Overview of NCPD Activity Planning for New Nurse Planners / PNPs of Provider Units & IEA Nurse Planners

Wisconsin Nurses Association

December 1, 2023

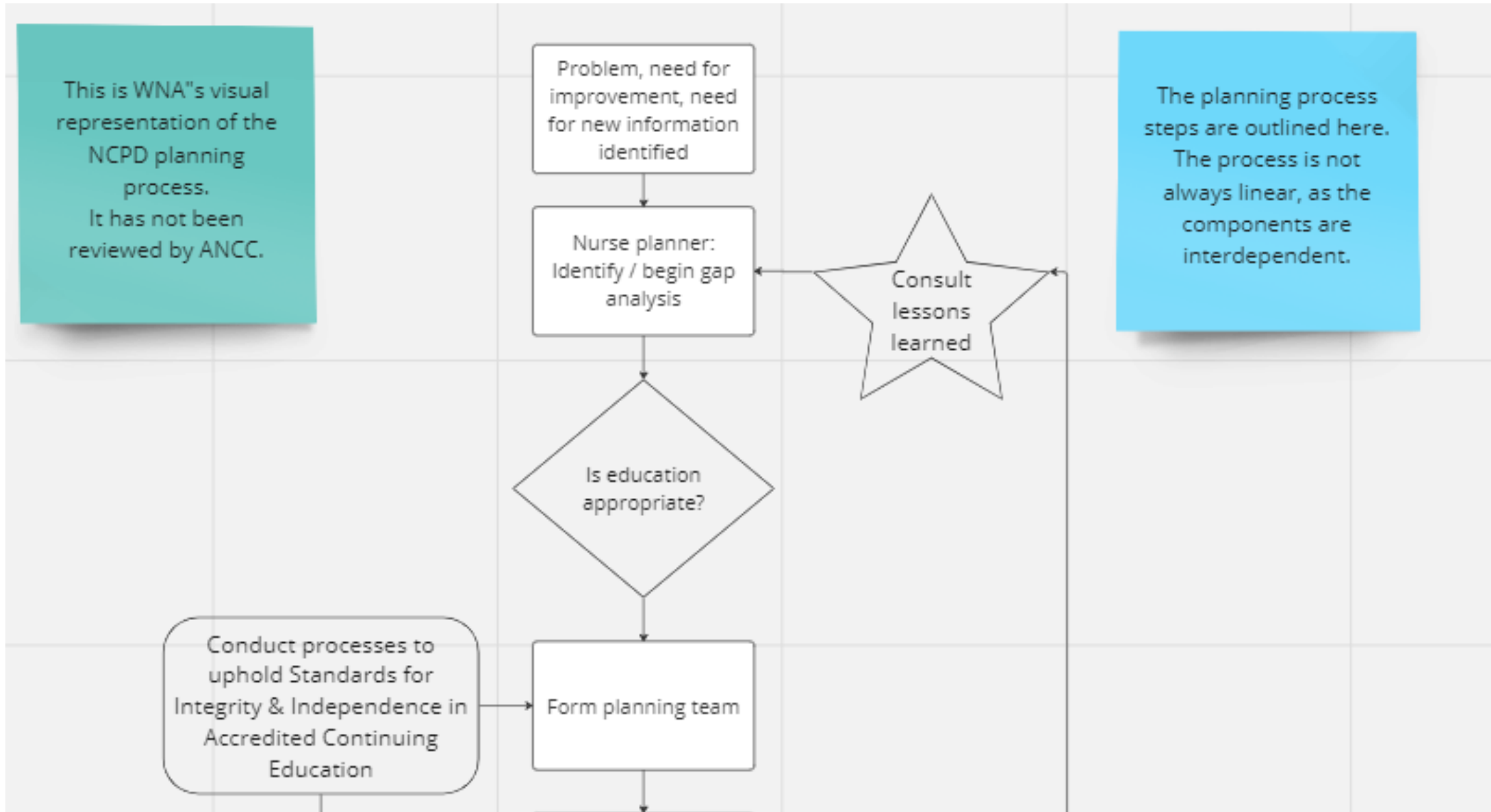# ANCC Summary of Educational Activity Planning Process

