> <li>1. A faculty member is asked to give an interactive skills-based workshop on "Sinusitis" designed to address medical students' inability to evaluate patients appropriately for this condition. The faculty member identifies, through self-assessment, that he/she does not know the anatomy of the sinuses, does not know the pathophysiology of these processes, and does not have a personal strategy in place for taking a history regarding sinusitis or for examining the patient. Therefore, he/she conducts his/her own personal learning project to address these needs—and can then describe what new strategies he/she develops as a result. Also during this process, he/she learns several new skills associated with including x-ray images and 3D-imaging videos in his/her educational presentations using software tools.</li> <li>2. To prepare for teaching a skills workshop at a surgical specialty society meeting, physician faculty find that they need to learn how to operate a new laparoscopic device that will be used during the workshop. The specialty society, as an accredited provider, facilitates their training on the new device as a "Learning from</li> </ol>

Teaching" activity for the faculty prior to their teaching engagement.

3. An accredited provider makes available a "Learning from Teaching" activity for community learner who have recently been recruited as new faculty for undergraduate and graduate school instruction in the form of "individualized learning projects" where new faculty assess what knowledge and skills they need to teach more effectively, and then makes available training and feedback to improve their teaching skills. It includes one-to-one mentorship and training with educational experts that is scheduled by the learners.

4. In the process of revising a series of educational seminars provided each year for the orientation of new staff members, an administrator in the risk-management department finds that he/she has to learn and incorporate new medical coding knowledge and strategies that have been published since the last orientation he/she taught. As an accredited (approved) provider, his/her institution makes it possible for his/her to receive credit for his/her "Learning from Teaching" that involves modifications to his/her own coding practices while preparing for the seminars.

## NARS Frequently Asked Questions (Figure 5)

TOPIC	ANSWER
USER MANAGEMENT	
Who can use NARS?	<p>Individuals who are designated as a Primary Contact, Billing Contact and/or leader of an organization <b>Accredited</b> by the ANCC or an ANCC Approved Provider may access NARS with a unique login ID and password. Any of these individuals may add additional users to NARS via the "User Management" tab. The maximum number of users per organization is five.</p> <p><b>APPROVER UNITS:</b> Accredited Approvers have the option of entering their Approved Providers activity information <b>OR</b> may grant access to their Approved Providers to upload their own activity data into NARS. <b>**Accredited Approvers are responsible for entering Individual Activity Applicant data into the NARS system. <u>Individual Activity Applicants should not log in to the NARS system.</u>**</b></p> <p><b>APPROVED PROVIDERS</b> (providers that are <i>approved</i> by an <u>Approver Unit</u>): Please note that not all Accredited Approvers have elected to grant Approved Providers access to NARS. Please contact your Accredited Approver Unit to for further instructions and to request your login information and details.</p>
OPEN AND CLOSED ACTIVITIES	
What is the difference between "open" and "closed" activities?	<p>An important concept in NARS is that of "<b>open</b>" and "<b>closed</b>" activities. Open activities are those <b><u>that have a minimum set of data entered for them:</u></b> <i>specifically, activity name, activity type, activity date, and, if applicable, location.</i> Once these data about an activity are entered, the activity is "<b>open</b>", and is saved to the database. Closed activities are those activities <b><i>for which all required information has been entered.</i></b></p> <p>For example, in order for an activity to be considered "<b>closed</b>", a provider must enter data about the hours of instruction, physician and other learner participants, providership, whether commercial support was received, and if it was, how much was received and from how many supporters. Once all required fields for an activity <b><u>contain data</u></b>, NARS considers the activity "<b>closed</b>".</p> <p><i>The does not mean the activity is over or completed, this means that there is data in the fields required to open or close the activity. If data is required in a field that is not applicable to ANCC criteria OR that you are not required to report, please enter "0", "No", etc. Refer to Appendix A Figure 1 for more information and example data.</i></p>

