



NURSING CONTINUING
PROFESSIONAL
DEVELOPMENT

OUTCOME-BASED CE[®] MODEL MANUAL

AWARDING CREDIT FOR
OUTCOME-BASED PROFESSIONAL
DEVELOPMENT



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BACKGROUND

The nursing profession is constantly evolving and, as the complexity of the health care environment increases in response to issues such as changing demographics, patient safety, quality, and cost of care, nurses must play a leadership role in ensuring that health care meets the highest standards of excellence. Through participation in continuing professional development (CPD), nurses build upon their education and experience in order to remain competent practitioners, positively impacting their own performance and patient/system outcomes.

In order to meet their learning needs, nurses need a robust and innovative CPD infrastructure that supports the demands and expectations for evidence-based care, critical thinking, and problem solving.

In order to meet their learning needs, nurses need a robust and innovative CPD infrastructure that supports the demands and expectations for evidence-based care, critical thinking, and problem solving. As nurses' practice in diverse settings including clinical, administrative, education and research, and practice as members of health care teams, they must be able to participate in CPD at the individual, team, and systems-based levels.

The Institute of Medicine (IOM) has continued to advocate for collaborative and seamless care that incorporates new advances in health care education and delivery across the continuum. The directives from the IOM require that the nursing profession be actively engaged in CPD that is integrated within all practice settings.

As health care has shifted its focus to outcomes and value-based care, the American Nurses Credentialing Center (ANCC) created an innovative outcome-based continuing education (OB-CE) model to align clinical practice expectations to the CPD needs of nurses. This conceptual model is built upon a hierarchy that specifically addresses the level of learner engagement, expectations for assessment and evaluation, and potential impact on performance.



THE CONCEPTUAL MODEL

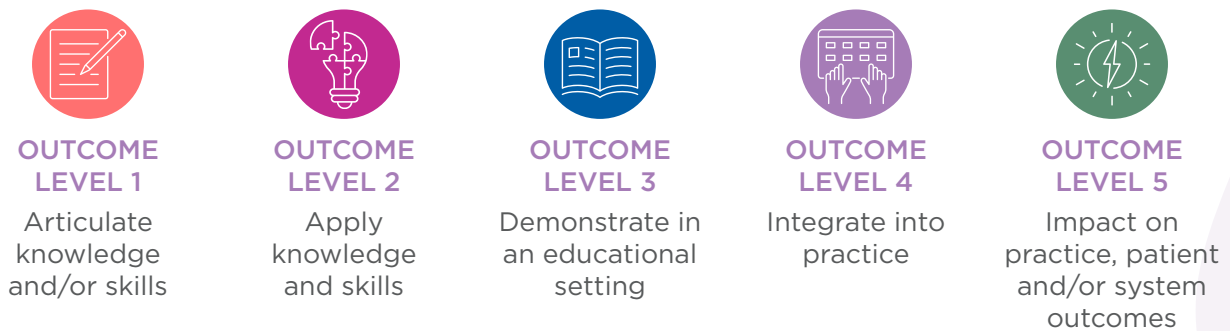
The ANCC, as the leader in the accreditation of nursing continuing professional development, created an outcomes-driven model designed to integrate a learner/team-directed educational approach that incorporates performance/quality improvement expectations into learning experiences that can positively impact nursing practice and patient/systems outcomes.

An outcome is defined as “something that follows as a result or consequence” (<http://www.merriam-webster.com/dictionary/outcome>). Outcome measures can be defined as a specific and quantifiable variable by which attainment of objectives may be judged. The literature describes a number of taxonomies for outcome measures, including taxonomies that reflect both health care and education. Miller’s Model of Clinical Competence and Moore’s Seven Levels of Continuing Medical Education (CME) Outcomes are examples of taxonomies that define levels of evaluation in relation to health care provider performance (Miller, 1990; Moore, Green & Gallis, 2009). Miller’s Model defines four levels of clinical performance: knows, knows how, shows how, and does. Moore’s Model expands on Miller’s framework, starting with participation and then moving to satisfaction, learning (declarative knowledge), learning (procedural knowledge), competence, performance, patient health, and population/community health.

This ANCC initiative builds on an outcome-based model where knowledge serves as the foundation for applied learning in an integrated performance framework. This outcome-based model acknowledges existing knowledge and skills while applying a consistent approach to outcome-based validation of learning and performance. The model acknowledges that CPD takes place in a learning environment that is impacted by such things as culture, resources, institutional structure, and systems issues. The model also acknowledges that learning is affected by individual/group behaviors, attitudes, values, judgments, and beliefs that can positively or negatively impact the achievement of desired outcomes.

The model acknowledges that CPD takes place in a learning environment that is impacted by such things as culture, resources, institutional structure, and systems issues.

