



WRITING TO THE APPROVED PROVIDER APPLICATION

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 nursing continuing professional development (NCPD) and measures compliance with those standards for organizations that elect to apply for accreditation.

Using criteria developed by the ANCC's Commission on Accreditation (COA), the Midwest Multistate Division Professional Development (Midwest MSD PD) Approval Program developed applications/guidelines for the review of nursing continuing professional development activity and Approved Provider applications that meet Midwest MSD requirements.

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

This document – *Midwest MSD Writing to the Approved Provider Application* – based on the current ANCC Primary Accreditation criteria, 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 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. Note that many of the forms provided are required.

You are also encouraged to email questions to 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 package. The intent-to-apply fee is credited toward the provider application review fee for organizations that proceed with the full Provider Application package submission.

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 Accredited Approver Program Director 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 Professional Development Director at 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 NCPD activities. A provider unit may be either:



- a. A single-focused organization* devoted to offering only nursing continuing professional development;
or
- b. A distinct, separately identified unit within a complex, multi-focused organization**.

For example, the provider unit may be a nursing continuing professional development 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 nursing continuing professional development 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 nursing continuing professional development activities. The provider unit is the applicant for “Approved Provider” status.

*The single-focused organization exists for the single purpose of providing nursing continuing professional development.

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

2. HAVE A DESIGNATED PRIMARY NURSE PLANNER

The provider unit must have the services of minimally, 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 nursing continuing professional development. 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 Accredited Approver Program Director of the Midwest MSD Professional Development – Approver Unit.

3. NOT BE AN INELIGIBLE COMPANY/ORGANIZATION

An organization is **not** eligible to be an Approved Provider of nursing continuing professional development if it meets the definition of an ineligible company/organization. An ineligible company/organization is one whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. Exceptions are made for nonprofit or government organizations, non-healthcare-related companies and facilities that provide direct care services to patients. (See the Standards for Integrity and Independence in Accredited Continuing Education on the Midwest MSD website).

4. MEET THE REGION BOUNDARY RULE

Organizations that limit their marketing, promotion, or advertisement of nursing continuing professional development (NCPD) 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 market/promote/advertise 50% or more of their NCPD programs to nurses outside of their region should contact ANCC about Accredited Provider status. This includes organizations that offer primarily on-line programming that is available nationwide.

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 NCPD ACTIVITIES ANNUALLY

Organizations must plan, implement, and evaluate a minimum of five (5) nursing continuing professional development 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 application review fee, must be submitted by the assigned cycle deadline of **February 1, June 1, and October 1**.

	FEBRUARY CYCLE	JUNE CYCLE	OCTOBER CYCLE
APU Approval Expiration Date	May 31, 20XX	September 31, 20XX	January 31, 20XX
Intent to Apply Due	October 1 in previous year	February 1	June 1
Application Package Due	February 1	June 1	October 1
Final Decision	May 1 – June 1	September 1 – October 1	January 1 – February 1

The entire application package must be received by the deadline. Agencies unable to meet the deadline due to unusual or extenuating circumstances, may request a one-time extension from the Midwest MSD, which may or may not be granted. Requests for extensions must be submitted to the Midwest MSD office 30 days prior to the application deadline for consideration. Extensions will not be granted after that date. Application packages received after the deadline, without prior arrangements with the Midwest MSD, will not be accepted for that cycle. Provider approval is granted for up to 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 PDF files should be a comprehensive PDF document, labeled accordingly (Provider Application, Sample #1, etc.) and including the applicant organization name in the file name. Renewal applicants should ensure that their NARS data is up to date and include at a minimum the activities provided during the required reporting period identified based on your renewal cycle.

ELECTRONIC SUBMISSIONS: Approved Provider Application packages must be submitted electronically. When submitting electronically, applicants must submit a total of **four**, separate Adobe.pdf files in total, not to exceed 10 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 by the cycle deadlines listed above (February 1, June 1, or October 1).

Organizations may seek provider approval as a Single-Agency or System provider. If you have any questions about which provider type to choose, please contact the Midwest MSD office.

SINGLE AGENCY PROVIDER: A single agency provider may be part of a larger corporate system. However, the single organization/college/hospital is only providing nursing continuing professional development for its employees, members or to the target audience of itself or its joint providers.

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 organizations/hospitals/locations that share a common mission and/or purpose. The system is a corporation with a central administration providing services to all of the organizations/hospitals/locations 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 nursing continuing professional development program. **All organizations/hospitals/locations in system must be named in the Application. Additional components cannot be added to the system during the agency's three-year approval period.**



If multiple facilities are merging into a larger corporate structure, please contact the Midwest MSD office to discuss the process.

