Provider Unit Evaluation

Wisconsin Nurses Association

March 31, 2023

This presentation covers:

- ANCC requirements for Provider Unit (PU) evaluation for all Approved Provider Units (APUs)

- <u>Sample</u> method, processes, tools, and documentation

- Provider Unit Quality Outcome Measures

Provider Unit Evaluation

Examine aggregate data → ISOLATE OFIs

- ✓ Structure

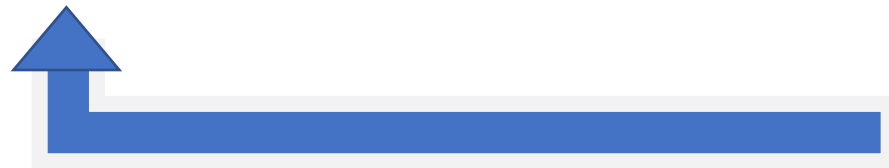- ✓ Process

- ✓ Outcomes

Set QOMs

↓

Make Improvements

Methods and Documentation Are NOT Prescribed

A + B = C ~~crossed out~~

MUST DO IT THIS WAY ~~crossed out~~

Must involve these people ~~crossed out~~

Must Use THIS Tool ~~crossed out~~

Must Document On This ~~crossed out~~

ANCC Requirement – QO1: PROCESS

Describes the process used for evaluating the **overall effectiveness** of the Provider Unit in carrying out its work as a provider of NCPD.

- Includes the **process** that the PU uses to determine if it is meeting learner needs and achieving expected goals/outcomes.

- Once data is identified, demonstrate how the PNP and PU **evaluate the data to isolate an opportunity for improvement.**

- This criterion is related to overall PU effectiveness and **not one individual activity.**

ANCC Requirement – QO2a (Operations) & QO3a (Impact on Nursing Professional Development)

Identify (LIST) your **quality outcomes to improve** PU operations / the professional development of nurses.

- Related to overall PU effectiveness and **not be related to one individual activity.**

- Written in a **measurable** format.

- **Created in alignment with the PU strategic goals** and should be **thoughtful and impactful** to PU.

ANCC Requirement – QO2b (Operations) & QO3b (Impact on Nursing Professional Development)

Explain how the most recent evaluation process (QO1) resulted in the development and/or improvement of an identified outcome including how that outcome was measured and analyzed.

- Why the organization identified this quality outcome goal **as a result of the evaluation plan (QO1).**

- **Strategies** used by the Provider Unit (PU) to achieve this quality outcome goal.

- **How the outcome was measured** and whether the goal was achieved.

Check Your Knowledge

What is the purpose of Provider Unit Evaluation?

Not sure?

Please go back and review the recording.