The five levels for this outcome-based model start with articulation of knowledge and skills and progress through application, demonstration, integration and impact on practice, patient and/or system outcomes. See *Figure 1* (conceptual model). The levels are as follows:



The outcome-based CE credit system does not utilize a time-based metric but instead requires validation of learner engagement and performance from basic knowledge to full integrated performance and impact. The identification of professional practice gaps continue to serve as the foundation for learning and then serve as the guide for determining desired outcomes of the learning experience. The context and learning approaches will further define achievement of specific levels of competence within the ANCC system.

Regardless of what outcome measure is chosen, it is important to ensure that outcome measurements incorporate the principles of reliability and validity. Reliability is the degree to which a score or other measure remains unchanged upon test and retest (when no change is expected) or across different evaluators. Validity is the degree to which a measure assesses what it was intended to measure. When planning learning experiences, it is essential to understand these definitions and principles as they are used to ultimately evaluate the impact of the learning experience on the professional practice of nursing, interprofessional team performance, and patient care. The potential impact of this outcome-based model is that it can provide alignment with individual, team, and organizational goals of patient safety, collaboration, and increased efficiencies in providing quality health care.

It is important to note that self-report is not an acceptable method for evaluation of outcome-based credit.

FIGURE 1

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

BEHAVIORS

Impact on practice, patient, and/or system outcomes

JUDGMENT

Integrate into practice

ATTITUDES

Demonstrate in an education setting

BELIEFS

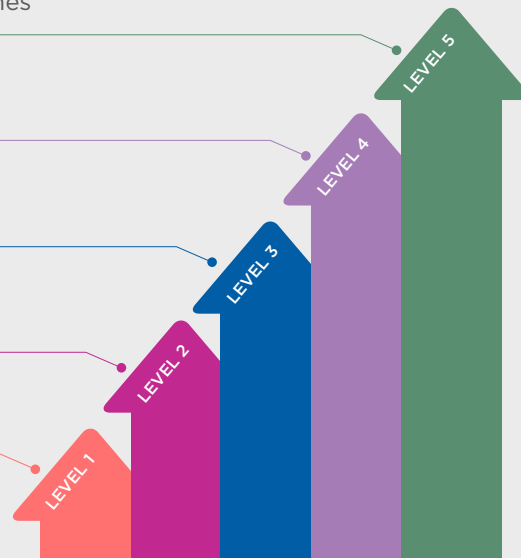
Apply knowledge and skills

VALUE

Articulate knowledge and/or skills

LEARNING ENVIRONMENT

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



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Outcome-Based Continuing Education Model
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EXPECTATIONS

- 1 Only an ANCC Accredited Provider Unit may award outcome-based CE credit.
- 2 The Nurse Planner (NP) is responsible for ensuring that the learning experience and processes are consistent with current ANCC criteria for awarding outcome-based CE credit. The NP functions as a facilitator of learning through consultation, mentoring and/or coaching, providing feedback throughout the process.
- 3 A content expert must be included in the learning experience planning process. The content expert may be the Nurse Planner, learner, or other individual. The content expert does not need to be a nurse.
- 4 The learner(s) must be actively engaged in the learning experience to earn outcome-based CE credit.
- 5 A learning experience for outcome-based CE credit can be initiated by a Nurse Planner and/or the learner(s).
- 6 Providers awarding outcome-based CE credit do so within a deliberate framework that is consistent with ANCC accreditation criteria and the outcome-based CE framework. Settings may include administration, education, research, or clinical practice.

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

- a. Address a professional practice gap (change in standard of care, problem in practice, or opportunity for improvement);
- b. Incorporate the active involvement and engagement of the learner and a Nurse Planner in the learning experience;
- c. Analyze educational needs (knowledge, skills, and/or practices) of registered nurses and/or health care team members that underlie the problem or opportunity (why the problem or opportunity exists);
- d. Identify one or more learning outcomes to be achieved by the learner(s) participating in the learning experience;
- e. Determine the timeline for the learning experience;
- f. Use strategies that engage the learner(s) in the learning experience and are congruent with the educational needs and desired learning outcomes;
- g. Choose content and educational strategies based on evidence-based practice or best available evidence;
- h. Determine an evaluation strategy that incorporates outcome-based performance measures that is reliable and valid;
- i. Evaluate achievement of learning outcomes; and
- j. Plan the learning experience independently from the influence of commercial interest organizations. (Adheres to ANCC's Content Integrity Standards for Industry Support in Continuing Nursing Educational Activities.)