- Incorporates active involvement of a Nurse Planner and Content Expert
- Addresses a practice gap (problem, need for improvement, change in standard of care)
- Analyzes educational needs (knowledge, skill, and/or practice) of RNs
- Identifies learning outcomes
- Uses strategies aligned with needs and outcomes to engage the learner
- Chooses valid, evidence-based content
- Plans independently from influence of ineligible companies

# WNA Visual Model of NCPD Planning Process

- Please go to:

https://miro.com/app/board/uXjVNT3Jx-E=/?share_link_id=592178520643

Initial Steps – Is education the answer?

This is WNA"s visual representation of the NCPD planning process.
It has not been reviewed by ANCC.

Problem, need for improvement, need for new information identified

Nurse planner: Identify / begin gap analysis

Consult lessons learned

The planning process steps are outlined here. The process is not always linear, as the components are interdependent.

Is education appropriate?

Conduct processes to uphold Standards for Integrity & Independence in Accredited Continuing Education
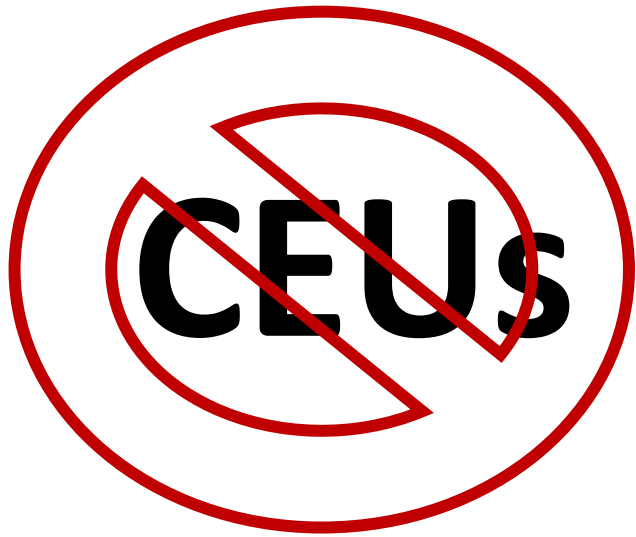
Form planning team

## To offer contact hours or not to offer contact hours...that is the question...

- **The content must be intended to build upon the educational and experiential bases of the professional RN for the enhancement of practice, education, administration, research, or theory development, to improve the health of the public and RN's pursuit of professional career goals.**

- **The activity must be based on <u>current and best-available evidence</u>.**

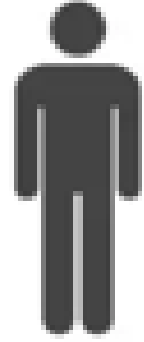To offer contact hours or not to offer contact hours...that is the question...

Contact Hours!

