



## APPROVED PROVIDER APPLICATION INSTRUCTIONS

The American Nurses Credentialing Center's (ANCC) Primary Accreditation Program "contributes to improving healthcare outcomes by providing a voluntary peer-review process that defines standards for high performance in providing quality continuing nursing education (CNE) and measures compliance with those standards for organizations that elect to apply for accreditation (ANCC, 2013)." Teaching-learning principles, *Code of Ethics for Nurses with Interpretive Statements* (ANA, 2001), and *Nursing Professional Development: Scope and Standards of Practice* (ANA, 2010) form the conceptual framework of ANCC's Accreditation Program.

Using criteria developed by the ANCC's Commission on Accreditation (COA), the Midwest Multistate Division Continuing Nursing Education (Midwest MSD CNE) Approval Program developed applications/guidelines for the review of continuing nursing education activity and Approved Provider applications that meet Midwest MSD requirements.

*The Midwest Multistate Division is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.*

This document – *Midwest MSD Approved Provider Application Instructions* – based on the 2015 *ANCC Primary Accreditation Application Manual for Providers and Approvers*, will focus on the criteria and requirements for Approved Provider status. However, the *Designing Educational Activities* document, (also found on the Midwest MSD website) offers additional insight into the Educational Design Process according to the 2015 ANCC criteria that may be helpful to organizations beginning the Approved Provider application process. It is highly recommended that the organization reach out to the Midwest MSD office to discuss the timeline for becoming an Approved Provider.

The *Midwest MSD Approved Provider Application* and all related forms referred to in this document are available on the Midwest MSD's website at [www.midwestnurses.org](http://www.midwestnurses.org). Note that many of the forms provided are required.

You are also encouraged to email questions to [questions@midwestnurses.org](mailto:questions@midwestnurses.org) or call the Midwest MSD office at 573-636-4623, ext. 102 should you have questions about the application criteria or submission and review process.

### ELIGIBILITY

Organizations wishing to apply for Approved Provider status complete the eligibility verification process and meet all eligibility requirements before submitting a provider application. The eligibility process includes submission of the *Midwest MSD Approved Provider Intent to Apply/Eligibility Verification* form along with the applicable fee. The intent-to-apply fee is non-refundable if the organization submits an intent-to-apply/eligibility verification form and decides not to proceed with the submission of the full Approved Provider application. The intent-to-apply fee is credited toward the provider application review fee for organizations that proceed with the full Provider Application.

The *Midwest MSD Approved Provider Intent to Apply/Eligibility Verification* form must be submitted no less than six months prior to the application submission deadline (see *Application Process, Fees, and Decisions*) for review. Midwest MSD staff and the Nurse Peer Review Leader(s) will review the organization's completed intent-to-apply/eligibility verification form and notify them if they are eligible to apply for provider approval. Once the organization has been deemed eligible to apply, they may proceed with the approved provider application process.

Contact the Midwest MSD Director of Professional Development at [sara@midwestnurses.org](mailto:sara@midwestnurses.org) or 573.636.4623 ext. 102 with questions regarding the timeline.

### ELIGIBILITY CHECKLIST

*The following ANCC/Midwest MSD requirements must be met in order to apply for provider approval:*

#### 1. HAVE AN IDENTIFIABLE APPROVED PROVIDER UNIT

An Approved Provider Unit is defined structurally and operationally as the members of the organization who support the delivery of CNE activities. A provider unit may be either:

- a. A single-focused organization\* devoted to offering only continuing nursing education; or



- b. A distinct, separately identified unit within a complex, multi-focused organization\*\*.

For example, the provider unit may be a continuing nursing education division, a staff development department, or a nursing education committee within a larger organization. Provider units within complex organizations must demonstrate their autonomy for providing continuing nursing education in the written documentation they submit. In other words, the provider unit (not the larger organization) must be administratively and operationally responsible for coordinating all aspects of the continuing nursing education activities. The provider unit is the applicant for “Approved Provider” status.

\*The single-focused organization exists for the single purpose of providing continuing nursing education.

\*\*The multi-focused organization exists for more than the purpose of providing continuing nursing education.

## **2. HAVE A DESIGNATED NURSE PLANNER**

The provider unit must have the services of at least one Nurse Planner (NP) who will serve as the Primary Nurse Planner (PNP) and be responsible for adhering to ANCC/Midwest MSD approved provider criteria in the provision of continuing nursing education. The PNP and other NPs must be currently licensed registered nurses with either a baccalaureate or graduate degree in nursing. Additionally, they must have education or experience in the field of education or adult learning and demonstrate competence in performing successfully at the expected level. The PNP must have authority to implement and maintain all accreditation criteria as specified by ANCC/Midwest MSD. The PNP must ensure that a designated NP is actively involved in the planning, implementation and evaluation of all learning activities for which contact hours are awarded. The PNP is responsible for the orientation of NPs and other provider unit key personnel, and is accountable to the Nurse Peer Review Leader (NPRL) of the Midwest MSD CE Approver Unit.

## **3. NOT BE A COMMERCIAL INTEREST**

An organization is **not** eligible to be an Approved Provider of continuing nursing education if it meets the definition of a commercial interest. (See ANCC’s *Content Integrity Standards for Industry Support in Continuing Nursing Educational Activities* on the Midwest MSD website). A ‘commercial interest’ is (a) any entity either producing, marketing, re-selling, or distributing healthcare goods or services consumed by, or used on, patients or (b) any entity owned or controlled by an entity that produces, markets, re-sells or distributes healthcare goods or services consumed by, or used on, patients. Exemptions are made for nonprofit or government organizations, non-healthcare-related companies and facilities that provide direct care services to patients.

## **4. MEET THE REGION BOUNDARY RULE**

Organizations that limit their marketing promotion or advertisement of continuing nursing education (CNE) to nurses in either their local DHHS region or a state contiguous to that single region ([click here](#) for HHS region map), may apply for Approved Provider status through the Midwest MSD. Organizations that target CNE outside this area should contact ANCC about Accredited Provider status. This includes organizations that offer primarily on-line programming.

## **5. BE IN COMPLIANCE WITH LAWS**

Applicants must be in compliance with all applicable federal, state, and local laws and regulations that affect the organization’s ability to meet ANCC/Midwest MSD criteria and requirements.

## **6. PROVIDE THE MINIMUM NUMBER OF CNE ACTIVITIES ANNUALLY**

Organizations must plan, implement and evaluate a minimum of five (5) continuing nursing education activities each calendar year to maintain their provider approval status.

Applicants will attest to each of the eligibility requirements on the intent-to-apply/eligibility verification form submitted six months prior to the review cycle. This is a crucial first step to ensure your organization is eligible to apply before proceeding. Once the intent-to-apply form is received and reviewed, potential applicants will be informed if they meet the eligibility requirements and are able to continue with the application submission process.