DIAGRAM 1

Process for Outcome-Based CE[®] Credit



- 7 Credit will be awarded based on attainment of Outcome Levels 1 to 5. No retroactive credit can be awarded.
- 8 Accredited Providers are required to provide the official Accreditation statement for awarding outcome-based CE credit. The official ANCC Accreditation statement for awarding outcome-based CE credit must be written as follows:
 - a. [Name of Accredited Provider] **designates this learning experience as Outcome Level** [insert level number]. [Name of Accredited Provider] **is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.**
- 9 The certificate or document of completion must include (sample certificate provided):
 - ▶ Title of the activity or learning experience
 - ▶ Date of completion
 - ▶ Name and address of the Provider Unit (web address acceptable)
 - ▶ Outcome level credit awarded
 - ▶ Accreditation statement
 - ▶ Participant name

DEFINITION OF TERMS AND OUTCOME-BASED CE[®] LEVELS

Competence	The potential ability to function in a given situation.
Competency statement	The description of an expected level of performance that results from an integration of knowledge, skills, abilities, and judgment; the description is objective and measurable.
Competency	An expected and measurable level of nursing performance that integrates knowledge, skills, abilities, and judgement, based on established scientific knowledge and expectations for nursing practice (ANA, 2015); actual performance in a given setting.
Content expert	An individual with documented qualifications demonstrating education and/or experience in a particular subject matter.
Knowledge	Essential facts, evidence and/or principles associated with competencies and curriculum for nursing or interprofessional practice.
Learning experience	When a learner participates in or seeks out an opportunity for continuing professional development designed to improve knowledge, skills, performance, or to impact patient or system outcomes.
Learning outcome	A statement that reflects what the learner will be able to do as a result of participating in the educational activity.
Nurse Planner	The Nurse Planner must be a registered nurse who holds a current, unencumbered nursing license (or international equivalent) AND holds a baccalaureate degree or higher in nursing (or international equivalent) AND be actively involved in the learning experience. The Nurse Planner role may include mentoring and/or coaching.
Outcome level	The level at which outcome-based CE credit is awarded based on learner evaluation.
Performance	The execution of an action (http://www.merriam-webster.com/dictionary/performance).
Practice setting	A description of where the learner(s) is working; may include administration, clinical, education, or research.
Professional practice gap	The difference between the current state of practice and the desired state of practice.
Reliability	Degree to which a score or other measure remains unchanged upon test and retest (when no change is expected) or across different evaluators.
Skills	Actions and/or behaviors associated with competencies and curriculum for nursing or interprofessional practice. Skills include psychomotor, communication, interpersonal, and diagnostic skills. (ANA, 2015).
Validity	Degree to which a measure assesses what it was intended to measure.



Outcome Level 1: Articulate Knowledge and/or Skill

DEFINITION OF OUTCOME LEVEL

Learner is able to articulate knowledge and/or skill associated with competencies and curriculum for nursing or interprofessional practice; learner remembers, recognizes, or recalls information; ability to articulate knowledge and/or skill may not be in the context of the practice setting.

OPERATIONAL GUIDELINES FOR PROVIDERS

Providers must validate learners are able to articulate knowledge and/or skill associated with competencies and curriculum for nursing or interprofessional practice; ability to articulate knowledge and/or skill is not in context of the practice setting; knowledge and/or skill may include validation of current state.

METHODS OF EVALUATION

- ▶ Knowledge and/or skill-based assessment which may include but is not limited to:
 - Written test (multiple choice, T/F, essay)
 - Verbal test (verbal responses to questions)
 - Assessment that includes description of how learner meets expectations of level
- ▶ Learner is able to: define, list, record, recall, repeat, describe, discuss, explain, identify, classify, recognize, paraphrase, select



Outcome Level 2: Apply Knowledge and Skill

DEFINITION OF OUTCOME LEVEL

Learner is able to apply knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice; learner is able to verbalize or describe how knowledge and skills theoretically or conceptually would be applied in the practice setting.

OPERATIONAL GUIDELINES FOR PROVIDERS

Providers must validate learners are able to verbalize or describe how knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice would be applied appropriately in the practice setting; knowledge and skill may include validation of current state.

METHODS OF EVALUATION

- ▶ Application of knowledge and skill which may include but is not limited to:
 - Essay demonstrating application of knowledge and skill
 - Analysis of case study
 - Problem-based learning
- ▶ Learner is able to: apply, demonstrate, choose, illustrate, interpret, operate, solve, distinguish, analyze, compare, contrast, appraise, differentiate, discriminate, examine, select, evaluate



Outcome Level 3: Demonstrate Knowledge and Skill in a Simulated, Educational, or Practice-Like Setting

DEFINITION OF OUTCOME LEVEL

Learner demonstrates the ability to apply knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice in a simulated, educational or practice-like setting; learner has assimilated knowledge and skill, applies knowledge and skill appropriately and in context in a simulated, educational or practice-like setting.

OPERATIONAL GUIDELINES FOR PROVIDERS

Providers must validate learners are able to apply knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice appropriately and in context in a simulated, educational or practice-like setting. Providers must determine performance-based measures to assess learners and implement a method of assessment to objectively validate performance. In-situ simulation is considered an Outcome Level 3 learning experience.

