

2022 WNA Instruction Manual for Approved Providers Developing Educational Activities Using the ANCC / WNA Criteria

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2022 WNA Instructional Manual for Approved Providers Developing Educational Activities Using the ANCC / WNA Criteria

Based on the 2015 ANCC Criteria as adopted by Wisconsin Nurses Association
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INTRODUCTION

Please contact megan@wisconsinnurses.org for deadlines, fees, and any questions unrelated to educational content.


Legal Preamble

Some information in this manual is used with permission and taken directly from the American Nurses Credentialing Center 2015 ANCC PRIMARY ACCREDITATION PROVIDER APPLICATION MANUAL, Copyright © 2015 by American Nurses Credentialing Center, Silver Spring, Maryland, 2015 edition. *A subsidiary of the American Nurses Association.* (Hereafter, “ANCC MANUAL.”) This WNA IEA MANUAL does not include all information contained in the 2015 ANCC MANUAL, such as background information and information pertaining only to accredited providers.

Purpose of Manual

The purpose of this manual is to provide supplemental information to the instructions and criterion explanations in the WNA Approved Provider Educational Planning and Documentation (EPD) Form. The EPD Form is to be used during the planning of educational activities to plan and document educational activities using the ANCC criteria as adopted by WNA (WNA/ANCC criteria).

The designation of contact hours is not made retrospectively. This means the Approved Provider’s past activities are not eligible for contact hours.

The EPD Form is part of the “Educational Activity Record.” The Educational Activity Record includes the EPD Form, and all required attachments listed in the EPD Form. If you see a paperclip symbol in the EPD Form, it means you need to attach a document to complete the Educational Activity Record. 

This manual does not address the overall responsibilities of the Approved Provider, the ANCC criteria that Approved Providers must follow to maintain status of an Approved Provider, key processes the Approved Provider Unit (APU) must follow (e.g., APU self-evaluation, collecting data related to process and nursing professional development outcomes), or processes related to initial or renewal of Provider Approval by WNA. This information is found on the WNA website.

EDUCATION PLANNING & DOCUMENTATION FORM INFORMATION

Planning and Documenting - Important Points

The Education Planning & Documentation Form is to be used during the development of an educational activity to help plan and to document planning of the Nursing Continuing Professional Development (NCPD) using the ANCC criteria as adopted by WNA (ANCC/WNA criteria). The documentation of educational planning should take place during the planning of the activity, not later in your renewal cycle. Activity Samples submitted with the Approved Provider Self-Study application must be documented on the version of the form that was in use at the time of the activity.

The Form is set up in the following order:

Section 1 – Activity Overview and Contact Hours

Section 2 – Mitigating Relevant Financial Relationships – Start this process as planning begins

Section 3 – Educational Development - Follow and document the approved process for nursing continuing professional development activity planning

Although planning the educational activity using the ANCC/WNA criteria (Section 3) is the most important aspect of the planning process, Section 2 precedes it because the Mitigation of Financial Relationships process section has some new information important to Approved Provider Units (APUs) and the Nurse Planner (NP) should be thinking about the mitigation process from the very start of planning. We have identified this as an area of improvement for our APUs overall and designed the EPD Form to reflect this for our WNA Approved Providers.

Part 1 – Activity Overview and Contact Hours

Activity Information – This section helps identify the specific format of your educational activity from many possible activity formats.

Key points:

What is an “Enduring Material” and what special “rules” apply to enduring materials?

- A. “Enduring materials” are learning activities that are not live, such as a posted webinar or written self-study. They are “on-demand” and “learner paced.”
- B. The expiration date of enduring material must be provided to the learners before the activity.
- C. The expiration date is the date after which contact hours may no longer be offered. No certificates may be issued after the expiration date. Participants must complete the learning activity by that date.**
- D. The enduring material is designated for contact hours by the APU for no more than three years. Based on the content, the APU is expected to review enduring material for accuracy at least every three years while it is available to learners. This interval should be more frequent for clinical content with a limited “shelf-life.” This is especially important for emerging topics such as COVID-19. Documentation of the review of all aspects of the activity should be recorded in the activity file on a current EPD Form.
- E. If the same activity is offered in a live and enduring material format, these are considered two separate activities and reported as such in NARS.