PROVIDER ACTIVITY ID	
What is the "Provider Activity ID"?	<p>If your organization assigns an internal code or identifier to each of its CNE activities, you may enter it into this field.</p> <p>The Provider Activity ID field is <b>optional</b> when entering single activities using the NARS web page interface, however, you will need to enter a value for this field in cases where your organization offers multiple activities in the same format on the same date.</p> <p>The Provider Activity ID is required for all activities included in batch upload files.</p> <p>The Provider Activity ID is a code or identifier that your organization creates. It is used in combination with the data in the fields Reporting Year, Activity Type, and Activity Date to uniquely identify your activity records. For this reason, <b><u>providers should not use their ANCC or Accredited Approver-assigned provider ID number</u></b> as a Provider Activity ID, since this number would be the same for all activities you provide.</p>
REMS (RISK EVALUATION AND MITIGATION STRATEGIES)	
CNE in Support of REMS	<p>The ANCC Accreditation Program supports the role of CNE as a strategic asset to US Food and Drug Administration (FDA) Risk Evaluation and Mitigation Strategies (REMS), provided the proper controls are in place to ensure independence. The first REMS to incorporate CNE is the Extended-Release and Long-Acting (ER/LA) Opioid Analgesics REMS, approved by the FDA in July 2012. The centerpiece of the ER/LA Opioid Analgesics REMS is a prescriber education program about the risks of opioid medications as well as safe prescribing and safe use practices. The education is controlled, designed, and delivered by accredited continuing healthcare education providers.</p> <p>Specific activity related data are required for REMS activities.</p>
BATCH UPLOAD ACTIVITIES	
What is a tab-delimited batch upload?	<p>The tab-delimited batch upload enables providers to export multiple activity records at one time into NARS. The tab-delimited batch upload process originates with the use of an MS Excel template which closely mirrors the CNE Activity List used previously by ANCC accredited and approved providers to report activities for reaccreditation purposes.</p> <p>Organizations that already have their own CNE tracking system and have the ability to match the fields in this system to the fields in the template might elect to use this format. The tab-delimited format might also be a good choice for organizations that provide the</p>

	<p>same activity in multiple locations throughout the year. In this case, ANCC expects you to count each of these events as separate activities. Because the process originates with a Tab-Delimited Activity File Template, a simple way for you to enter many activities with similar data is to copy data from one row to another.</p>
What is an XML file upload?	<p>XML File Export: XML stands for eXtensible Markup Language, a Web standard that makes it easier for computer systems to exchange data over the Internet. In order to collect information in a manner that is consistent with the data communications standards being adopted by medical or nursing education content providers, NARS includes a data upload tool that accepts XML files formatted to conform with the Medical Education Metrics (MEMS) XML standard created by Medbiquitous. Providers that have CNE activity tracking systems that support exports to XML files may wish to explore this option for uploading data to ANCC.</p> <p><i>Some technical knowledge of your tracking system and XML may be required. All organizations are highly encouraged to consult with their Learning Management System vendors in order to get the best use and IT support out of NARS.</i></p>
<b>ANNUAL PROGRAM SUMMARY</b>	
What is the significance of "Reporting Year?"	<p>Annually, ANCC aggregates the activity data that is reported by providers and publishes an Annual Report that provides information to the CNE community about the size and scope of the CNE enterprise. The "Reporting Year" tells ANCC in which Annual Report the activity belongs. Most providers operate on a calendar year basis, and for these providers the Reporting Year is equivalent to the year of the Activity Date (For instance, Activity Date = September 1, 2010, and Reporting Year = 2010).</p> <p>However, certain providers, such as some hospitals and medical and nursing schools, operate on an academic year calendar, and may need to pay special attention to the "Reporting Year" field for each activity they enter. For instance, if a provider offers a Regularly Scheduled Series that begins September 1, 2010 and ends June 1, 2011, the Activity Date would be September 1, 2010, and the Reporting Year may be either 2010 or 2011, depending on how the organization chooses to aggregate their data for purposes of the Annual Report.</p>
What do I need to know about the "Attestation" section of the Program Summary tab?	<p>Each year, the ANCC collects, summarizes, and publishes information about the CNE enterprise. At the conclusion of each Reporting Year, a provider is required to submit information about their activities that took place during the year.</p> <p>To complete this reporting process, providers are required to attest that their data entry for the current Reporting Year is complete—as</p>