METHODS OF EVALUATION

- ▶ Performance of learner ability to apply knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice appropriately and in context in a simulated, educational, or practice-like setting which may include but is not limited to:
 - Direct observation of behavior through activities such as role play, individual performance of skill, simulation scenarios
 - Computer-based simulation scenarios
- ▶ Learner is able to: perform, demonstrate, show



Outcome Level 4: Integrate into Practice

DEFINITION OF OUTCOME LEVEL

Learner demonstrates the ability to integrate knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice appropriately and in context in the actual practice setting.

OPERATIONAL GUIDELINES FOR PROVIDERS

Providers must validate learners integrate knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice appropriately and in context in the actual practice setting; Providers must determine outcome measures to assess learners and implement a method of assessment to objectively validate performance.

METHODS OF EVALUATION

- ▶ Performance of learner ability to integrate knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice appropriately and in context in the actual practice setting which may include but is not limited to:
 - Direct observation of behavior in the practice setting
 - Proxy method of validating knowledge and skill such as compliance with guideline/protocol, student/learner feedback, written documentation (e.g. writing a research protocol, writing a lesson plan, developing a budget, publication and/or presentation)
- ▶ Learner is able to: perform, do



Outcome Level 5: Impact on Practice, Patient and/or Systems Outcomes

DEFINITION OF OUTCOME LEVEL

Learner demonstrates that performance in the practice setting impacts nursing or interprofessional practice and/or patient/systems outcomes.

OPERATIONAL GUIDELINES FOR PROVIDERS

Providers must validate that learners integrate knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice appropriately and in context in the actual practice setting and have demonstrated an impact on nursing or interprofessional practice and/or patient/systems outcomes. Providers must determine the outcome measure(s) used to assess impact on nursing or interprofessional practice and/or patient/systems outcomes.

METHODS OF EVALUATION

- ▶ Performance of learner ability to integrate knowledge and skill associated with competencies and curriculum for nursing or interprofessional practice appropriately and in context in the actual practice setting with a demonstrated impact on nursing or interprofessional practice and/or patient/system outcomes which may include but is not limited to:
 - Nursing or interprofessional outcomes such as: leading, teaching, precepting, mentoring, completed research or performance improvement with demonstrated outcomes
 - Patient outcomes such as: clinical outcomes, engagement, completed research or performance improvement with demonstrated outcomes System outcomes such as: population health, financial, operational, completed research or performance improvement with demonstrated outcomes

AWARDING OUTCOME-BASED CE[®] CREDIT LEVEL 1-5

An ANCC Provider may award credit if:

- 1 The learner has engaged in the learning experience.
- 2 The learner participates in the evaluation method.
- 3 The learner meets the criteria established by the ANCC Provider for the evaluation level.

EXAMPLES

These five examples are offered to help providers operationalize planning, documenting and awarding outcome-based CE credit. They are meant to demonstrate how different professional practice gaps or opportunities for improvement may be addressed through nurses' engagement in learning experiences that are designed to improve knowledge, skills, performance, and/or patient/system outcomes. Learning experiences may be undertaken by an individual nurse or by a group of nurse learners. Measurement methods listed below are suggestions of strategies that may be considered by a provider to assess achievement of a defined level and are not meant to be inclusive or restrictive.

EXAMPLE A

Topic/Content: Clinical Setting – Fall Prevention

Gap/problem	High incidence of falls on the medical unit
Current state	Benchmarked against a national database, the fall rate on the medical unit is in the lowest quartile (25%)
Desired state	Reduce fall rate on the medical unit within the next 6 months as evidenced by fall rate equal to or greater than the median (50%)
Target audience	Nurses working on medical floor



Outcome Level 1: Articulate what makes a patient at risk for falls

- ▶ **Underlying educational need:** Ability to articulate knowledge and/or skills
- ▶ **Learning outcome:** Learners demonstrate acquisition of knowledge and skills related to factors that contribute to a patient at risk for falls following completion of [options to consider: reading assignment, webinar, CE course]
- ▶ **Evaluation methods for level:** May consider Multiple choice test, essay, literature review summary, discussion with mentor/nurse planner/content expert



Outcome Level 2: Apply knowledge in a case study; identify a patient who would be at highest risk for fall

- ▶ **Underlying educational need:** Ability to apply knowledge and skills
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills related to a patient at high risk for falls following participation in [options to consider: webinar with practice examples, live educational activity with discussion/Q&A, self-learning program with practice questions]
- ▶ **Evaluation methods for level:** May consider Case scenario with questions, ranking of risk given description of patients, essay



Outcome Level 3: Demonstrate nursing actions intended to decrease a patient's fall risk

- ▶ **Underlying educational need:** Ability to demonstrate knowledge and skills (educational or simulated setting) required to decrease a patient's fall risk
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills (educational or simulated setting) to implement nursing actions that are intended to decrease a patient's risk for falls through participation in role play, simulation scenario
- ▶ **Evaluation methods for level:** May consider Demonstrates critical actions required to reduce a patient's fall risk



Outcome Level 4: Implement falls risk assessment for all new admissions on the medical unit; evaluate nurses' performance of falls risk assessment