CEUs (crossed out)
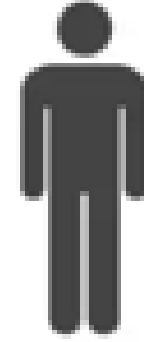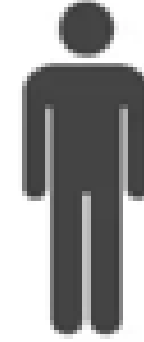
Retrospective Credit (crossed out)
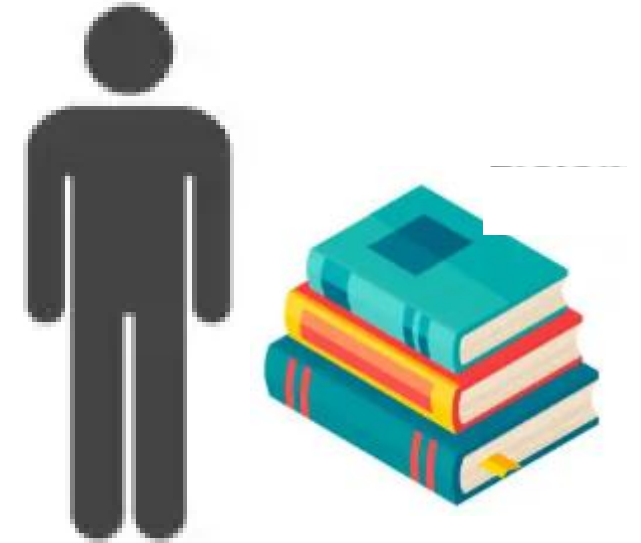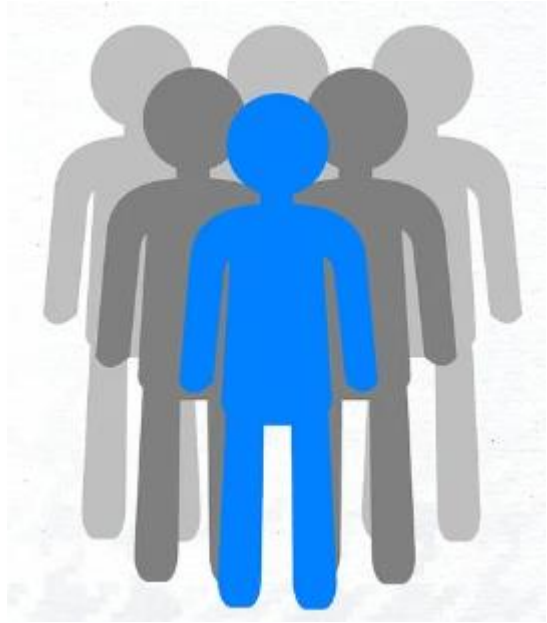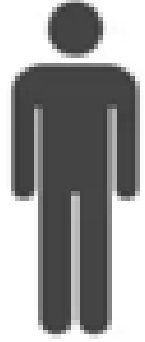
NP Content Expert

OR

NP & Content Expert Other Planner

Educational Planning Team - Minimum

One qualified Nurse Planner   +   One other Planner
- BSN or higher in nursing
- Unencumbered nursing license

One is a content expert

Standards for Integrity & Independence...

- See https://www.wisconsinnurses.org/education/ceap/resources/
- Eligibility Video *PLUS*
- Identifying, Mitigating, & Disclosing Relevant Financial Relationships Video

- See Eligibility and Standard 3 at: https://www.accme.org/accreditation-rules/standards-for-integrity-independence-accredited-ce

Identify, Mitigate, Disclose

Step-by-Step Nurse Planner PROCESS SUMMARY:

- Collect and Review disclosure information. Document.

- Exclude owners and employees of ineligible companies unless one of three exceptions is met.

- Determine which financial relationships w/ ineligible companies are relevant to the activity content.

- Use accepted strategies to mitigate the relationship.

- Disclose the relationship to learners prior to educational content.

Educational Planning Process – Scenario

ICU Supervisor contacts you about training related to Continuous Renal Replacement Therapy as they have a new patient who is on CRRT. Here is what you have been able to find out quickly:

- They have about two or three patients a year they see with CRRT.
- There has been a high turnover of staff in the ICU in the past year.
- Education on caring for someone with CRRT was offered about a year ago.
- The supervisor thinks only two or three nurses may be familiar with the machine used.
- Nurses have provided feedback to the supervisor that they don't know how to care for a patient on CRRT, including using the NXStage System One 5 machine (e.g., common nursing procedures and trouble-shooting alarms) and nursing care including assessment, possible complications, and managing complications.

Complete gap analysis & document evidence of gap

↓

Identify underlying learning needs

↓

Identify target audience

↓

Identify Learning Outcome(s)

↓

Identify evaluation method

Analyzing the Gap

- Difference between current and desired state.

