



ANCC Outcome- Based Continuing Education (OB-CE) Model™ Manual

**Awarding Credit for
Outcome-Based
Professional
Development**

**Nursing Continuing Professional
Development Accreditation**



American Nurses Credentialing Center

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BACKGROUND AND OVERVIEW

In the last decade, **the American Nurses Credentialing Center Accreditation (ANCC) Nursing Continuing Professional Development (NCPD) Accreditation™ Program** has focused on creating a learning ecosystem that focuses on what a registered nurse (RN) needs to know, show, and/or do to function at the highest level professionally. Further, learning is transparent; the nurse learner should be able to identify what to expect from the educational experience, including learning outcomes and identified competencies.

The ANCC NCPD Accreditation™ Program identified that as healthcare becomes increasingly outcome-driven, it needed a conceptual framework that explicitly addressed the paradigm shift in how future and current healthcare professionals will learn and be assessed for performance outcomes and competency. As the global leader in accreditation for nursing continuing professional development, in 2013, the ANCC created the first and only competency-based education (CBE), outcome-driven model that integrates a learner- or team-directed educational approach and incorporates performance and quality improvement expectations into learning experiences that can positively impact nursing practice and patient/systems outcomes.

In 2013, the ANCC OB-CE Model™ was created and tested. In 2016, after a successful pilot, ANCC released the OB-CE Model as an optional design method for ANCC Accredited Providers.

THE ANCC OB-CE MODEL OVERVIEW

The ANCC OB-CE Model™ is a CBE model in which knowledge serves as the foundation for applied learning within an integrated performance framework. The ANCC OB-CE Model acknowledges existing knowledge and skills while employing a consistent approach to validating learning and performance outcomes. The model acknowledges that continuing professional development (CPD) occurs in a learning environment influenced by factors such as culture, resources, institutional structure, and systemic issues. The model also acknowledges that learning is influenced by individual/group behaviors, attitudes, values, judgments, and beliefs, which can either positively or negatively impact the achievement of desired outcomes.

Often, competency and CBE are approached without having a true understanding of what competency means. One significant advantage of CBE is its personalized learning pathway. Therefore, the ANCC has defined CBE in alignment with nursing profession leaders as “an instructional approach that emphasizes demonstrated learning and the practical application of knowledge and skills, rather than the amount of time spent in the learning environment. Learners’ progress is measured through a system of rigorous assessments that demonstrate mastery of the content required for a particular competency or area of study/performance” (Bushway et al., 2018; Competency-Based Education Network, n.d.).

CBE allows learners to progress at their own pace, accommodating different learning styles and speeds, and leads to more meaningful and enduring learning outcomes as learners advance, once they have truly mastered the material. The ANCC NCPD Accreditation program defines competence as “the potential ability to function in a given situation (ANCC, 2025).” It is important to note that competencies can be individualized or personalized not only to a learner but also to a group or team of learners. CBE promotes a learning environment focused on learners’ growth and development. It requires that learners “not be left on their own” and that learning tools and resources are thoughtfully selected to achieve the identified outcomes (Bushway et al., 2018, p. 36).

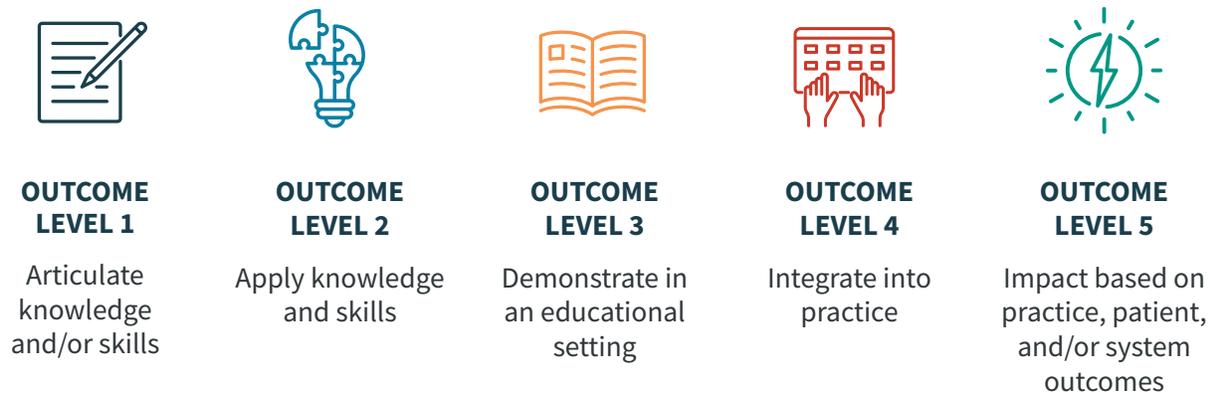
The model acknowledges that continuing professional development occurs in a learning environment influenced by factors such as culture, resources, institutional structure, and systemic issues.