- ▶ **Underlying educational need:** Ability to apply knowledge and skills into current practice
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills (practice setting) within the current clinical environment (medical floor) by conducting falls risk assessments for all new admissions on the medical unit
- ▶ **Evaluation methods for level:** May consider Direct observation in the clinical setting; proxy measure such as documentation of falls risk assessment in EHR



Outcome Level 5: Retrospective review of factors that contributed to falls on the medical floor; develop and implement falls prevention protocol for medical floor; evaluate impact on fall rate including staff compliance with falls prevention protocol

- ▶ **Underlying educational need:** Ability to measure impact on practice, patient and/or system outcomes
- ▶ **Learning outcome:** Learners demonstrate impact of nursing performance by completing a QI project to reduce fall rates on the medical floor: identify mentor; outline QI project with guidance from mentor, implement QI project, evaluate outcomes
- ▶ **Evaluation methods for level:** May consider Direct observation of staff performance re: falls prevention protocol; chart audit; fall rates

EXAMPLE B

Topic/Content: Academic Setting – Develop an Interprofessional Course on Human Trafficking

Gap/problem	Dean has requested new course be developed by faculty from the schools of nursing and social work; course must be interprofessional and focused on human trafficking; course currently does not exist and faculty lack knowledge and skills to develop course
Current state	Course does not exist; nursing and social work faculty are unfamiliar with/lack skills needed to develop an interprofessional course for nursing and social work students; nursing and social work faculty rarely collaborate together
Desired state	Interprofessional course developed collaboratively by faculty from school of nursing and social work; course content on human trafficking; faculty collaboration between nursing and social work is enhanced
Target audience	Faculty in schools of nursing and social work



Outcome Level 1: Articulate strategies to promote interprofessional collaboration between students/members of different health professions

- ▶ **Underlying educational need:** Ability to articulate knowledge and/or skills
- ▶ **Learning outcome:** Learners demonstrate knowledge and skills related to strategies to promote interprofessional collaboration among students/members of different health professions through [options to consider: searching best practices in strategies to promote interprofessional collaboration; participation in webinar; review of self-paced learning activity]
- ▶ **Evaluation methods for level:** May consider Multiple choice test, essay, literature review summary, discussion with mentor/nurse planner/content expert



Outcome Level 2: Write an executive summary

- ▶ **Underlying educational need:** Ability to apply knowledge and skills
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills through creating an executive summary describing strategies to promote interprofessional collaboration among students/members of different health professions including how those strategies promote collaboration
- ▶ **Evaluation methods for level:** May consider Executive summary meets pre-established scoring matrix developed by nurse planner



Outcome Level 3: Create a course syllabus

- ▶ **Underlying educational need:** Demonstration of knowledge and skills (educational or simulated setting) required to promote interprofessional collaboration
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills (educational or simulated setting) through collaboratively creating a course syllabus between faculty from nursing and social work that includes strategies to promote interprofessional collaboration between students from the same professions
- ▶ **Evaluation methods for level:** May consider Review of course syllabus that reflects a collaborative planning process between faculty members and course curriculum embeds strategies to promote collaboration; self-report of collaboration by faculty members with course syllabus example



Outcome Level 4: Develop and launch the course

- ▶ **Underlying educational need:** Application of knowledge and skills into current practice
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills (practice setting) into the academic setting through collaboratively developing an interprofessional course on human trafficking that is designed to promote collaboration between nursing and social work students
- ▶ **Evaluation methods for level:** May consider Completion and launch of new interprofessional course; observation of collaboration among nursing and social work faculty by Associate Dean of program; strategies integrated that promote student collaboration



Outcome Level 5: Evaluate impact of developing an interprofessional course on collaboration among nursing and social work faculty (short term) and impact on participation in an interprofessional course on collaboration among nursing and social work students (long term)

- ▶ **Underlying educational need:** Measure impact of performance on patient and/or system outcomes
- ▶ **Learning outcomes:** Learners demonstrate the impact of faculty designing an interprofessional course on human trafficking on nursing and social work faculty collaboration (short term) and nursing and social work student collaboration (long term)
- ▶ **Evaluation methods for level:** May consider Instrument to measure faculty collaboration, instrument to measure student collaboration, number of interprofessional courses created in the future

EXAMPLE C

Topic/Content: Interprofessional Team — High Readmission Rates

Gap/problem	High incidence of re-hospitalization of patients with heart failure
Current state	30% of patients with heart failure are readmitted to acute care within 30 days after discharge
Desired state	Reduce readmission of patients with heart failure to 15% in the next 6 months
Target audience	Interprofessional team — nurses and pharmacists —who prepare patients with heart failure for transition to home/post-acute community care



Outcome Level 1: Articulate the predisposing factors or identify what factors impact readmission rates for patients with heart failure