## APPLICATION SUBMISSION DEADLINES & REVIEW FEES

The Approved Provider Application package including the Application, supporting documentation and three sample activity files, along with the appropriate review fee, must be submitted by the assigned cycle deadline of **February 1, June 1, and October 1**. Approved Provider Application packages received more than 10 days after the deadline will not be accepted for that cycle, without prior arrangements with the Midwest MSD Office. Provider approval is granted for a three-year period.

The **Approved Provider Application package** (*final submission*) consists of four PDF files:

- Approved Provider Application
- Sample Activity #1
- Sample Activity #2
- Sample Activity #3

Each of the four files should be one comprehensive PDF document, labeled accordingly (Provider Application, Sample #1, etc.) and including the applicant organization name in the file name.

Organizations may submit their Approved Provider Application package using one of following methods.

**ELECTRONIC SUBMISSIONS:** Approved Provider Application packages may be submitted electronically. If submitting electronically, applicants must submit a total of four, separate Word or Adobe.pdf files, not to exceed 5 MB in size – one of the Approved Provider Application and supporting documentation and one for each sample activity. Application packages must be submitted to [ApprovedProviders@midwestnurses.org](mailto:ApprovedProviders@midwestnurses.org) by the deadlines listed above.

**FLASH DRIVE SUBMISSIONS:** Approved Provider Application packages may be completed and submitted on three (3) flash drives. Please remember to save a total of **four**, separate Word or Adobe.pdf files – one of the Approved Provider Application and supporting documentation and one for each sample activity, to **each** flash drive being submitted. Application packages must be submitted to the Midwest MSD office by the deadlines listed above.

Submit flash drive Applications to the **Midwest MSD Office:**

- Mailing Address: Attn: Sara Fry, 3340 American Avenue, Suite F, Jefferson City, MO 65109

Organizations may seek provider approval as a single-agency or system provider.

**SINGLE AGENCY PROVIDER:** A single agency provider may be part of a larger corporate system. However, the single agency/hospital is only providing continuing education for the agency/hospital named in the Application. A single agency/hospital provider does not act as the provider of continuing education for multiple agencies/hospitals.

**Single Agency Review Fee:** \$2,000.00

**SYSTEM PROVIDER:** A system provider is a multi-agency/hospital/health care system providing health care services through three or more agencies/hospitals that share a common mission and/or purpose. The system is a corporation with a central administration providing services to all of the agencies/hospitals within the corporate structure. A system provider has in place at the corporate level a centralized staff development and/or continuing education department responsible for planning and implementing a system wide continuing education program. All agencies/hospitals in system must be named in the Application and remain unchanged throughout approval period.

**System Provider Review Fee:** \$4,800.00

In order to ensure quality in their continuing nursing education activities, the Midwest Multistate Division requires system providers to:

- Develop a centralized structure with a staff development and/or continuing education department responsible for ensuring adherence to the ANCC/Midwest MSD accreditation criteria across the system, including a centralized recordkeeping method.
- Utilize the system name to identify the Approved Provider Unit on all marketing materials, activity documentation, certificates of completion and Approved Provider correspondence.
- Identify the appropriate number of Nurse Planners to manage the volume of activities provided within the system.

- Cultivate an educational plan that ensures all Nurse Planners in the system are oriented to, updated on and comply with ANCC/Midwest MSD provider approval criteria.
- Utilize a comprehensive evaluation plan for the system provider unit that includes annual goals for improvement and a focus on quality outcome measures.
- Ensure that a qualified Nurse Planner from the system Approved Provider Unit actively participates in the planning, implementation, and evaluation of each educational activity provided by the system's Approved Provider Unit.

Examples of System Approved Provider Units: (1) XYZ Hospital with two locations and multiple clinics; (2) ABC College affiliated with DEF Hospital system and various clinics. Approval is not granted to applications where the organizations do not have a similar mission or purpose, and are not corporately affiliated. For example, multiple associations serving varied target audiences could not form a system Provider Unit. Similarly, a professional association could not join with a hospital system to form a system Provider Unit.

Application review fees may be paid by check or credit cards online. Visit the Midwest MSD website for details. Invoices are generated through the online system and emailed to the contact when the organization indicates they wish to pay by check. When providing payment by check, please make checks payable to the **Midwest MSD** and mail them to the address provided on the invoice. Please feel free to contact the Midwest MSD office or Midwest MSD Nurse Peer Review Leader(s) if you have any questions about the Application deadlines or Application review fees.

## COMPLETING THE APPLICATION

Approval decisions are determined on the basis of compliance with the ANCC/Midwest MSD Accreditation Program criteria. In order to validate compliance, it is essential that the Midwest MSD review team receive a comprehensive, well-organized Approved Provider Application package, including narrative descriptions for each criterion, sample activity files demonstrating compliance and supplemental evidence as required or requested. Validation of compliance is based on the written documentation provided in the Provider Application. **Please remember the following requirements as you prepare your Approved Provider Application:**

1. Retrieve the current **Midwest MSD Approved Provider Application** and **Application Instructions** from the [Midwest MSD website](#).
2. Read the entire Application and instructions before beginning to formulate responses. Contact the Midwest MSD office if you have questions regarding the criteria and/or application process at [questions@midwestnurses.org](mailto:questions@midwestnurses.org) or 573.636.4623 ext. 102.
3. Respond to each criterion listed in an organized, easy-to-follow manner. All applicants are encouraged and should be able to type responses directly onto this Application. However, if you are unable, please address each Criterion by name and number, i.e. Approved Provider Criterion 3 – Quality Outcomes, Approved Provider Unit Evaluation Participants, QO 1, and follow the sequence in order.
4. All pages of each PDF file should be numbered sequentially, including appendices and sample activity documentation to facilitate the review process.
5. Type the entire Application and ensure all copies are clearly reproduced.
6. Narrative responses should be clear, concise and complete.
  - Do not provide lengthy narratives addressing more than one criterion.
  - A minimum of one paragraph per item (process description and example) is required. One to two sentence responses are not a sufficient amount of evidence and will constitute a missing response.
  - Referencing attachments, facility policy/procedure documents or sample activity files is not an acceptable response.
7. Please limit the narrative portion of your Application (OO, SC, EDP, & QO sections) to 50 typewritten pages, double-sided. Does not include supporting documents and activity files.
8. Documents must be cross-referenced and directional references provided within the narratives. For example, if you mention the organizational chart is attached, provide its location (directional reference) within the Application in the narrative (i.e. Page 52), and ensure that the organizational chart can be found on Page 52. In addition to adding

“page 52” to the narrative, you could also cross reference the organizational chart by listing the Criterion number on the organizational chart (OO2.d) to demonstrate the criterion the supporting documentation is addressing.

