

Quarter 2, 2023 WNA UPDATES for APUs

May, 2023

WNA Approved Provider Units (APUs),

WNA newsletters include information from WNA and from ANCC Program Director Updates. The language of the updates is modified slightly to address our Approved Providers. ANCC information has purple headers. Information directly from WNA has blue headers.

GAPS AROUND OUTCOMES

Activity outcome measures focus on what can be accomplished as a result of a specific activity. You may want to impact an institutional outcome but ask yourself if providing one activity to increase knowledge is going to close the gap. Don't set an activity outcome to "improve post-op infection rates by 25%" for your activity. Focus on what can be accomplished as a result of the specific activity being offered, (e.g., 80% of learners will gain new knowledge on how to reduce post-op infections through asepsis, assessment, and communication. This will be measured by a Likert scale question on the post-session evaluation.")

Outcome measure(s) for an activity must be specific to the gap identified for the activity. It's not enough at this point in the evolution of the criteria to just ask if participants will use knowledge in practice. You must have one or more activity outcomes measuring the specific gap you've identified for the activity.

(Asking if participants intend to use knowledge in practice is a great adjunct question on a post-session evaluation, if you have an overall APU NPD outcome measure related to this.)

UPDATE ON OUTCOME-BASED CE (OB-CE)

In follow up to a question on OB-CE on the May 11th PNP call: per ANCC, OB-CE is only recognized for ANCC Accredited Providers at this time. Approved Providers are not currently eligible for OB-CE. Any future updates will be shared.

CLARIFICATION FROM MARCH 2, 2023, PNP CALL

During the March PNP call, we were moving into a conversation about Learner Engagement Strategies when a question was asked about how one knows if a learner actually engaged in and completed an enduring material. I indicated that learner attestation could be used. This would be a method to verify learner completion of the activity. To clarify, attestation is not a learner engagement strategy. Attestation is used when learners self-report (e.g., the number of contact hours earned, completion of an activity). A list of learner engagement strategies discussed on the March call was shared in the call notes distributed via email on March 23, 2023.

“YOU DON’T SAY...”

What NOT to say when talking about Nursing Continuing Professional Development (NCPD).

Do say	Don’t say	Rationale
-Develop activities for contact hours -Designate contact hours	“Approve contact hours”	Providers do not “approve” activities; you develop activities for CE. The PNP may review the documentation, but this should not be an approval process, per ANCC.
-Planning & Documentation Form -Planning Template or Form	“Application”	Providers do not use an application because you don’t approve activities; you develop activities for CE using the Planning & Documentation Form Template.
-Contact hours	“CEU”	CEU is <u>not</u> used in NCPD, per ANCC.

REMINDER TO USE APPROVED PROVIDER RESOURCES

Per ANCC: A reminder to use resources developed specifically for Approved Providers, e.g., The “[ANCC Writing Guide](#).” This guide is a vital reference for APUs and was featured in the WNA Newsletter distributed via email on January 26, 2023. The Guide is cited as: “American Nurses Credentialing Center. (2021). Writing to the ANCC NCPD accreditation criteria self-learning guide. Silver Spring, MD: Author.”

WNA’s [Expanded List of Mitigation Strategies](#) was written to supplement the ANCC Writing Guide and contains additional mitigation strategies from ANCC’s Toolkit - “Toolkit for the Standards for Integrity and Independence in Continuing Education for Approved Providers,” but that are not in the ANCC Writing Guide. All the documents from ANCC’s Toolkit for the Standards are at the top of the [WNA Resources page](#) and should look familiar by now.

[The WNA Manual for Approved Providers, Part 2: Developing NCPD Activities](#) was revised in 2022 to adopt the language of the “ACCME Standards for Integrity and Independence in Accredited Continuing Education.” This manual follows the same order as [\(2022\) Planning & Documentation Form, Template 1](#).

A second option for documenting NCPD activities (“[Template 2](#)”) was developed in December of 2022 to follow the order of the ANCC Writing Guide. You can use either Template 1 or Template 2 to document your NCPD activities, but **we encourage Template 2 because it matches the ANCC Writing Guide.**

HOW MUCH EVIDENCE IS ENOUGH?

How much evidence and analysis of evidence is needed to validate a professional practice gap?

The “evidence” states what source(s) of data support the need for an educational intervention, and the “analysis” explains what the data shows that supports learners’ need for the education.

At least one source of evidence is always needed. Sources can include things like surveys, evaluations from previous activities asking participants to identify gaps, input from stakeholders, a brief review of literature, practice guidelines, information from quality improvement activities, institutional or other study data, or observation.

What not to use as a source of evidence?

- Stating there is a “need” or “request” is not adequate evidence.
- Stating the education is required for re-licensure is not an adequate response. Think about why the education is required for re-licensure – what is the root cause?

The “analysis” of the evidence explains what the data shows that supports learners’ need for the education. Some tips:

- If you list more than one source of evidence, provide a brief analysis of all sources listed. Don’t list a source of evidence and skip the analysis for that source.
- Your analysis should explain why nurses in the target audience need the education. If it answers that question with clear rationale, you have “enough” analysis.
- If surveys, evaluations from past activities asking for gaps, or data (institutional, QI, or other data) are used, explain the results.
 - If you aren’t able to state quantitative data from a survey, think about if the results actually support the need for the education.
- If stakeholder input is used, state who the stakeholders are, what the input is. Stating why it’s important relative to your target audience is helpful.
- If literature is used, indicate the type of literature (e.g., peer reviewed journals) and summarize in a couple of sentences what you found in the literature that supports the need for the education.
 - Listing at list one article citation is helpful if it’s not a well-established topic.
 - Be sure you are using the most current evidence-based literature, the latest practice guidelines, etc.
- For observations, describe who made the observations, where, and what was learned.
- If the information you need to educate on is new, the analysis might simply be that the information is new and important for nurses in the target audience because...(rationale).