- ▶ **Underlying educational need:** Ability to articulate knowledge and/or skills
- ▶ **Learning outcome:** Learners demonstrate acquisition of knowledge and skills related to predisposing factors that impact readmission rates for heart failure patients following completion of [May consider CE course, reading assignment, webinar, teach-back in-service]
- ▶ **Evaluation methods for level:** May consider Multiple choice test, essay, literature review summary, discussion with mentor/nurse planner/content expert



Outcome Level 2: Develop a summary document describing how interprofessional collaboration between nurses and pharmacists can result in reducing readmissions for patients with heart failure

- ▶ **Underlying educational need:** Ability to apply knowledge and skills
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills through creating an executive summary describing strategies to promote interprofessional collaboration among nurses and pharmacists to ensure patients with heart failure receive comprehensive education on self-care and medication management prior to discharge.
- ▶ **Evaluation methods for level:** May consider Executive summary meets pre-established scoring matrix developed by nurse planner



Outcome Level 3: Create individualized discharge care plan for patient with heart failure that incorporates an interprofessional and collaborative planning process

- ▶ **Underlying educational need:** Demonstration of knowledge and skills (educational or simulated setting) required for nurses and pharmacists to collaboratively plan for a patient with heart failure to be discharged from the acute care setting to home/post-acute community care
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills (educational or simulated setting) through collaboratively creating an individualized discharge care plan by nursing and pharmacy with patient's active involvement that includes strategies to address medication and self-care management post-discharge
- ▶ **Evaluation methods for level:** May consider Return demonstration of RN discharging patient using an individualized care plan that reflects interprofessional collaboration and addresses medication and self-care management post-discharge



Outcome Level 4: Create and implement a hospital discharge program that identifies patients with heart failure at high risk for readmission within 30 days and incorporates an individualized discharge care plan planned collaboratively between nurses and pharmacists

- ▶ **Underlying educational need:** Application of knowledge and skills into current practice
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills (practice setting) through collaboratively developing a discharge program that is designed to safely maintain patients with heart failure in the community through collaboration between nursing and pharmacists
- ▶ **Evaluation methods for level:** May consider Completion and launch of new interprofessional community-based heart failure program; observation of collaboration among nurses and pharmacists by Nurse Planner



Outcome Level 5: Assess the financial impact, patient satisfaction, readmissions rates of patients with heart failure

- ▶ **Underlying educational need:** Measure impact of performance on patient and/or system outcomes
- ▶ **Learning outcome:** Learners demonstrate the impact of nurses and pharmacists designing an interprofessional discharge program to safely maintain patients with heart failure in the community
- ▶ **Evaluation methods for level:** May consider Readmission rates for patients with heart failure post-program implementation, financial data related to readmission costs, patient satisfaction scores related to knowledge of medication management and home care at 3 months and 6 months post-discharge

EXAMPLE D

Topic/Content: Interprofessional Executive Leadership Team – Poor Collaboration and Communication

Gap/problem	The executive leadership team demonstrates poor collaboration and communication skills and have not been successful in arriving at consensus-based decisions; time to achieve decisions is lengthy resulting in high costs associated with frequent meetings and reducing time available for other job responsibilities; individual satisfaction of team members is low
Current state	Poor collaboration and communication skills among executive leadership team members with resulting high costs and low individual satisfaction
Desired state	Executive leadership team members communicate and collaborate to successfully address strategic planning initiatives for the organization; costs associated with meetings decrease; individual satisfaction of team members increases by 25% over current level
Target audience	Members of the executive leadership team



Outcome Level 1: Articulate effective collaboration and communication skills

- ▶ **Underlying educational need:** Ability to articulate knowledge and/or skills
- ▶ **Learning outcome:** Learners demonstrate acquisition of knowledge and skills following assessment of resources re: effective communication styles, articles about group cohesion, trust, and collaboration, videos, self-assessment tools
- ▶ **Evaluation methods for level:** May consider Complete checklist tool, self-assessment of understanding of collaboration and effective communication



Outcome Level 2: Identify barriers to cohesiveness in decision-making at executive leadership level

- ▶ **Underlying educational need:** Ability to apply knowledge and skills
- ▶ **Learning outcome:** Learners demonstrate application of knowledge following participation in: webinar with leadership examples, live educational activity with discussion/Q&A, self-learning program with practice questions
- ▶ **Evaluation methods for level:** May consider Case scenario with questions, essay, Audience Response System (ARS)



Outcome Level 3: Demonstrate actions intended to improve collaboration and communication among executive leadership members

- ▶ **Underlying educational need:** Ability to demonstrate knowledge and skills (educational or simulated setting) required to attain cohesive decision-making related to strategic planning
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills (educational or simulated setting) through participation in role play, simulation scenario
- ▶ **Evaluation methods for level:** May consider Direct observation — learners demonstrate critical actions required to achieve consensus in strategic planning in a simulated environment, role play



Outcome Level 4: Integrate effective communication and collaboration skills into practice by the executive leadership team