9. Supporting documentation i.e. organizational chart for Provider Unit may be integrated with the narrative component or accumulated in a separate cross-referenced section. When submitting frequently cited materials, please consider utilizing an appendix instead of providing supporting documentation multiple times.
10. The Approved Provider Application package (final submission) consists of four PDF files:
  - Approved Provider Application
  - Sample Activity #1
  - Sample Activity #2
  - Sample Activity #3
11. **Three (3) flash drives or one (1) email containing four Word or Adobe.pdf files** of the Approved Provider Application package (see #10) must be submitted by your assigned cycle deadline of **February 1<sup>st</sup>, June 1<sup>st</sup> or October 1<sup>st</sup>**. Submission options below:
  - **Email\***: [ApprovedProviders@midwestnurses.org](mailto:ApprovedProviders@midwestnurses.org) (\*not to exceed 5 MB in size)
  - **Regular mail**: Midwest MSD Office, Attn: Sara Fry, 3340 American Avenue, Ste F, Jefferson City, MO 65109
  - **FedEx or UPS**: Midwest MSD Office, Attn: Sara Fry, 3340 American Avenue, Ste F, Jefferson City, MO 65109

***NOTE:** Applicants must submit a total of **four separate Word or Adobe.pdf files** – one of the Approved Provider Application and supporting documentation and one for each sample activity. Each pdf is to be numbered separately and not run sequentially.*
12. Policies and procedures of the Midwest MSD CE Approver Unit ensure confidentiality of all applications and records. One copy of the Application packet is kept on file at the Midwest MSD office. All other copies used by Midwest MSD Nurse Peer Reviewers during their review are destroyed.

## APPLICATION DECISIONS

### APPROVED

Midwest MSD provider approval is granted for a three-year period, during which the Approver Provider Unit may award nursing contact hours to participants. Midwest MSD CE Approver Unit Nurse Peer Review Leader and Nurse Peer Reviewers will audit Unit operations and continuing nursing education activities provided by the Unit annually for the purpose of monitoring compliance with ANCC/Midwest MSD approved provider criteria.

### PROVISIONAL APPROVAL

If there is not sufficient documentation of how the criteria are being met i.e. several criteria in the Application are not met, Unit procedures need minor updates and/or improvements, activity documentation identifies red flags in the implementation of criteria, and/or activities are not managed accurately or completely utilizing current educational design criteria, the Application will be awarded provisional approval. The applicant will be given an opportunity to address the deficiencies noted within the documentation provided. The Midwest MSD CE Approver Unit will conduct additional monitoring throughout the period of approval to ensure compliance. If at any point through the monitoring process adherence to the guidelines still cannot be demonstrated, provisional approval will be revoked for non-compliance.

### DENIED/NOT APPROVED

If there is not sufficient documentation of how the criteria are being met, if the Unit procedures are inadequate, if the application responses identify red flags in procedures and/or implementation of criteria and/or if activities are not managed and/or developed appropriately utilizing current educational design criteria, the Application will not be approved. If an application is not approved, the applicant may choose to resubmit or appeal the decision.

- **Appeal:** When a Provider Application is not approved by the Midwest MSD, the applicant has the right to appeal the decision. A copy of the appeal process is available upon request from the Midwest MSD office. Changes and/or revisions **may not** be made to the Application (or resubmission, if applicable) during the appeal process. The decision of the Midwest MSD CE Approver Unit after the appeal is final.

If an Application is denied, the Unit may not offer nursing contact hours after their expiration date. The organization is responsible for notifying all stakeholders (administrators, managers/supervisors, participants currently registered for activities advertising CNE award) of the change in approval status and explaining how contact hours will not be provided for activities after the expiration date.

### **REVOCAION OF APPROVAL**

Provider approval will be revoked if there is evidence that the criteria for approval were not adhered to as described in the Application. Notice of revocation of approval is sent to the organization by the Midwest MSD office within two weeks of the revocation decision. The organization is responsible for notifying all stakeholders (administrators, managers/supervisors, participants currently registered for activities advertising CNE award) of the revocation of contact hours as soon as possible, but no later than one month following notification of revocation.





## PROVIDER APPLICATION GUIDELINES/HELPFUL HINTS

The Provider Application is divided into five sections, each requiring written documentation:

- Organizational Overview (OO)
- Criterion 1: Structural Overview (SC)
- Criterion 2: Educational Design Process (EDP)
- Criterion 3: Quality Outcomes (QO)
- Criterion 4: Sample Activities (SA)

*Note: All documents will be reviewed for adherence to ANCC/Midwest MSD approved provider criteria in place at the time your educational activities were planned, implemented, and evaluated.*

The following sections are intended to provide assistance with writing the narratives for the Approved Provider Application. For each criterion, you are to 1) provide a **process description** – a description of your provider unit’s process for addressing the criterion and 2) give a **specific example** demonstrating/illustrating how that process is operationalized within your Provider Unit. Criterion 4 requires the submission of three sample activities held in the previous 12-month period.

It may be helpful to read through each criterion first, and then go back to begin writing the narrative. Have someone outside your provider unit read the responses to be sure they address the criterion fully and are clear. Contact Judi the Midwest MSD Nurse Peer Review Leader at [NPRL@midwestnurses.org](mailto:NPRL@midwestnurses.org) or Sara at the Midwest MSD office at [sara@midwestnurses.org](mailto:sara@midwestnurses.org) if you have questions.

### APPROVED PROVIDER ORGANIZATIONAL OVERVIEW (OO)

The Organizational Overview (OO) is an essential component of the application process that provides a context for understanding the Approved Provider Unit/organization. The applicant must submit the following documents and/or narratives:

#### STRUCTURAL CAPACITY

##### **OO1. Demographics**

- OO1.a** Submit a **description** of the features of the Approved Provider Unit, including but not limited to scope of services, size, geographical range, target audience(s), content areas, and the types of educational activities offered.
- OO1.b** If the Approved Provider Unit is part of a **multi-focused organization**, describe the relationship of these scope dimensions to the total organization.

Approved Providers may be a separate, single-focused entity whose only purpose is to provide CNE or they can be a multi-focused organization (MFO), a subset of an organization such as a hospital, university, professional organization or clinic that exists for other purposes in addition to providing CNE. For example, a single focused organization is an education company providing live and online CE for multiple disciplines. A multi-focused organization is an education department of a hospital or an education arm of a specialty nursing association. Most applicants will be part of a multi-focused organization, unless your organization only offers continuing nursing education.

The documented beliefs and goals of the Approved Provider reflect the importance of continuing education for nurses and the needs and characteristics of the Approved Provider’s potential learners. The goals may be derived from the parent organization’s mission, strategic plans and goals, or from the mission of the Approved Provider Unit. The description of Approved Provider Unit features should include factors that help define the Unit’s scope and areas of influence or focus.

Applicants should ensure that their description of the Provider Unit includes the following features, at a minimum: scope of services, size, geographical range, target audience(s), content areas, and the types of educational activities offered.

##### **OO2. Lines of Authority and Administrative Support**

- OO2.a** Submit a **list** including names and credentials, positions, and titles of the Primary Nurse Planner and other Nurse Planner(s) (if any) in the Approved Provider Unit.