Hint = Overall Effectiveness

Check Your Knowledge

How many and what type of quality outcome measures does an Approved Provider Unit (APU) need to have?
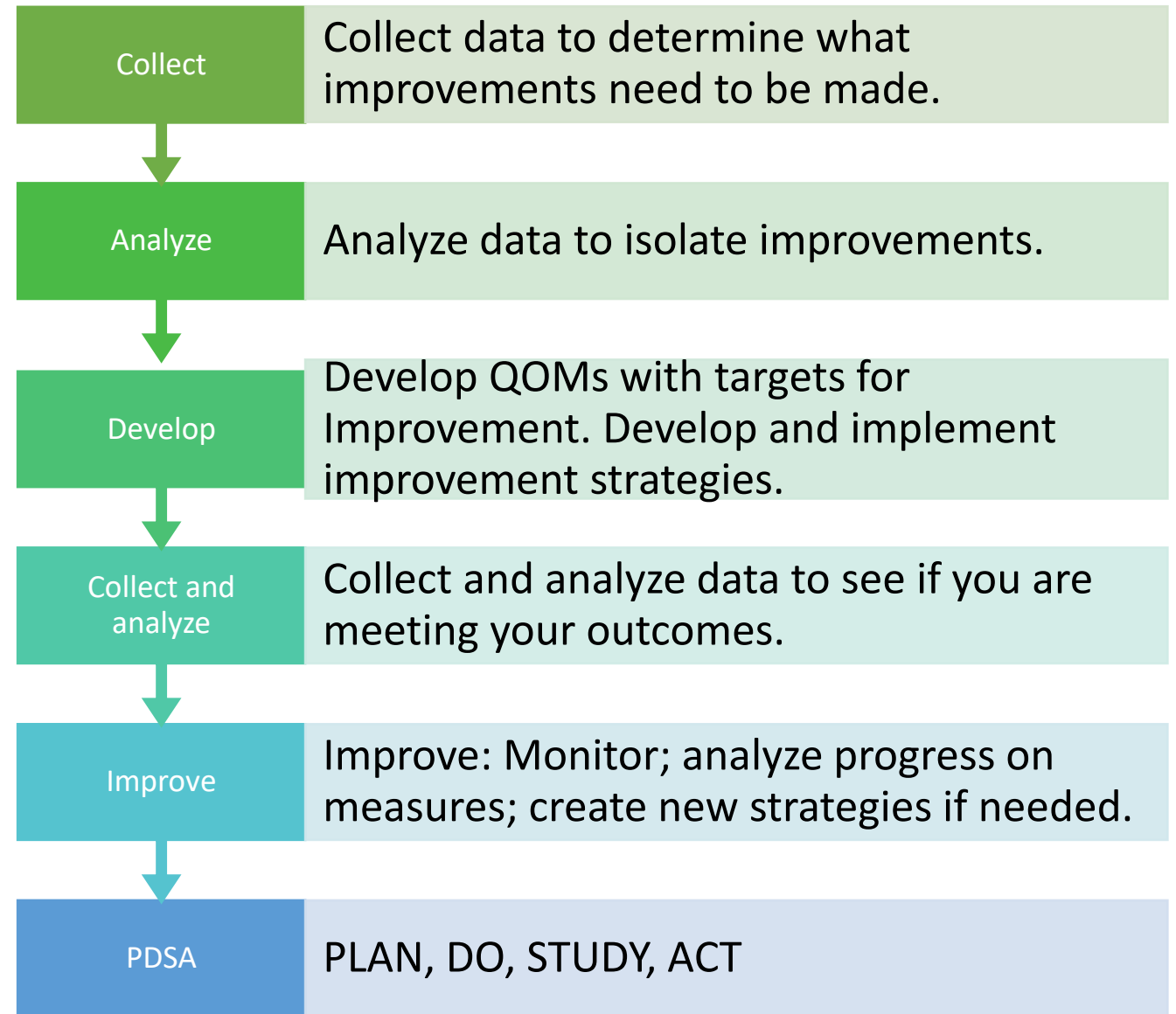
Not sure?

Please go back and review the recording.

Answer: 2 – One operational quality outcome and one NPD quality outcome measure.

PU Self-Evaluation – what might it look like?

Sample Approaches

Sample PU Evaluation Model

Collect	Collect data to determine what improvements need to be made.
Analyze	Analyze data to isolate improvements.
Develop	Develop QOMs with targets for Improvement. Develop and implement improvement strategies.
Collect and analyze	Collect and analyze data to see if you are meeting your outcomes.
Improve	Improve: Monitor; analyze progress on measures; create new strategies if needed.
PDSA	PLAN, DO, STUDY, ACT

PU Evaluation Process and Acting on Findings

- Collect data from nurses related to potential needs.
- Look at the data: Is there an OFI? What changes you can you try to address it?
- Plan the strategy: offer one enduring material per quarter, each related different aspects of one current safety initiative.
- (APU is DOING an action = operations measure).

- Develop formal outcome measure – APU will offer one new IEM per quarter in 2023; a series of sessions, various aspects of one current safety initiative. Success = 4 sessions are developed in 2023 and 80% of nurses indicate on end-of-year survey the education was effective.

- Develop and implement strategies to make this happen.

- Post intervention, collect and analyze data to see if you met your outcome measure.

- If so, what now? If not, why not? What can you change?

PLAN

ACT PDSA DO

STUDY

Mini PDSA cycles

Check
Your
Knowledge

What data can you look at to know if your provider unit is effective and isolate opportunities for improvement?

Hint: Learner feedback, stakeholder feedback, financial information, process information, information on resources...