System Provider Review Fee: \$4,800.00*

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

- Develop a centralized structure with a staff development and/or nursing continuing professional development department responsible for ensuring adherence to the ANCC/Midwest MSD Primary Accreditation Program 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 one, designated Primary Nurse Planner to oversee the management of all nursing continuing professional development activities provided by the system.
- List the individual facilities within the system.
- Identify an appropriate number of Nurse Planners to manage the volume of NCPD activities provided within the system.
- Cultivate an educational plan that ensures all Nurse Planners in the system are oriented to, updated on and monitored for compliance with ANCC/Midwest MSD accreditation 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 with credit card 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 Accredited Approver Program Director if you have any questions about the Application deadlines or Application review fees.

* Payment of the Provider Application Review fee must be received in full before a final decision is made on the application.

COMPLETING THE APPLICATION

Approval decisions are determined on the basis of compliance with the ANCC/Midwest MSD Primary 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. The expectation is that the documentation illustrates how the Approved Provider Unit is currently functioning.

Read the entire Application and instructional guide 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 or 573.636.4623 ext. 102.



Provider Application DOs and DON'Ts	
DO utilize the current Approved Provider Application and Writing to the Approved Provider Application Guide on the Midwest MSD website . Type your narratives directly into the application form provided.	DON'T provide a one to two sentence response to any criterion. This is not a sufficient amount of evidence and will constitute a missing response.
DO provide a clear process description followed by a specific example illustrating how the criterion was implemented when indicated.	DON'T provide extraneous materials including full text articles, full PowerPoint slides, and full text organizational policies.
DO provide narrative responses that are clear, concise and comprehensive, using complete sentences in paragraph format.	DON'T provide narratives addressing more than one criterion.
DO provide data, graphs, and tables, if appropriate, to supplement narratives.	DON'T provide or reference links to external websites, attachments/ documents, facility policy/procedures or sample activity files without a corresponding narrative.
DO number all pages of the PDF file sequentially, including appendices and sample activity file documentation. The PDF file must contain a table of contents or be incorporated with PDF bookmarks to facilitate the review process.	DON'T use a bulleted format with incomplete sentences for process descriptions and/or examples.

Other things to consider as you prepare your Approved Provider Application:

- Please limit the narrative portion of your Application (OO, SC, EDP, & QO sections) to 50 typed pages. Does not include supporting documents and activity files.
- Documents must be cross-referenced, and directional references provided within the narratives. For example, if you mention the position descriptions are attached, provide their location (directional reference) within the Application in the narrative (i.e., Page 52), and ensure that the position descriptions can be found on Page 52. In addition to adding “page 52” to the narrative, you could also cross reference the position descriptions by listing the Criterion number on the position description(s) (OO2.d) to demonstrate the criterion the supporting documentation is addressing.
- Supporting documentation i.e., position descriptions for the Primary Nurse Planner and Nurse Planner(s) (if applicable) 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. Blank, sample forms are not necessary to include, but may be requested during the review process.
- The Approved Provider Application package (final submission) consists of four PDF files:
 - ✓ Approved Provider Application
 - ✓ Sample Activity #1
 - ✓ Sample Activity #2
 - ✓ Sample Activity #3
- **One (1) email containing four Adobe.pdf files** of the Approved Provider Application package (see #10) must be submitted by your assigned cycle deadline of **February 1st**, **June 1st** or **October 1st**. Submission options below:
 - **Email***: ApprovedProviders@midwestnurses.org (*not to exceed 10 MB in size)

***NOTE:** Applicants must submit a total of **four separate 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.*
- Policies and procedures of the Midwest MSD PD Approver Unit ensure confidentiality of all applications and records. One electronic copy of the Application packet is kept on file at the Midwest MSD office. Copies used by Midwest MSD Nurse Peer Reviewers during their review are deleted.



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 PD Approver Unit Accredited Approver Program Director and Nurse Peer Reviewers will audit Unit operations and nursing continuing professional development activities provided by the Unit annually for the purpose of monitoring compliance with ANCC/Midwest MSD Accreditation Program criteria.

APPROVED WITH DISTINCTION

Applications that reflect an organization that provides high-quality nursing continuing professional development as well as a demonstration of exemplary and innovative practice in the domains of structural capacity, educational design process, and quality outcomes can be approved with distinction.

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 in a Corrective Action Plan and will be responsible for paying an additional provisional review fee. The Midwest MSD PD Approver Unit will conduct additional monitoring throughout the period of approval to ensure compliance. If at any point through the Corrective Action and/or monitoring process adherence to the guidelines still cannot be demonstrated, provisional approval will be revoked for non-compliance. New and renewal applicants with a Provisional approval must demonstrate correction within 6 to 12 months from the time of notification.