Awarding Contact Hours

Key points:

- A. Calculation of the number of contact hours must be logical and defensible.
- B. Only calculate contact hours for educational content.
- C. You may calculate contact hours to the 0.00 decimal, or you may round up or down to the nearest quarter hour. All sessions within an educational activity must use the same method for calculating – either calculating to the exact 0.00 decimal or rounding.
- D. Contact hours for written Enduring Materials are determined differently than for live activities.
- E. Contact hours may never be awarded retroactively except for a pilot study of the educational content. Please contact wnanprl@wisconsinurses.org for specific information and permissions.

Contact hours may be awarded for:

- Overview of content during introduction to educational activity, such as review of agenda or outcomes.
- Educational content
- Evaluation and/or post-test time
- Pre-work or post-work that is a planned part of the educational activity requirements.
- Advising on technical information related to using virtual platforms to receive the educational content (e.g., explaining how to annotate if needed during session to engage with educational content).

Contact hours may not be awarded for non-educational time:

- Breaks of any length
- Meals of any length (if meal is during a live presentation and not served to the table, subtract time for the participant to leave their seat and obtain the meal)
- Introduction to the educational activity that does not address content, such as general welcome statements or “house-keeping” details
- Time to visit exhibits (live or virtual) or directions for how to do so

Contact hours for live activity formats (in-person or virtual) are calculated in one of two ways:

- A. Exact number of contact hours to the 0.00 level of accuracy.
 - Divide the number of educational content minutes by 60 minutes to get the number of contact hours.
- B. Rounded DOWN or UP to the quarter hour based on number of minutes of educational content.
 - The second method is most often used when other credit types are offered that round to the nearest quarter hour (e.g., CME). Method #2:

Exact number of content minutes past the hour or before the hour:	Number of Exact Contact Hours	Round Up or Down to nearest quarter hour	Number of Rounded Contact Hours
1 - 8	X.02 – X.13	Down	X.0
9 - 14	X.15 – X.25	Up	X.25
15 - 22	X.25 – X.37	Down	X.25
23 – 30	X.38 – X.5	Up	X.5
31 – 38	X.57 – X.63	Down	X.5

39 – 45	X.65 – X.75	Up	X.75
46 – 53	X.77 – X.88	Down	X.75
54 – 60	X.9 – X.0	Up	X.0

Examples of rounding contact hours:

- Your educational activity has 2 hours and 22 minutes of educational content. Exact number of contact hours = 2.37. Round DOWN to 2.25 rounded contact hours.
- Your educational activity has 2 hours and 23 minutes of educational content. Exact number of contact hours = 2.38 Round UP to 2.5 rounded contact hours.

Calculating contact hours for written Enduring Materials:

For written educational content, calculation of contact hours cannot be based on a specific “presentation” time.

Examples of how contact hours for written materials may be calculated:

- A small group completes the assigned material. Each individual keeps track of their completion time. The Nurse Planner averages the completion times and assigns that number of contact hours for completing the activity.
- The Mergener Formula may be used. This method calculates contact hours based on word count, level of difficulty, and number of questions. The formula calculator can be found by an Internet search. At the time of this publication, the formula calculator can be found at: <http://touchcalc.com/calculators/mergener>.
- Other methods may be used if they determined by WNA to be logical and defensible.

Successful Completion Requirements

Key points:

- A. The Nurse Planner determines the criteria that participants must meet to successfully complete the educational activity. These “successful completion requirements” are determined by considering what participants need to do to achieve the educational activity outcome(s).
- B. Examples of successful completion requirements are listed in the EPD Form.
- C. Credit for partial attendance depends on if outcomes can be achieved with partial attendance. Can a participant miss parts of the activity or sessions of the activity and still achieve the outcomes? Will the content make sense if the participant does not attend the total educational activity? If so, awarding contact hours for partial attendance might be okay.
- D. If contact hours are awarded for partial attendance, the activity provider must track the specific number of contact hours awarded to each participant.

Agenda –

Key Points:

- A. An agenda must be included if the activity is two hours in length or longer.
- B. An agenda includes:
 - Start and end times of each session or topic area
 - Title of each session or topic area
 - Presenter names and credentials for each session or topic area

In addition to an agenda, WNA may request a content outline during the review process if needed to better understand the presentation content.

