



Continuing Education Approver Unit

April 2016

Approved Provider Unit Bulletin

Hello Approved Provider Units!

Welcome to the first edition of our new **APU Bulletin**. This edition will primarily focus on our transition to ANCC's new 2015 CNE criteria. The revisions in criteria are a result of ANCC's collaboration with both ACCME and APCE on a national level to work towards aligning all three sets of continuing education criteria.

ANCC's updated provider unit manual is now available on their website – free! You can download a copy right to your computer, or you can purchase a hard copy. While the manual contains some great information you can find valuable, please be advised that this manual is designed for accredited provider units like NCNA's provider unit. You are an approved provider. This means that the language in the manual will occasionally use slightly different terminology, i.e., the term Lead Nurse Planner vs. Primary Nurse Planner. Your APU's should use the term Primary Nurse Planner. NCNA's Provider Unit has the only Lead Nurse Planner in the state.

Transition to New Criteria:

1. We have asked all approved provider units (APUs) to initiate transition to the new criteria by April 1, 2016. All new activities planned after this date should be implemented, and evaluated according to the new criteria.
2. Activities that were developed/presented previous to April 1, 2016 and are scheduled to repeat will need to be updated to conform to the 2015 criteria prior to delivery. Required updates include: creation of a learning outcome and an evaluation designed to measure the learning outcome.

Revised Education Design Process:

1. All new activities should start with an analysis of the following question(s):

What is the problem in practice? This is your current state. It can either be learner or patient focused i.e. Vets are not receiving smoking cessation classes that have a consistent content or, Nurses providing smoking cessation classes have never received any formal training.

How do you know it is a problem? What data do you have to validate the problem? What is the reason that the problem exists?

What should the learner be doing? What type of smoking cessation classes should vets be receiving? This is your desired state. The space between the two is your gap.

It is the role of the NP and planning committee to determine if the gap is one of knowledge, skills, and/or practice, and then to design an educational activity that specifically addresses the identified gap. An easy method to determine the type of gap is asking the "5 Why's". This amounts to continuing to ask why a problem exists until you reach the root cause answer.

Gaps due to knowledge mean the learner does not know how. Gaps due to skills means the learners does not know how to do. A gap in practice means the learner is not able to show or do in practice.

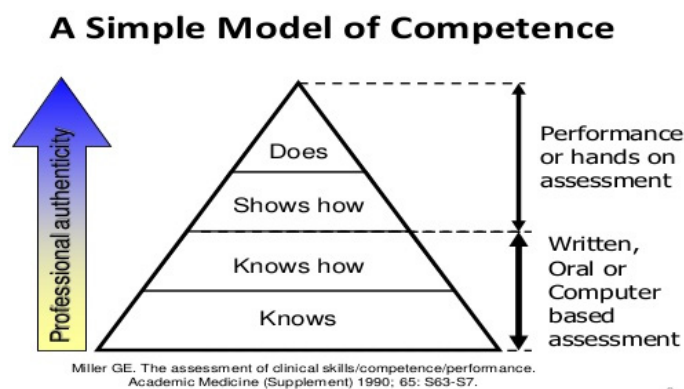
The activities learning outcome is based on the desired state. A learning outcome for the above example might be that: All nurses are knowledgeable regarding the specific content that must be included in every smoking cessation class, or All veterans taking the smoking cessation class will consistently receive the same content.

Note: We have seen many activities citing the presence of all three types of gaps. While that is certainly possible, often the education content is only knowledge related. Be sure to design education content/methods/engagement that is specific to the gap you are trying to close. Consider whether you can close this gap in the time allotment available. You might have to elevate the learner's knowledge in a stair-step fashion.

Evaluating Learning Outcomes:

1. Learning outcomes are an explicit description of what a learner should know, be able to apply and/or be able to do as a result of participating in the educational activity.
2. Miller's Model can be very helpful in determining methods of outcome evaluation. Every activity must have a short term evaluation completed and then summarized in aggregate. Long term evaluations should be considered for those activities planned to close significant learning gaps, or gaps in practice that are considered essential to the organization.