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. The application review fee is non-refundable. Remediation/Corrective action is not an option with this decision to improve the outcome. If an application is not approved, the applicant may choose to submit a new application after six months, incurring an additional application review fee, 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 PD 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 the contact hour award) of the change in approval status and explaining that contact hours will not be provided for activities after the expiration date.

SUSPENSION AND REVOCATION OF APPROVAL

An organization's provider approval status may be suspended and/or revoked as a result of any of the following:

- Violation of any federal, state, or local laws or regulations that affect the organization's ability to adhere to ANCC/Midwest MSD accreditation criteria
- Failure to maintain compliance with ANCC/Midwest MSD accreditation criteria
- Midwest MSD investigation and verification of written complaints or charges by consumers or others
- Refusal to comply with a Midwest MSD investigation



- Misuse of the provider approval statement
- Misrepresentation
- Misuse of the ANCC/Midwest MSD accreditation statement
- Misuse of ANCC/Midwest MSD intellectual property, including but not limited to trademarks, trade names, and logos

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 NCPD award) of the revocation of contact hours as soon as possible, but no later than one month following notification of revocation.

Suspended or revoked organizations must immediately cease:

- Offering contact hours
- Referring to themselves in any way as approved by the Midwest MSD or ANCC
- Using the provider approval statement issued by the ANCC/Midwest MSD
- Using ANCC/Midwest MSD intellectual property, including but not limited to trademarks, trade names, logos, templates, forms, and reference materials

Suspension is not a prerequisite to revocation. At its sole discretion, the Midwest MSD may revoke approval without first suspending or placing an organization on probation.

Suspended organizations may apply for reinstatement within 120 days of the suspension date. To apply for reinstatement of approval status, the Approved Provider Unit must submit documentation demonstrating violation correction and the applicable reinstatement fee. Reinstatement may be granted if the suspended organization adequately demonstrates that it will fully adhere to the ANCC/Midwest MSD accreditation criteria. Approved Providers that have been reinstated may be required to submit progress reports to the Midwest MSD. Suspended organizations that fail to apply for reinstatement within 120 days shall have their provider approval status revoked.

VOLUNTARY TERMINATION

Approved Provider Units may voluntarily terminate their accreditation at any time. Approved Provider Units that elect to terminate accreditation must notify the Midwest MSD in writing, at least 30 days in advance.

The written notice of voluntary termination must contain the following information:

- Effective date of voluntary termination (*which must be at least 30 days after the date that appears on the written notice*)
- Reason for voluntary termination
- Transition Plan for ending services (*see Transition of Services correspondence from the Midwest MSD office*)

On or before the date on which voluntary termination is effective, the organization must cease:

- Offering contact hours
- Referring to itself in any way as an ANCC/Midwest MSD approved provider unit
- Using the ANCC/Midwest MSD accreditation statement
- Using ANCC/Midwest MSD intellectual property, including but not limited to trademarks, trade names and logos, templates, forms, and reference materials.

Approved Provider Units in good standing with the Midwest MSD that voluntarily terminate accreditation may reapply at any time. Appropriate application review fees will apply.



PROVIDER APPLICATION GUIDELINES/HELPFUL HINTS

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

- Organizational Overview (OO)
- Structural Capacity (SC)
- Educational Design Process (EDP)
- Quality Outcomes (QO)
- 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 Structural Capacity and Educational Design Process criteria, 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. For the Quality Outcomes criteria, QO1 is the process description and QO2 and QO3 are the examples. The Sample Activities section requires the submission of three sample activities held in the previous 12-month period.

Narrative process descriptions should be straightforward and concise and include minimal extraneous information. The goal should be to explain as clearly as possible how the criterion is met and operationalized within the Approved Provider Unit. An average process description narrative is between two and three paragraphs in length. Narrative process descriptions and examples should also reference data for the twelve months prior to the to the submission of the Approved Provider Application documentation. Evidence older than twelve months may be submitted sparingly for specific purposes, such as showing a long-term commitment to monitoring data, documenting trends, highlighting best practices, or illustrating continuation of long-term projects.

Examples provided should be specific, detailed and demonstrate how the Approved Provider Unit operationalizes the process described in the narrative process description.

It is required that the narratives be written by the Primary Nurse Planner in collaboration with the Nurse Planners and other Unit personnel. It may be helpful to read through each criterion first, and then go back to begin writing the narrative. It is highly recommended that applicants utilize peer-reviewed journal articles or other accreditation resources to thoroughly understand criteria components. Have someone outside your provider unit read the responses to be sure they address the criterion fully, are clear and provide an accurate picture of your Unit.