Joint Providership

Key Points:

- A. “Joint Providership” is the term used for planning educational activities collaboratively with other organizations as a partner in the development of the activity.
- B. The Approved Provider Unit (APU) is referred to as the “provider” of the educational activity; any other planning organization is referred to as a “joint provider.”
- C. There are special “rules” for joint providership:
 - The APU must have a nurse planner directly involved in leading the activity planning.
 - No jointly providing organization can be an “Ineligible Organization.”
 - Materials associated with the educational activity (e.g., promotional materials and certificates of completion) must clearly indicate the APU is awarding contact hours and is responsible for adherence to the ANCC / WNA criteria.
 - WNA recommends if using a joint provider organization’s logo on materials, the provider logo should also be present.
- D. Required “Information Provided to Learners” prior to an educational activity must indicate that an activity is jointly provided. See the WNA EPD Form for a sample statement to use for this requirement. (See also “Information Provided to Learners” section of manual.)
- E. The Nurse Planner must ensure that the APU maintains control of educational development and is responsible for adherence to ANCC criteria. This includes:
 - Determining educational outcomes and content
 - Selecting planners, presenters, faculty, authors and/or content reviewers
 - Awarding of contact hours
 - Recordkeeping procedures
 - Evaluation methods
 - Management of commercial support
- F. The following must be included in the EPD Form:
 - A list of all jointly providing organizations
 - A “joint provider statement” – this must be included on material the learner sees before the activity content is presented (e.g., brochure, registration website, handout, or PPT slide shown before the session).

Part 2 - Demonstrating and Communicating Educational Integrity and Independence

Key concepts

1. Independence from Commercial Industry Influence of Ineligible Companies

Healthcare educators must protect the learning environment from commercial industry influence to maintain the integrity and validity of educational content. The nursing continuing professional development (NCPD) process is designed to prevent commercial influence by “Ineligible Companies.”

The definition of an Ineligible Company is one whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. Examples of “Ineligible Companies” are found at <https://accme.org/accreditation-rules/standards-for-integrity-independence->

[accredited-ce/eligibility](#). Parent companies and subsidiaries of such companies are also ineligible to participate in for-credit education.

Many healthcare professionals have financial relationships with “Ineligible Companies.” By identifying and mitigating relevant financial relationships, we create a protected learning space free from influence of organizations that may have an incentive to introduce commercial bias into education. Examples of financial relationships with Ineligible Companies are listed on the WNA Disclosure Form and include relationships such as paid advisory roles, research roles, stockholders, and many others.

2. Relevant Financial Relationship

A relevant financial relationship exists when an individual in a position to control or influence the content of an educational activity has a financial relationship with an Ineligible Company and the content of the activity is related to the products or business lines of the Ineligible Company.

The following is an abbreviated outline of the requirements for ensuring independence and content integrity when planning educational activities. See www.accme.org/standards for the specific Standards that must be upheld in for-credit education.

Those in Control of Content

Key Points:

- A. The Nurse Planner ensures that the educational activity is developed in compliance with ANCC accreditation criteria as adopted by WNA and chooses the appropriate planning committee members.
- B. There is a two-person minimum on planning committee; one qualified Nurse Planner and one content expert.
- C. The Nurse Planner can also be the content expert, but a minimum of two people is still required to plan the activity.
- D. A qualified Nurse Planner holds BSN / BAN or higher degree in nursing. This must be an educational background, not an equivalent certification in the US.
- E. Only one Nurse Planner can be designated and is responsible for planning process using ANCC/WNA criteria for an educational activity. Other nurses may help in the planning.
- F. The NP is operationally responsible for verifying qualifications of all in control of content (planners, speakers, content developers, reviewers of content, other faculty) but this information is not included as part of the educational activity record.
- G. Content expert vs. content reviewer
 - These are very different roles.
 - Content expert = Subject Matter Expert
 - Content Reviewer = person outside of the planning committee, selected by planning CTE; reviews content prior to activity for quality of content (best available evidence, scientific validity). May review for bias or any other concerns.

Identifying, Mitigating, and Disclosing Relevant Financial Relationships

Key Points:

- A. All individuals in control of content must be listed in the EPD Form with name, credentials, and role.

