

ANCC NCPD ACCREDITED PROVIDER **POLICY & OPERATIONS MANUAL**

Innovate. Involve. Inspire.

NCPD Accredited Provider Policy & Operations Manual, Version 1.0, 03.07.23

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ANCC NCPD ACCREDITED PROVIDER POLICY & OPERATIONS MANUAL

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DISCLAIMER

Adhering to all of the processes within the *ANCC NCPD Accredited Provider Policy & Operations Manual* facilitates organizational accreditation but does not, in and of itself, guarantee achievement of accreditation.

NOTICE

Changes may be made to the NCPD Accreditation Program criteria and the *ANCC NCPD Accredited Provider Policy & Operations Manual*. Applicants and accredited organizations must confirm that they are using the most current edition of the *ANCC NCPD Accredited Provider Policy & Operations Manual* and other up-to-date resources to ensure that they are demonstrating adherence to the current ANCC NCPD Accreditation standards.

REFERENCE

ANCC. (2023). *ANCC NCPD accredited provider policy & operations manual*. American Nurses Credentialing Center.

EFFECTIVE DATE

Accredited organizations and applicants are to use this manual effective immediately. All other manuals and memos are to be archived.



NURSING CONTINUING
PROFESSIONAL
DEVELOPMENT

PREFACE

It is a distinct honor to offer the updated policy and operations manual for the American Nurses Credentialing Center (ANCC) Accreditation Program on behalf of ANCC and the Commission on Accreditation in Nursing Continuing Professional Development (COA-NCPD). The purpose of this policy and operations manual is to outline the current ANCC NCPD Accreditation policies and operational expectations for Accredited Providers. While the look and feel of the manual have changed, the policies, criteria, and activity file documentation requirements are not new.

The ANCC Accreditation Program supports the lifelong learning needs of professional registered nurses (RNs) by ensuring that educational activities are designed using criteria that are evidence-based and independent from commercial influence. By participating in nursing continuing professional development provided by accredited organizations, professional RNs are able to maintain continued competence in a rapidly changing healthcare environment.

The ANCC Accreditation Program is governed by a volunteer commission whose members represent expertise from across the field of continuing education, including academia, educational companies, domestic and international nursing associations, and governmental organizations. The COA-NCPD provides strategic direction for the program and confers all accreditation decisions.

This manual includes the educational design process chapter, which focuses on the structure, process, and quality outcomes that impact activity planning and the professional practice of nursing and/or patient or system outcomes.

On behalf of the COA-NCPD and the ANCC Accreditation Program staff, I thank you for being a part of this community of practice!

JENNIFER GRAEBE MSN, RN, NEA-BC
DIRECTOR, ANCC NCPD AND JOINT ACCREDITATION PROGRAMS
AMERICAN NURSES CREDENTIALING CENTER

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Writing to the ANCC NCPD Accreditation Criteria

ANCC NCPD Accredited Provider Applicant Journey Guide

Standards for Integrity and Independence in Accredited Continuing Education

CHAPTER 1

THE NCPD ACCREDITATION PROGRAM

accreditation

The voluntary process by which a nongovernmental agency or organization appraises and grants time-limited accredited status to institutions and/or programs or services that meet predetermined structure, process, and outcome criteria.



The American Nurses Credentialing Center (ANCC) Nursing Continuing Professional Development (NCPD) Accreditation Program recognizes organizations that have met established standards to provide NCPD that has a positive impact on nursing practice and/or patient outcomes. The NCPD Accreditation Program is committed to ensuring the integrity of the accreditation process through systematic, evidence-based evaluation of application materials submitted by qualified applicants for Accredited Provider status.

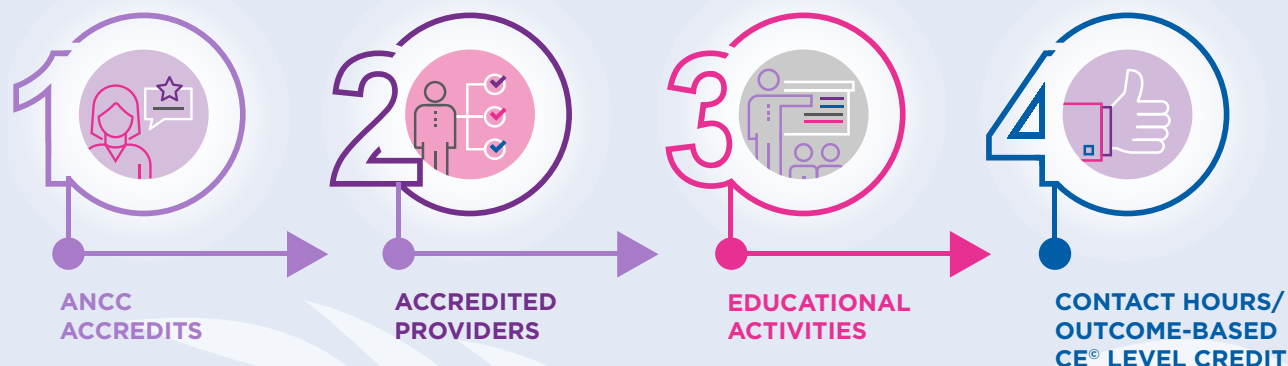
HISTORY AND STRUCTURE OF NCPD ACCREDITATION

Changes affecting nursing practice require RNs to engage in a lifelong process of active participation in professional development that fosters growth and learning. Engaging in NCPD through educational activities and intervention enhances professional practice and ultimately improves the health of the public. The American Nurses Association (ANA), the national professional association of RNs, has emphasized the importance of professional development throughout its history.

ANCC's Accreditation Program originated in 1974 when the ANA House of Delegates approved a resolution to establish an Accreditation Program for Continuing Nursing Education (CNE) (Abruzzese & Hinthorn, 1987). The first formal accreditation review occurred the following year, and by the late 1970s, a model had been instituted to accredit CNE providers (DeSilets, 1998).

Over the past 40 years, the structure of the Accreditation Program has evolved. In 1991, ANCC became a separately governed and incorporated organization, and the accreditation activities originally housed in ANA were transferred to the ANCC and the accreditation program was called ANCC Primary Accreditation. Since that time,

ANCC NCPD ACCREDITATION PROGRAM



the ANCC Commission on Accreditation, now referred to as the ANCC Commission on Accreditation in NCPD (COA-NCPD), has governed the Accreditation Program. The members of the commission have expertise in nursing continuing professional development, adult education, research, standards setting, academia, and interprofessional continuing education.

In 2010, the ANCC Accreditation Program collaborated with the Accreditation Council for Continuing Medical Education (ACCME) and the Accreditation Council for Pharmacy Education (ACPE) to develop accreditation standards that addressed continuing education for the interprofessional team and began awarding Joint Accreditation™ to recognize organizations providing interprofessional continuing education for the healthcare team.

In 2017, Cox et al. noted that continuing professional development was preferred over continuing education because it captured more active modes of learning and articulated that lifelong learning is needed for growth and development. The authors also recognized that not all health professions have a graduate-level or terminal degree component, meaning that learning is neither fixed nor time bound (Cox et al., 2017). Given this evolution in lifelong

learning, the COA-NCPD considered a program name change that signifies the growth and development of RNs throughout their career.

In 2019, the ANCC Primary Accreditation Program changed its name to the ANCC NCPD Accreditation Program to reflect the various types of educational content that are eligible for accreditation, and NCPD on a continuum. The program title change and the use of the term nursing continuing professional development (NCPD) does not negate the term continuing nursing education (CNE), which is still acceptable for use when referring to educational activities.

In July 2019, ANCC successfully introduced an alternative method to awarding CE credit using an outcome-based CE model® (OB-CE®). The model was designed to integrate a learner/team-directed educational approach that incorporates performance/quality improvement expectations into a learning experience that can positively impact nursing and healthcare team practice, patient, system, and public health outcomes and/or system outcomes.

As healthcare becomes increasingly outcome driven, the OB-CE® conceptual framework specifically addresses the level of learner engagement, expectations for assessment and

ANCC Conceptual Model for Outcome-Based CE[®] Credit

BEHAVIORS

Impact on practice, patient, and/or system outcomes

JUDGMENTAL

Integrate into practice

ATTITUDES

Demonstrate in an education setting

BELIEFS

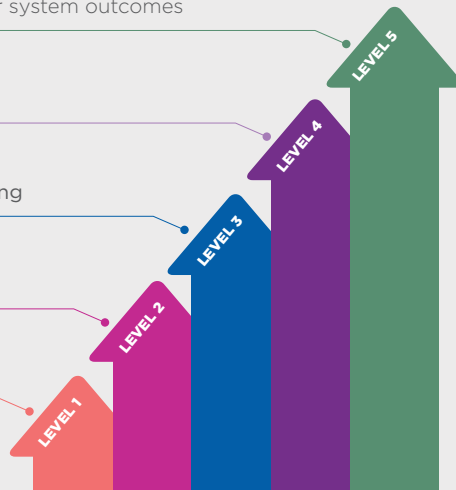
Apply knowledge and skills

VALUE

Articulate knowledge and/or skills

LEARNING ENVIRONMENT

(e.g., culture, resources, institutional, structure, systems issues)



Outcome-Based Continuing Education Model © American Nurses Credentialing Center. All rights reserved.

All ANCC Accredited Providers are eligible to fully design, implement, and evaluate educational activities utilizing the OB-CE[®] model.

Accredited Provider

An eligible organization credentialed by ANCC after having submitted to an in-depth analysis to determine its capacity to provide quality continuing education over an extended period of time.



evaluation, and the potential impact on performance beyond self-report. All ANCC Accredited Providers are eligible to fully design, implement, and evaluate educational activities utilizing the OB-CE[®] model.

In December 2020, the ANCC COA-NCPD endorsed and adopted the new interprofessional *Standards for Integrity and Independence in Accredited Continuing Education*. ANCC chose to adopt the *Standards for Integrity and Independence in Accredited Continuing Education* to foster collaboration among the healthcare professions and to continue to ensure that accredited CE reflects quality and promotes trust on a global scale (ANCC, 2020).



Today, ANCC's NCPD Accreditation Program recognizes those organizations that have met the required standards to deliver NCPD. To achieve this recognition, an eligible organization engages in a comprehensive analysis of its structure, processes, and outcomes. ISO 9001:2015 is a worldwide standard that sets requirements for a strong quality management system. ANCC is the only nursing credentialing agency to attain ISO 9001:2015 certification.



FOUNDATIONAL DOCUMENTS

A variety of core foundational documents inform the evidence-based standards for applicant organizations and Accredited Providers. These documents include the following:

FROM THE AMERICAN NURSES ASSOCIATION

American Nurses Association. (2021). *Nursing: scope and standards of practice*. Washington, DC: American Nurses Association.

American Nurses Credentialing Center's Commission on Accreditation. (2020). *The value of accreditation for nursing continuing professional development: quality education contributing to quality outcomes*. Silver Spring, MD: American Nurses Credentialing Center.

FROM TEACHING-LEARNING PRINCIPLES, EDUCATION THEORY, PEDAGOGY, AND ANDRAGOGICAL LITERATURE

Bloom, B. S., Hastings, J. T., & Madaus, G. F. (1971). *Handbook on formative and summative evaluation of student learning*. McGraw-Hill.

Committee on the Developments in the Science of Learning. (2000). *How people learn: Brain, mind, experience, and school*. National Academies Press.