	<p>an indication to the ANCC that the organization data is ready to be reviewed and included in the information that ANCC compiles and publishes about the CNE system each year. After all activities for the Reporting Year are completed and Closed, and the commercial support information on the Program Summary tab is verified, a provider must attest that its NARS data reporting is complete for this Reporting Year by clicking on the button at the bottom of the Program Summary tab that says, "I Attest that Data is Complete for the [current] Reporting Year."</p> <p>Once this button is clicked, providers <b><u>will no longer be able to add or modify activity and program summary data for that Reporting Year.</u></b> If a provider finds that they do need to make any edits to this information after clicking the Attestation button, they will need to contact the ANCC at <b><u><a href="mailto:NARS@ana.org">NARS@ana.org</a></u></b></p>
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## Appendix A - Creating a Tab Delimited File Using the Excel File Template

**It is important to note that it is NOT possible to upload data directly from an MS Excel file into NARS.** The NARS MS Excel file template is offered as a tool to facilitate entry of activity data in a structured format. Once the data is in Excel, it is then easy to save it as a tab-delimited text file (.txt), which can be uploaded into NARS.

It is not necessary to use the MS Excel file template to create a tab-delimited text file. Other applications and database systems may offer the capability to export data directly into this format, although you may need some technical knowledge of the software that currently stores your data in order to set up this export. For detailed information about the fields required in the tab-delimited file, please refer to Appendix A.

### How to Enter Activities Using the MS Excel File Template

1. Download the Excel Activities file and save a copy to your computer. The file is available for download on our website at **ANCC Annual Reporting Requirements**.

2. The Excel Activities file displays a heading row followed by sample data rows. After reviewing the sample data, Clear Contents of the sample data rows. In Excel, you can Clear Contents by highlighting the rows, right clicking with the mouse, and then choosing Clear Contents.

*Note: **You may also delete these sample data rows, however, deleting them will remove the validation on the cells. This validation provides helpful information during manual data entry.** If you plan to copy and paste data into the Activities spreadsheet from other sources, or if you plan to use Excel formulas to add data to the Activities spreadsheet, it is recommended that you delete the sample data rows instead of clearing them.*

3. One row is needed per activity. **From the rows you cleared in Step Two, copy and paste the rows needed for entering all the activities. This will copy the cell validation into the rows.**

4. The example Excel file currently has columns to accommodate details for up to 3 commercial support sources. ***Note: If any activity has more than three commercial support sources, then you will need to copy columns 84 through 86 and paste these columns after the last column in the current Excel file, in order to fully capture all commercial support source data.***

5. Enter activity data into this file. There should be one row for each activity, and all data on the same row must relate to the same activity.

### **A few tips about entering activities in the Excel file:**

- Number values cannot include commas. Currency amounts cannot include \$ characters.
- If you are not reporting an optional field, **do not** delete it from the spreadsheet. The column must appear in the file, even if it is always left empty.

- Do not re-arrange the order in which the columns appear.

6. Save the file in the Excel format (.xls or .xlsx). This .xls or .xlsx version can be used if further changes are needed to the file.

#### **How to Create a Tab-Delimited Text File from the Excel File**

7. Delete the heading row (first row) in the Excel file that you saved in the previous step.

8. Choose the Save As option and save the Excel file as type Text (Tab delimited) (.txt).

*Note: The Excel file saved in Step 6 is only used for updating the file if changes are needed. The actual file that will be uploaded is the tab-delimited file saved within this step.*

#### **How to Upload the Tab-Delimited Text File**

9. Log into the ANCC Nursing Activity Reporting System (NARS). Click the Activities tab and then click the **Batch Upload Activities** button.

10. In the pop-up that appears, select the option to upload activities and click the **Continue** button.

11. On the Activity File Upload page, select the Tab Delimited option, find the tab-delimited text file that you want to upload, and select the **Upload & Validate File** button.

12. If there are any errors in the file, a message will display the problems and no activities will be uploaded to the system. **To correct the errors, go back to the Excel file saved in Step Six** and fix the errors. Then, complete the subsequent steps to save a corrected tab-delimited (.txt) file for upload.

13. If there are no errors in the file, a confirmation message will appear. **Please Note:** To complete the batch upload, click the **Yes, proceed** button.

14. After the activities have been successfully uploaded, a summary message will appear.

## Tab Delimited File Format

- The tab-delimited text file must be saved and uploaded as a **.txt** file.
- There must be at least 80 fields present in each activity record. Even if data is not required in a field, the system will expect the field to appear in the record with a blank (**null**) value, and the null value should be separated by tab-delimiters. If you use the Excel template file, leave the cells that do not contain data completely blank (do not enter a zero or a space—enter no character at all). The columns left empty will create the appropriate blank (or null) values automatically when you save the file as a tab-delimited .txt file.