- B. The Nurse Planner is responsible for collecting information from all individuals in control of content to identify all of their financial relationships. This includes all content planners, presenters, self-study content developers, reviewers of educational content, and any other faculty involved with the educational planning, implementation, and evaluation.
 - All individuals in a position to control content of an educational activity must be provided with the definition of an “Ineligible Company” prior to disclosing all financial relationships with an ineligible company.
- C. The Nurse Planner then evaluates the relationships disclosed from all in control of content to determine if they are relevant to the educational content being presented.
- D. If so, the Nurse Planner takes specific actions to mitigate the relevant financial relationships, thus reducing the risk of commercial industry influence.
 - Mitigation strategies will be different depending on the individual’s role. Mitigation strategies are outlined on the WNA website.
 - Documents to communicate with presenters about these processes are included on the WNA website.
- G. The Nurse Planner also ensures that the relevant financial relationships of anyone in control of content are disclosed to learners prior to the education taking place.
 - Examples of “Disclosure to Learners” of relevant financial relationships, or the lack there-of, are found on the WNA website.
- H. The Nurse Planner must be actively engaged in these processes and is ultimately accountable for compliance.
- I. The WNA EPD Form must contain the results of disclosure from all individuals in control of content and a completed “Nurse Planner Mitigation Worksheet” that summarizes any reported relationships and interventions.

Required Processes: Relevant Financial Relationships - Identification, Mitigation, and Disclosure to Learners

The information on the following page is from the WNA “Nurse Planner Mitigation Worksheet.” This document summarizes the processes the APU must implement at the start of educational planning related to financial relationships of those in control of content – planners, presenters, developers of enduring materials, reviewers of content, and other faculty.

The Nurse Planner Mitigation Worksheet includes “Part A – Instructions” and “Part B – Required Documentation” and may be found on the WNA website.

This section left intentionally blank

NOTE: The Nurse Planner (NP) is responsible for completion of this process/documentation worksheet to identify and mitigate relevant financial relationships for everyone who controls the content of an educational activity (i.e., nurse planner, planners, presenters, enduring material content developers, etc.). Be sure mitigation strategies are appropriate to the person's role and that mitigation strategies are implemented before each person begins their role in the activity.

NOTE: If any of the following statements apply to your educational activity, you do not need to identify, mitigate, or disclose relevant financial relationships for that activity:

- It will only address a non-clinical topic (e.g., leadership, precepting, or communication skills training).
- It is for a learner group that is in control of the content entirely (e.g., spontaneous case discussion conversation among peers).* (RARE)
 - This does not include Regularly Scheduled Series such as Tumor Boards, M&M Conference, etc.
- It is a self-directed educational activity where the learner will control their educational goals and report on changes that resulted.* (RARE)

*** Contact WNA for further guidance if you think this describes the educational activity you will be planning.**

STEP 1: Before planning the educational activity, collect information from everyone in a position to control the content of an educational activity (i.e., nurse planner, planners, presenters, enduring material content developers, etc.).

- Ask each person to provide information about **all** their financial relationships with ineligible companies over the previous **24 months**. There is no minimum financial threshold; individuals must disclose all financial relationships with ineligible companies, regardless of the amount.
 - **You must use this definition when you collect the information:** "Ineligible companies are those whose primary business is producing, marketing, selling, reselling, or distributing healthcare products used by or on patients." (Using a WNA Disclosure Form meets this requirement.)

STEP 2: Review all relationships and exclude owners and employees of ineligible companies from participating in any educational role unless the activity meets one of the three exceptions listed below.

- Refer to the Standards (www.accme.org/standards) for the definition and examples of ineligible companies.
- Still not sure? Research the company (use internet or other sources) and determine if the company produces, markets, sells, resells, or distributes healthcare products used by or on patients.
- There are only three **exceptions** that allow for owners and/or employees of ineligible companies to participate as planners or faculty in approved continuing education. If these exceptions do not exist, the owner/employee **MUST** be excluded:
 1. When the content of the activity is not related to the business lines or products of their employer/company.
 2. When the content of the approved activity is limited to basic science research, such as pre-clinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.
 3. When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used. (Note - contact hours cannot be given for vendor/exhibitor interactions.)

STEP 3: Determine which financial relationships are relevant to the content of the educational activity.

Financial relationships are relevant if the following three conditions are all met for the individual who will control content of the education:

- A financial relationship, in any amount, exists between the person in control of content and an ineligible company.
- The financial relationship has existed at any time during the past 24 months.
- The content of the education is related to the products or business lines of an ineligible company with whom the person has a financial relationship.

A. Document on the Nurse Planner Mitigation Worksheet all relationships listed on the Disclosure Forms of those in control of content.

B. Analyze each relationship listed. Is the company listed ineligible? If yes, is the relationship relevant? (Note: NP does not analyze their own form.)