American Nurses Credentialing Center. (2026) *ANCC Outcome-Based Continuing Education (OB-CE) Manual: Awarding Credit for Outcome-Based Professional Development: Version 4.0*. American Nurses Enterprise.

ANCC OB-CE COMPETENCY LEVELS™ MODEL

The five levels of the ANCC OB-CE Competency 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).

Figure 1: ANCC OB-CE Competency Levels Model:



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THE ANCC OB-CE COMPETENCY LEVELS ARE AS FOLLOWS:

Competence in a professional or educational setting can be evaluated through various methods, each aligned with different levels of knowledge and skill acquisition.

- At the first level, “Articulate knowledge and/or skill,” individuals must clearly express and explain their acquired knowledge and skills, as measured through written or verbal assessments.
- At the second level, “Apply knowledge and skill,” assessment methods include essays, case studies, and problem-based learning.
- At the third level, “Demonstrate in an educational setting,” assessment methods include demonstrating knowledge and skill in simulated, educational, or practice-like settings through approaches such as role-play and simulation.
- At the fourth level, “Integrate into practice,” assessment methods include direct observation in practice settings and proxy data such as reports or performance metrics.
- The fifth and final level evaluates the impact on professional nursing practice and patient and/or system outcomes, including evaluation of roles in leading, teaching, mentoring, or completing research or performance improvement projects, alongside analysis of patient outcomes.

Award of ANCC OB-CE Level Credit™

In the traditional, also referred to as “**the core**” ANCC NCPD Accreditation standards, the ANCC credit hour—or contact hour—system focuses on “seat-time,” or time spent in the educational experience, rather than on assessing outcomes and/or competence (Graebe, 2019). The ANCC OB-CE Model does not use a credit system that includes a time-based metric; instead, it requires validation of learner engagement and performance, from basic knowledge to fully integrated performance and impact. In CBE and the ANCC OB-CE Model, assessing competence and achieving learner outcomes are the focus, with time as the variable (Graebe, 2019). Therefore, in the OB-CE Model, time is not a factor in the learning experience or in the assessment of mastery of identified competencies and learning outcomes.

ANCC OB-CE Level Credit

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



NOTE: The ANCC Outcome-Based CE (OB-CE) Model has a separate, distinct credit system called OB-CE Level Credit. Accredited Providers may plan hybrid learning experiences using the OB-CE Model, which awards OB-CE Level Credit, and “the core” NCPD Accreditation standards, which award contact hours.

Outcomes and Outcome Taxonomies

In CBE and outcomes-driven CPD, a backward planning approach to designing educational experiences is encouraged to facilitate the application of learning in its appropriate context—knowledge, skill, and/or practice (competence). In CPD, this strategic approach is often referred to as a professional practice gap. The professional practice gap is the difference between the current state of “what is” and the desirable or achievable state “what should be.”

An outcome is defined as “something that follows as a result or consequence” (www.merriam-webster.com/dictionary/outcome). Outcome measures are specific, quantifiable variables by which the attainment of objectives may be judged. The literature describes several taxonomies for outcome measures, including those that encompass both healthcare and education. Miller’s Model of Clinical Competence and Moore’s Seven Levels of Continuing Medical Education Outcomes are examples of taxonomies that define levels of evaluation for healthcare 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 Seven Levels expand 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.

Competence and Performance-Based Assessment

The identification of professional practice gaps continues to serve as the foundation for learning, guiding the identification of professional competencies, the determination of desired outcomes, and the subsequent learning experience. The context and learning approaches will further define achievement of specific levels of competence within the OB-CE Model. Competence is not a one-time achievement, but must be maintained, nurtured, and enhanced through lifelong learning and professional development (Graebe & Roy, 2025). No single tool or method can guarantee or fully capture competence on its own. Competence cannot be assessed through a single action or moment in time; instead, it must be evaluated longitudinally, across diverse contexts, and by employing varied assessment strategies (Giddens, 2020).

The ANCC NCPD Accreditation Program defines competence as the foundational abilities required for nursing practice in a given context (ANCC, 2025). Moreover, it can be used to describe an individual who demonstrates competence and performs the foundational abilities required for nursing practice in a given context (ANCC, 2025).

Both the OB-CE Model and CBE require mastery in the domains of knowledge, skill, and/or practice (abilities)—including intellectual or professional behaviors. Reliance on self-report is insufficient, as competency must be observable and measurable through valid, performance-based assessments. Assessment of mastery within the OB-CE Levels requires direct evidence using multiple strategies, ensuring that assessments capture true professional competence rather than self-perception (Aqtash et al., 2022; Baxter & Norman, 2011; Forsman et al., 2020; Gorinelli et al., 2025; Kajander-Unkuri et al., 2016; Liaw et al., 2012).