The Approved Provider Application and sample activity file documentation are integral to achieving Provider Approval. It is vital that the documents be a structured, complete representation of the hard work done by the organization. The documentation takes time and should be continuously updated as organizational goals, outcomes and structure develop.

Contact Judi Dunn the Midwest MSD Accredited Approver Program Director at ProgramDirector@midwestnurses.org or Sara Fry at the Midwest MSD office at sara@midwestnurses.org if you have questions.

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 and its unique processes to ensure the ANCC criteria are utilized and maintained. The applicant must submit the following documents and/or narratives:

OO1. Executive Statement/High-Level Summary

- OO1.a Submit an **executive statement** and/or **high-level strategic summary** of the Approved Provider Unit, including but not limited to how the Provider Unit functions, the mission of the Provider Unit as it relates to its Nursing Continuing Professional Development/Continuing Nursing Education offerings, including the impact the Provider Unit has on the organization and its learners (**1000-word limit**). *System Providers: Please include details about your Provider Unit demographics i.e., listing of facilities comprising the system***



Provider Unit.

Approved Providers may be a separate, single-focused entity whose only purpose is to provide NCPD 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 NCPD. 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 nursing continuing professional development.

The documented beliefs and goals of the Approved Provider reflect the importance of professional development 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. Each Approved Provider Unit has a unique process to ensure that ANCC/Midwest MSD Primary Accreditation criteria are utilized and maintained. The description of Approved Provider Unit features should include factors that help define the Unit's scope and areas of influence or focus. If you are a System Provider, please include details about your Provider Unit demographics i.e., listing of facilities comprising the system Provider Unit.

OO2. Role Description

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 of the Approved Provider (*Organizational Overview, Structural Capacity, OO2.c Lines of Authority & Administrative Support*).

- Credentials are an important component of this list as they ensure that the Primary Nurse Planner and Nurse Planners have the necessary education to fulfill their roles.

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 professional development activities.

Staff resources should be appropriate for the size and scope of the Approved Provider. A district nurses' association providing five (5) 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, an education 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 Primary Accreditation criteria. While these 'key personnel' are a vital part of a Unit's smooth functioning, they are not documented in the application.



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

- Position Descriptions should be specific to their role as Primary Nurse Planner and as Nurse Planner 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 Planner(s), describing each position’s qualifications, authority, and responsibilities related to their position within the Provider Unit.
 - If the Approved Provider Unit does not have Nurse Planners currently, the APU should create a Nurse Planner position description in the event the APU does bring NPs onboard in the future.
- The position descriptions must reflect the qualification requirements for the Primary Nurse Planner and Nurse Planner(s) for providing nursing continuing professional development that are consistent with those of the ANCC/Midwest MSD Primary 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.
- Sample position descriptions for the Primary Nurse Planner and Nurse Planner are available on the Midwest MSD Approved Provider Forum.
- **Please note:** 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.

OO3. Data Collection and Reporting

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

OO3.a Submit details for all NCPD offerings provided in the past 12 months (see required date ranges below), including, at a minimum: activity dates; activity titles; target audience; total number of nurses who successfully completed each activity; 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).

- The twelve-month period is different depending on the timing of the Approved Provider’s Application. For example:
 - February 2023 applicants: January 1, 2022 –January 1, 2023
 - June 2023 applicants: May 1, 2022 – May 1, 2023
 - October 2023 applicants: September 1, 2022 – September 1, 2023
- **New applicants:** Submit a list of the NCPD offerings provided within the past 12 months; a minimum of three activities are required to meet the eligibility requirements to submit a provider application. Indicate whether the three sample activities were individually approved by the Midwest MSD or another ANCC Accredited Approver Unit. This listing should include the title of the activity, the date(s) provided, and an indication of the approving body.
- **Renewal applicants:** Applicants enter the activity data for the required reporting period into the NARS Annual Reporting System and indicate as such in the provider application.

STRUCTURAL CAPACITY (SC)

The Structural Capacity portion of the Approved Provider application focuses on the **Commitment, Accountability** and **Leadership** of the Approved Provider Unit. The narratives and examples should demonstrate the Primary Nurse Planner’s commitment to, identification of, and responsiveness to learner needs; continual engagement in improving outcomes, accountability for ensuring Nurse Planners are oriented and trained, and leadership of the Approved Provider Unit



throughout the development of nursing continuing professional development.

➤ 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's) commitment to learner needs, including how Approved Provider Unit processes are revised based on aggregate data, which may include but is not limited to individual educational activity evaluation results, stakeholder feedback (staff, volunteers), and learner/customer feedback.

- This criterion relates to the overall functioning of the Approved Provider Unit and how the Primary Nurse Planner uses aggregate data to make changes to the infrastructure of the Approved Provider Unit to better meet learner needs, 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.