STEP 4: Mitigate relevant financial relationships. Mitigation steps include at least one of the following:

Planners: <ul style="list-style-type: none">• Divesting the relationship• Recusal from controlling aspects of planning and content with which there is a financial relationship• Peer review of planning decisions by persons without relevant financial relationships• Other methods – Must describe method in detail.	Presenters/Faculty/Others: <ul style="list-style-type: none">• Divesting the relationship• Peer review of content by person without relevant financial relationships• Attestation that clinical recommendations are evidence-based and free of commercial bias (e.g., peer-reviewed literature, adheres to evidence-based guidelines) [See also Part B of this form.]• Other methods – Must describe method in detail.
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STEP 5: Document the mitigation strategies used for each person with a relevant financial relationship in Part B of this **Nurse Planner Mitigation Worksheet** or note if the listed relationship was determined by the NP to be not relevant. See examples in Part B of this form.

STEP 6: Disclose to learners, prior to content delivery, the presence or absence of relevant financial relationships for all persons in control of content:

- Name
- Name of ineligible company with which there is a relationship.
- Nature of the relationship
- Statement that all relevant financial relationships have been mitigated. (NEW)

See Toolkit "Examples of Communicating Disclosure to Learners" to develop and document your disclosures to learners.

Commercial Support

Key Concepts:

1. Commercial Support is defined as:
 - Financial Support—money supplied by an Ineligible Company to be used by an APU for expenses related to the educational activity. Financial support may be provided as an unrestricted grant, educational grant, donation, or scholarship; and/or
 - In-kind Support—materials, space, or other nonmonetary resources or services used by an APU to conduct an educational activity, which may include but are not limited to human resources, marketing services, physical space, equipment such as audiovisual components, and teaching tools (for example, anatomic models).
2. Ineligible companies providing Commercial Support for continuing educational activities may not influence or participate in the planning, implementation, or evaluation of an educational activity.
3. Pre-determined vendor fees are not commercial support.
4. An organization may purchase vendor space and also provide Commercial Support. These are considered separate transactions. An organization may provide Commercial Support without being a vendor.

Key Points:

- A. See www.accme.org/standards, Standards 2 and 5 if planning to accept commercial support for an educational activity.
- B. All of the following requirements to ensure content integrity must be satisfied by the APU when Commercial Support is accepted:
 - **A written agreement outlining the terms of the relationship and the support that will be provided by the Ineligible Company is obtained from each company providing support prior to the educational activity date and must be part of the educational activity record (attachment to the EDP Form). A Commercial Support Agreement template is located on the WNA website.**
 - Receipt of commercial support must be disclosed to learners. This includes listing only the names of the Ineligible Company providing funding or in-kind support. No Ineligible Company logos may appear on any educational materials.
 - All payments for expenses related to the educational activity must be made by the APU, not by the Ineligible Company providing support.
 - The APU must keep a record of all payments made using commercial support funding.
 - The APU is responsible for maintaining an accounting of expenses related to commercial support.
 - Commercial support funds may be used only to support expenses directly related to the educational activity.
 - Commercial support may be used to pay for all or part of an educational activity and for expenses directly related to the educational activity, including but not limited to travel, honoraria, food, support for learner attendance, and location expenses. Commercial support may be used to support more than one educational activity at the same time or multiple activities over a period of time.

Additional Management of Industry Influence: Exhibitors and Advertising

Key Points:

- A. See www.accme.org/standards, Standards 2 and 5 if planning to have exhibitors or advertising during the NCPD activity. The following must be in place:
 - A **30-minute time interval** must separate learning content from sessions influenced by Ineligible Companies held in the same educational space (same room for live activities, same meeting and platform for virtual activities.)
 - Learners must not be obligated to see or hear information from Ineligible Companies while engaged in the activity.
 - Activities influenced by Ineligible Companies must be clearly indicated and communicated as such.
 - Educational materials must not contain any references to Ineligible Companies, including corporate or product logos.
 - Educators may not share identifying information of learners with Ineligible Companies.

Additional Information on Maintaining Content Integrity and Validity

Key Points:

- A. See www.accme.org/standards, Standard 1 for important information about content validity.
- B. All the Standards are designed to protect content integrity.
- C. There are individuals without relevant financial relationships that may influence content integrity by promoting their own interests. Examples are book authors, consultants, or others who offer healthcare related services.
- D. The Nurse Planner must engage with those in control of content to ensure The Standards are met.