*Note: It is possible for a record to exceed 80 fields if fields 78-80 are repeated for multiple sources of commercial support. See the sample Excel file where fields 78-80 have been repeated twice to accommodate up to 3 sources of commercial support.*

- When you are reporting details about your activities' sources of commercial support, and an activity receives commercial support from multiple sources, columns 78-80 must be repeated for each source of commercial support. It is important to include **all** of the columns for **every** source of commercial support, even if they must be left blank because they were not applicable to the support received from that source.
- When you prepare the Excel file that will be used to create a tab-delimited .txt file for upload to NARS, there are certain characters that should be avoided in the text entries. These characters, known as control codes, impart formatting to text within a cell and can include tabs within cells, carriage returns, and line feeds. When the Excel file is saved in tab-delimited .txt format, these characters will cause the columns and rows in your .txt file to break unexpectedly, and you will receive validation errors when you attempt to upload the file. Control characters should be removed from text in Excel before you create the .txt file for upload.

## Activity Tab Delimited File Upload Instructions

### List of Tab-Delimited File Format Fields (Appendix A Figure 1)

No	Field Name	Type/Format	Data is Required in Field:		Comments	Example Data
			To Open Activity Record	To Close Activity Record		
1	Template	Text	Yes	Yes	The text "Template A" must appear in this field for all activities for Reporting Years 2015 to 2016. Activities for other Reporting Years cannot be included on this version of the template.	Template A
2	ANCC Activity ID	Number (unique numeric ANCC Activity ID)	No	Yes, every activity must have <b>either</b> a Provider Activity ID <b>or</b> ANCC Activity ID, but not both.	ANCC Activity ID is assigned by NARS. This field should be blank when a new activity record is being added.	100000000
3	Provider Activity ID	Text (unique Provider Activity ID)	Yes	Yes (if applicable see note)	If an activity is provided on the same date and in a different location, you will need to enter a unique Provider Activity ID for the NARS system to recognize the activities as separate activities. If you do not use a unique identifier, you will receive an error message when uploading the file.	8213C, 8231-MD, 8231-AZ, etc.
4	Reporting Year	4-digit year	Yes	Yes	Reporting Year indicates the year in which the activity should be counted for aggregate reporting (Annual Report) purposes. <b>Rule 1:</b> Activities cannot be added or updated for a Reporting Year <i>if the data for that year has already been attested as complete.</i> <b>Rule 2:</b> Only activities for the current Reporting Year can be uploaded using this version of the template. <b>Rule 3:</b> Existing activities cannot be updated to have a Reporting Year that differs from their current	2015, 2016, 2017, etc

No	Field Name	Type/Format	Data is Required in Field:		Comments	Example Data
			To Open Activity Record	To Close Activity Record		
					Reporting Year in NARS. <b>Rule 4:</b> Activities cannot be added or updated for a Reporting Year that is more than one year after the current year.	
5	Activity Type	One of the following Activity Type Codes: C RSS IL EM IEM JN MR TIW CML PI ISL LFT	Yes	Yes	Activity Type Code Key: C → Course RSS → Regularly Scheduled Series IL → Internet Live Course EM → Enduring Material IEM → Internet Activity Enduring Material JN → Journal-based CNE MR → Manuscript Review TIW → Test Item Writing CML → Committee Learning PI → Performance Improvement ISL → Internet Searching and Learning LFT → Learning from Teaching	C
6	Activity Title	Text	Yes	Yes		Administering CPR
7	City	Text	<b>This field is required for the following Activity Types:</b> C RSS (See field 5 below for Activity Type code key.) <b>For other Activity Types this field should be left blank.</b>	<b>This field is required for the following Activity Types:</b> C RSS (See field 5 below for Activity Type code key.) <b>For other Activity Types this field should be left blank.</b>		