Questions to consider:

- ✓ Where and how does the Primary Nurse Planner and the Approved Provider Unit obtain feedback from learners and other stakeholders?
 - ✓ What data does the Primary Nurse Planner and the APU use to learn about their learner needs related to the process of NCPD delivery (i.e., format, types of programs, registration, timing, evaluation methods, etc.)?
 - ✓ How has the Primary Nurse Planner made changes to the APU processes based on learner and/or stakeholder feedback?
- Providers should outline their process for examining and evaluating their overall Unit goals. Examples might include offering day-long activities away from the work facility based on data from a needs assessment or offering more NCPD 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.

➤ **NOTE:** Aggregate data involves combining data from multiple evaluations or data sources. Therefore, the process and example for this criterion should not be related to one individual activity but the combination of multiple individual activity evaluations or multiple feedback sources.

ACCOUNTABILITY: The Primary Nurse Planner is accountable for ensuring that all Nurse Planners 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 and trained to implement and adhere to the ANCC/Midwest MSD Accreditation criteria.

- Describe in detail 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; participation in an annual Approved Provider Training; or consulting with the Accredited Approver Program Director 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 nursing continuing professional development activity provided.
- ***A critical step in meeting this criterion is 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 NCPD 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.

- The Primary Nurse Planner is 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 Program criteria. Include in your narrative a description of how you as the PNP conduct regular audits or reviews of in-progress activity documentation and/or completed activity files. This is a vital function of the PNP to ensure that errors and omissions are noted, corrected where possible, and discussed with the Nurse Planner for that activity so that they do not recur, including any remediation methods used.
- 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.

➤ **NOTE:** If the Approved Provider Unit does not have additional Nurse Planners, the Provider Unit should still provide a narrative related to this criterion that highlights how the Unit would orient, monitor, and update a new Nurse Planner or how the Unit trained the Primary Nurse Planner to the organization and ensures continued adherence to criteria.

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 NCPD activities in adherence to the ANCC/Midwest MSD Accreditation criteria.

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

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

- The Primary Nurse Planner is the backbone of the Approved Provider Unit. The PNP provides direction and guidance and serves 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.
- The Nurse Planner(s) has/have a valuable and critical role within the Approved Provider Unit. The Primary Nurse Planner may not always be directly involved in the activity planning, implementation, and evaluation processes for every activity. Therefore, addressing the Nurse Planner's involvement in providing direction and guidance in this criterion clarifies and emphasizes the focus is on providing guidance and direction to others, of which the NP does routinely. Guidance provided by the Nurse Planner may be independent of, or in tandem with, the Primary Nurse Planner.
- 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?
- Nurse Planners are not the only individuals involved in planning, implementing, and evaluating NCPD activities. Be sure to include other stakeholders in the process description, such as non-Unit planning committee members, presenters and any others involved in the process. How do you as the PNP provide guidance to these stakeholders?
- 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 NCPD 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.

EDUCATIONAL DESIGN PROCESS (EDP)

The Educational Design Process portion of the Approved Provider application focuses on the assessment, planning, design, and evaluation of NCPD activities. NCPD activities are designed, planned, implemented, and evaluated in accordance with adult learning principles, professional education standards, and ethics. The narratives and examples should demonstrate how the Approved Provider Unit assesses learners' needs, plans an educational activity that is free of any conflict of interest, incorporates best available evidence, and effectively evaluates and modifies activities based on learner feedback.

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.

ASSESSMENT OF LEARNING NEEDS: NCPD activities are developed in response to, and with consideration for, the unique educational needs of the target audience.

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 Approved Provider must determine the appropriate vehicle(s) to assess the needs of their target audience nurses. Identifying problems in practice or opportunities for improvements in nursing practice may be conducted in a variety of ways, including but 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

Some things to consider:

- What is your APU's process for determining educational needs of nurses in your targeted area? Do you conduct 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.
- What is the problem in practice? 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 groundwork for conducting a gap analysis of the target audience.
- The process description should not simply provide a list of methods/evidence/resources used to identify a problem. Then describe how problems identified through these resources are validated, prioritized, and determined to be an area that could be addressed through educational intervention.
- The process description **should not include information about the gap analysis process** used by your Unit to validate identified problems in practice. That will be addressed in criterion EDP2.
- Share an example of how you determined the problem in practice or opportunity for improvement that included a 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:

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

- The Approved Provider must have a process in place to analyze and identify the gap(s) in knowledge, skills, and/or practice e.g., where learners currently are and where they need to be. This ensures that subsequent activity design is appropriate to address learner needs and close the identified gap. Activities to address the gap should help improve nursing practice and professional development.
- How is the gap analysis process conducted in the APU? 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.
- Determining the underlying educational need is a strategic analysis completed by the Nurse Planner and other key stakeholders to determine the root cause of the professional practice gap and ensure that the focus of the educational activity meets the underlying need.
- This criterion is addressing the gap analysis process, not needs assessment, which was covered in EDP1.