- Problem, need for improvement, need for new information.

- Caused by nurses' lack of knowledge, non-ability to perform skill, or not doing in practice.

- Gap analysis tool – see: https://www.wisconsinnurses.org/education/ceap/resources/

Gap Analysis Worksheet

Example A:

Desired State	Current State	Identified Gap	Gap due to Knowledge, Skills or Practice	Outcome Measure
Increased compliance with Standards for Integrity and Independence by IEA applicants and APUs related to knowledge deficits.	-Increase in number of IEA applicants who are not complaint with Standards as evidenced by documentation in application. -NPs state " I didn't know what the Standard meant" or "I didn't know about that Standard" when asked about reasons for non-compliance.	IEA Applicants and Approved Providers do not have the knowledge needed to document compliance with the Standards for Integrity and Independence in NCPD activities. (A practice gap also exists but won't be addressed with this education.)	Knowledge about the standards and what they mean as evidenced by self-report of knowledge gap and documentation. (Practice gap reflected in documentation and lack of appropriate implementation of the Standards.)	85% of learners will self-report they have gained knowledge about the Standards for integrity and independence that will improve their documentation of compliance with the Standards (in IEA applications or APU documentation, as applicable). This will be measured by (a score of a 4 or 5 on a Likert scale on the post-session evaluation).

Miller Model

- Can't / Don't Do in Practice – Practice Gap

- Can't Show / Don't Know How – Skills Gap

- Don't Know – Knowledge Gap

Gap / Underlying Learning Need

Nurses in the ICU lack knowledge of nursing care related to CRRT and they lack skills in using the equipment needed to care for a CRRT patient.

Evidence:

- They have only about two or three patients a year they see with CRRT (low volume / high risk).
- There has been a high turnover of staff in the ICU in the past year.
- Education on caring for someone with CRRT was offered about a year ago.
- The supervisor thinks only two or three nurses may be familiar with the machine used.
- Nurses have provided feedback to the supervisor that they don't know how to care for a patient on CRRT, including using the machine and nursing care.

Sources of Evidence to Validate the Gap

Evidence that validates the professional practice gap (PPG):

- Why do learners need this education? What data supports the need for this educational intervention?
- The evidence statement should include the NP/planning committee's analysis of the data, not just the data sources.

Data can come from a number of sources including:

- Survey data from stakeholders, target audience, subject matter experts
- Input from stakeholders (learners, managers, health care team)
- Evidence from quality studies and/or performance improvement activities to identify opportunities for improvement
- Evaluation date from previous activities
- Trends in literature
- Direct observation

Target Audience

The target audience is defined as specific registered nurse learners and may include other healthcare team members the educational activity is intended to impact.

Outcome & Evaluation Method

- The activity outcome is the change you will measure to demonstrate the gap is closed by the educational activity.

- An outcome for a knowledge gap can be measured by self-report, a post-test, or other methods indicating knowledge was gained.

- An outcome for a skills gap can be measured by return demonstration or some type of skill assessment.

- An outcome for a practice gap must be measured in the practice setting after the learner has gone back and applied the educational concepts to practice.

Outcomes for CRRT Scenario

- 100% of nurses will gain evidence-based **knowledge** needed to care for patients on CRRT therapy. This will be measured by an 80% or higher post-test score.

- 100% of nurses will demonstrate the **skills** needed to use of the NXStage System One 5 machine: common nursing procedures and troubleshooting alarms.

Outcomes vs. Objectives

Outcomes:

100% of nurses will gain evidence-based **knowledge** needed to care for patients on CRRT therapy. This will be measured by an 80% or higher post-test score.

100% of nurses will demonstrate the **skills** needed to use of the NXStage System One 5 machine: common nursing procedures and troubleshooting alarms.