Required Information Provided to Learners – “Disclosure to Learners”

Key points:

- A. Learners must receive specific, required information prior to the start of an educational activity. For live activities (in-person or virtual activities), required information must be provided to the learner prior to delivery of the educational content.
- B. For enduring materials (written or online activities), required information must be visible to the learner prior to the start of the educational content.
- C. The following information may be provided any time before the activity in a variety of formats. All information in the table below is provided to the learner before the activity. It can be provided in the pre-session flier/brochure/ebrochure, registration website, other promotional materials, or in immediate pre-session disclosure to learners in slides or a handout.
- D. Required information for learners includes the following:

For all educational activities:	If applicable to the specific educational activity:
<ul style="list-style-type: none">• Name of Approved Provider Unit• Approval Statement issued to the APU by WNA.	<ul style="list-style-type: none">• IF you have accepted Commercial Support to financially support the activity: Learners must be informed if an Ineligible organization has

<ul style="list-style-type: none"> • “Successful completion requirements” - Learners are informed of the criteria that will be used to award contact hours. • Presence or absence of relevant financial relationships for all individuals in a position to control content.* <ul style="list-style-type: none"> • For individuals who have a relevant relationship, the following required information must be provided to learners Name of individual; Name of commercial interest; and Nature of the relationship the individual has with the commercial interest. • If no relevant relationship exists, the activity provider must inform learners that no conflict of interest exists for any individual in a position to control the content of the educational activity. 	<p>provided financial or in-kind support for the educational activity.</p> <ul style="list-style-type: none"> • IF Joint providership: Learners are informed of who the provider of the educational activity is (the APU) and all other organizations that participated in joint planning of the activity. • Expiration of enduring materials: Educational activities provided through an enduring format (e.g., print, electronic, web-based) are required to include an expiration date documenting the time period during which contact hours will be awarded. The expiration date is the completion date after which no certificates will be issued, and no contact hours will be awarded.
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*Disclosure to learners or relevant financial relationships is not required for non-clinical topics. Contact WNA before proceeding if you think you have a non-clinical topic.

Part 3: EDUCATIONAL DEVELOPMENT

Key concepts:

1. Nursing Continuing Professional Development (NCPD) starts with identification of a problem, need for improvement, or need for new information that can be resolved by education (vs. resolved by system changes or some other method, or when education is not the appropriate intervention).
2. If the gap is related to a lack of knowledge, skills, and/or practices of registered nurses, an educational intervention is appropriate. The gap may exist for other reasons, however, and alternative, non-educational strategies may need to be considered.
3. Gaps may be present in clinical practice, administration, education, and research.
4. Gap, underlying need, learning outcomes, learner engagement strategies, and evaluation methods should be in alignment, and all of these depend on if a gap is in knowledge, skill, or practice.

Professional Practice Gaps

Key Points:

- A. NCPD must be based on a professional practice gap (PPG).
 - a. A PPG is the difference between the current state of knowledge, skill, or practice and the desired state.

- B. Some questions to help in initial planning are,
- “What is the problem or improvement opportunity that has created the need for this activity?”
 - “What is the root cause of the gap?”
 - “What nursing need or behavior is leading to the problem? “
 - “What is the ‘current state’ (what does the situation look like right now) compared to “the ‘desired state’ (what would it look like if the problem was solved)?”
 - “What data do we have to support that there is a need for this learning activity?”
- C. The Gap statement should be concise, brief, and clear. (Longer statements are ok but need to describe the root cause of the problem. One sentence is usually adequate.)

Example of a Professional Practice Gap : “The problem we are addressing with education is that nurses are not familiar with new evidence-based standards for administration of insulin for hospitalized patients with Type 1 diabetes.”

Analyze Evidence that the Gap Exists

Key Points:

Think about and answer the three questions from the EPD Form using these tips:

A. How do you know a practice gap exists for your target audience?

- Stating there is a “need” or “request,” or indicating the education is “mandatory” are not adequate responses. What is the underlying reason for the request or mandate?
- “We know this education is needed by looking at _____.”
- The need should be related to your specific target audience.

B. What data do you have to show this?

- Examples of types of evidence to validate a gap include:
 - Survey data from learners, subject matter experts (SMEs), target audience members, or other stakeholders
 - Input from a group of learners, managers, or other SMEs about what the gap is and why it exists
 - Evidence from quality studies or performance improvement opportunities, or quality improvement data
 - Literature review to identify trends and information about the topic area
 - Observation
- If your evidence is weak, try reviewing the literature for evidence of the problem in other similar organizations; or, try asking other departments for help / data.