Sample Process Steps and Tools in Handout

Sample APU Self-evaluation Process Steps

Step of APU Evaluation Process	Actions	Tools
Reviewing or creating APU overarching goals	Use organizational mission, APU mission, and/or organizational initiatives to create or review overarching APU goals.	-Blank paper. -Organizational mission. -APU mission.
Articulating or reviewing how you will know if your APU is effective	Develop a statement of how you will know if your APU is effective.	-Overarching goals. -Organizational mission. -APU mission.
Sharing with team or reviewing yourself your data collected on your 2022 outcome measures.	Share with team or review yourself 2022 APU outcome measures and data collected.	-List of outcome measures. -Summary of data collected. (Visual cues help.)
Sharing your analysis of the data or analyzing/reviewing your analysis of the data collected on your 2022 measures.	Share your analysis of the data with your team or analyze the data / reflect on analysis.	-List of outcome measures. -Summary of data collected. (Visual cues help (checklist, evaluation plan, charts, etc.). -Asking yourself, did we accomplish the outcome measure? Why or why not?

Approved Provider Unit (APU)
"Self-Evaluation" Quick Reference & Toolkit

There is no one way to evaluate your APU for overall effectiveness and no one way to document this evaluation and ongoing follow up. This quick reference provides examples of processes and tools that may be used to conduct APU "self-evaluation."

NOTE: WNA refers to "APU self-evaluation" to distinguish this process from other types of evaluation used in Nursing Continuing Professional Development. The American Nurses Credentialing Center (ANCC) does not specifically call this process "APU self-evaluation." The process is described in ANCC (2021) p. 10.

Contents

- What is APU self-evaluation?
- What is the ANCC requirement for APU evaluation?
- What is the purpose of APU self-evaluation?
- What is the connection between APU Quality Outcome Measures (**QOMs**) and APU self-evaluation?
- How will I write to the APU self-evaluation and quality outcomes processes in the narrative self-study application?
- How do I conduct APU self-evaluation?
- Sample APU Self-evaluation Process Steps Including Actions and Tools

Sample Tools for Assessing & Documenting

Collecting data to determine Opportunities for Improvement (**OFIs**):

- Sample Process & Tool #1 – Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis
- Sample Process & Tool #2 – Resource & Impact Assessment
- Sample Process & Tool #3 – Logic Model

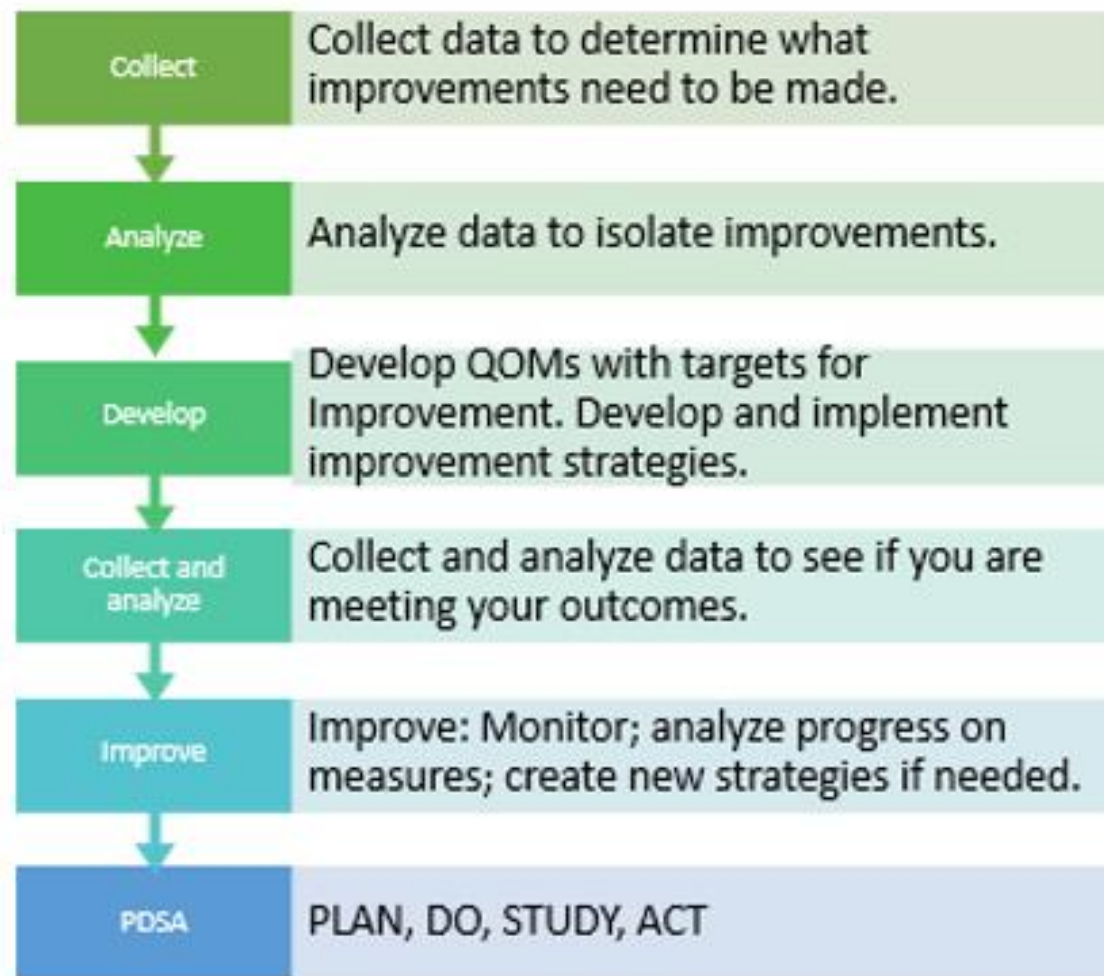Documenting Ongoing Progress on APU Outcome Measures:

- Sample APU Self-Evaluation – Process Tracking & Documentation (Form 1)
- Sample APU Self-Evaluation -- Process Tracking & Documentation (Form 2)
- Sample APU Self-Evaluation – Process Tracking & Documentation (Form 3)

WNA's Summary of Sample Process Steps for APU Self-Evaluation

WNA uses the Plan-Do-Study-Act (PDSA) model to describe the APU self-evaluation process.

Sample APU Evaluation Model

Collect	Collect data to determine what improvements need to be made.
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Sample APU Self-evaluation Process Steps Including Actions and Tools

Step of APU Evaluation Process	Actions	Tools
Reviewing or creating APU overarching goals	Use organizational mission, APU mission, and/or organizational initiatives to create or review overarching APU goals.	-Blank paper. -Organizational mission. -APU mission.
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Sharing your analysis of the data or analyzing/reviewing your analysis of the data collected on your 2022 measures	Share your analysis of the data with your team or analyze the data / reflect on analysis.	-List of outcome measures. -Summary of data collected. (Visual cues help - checklist, evaluation plan, charts, etc.). -Asking yourself, did we accomplish the outcome measure? Why or why not? -Asking yourself, what are the next steps? (Options include - retire measure, modify

Sample Tools for Assessing & Documenting...

...The overall effectiveness of the Provider Unit to determine if it is meeting learner needs and achieving expected goals/outcomes.

Collecting data to determine Opportunities for Improvement (OFIs):

Sample Process & Tool #1 -- SWOT Analysis

Sample Process & Tool #2 – Resource & Impact Assessment

Sample Process & Tool #3 – Logic Model

Documenting Ongoing Progress on APU Outcome Measures:

Sample APU Self-Evaluation – Process Tracking & Documentation (Form 1)

Sample APU Self-Evaluation -- Process Tracking & Documentation (Form 2)

Sample APU Self-Evaluation -- Process Tracking & Documentation (Form 3)

Sample APU Self-Evaluation -- Process Tracking & Documentation (Form 4)

APU Self-Evaluation – Process Tracking & Documentation (Form 2)*

Outcome Measures Related to Structure/Process Improvements – Sample Documentation Form

Outcome Measure	Strategies to Achieve this Outcome	When and how evaluated; by whom	Quarterly Status Update – what have we accomplished?	Next PDSA Cycle – what do we do in the next quarter to achieve the outcome?	End-of-Year Analysis: Met or Not Met
Operational Improvement Measure #1					

Outcome Measures Related to Nursing Professional Development (NPD) – Sample Documentation Form

- You are measuring knowledge, skills, and/or practice behaviors of nurses. You can also measure "patient, student, membership" outcomes.
- These outcomes are not related to one educational activity. The outcomes are related to overall APU effectiveness.