Dickerson, P., & Graebe, J. (2018). Analyzing gaps to design educational interventions. *Journal of Continuing Education in Nursing* 49 (1), 4–6. <https://doi.org/10.3928/00220124-20180102-02>.

Freeth, D., Hammick, M., Reeves, I., & Barr, H. (2005). *Effective interprofessional education: Development, delivery & evaluation*. Blackwell Publishing, Ltd.

Graebe, J. (2019). Continuing professional development: Utilizing competency-based education and the American Nurses Credentialing Center outcome-based continuing education model[®]. *The Journal of Continuing Education in Nursing*, 50 (3), 100–102. <https://doi.org/10.3928/00220124-20190218-02>.

Graebe, J. (2018). Measuring change as a result of participation in educational activities. *Journal of Continuing Education in Nursing*, 49 (8), 340–243. <https://doi.org/10.3928/00220124-20180718-02>.

Harper, M. G., & Maloney, P. (Eds.). (2022). *Nursing professional development: Scope and standards of practice (4th ed.)*. Association for Nursing Professional Development.

Hodges, B. D., & Lingard, L. (Eds.). (2012). *The question of competence: Reconsidering medical education in the twenty-first century*. Cornell University Press.

Institute of Medicine. (2010). *The future of nursing: Leading change, advancing health*. National Academies Press.

Institute of Medicine. (2009). *Redesigning continuing education in the health professions*. National Academies Press.

Interprofessional Education Collaborative Expert Panel. (2011). *Core competencies for interprofessional collaborative practice: Report of an expert panel*. Interprofessional Education Collaborative.



FOUNDATIONAL DOCUMENTS CONTINUED

- Kelly, M., & Moulton, J. (2021). The role of the ANCC Accredited Provider Program director in leadership and facilitating nurse planner learning. *The Journal of Continuing Education in Nursing, 52* (6), 257-259. <https://doi.org/10.3928/00220124-20210514-02>.
- Mallory, C., Franqueiro, T., & Graebe, J. (2018). Designing educational content based on best available current evidence. *Journal of Continuing Education in Nursing, 49* (4), 148-150. <https://doi.org/10.3928/00220124-20180320-02>.
- Mlambo, M., Silén, C., & McGrath, C. (2021). Lifelong learning and nurses' continuing professional development, a metasynthesis of the literature. *BMC Nursing, 20* (1). <https://doi.org/10.1186/s12912-021-00579-2>.
- Moore, D. E., Green, J. S., & Gallis, H. A. (2009). Achieving desired results and improved outcomes: Integrating planning and assessment throughout learning activities. *Journal of Continuing Education in the Health Professions, 29* (1), 1-15.
- Moulton, J. & Dickerson, P. (2022). Implementing the standards for integrity and independence in accredited nursing continuing professional development. *The Journal of Continuing Education in Nursing, 53* (2), 52-54. <https://doi.org/10.3928/00220124-20220104-02>.
- Moulton, J., Richetti, D. A., & Dickerson, P. (2022). ANCC endorses and adopts the standards for integrity and independence in accredited continuing education. *The Journal of Continuing Education in Nursing, 53* (1), 5-7. <https://doi.org/10.3928/00220124-20211210-03>.
- Moyer, A., & Graebe, J. (2018). Identifying the underlying educational needs that contribute to the professional practice gap. *Journal of Continuing Education in Nursing, 49* (2), 52-54. <https://doi.org/10.3928/00220124-20180116-02>.
- National Academies of Sciences, Engineering, and Medicine 2021. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25982>.
- Pilcher, J., & Graebe, J. (2018). Strategies to promote learning and engage participants. *Journal of Continuing Education in Nursing, 49* (5), 197-199. <https://doi.org/10.3928/00220124-20180417-02>.
- Price, S., & Reichert, C. (2017). The importance of continuing professional development to career satisfaction and patient care: Meeting the needs of novice to mid- to late-career nurses throughout their career span. *Administrative Sciences, 7* (2), 17.
- Schumacher, C., Shinnors, J., & Graebe, J. (2018). Evaluating the effectiveness of educational activities: Part one. *Journal of Continuing Education in Nursing, 49* (6). <https://doi.org/10.3928/00220124-20180517-02>.
- Sousa, D. A. (2011). *How the brain learns (4th ed.)*. SAGE Ltd.
- World Health Organization. (2010). *Framework for action on interprofessional education & collaborative practice*. http://whqlibdoc.who.int/hq/2010/WHO_HRH_HPN_10.3_eng.pdf?ua=1.

nursing professional development

A specialized nursing practice that facilitates development and growth of nurses and other healthcare personnel along the continuum from novice to expert.



MISSION STATEMENT

In November 2021, the COA-NCPD created its first mission statement as it relates to the ANCC NCPD Accreditation Program. This mission statement was developed to align with the ANCC and ANA Enterprise mission statements.

The mission of the NCPD Accreditation Program is to advance excellence in the profession of nursing and healthcare teams through evidence-based, outcomes-driven, continuing professional development.

This mission statement underscores the guiding principles and core values of the NCPD Accreditation Program. Accredited organizations have chosen to adhere to rigorous, evidence-based standards in the conduct of their operations and the planning, implementation, and evaluation of learning activities. Quality nursing continuing professional development experiences enrich learning outcomes that support professional development and enhance ability to deliver quality care.

The ANCC NCPD Accreditation Program accredits organizations globally that demonstrate excellence in NCPD. Organizations seek NCPD accreditation because it reflects a commitment to value, excellence, and quality. The NCPD Accreditation Program uses evidence-based standards for organizations developing NCPD. Educational activities are designed to improve the knowledge, competence (skill), practice performance, and/or patient/system outcomes of RNs and the healthcare teams in which they work. To achieve accreditation as an ANCC Accredited Provider, an eligible organization must



also engage in a comprehensive analysis of its structure, processes, and performance outcomes using the NCPD Accreditation Conceptual Framework®. NCPD Accreditation for Providers recognizes national and international organizations that offer quality educational activities that meet the high standards of ANCC's accreditation criteria for NCPD. ANCC NCPD Accreditation requires that each organization have a graduate-prepared

professional RN providing leadership over the planning, implementing, and evaluating of each NCPD activity. Further, the standards require that content is designed to be outcomes-driven, based on the best available evidence, and free of bias and influence. Novakovich (2017) noted a measurable difference in how learners perceived the quality of ANCC accredited NCPD activities, citing impact to practice as a key differentiator.

A set of core values is fundamental to the ANCC NCPD Accreditation Program.



- Maintain the **integrity** of the accreditation process through a consistent, fair, and honest application of Accreditation Program criteria;
- Promote and maintain **competence** in relation to standards, criteria, and components of lifelong learning;
- Foster an effective and thorough **quality** peer-review process for all applicant organizations;
- **Mentor** organizations responsible for providing or approving NCPD to ensure the delivery of high-quality educational activities;
- Maintain a high level of **accountability** and **responsiveness** to the community of interest in the accreditation process;
- Value and encourage **innovation** in the accreditation process and in the delivery of nursing continuing professional development; and
- Promote **interprofessional** activities by entities that hold accreditations for more than one health-related profession and where nursing is a major participant.

THE NCPD ACCREDITATION CONCEPTUAL FRAMEWORK®

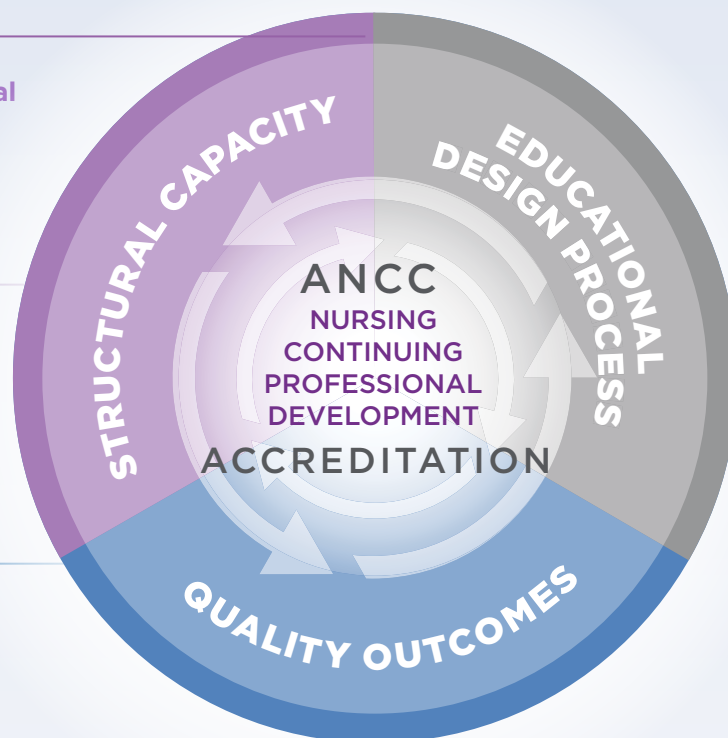
The NCPD Accreditation Conceptual Framework® is based on the quality improvement framework of Donabedian's triad (structure, process, and outcome) (Donabedian, 1966). The original Donabedian framework of structure, process, and outcome measures is a well-accepted strategy for evaluation of healthcare quality. Donabedian's work would later underscore the principles within healthcare quality performance indicators — the Quadruple Aim (formerly referred to as the Triple Aim). Although Donabedian's work focused primarily on healthcare quality in hospitals, the model is also applicable to the design, implementation, and evaluation of quality in nursing continuing professional development. The Donabedian model for accreditation is designed around the core principle that education is a contributor to the professional development of the RN. The accreditation criteria are organized by

the domains in Donabedian's framework, drawing the connection between the triad and the ANCC NCPD accreditation criteria requirements. Three criteria domains within the conceptual model address structural capacity, educational design process, and quality outcomes. These domains provide the framework within which accredited organizations design, implement, and evaluate nursing continuing professional development activities. Accredited organizations also have the accountability and responsibility for establishing and working to achieve outcomes within their educational activities. The Donabedian conceptual model for NCPD accreditation demonstrates the synergy between an organization's operational improvements and the impact of professional development that is determined by the accredited organization in relation to its overall mission and strategic plan.

Criteria within the domain of Structural Capacity (structure domain) are used to evaluate the infrastructure of an organization and its capacity to function as an Accredited Provider.

Criteria within the domain of Educational Design Process (process domain) are used to evaluate the quality of educational planning, implementation, and evaluation.

Criteria within the domain of Quality Outcomes (outcome domain) are used to evaluate the impact of NCPD on the professional practice of nursing and/or patient outcomes.



CHAPTER 2

NCPD ACCREDITATION PROGRAM POLICIES

This chapter outlines the policies for applicants and Accredited Providers, including **eligibility**, application process and requirements, accreditation decisions, appeals, terminations, annual reporting, and responsibilities of the Accredited Provider.

eligibility

An applicant's ability to meet the requirements established by ANCC as a prerequisite to evaluation for accreditation or re-accreditation in order to be considered qualified to apply for accreditation.



POLICY 1

ACCREDITED PROVIDER ELIGIBILITY REQUIREMENTS

Organizations interested in attaining accreditation must complete the Intent to Apply Application and meet all eligibility requirements. Applications received from organizations that do not meet eligibility requirements will be rejected without substantive review. For steps on how to apply, refer to the ***ANCC NCPD Accredited Provider Applicant Journey*** guide. An organization can only become an Accredited Provider if it meets the structural and operational components of the Accredited Provider as outlined below.