Miller's Pyramid



Evaluating work based learning

3. Your evaluation methodology should be designed to measure the intended learning outcome. We are not measuring objectives any longer. Although you may continue to use and measure objectives, you will still have to evaluate whether or not the learner changed as a result of the activity. I would suggest that each APU add a version of the following question(s) to every one of your short term evaluation tools:

"Please describe your intention to change your practice as a result of this educational activity?"
If you do not intend to change your practice, please state why.

"Please rate (must have scale) your intention to change your practice as a result of this educational activity?" If you do not intend to change your practice, please state why.

"Please describe any barriers that would prevent you from changing your practice?"

These questions will prepare you to evaluate whether the learning outcome was met, or whether further education or organizational changes might be needed in order to meet the identified outcome.

Learner Engagement:

1. Every activity planned must be designed with components that purposely engage the learner. These can include such actions such as use of small groups, role-modeling, case study discussions, audience response systems, integrating opportunities for dialogue or question/answers, including time for self-check or reflection, analyzing case studies, use of simulation, time for self reflection, or perhaps having the learner respond in writing to posed questions during activity.

Conflict of Interest:

1. Conflict of interest determination is based on the principle of independence – keeping education independent of (free of) content that has been influenced by someone with a relevant conflict of interest.
2. The potential for conflict of interest exists when an individual has the ability to control or influence the content of an educational activity **and** has a financial relationship with a *commercial interest*, the products or services of which are relevant to the content of the educational activity.
3. The American Nurses Credentialing Center (ANCC) defines an organization as having a commercial interest ("Commercial Interest Organization")* if it: produces, markets, sells or distributes health care goods or services consumed by or used on patients; is owned or operated, in whole or in part, by an organization that produces, markets, sells or distributes health care goods or services consumed by or used on patients.
4. *Relevant relationships*, as defined by ANCC, are relationships with a commercial interest if the products or services of the commercial interest are related to the content of the educational activity, i.e. a drug company representative whose company makes/sells a heart drug and he/she want to speak on content related to the heart.

5. Employees of commercial interest organizations ***are not permitted*** to serve as planners, speakers, presenters, authors and/or content reviewers if the content of the educational activity is related to the products or services of the commercial interest organization.
6. Employees of commercial interest organizations ***are permitted*** to serve as planners, speakers, presenters, authors and/or content reviewers if the content of the educational activity is NOT related to the products of the commercial interest organization.
7. It is the responsibility of the NP to evaluate whether any conflicts of interest exist for anyone who is in a position to control content of an activity. This includes presenters and planners.
8. As a NP you should determine: Who is in a position to control content? Do they have/spouse have any financial relationships with commercial interest organizations? Is this relationship relevant to the planned activity? If yes, to the last question- then that person has a conflict of interest that must be resolved prior to the activity. If no, then this person does not have a conflict of interest (thus no disclosure required).

Note: We have seen some renewal self study applications submitted where the NP documented that they would also monitor the activity for any conflicts of interest. All COI evaluation must occur before the activity, evaluation of COI during an activity is unacceptable.

Commercial Support:

1. ANCC defines commercial support as financial or in-kind contributions given by a commercial interest that are used to pay for all or part of the costs of a CNE activity.
2. Commercial support and conflict of interest have nothing to do with each other. They are separate and unrelated.
3. Providers of commercial support may not be providers or joint providers of an educational activity.
4. Revenue attained from exhibitor, vendor or advertising is not considered commercial support.
5. Commercial support is relevant when the money received is directly tied to an educational activity awarding ANCC contact hours. The commercial support entity cannot directly pay for anything related to the CNE activity, the money must be given to the CNE provider.

Terry Pope, MSN, RN
NCNA CE Consultant
ceconsultant@ncnurses.org