Outcome Measure	Strategies to Achieve this Outcome	When and how evaluated; by whom	Quarterly Status Update – what have we accomplished?	Next PDSA Cycle – what do we do in the next quarter to achieve the outcome?	End-of-Year Analysis: Met or Not Met
Operational Improvement Measure #1					

Check
Your
Knowledge

True or False:
The models, processes, tools, and documentation presented are required to conduct Provider Unit evaluation.
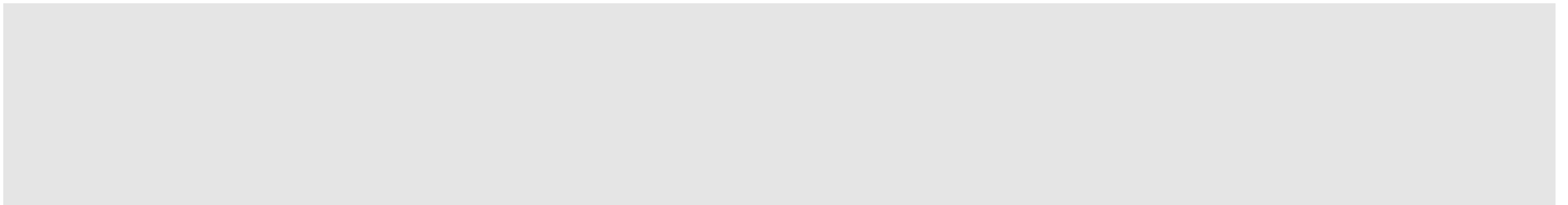
False:

The models, processes, tools, and documentation presented are just EXAMPLES of how you might conduct Provider Unit evaluation.