- ▶ **Underlying educational need:** Ability to apply knowledge and skills into current practice
- ▶ **Learning outcome:** Learners demonstrate application of knowledge and skills among executive leadership team members by utilizing a standard method to exchange or present information within board meetings
- ▶ **Evaluation methods for level:** May consider Conducting a 360 feedback to assess each executive leadership team member's ability to use standard method when communicating; direct observation in team meeting



Outcome Level 5: Evaluate the impact of implementing a standard method to exchange or present information on average length of time to achieve a consensus decision; length and cost of meetings; individual team member satisfaction

- ▶ **Underlying educational need:** Ability to measure impact of performance on system outcomes
- ▶ **Learning outcome:** Learners evaluate impact of improving executive leadership team performance on average length of time to reach consensus, financial ROI, and individual member satisfaction
- ▶ **Evaluation methods for level:** May consider Length of time to reach consensus, cost, satisfaction scores

EXAMPLE E

Topic/Content: Self-Directed Learning – Improve Preceptor Skills

Gap/problem	Nurse learner self-identifies personal performance gap related to ability to be an effective preceptor for new graduate nurse residents
Current state	Poor scores on preceptor evaluation survey from new graduate nurses participating in organization's residency program
Desired state	Scores in top 10% of all preceptors on preceptor evaluation summary from new graduate nurses participating in an organization's residency program (proxy measure for effective precepting)
Target audience	Individual nurse learner



Outcome Level 1: Articulates characteristics associated with effective preceptors for new graduate nurse residents

- ▶ **Underlying educational need:** Ability to articulate knowledge and/or skills
- ▶ **Learning outcome:** Nurse demonstrates acquisition of knowledge and skills for effective preceptors of new graduate nurse residents following review of resources that include: reading preceptor preparation book; review of best practices in published literature; seeking out feedback from last three new graduate nurse residents
- ▶ **Evaluation methods for level:** May consider Written summary of characteristics of effective preceptors for new graduate nurse residents reviewed by Nurse Planner



Outcome Level 2: Writes two case studies comparing and contrasting characteristics of effective preceptors for new graduate nurse residents

- ▶ **Underlying educational need:** Ability to apply knowledge and skills
- ▶ **Learning outcome:** Nurse demonstrates application of knowledge and skills through developing case studies that compare and contrast characteristics of effective preceptors for new graduate nurse residents
- ▶ **Evaluation methods for level:** May consider Review of two case studies that incorporate characteristics of effective preceptors for new graduate nurse residents



Outcome Level 3: Demonstrates actions intended to improve preceptor skills with new graduate nurse residents

- ▶ **Underlying educational need:** Ability to demonstrate knowledge and skills (educational or simulated setting) required to be an effective preceptor for new graduate nurse residents
- ▶ **Learning outcome:** Nurse demonstrates application of knowledge and skills (educational or simulated setting) through participation in role play, simulation scenario with mentor and Nurse Planner
- ▶ **Evaluation methods for level:** May consider Demonstrates critical actions required to precept new graduate nurses in a simulated environment, role play



Outcome Level 4: Integrates effective preceptor skills into practice when precepting new graduate nurse residents

- ▶ **Underlying educational need:** Ability to apply knowledge and skills into current practice
- ▶ **Learning outcome:** Nurse demonstrates application of knowledge and skills to effectively precept new graduate nurse residents in the clinical setting
- ▶ **Evaluation methods for level:** May consider New graduate nurse preceptor evaluation scores; nurse preceptor evaluation; nurse mentor/nurse planner's observed assessment summary



Outcome Level 5: Evaluates the impact of effective precepting on new graduate nurse residents' satisfaction and retention

- ▶ **Underlying educational need:** Ability to measure impact of performance on new graduate nurse residents and system outcomes
- ▶ **Learning outcome:** Nurse evaluates the impact of improving precepting skills on new graduate nurse residents' satisfaction and retention
- ▶ **Evaluation methods for level:** May consider New graduate nurse resident survey outcomes; new graduate nurse resident retention/turnover

ACTIVITY PLANNING DOCUMENT

ACCREDITED PROVIDER NAME

PLANNING DOCUMENTATION FORM FOR AWARDING OUTCOME-BASED CE CREDIT

Using 2015 ANCC Nursing Continuing Professional Development (NCPD)
Accreditation Criteria with 2019 Updates

This planning documentation form for awarding outcome-based continuing education credit must be developed by the learner(s) in collaboration with one of the accredited provider unit's Nurse Planners. The activity must be designed for learner achievement of outcomes that address one or more of the following levels:

- ▶ **Level 1:** Articulate knowledge and/or skills;
- ▶ **Level 2:** Apply knowledge and skills;
- ▶ **Level 3:** Demonstrate knowledge and skills in a simulated or educational setting;
- ▶ **Level 4:** Integrate knowledge and skills into practice;
- ▶ **Level 5:** Impact practice, patient, and/or system outcomes.