8	<b>State</b>	Valid United States Postal Service two-letter US state abbreviation	<b>This field is required for the following Activity Types:</b> C RSS (See field 5 below for Activity Type code key) <b>For other Activity Types <u>this field should be left blank.</u></b>	<b>This field is required for the following Activity Types:</b> C RSS (See field 5 below for Activity Type code key) <b>For other Activity Types <u>this field should be left blank.</u></b>	See Appendix C for a list of US territories/regions codes.	IL
9	<b>Country</b>	Valid three-letter country code	<b>This field is required for the following Activity Types:</b> C RSS <b>For other Activity Types <u>this field should be left blank.</u></b>	<b>This field is required for the following Activity Types:</b> C RSS <b>For other Activity Types <u>this field should be left blank.</u></b>	See <b>Appendix C</b> for a list of country codes.	USA
10	<b>Activity Start Date</b>	Date in the format of MM/DD/YYYY	<b>Yes</b>	<b>Yes</b>	Enter the start date of the activity.	01/01/2016
11	<b>Activity End Date</b>	Date in the format of MM/DD/YYYY	<b>Yes</b>	<b>Yes</b>	Enter the end date of the activity.	01/31/2016
12	<b>Providership</b>	Valid entries: Direct Joint	No	<b>Yes</b>	A directly provided (formerly called “sponsored”) activity is planned, implemented, and evaluated by the accredited provider. Include jointly-provided activities (provided by two accredited providers) in this category if you are the accredited provider awarding the credit or one that is planned, implemented, and evaluated by the accredited provider and a non-accredited entity.	Joint
13	<b>Joint Provider</b>	Text; Name(s) of Joint Provider(s). Names of multiple Joint	No	<b>Yes</b>	If you entered “Joint” in Providership (field 10) then enter the name(s) of the joint providers in this field. Separate the name	County Hospital; State Hospital

		Providers should be separated by semicolons.			of each organization with a semicolon. If you entered "Direct" in Providership (field 10) then leave this field blank.	
14	<b>Target Audience - Nurse</b>	Valid Entries: Yes No	No	Yes		Yes
15	<b>Target Audience – Pharmacist</b>	Valid Entries: Yes No	No	No		No
16	<b>Target Audience – Pharmacy Technician</b>	Valid Entries: Yes No	No	No		No
17	<b>Target Audience – Physician</b>	Valid Entries: Yes No	No	No		No
18	<b>Target Audience – Other</b>	Valid Entries: Yes No	No	No		No
19	<b>Description of Content</b>	Text (maximum 2500 characters)	No	No	<b>OPTIONAL:</b> If available, please insert a copy of the abstract for the activity. Otherwise, you may enter the activity outcomes, or describe the content using your own words.	Diet and its impact on both preventing and contributing to adult onset Diabetes.
20	<b>Commercial Support Received?</b>	Valid entries: Yes No	No	No	Commercial support is financial or in-kind contributions given by a commercial interest that is used to pay all or part of the costs of a CNE activity.	Yes
21	<b>Designed to change Competence?</b>	Valid Entries: Yes No	No	No		Yes
22	<b>Changes in Competence evaluated?</b>	Valid Entries: Yes No	No	No		Yes
23	<b>Designed to change Performance?</b>	Valid Entries: Yes No	No	No		Yes
24	<b>Changes in Performance evaluated?</b>	Valid Entries: Yes No	No	No		Yes
25	<b>Designed to change Patient Outcomes?</b>	Valid Entries: Yes No	No	No		Yes
26	<b>Changes in Patient Outcomes evaluated?</b>	Valid Entries: Yes No	No	No		Yes

27	<b>Hours of Instruction</b>	Decimal (00.00)	No	<b>Yes</b>	Total hours of educational instruction provided. Ex: If a one-day course lasts 8 hours, then hours of instruction equals	8.0
28	<b>Number of AMA PRA Category 1 Credits™ Designated</b>	Decimal (00.00)	No	No	The maximum number of <i>AMA-PRA Category 1 Credits™</i> designated for the activity. This may or may not equal Hours of Instruction.	5
29	<b>Number of Nursing Credits</b>	Decimal (00.00)	No	<b>Yes</b>	The maximum number of <i>Nursing Credits</i> designated for the activity. This may or may not equal Hours of Instruction.	5
30	<b>Number of Pharmacy Credits</b>	Decimal (00.00)	No	No	The maximum number of <i>Pharmacy Credits</i> designated for the activity. This may or may not equal Hours of Instruction.	5
31	<b>Number of Other Credits</b>	Decimal (00.00)	No	No	The maximum number of <i>Other Credits</i> designated for the activity. This may or may not equal Hours of Instruction.	5
32	<b>Interprofessional Education Collaborative - Values/Ethics for Interprofessional Practice</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
33	<b>Interprofessional Education Collaborative – Roles/Responsibilities</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
34	<b>Interprofessional Education Collaborative - Interprofessional Communication</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No