The **requirement** is that you have a process for evaluating the overall effectiveness of the Provider Unit in carrying out its work as a provider of NCPD.
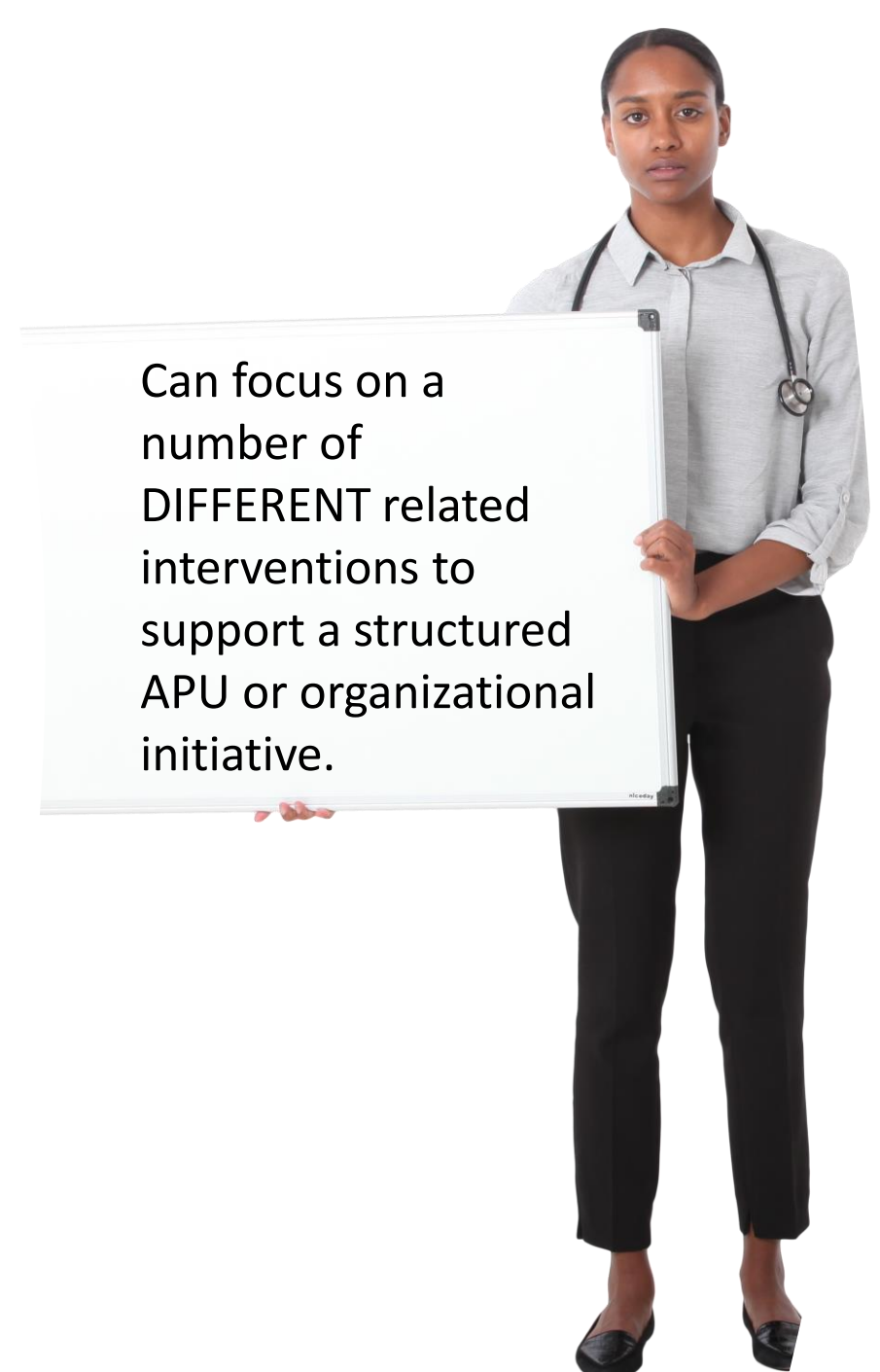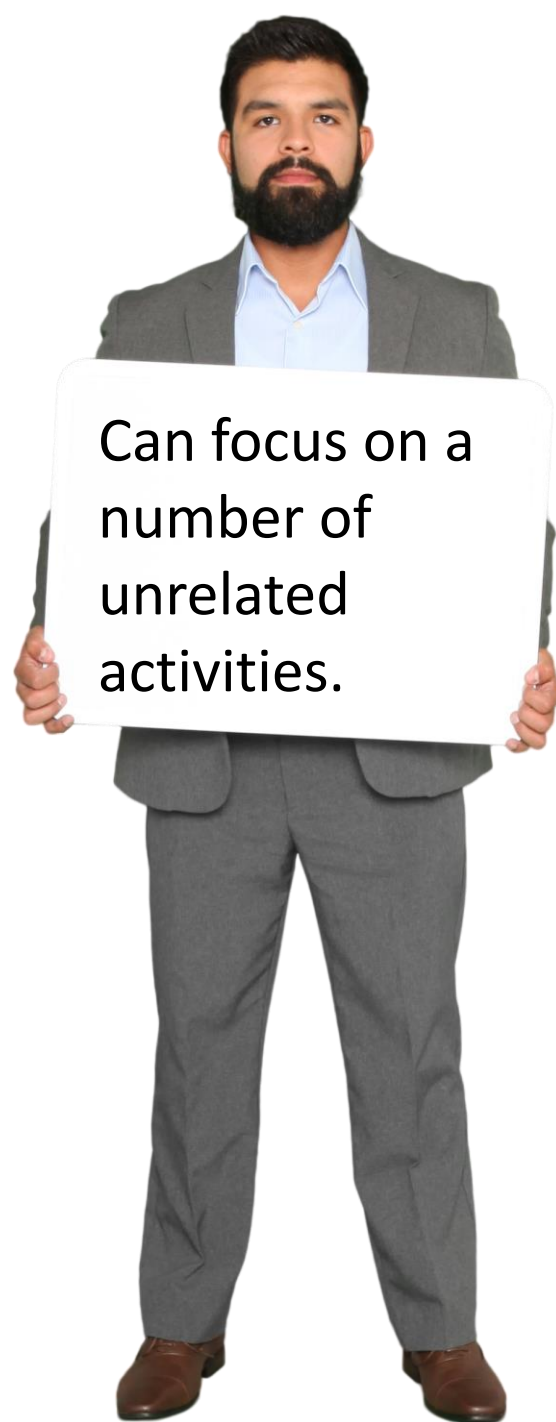
Provider Unit Outcome Measures

PU Outcome Measures – ANCC says,

Identify quality outcomes to improve PU operations / the professional development of nurses.