PLANNING: Planning for each educational activity must include, at a minimum, one Nurse Planner and one other planner. One of the planners must have appropriate subject matter expertise for the educational activity. Planning for each educational activity must be independent from the influence of ineligible companies/organizations.

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

EDP3. How the Nurse Planner identifies, and 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 learning 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.
- The Nurse Planner should identify evaluation methods that are consistent with the professional practice gap, the underlying educational need, and learning outcomes. The process description should explain how these decisions are made.
- How do your learning outcome measure methods relate to your activity's desired outcome? Do your planners utilize Miller's pyramid or other methods to develop outcome measures that give you meaningful results? What measures have been successful? Give a detailed example.

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

EDP4. The process for identification, mitigation and disclosure of relevant financial relationships of all individuals who control the content of the continuing education activity (planning committee, presenters, authors, and content reviewers).

- The purpose of EDP4 is to ensure that educational activities are developed independent of control, influence, and bias by "ineligible companies" as defined in the Standards for Integrity and Independent in Accredited Continuing Education.
- This criterion is focused on the process for identifying and mitigating 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 mitigation 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 ineligible company/organization, including but not limited to members of the planning committee, presenters/faculty/ authors, and/or Content Reviewers. Relevant financial relationships must be disclosed to the learners during the time when the relationship is in effect and for 24 months afterward. AP Financial Relationship Reporting Forms shall be obtained from activity planners and presenters/faculty/authors when indicated by activity content that could be influenced by ineligible companies/organizations. The reporting forms will serve 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 relationships with ineligible companies/organizations for each activity with clinical content. Any information disclosed must be shared with participants/learners prior to the start of the educational activity.
- **Mitigation:** The Nurse Planner is also responsible for evaluating the presence or absence of conflicts of interest and mitigating 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 an ineligible company/organization is considered relevant to the content of the educational activity. All potential conflicts must be mitigated prior to the planning, implementation, or evaluation of the nursing professional development activity. The Approved Provider must describe the process used to mitigate any actual or potential conflicts of interest identified during the planning of the activity. All potential mitigation methods considered by your Approved Provider Unit must be identified and how the appropriate method is chosen should be part of the process description.
- Actions taken to mitigate conflicts of interest must demonstrate mitigation 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 mitigated.
- In the example, focus on how the Unit identifies actual or potential conflicts of interest as well as the process for mitigation of an actual or potential relevant financial relationships. Provide an example of a situation where a relationship was identified, mitigation was necessary and how it was managed. If your Provider Unit has not experienced an actual or potential relevant financial relationship, describe the process used for one of your sample activities to determine that there was no relevant financial relationship to mitigate or disclose.
- **Disclosure:** The Nurse Planner is responsible for ensuring that appropriate disclosures are provided to learners prior to the start of the educational activity. The Approved Provider must describe the process used by the Nurse Planner to determine how and when relevant financial relationships are disclosed.
- Refer to the Midwest MSD website for the Approved Provider Financial Relationship Reporting Form – Parts 1 and 2.

➤ **TIP:** It is critical that the Primary Nurse Planner and Nurse Planner(s) understand the definition of financial relationships, ineligible company/organization, commercial support and bias, and also that they review and familiarize themselves with the Standards for Integrity and Independence in Accredited Continuing Education.

EFFECTIVE DESIGN PRINCIPLES: The educational design process incorporates identified gap(s), measurable learning outcomes, best available evidence, and appropriate learner engagement strategies.

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

EDP5. How the content of the educational activity is developed based on best-available, current evidence (e.g., clinical guidelines, peer-reviewed journals, experts in the field) to foster achievement of desired outcomes.

- 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? What is the process if references are not cited fully, are outdated, or if the speaker fails to submit them? 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.

➤ **NOTE:** Although the educational design criterion does not define a time frame associated with best available current evidence the continuing education industry standard is within 5-7 years except for seminal work that remains credible and relevant.

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

EDP6. How strategies to promote learning and actively engage learners are incorporated into educational activities.

- Learner engagement strategies are developed to keep learners involved in an educational activity in order to facilitate achievement of the desired learning outcomes. 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? The reasoning behind the choices of learner engagement strategies should be included. Give a specific example from any of your activities from the last 12 months to demonstrate how strategies to promote learning and engage participants were selected.

EVALUATION: 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:

EDP7. How the summative evaluation data for an educational activity are used to analyze the outcomes of that activity and guide future activities.