Objectives:

- Describe nursing assessment of the CRRT patient.
- Discuss nursing care of the CRRT patient.
- Identify possible complications of CRRT and how to manage complications.
- Demonstrate common nursing procedures involved in the use of the NXStage System One 5 machine.
- Troubleshoot alarms on the NXStage System One 5 machine.

Evaluation Method

What data will be collected to determine whether the learners achieved the desired outcome?

The evaluation method needs to align with the outcome and underlying educational need.

- An outcome for a knowledge gap might be measured by self-report, a post-test, or other methods indicating knowledge was gained.

- An outcome for a skills gap will be measured by demonstration or some type of skill assessment.

- An outcome for a practice gap must be measured in the practice setting after the learner has had a chance to go back and apply the educational concepts to practice. This might be measured self-report, observation, data collection such as chart audits – in the actual practice setting.
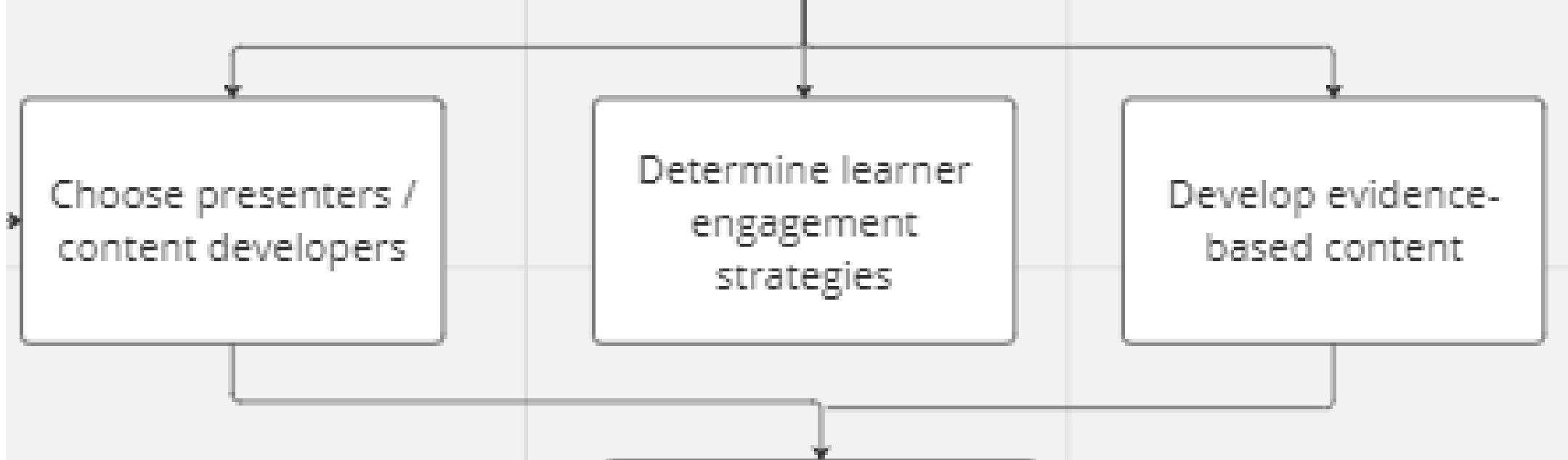
- Identification, Mitigation, Disclosure Processes are carried out for content developers / presenters.

- Presenters must be content experts.

- Content needs to be scholarly, relevant, and timely (past 5 -7 years), and free of bias.

- Nurse Planner validates that content is evidence-based.