Educational and experiential qualifications must be documented for all Approved Provider Nurse Planner personnel that appear in the description and organizational chart of the Approved Provider (*Organizational Overview, Structural Capacity, OO2.c Lines of Authority & Administrative Support*).

The Approved Provider must identify by name and credentials the Primary Nurse Planner and all additional Nurse Planner(s) that participate in the Approved Provider activities and support the overall functions of the Provider Unit. The educational and experiential qualifications of the Nurse Planner(s) must be documented clearly and concisely using a bio form that provides a narrative description or bio sketch of the nurses' experience and achievements with respect to their professional career as a nurse. The Provider Unit may accept curriculum vitae to assist in determining expert subject matter experts and in evaluating the experiential qualification for Nurse Planners; however detailed information from the CV must be summarized on the Nurse Planner Biographical Data form that is submitted with the Provider Application. Information in a condensed format that highlights the experience related to adult education principles and expertise for the targeted educational activity or position within the Approved Provider Unit is very helpful. **Please Note: The provider is required to utilize the Midwest MSD Nurse Planner Biographical Data Form.** Experiential qualification should be described in sufficient detail to provide evidence of the Nurse Planner's ability to plan, implement and evaluate nursing continuing education activities.

Staff resources should be appropriate for the size and scope of the Approved Provider. A district nurses' association providing four (4) activities a year may well have a single Nurse Planner who is a volunteer and spends on average two days a month on Approved Provider activities. If the Approved Provider is part of a large organization and provides many nursing educational activities, both web-based and face-to-face activities each year, but the Application identifies a single Nurse Planner, then reviewers would question the capability of the Provider Unit to operate according to ANCC/Midwest MSD Accreditation criteria and their ability to provide quality educational activities.

In a large Approved Provider Unit, a CNE coordinator or administrative assistant(s) may have an important role in the Approved Provider's full range of functions - including managing contractual agreements with resources, conference sites and vendors for printing, arranging for tabulating activity evaluations and other data as required by the evaluation plan, and ensuring that records, whether electronic or paper, are maintained according to ANCC/Midwest MSD Accreditation criteria. Although these 'key personnel' no longer need to be documented within the Approved Provider Application, they are a vital part of the Unit's smooth functioning.

**OO2.b** Submit **position descriptions** of the Primary Nurse Planner and Nurse Planners (if any) in the Approved Provider Unit.

- Position Descriptions should be specific to the role in the Approved Provider Unit, which may be different than the employment "job description."
- The Approved Provider must submit position descriptions for both the Primary Nurse Planner and the Nurse Planners, describing each position's qualifications, authority, and responsibilities related to their position within the Provider Unit.
- The position descriptions must reflect the qualification requirements for the Primary Nurse Planner and Nurse Planner(s) for providing continuing nursing education that are consistent with those of the ANCC/Midwest MSD Accreditation Program criteria and should specify elements of the roles in the Approved Provider Unit, such as performing needs assessment, program development, evaluation and goal setting.
- Please note that if an organizational health system job description is used and does not correlate with the individual Provider Unit responsibilities, then the elements specific to the Primary Nurse Planner or Nurse Planner role must be included. These human resource descriptions often do not have enough detail or they do not include role elements that are specific to the Primary Nurse Planner or Nurse Planner role. Attaching an addendum to a traditional health care position description that includes the elements of the Provider Unit position descriptions is acceptable.

**OO2.c** Submit an organizational **chart, flow chart, diagram, or similar image** depicting the structure of the Approved Provider Unit, including the Primary Nurse Planner and other Nurse Planner(s) (if any).

- The Approved Provider should design an organizational chart that identifies the lines of authority and



communication within the Approved Provider Unit.

- This chart should display only those key personnel who play a role within the Approved Provider Unit. The Primary Nurse Planner and Nurse Planner(s) must appear on the chart. Support staff and volunteers may appear on the chart but are not required.
- The name, credentials and position titles of each person should be listed. It should be clear which persons serve as the Primary Nurse Planner and Nurse Planner(s) if other personnel appear on the organizational chart.

**OO2.d** If the Approved Provider Unit is part of a larger organization, submit an **organizational chart**, flow chart, diagram, or similar image that depicts the organizational structure and the Approved Provider Unit's location within the organization.

- If the Approved Provider is part of a larger organization, a second organizational chart must be submitted to show how the Approved Provider Unit fits into the larger organization's configuration. While it is not necessary to show the entire organizational structure, it should be clear from this chart the line(s) of communication/authority for the Approved Provider Unit in relation to the larger organization.
- This can be an official document of the organization or a diagram that shows where the APU is within the larger organization.

## **EDUCATIONAL DESIGN PROCESS**

### **OO3. Data Collection and Reporting**

Approved Provider organizations report data, at a minimum, annually to the Midwest MSD:

**OO3.a** Submit a completed **NARS Annual Reporting Spreadsheet** listing all CNE offerings provided in the past 12 months, including, at a minimum: activity dates; activity titles; target audience; total number of participants; total number of nurses; total number of nursing contact hours offered for each activity; if the activity was jointly provided; and any commercial support received (monetary & in-kind amounts).

- Use the Approved Provider NARS Annual Reporting Spreadsheet provided on the Midwest MSD website.
- The twelve-month period is different depending on the timing of the Approved Provider's Application. For example:
  - February applicants: January 1, 2017 –January 1, 2018
  - June applicants: May 1, 2017 – May 1, 2018
  - October applicants: September 1, 2017 – September 1, 2018
- **New applicants**: Submit a list of the CNE offerings provided within the past 12 months. Indicate whether the three sample activities were individually approved by the Midwest MSD or another ANCC Accredited Approver Unit.
- **All applicants**: Additional information specific to the Provider Unit that is pertinent to this review may be added as a footnote to the CNE Activity Summary form (e.g. Our Approved Provider Unit only provides CNE to RNs).

## **APPROVED PROVIDER CRITERION 1: Structural Capacity (SC)**

The capacity of an Approved Provider is demonstrated by commitment to, identification of, and responsiveness to learner needs; continual engagement in improving outcomes; accountability; and leadership. Applicants will write narrative statements that address each of the criteria under **Commitment**, **Accountability** and **Leadership** to illustrate how structural capacity is operationalized within their Unit.

➤ Each narrative must include:

- **A clear, detailed description of your provider unit's process** for addressing the criterion so it is clear to the reviewers (reviewers should understand fully how the Provider Unit operates after reading), and



- **A specific, detailed example** that illustrates how the process is operationalized within the Provider Unit to meet the criterion. Individuals involved should be identified by name, position/title (and agency, if not one of the sample programs included with the Application.) Examples should specify who, what, when, where, how and/or why.

**COMMITMENT:** The Primary Nurse Planner demonstrates commitment to ensuring RNs' learning needs are met by evaluating Approved Provider Unit processes in response to data that may include but is not limited to aggregate individual educational activity evaluation results, stakeholder feedback (staff, volunteers), and learner/customer feedback.