To be eligible to apply to become an Accredited Provider, an applicant must:

- Be one of the following:
 - ANA organizational affiliate,
 - College or university,
 - Constituent and State Nurses Association (C/SNA) of the ANA,
 - Federal Nursing Service (FNS),
 - Healthcare facility,
 - Health-related organization,
 - Multidisciplinary educational group,
 - Professional nursing education group,
 - Specialty nursing organization (SNO), or
 - National nursing association/organization.
- Be administratively and operationally responsible for coordinating the entire process of planning, implementing, and evaluating of NCPD activities in compliance with ANCC NCPD Accreditation Program criteria;
- Have the infrastructure in place to operate as an Accredited Provider;

Provider Unit

Comprises the members of an organization — also referred to as Accredited Provider — who support the delivery of nursing continuing professional development activities.



- Be in compliance with all applicable federal, state, and local laws and regulations that affect the **Provider Unit's** ability to meet ANCC NCPD Accreditation Program criteria;
- Be in compliance with ethical standards as identified in the *ANA Code of Ethics for Nurses* and ethical standards for business operations;
- Not be an ineligible company as defined in the glossary and the *Standards for Integrity and Independence in Accredited Continuing Education*;
- Be operational using ANCC NCPD Accreditation Program criteria for a minimum of 6 months prior to application; and
- Have completed, **if initial applicants**, the process of assessment, planning, implementation, and evaluation **for at least three separate educational activities** provided at separate and distinct events within the past 12 months.
 - With the direct involvement of a Nurse Planner (NP),
 - That adhere to the accreditation criteria,
 - That were each a minimum of one hour (60 minutes) in length (contact hours may or may not have been offered), and
 - That were not jointly provided.

A Provider Unit must have an **Accredited Provider Program Director (AP-PD)** who

- Is an RN with a **current, unrestricted nursing license** (or international equivalent), meaning that they have an active RN license with no practice restrictions;
- Holds a graduate degree;
- Holds a baccalaureate degree or higher in nursing (or international equivalent);
- Has authority within the Provider Unit to ensure compliance with the ANCC NCPD Accreditation Program criteria that pertain to the operations of the organization as a Provider Unit;
- Has responsibility for ensuring that the Provider Unit adheres to the ANCC NCPD Accreditation Program criteria for all operational aspects of providing nursing continuing professional development activities and criteria that pertain to the operations of the organization as a Provider Unit;
- Has responsibility for the orientation and ongoing competence of all Nurse Planners in the organization with respect to the ANCC NCPD Accreditation Program criteria;
- Has responsibility for ensuring each Nurse Planner is a registered nurse and holds a **current, unrestricted nursing license** (or international equivalent) and has a baccalaureate degree or higher in nursing (or international equivalent);
- Has responsibility for ensuring each Nurse Planner understands the ANCC NCPD Accreditation Program criteria and is responsible for adherence to all criteria in planning, implementing, and evaluating educational activities.

Accredited Provider Program Director

A registered nurse who holds a current, active license with no practice restrictions (or international equivalent) and a graduate degree, with either the baccalaureate or graduate degree in nursing (or international equivalent), who has the authority within a Provider Unit to ensure adherence to the ANCC NCPD Accreditation Program criteria in the provision of NCPD.



nursing continuing professional development (NCPD) activities

Those learning activities intended to build upon the educational and experiential bases of the professional RN for the enhancement of practice, education, administration, research, or theory development, to the end of improving the health of the public and RNs' Provider pursuit of their professional career goals and the RNs' pursuit of their professional goals.



Nurse Planner

A registered nurse who holds a current, unrestricted nursing license (or international equivalent) and a baccalaureate degree or higher in nursing (or international equivalent) who is actively involved in all aspects of planning, implementation, and evaluation of each NCPD activity. The Nurse Planner is responsible for assessing whether appropriate educational design principles are used and processes are consistent with the requirements of the ANCC NCPD Accreditation Program.



Nurse Planners

The Provider Unit may have nurses who participate in or support the delivery of NCPD. Nurses within the organization who are designated to facilitate with planning, implementing, and evaluating educational activities are defined as Nurse Planners.

A Nurse Planner must:

- Be a registered nurse who holds a **current, unrestricted nursing license** (or international equivalent); this means that they have an active RN license with no practice restrictions.
- Hold a baccalaureate degree or higher in nursing (or international equivalent).
- Be competent in applying the evidence-based educational design process to independently plan, implement, and evaluate NCPD activities for the Accredited Provider unit.

AP-PD and Nurse Planner Eligibility Requirements for International Applicants and Accredited Organizations

Applicants outside of the US for the ANCC NCPD Accreditation Program must demonstrate that the Accredited Provider Program Director and Nurse Planner(s) (if any) meet eligibility requirements for academic preparation and licensure (or international equivalent).

If the baccalaureate degree (or higher) in nursing was obtained outside the United States, the Accredited Provider Program Director and Nurse Planner(s) (if any) do not need to have the degree evaluated for comparability to US degree requirements.

If the Accredited Provider Program Director and Nurse Planner(s) (if any) are educated outside the United States and do not hold a baccalaureate (or higher) nursing degree, they must have their credentials evaluated for comparability to US degree standards through the Commission on Graduates of Foreign Nursing Schools (CGFNS).

ANCC will not accept verification documents from other credential evaluating organizations.

POLICY 2

ACCREDITED PROVIDER STRUCTURE AND RESPONSIBILITIES

The Accredited Provider, also referred to as the Provider Unit (PU), is defined structurally and operationally as the members of the organization who support the delivery of nursing continuing professional development activities. The Accredited Provider may be a single-focused organization devoted to offering nursing continuing professional development activities or a separately identified unit within a larger organization. If the Accredited Provider is within a larger organization, the larger organization is defined as a multifocused organization (MFO). It is important to note that the applicant is the organization applying to become accredited.

The responsibilities of an Accredited Provider include:

- Planning, implementing, and evaluating educational activities in adherence to accreditation criteria and awarding contact hours to support professional development.
- Ensuring that all accredited educational activities are planned, implemented, and evaluated with the involvement of a Nurse Planner and Content Expert.
 - Accredited Providers may not approve educational activities that have been planned by other organizations.
 - Accredited Providers may jointly provide educational activities with other eligible organizations.

POLICY 3

LEGAL AND REGULATORY COMPLIANCE

Applicant and accredited organizations must comply with all international, federal, state, and local laws and regulations that affect the ability of an organization to meet ANCC NCPD Accreditation Program criteria.

- Violations of such laws or regulations render an organization ineligible for accreditation or to reapply to maintain accreditation.
- Accreditation may be suspended or revoked if an accredited organization is found to be in violation of such laws or regulations.

POLICY 4 NCPD ACCREDITATION APPLICATION

Once the ANCC NCPD Accreditation Program Office verifies eligibility and confirms accreditation cycle date, the applicant may proceed with the application process (see table below). Organizations are responsible for meeting the application requirements, including application fees. Applicants will be invoiced by ANCC, and fees must be paid in full within thirty (30) days of receipt of the invoice. Accreditation decisions and accreditation status may be withheld, suspended, and/or revoked for any outstanding invoices.

ACCREDITATION CYCLE TIMELINE

	MARCH CYCLE	JULY CYCLE	NOVEMBER CYCLE
APPLICATION DUE	NOVEMBER 1	MARCH 1	JULY 1
SELF-STUDY DUE	MARCH 1	JULY 1	NOVEMBER 1
VIRTUAL VISIT	MARCH 15–JUNE 15	JULY 15–OCTOBER 15	NOVEMBER 15–FEBRUARY 15
FINAL DECISION	JUNE 1–SEPTEMBER 1	OCTOBER 1–JANUARY 1	FEBRUARY 1–MAY 1

POLICY 5 INSUFFICIENT DOCUMENTATION SUBMISSION

Each self-study and activity file submission will go through a quantitative and qualitative review process with the ANCC NCPD Accreditation Program team and appraisers. **If the submitted documentation demonstrates that >50% of the self-study and activity file documentation is missing, the organization will be notified by the NCPD Accreditation Program team, and the review will not continue.** The application fee is nonrefundable. Applicants may reapply once sufficient evidence can be produced to demonstrate compliance with NCPD Accreditation Program criteria. An additional application fee will apply.



ANCC NCPD ACCREDITATION PROCESS

- 1 Review current accreditation resources
- 2 Conduct internal review to determine readiness, compliance with eligibility criteria, and ability to adhere to ANCC NCPD Accreditation responsibilities
- 3 New applicants: Submit Intent to Apply
- 4 Eligibility and cycle date confirmed by ANCC
- 5 Submit application
- 6 Submit self-study documents, including complete activity files
- 7 Documents reviewed by ANCC Program team (quantitative) and appraisers (qualitative)
- 8 Virtual Visit scheduled and conducted
- 9 Appraisers submit Final Report to the Commission on Accreditation in NCPD
- 10 Commission on Accreditation in NCPD conducts review and makes accreditation decision
- 11 Accreditation decision communicated to applicant

Additional documentation required

Additional documentation reviewed

POLICY 6 ACCREDITATION DECISION(S)

Upon completion of the application process, the COA-NCPD will make an accreditation decision. The accreditation decision will be communicated in a letter emailed to the Accredited Provider Program Director. Types of accreditation decisions are detailed below.

Accreditation

Applicants that demonstrate compliance with the NCPD accreditation criteria will be awarded accreditation. New applicants will be awarded a term of two years and re-accrediting organizations will be awarded a term of four years.

Accreditation with a Progress Report

Applicants that have not fully demonstrated compliance in their self-study and activity file documentation will receive accreditation (for a 2-or 4-year term) with a progress report. The Accredited Provider will be required to submit documentation to reflect changes that have been made within the organization to bring the organization into full compliance with ANCC Accreditation criteria.

Provisional Accreditation with Progress Report

Applicants that have provided sufficient evidence to demonstrate partial compliance with the accreditation criteria and/or activity file documentation will receive provisional accreditation for a period of 12 months with a required progress report. The provisionally accredited organization will be required to submit evidence to demonstrate that changes have been made within the organization to bring the organization into full compliance with ANCC Accreditation criteria. The COA-NCPD will re-assess provisional status following review of the requested documentation and make a determination for full accreditation, accreditation with progress report, or denial of accreditation at that time.

Accreditation Denial

Applicants that do not provide sufficient evidence to demonstrate compliance with the accreditation criteria will be denied. Applicants will receive a final summary of findings that outline the deficiencies. Applicant organizations may reapply once they have addressed deficiencies and can provide sufficient evidence to demonstrate compliance with Accreditation Program criteria. The application fees are nonrefundable.

NOTE: Applicants and Accredited Providers that are denied accreditation and are in good standing with ANCC may reapply per the timeline determined by the COA-NCPD. An organization is considered in good standing when it has met all financial obligations and has not violated ANCC NCPD Accreditation criteria or policies.

POLICY 7 PROGRESS REPORTS

Progress reports will be submitted by Accredited Providers in response to deficiencies identified by the COA-NCPD during the accreditation review process. Progress report requirements will be outlined in the accreditation decision letter. Organizations must demonstrate successful resolution of all deficiencies noted in the progress report requirements by the due date(s) noted on the accreditation decision letter.