Competency assessment can also be evaluated through proxy measures, such as evidence of impact on practice, patients, and/or system outcomes.



NOTE: Self-report is not an acceptable method for evaluating ANCC OB-CE Level Credit.

Human Skills and the Learning Environment

Organizations are seeking employees who can demonstrate mastery of technical skills and who demonstrate compassion, emotional intelligence, patience, and kindness (McKinsey, 2024). The OB-CE Model recognizes the importance of these human skills as essential portions of the learning process that must be incorporated at all levels. The model (Figure 2) recognizes that attitudes, values, judgments, and beliefs influence the learner's ability to progress through the OB-CE Model and demonstrate mastery of competencies (ANCC, 2019).

Reliability, Validity, and Intended Impact

Regardless of the chosen outcome measure, it is important to ensure it incorporates 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 (IOM, 2011). 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 professional nursing practice, the interprofessional team performance, and patient care. The potential impact of this OB-CE Model is that it can align with individual, team, and organizational goals for patient safety, collaboration, and increased efficiency in providing quality healthcare. Using competencies and mastery of competence, as currency can support the acknowledgment and validation of learning in academic or practical contexts while also removing time and money as major barriers to professional development and academic advancement (Graebe et al., 2025; Lengetti, 2025).

Figure 2: ANCC OB-CE Conceptual Model™



BEHAVIORS

Impact on practice, patient, and/or system outcomes

JUDGMENTAL

Integrate into practice

ATTITUDES

Demonstrate in an education setting

BELIEFS

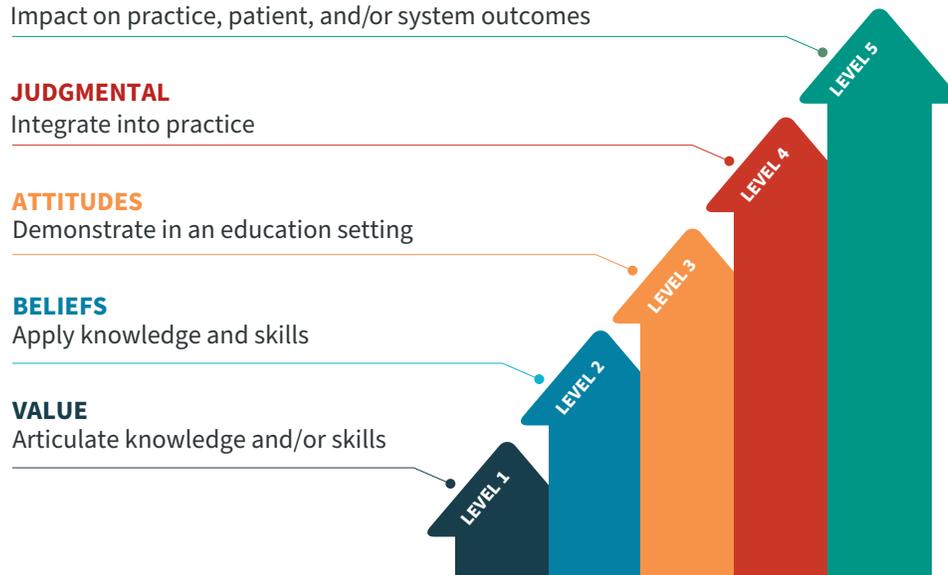
Apply knowledge and skills

VALUE

Articulate knowledge and/or skills

LEARNING ENVIRONMENT

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



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Expectations

1. Only an ANCC Accredited Provider may award ANCC Outcome-Based CE Level Credit.
2. The Nurse Planner (NP) is responsible for ensuring that the learning experience and processes are consistent with the current ANCC NCPD Accreditation Criteria for awarding ANCC OB-CE Level Credit. The NP functions as a facilitator of learning through consultation, mentoring, and/or coaching, providing feedback throughout the process.
3. The learner(s) must be actively integrated and engaged in the learning experience to earn OB-CE Level Credit.
4. A learning experience for ANCC OB-CE Level credit can be initiated by a Nurse Planner and/or the learner(s).
5. ANCC Accredited Providers awarding OB-CE Level Credit do so within a deliberate framework that is consistent with core ANCC NCPD Accreditation criteria and the OB-CE Model.
6. This model may be applied across settings to include administration, academia, education, research, policy, or clinical practice.

7. ANCC OB-CE Level Credit will be awarded based on attainment of Outcome Levels 1 to 5.



NOTE: No retroactive credit can be awarded.