C. What does analysis of the data show you about why the educational opportunity exists?

- What does the data tell you about the problem?
- What is the root cause of the problem?

Target Audience

Key Points:

- A. The target audience is defined as the specific registered nurse learners or health care team members the educational activity is intended to impact.

- B. Think about who needs the new knowledge and why? It could be nurses or interdisciplinary teams.

Determining Underlying Learning Needs

Key Points:

- A. Underlying causes of professional practice gaps:
- i. Nurse doesn't "know" something (Knowledge Gap) ("K")
 - Lack of new nursing information or information from an existing body of nursing knowledge
 - ii. Nurse lacks the skill to do something (Skills Gap) ("S")
 - iii. Nurse is not doing something in practice (Practice Gap) ("P")
- B. Drill down into the problem and determine if the underlying need is a lack of knowledge, skill, and/or practice.
- i. This stage of planning is critical. If you don't know what the underlying need is (gap in K, S, or P), you don't know what the educational content should address.
 - ii. There could be one or more areas of need (K, S, and/or P).
 - iii. ***If you design education to address a problem in practice, you must be able to evaluate in the practice setting, after the activity if the education helped close the gap (this can be self-reported by participants after a period of time, reported by stakeholders, or observed directly).***

Learning Outcome(s)

Key Points:

- A. The Nurse Planner and Planning Committee develop the desired learning outcome for participants in the target audience.
- B. Learning outcomes address the knowledge, skill or practice needs that contribute to the professional practice gap. Achieving the learning outcome results in narrowing or closing the identified gap.
- C. Learning outcomes describe specifically what a learner should know, be able to do, or be able to apply to practice as a result of participating in the educational activity.
- D. The learning outcome must be observable and measurable; you will measure the learning outcome.
- E. A learning outcome may be assessed in the short term or long term. Practice outcomes are assessed after participants have had time to implement what they have learned in their practice setting.
- F. A learning outcome is not an "objective." Nursing no longer uses learning objectives to design education. You can still have objectives – they are the "stair steps" that get you to the outcome.
- G. There is no magic number of learning outcomes required. There may be more than one learning outcome for an educational activity.
- H. Keep learning outcomes realistic for the activity – what can learners really accomplish with one educational activity?

This section left intentionally blank.

Examples of Learning Outcomes for Educational Activities with Comparison to Objectives:

Learning Outcome

Learning Objective	Learning Outcome
<ul style="list-style-type: none"> List 5 side effects of anti-hypertensive agents Discuss risks associated with untreated hypertension State normal range for blood pressure 	<p>Knowledge: Demonstrate knowledge of evidence-based treatment for hypertensive patients by passing post-test with score of $\geq 80\%$</p> <p>Competence/Skill: Correctly identify required actions to manage patients in hypertensive crisis by analyzing a case study.</p> <p>Performance: Utilize an evidence-based protocol when caring for hypertensive patients</p>

Learning Outcome

Learning Objective	Learning Outcome
<ul style="list-style-type: none"> Describe characteristics of effective communication styles List 5 methods of creating a safe environment for holding a confidential conversation Define SBAR Apply the principles of SBAR when communicating critical information 	<p>Knowledge: At conclusion of the educational activity, participants will self-report knowledge gain of effective communication styles using Likert scale</p> <p>Competence/Skill: At conclusion of the educational activity, participants will self-report intent to change practice by applying evidence-based communication strategies</p> <p>Performance: At 6 month post-program evaluation, participants will self-report actual change in practice</p> <p>Patient Outcomes: At 9 month post-program evaluation, participants will self-report impact on patient outcomes as a result of change in communication strategies</p>

Source: ANCC, 2015 (NOTE: The “X’s” were added by WNA, 2018 to show we no longer focus on objectives).

Content for Educational Activity

Key Points:

- Content for the educational activity may be chosen by the Nurse Planner and Planning Committee, or it may be selected by presenters or enduring material content developers.