- Progress report requirements will be communicated to the applicant organization in the COA-NCPD Accreditation decision letter. A due date for submission of the progress report will be established.
- Progress report requirements must be submitted by the due date to the email address outlined in the COA-NCPD decision letter.
- Progress reports may be:
 - a. Accepted in full: no additional information required — progress report requirement complete.
 - b. Partially accepted: additional information required — progress report requirement partially met, additional submission, additional fee, and new due date established.
 - c. Not accepted: additional information required — progress report requirement not met, additional submission, additional fee, and new due date established.
- Accredited Providers required to submit multiple progress reports must demonstrate progressive improvement in adherence to accreditation criteria.
- A progress report fee invoice will be included with the COA-NCPD decision letter and must be remitted within thirty (30) days of receipt.
- Failure to demonstrate adherence to the accreditation criteria through submission of three progress reports over a reasonable period of time as determined by the COA-NCPD may result in suspension or revocation of accreditation.

POLICY 8 RECONSIDERATION PROCESS

The COA-NCPD ensures that organizations seeking accreditation have the opportunity to request reconsideration of an accreditation decision. The reconsideration process provides an applicant organization or an Accredited Provider with the opportunity to have the accreditation decision or adverse accreditation decision reviewed for reconsideration by the Reconsideration Committee prior to requesting an appeal. An adverse accreditation decision may include provisional accreditation, denial of accreditation and suspension, or revocation. An organization must have completed the accreditation process prior to requesting reconsideration.

Reconsideration Process

- The applicant must submit a reconsideration request in writing within 10 business days following notification of the adverse decision.
- The request for reconsideration must briefly state the reasons the applicant would like the decision to be reconsidered.
 - This request must include each deficient criterion with a reconsideration rationale including the areas in the activity files or examples that the applicant would like the COA-NCPD to reconsider.
 - The reconsideration will be based on the information and evidence submitted at the time of the review.
 - No new evidence may be submitted to support a reconsideration request.
- The reconsideration request is completed by the Reconsideration Committee, which is made up of members of the COA-NCPD Executive Committee, with the Director of Accreditation serving as a facilitator.
- The Reconsideration Committee will complete a thorough review of the primary documentation — the entire self-study, activity files, and additional evidence (if submitted during the appraisal process) that was submitted at the time of the review.
- Once the reconsideration review is completed, the Reconsideration Committee will provide a summary of findings and a recommended motion to the entire COA-NCPD.
- Motions are ratified on the fourth Monday of every month.
- Once initiated, the turnaround time for a reconsideration review is approximately thirty (30) to sixty (60) days.

Key Considerations

- Applicants may not request reconsideration of or appeal eligibility requirements, criteria upon which the Accreditation Program is based, the scoring rubric, the setting of passing scores, or appraisers' conclusions regarding the evaluation of the applicant's written documentation.
- The COA-NCPD will not reconsider areas that have been improved or are being improved as a result of the appraisal review and/or accreditation decision.

POLICY 9 APPEALING AN ADVERSE ACCREDITATION DECISION

The COA-NCPD ensures that applicants seeking accreditation have the opportunity to appeal an adverse accreditation decision. An adverse accreditation decision may include suspension, revocation, or denial of accreditation. Organizations wishing to appeal must have completed the accreditation process. Applicants may not appeal eligibility requirements, criteria upon which the Accreditation Program is based, the scoring rubric, the setting of passing scores, or appraisers' conclusions regarding the evaluation of the applicant's written documentation.

The applicant must submit an appeal in writing within ten (10) business days following notification of the adverse decision. The appeal must briefly state the reason(s) the applicant contests the decision. There is a nonrefundable appeal fee. For further information regarding the appeal process, please contact the Accreditation Program Office.

POLICY 10 VOLUNTARY TERMINATION

Accredited Providers may voluntarily terminate their accreditation at any time. **Accredited Providers that elect to terminate accreditation must notify ANCC, in writing, at least thirty (30) days in advance.**

The written notice of voluntary termination must contain

- The effective date of voluntary termination — which must be at least thirty (30) days after the date that appears on the written notice;
- The reason for voluntary termination; and
- The Transition Plan (see Transition of Services).

This notice must be sent by email to accreditation@ana.org. Confirmation of receipt provided.

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 ANCC Accredited Provider;
- Using the ANCC Accreditation statement; and
- Using ANCC intellectual property, including but not limited to trademarks, trade names, and logos.



NOTE: Accredited Providers that voluntarily terminate accreditation in good standing with ANCC may reapply at any time. An organization is considered in good standing when:

- It has met its financial obligations;
- It has not been suspended or revoked; and
- It is adhering to ANCC NCPD Accreditation criteria.

POLICY 11 SUSPENSION AND REVOCATION

An organization may be suspended and/or revoked as a result of

- Violation of any international, federal, state, or local laws or regulations that affect the organization's ability to adhere to ANCC NCPD Accreditation criteria or ethical standards;
- Failure to maintain compliance with ANCC NCPD Accreditation criteria;
- Failure to remit annual fees, application fees, and other invoiced fees;
- COA-NCPD investigation and verification of written complaints or charges by consumers or others;
- Refusal to comply with a COA-NCPD investigation; or
- Any of the following:
 - Misrepresentation,
 - Misuse of the ANCC Accreditation statement, or
 - Misuse of ANCC intellectual property, including but not limited to trademarks, trade names, and logos.

Suspended or revoked organizations must **immediately cease**

- Offering contact hours,
- Referring to themselves in any way as ANCC-accredited,
- Using the ANCC Accreditation statement, and
- Using ANCC intellectual property, including but not limited to trademarks, trade names, and logos.

The Director of NCPD Accreditation or designee will notify the Accredited Provider in writing of suspension or revocation of accreditation. Suspension is a prerequisite to revocation. At its sole discretion, the COA-NCPD may revoke accreditation without first suspending accreditation.

Organizations that have had their accreditation status suspended or revoked will be removed from the ANCC Directory of Accredited Providers. If an Accredited Provider believes that suspension or revocation is improper, the organization (appellant) may submit an appeal in writing. Please see Policy 9 and contact the Accreditation Program Office for further information regarding the appeal process.

POLICY 12 REINSTATEMENT

Suspended organizations may apply for reinstatement within 120 days of the suspension date. To apply for reinstatement of accreditation, the Accredited Provider must submit documentation demonstrating violation correction and pay the reinstatement fee. Reinstatement may be granted if the suspended organization adequately demonstrates full adherence to the ANCC NCPD Accreditation Program criteria and requisites upon reinstatement. Accredited Providers that have been reinstated may be required to submit progress reports to the COA-NCPD and may incur progress report fees.

- Suspended organizations that fail to apply for reinstatement within 120 days shall have their accreditation revoked.



NOTE: Accredited Providers that have had their accreditation status revoked may not apply for ANCC Accreditation for two years from the date of revocation. Organizations seeking accreditation after revocation are considered new applicants.

POLICY 13 TRANSITION OF SERVICES

Organizations that voluntarily terminate their accreditation status or have their accreditation suspended or revoked must submit a written Transition Plan, which includes

- A detailed explanation of how learners can obtain activity participation records after the date of termination, suspension, or revocation, including contact information and length of time that records will be available; and
- A complete list of all activities scheduled to take place after the date of termination, suspension, or revocation, including
 - Activities that have been planned but not yet implemented, and
 - All enduring materials:
 - A detailed explanation of how such activities will be canceled, and/or
 - A detailed explanation of how participants will be notified, prior to the activity, that contact hours will not be awarded.

POLICY 14 NOTIFICATION OF EVENTS

Accredited organizations and organizations with pending applications must notify ANCC within seven (7) business days of the occurrence or discovery of

- Significant changes or events that impair their ability to meet or continue to meet Accreditation Program requirements or make them ineligible for accreditation or reaccreditation;
- Loss of status as a C/SNA of the ANA;
- Any event that might result in adverse media coverage related to the delivery of NCPD; and
- Change in eligible company status.

The Accredited Provider Program Director or designee must notify the NCPD Accreditation Program Office within thirty (30) days of any change in the accredited organization affecting accreditation or information submitted in accreditation application materials, including but not limited to

- Changes that alter the information provided in the application, including change of address or name;
- A decision not to submit self-study written documentation after application;
- Change in Accredited Provider Program Director;
- Suspension, lapse, revocation, or termination of the nursing license of the Accredited Provider Program Director or Nurse Planner(s);
- Change in ownership; and
- Indication of potential instability (e.g., labor strike, reduction in force, bankruptcy).

This notice must be sent by email to accreditation@ana.org. Confirmation of receipt will be provided.

POLICY 15 ANNUAL REPORTING

To monitor compliance with the Accreditation Program criteria, all Accredited Providers are required annually to submit

- Demographic information; and
- A continuing education summary.

If, for any reason, an Accredited Provider is unable to submit the required documentation within the required time frame, it must contact the ANCC Accreditation Program Office as soon as possible. If the Accreditation Program Office does not receive the required documents by the required due date and the organization fails to notify the Accreditation Program Office regarding the delay, accreditation status may be suspended or revoked. The Accredited Provider will receive written notification from the Director of Accreditation.

NEW IN 2023 POLICY 16 ABSENCE OF ACCREDITED PROVIDER PROGRAM DIRECTOR

Currently accredited or applicant organizations applying to become re-accredited or initially accredited must have a qualified Accredited Provider Program Director (AP-PD) who has primary responsibility for the organization's adherence to the NCPD Accreditation criteria.

If the accredited or applicant organization does not have an Accredited Provider Program Director, the organization is not eligible to apply for NCPD Accreditation. If, during the application or accreditation review period, the Accredited Provider Program Director terminates his/her position within the organization (i.e., resigns, retires, is removed, or similar), the organization will be deferred to a later review cycle until such time that the organization can demonstrate the new Accredited Provider Program Director has been oriented and integrated into the organization. Deferral fees will be applied.

NEW IN
2023

POLICY 17 ACCREDITED PROVIDER PROGRAM DIRECTOR LEAVE OF ABSENCE

In the event that the Accredited Provider Program Director takes a leave of absence greater than thirty (30) days, the organization must notify the ANCC NCPD Program team with the name and credentials of the qualified individual who has been appointed to cover the role of the Accredited Provider Program Director in their absence. This interim Program Director must meet the AP-PD eligibility requirements.

NEW IN
2023

POLICY 18 MERGERS AND ACQUISITIONS

ANCC NCPD does not permit the transfer of accreditation from one organization to another. Accreditation is not a commodity; therefore, it cannot be bought, sold, or transferred. The accreditation is attached to the organization that is accredited as a provider.

- The Provider Unit needs to remain intact if it is moved within the corporation.
 - An Accredited Provider may be a part of the new company as an Accredited Provider if the people, structure, and processes have not been altered.
- Once accreditation status is terminated, accreditation of educational materials is no longer valid. The new company will need to complete the application process and become a provider themselves, if they wish to be an Accredited Provider.
- An organization may sell educational content but cannot attach the ANCC name, ANCC contact hours or any reference to the ANCC or accreditation status with that content.

It is up to the Accredited Provider to determine that the organization they are engaging in a merger and acquisition with is not an **ineligible organization**.

POLICY 19 LATE FEE, BOOKMARKING, EXTENSION, OR WITHDRAWAL

Applicant organizations applying for accreditation or re-accreditation will be assessed fees based on late submission of documents, incorrect bookmarking of documents, request for extension of submission of documents, or withdrawal from review cycle/failure to submit documents. All fees are expected to be remitted within thirty (30) days of receipt of the invoice.