35	<b>Interprofessional Education Collaborative - Teams and Teamwork</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
36	<b>Institute of Medicine - Provide patient-centered care</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
37	<b>Institute of Medicine - Work in interdisciplinary teams</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
38	<b>Institute of Medicine - Employ evidence-based practice</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
39	<b>Institute of Medicine - Apply quality improvement</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
40	<b>Institute of Medicine - Utilize informatics</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
41	<b>ABMS/ACGME - Patient Care and Procedural Skills</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
42	<b>ABMS/ACGME - Medical Knowledge</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
43	<b>ABMS/ACGME - Practice-based Learning and Improvement</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
44	<b>ABMS/ACGME - Interpersonal and Communication Skills</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
45	<b>ABMS/ACGME - Professionalism</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
46	<b>ABMS/ACGME - Systems-based Practice</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No

47	<b>CAPE - Learner</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
48	<b>CAPE - Patient-centered care</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
49	<b>CAPE - Medication use systems management</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
50	<b>CAPE - Health and wellness</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
51	<b>CAPE - Population-based care</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
52	<b>CAPE - Problem solving</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
53	<b>CAPE - Educator</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
54	<b>CAPE - Patient advocacy</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
55	<b>CAPE - Interprofessional collaboration</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
56	<b>CAPE - Cultural sensitivity</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
57	<b>CAPE - Communication</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No

58	<b>CAPE - Self-awareness</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
59	<b>CAPE - Leadership</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
60	<b>CAPE - Innovation and entrepreneurship</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
61	<b>CAPE - Professionalism</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
62	<b>PTCB - Pharmacology for technicians</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
64	<b>PTCB - Sterile and non-sterile compounding</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
65	<b>PTCB - Medication safety</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
66	<b>PTCB - Pharmacy quality assurance</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
67	<b>PTCB - Medication order entry and fill process</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
68	<b>PTCB - Pharmacy inventory management</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
69	<b>PTCB - Pharmacy billing and reimbursement</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
70	<b>PTCB - Pharmacy information systems usage and application</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No

71	<b>Other Competencies - Competencies other than those listed were addressed</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
72	<b>No Competencies - No Competencies</b>	Valid Entries: Yes No	No	No	Use fields 32 to 72 to report the competencies in whose context an activity was developed.	No
73	<b># of Physicians who completed the activity</b>	Number	No	No	The number MDs and DOs that participated in the activity.	10
74	<b># of Nurses who completed the activity</b>	Number	No	Yes	The number Nurses that participated in the activity	10
75	<b># of Pharmacists who completed the activity</b>	Number	No	No	The number Pharmacists that participated in the activity	10
76	<b># of Pharmacy Technicians who completed the activity</b>	Number	No	No	The number Pharmacy Technicians that participated in the activity	10
77	<b># of Other Learners who completed the activity</b>	Number	No	No	Other Learners (formerly called "Non-physicians") are attendees other than MDs or DOs, Nurses, Pharmacists, and Pharmacy Technicians. Example - Physician Assistants, and other health professionals.	10
78	<b>Commercial Support Source</b>	Text (name of Support Source)	No	No	If you entered "Yes" in Commercial Support Received field (field 20), then use this field to identify the source of commercial support. If you entered "No" in Commercial Support Received field (field 20), please leave this field blank.	Abbott

79	<b>Monetary Amount Received (from Commercial Support)</b>	US dollar amount (00.00)	No	No	If you entered "Yes" in Commercial Support Received (field 20), then use this field to report the US dollar amount: $\geq 0.00$ is a valid entry. Please <b>do not</b> use commas or "\$" sign. If you entered "No" in Commercial Support Received field (field 20), please leave this field blank.	598.00
80	<b>In Kind Support Received? (from Commercial Support)</b>	Valid Entries: Yes No	No	No	If you entered "Yes" in Commercial Support Received (field 20), then use this field to report if in kind support was received.	No

## Appendix B – Activity Updates and Additions

### 1. Updating an Existing Activity

NARS will update an existing activity record if a matching activity is found in the upload. NARS finds matching activities by:

1. ANCC Activity ID ; OR
2. The combination of the following fields:
  - i. Reporting Year\*; AND
  - ii. Provider Activity ID; AND
  - iii. Activity Type; AND
  - iv. Activity Date

\* The Reporting Year in the file does **not** need to match the year of the Activity Date. The Reporting Year indicates the year in which the activity should be counted for aggregate reporting (Annual Report) purposes.