**Describe** and, using an **example**, demonstrate the following:

**SC1.** The Primary Nurse Planner's (PNP) commitment to learner needs, including how Approved Provider Unit goals are revised based on data.

- This criterion relates to the overall functioning of the Approved Provider Unit and how the Primary Nurse Planner commits to ensuring that the needs of the learner are met, rather than individual activity planning. Applicants should describe how the Primary Nurse Planner demonstrates continual commitment to utilizing feedback from stakeholders (i.e. staff & volunteers), and learners or customers to evaluate the Approved Provider Unit's goals in response to the feedback. Although the response may include references to learning needs assessment methods, the criterion is referring to more than learning needs. Remember to focus on the PNP's role.
- Providers should outline their process for examining and evaluating their goals. Examples might include offering day-long activities away from the work facility based on data from a needs assessment or offering more CNE by webinar as requested by constituents in focus group discussions. There may also be discussion about how to increase the attendance at the activities provided by the Unit, with suggestions such as seeking sponsorship or commercial support to reduce the overall cost to attendees, adjusting the time frame of the activities or offering the activities numerous times to reach nurses depending on their work shift, or offering learner-paced activities to reach nurses who continue to struggle taking off work to attend live programs.

**ACCOUNTABILITY:** The Primary Nurse Planner is accountable for ensuring that all Nurse Planners and key personnel in the Approved Provider Unit adhere to the ANCC/Midwest MSD Accreditation criteria.

**Describe** and, using an **example**, demonstrate the following:

**SC2.** How the Primary Nurse Planner ensures that all Nurse Planner(s) of the Approved Provider Unit are appropriately oriented/trained to implement and adhere to the ANCC/Midwest MSD Accreditation criteria.

- Consider describing how you as the PNP orient new nurse planners, keep them updated, and ensure they are continuing to follow criterion guidelines.
- The Primary Nurse Planner is responsible and accountable for establishing a process to ensure that *all* Nurse Planners adhere to the ANCC/Midwest MSD Accreditation criteria. It is critical that the Primary Nurse Planner establishes a well-defined and structured orientation process outlining the structure and policies and procedures to ensure that all individuals in the Approved Provider Unit are up-to-date with ANCC/Midwest MSD Accreditation criteria. A variety of educational tools should be incorporated into the Nurse Planner orientation process to educate them regarding their role, responsibilities, and duties with regard to each activity with which they will be involved.
- The Primary Nurse Planner has authority to ensure compliance with the ANCC/Midwest MSD Accreditation criteria in all activities provided. Therefore, the Primary Nurse Planner must ensure that they themselves are kept-up-to-date on the accreditation criteria. There are multiple ways the Primary Nurse Planner stays current with ANCC/Midwest MSD Accreditation criteria including, but not limited to: phone conversations and/or email correspondence with MSD staff; reviewing notifications from the Midwest MSD regarding criteria changes; visiting the Midwest MSD website where Applications and instructions are posted; attendance at an annual Approved Provider Training; or consulting with the Nurse Peer Review Leader of the Midwest MSD. The Primary Nurse Planner ensures that a qualified Nurse Planner is an active participant in the planning, implementation and evaluation process for each continuing nursing education activity

provided.

- ***A critical step in meeting this criterion is operationalized in how this information is then shared with Nurse Planners and other individuals in the Approved Provider Unit so that it can be implemented in a timely manner and compliance is ensured at all times.*** The Primary Nurse Planner establishes a structured orientation process to educate all newly qualified Nurse Planners on the accreditation criteria they are to follow in the development of the CNE activities provided by the Approved Provider Unit. The Primary Nurse Planner may keep Nurse Planners in the Approved Provider Unit current with ANCC/Midwest MSD Accreditation criteria in multiple ways including but not limited to: newsletters outlining/highlighting clarification or changes in criteria; announcements in meetings; postings on internal websites; face-to-face activities, webinars or other e-learning methods, and through Approved Provider Unit education updates. The relevance of updates is dependent upon the frequency of changes in ANCC/Midwest MSD criteria or Nurse Planners. A full description of the methods used to keep all Nurse Planners up to date and compliant with current criteria should be included.

This is especially important as new Nurse Planners are added to the Approved Provider Unit. There needs to be a clear process in place to orient and educate new personnel to ensure all individuals functioning within the Approved Provider Unit are adhering to the ANCC/Midwest MSD Accreditation criteria. The goal is to organize, develop, and deliver consistent, high-quality educational activities, which is facilitated when everyone involved in planning educational activities are up to date and adhering to ANCC/Midwest MSD Accreditation criteria.

- If the Primary Nurse Planner is the only Nurse Planner within the Unit, a narrative and example explaining how a new Nurse Planner would be oriented and mentored if added to the Unit is necessary.

**LEADERSHIP:** The Primary Nurse Planner demonstrates leadership of the Approved Provider Unit through direction and guidance given to individuals involved in the process of assessing, planning, implementing and evaluating CNE activities in adherence to the ANCC/Midwest MSD Accreditation criteria.

**Describe** and, using an **example**, demonstrate the following:

**SC3.** How the Primary Nurse Planner provides direction and guidance to individuals involved in planning, implementing and evaluating CNE activities in compliance with ANCC/Midwest MSD Accreditation criteria.

- The Primary Nurse Planner is the backbone of the Approved Provider Unit. They provide direction, guidance and serve as a key resource for all APU personnel. The Primary Nurse Planner should have a process/plan in place for ensuring compliance with the accreditation guidelines in all activities provided by the Unit as well as a process for providing support to all APU personnel.
- What is the APU's process for ensuring that programs are planned in line with criteria—orientation of personnel, activity file audits, meeting discussions? What kind of follow-up do you do? How do you as PNP provide guidance and direction to other nurse planners? If you are an APU of one NP, how do you keep up to date and get feedback?
- The Primary Nurse Planner ensures that a qualified Nurse Planner provides oversight and is an active participant in the planning, implementation and evaluation process for each CNE activity provided. When planning educational activities, the Nurse Planner is responsible for adherence to ANCC/ Midwest MSD Accreditation criteria as well as sharing/educating other planning committee members and presenters/faculty/authors to the criteria.
- The Primary Nurse Planner should have a process in place to determine whether the Nurse Planner(s) are adhering to the ANCC/Midwest MSD Accreditation criteria throughout the planning process. They are responsible for monitoring and evaluating the performance of each Nurse Planner and other key personnel to ensure accuracy and adherence to the ANCC/Midwest MSD Accreditation criteria. Monitoring and evaluation can be accomplished in several ways including but not limited to: conducting audits of Nurse Planner's educational activity documentation; submission of an exemplar from a Nurse Planner of an education activity; observation of the education activity planning process, development, implementation and evaluation, etc.

## **APPROVED PROVIDER CRITERION 2: Educational Design Process (EDP)**

The Approved Provider Unit has a clearly defined process for assessing educational needs as the basis for planning, implementing, and evaluating CNE. CNE activities are designed, planned, implemented, and evaluated in accordance with adult learning principles, professional education standards, and ethics.