POLICY 20 ANNUAL FEES

All accredited organizations shall pay an annual fee to ANCC. **All annual fees, regardless of fee structure, will be due by the designated date — within thirty (30) days of the date on the invoice — each calendar year, in conjunction with the annual report.** Organizations failing to remit the annual fee within thirty (30) days of the due date will not be considered in good standing, will be assessed a late fee, and will be removed from the Directory of Accredited Organizations. Organizations failing to remit the annual fee within ninety (90) days will be suspended.

POLICY 21 DATA USE

By submitting an application, Applicants and Accredited Providers give ANCC and its Accreditation Program Office permission to use their demographic and outcome data for reporting, marketing, and research purposes, such as

- Describing characteristics of Accredited Providers anonymously and in the aggregate;
- Identifying benchmarks that Accredited Providers meet to inform programmatic decisions about applicant requirements; and
- Analyzing trends or addressing other ANCC-defined or approved research questions.

All data received by ANCC will remain confidential and will be reported only in aggregate form unless permission is granted by the accredited organization to share data specific to an organization.

POLICY 22 CONFIDENTIAL INFORMATION

ANCC will not accept applications containing information that is confidential under the Health Insurance Portability and Accountability Act (HIPAA) or other laws and regulations. Applications containing such confidential information will be rejected. If confidential information is used in the narrative or as an exhibit, all identifying information must be redacted to comply with such laws.

POLICY 23 USE OF ANCC ACCREDITATION LOGO

After an organization is accredited by the ANCC COA-NCPD, the organization may use the ANCC Accreditation logo in promotional materials. Accredited organizations shall use the ANCC Accreditation logo in accordance with the following:

- The ANCC Accreditation logo is smaller than the accredited organization's own logo;
- The ANCC logo is placed in a less prominent position than the accredited organization's own logo; and
- The ANCC logo must be used only in association with ANCC accredited nursing continuing professional development or when referring to the organization as an ANCC accredited organization.

POLICY 24 RECORD KEEPING

Activity file records must be maintained in a retrievable file (electronic or hard copy) accessible to authorized personnel for **six years**. Accredited organizations are responsible for maintaining documentation of full activity files that demonstrate compliance to ANCC NCPD criteria regardless of method of record keeping (i.e., manual, electronic).

CHAPTER 3

EDUCATIONAL DESIGN PROCESS

This chapter outlines the process of planning, implementing, and evaluating educational activities according to ANCC NCPD Accreditation Program criteria, which ensure that individual educational activities are effectively planned, implemented, and evaluated according to educational standards and adult learning principles.

The educational design process (EDP) (criteria 1-7) are the operational expectations for Accredited Providers; moreover, the EDP must be adhered to in performance in practice, also referred to as activity files. The activity level is where the Accredited Providers demonstrate adherence to the EDP principles, as they are fundamental to high-quality nursing continuing professional development (NCPD). Accredited Providers must ensure that these expectations are met and that the ANCC criteria for accreditation are applied consistently.

NCPD is designed to improve the professional practice of nursing and to positively impact patient, system, and/or population outcomes. NCPD activities are defined as “learning activities intended to build upon the educational and experiential bases of the professional nurse for the enhancement of practice, education, administration, research, or theory development, to the end of improving the health of the public and nurses’ pursuit of their professional career goals.”

Within an accreditation framework, the following principles of high-quality educational design are employed:

- Incorporating the active involvement of a Nurse Planner and Content Expert in the planning process;
- Addressing a professional practice gap (change in standard of care, problem in practice, or opportunity for improvement);
- Analyzing educational needs (knowledge, skills, and/or practices) of registered nurses and/or healthcare team members that underlie the problem or opportunity (why the problem or opportunity exists);
- Identifying one or more learning outcomes to be achieved by learners participating in the activity;
- Evaluating achievement of learning outcomes;
- Using strategies that engage the learner in the educational activity and are congruent with the educational needs and desired learning outcomes;
- Choosing valid content based on evidence-based practice or best available evidence; and
- Planning independently from the influence of an ineligible company.

PROFESSIONAL PRACTICE GAP

The process of planning begins with identifying when NCPD might be a desired intervention to address a change that has been made to a standard of care, a problem that exists in practice, or an opportunity for improvement. Once an educational intervention is determined to be appropriate, a Nurse Planner is engaged to begin the planning process.

The Nurse Planner starts by analyzing data to validate the need for the educational activity. This analysis forms the basis of a professional practice gap, or the difference between the current state of practice and the desired state of practice. It is important to note that a professional practice gap may exist for RNs or healthcare teams regardless of the practice setting. Professional practice gaps are not limited to clinical practice and may also exist in areas of professional work such as administration, education, and research.

PLANNING COMMITTEE

Once the professional practice gap is identified, the Nurse Planner can begin to select individuals to assist with planning the educational activity by forming a Planning Committee, or the Nurse Planner may participate as a member of an interprofessional planning team.

The Planning Committee must include at least two people: the Nurse Planner and a Content Expert. The Nurse Planner may function as both the Nurse Planner and the content expert; however, a minimum of two people must be involved in planning each educational activity.

Other individuals may be selected, as appropriate, to help plan the activity. The Nurse Planner ensures that the educational activity is developed in compliance with ANCC Accreditation criteria. The Nurse Planner is responsible for ensuring that all individuals in a position to control content are evaluated for relevant financial relationships with ineligible companies prior to the start of planning the activity per the *Standards for Integrity and Independence in Accredited Continuing Education*.

Planning continues with further analysis of the professional practice gap. The Nurse Planner and Planning Committee evaluate the root causes of why the gap exists. If the gap is related to a lack of knowledge, skills, and/or practices of registered nurses, an educational intervention is appropriate. The gap may exist for other reasons, and alternative, noneducational strategies may need to be considered.

UNDERLYING EDUCATIONAL NEEDS

When the professional practice gap has been identified, the Nurse Planner and Planning Committee conduct an analysis to determine the underlying educational needs of registered nurses or members of the healthcare team that contribute to the gap. The Nurse Planner and Planning Committee evaluate what registered nurses or members of the healthcare team do not know (knowledge deficit), do not know how to do (skill deficit), or are not able to do in practice (practice deficit). A backward-planning process as described by Moore, Green, and Gallis (2009) is a useful method for determining the educational needs and targeting the educational activity appropriately to address the gap.

TARGET AUDIENCE

Once the educational need has been identified, the Nurse Planner and Planning Committee can determine the target audience for the educational activity. The target audience is defined as specific registered nurse learners and may include other healthcare team members the educational activity is intended to impact.

Accredited Providers are not permitted to provide activities without the RN being a represented member of the target audience.

LEARNING OUTCOME(S)

From the identified professional practice gap and underlying educational need, the Nurse Planner and Planning Committee develop the desired learning outcome for participants in the target audience. A learning outcome is written as a statement that reflects what the learner will be able to do as a result of participating in the educational activity. The learning outcome must be measurable and align to how the outcome will be evaluated. The outcome addresses the educational needs (knowledge, skills, and/or practices) that contribute to the professional practice gap. Achieving the learning outcome results in narrowing or closing the gap. There may be more than one learning outcome for an educational activity. If the activity addresses more than one underlying educational need, there should be an outcome that addresses each of the underlying needs of the learners.

EVALUATION

The Nurse Planner and Planning Committee determine the method that will be used to evaluate the desired learning outcome of the educational activity. The evaluation components and method of evaluation should be related to the desired learning outcomes of the educational activity. Evaluation may be formative and integrated within the educational activity. Evaluation is also summative at the conclusion of the educational activity. Evaluation methods include assessment of change in knowledge, skills, and/or practices of the target audience. Change in knowledge, skills, and/or practices may or may not occur based on a variety of factors, but evaluation should assess for impact or change. Evaluation may also include collecting data that reflect barriers to learner change.

Evaluations may include but are not limited to both short- and long-term methods, as illustrated below.

EVALUATION OPTIONS

SHORT-TERM METHODS

- Evaluation of skill via an intent to change practice;
- Formative assessment;
- Post-test;
- Return demonstration;
- Case study analysis; and
- Role-play.

LONG-TERM METHODS

- Self reported change in practice;
- Change in quality outcome measure;
- Return on investment; and
- Observation of performance.

EDUCATIONAL ACTIVITY CONTENT

What Content Is Eligible?

It is the expectation that for all NCPD activity planning, the Accredited Provider will adhere to the ANCC educational design process and activity file requirements. Content chosen for educational activities must address a gap in knowledge, skill, and/or practice and must be evidence-based or based on the best-available evidence, and the educational activity must be planned independently from the influence of ineligible companies. Content is intended to build upon the educational and professional development of the RN. Content areas may include but are not limited to faculty development, leadership, research, practice theory, on-boarding, practice transitioning, shared governance, wellness and self-care, team training, skill-based training (BLS/ACLS), quality, and performance improvement. Additionally, NCPD content may be derived from academic curriculum.

Content developed by an ineligible company may NOT be used in educational activities awarding ANCC contact hours.

Planning Committee Involvement in Content Development

Content for the educational activity may be chosen by the Nurse Planner and Planning Committee, or it may be selected by others participating in the educational activity, such as individual speakers or authors. It is the responsibility of the Nurse Planner and Planning Committee to ensure that content is based on the most current evidence, which may include but is not limited to evidence-based practice, literature/peer-reviewed journals, clinical guidelines, best practices, and content experts' experiences. If there is concern that the content selected is not based on best available evidence or may be biased within the educational activity, the Nurse Planner and Planning Committee may choose to engage a content reviewer who is not a member of the Planning Committee. The purpose of a content reviewer is to provide an independent and expert evaluation of content to ensure best available evidence is presented, the content is balanced, and the content is not promotional or biased. The Nurse Planner is responsible for ensuring that all individuals in a position to control content are evaluated for relevant financial relationships with ineligible companies prior to the start of planning the activity per the [*Standards for Integrity and Independence in Accredited Continuing Education*](#). This includes content reviewers.

Previously Developed Content

Content that has previously been developed may also be identified as appropriate to include within the educational activity. If previously developed content is incorporated, the Nurse Planner is responsible for:

- **Professional Practice Gap**
Ensuring that previously developed educational content validates the current professional practice gap.
- **Evidence Supporting the Professional Practice Gap**
Ensuring that the previously developed content is current, evidence-based, and meets current standards or practice guidelines.
- **Learning Outcomes**
Developing learning outcomes independent of any prior outcomes or objectives for the content and/or providing evidence to support why the previously developed learning outcomes do not require modification, based on the needs of the target audience for the activity being planned.

Assessing and Analyzing for Content Integrity

- Ensure that previously developed content is permissible for use.
- Ensure the previously developed content is objective and unbiased and excludes any promotional influence.

The Nurse Planner and Planning Committee may not provide a previously developed educational activity and award contact hours without complying with all elements of the NCPD accredited activity planning standards.

Active Learner Engagement

As part of the design process, the Nurse Planner and Planning Committee develop strategies to actively engage learners in the educational activity. Strategies to engage learners may include but are not limited to dialogue/question and answer, case studies, virtual reality, artificial intelligence, discussion boards, group work, tabletop exercises, and problem-based learning. Active learner engagement may function as an opportunity for formative assessment during the educational activity by providing the presenter with immediate learner feedback.