- Learner engagement strategies are designed to most effectively deliver the content.
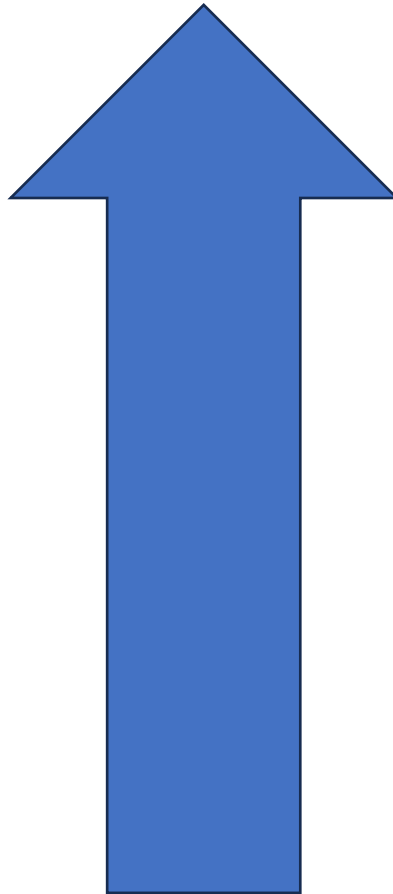
Examples of Learner Engagement Strategies

- Practice

- Skill

- Knowledge

Case analysis
Role play
Problem-based learning
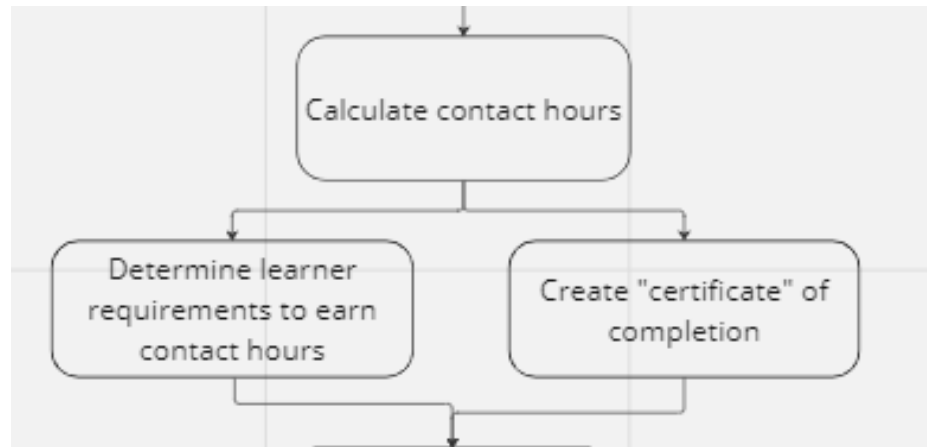
Demonstration
Return demonstration

Lecture
Discussion
Q&A

Start with a clear agenda: Start times, stop times, number of minutes, and note if each segment is for contact hours.

See agenda examples on WNA Resources webpage.

Session	Time	# Minutes	Contact Hours
Welcome and content overview	9:00 – 9:10 a.m.	5 min only of this for contact hours	0.08
Keynote 1 – Beyond the Crisis	9:10 – 10:00 a.m.	50 min	0.83

Calculating Contact Hours:

- "Contact hours," "ANCC contact hours," "CNE credit," "Nursing contact hours "

- Don't count "welcome," breaks, meals, etc.

- You may include overview of content, prework, post-assessments, evaluation time.

- "Partial Credit" – Participants don't need to attend all sessions to earn contact hours.

- Partial credit must be tracked for each participant! Have a method to do this.

-See WNA Resource Page.

-See Planning & Documentation Form for notes on enduring material activities (asynchronous, learner-paced).

Criteria for awarding contact hours

- Clearly outline what is expected of the learners in order to earn their contact hours.
- The criteria should relate to the outcome and be enforceable for the activity.
- The criteria for awarding contact hours, needs to match the disclosure to learners

Note:

Do not confuse criteria for awarding contact hours with calculation of contact hours. These criteria are not the same.

Documentation of Completion (Certificate)

- Title and date of educational activity

• Name and address of the provider of the educational activity (a web address or email address is acceptable)

• Number of contact hours awarded

• Approved Provider Statement as provided by Accredited Approver.

• Space for participant name

See sample on WNA resources page.

Disclosure to Learners

Approval statement of Provider OR IEA Applicant awarding contact hours (must be on at least one promotional document provided to learners) including name of Provider.