NARS NEWS

WNA Provider Activities 2022					
Activity Type	Direct		Joint		Total Activities
Live Course	2466	+	51	=	2517
Live Internet	461	+	93	=	554
Enduring Mat Internet	339	+	3	=	342
Enduring Mat Other	234	+	2	=	236
Journal	31	+	0	=	31
RSS	95	+	0	=	95
All Other	1	+	2	=	3
	3627	+	151	=	3,778

Total Number of Activities = 3,778

Total Nurses Reached = 8,156

Total Hours Instruction = 18,516

Total Nursing Contact Hours = 12,217

Total Providers = 49

The NARS Data Entry & Attestation Deadline was February 15, 2023. The deadline means APUs need to have 100% complete and correct data entered on their activities from the previous calendar year, with the Program Summary attestation completed by the Primary Nurse Planner. NOTE: We anticipate the next annual deadline for NARS entries will be **February 16, 2024**. NARS resources are found on the [WNA website NARS page](#).

As mentioned on the March 2023 APU call, not all fields need to be completed in the NARS batch load template. Check out the most helpful part of the [NARS User Manual](#). Pages 32 – 41 show exactly what fields need to be completed.

There are no changes in the information you need to collect for NARS in 2023 and no changes to the ANCC NARS template for 2023. Please note although the ANCC template says, “ANCC_Activities_2016,” this is ANCC’s most current template. For consistency, WNA won’t change the name of the template until ANCC does. The NARS Data Base can be accessed [HERE](#). (<https://nars.nursecredentialing.org/ActivityView.aspx?t=app>)

WHAT’S NEW ON THE WNA WEBSITE?

The following resources have been added since January 2023. Keeping with the 2023 educational theme of Quality Outcome Measures to assess overall APU effectiveness:

- [Provider Unit Self-evaluation 30-minute video](#) and [slides](#).
- [Provider Unit Self-evaluation Toolkit](#) (word document)
- [APU Quality Outcome Measures Quick Reference](#) (brief slide handout)

Also new: the [APU Self-Study Resource Page](#) has been updated with newer information needed to write your every-three-year WNA Self-Study Application.

CRITERION SPOTLIGHT: SC2

from the ANCC Accredited Approver Program Director Update, February 2023

This month we will focus on self-study criterion Structural Capacity 2. SC 2. How the Primary Nurse Planner ensures that all Nurse Planners of the Provider Unit are appropriately oriented and trained to implement and adhere to the ANCC accreditation criteria. The narrative is a written process and should include how Nurse Planners, NPs, are oriented, how adherence and competence is assessed and monitored, and how the Primary Nurse Planner, PNP, keeps NPs informed about additions or changes to ANCC criteria. Even if the Provider Unit does not have any NPs other than the PNP, a narrative that highlights how an NP would be oriented and trained and how adherence is monitored needs to be included. This narrative, in the absence of NPs may also show how the PNP was oriented and ensures adherence to ANCC criteria (ANCC, 2021). An adherence process is not an activity approval process. This process must include how the NPs are provided education, onboarding, and ongoing development on ANCC criteria and how the PNP assures this information is implemented. There should not be processes or verbiage that indicate the PNP is approving activities or that the NPs are unable to autonomously plan, implement, and evaluate educational activities without the PNP approving documentation. Details that the PNP may consider including as they write the SC 2 narrative:

Onboarding /Orientation

- Recruitment based on eligibility requirements.
- Elements of orientation

- ✓ Resources
- ✓ Learning experiences
- ✓ Competency evaluation
- Evidence that orientation is complete, and that the NP is competent to autonomously plan, implement, and evaluate educational activities.

Adherence

- How PNP updates provider unit members on ANCC criteria changes/revisions
- PNP process to ensure ANCC criteria is implemented.
 - ✓ NP updates
 - ✓ Quality audit of activity files
 - ✓ Attendance at an activity or planning meeting.

American Nurses Credentialing Center. (2021). The Writing to the ANCC NCPD Accreditation Criteria for approved providers self-learning guide. Author.

If you have questions about this ANCC example of demonstrating SC2, please contact Mary Kay.

NPD ARTICLES NOTED IN ANCC PROGRAM UPDATE (Quarterly Newsletter)

Aguilar, M., & Mua-Xiong, D. (2023). Meeting practice transition accreditation program standards amidst a pandemic through a virtual blended preceptor course. *Journal for Nurses in Professional Development* 39(1), 53-57. DOI: 10.1097/NND.0000000000000952

Shaw, D.R., Steiner, P., & Bradley, K. (2023). From chaos to control: one-page tip sheet, a nursing professional development specialist’s essential tool for just-in-time education. *The Journal for Continuing Education in Nursing* 54(1):11-14. doi: 10.3928/00220124-20221207- 05

Holtschneider, M., & Park, C. (2023). Build your professional and organizational capabilities to elevate the interprofessional learning environment. *Journal for Nurses in Professional Development* 39(1), 51-52. DOI: 10.1097/NND.0000000000000951

We hope you were celebrated during National Nurses Month! No matter what setting you work in, you really do make a difference. Thank you to our WNA Approved Providers for all you do!



YOU MAKE A DIFFERENCE