Learner engagement strategies must be appropriate for the activity type (live vs. enduring).

Criteria for Awarding Contact Hours

During the planning process, the Nurse Planner and Planning Committee determine the criteria that learners must meet to earn contact hours. Criteria may include but are not limited to participation in the activity, attendance for a specified period of time (e.g., 100% of activity, or missing no more than ten minutes of the activity), successful completion of a post-test (e.g., attendee must score X% or higher), completion of an evaluation form, or successful completion of a return demonstration. Planning committees should select criteria for awarding contact hours that are realistic for the size and type of educational activity and that are meaningful in relation to the desired outcome of the activity.

Calculating Contact Hours

Contact hours are awarded to participants for those portions of the educational activity devoted to the learning experience and time spent evaluating the activity. Accredited Providers may refer to the contact hours as the following:

- Contact hour
- ANCC contact hours
- CNE credit
- Nursing contact hours

Accredited Providers should not use the term CEU.

- CEU is a specific credit designation used by organizations accredited by International Accreditors for Continuing Education and Training (IACET). The conversion of 1 CEU into hours (time) is different than a contact hour.

- Contact hours are determined in a logical and defensible manner.
- If rounding is desired in the calculation of contact hours, the provider must round to the nearest quarter hour — up or down.

For live activities, one contact hour = sixty (60) minutes. Time frames must match and support the contact hour calculation for live activities. An agenda must be provided for educational activities that are greater than three hours in length. Time for breaks and meals should be clearly delineated and **not included** in the total contact hours awarded.

For enduring materials (print, electronic, web-based, etc.), the method for calculating the contact hours must be identified. The method may include but is not limited to a pilot study, historical data, Mergener Formula, or complexity of content. Participants in a pilot study assist in determining the length of time required for completing an educational activity so the number of contact hours to award can be calculated. Those participants may be awarded contact hours once the number is determined. Contact hours may not be awarded retroactively except in the case of a pilot study.

Accredited Provider Statement

Accredited Providers are required to provide the official accreditation statement to learners prior to the start of each educational activity and on each certificate of completion. The official Accredited Provider statement must be displayed clearly to the learner and worded correctly.

The official ANCC Accreditation statement must be written as follows:

[Name of Accredited Provider] is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

CERTIFICATE OR DOCUMENTATION OF COMPLETION

A certificate or documentation of completion **is awarded** to a participant who successfully completes the requirements for the education activity. Criteria for successful completion are determined by the provider and must be implemented as such.

The certificate of completion or document must include

- Title and date of the educational activity;
- Name and address of the provider of the educational activity (web or email address is acceptable);
- Number of contact hours awarded;
- Accreditation statement; and
- Place for the participant name.

IMPORTANT: Initial applicants should **prepare and submit a sample certificate of completion for each educational activity** containing the accreditation statement to be used once accreditation is attained. The certificate should include all of the required elements outlined on this page.

REQUIRED DISCLOSURES PROVIDED TO THE LEARNER

Learners must receive required disclosure statements prior to the start of an educational activity:

- In live activities, required information must be provided to the learner prior to initiation of the educational content.
- In enduring materials (print, electronic, or web-based activities), required information must be visible to the learner prior to the start of the educational content.
- Required information may not occur or be located at the end of an educational activity.
- Evidence of **how** the disclosures were provided to learners must be included in activity file documentation.

Required disclosures to learners includes the following:

- Accreditation statement of the Accredited Provider awarding contact hours, and
- Criteria for successful completion in order to be awarded contact hours.

Additional disclosures to learners, if applicable:

- Presence or absence of relevant financial relationships for all individuals in a position to control content:
 - For individuals who have a relevant financial relationship, the following required information must be provided to learners:
 - ▶ The names of the individuals with relevant financial relationships,
 - ▶ The names of the ineligible companies with which they have relationships,
 - ▶ The nature of the relationships, and
 - ▶ A statement that all relevant financial relationships have been mitigated.
 - If no relevant financial relationship exists, the activity provider must inform learners that no relevant financial relationships exist for any individual in a position to control the content of the educational activity.
 - The presence or absence of relevant financial relationships **does not** need to be disclosed to learners if the activity meets any of the three exceptions outlined in Standard 3 of the Standards for Integrity and Independence.
- Commercial Support: Learners must be informed if a commercial interest has provided financial or in-kind support for the educational activity.
- Expiration of enduring materials: Educational activities provided through an enduring format (e.g., print, electronic, web-based) are required to include an expiration date documenting the time period.

SUMMATIVE EVALUATION

Following the conclusion of the educational activity, the Nurse Planner and/or Planning Committee must follow a clearly defined method that includes analysis of learner input and a summary of data that is used to evaluate the overall effectiveness of the educational activity. The summative evaluation data is an analysis that is used to determine the impact of the educational activity in achieving the desired learning outcome and how its results are used to guide future educational activities as applicable.

ENSURING INDEPENDENCE AND CONTENT INTEGRITY

Independence from Ineligible Companies

The educational planning process outlined in this chapter is designed to provide independent accredited continuing professional development firmly rooted in the identification of professional practice gaps and learning needs of registered nurses and/or members of the healthcare team. In order to fully ensure the independence of these NCPD activities and meet accreditation criteria, it is important to ensure there is no commercial influence in the planning and execution of these activities. The next section focuses on relevant financial relationships, commercial support, and content integrity in the presence of commercial support.

The following is an abbreviated outline of the requirements for ensuring independence and content integrity when planning educational activities. See the *Standards for Integrity and Independence in Accredited Continuing Education*, available at <https://accme.org/accreditation-rules/standards-for-integrity-independence-accredited-ce>, for the full requirements.

ineligible company

A company whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



Relevant Financial Relationship with Ineligible Organizations

A relevant financial relationship exists when an individual is in a position to control or influence the content of an educational activity and receives money of any dollar amount from an **ineligible company** when the educational content is related to the business lines or products of the ineligible company. The Nurse Planner is responsible for identifying, mitigating, and disclosing relevant financial relationships, if applicable, during the planning and implementation phases of an educational activity. The Nurse Planner may engage the individual with the identified relevant financial relationship to participate in the mitigation process, but the Nurse Planner is ultimately accountable for compliance. The Nurse Planner is also responsible for disclosing to learners the presence or absence of relevant financial relationships for all individuals in a position to control content of the educational activity, if applicable. If the Nurse Planner has a relevant financial relationship, an appropriate mitigation strategy should be implemented.

It is critical that all individuals in a position to control the content of an educational activity are provided with the definition of an ineligible company prior to disclosing their financial relationships.

The Nurse Planner is responsible for taking steps to:

- Collect all financial relationships from all individuals in a position to control content if the content or delivery method of the accredited activity requires it.
- Exclude owners or employees of ineligible companies (unless they meet the three exceptions to this exclusion outlined in the Standards document).
- Identify relevant financial relationships.
- Mitigate relevant financial relationships.
- Disclose relevant financial relationships to learners, if applicable.
- The Nurse Planner is responsible for ensuring that documentation is maintained within the activity file planning documents to demonstrate compliance with the Standards for Integrity and Independence.



NOTE: It is not required that a form is used to collect financial information; however if another method is used (i.e., email communication or in-person interview) this must be documented and retained in the activity planning documentation.

The Accredited Provider must have a process in place to ensure that the Nurse Planner's financial relationships are identified and mitigated appropriately. This may be done by the Program Director, another Nurse Planner, or another individual who has knowledge of the Standards for Integrity and Independence.

For full information on the steps for identifying, mitigating, and disclosing relevant financial relationships, including exclusion criteria, please review **Standard 3** in the *Standards for Integrity and Independence in Accredited Continuing Education*, found here: <https://accme.org/accreditation-rules/standards-for-integrity-independence-accredited-ce/standard-3-identify-mitigate-and-disclose-relevant-financial-relationships>.

Managing Commercial Support

Accredited Providers that choose to accept **commercial support** (defined as financial or in-kind support from ineligible companies) are responsible for ensuring that the education remains independent of the ineligible company and that the support does not result in commercial bias or commercial influence in the education. The support does not establish a financial relationship between the ineligible company and planners, faculty, and others in control of content of the education.

1. **Decision-making and disbursement:** The Accredited Provider must make all decisions regarding the receipt and disbursement of the commercial support.
 - a. Ineligible companies must not pay directly for any of the expenses related to the education or the learners.
 - b. The Accredited Provider may use commercial support to fund honoraria or travel expenses of planners, faculty, and others in control of content for those roles only.
 - c. The Accredited Provider must not use commercial support to pay for travel, lodging, honoraria, or personal expenses for individual learners or groups of learners in accredited education.
 - d. The Accredited Provider may use commercial support to defray or eliminate the cost of the education for *all* learners.
2. **Agreement:** The terms, conditions, and purposes of the commercial support must be documented in an agreement between the ineligible company and the Accredited Provider. The agreement must be executed prior to the start of the accredited education. An Accredited Provider can sign onto an existing agreement between an Accredited Provider and a commercial supporter by indicating its acceptance of the terms, conditions, and amount of commercial support it will receive.
3. **Accountability:** The Accredited Provider must keep a record of the amount or kind of commercial support received and how it was used, and must produce that accounting, upon request, by the accrediting body or by the ineligible company that provided the commercial support.
4. **Disclosure to learners:** The Accredited Provider must disclose to the learners the name(s) of the ineligible company(ies) that gave the commercial support, and the nature of the support if it was in-kind, prior to the learners engaging in the education. Disclosure must not include the ineligible companies' corporate or product logos, trade names, or product group messages.

Commercial Support Is:

Financial Support: money supplied by a ineligible company to be used by a provider for expenses related

to the educational activity. Financial support may be provided as an unrestricted grant, educational grant, donation, or scholarship.

In-kind Support: materials, space, or other nonmonetary resources or services used by a provider to conduct an educational activity, which may include but are not limited to human resources, marketing services, physical space, equipment such as audiovisual components, and teaching tools (for example, anatomic models). (ACCME, 2020)

For further information on the commercial support requirements, please review **Standard 4** in the *Standards for Integrity and Independence in Accredited Continuing Education* found here: <https://accme.org/accreditation-rules/standards-for-integrity-independence-accredited-ce/standard-4-manage-commercial-support-appropriately>.

JOINT PROVIDERSHIP

Accredited Providers may jointly provide educational activities with other organizations. The jointly providing organization **cannot be an ineligible company**. The Accredited Provider is referred to as the provider of the educational activity; any other provider is referred to as a joint provider. In the event that two or more organizations are accredited, one will assume responsibility for adherence to the ANCC criteria and is the provider; the others are referred to as the joint providers. Materials associated with the educational activity, such as marketing materials, advertising, agendas, and certificates of completion, must clearly indicate the Accredited Provider that is awarding contact hours and is responsible for adherence to the ANCC criteria.

REQUIREMENTS FOR REVIEWING ENDURING ACTIVITIES

Enduring activities are provider-directed, learner-paced activities. Enduring materials have an expiration date after which no contact hours may be awarded. The expiration date of enduring material should be based on the content of the material. Providers must review content of enduring materials at least once every three years, or more frequently if indicated by new developments in the field specific to the enduring material.

Review of enduring material content should be conducted for:

- Accuracy of content,
- Current application to practice,
- Evidence-based practice,
- Validation of utilization of the most up-to-date accreditation criteria and accreditation statement, and
- Verification that the summative evaluation data is used to determine if the activity was effective and if revisions to the activity are needed.