If NARS finds a matching activity, then the existing activity is updated based on the information within the file you are uploading.

### 2. Adding a New Activity

If NARS does not find a matching activity (see previous section), it will add a new activity.

## Appendix C – List of Country Codes

Below is a list of the three-letter country codes for the Country field.

*Note: Please see the US Territories/Regions section for information regarding US territory/region processing.*

Country	Code
Afghanistan	AFG
Aland Islands	ALA
Albania	ALB
Algeria	DZA
Andorra	AND
Angola	AGO
Anguilla	AIA
Antigua and Barbuda	ATG
Argentina	ARG
Armenia	ARM
Aruba	ABW
Australia	AUS
Austria	AUT
Azerbaijan	AZE
Bahamas	BHS
Bahrain	BHR
Bangladesh	BGD
Barbados	BRB
Belarus	BLR
Belgium	BEL
Belize	BLZ
Benin	BEN
Bermuda	BMU
Bhutan	BTN
Bolivia (Plurinational State of)	BOL
Bosnia and Herzegovina	BIH
Botswana	BWA
Brazil	BRA
British Virgin Islands	VGB
Brunei Darussalam	BRN
Bulgaria	BGR
Burkina Faso	BFA
Burundi	BDI
Cambodia	KHM
Cameroon	CMR

Country	Code
Canada	CAN
Cape Verde	CPV
Cayman Islands	CYM
Central African Republic	CAF
Chad	TCD
Chile	CHL
China	CHN
Colombia	COL
Comoros	COM
Congo	COG
Cook Islands	COK
Costa Rica	CRI
Cote d'Ivoire	CIV
Croatia	HRV
Cuba	CUB
Cyprus	CYP
Czech Republic	CZE
Democratic People's Republic of Korea	PRK
Democratic Republic of the Congo	COD
Denmark	DNK
Djibouti	DJI
Dominica	DMA
Dominican Republic	DOM
Ecuador	ECU
Egypt	EGY
El Salvador	SLV
Equatorial Guinea	GNQ
Eritrea	ERI
Estonia	EST
Ethiopia	ETH
Faeroe Islands	FRO
Falkland Islands (Malvinas)	FLK
Fiji	FJI
Finland	FIN
France	FRA
French Guiana	GUF
French Polynesia	PYF
Gabon	GAB
Gambia	GMB
Georgia	GEO
Germany	DEU
Ghana	GHA



Country	Code
Gibraltar	GIB
Greece	GRC
Greenland	GRL
Grenada	GRD
Guadeloupe	GLP
Guatemala	GTM
Guernsey	GGY
Guinea	GIN
Guinea-Bissau	GNB
Guyana	GUY
Haiti	HTI
Holy See	VAT
Honduras	HND
Hong Kong Special Administrative Region of China	HKG
Hungary	HUN
Iceland	ISL
India	IND
Indonesia	IDN
Iran (Islamic Republic of)	IRN
Iraq	IRQ
Ireland	IRL
Isle of Man	IMN
Israel	ISR
Italy	ITA
Jamaica	JAM
Japan	JPN
Jersey	JEY
Jordan	JOR
Kazakhstan	KAZ
Kenya	KEN
Kiribati	KIR
Kuwait	KWT
Kyrgyzstan	KGZ
Lao People's Democratic Republic	LAO
Latvia	LVA
Lebanon	LBN
Lesotho	LSO
Liberia	LBR
Libyan Arab Jamahiriya	LBY
Liechtenstein	LIE
Lithuania	LTU
Luxembourg	LUX