- B. It's important to choose presenters / content developers who are subject matter experts and share the learning outcomes with those individuals who are selecting the content.
- C. The Nurse Planner and Planning Committee are responsible for ensuring that content is based on the most current evidence, including but not limited to evidence-based practice, literature/peer-reviewed journals, clinical guidelines, best practices, and content experts' opinion.
- D. If there is concern that content selected is not based on best available evidence or may be biased within the educational activity, the Nurse Planner and Planning Committee may choose to engage a "Content Reviewer." This is someone **external to the planning committee**.
- E. The purpose of a content reviewer is to provide independent and expert evaluation of content to ensure best available evidence is presented, the content is balanced, and the content is not promotional or biased.
- F. There is not a specific format to use for citations in the EDP Form. Include:
 - Year published
 - Primary author (et. al.)
 - Title of publication
 - Title of article (if citation is for an article)
 - Volume and Chapter numbers if applicable
 - DOI number if applicable
 - For websites, list the specific URL for pages used, not just the general website URL. Include year of publication for web references, if available from the web page.
- G. The opinion of one person is not best evidence. Best evidence is current and from credible sources.
- H. Content that has previously been developed may be included within the educational activity. If previously developed content is incorporated, the Nurse Planner is responsible for ensuring the content:
 - Meets the criteria for best available evidence
 - Is appropriate in relation to the identified practice gap
 - Is used with appropriate permissions, as applicable.

Active Learner Engagement

Key Points:

- A. As part of the design process, the Nurse Planner and Planning Committee develop ways in which to actively engage learners in the educational activity.
- B. Strategies to engage learners may include but are not limited to integrating opportunities for dialogue or question/answer, including time for self-check or reflection; analyzing case studies; and providing opportunities for problem-based learning.
- C. Active learner engagement may function as an opportunity for formative assessment during the educational activity by providing the presenter with immediate learner feedback.
- D. Choose strategies appropriate to the underlying learning need (K, S, P). Examples of each are included in the EPD Form.

Certificate or Documentation of Completion

Key Points:

- A. A certificate or documentation of completion is awarded to a participant who successfully completes the requirements for the education activity.
- B. The certificate or document must include:
 - Title and date of the educational activity;
 - Name and address of the provider of the educational activity (web address acceptable) – this is the APU;
 - Number of contact hours awarded;
 - WNA Approval Statement; and
 - Participant name or space for.

Approval Statement

Key Points:

- A. The official WNA Approval statement must be displayed clearly to the learner, worded exactly as provided to the APU by WNA.
- B. The official WNA Approval Statement to learners is made prior to the start of each educational activity and on each certificate of completion.
- C. APPROVAL STATEMENT – The APU receives its official approval statement when approved or re-approved as a WNA Provider. Contact WNA for questions about the APU Approval Statement.
- D. Except for the use of the specifically worded WNA Approval statement, do not refer to ANCC or WNA in your materials. Do not use the term “accreditation” or “accredited” in your materials. Do not use any ANCC logo or WNA logo in your materials.

Evaluation

Key Points:

- A. The Nurse Planner and Planning Committee determine the method that will be used to evaluate the educational activity. Evaluation needs to be conducted after the conclusion of the educational activity. Evaluation may also be formative and integrated within the educational activity.
- B. If an activity is designed to address a practice gap / produce a change in practice, the evaluation must be conducted after participants have had the opportunity to implement the learning into practice.
- C. The evaluation components and method of evaluation should relate to the desired learning outcomes of the educational activity. Evaluation may also include collecting data that reflect barriers to learner change.
- D. The evaluation requirement for NCPD is the assessment of change in knowledge, skills, and/or practices of the target audience. Changes as a result of the education may or may not occur based on a variety of factors, but evaluation should assess for such change.
- E. Evaluations may include but are not limited to both short- and long-term methods, as illustrated here:

SHORT-TERM (e.g., for Knowledge, Skills)	LONG-TERM (e.g., for Practice change)
Intent to change practice Active participation in learning activity Post-test Return demonstration Case study analysis	Self-reported change in practice Change in quality outcome measure Return on investment (ROI) Observation of performance

Role-play	
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- F. Following conclusion of the educational activity, the Nurse Planner and/or Planning Committee review summative evaluation data to assess the impact of the educational activity and determine how results may be used to guide future educational activities as applicable. This analysis includes if learning outcomes have been met and if improvements are needed to any aspect of the education.
- A summary of evaluation results must be present in the activity record.
 - The summary includes a narrative analysis by the NP in the activity record of future improvements for NCPD activities and information about the current activity, including if outcomes were met.

FOR QUESTIONS: Contact WNAprl@wisconsinurses.org. THANK YOU!

Please see the WNA Manual for Approved Providers – Overview of Responsibilities for general information on requirements that APUs must maintain.