Upon completion of the enduring material ensure the following:

- The activity file is amended to reflect accreditation criteria updates,
- A new expiration date is established,
- The Accredited Provider has a process for ensuring that periodic summative evaluations are occurring to determine impact of the enduring activity, and
- Summative evaluations are completed at regular intervals (monthly, quarterly, or yearly) to determine if the activity was effective and if revisions to the activity are needed.

CONVERTING LIVE ACTIVITIES TO ENDURING ACTIVITIES

Live activities, or portions of live activities, may be repurposed as enduring materials. If materials are converted, an expiration date is assigned to the enduring activity and this expiration date must be disclosed to learners before they engage in the educational activity.

- If a live activity is recorded and the recording (either entire event or portions of the event) is provided to the *same group of learners* who registered for the live event, this is considered the same activity. Considerations must be made to ensure that learner engagement strategies, evaluation methods, and criteria for awarding contact hours are appropriate for live and enduring activity types.
- If a live activity is recorded and the recording (either entire event or portions of the event) is provided to a *new group of learners* that did not register for the live event, this would be considered a new activity. Considerations must be made to ensure that learner engagement strategies, evaluation methods, and criteria for awarding contact hours are appropriate for live and enduring activity types.

Considerations for Conferences

When planning a larger NCPD activity or conference, follow the educational design process just as you would with any educational activity. Conferences may be planned as one NCPD activity with one overarching learning outcome.

The description of the evidence-based content can include details on how the overall content facilitates learner achievement of the expected outcome for the conference. Detailed information about sessions, and individual session outcomes, are not required. An evaluation may be completed at the conclusion of the conference to evaluate whether the desired learning outcome was achieved.

CHAPTER 4

PROVIDER ACCREDITATION CRITERIA

The ANCC NCPD Accreditation criteria ensure that accredited NCPD is designed to be relevant, practice-based, effective, based on valid content, and independent of commercial influence. The criteria reflect the values of our NCPD community and respond to the evolving healthcare environment.

Adherence to ANCC Accreditation criteria empowers Accredited Providers to deliver high-quality NCPD that drives improvements in nursing practice and helps nurses and healthcare teams optimize the care, health, and wellness of patients and the systems in which they work.

The NCPD Accreditation criteria offer a framework for planning, implementing, and evaluating NCPD activities that are designed to result in improvements in knowledge, skill, and practice, and/or patient and system outcomes. Accredited Providers must comply with the accreditation criteria.

The following five sections are required to be implemented and adhered to by both **new applicants and currently Accredited Providers** to maintain their accreditation status:

- Organizational Overview (OO);
- Structural Capacity (SC);
- Educational Design Process (EDP);
- Quality Outcomes (QO); and
- Performance in Practice Activity Files.

It is the AP-PDs responsibility to ensure that the Provider Unit adheres to and complies with the NCPD Accreditation criteria as set forth by the COA-NCPD. For information on how to implement the NCPD Accreditation criteria, refer to *Writing to the ANCC NCPD Accreditation Criteria* guide.

PROVIDER ORGANIZATIONAL OVERVIEW (OO)

The Organizational Overview (OO) is an essential component of the self-study and describes the overall function of the Provider Unit. It provides context for understanding the Provider Unit and correlates with specific criteria requirements. The Provider Unit must submit the documents and/or narratives outlined below.

Position description

Description of the functions specific to the roles of Accredited Provider Program Director and Nurse Planner that relate to the Provider Unit.



OO1. Executive Statement/High-Level Summary

The executive statement and/or high-level strategic summary of the Provider Unit is a statement that should be less than 1,000 words and include:

- Overall description on how the Provider Unit functions.
- The mission of the Provider Unit as it relates to its NCPD offerings.
- Impact the Provider Unit has on the organization and its learners.

OO2. Role description

- Submit a list, including names and credentials, positions, and titles of the Accredited Provider Program Director and other Nurse Planners, if any, in the Provider Unit.
- Submit **position descriptions** for the Accredited Provider Program Director and Nurse Planners (if any) in the Provider Unit.

Position descriptions should include the licensure and educational requirements of the position as well as the roles and responsibilities of the position in relation to the Accredited Provider Unit.

PROVIDER CRITERION 1 STRUCTURAL CAPACITY (SC)

The structural capacity portion of the self-study focuses on the commitment, accountability, and leadership of the Provider Unit. The narratives and examples should demonstrate the Accredited Provider Program Director's commitment to learners' needs, accountability for ensuring NPs are oriented and trained, and leadership of the PU throughout the development of NCPD.

Commitment. The Accredited Provider Program Director demonstrates commitment to ensuring that RNs' learning needs are met by evaluating Provider Unit processes in response to data that may include but are not limited to aggregate individual educational activity evaluation results, stakeholder feedback (staff, volunteers), and learner/customer feedback.

- SC1.** The Accredited Provider Program Director's commitment to learner needs, including how Provider Unit processes are revised based on aggregate data, which may include but are not limited to individual educational activity evaluation results, stakeholder feedback (staff, volunteers), and learner/customer feedback.

Accountability. The Accredited Provider Program Director is accountable for ensuring that all Nurse Planners in the Provider Unit implement and adhere to the ANCC Accreditation criteria.

- SC2.** How the Accredited Provider Program Director ensures that all Nurse Planners of the Provider Unit are appropriately oriented and trained to implement and adhere to the ANCC Accreditation criteria.

Leadership. The Accredited Provider Program Director demonstrates leadership to the Provider Unit through direction and guidance given to individuals involved in assessing, planning, implementing, and evaluating NCPD activities in compliance with ANCC Accreditation criteria.

- SC3.** How the Accredited Provider Program Director and/or Nurse Planner provides direction and guidance to individuals involved in planning, implementing, and evaluating NCPD activities in compliance with ANCC Accreditation criteria.

PROVIDER CRITERION 2

EDUCATIONAL DESIGN PROCESS (EDP)

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

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).
- EDP2.** How the Nurse Planner identifies the educational needs (knowledge, skills, and/or practices) that contribute to the professional practice gap.
- EDP3.** How the Nurse Planner identifies and measures change in knowledge, skills, and/or practice of the target audience that are expected to occur as a result of participation in the educational activity.

Planning. Planning for each educational activity must be independent from the influence of ineligible companies. AP-PDs and Nurse Planners must ensure that educational activities are developed independent of control, influence, and bias by “ineligible companies” as defined in the *Standards for Integrity and Independence in Accredited Continuing Education*.

- EDP4.** The process for identification, mitigation, and disclosure of relevant financial relationships of all individuals who control the content of the continuing education activity.

Design Principles. The educational design process incorporates best available evidence and valid content, and appropriate strategies to engage learners.

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

Evaluation. A clearly defined method that includes learner input is used to evaluate the effectiveness of each educational activity and results from the activity evaluation are used to guide future activities.

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

PROVIDER CRITERION 3 QUALITY OUTCOMES (QO)

The Provider Unit engages in an ongoing evaluation process to analyze its overall effectiveness in fulfilling its goals and operational requirements to provide quality NCPD.

Provider Unit Evaluation Process. The Provider Unit must evaluate the effectiveness of its overall functioning as a Provider Unit.

- QO1.** The process used for evaluating the overall effectiveness of the Provider Unit in carrying out its work as a provider of NCPD.

Value/Benefit to the Provider Unit. The Provider Unit shall evaluate data to continually improve its structure, processes, and outcomes; quality of educational activities; and how it contributes to the strategic goals of the organization in which the Provider Unit operates.

- QO2a.** Identify at least one quality outcome the Provider Unit has established and worked to achieve over the past twelve (12) months to improve Provider Unit operations. Identify the metrics used to measure success in achieving that outcome.
- QO2b.** Using one of the quality outcomes identified in QO2a, explain how the most recent evaluation process (QO1) resulted in the development and/or improvement of an identified outcome for Provider Unit operations, including how that outcome was measured and analyzed.

Value/Benefit to Nursing Professional Development. The Provider Unit shall evaluate data to determine how the Provider Unit, through the learning activities it has provided, has influenced the professional development of its nurse learners.

- QO3a.** Identify at least one quality outcome the Provider Unit has established and worked to achieve over the past twelve (12) months to improve the professional development of nurses. Identify the metrics used to measure success in achieving that outcome.
- QO3b.** Using one of the outcomes identified in QO3a, explain how the most recent evaluation process (QO1) resulted in the development and/or improvement of an identified outcome to improve the professional development of nurses, including how that outcome was measured and analyzed.

For information on how to implement the NCPD Accreditation criteria, refer to the *Writing to the ANCC NCPD Accreditation Criteria* guide.

ACCREDITATION WITH DISTINCTION

ANCC Accredited Providers have the option to apply for Accreditation with Distinction. Criteria for Accreditation with Distinction recognize achievements of Accredited Providers that advance interprofessional collaborative practice, address public health priorities, create behavioral change, show leadership, leverage educational technology, and demonstrate the impact of education on healthcare professionals and patients.

ACCREDITATION WITH DISTINCTION CRITERIA

The following specific criteria outline the expected performance parameters for ANCC Accreditation with Distinction. Organizations must demonstrate evidence of exemplary and/or innovative practice in at least one criterion or more in Structural Capacity; two criteria or more in Educational Design Process; and in all three criteria within Quality Outcomes. A prerequisite to applying for Accreditation with Distinction is completion of an accreditation review demonstrating full adherence to all accreditation criteria.

ACCREDITED PROVIDER DISTINCTION CRITERIA

1. Structural Capacity

- a. Evidence demonstrates how a process improvement implemented by the Provider Unit resulted in meeting learner(s) needs and the outcome that was achieved.
- b. Evidence demonstrates a process description and example that the Provider Unit has implemented a formal succession plan or a mentorship model that promotes professional development and growth for Nurse Planners.
- c. Evidence demonstrates a process description and example that the Provider Unit has engaged members from other professions, students, patients, and/or families in planning, implementing, and evaluating NCPD activities (e.g., interprofessional continuing education).

2. Educational Design Process

- a. Evidence demonstrates a process description and example that the Provider Unit uses quality improvement strategies to identify professional practice gaps or opportunities for improvement (root cause analysis, Six Sigma, or similar) and/or consistently uses a multimodal approach to identify and validate professional practice gaps or opportunities for improvement (focus groups of potential learners, collaboration with stakeholders, or similar).
- b. Evidence demonstrates a process description and example that the Provider Unit incorporates competencies into educational activities (QSEN, IOM, IPCE, or similar) and/or integrates selected competencies within the content to achieve desired outcomes.
- c. Evidence demonstrates a process description and example that the Provider Unit develops NCPD activities that actively engage learners within the learning environment (problem-based learning, simulation, education that is learner-centric, CE credit without time as a metric).
- d. Evidence demonstrates a process description and example that the Provider Unit used summative evaluation data to develop a future NCPD activity and the change was reevaluated for effectiveness.
- e. Evidence demonstrates a process description and example that the Provider Unit measured, on different occasions, change in knowledge, skills, and/or practice longitudinally – minimum ninety (90) days; evaluated team performance; and/or evaluated impact on practice and/or patient outcomes.