The outcome should be written in a measurable format.

QOMs should reflect overall PU effectiveness and should NOT be related to one individual activity.

PU Measures
do not focus on
a single activity.

Can focus on a number of unrelated activities.

Can focus on a number of DIFFERENT related interventions to support a structured APU or organizational initiative.

PU Evaluation does not focus on a single activity

- Aggregate data from all activities or sub-sets of activities

- Aggregate data from a subset of activities:
  - groups (e.g., specific nursing departments)
  - activity topics (e.g., leadership)

- Set of different activities on different aspects of one general topic (e.g., incivility – psychology, communication, conflict resolution, legal issues) that support an organizational initiative

Requirement for PU Outcome Measures

Need Operational Measure x 1	Need Nursing Professional Development Measure x 1
Related to an APU Process States what the APU will do / APU actions.	Related to the impact on nurses' knowledge, skill, practice behaviors, (or outcomes)
"Offer three certification prep courses to ICU nurses in 2023."	"10% more nurses in 2023 (as compared to 2022) will become certified in their specialty area."

A Word on NPD Measures – "It's about people"

- You want to measure APU *impact* on learners.

- You will measure changes in nursing knowledge, skills, practice behaviors, or you can measure (patient, student, membership) outcomes.

- You can focus on measuring nursing behaviors that change outcomes, not the actual organizational outcomes.

PU Outcome Measures Need to be Measurable and Measured

You can try the "SMART" Format:

Specific

Measurable

Achievable

Relevant

Time-bound

Check Your Knowledge

Sample Outcome Measures –

https://padlet.com/janejetson50/7024avbicep8a1kc

Operational or NPD?

APU Outcome Measures Examples to Assess

Read the APU outcome measures and make constructive comments on how to improve them: 1. State what needs improvement. 2. Make specific suggestions for improvement. SMART Format = Specific, Measureable, Achievable, Relevant, Time-bound 3. Is this an Operational or a Nursing Professional Development Measure? See column 1 below for these instructions with examples of Operations and QOM Measures.

INSTRUCTIONS - 1.Improve & 2.Categorize:

+

Read APU Quality Outcome Measures. 1. State what needs improvement. 2. Suggest specific improvements.

Add comment

3. Indicate if the QOM is Operational or a Nursing Professional Development (NPD) Measure:

erational Measures - What the

Outcomes Last name starts with A - I

+

Example 1 A-I

Nurse planners will be able to implement appropriate learner engagement strategies for changing practice following a series of case-based education sessions.

Add comment

Example 2 A-I

Evaluate impact of educational activities in the practice setting.

Outcomes Last name starts with J - Q

+

Example 1 J-Q

Nurses will use the S-A-F-E method for inserting g-tubes 100% correctly, 100% of the time, on 100% of patients who need g-tubes.

Add comment

Example 2 J-Q

At least 50% of nurses will self-report changing at least one practice behavior related to any activity series the APU offered in

Outcomes Last name starts with R - Z

+

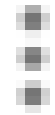### Example 4 R-Z

After attending one educational activity on nurse bullying, nurses will change their practice behaviors by using the pocket card provided in one real scenario in the next six months.

Add comment

Example 5 R-Z

Develop a method for obtaining feedback from nurses that is

Example 8 R-Z

We will offer quarterly education for our membership in relevant topics.

Add comment

Example 4 R-Z

After attending one educational activity on nurse bullying, nurses will change their practice behaviors by using the pocket card provided in one real scenario in the next six months.

Add comment

Example 3 R-Z

75% of our Association Membership will indicate on a semi-annual survey that our APU offered activities in 2023 that are relevant to the problems they face in their practices, by rating our overall programming as "Very good" or "Excellent."

Add comment

Provider Unit Evaluation

Examine aggregate data ➡️ ISOLATE OFIs

✓ Structure

✓ Process

✓ Outcomes

⬇️

Set QOMs

⬇️

Make Improvements

Thank you!

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