Examples for the narrative component of the Provider Application (EDP 1-7) may be chosen from, but are not limited to, those contained in the sample activity files. Evidence must demonstrate how the Approved Provider Unit complies with each criterion by explaining the Approved Provider Unit process and giving an example of how that process was used/operationalized within the Provider Unit to meet the criterion.

➤ Each narrative must include:

- **A clear, detailed description of your provider unit's process** for addressing the criterion so it is clear to the reviewers (reviewers should understand fully how the Provider Unit operates after reading), and
- **A specific, detailed example** that illustrates how the process is operationalized within the Provider Unit to meet the criterion. Individuals involved should be identified by name, position/title (and agency, if not one of the sample programs included with the Application.) Examples should specify who, what, when, where, how and/or why.

**EFFECTIVE DESIGN PRINCIPLES:** CNE activities are developed in response to, and with consideration for, the unique educational needs of the target audience. Planning for each educational activity must include one designated Nurse Planner and one other planner. One of the planners must have appropriate subject matter expertise for the educational activity. The educational design process incorporates identified gap(s), measurable learning outcomes, best available evidence, and appropriate learner engagement strategies. A clearly defined method that includes learner input is used to evaluate the effectiveness of each educational activity. Results from the activity evaluation are used to guide future activities.

**Describe** and, using an **example**, demonstrate the following:

**EDP1.** The process used to identify a problem in practice or an opportunity for improvement (professional practice gap).

- The Nurse Planner must have a process in place to identify the gap(s) in knowledge, skills, and/or practice e.g. where learners currently are and where they need to be. Activities to address the gap should help improve nursing practice and professional development.
- How does the Nurse Planner determine the gap in knowledge, skills, practice, or attitudes? How does the Nurse Planner know what nurses know/do now versus what you want them to know/do? Identifying the gap(s) will help make decisions about the educational activity and help to determine the learning outcomes.
- What is the problem in practice (gap)? Is there a concern that registered nurses are practicing in one way, when evidence suggests they should be practicing in a different way? Were new guidelines or regulations issued that nurses might not be aware of but should be? Is there an issue with a patient or client group that needs to be evaluated such as increased infection rates or poor certification passing rates? Answers to these types of questions lay the ground work for conducting a gap analysis and needs assessment of the target audience.
- This criterion is addressing identification of gaps, not needs assessment. EDP2 will address how needs assessment validates the identified gap(s).

**Describe** and, using an **example**, demonstrate the following:

**EDP2.** How the Nurse Planner identifies the educational needs (knowledge, skills and/or practice(s)) that contribute to the professional practice gap.

Needs assessments can be conducted using a variety of methods that may include but are not limited to:

- Annual needs assessment of members or staff
- Surveying stakeholders, target audience members, subject matter experts or similar
- Requesting input from stakeholders such as learners, managers, or subject matter experts



- Reviewing quality studies and/or performance improvement activities to identify opportunities for improvement
- Reviewing evaluations of previous educational activities
- Reviewing trends in literature, law, and healthcare
- Reviewing evaluation summaries
- Requests from learners or management
- Organizational initiatives

The Approved Provider must determine the appropriate vehicle to assess the needs of their constituents. Assessment data is used to identify and validate the identified gap(s) in knowledge, skills or practice that the educational activity is designed to improve or meet.

- What is your APU's process for determining educational needs of nurses in your targeted area? Do you do surveys, meet with constituents, utilize data from scorecards or other 'hard' data, use past evaluations, or other varied ways to determine needs? The process description should include all mechanisms used to gather data regarding educational needs that contribute to professional practice gap(s), including but not limited to anecdotal data, 'hard' data from scorecards or performance improvement results, direct conversations with target audience members and/or managers, or other methods used by your Nurse Planners.
- The process description should make clear how needs assessment processes are linked to the identified gaps in knowledge, skills and/or practice. Show how gap analysis and needs assessment combine to provide the framework for developing learning outcomes and planning educational activities.
- Share an example of how you determined the need that contributed to the professional practice gap identified for one of your programs, such as one of your sample activity files.

**Describe** and, using an **example**, demonstrate the following:

**EDP3.** The process used to identify and resolve all conflicts of interest for all individuals in a position to control educational content.

- This criterion is focused on the process for identifying and resolving conflicts of interest for all members of the Planning Committee, presenters, faculty, authors and content reviewers. Providers will outline their process for both identification and resolution of conflicts of interest within the same criterion. Providers will also give an example of how this process was used.
- Identification: The Nurse Planner is responsible for ensuring that all individuals who have the ability to control or influence the content of an educational activity disclose all relevant relationships with any commercial interest, including but not limited to members of the Planning Committee, presenters/faculty/authors, and/or content reviewers. Relevant relationships must be disclosed to the learners during the time when the relationship is in effect and for 12 months afterward. Conflict of interest forms shall be obtained from all activity planners and presenters/faculty/authors to identify the presence or absence of any potentially biasing relationship of a financial, professional, or personal nature on the part of those who have an impact on the content of an educational activity. Planners and presenters/faculty/authors must disclose the presence or absence of conflict of interest relative to each activity. Any information disclosed must be shared with participants/learners prior to the start of the educational activity.
- Resolution: The Nurse Planner is also responsible for evaluating the presence or absence of conflicts of interest and resolving any identified actual or potential conflicts of interest during the planning and implementation phases of an educational activity. The Nurse Planner is responsible for evaluating whether any relationship with a commercial interest is considered relevant to the content of the educational activity. All potential conflicts must be resolved prior to the planning, implementation, or evaluation of the continuing education activity. The Approved Provider must describe the process used to resolve any actual or potential conflicts of interest identified during the planning of the activity.
- Actions taken to resolve conflicts of interest must demonstrate resolution of the identified conflicts of



interest prior to presenting/providing the educational activity to learners. Such actions must be documented and the documentation must demonstrate (1) the identified conflict and (2) how the conflict was resolved.

- In the example, focus on how the Unit identifies actual or potential conflicts of interest as well as the process for resolution of an actual or potential conflict of interest. Provide an example of a situation where a relationship was identified, resolution was necessary and how it was managed. If your Provider Unit has not experienced an actual or potential conflict of interest, describe the process used for one of your sample activities to determine that there was no conflict of interest to resolve or disclose.
- Refer to the Midwest MSD website for the Planner/Faculty Conflict of Interest form.

**Describe** and, using an **example**, demonstrate the following:

**EDP4.** How the content of the educational activity is developed based on best-available, current evidence to foster achievement of desired outcomes (e.g., clinical guidelines, peer-reviewed journals, experts in the field, etc.).