PERFORMANCE IN PRACTICE

3. Quality Outcomes

- a. Evidence demonstrates a process description and example that the Provider Unit utilizes innovative and creative approaches (continuous professional development of NCPD team members, use of technology, interprofessional collaboration, or similar) to evaluate its effectiveness.
- b. Evidence demonstrates a process description and example that the Provider Unit's evaluation process resulted in a quality outcome measure that exhibits improvement in health care quality and in patient and/or community outcomes. (If outcomes were not met, identify barriers and challenges to attainment.)
- c. Evidence demonstrates a process description and example that the Provider Unit has positively impacted the professional practice of nursing and has disseminated the knowledge forward (publication, poster/podium presentation, research).

More information on Accreditation with Distinction criteria can be found in the [*ANCC NCPD Accredited Provider Applicant Journey*](#) guide.

PERFORMANCE IN PRACTICE

Activity File Requirements

This list of activity file requirements may be used as a checklist to ensure you have all required elements documented. **In addition, these requirements may be used to title the bookmarks in your NCPD activities.**

- Title of activity
- Location
- Type of activity format
- Date of live activity or, for ongoing enduring activities, date first offered and expiration date
- Description of the professional practice gap
- Evidence that validates the professional practice gap
- Educational need that underlies the professional practice gap (knowledge, skill, or practice)
- Description of target audience
- Desired learning outcomes
- Description of evaluation method
- Description of evidence-based content with supporting references or resources
- Learner engagement strategies
- Number of contact hours awarded and calculation method (if the activity is longer than three hours, agenda must be provided for the entire activity)
- Criteria for awarding contact Hours
- Documentation of completion and/or certificate of completion
 - Title and date of educational activity
 - Name and address of the provider of the educational activity
 - Number of contact hours awarded
 - Accreditation statement
 - Space for the participant name
- Names and credentials of all individuals in a position to control content
- Demonstration of identification of relevant financial relationships with ineligible companies for all individuals in a position to control content
- Evidence of mitigation of relevant financial relationships (if applicable)
- Commercial support agreement (if applicable)
- Evidence of disclosure to learners
 - Accreditation statement
 - Criteria for awarding contact hours
 - Presence or absence of relevant financial relationships for all individuals in a position to control content, including mitigation statement (if applicable)
 - Commercial support from ineligible companies (if applicable)
 - Expiration date for enduring activities or materials (if applicable)
 - Joint providership (if applicable)
- Summative evaluation (provide data and an analysis of the data and how it will be used to impact future activities)

For more detailed information on the activity file criteria, refer to the [Writing to the ANCC NCPD Accreditation Criteria](#) guide.

GLOSSARY

accountability	Responsibility for adherence to the ANCC Accreditation criteria as they apply to providing quality NCPD.
accreditation	The voluntary process by which a nongovernmental agency or organization appraises and grants accredited status to institutions and/or programs or services that meet predetermined structure, process, and outcome criteria (time-limited).
accredited provider	Comprises the members of an organization — also referred to as provider unit — who support the delivery of nursing continuing professional development activities.
accredited provider program director	A registered nurse who holds a current, active license with no practice restrictions (or international equivalent) and a graduate degree, with either the baccalaureate or graduate degree in nursing (or international equivalent), who has the authority within a Provider Unit to ensure adherence to the ANCC NCPD Accreditation Program criteria in the provision of NCPD.
best available evidence	Choosing evidence based on an evidence hierarchy, with higher levels of the hierarchy consistent with a stronger evidence base (Polit and Beck, 2008).
bias	Tendency or inclination to cause partiality, favoritism, or influence.
commercial bias	Favoritism or influence shown toward a product or company in relation to an educational offering.
commercial support	Financial or in-kind contributions given by an ineligible company that are used to pay for all or part of the costs of NCPD activity. Providers of commercial support may not be providers or joint providers of an educational activity.

commission on accreditation in nursing continuing professional development (COA-NCPD)	Appointed by and accountable to the ANCC Board of Directors, this body is responsible for the ANCC NCPD Accreditation decisions and criteria development. The COA-NCPD is composed of at least nine members selected from NCPD stakeholder communities and represent expertise from across the field of continuing education, including academia, educational companies, domestic and international nursing associations, and governmental organizations.
commitment	Duty or responsibility of those providing continuing education to meet learner needs, provide quality NCPD, and support Provider Unit goals and improvements.
contact hour	A unit of measurement that describes sixty (60) minutes of an organized learning activity.
content	Subject matter of an educational activity that is based on the best available evidence and reflects the desired learning outcomes.
content expert	An individual with documented qualifications demonstrating education and/or experience in a particular subject matter.
content reviewer	An individual selected to evaluate an educational activity during the planning process or after planning but prior to delivery to learners for quality of content, bias, and any other aspects of the activity that may require evaluation.
continuing education unit (CEU)	The ANCC NCPD Accreditation Program does not utilize this term when referring to the NCPD unit of measurement. The CEU is an educational measurement utilizing criteria of the International Association for Continuing Education and Training (IACET).
credentialing	A generic term for licensure, certification, and registration. It can also be used as a term for a voluntary recognition process under the auspices of private-sector associations.
eligibility	An applicant's ability to meet the requirements established by ANCC as a prerequisite to evaluation for accreditation or re-accreditation in order to be considered qualified to apply for accreditation.
enduring materials	A non-live NCPD activity that lasts over time. Examples of enduring materials include programmed texts, audiotapes, videotapes, monographs, computer-assisted learning materials, and other electronic media that are used alone or with printed or written materials. Enduring materials can also be delivered via the Internet. The learning experience by the nurse can take place at any time and in any place rather than only at one time or in one place.

**evaluation —
formative**

Systematic evaluation in the process of curricula construction, teaching, and learning for the purpose of improving any of these three processes (Bloom et al., 1971).

**evaluation —
summative**

A method of assessing the worth of a program at the end of the program activities. A summative evaluation focuses on outcomes..

**evidence-based
practice**

A way of providing healthcare that is guided by a thoughtful integration of the best available scientific knowledge with clinical expertise. This approach allows the practitioner to critically assess research data, clinical guidelines, and other information resources in order to correctly identify the clinical problem, apply the most high-quality intervention, and re-evaluate the outcome for future improvement (www.ahrq.gov/topics/evidence-based-practice.html).

gap analysis

The method of identifying the difference between current knowledge, skills, and/or practices and the desired best practices.

ineligible company

Organizations whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients (ACCME, 2020).

in-kind support

Nonmonetary support (e.g., marketing assistance, meeting room, event registration assistance) provided by the giver to the taker. (In the accreditation community, the “taker” is the provider of NCPD.)

**interprofessional
continuing education**

Education that occurs when members from two or more professions learn with, from, and about each other to enable effective collaboration and improve health outcomes (www.jointaccreditation.org).

**interprofessional
education**

“When students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes” (WHO, 2010).

joint providership

Planning, developing, and implementing of an educational activity by two or more organizations or agencies.

**jointly provided
activities**

Educational activities planned, developed, and implemented collaboratively by two or more organizations or agencies.

leadership

The provision of direction and guidance to individuals involved in the process of assessing, planning, implementing, and evaluating NCPD activities in adherence to the ANCC Accreditation criteria.

learner-directed, learner-paced activity	An educational activity in which the learner takes the initiative in identifying his or her learning needs, formulating learning goals, identifying human and material resources for learning, choosing and implementing appropriate learning strategies, and evaluating learning outcomes. The learner also determines the pace at which he or she engages in the learning activity.
multifocused organization	An organization that exists for more than the purpose of providing NCPD.
needs assessment	The process by which a discrepancy between what is desired and what exists is identified.
nurse planner	A registered nurse who holds a current, active license with no practice restrictions and a baccalaureate degree or higher in nursing (or international equivalent) who is actively involved in all aspects of planning, implementation, and evaluation of each NCPD activity. The Nurse Planner is responsible for ensuring that appropriate educational design principles are used and that processes are consistent with the requirements of the ANCC NCPD Accreditation Program.
nursing continuing professional development (NCPD)	A specialized nursing practice that facilitates the professional development and growth of nurses and other healthcare personnel along the continuum from novice to expert.
nursing continuing professional development (NCPD) activities	Learning activities intended to build upon the educational and experiential bases of the professional RN for the enhancement of practice, education, administration, research, or theory development, to the end of improving the health of the public and RNs' pursuit of their professional career goals.
outcome	The impact of structure and process on the organization as a provider and the value/benefit to nursing professional development.
outcome measurement	The process of observing, describing, and quantifying the predefined indicator(s) of performance after an intervention is designed to impact the indicator.
planning committee	At least two individuals responsible for planning each educational activity; one individual must be a Nurse Planner, and one individual must have appropriate subject matter expertise (content expert).
position description	Description of the functions specific to the roles of Accredited Provider Program Director and Nurse Planner that relate to the Provider Unit.

process	The development, delivery, and evaluation of NCPD activities.
provider unit	Comprises the members of an organization — also referred to as accredited provider — who support the delivery of nursing continuing professional development activities.
provider-directed, learner-paced	An educational activity in which the provider controls the content of the learning activity, including the learning outcomes based on a needs assessment, and chooses the content of the learning activity, the method by which it is presented, and the evaluation methods. Learners determine the pace at which they engage in the activity (examples include print articles, self-learning modules/independent study). The provider controls the time, pace, and place of content delivery.
provider-directed, provider-paced	An educational activity in which the provider controls all aspects of the learning activity. The provider determines the learning outcomes based on a needs assessment, and chooses the content of the learning activity, the method by which it is presented, and evaluation methods (examples include live activities, live webinars). The provider controls the time, pace, and place of content delivery.
relevant financial relationship	A relationship with an ineligible company is considered relevant if the products or services of the ineligible company are related to the content of the educational activity.
resources	Available human, material, and financial assets used to support and promote an environment focused on quality NCPD and outcome measures.
single-focused organization (SFO)	An organization that exists for the sole purpose of providing NCPD.
specialty	A concentration in an area of nursing that has standards and that reflects a well-defined base of knowledge within the overall discipline of nursing.
specialty nursing organization (SNO)	A national nursing body that has a majority of voting members who are RNs practicing in a specialized nursing area, as so defined in the organization's governing documents.
structure	Characteristics of an organization, including commitment, accountability, and leadership, that are required to support the delivery of quality NCPD.

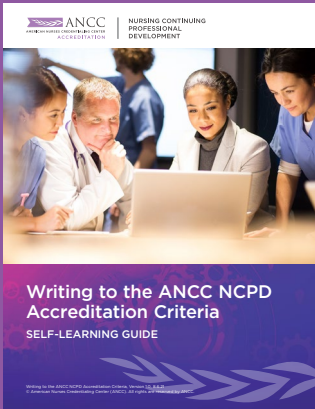
target audience	The specific registered nurse learners or healthcare team members the educational activity is intended to impact.
teaching strategies	Instructional methods and techniques that are in accord with principles of adult learning.
virtual visit	A conference between the applicant and the appraiser team via teleconference, telephone, or other electronic means to validate application findings. The appraiser team may request additional supporting evidence to seek clarification and verify compliance with accreditation criteria.

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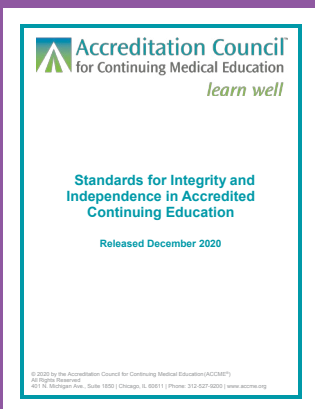
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