Country	Code
Macao Special Administrative Region of China	MAC
Madagascar	MDG
Malawi	MWI
Malaysia	MYS
Maldives	MDV
Mali	MLI
Malta	MLT
Martinique	MTQ
Mauritania	MRT
Mauritius	MUS
Mayotte	MYT
Mexico	MEX
Monaco	MCO
Mongolia	MNG
Montenegro	MNE
Montserrat	MSR
Morocco	MAR
Mozambique	MOZ
Myanmar	MMR
Namibia	NAM
Nauru	NRU
Nepal	NPL
Netherlands	NLD
Netherlands Antilles	ANT
New Caledonia	NCL
New Zealand	NZL
Nicaragua	NIC
Niger	NER
Nigeria	NGA
Niue	NIU
Norfolk Island	NFK
Norway	NOR
Occupied Palestinian Territory	PSE
Oman	OMN
Pakistan	PAK
Panama	PAN
Papua New Guinea	PNG
Paraguay	PRY
Peru	PER
Philippines	PHL
Pitcairn	PCN
Poland	POL

Country	Code
Portugal	PRT
Qatar	QAT
Republic of Korea	KOR
Republic of Moldova	MDA
Réunion	REU
Romania	ROU
Russian Federation	RUS
Rwanda	RWA
Saint Helena	SHN
Saint Kitts and Nevis	KNA
Saint Lucia	LCA
Saint Pierre and Miquelon	SPM
Saint Vincent and the Grenadines	VCT
Saint-Barthélemy	BLM
Saint-Martin (French part)	MAF
Samoa	WSM
San Marino	SMR
Sao Tome and Principe	STP
Saudi Arabia	SAU
Senegal	SEN
Serbia	SRB
Seychelles	SYC
Sierra Leone	SLE
Singapore	SGP
Slovakia	SVK
Slovenia	SVN
Solomon Islands	SLB
Somalia	SOM
South Africa	ZAF
Spain	ESP
Sri Lanka	LKA
Sudan	SDN
Suriname	SUR
Svalbard and Jan Mayen Islands	SJM
Swaziland	SWZ
Sweden	SWE
Switzerland	CHE
Syrian Arab Republic	SYR
Tajikistan	TJK
Thailand	THA
The former Yugoslav Republic of Macedonia	MKD
Timor-Leste	TLS

Country	Code
Togo	TGO
Tokelau	TKL
Tonga	TON
Trinidad and Tobago	TTO
Tunisia	TUN
Turkey	TUR
Turkmenistan	TKM
Turks and Caicos Islands	TCA
Tuvalu	TUV
Uganda	UGA
Ukraine	UKR
United Arab Emirates	ARE
United Kingdom of Great Britain and Northern Ireland	GBR
United Republic of Tanzania	TZA
United States of America	USA
Uruguay	URY
Uzbekistan	UZB
Vanuatu	VUT
Venezuela (Bolivarian Republic of)	VEN
Viet Nam	VNM
Wallis and Futuna Islands	WLF
Western Sahara	ESH
Yemen	YEM
Zambia	ZMB
Zimbabwe	ZWE

Source: United Nations, April 15, 2009 list. <http://unstats.un.org/unsd/methods/m49/m49alpha.htm>

#### **US Territories/Regions:**

For the following US territories / regions, the country code of USA should be used along with the applicable US State abbreviation in the State field.

Country	Country Code	U.S State Abbreviation
American Samoa	USA	AS
Federated States of Micronesia	USA	FM
Guam	USA	GU
Marshall Islands	USA	MH
Northern Mariana Islands	USA	MP
Puerto Rico	USA	PR
Palau	USA	PW
US Virgin Islands	USA	VI

*Footprint for changes to Manual (click on the link in the “description of change” column to be taken to the section of the document where the change was made)*

Section	Description of Change	Date	Initials
Appendix A Figure 1	Line number 1 on chart, under comments and example data, wording “Template D” changed to <a href="#">“Template A”</a>	2/14/17	KJ
Appendix A Figure 1	<b>Rule 2:</b> Only activities for Reporting Year 2015 can be uploaded using this version of the template. Changed to <a href="#">“for the current reporting year”</a>	2/14/17	KJ
Joint Providership Definition	Changed <b>Joint Providership</b> definition to meet ANCC criteria	2/23/17	KJ
Reporting Commercial Support for Jointly Provided Activities	Added <a href="#">content integrity standards reference</a> and language for jointly provided activities	2/23/17	KJ
Changed wording from income and expense to commercial support	Changed wording from income and expense to <a href="#">commercial support</a>	2/23/17	KJ