- The Approved Provider must describe how they ensure the content delivered at their educational activities is chosen based on the best-available current evidence. Documentation should address how they are ensuring that the information presented is not outdated and validating that the faculty is using the best-available, current evidence. Some Approved Provider Units identify a content reviewer responsible for evaluating the content to ensure that the information being presented is current and/or not biased. Others document the quality of the evidence chosen through evidence-based practice, literature/peer-reviewed journals, clinical guidelines, best practices, and content experts/expert opinion. Approved Providers must also have a process in place to determine if the faculty/authors have the necessary qualifications to address the topic being presented.
- What is your process for determining content for your activities? How do you validate that content is best-available current evidence? Do your planning committees check or spot-check references/resources provided by speakers to determine if they are current and valid? How do you ensure that faculty are qualified to present on the topic or that content reviewers are competent to judge best-available current evidence? Share a specific example after providing a description of the process.

**Describe** and, using an **example**, demonstrate the following:

**EDP5.** How strategies to promote learning and actively engage learners are incorporated into educational activities.

- The Approved Provider must describe how strategies to promote learning were determined. The methods and materials to be used by presenters/faculty/authors to cover content are identified, congruent with the learning outcomes and appropriate to the purpose, target audience, and overall design of the learning activity. Instructional methods that support attainment of the learning outcomes should be used. The action indicated as the expected outcome determines the teaching methods to be used. For example, an outcome measure that requires the learner to successfully demonstrate a psychomotor skill should include teaching strategies that utilize demonstration and return demonstration. Principles of adult learning should be evident in the process description of how selected engagement strategies are chosen.
- How does your Approved Provider Unit assure congruence of needs assessment, gap analysis, learning outcomes, content, engagement strategies and teaching methods? How are adult learning principles considered in planning teaching methods? How are engagement strategies chosen? Give a specific example from one of your sample activities to demonstrate how strategies to promote learning and engage participants were selected.

**Describe** and, using an **example**, demonstrate the following:

**EDP6.** How summative evaluation data for an educational activity were used to guide future activities.

- The Approved Provider must have a clearly defined method of evaluating the effectiveness of each educational activity provided, that includes learner input. Evaluation methods may include both short- and long-term methods and is often strongly tied to the identified learning outcomes. Regardless of the method chosen to evaluate the activity, a summative evaluation is developed as part of the activity file. The Nurse



Planner and/or Planning Committee review the evaluation summary to assess the activity's effectiveness and identify how results may be used to guide future educational activities.

- The evaluation process helps determine the effectiveness of the educational activity, including the teaching methodology and the value of the activity to the participant. In the continuing education activity, evaluation is important since it can help to validate that learning has taken place. Besides assessing the effectiveness of the offering, evaluation can point out areas for corrective action or provide suggestions for future educational activities. For Approved Providers, evaluation of individual activities is an important part of the Approved Provider evaluation plan.
- What is your APU's process for collecting and summarizing data from your activities so they can be used for future program planning? Give a detailed, specific example of how data from one activity was collected and used to improve, enhance or reformat another activity.

**Describe** and, using an **example**, demonstrate the following:

**EDP7.** How the Nurse Planner measures change in knowledge, skill and/or practices of the target audience that is expected to occur as a result of participating in the educational activity.

- The Approved Provider must demonstrate how learning outcomes are developed by the planning committee, how those outcomes are measured, and how well the identified learning gap(s) were closed as a result of educational activities. The APU should have a process in place to align outcome measures with appropriate evaluation tools or other post-activity strategies that help to determine whether the educational activity had the desired result. All methods used by the APU to measure changes should be included in the process description. It is highly recommended that methods other than self-reporting be utilized regularly.
- How do your outcome measure methods relate to your activity's desired outcome? Do your planners utilize Miller's pyramid to develop outcome measures that give you meaningful results? What measures have been successful? Give a detailed example.

### **APPROVED PROVIDER CRITERION 3: Quality Outcomes (QO)**

The Approved Provider Unit engages in an ongoing evaluation process to analyze its overall effectiveness in fulfilling its goals and operational requirements to provide quality CNE. Evidence must demonstrate how the Approved Provider Unit complies with each criterion by explaining the Approved Provider Unit process and giving an example of how that process was used/operationalized within the Provider Unit to meet the criterion.

➤ Each narrative must include:

- **A clear, detailed description of your provider unit's process** for addressing the criterion so it is clear to the reviewers (reviewers should understand fully how the Provider Unit operates after reading), and
- **A specific, detailed example** that illustrates how the process is operationalized within the Provider Unit to meet the criterion. Individuals involved should be identified by name, position/title (and agency, if not one of the sample programs included with the Application.) Examples should specify who, what, when, where, how and/or why.

**APPROVED PROVIDER UNIT EVALUATION PROCESS:** The Approved Provider Unit must evaluate the effectiveness of its overall functioning as an Approved Provider Unit.

**Describe** and, using an **example**, demonstrate the following:

**QO1.** The process utilized for evaluating effectiveness of the Approved Provider Unit in delivering quality CNE.

- The Approved Provider must have a mechanism/process/plan in place for evaluating the effectiveness of the Approved Provider Unit. This criterion is **not** referring to the evaluation of individual activities provided. The Approved Provider must engage in a process to analyze **their** overall effectiveness, the quality of **their** operations and **their** achievement of goals and outcomes in providing quality continuing nursing education activities. This process should be ongoing and the Unit consistently evaluated for continuous quality improvement. The plan should also reflect the participation of presenters/faculty/authors and/or content experts, Nurse Planner(s), learners, and any other key individuals involved in the CNE activities.

- A comprehensive self-evaluation process should identify **what** component is to be evaluated, **when** the evaluation is to be done, **who** is to do the evaluation, and **how** the evaluation is to be done. The process should be designed to provide evidence that operations are consistent with ANCC/Midwest MSD Accreditation program criteria, and are effective and efficient. The Approved Provider should see that the following components of the Unit are being evaluated: 1) that resources are adequate and consistent with the services of the Unit; 2) that the Unit's accomplishments are measured with respect to its stated goal(s) and purpose(s); and 3) that individual activities are evaluated according to the procedures identified by the accreditation criteria. Approved Providers should also evaluate administrative and operational procedures, identified outcomes and results, and goals for improvement. Evaluation provides a means of assessing the effectiveness of implemented decisions and points out areas where corrective action is needed. Evaluation is also a means of looking ahead to more effective activities rather than correcting unchangeable past events.
- This evaluation process helps Approved Providers make improvements to their overall operations that will ultimately have an effect on the quality of activities the Unit provides. Policies and procedures may become ineffective and require revisions, or the provider may determine it's necessary to amend the length of an activity to provide more adequate time to cover the content or modify the content to better meet the time frame. The Unit may also review the congruence between the organization's mission and goals and the specific goals of the Approved Provider Unit, the process used to develop the yearly quality outcome measures, or assessment of the hardware and software available to deliver CNE and the location of the Unit office itself or the classrooms used to deliver CNE. These areas can all be addressed within the evaluation process for the overall Approved Provider Unit.
- Describe your APU's evaluation plan, including what you evaluate, who is involved/responsible, when data are collected and how you measure effectiveness. How is the evaluation data utilized and with whom is it shared? Give an example of this process.