- The Approved Provider must have clearly defined methods of evaluating the effectiveness of each educational activity provided. Evaluation methods may include both short- and long-term methods and in some fashion must evaluate and document if the identified learning outcomes were or were not met, utilizing learner input. 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 if the learning outcome(s) were achieved and 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 nursing continuing professional development activity, evaluation is important since it should 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. Include information on how the planning committee and Nurse Planner determine the best evaluation method for any given activity, among all of the options available. Remember that standard templates used for all activities are now discouraged.
- The summative evaluation is an aggregate of the evaluation data that the PNP/NP should analyze to determine if the learning outcomes identified were achieved. This analysis should be documented on the NCPD Activity Planning Guide for each activity. The raw survey/evaluation summary alone is not sufficient. Who creates it? To whom is it distributed?
- 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.

QUALITY OUTCOMES (QO)

The Approved Provider Unit engages in an ongoing self-evaluation process to analyze its overall effectiveness in fulfilling its goals and operational requirements to provide quality NCPD. Analysis of structure, processes, and outcomes to continually improve quality of educational activities is a part of ongoing performance improvement that will contribute to the strategic goals of the organization under which the Approved Provider Unit operates.

- In the Quality Outcomes section, QO1 is the process description and QO2 and QO3 are the examples.
- 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. The Approved Provider Unit must also demonstrate how its structure and processes result in positive outcomes for itself and for registered nurses participating in its educational activities.

QO1. The process utilized for evaluating the overall effectiveness of the Approved Provider Unit in carrying out its work as a provider of nursing continuing professional development.

- 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 nursing continuing professional development 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 NCPD 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 develop Quality Outcome Measures to 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 NCPD and the location of the Unit office itself or the classrooms used to deliver NCPD. 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? Note that results of the most current self-evaluation plan are not required, as you will provide that in criterion QO2b.

QO2. Approved Provider Unit Quality Outcomes

QO2.a Identify at least one of the quality outcomes the Approved Provider Unit has established and worked to achieve over the past twelve months to improve [Provider Unit operations](#), including the metrics used to measure success in achieving that outcome.

- The Approved Provider Unit should submit at least one of the Quality Outcomes they developed and worked to achieve over the past twelve months to improve their Unit operations and not to a specific educational activity.
- The Approved Provider Unit should identify the metrics used to determine if they have been successful in achieving that outcome.
- The outcome should be created in alignment with the Provider Unit strategic goals and should be thoughtful and impactful to the Provider Unit.

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 NCPD 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

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% by December 31, 2023).



QO2.b Using the quality outcome identified in QO2.a, explain how the most recent Approved Provider Unit self-evaluation process, described in QO1, resulted in the development and/or improvement of the identified outcome for Provider Unit operations, including how that outcome was measured and analyzed.

- Development of Quality Outcome Measures for the APU as a whole should be the result of the evaluative process that has been described in QO1. Creation or revision of the Unit's Quality Outcome Measures should be based on the self-evaluation data and strive to improve the APU's processes through outcome measurement. What was your process for determining your APU's Quality Outcomes and measures? 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 describe how the outcome identified in QO2.a was determined through the Approved Provider Unit self-evaluation process.
- The Approved Provider should also describe how the outcome identified in QO2.a was measured and analyzed. Include details about the results of those measures and the extent to which your QOM was met, partially met, or not met.

➤ **NOTE:** It is not a requirement that the Provider Unit meet its established outcome. If the Approved Provider Unit does not meet the outcome, a discussion around how it will adjust to meet the outcome or adjust the outcome in the future should be included.

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.

QO3. Professional Development Quality Outcomes

QO3.a Identify at least one of the quality outcomes the Approved Provider Unit has established and worked to achieve over the past twelve months to improve the professional development of nurses, including the metrics used to measure success in achieving that outcome.

- The 2016, 3rd edition of the Nursing Professional Development: Scope and Standards of Practice revised the complex factors that influence current and future trends in nursing practice. Taking into account that nursing over time has expanded roles to include practice transitions, managing change, championing scientific inquiry, and collaborating interprofessionally (Harper & Maloney, 2016, p.7), nurses may and/or may not have the skills necessary to move their careers forward.
- The expectation is that an Approved Provider Unit works toward improving the professional development of nurses. An APU is able to demonstrate that they have provided guidance and/or educational programming to assist nurses in gaining or improving their professional development.
- The Approved Provider Unit should submit at least one of the quality outcomes they developed and worked to achieve over the past twelve months to improve the professional development of nurses. This outcome should be about the Provider Unit's impact on the **people** and not about operational changes.
- The Approved Provider Unit should identify the metrics used to determine if they have been successful in achieving that outcome.