The **Nurse Planner** must be a registered nurse who holds a current, unrestricted nursing license (or international equivalent) **and** hold a baccalaureate degree or higher in nursing **and** be actively involved in planning, implementing and evaluating this continuing education activity. This person is designated as a Nurse Planner in the accredited provider unit.

Note regarding COI: OB-CE is self-directed education (the learner controls the educational goals), therefore the provider is not required to identify or disclose the presence or absence of financial relationships.

DEMOGRAPHIC DATA

TITLE OF EDUCATIONAL EXPERIENCE

NAME(S) OF RN LEARNER(S)

ANTICIPATED START AND END DATE(S) OF EDUCATIONAL EXPERIENCE

DATE OF INITIAL MEETING WITH NURSE PLANNER

NURSE PLANNER NAME AND CREDENTIALS

PLANNING DOCUMENTATION

Note: Documentation can occur incrementally (the starting level, followed by subsequent levels as appropriate) or in total when an educational activity is designed to incorporate multiple levels of learner outcomes. Based on identified learner gaps, the educational intervention can encompass 1 or more levels, beginning with the lowest relevant level to meeting expected outcomes.

A. Describe the professional practice gap the educational activity is designed to address.

B. What evidence supports the professional practice gap? Why does the professional practice gap exist?

C. What is the educational need that underlies the professional practice gap? What is this activity designed to address in relation to what the RN(s) does not know, is not able to apply, cannot demonstrate, is not integrating into practice, and/or is not impacting practice, patient or system outcomes?

D. Target audience: Individual RN, group of RNs, interprofessional group, other

E. Desired learning outcome: **If more than one level is expected, identify the expected learning outcome for each level.**

- ▶ What will the RN(s) know or be able to do as a result of completing this activity?

- ▶ What is the measurable outcome expected at each level of achievement? Note: self-report is not an acceptable outcome in outcome-based CE.

F. Content of the activity and supporting references: Describe the content that will support the educational experience. Provide supporting references and resources. If more than one level is expected, identify the expected content and references for each level (subject to change as subsequent levels are achieved and additional content/reference identified). Add incremental changes as appropriate, including the date the additional information was added.

G. Learner engagement strategies: What strategies will be incorporated to actively engage RN(s) in this educational experience?

H. Criteria for awarding level achievement credit: What criteria will be used to validate that the RN(s) has successfully completed the educational experience (or each incremental level)? Relate this to the outcome measure(s) identified in “E.”

- I. What is the evaluation method to be used to determine the success of each identified OB-CE level of achievement?

- J. What is the highest expected OB-CE level of achievement?

Document the rationale for this level (must be logical and defensible). Note: The expectation for successful completion may be changed during the course of the activity by mutual agreement of the nurse planner and the RN or RNs. If changes are made, document the new level and rationale here.



- K. Certificate of completion: A template of the certificate to be issued to the learner must be completed and included in the activity file. The certificate must include all elements as required in all NCPD activities.

- L. Disclosures: As the learner engaging in this educational experience, I attest to knowing that:

a.

is an accredited provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

b. Criteria for successful completion of this activity and receiving the negotiated number of level achievement credits are as noted in "I" above.

c. Initials of learner



NURSE PLANNER COMMENTS

Narrative notes:

Relevance of the planned educational experience for this RN (optional):

- High
- Moderate
- Low

Relevance of the planned educational experience for this organization (optional):

- High
- Moderate
- Low

Importance of this learning experience for the professional development of this RN (optional):

- High
- Moderate
- Low

Evidence of the integrity of this learning experience (optional):

- High
- Moderate
- Low

LEVEL OF ACHIEVEMENT CREDIT(S) TO BE AWARDED UPON COMPLETION

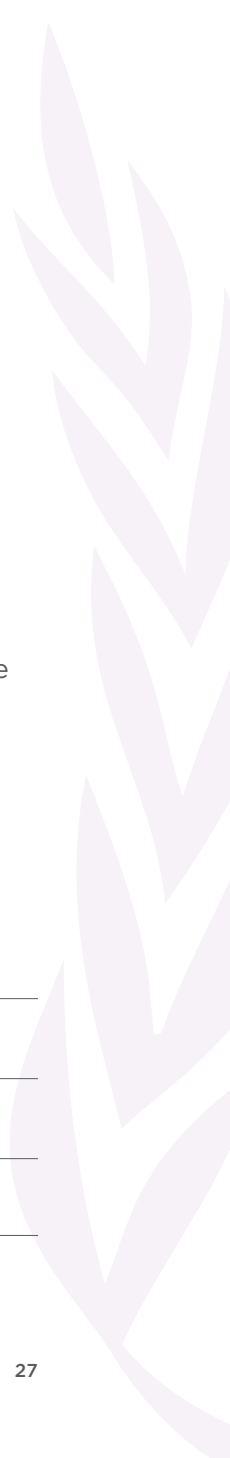
DOCUMENT COMPLETED BY

NURSE PLANNER

DATE

LEARNER

DATE



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