**VALUE/BENEFIT TO NURSING PROFESSIONAL DEVELOPMENT:** The Approved Provider Unit shall evaluate data to determine how the Approved Provider Unit, through the learning activities it has provided, has influenced the professional development of its nurse learners. An Approved Provider must also demonstrate how its structure and processes result in positive outcomes for itself and for registered nurses participating in its educational activities.

➤ **NOTE:** *New applicants should submit a list of quality outcome measures that will be collected, monitored, and evaluated for the initial six months after achieving Approved Provider status.*

**Q02.** Submit a **list** of the quality outcome measures the Approved Provider Unit collected, monitored, and evaluated over the past twelve (12) months specific to the **Approved Provider Unit**. Outcomes must be written in measurable terms.

Below is a list of suggested outcome measure topics related to the organization. Organizations may use one or more of these outcome measure topics or they may identify other topics unique to their organization.

Examples of outcome measures related to the APU include, but are not limited to:

- Cost savings for customers or for the Approved Provider Unit
- Volume of educational activities provided or participants in educational activities
- Satisfaction of staff/volunteers, learners, faculty or others
- Change of format of CNE activities to meet learner needs
- Change in operations to achieve strategic goals
- Operational improvements
- Quality/Cost measures
- Turnover/Vacancy for Approved Provider Unit staff and volunteers
- Professional development opportunities for Unit staff and volunteers

Quality outcome measures must be **specific, measurable and attainable**. Quality outcome measures should be written as a **goal statement**, including a time frame for completion/measurement (e.g. Increase the number of

cardiac-related educational activities by 5% in the next calendar year).

**Q03.** How the evaluation process for the Approved Provider Unit resulted in the development or improvement of an identified quality outcome measure. (*Reference at least one of the identified quality outcomes measures listed in your response for Q02*).

- Development of quality outcome measures for the APU as a whole should be the result of the evaluative process that has been described in Q01. Creation or revision of the Unit's quality outcome measures are based on the self-evaluation data and strive to improve the APU's processes through outcome measurement. The Approved Provider must describe their results from the Approved Provider Unit evaluation process and how those results helped them identify new or reach current identified quality outcome measures.
- The Approved Provider should reference at least one of the quality outcomes measures listed in their response for Q02.
- What was your process for determining your APU's quality outcomes and measures? What were the results of your APU's self-evaluation? Give description of process and an example.

**Describe** and, using an **example**, demonstrate the following:

**Q04.** Submit a **list** of the quality outcome measures the Approved Provider Unit collected, monitored, and evaluated over the past twelve (12) months specific to **Nursing Professional Development**. Outcomes must be written in measurable terms.

Below is a list of suggested outcome measure topics related to nursing professional development. Organizations may use one or more of these outcome measure topics or they may identify other topics unique to their organization.

Examples of outcome measures of Nursing Professional Development include, but are not limited to:

- Professional practice behaviors
- Leadership skills
- Critical thinking skills
- Nurse accountability
- Nurse competency
- High-quality care based on best-available evidence
- Improvement in nursing practice, patient outcomes or nursing care delivery

Quality outcome measures must be **specific, measurable and attainable**. Quality outcome measures should be written as a **goal statement**, including a time frame for completion/measurement (e.g. Develop a nurse preceptor educational series to launch by the end of the current calendar year.).

**Q05.** How, over the past 12 months, the Approved Provider Unit has enhanced nursing professional development (*Reference at least one of the identified quality outcomes measures listed in your response for Q04*).

- The Approved Provider must describe how they have enhanced nursing professional development through their work toward the quality outcome measures outlined in their response for Q04. What achievements and/or progress have been made and how do those achievements enhance nursing professional development?
- Describe the process your APU uses to develop and evaluate the professional development outcome and give an example of the outcome of that process.

## **APPROVED PROVIDER CRITERION 4: Sample Activities (SA)**

As a component of the educational design process and the final component of the Approved Provider Application package, the Approved Provider applicant will select and submit three (3) samples of CNE activity files in their entirety that have been planned and implemented within 12 months of the Approved Provider Application and comply with the ANCC/Midwest MSD Accreditation criteria.

**CURRENT/RENEWING PROVIDERS:** Please submit three sample activity files demonstrating adherence to the accreditation criteria in effect at the time the activity was provided. Each educational activity must be at least one contact hour (60 minutes) in length, must have been provided at least once, and must be the entire activity file (*not a portion of an activity, or one day of a three-day activity*). Sample activities must also not have been previously submitted or designed using previously developed content. Sample activities should be representative of the types of activities offered by your Approved Provider Unit. If your Unit is not able to meet the requirements please contact the Midwest MSD office.

If in the last 12 months, the:

- APU has jointly provided an educational activity, submit the activity file from such an event
- APU has awarded contact hours for an enduring activity, submit the activity file from such an event
- APU has received commercial support for an activity, submit the activity file from such an event
- Single Agency APU has formed a System Provider APU, submit sample activity files from each Single Agency APU participating in the system

**NEW APPLICANTS:** New applicants must have three activities (not jointly provided) approved by the Midwest MSD or another ANCC Accredited Approver during the twelve (12) months prior to Application submission. Each educational activity must be at least one contact hour (60 minutes) in length, must have been provided at least once, and must be the entire activity file (*not a portion of an activity, or one day of a three-day activity*). Sample activities must also not have been previously submitted or designed using previously developed content.

The activity files for these three activities must be submitted with the Provider Application package and demonstrate adherence to the accreditation criteria in effect at the time the activity was provided. Please also submit a template of a certificate that will be given to participants upon completion of the Provider Unit's educational programs once Approved Provider status has been granted. Use the following provider approval statement on your certificate template:

*(Name of your organization) is an approved provider of continuing nursing education by the Midwest Multistate Division, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.*

Please see the CNE Activity Planning Guide for assistance in documentation for the sample activities. Remember, each activity file must be submitted as a separate PDF file and it is recommended that applicants include a table of contents, providing a page number for all corresponding supporting documentation.

### **SAMPLE ACTIVITY #1**

TITLE OF ACTIVITY: \_\_\_\_\_  
ACTIVITY FORMAT:  LIVE  ENDURING  BLENDED  
DATE & LOCATION OF ACTIVITY: \_\_\_\_\_

### **SAMPLE ACTIVITY #2**

TITLE OF ACTIVITY: \_\_\_\_\_  
ACTIVITY FORMAT:  LIVE  ENDURING  BLENDED  
DATE & LOCATION OF ACTIVITY: \_\_\_\_\_

### **SAMPLE ACTIVITY #3**

TITLE OF ACTIVITY: \_\_\_\_\_  
ACTIVITY FORMAT:  LIVE  ENDURING  BLENDED  
DATE & LOCATION OF ACTIVITY: \_\_\_\_\_