Criteria for awarding contact hours ("successful completion requirements")

If content is "clinical" in nature: Presence or absence of relevant financial relationships for everyone in a position to control educational content (nurse planner, planners, presenters, content developers, reviewers of content, other faculty).
See information on financial relationship identification, mitigation, and disclosure in the WNA Toolkit.

If applicable: commercial support information (names of commercial supporters – NO LOGOS)

For enduring materials ONLY: the date by which a participant must complete the activity to earn contact hours ("Expiration Date").
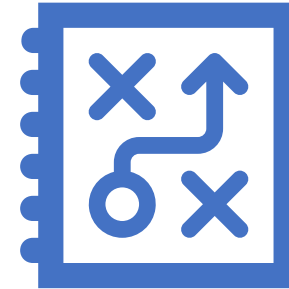
If applicable: joint-provider statement

Implementation

Summative Evaluation
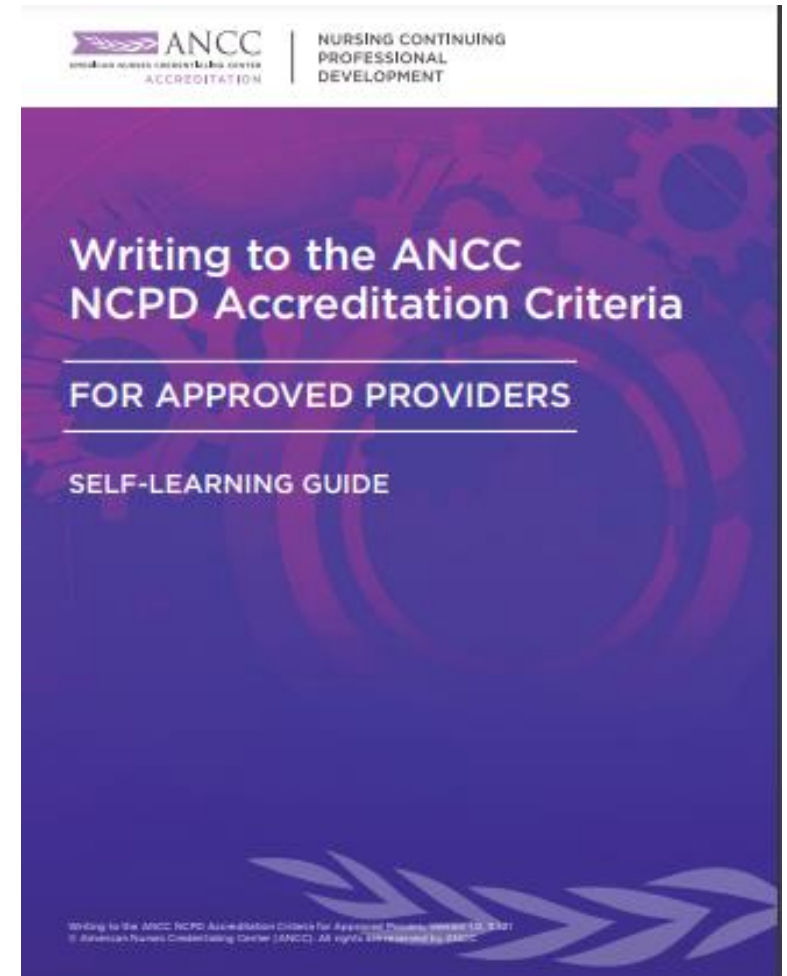
Were outcomes achieved?

Are improvements needed to future activities?

Next: Review ANCC Guide

https://www.wisconsinnurses.org/wp-content/uploads/2022/11/ANCC-2935-NCPD-Providers-Writing-Guide-FINAL-v.1.0-11.2.2021.pdf

Pages 14 – 26

Any Questions on:

Overview of Activity Planning?

Please re-review the video content and contact WNA for questions if needed.