Below is a list of suggested outcome measure topics related to the professional development of nurses. 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 professional development of nurses include, but are not limited to:

- Change management
- Collaboration
- Resource utilization



- Mentoring/advancing the profession
- 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.).

QO3.b Using the quality outcome identified in QO3.a, explain how the most recent Approved Provider Unit self-evaluation process, described in QO1, resulted in the development and/or improvement of the identified outcome to improve the professional development of nurses, including how that outcome was measured and analyzed.

- Similar to QO2b, this narrative should include a discussion of why the organization identified this quality outcome and discuss the strategies used to achieve this goal.
- The Approved Provider should also describe how the outcome identified in QO3.a was measured and analyzed. Include details about the results of those measures and the extent to which your QOM was met, partially met, or not met.

SAMPLE ACTIVITIES (SA)

As a component of the educational design process and final component of the Approved Provider Application package, the Approved Provider applicant will select and submit three (3) samples of NCPD activity files in their entirety that have been **planned** within 12-18 months of the Approved Provider Application submission date, **implemented and evaluated** within 12 months and comply with the ANCC/Midwest MSD Primary Accreditation criteria.

Sample Activity File Submission DOs and DON'Ts	
DO select educational activities provided near the end of the required reporting period to demonstrate adherence to current criteria/guidelines.	DON'T submit repeat or enduring material activities that were planned using out-of-date criteria/forms.
DO utilize the version of the NCPD Activity Planning Guide that was in place at the time of the planning of the activity and collate all documentation together as one PDF file for submission.	DON'T submit multiple, non-collated documents, individual Word documents rather than a PDF, or a document that is missing components for any of the sample activity files.
DO ensure consistency throughout the document – listing of contact hours, delivery format, title and date of activity, etc.	DON'T provide extraneous materials including full text articles, links to external websites or documents, especially those requiring passwords to access.
DO provide only slide(s) pertaining to required Unit disclosures to demonstrate how the disclosures were delivered to learners, if disclosure was done in a slide format.	DON'T provide the slide presentation for the entire educational activity or for each session of a multi-session educational activity.
DO provide a summative evaluation that includes an analysis of discussion on whether the desired outcome(s) was met and how the data was used to improve the current activity and/or revise Unit processes for future activities.	DON'T provide raw data, un-summarized results or individual evaluation forms from learners for the summative evaluation.
DO number all pages of the PDF file sequentially, including supporting documentation, and include a table of contents or PDF bookmarks to facilitate the review process.	DON'T provide or reference links to external websites, attachments/ documents, facility policy/procedures or sample activity files without a corresponding narrative.

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 a separate and distinct event, at least one contact hour (60 minutes) in length
- Have been planned within previous 12-18 months and implemented/evaluated at least once in the previous 12 months
- Be the entire activity file (*not a portion of an activity, or one day of a three-day activity*)
- 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 jointly provided an educational activity, submit the activity file from such an event
- APU received commercial support for an activity, submit the activity file from such an event

System Provider APUs, newly formed or existing, should submit sample activity files that are reflective of the types of activities provided across the system. Please select three activities coordinated by different Nurse Planners within the system to submit with the application.

NEW APPLICANTS: New applicants must have three activities approved by the Midwest MSD or another ANCC Accredited Approver during the twelve (12) months prior to Application submission. Each educational activity must:

- Be a separate and distinct event, at least one contact hour (60 minutes) in length
- Have been provided at least once and include summative evaluation data and participant listing/roster
- Be the entire activity file (*not a portion of an activity, or one day of a three-day activity*)
- Not have been jointly provided, 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 approved as a provider of nursing continuing professional development by the Midwest Multistate Division, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

Please see the NCPD Activity Planning Guide for assistance in documentation for the sample activities.

Each activity file must be submitted as a separate PDF and must include either a table of contents, with corresponding page numbers for supporting documentation, or bookmarks within the PDF to guide reviewers through all corresponding supporting documentation.

SAMPLE ACTIVITY #1

TITLE OF ACTIVITY: _____

ACTIVITY FORMAT: **LIVE** **ENDURING** **BLENDED**

DATE OF ACTIVITY **OR** START/END DATE CONTENT AVAILABLE: _____

SAMPLE ACTIVITY #2

TITLE OF ACTIVITY: _____

ACTIVITY FORMAT: **LIVE** **ENDURING** **BLENDED**

DATE OF ACTIVITY **OR** START/END DATE CONTENT AVAILABLE: _____

SAMPLE ACTIVITY #3

TITLE OF ACTIVITY: _____

ACTIVITY FORMAT: **LIVE** **ENDURING** **BLENDED**

DATE OF ACTIVITY **OR** START/END DATE CONTENT AVAILABLE: _____