8. Accredited Providers are required to provide the official Accreditation statement for awarding ANCC OB-CE Level Credit. The official ANCC Accreditation statement for awarding OB-CE Level Credit must be written as follows:
- [Name of Accredited Provider] designates this learning experience as ANCC OB-CE Level [insert level number] Credit. [Name of Accredited Provider] is accredited as a provider of nursing continuing professional development 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 Accredited Provider (web address acceptable)
 - ANCC OB-CE Level Credit awarded
 - Accreditation statement
 - Space for Participant name
10. When an educational activity is designed to incorporate multiple levels of learner outcomes, documentation can occur incrementally (starting at the initial level and proceeding to subsequent levels as needed) or in a single step. Based on identified learner gaps, the educational intervention can encompass one or more levels, starting with the lowest relevant level to achieve the expected outcomes. The expectation for successful completion may be changed during the activity by mutual agreement of the nurse planner and the RN or RNs. If changes are made, document the new level and rationale.

In alignment with the core ANCC NCPD Accreditation criteria, the following principles of high-quality educational design are employed when designing and implementing OB-CE:

Learner involvement in planning	Incorporate active involvement and engagement from the learner or learner group and the nurse planner in the planning of the learning experience.
Address a professional practice gap(s)	A change in standard of care, a problem in practice, or an opportunity for improvement.
Underlying educational need(s)	Analyze the 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).
Identify competencies and professional sources	Select one more appropriate established competencies from a professional source that aligns with the professional practice gap and underlying educational need of the learning experience.
Learning Outcome(s)	Develop measurable learning outcomes aligned with the identified practice gaps, underlying educational needs, and identified competencies.
Assessment Method(s)	Determine an assessment method that incorporates reliable, valid outcome-based performance measures. ◆ Note: Self-report is not an acceptable method for evaluating ANCC OB-CE Level Credit.
Timeline	Determine the timeline for the learning experience. ◆ Note: Remember, time is the variable, learning is fixed.
Active Learning Strategies	Use active learning strategies that engage the learner(s) in the learning experience and are congruent with the educational needs and desired learning outcomes.
Evidence-based content	Choose content and educational strategies based on evidence-based practice or best available evidence.

Summative Evaluation	Evaluate the achievement of learning outcomes and if there are changes needed for future planning.
Independence from the influence of ineligible companies	Plan the learning experience independently from the influence of ineligible companies and <u>adhere to ANCC's Standards for Integrity and Independence in Accredited Continuing Education.</u>

FIGURE 3: ANCC CONTINUING EDUCATION (OB-CE) EDUCATIONAL DESIGN PROCESS MODEL™



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DEFINITION OF TERMS

ability	The capacity to act effectively. It refers to a registered nurse’s capacity, whether physical, cognitive, emotional, or technical, to perform a task or action.
competence	The foundational abilities required for nursing practice in a given context. Moreover, it can be used to describe an individual who demonstrates competence and performs the foundational abilities required for nursing practice in a given context (ANCC, 2025).
competency	Is the ability to apply knowledge, skills, and/or abilities, including intellectual behaviors that are required to meet performance and outcomes in professional nursing practice in a given context (ANCC, 2025; Bushway et al., 2018).
competency-based education (CBE)	Is an instructional approach that emphasizes demonstrated learning and the practical application of knowledge and skills rather than the amount of time spent in the learning environment. Learners’ progress is measured through a system of rigorous assessments that demonstrate mastery of the content required for a particular competency or area of study/performance (Bushway et al., 2018; Competency-Based Education Network, n.d.).
competency statement	Is the description of an expected level of performance that results in the integration of knowledge, skills, abilities, and judgment; the description is objective and measurable (ANCC, 2025).
intellectual behaviors	Are observable actions and thought processes that demonstrate the application of knowledge, reasoning, and judgment, focusing on behaviors, attitudes, values, judgments, and beliefs that can positively or negatively impact the achievement of desired outcomes.
judgment	Is the cognitive and ethical process of making decisions by integrating critical thinking, problem-solving, ethical reasoning, and decision-making.
knowledge	Encompasses essential facts, theory, science, and humanities, evidence, and/or standards of professional practice associated with competencies and curriculum for nursing or interprofessional practice.
learning experience	When a learner participates in or seeks out an opportunity for CPD designed to improve knowledge, skills, and 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	An RN 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 and 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.
outcome level	The level at which outcome-based CE credit is awarded based on learner evaluation.
performance	The execution of an action (www.merriam-webster.com/dictionary/performance).
practice setting	A description of where the learner(s) are working; may include administration, clinical, education, academia, 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	Are actions and/or behaviors associated with competencies and curriculum for nursing or interprofessional practice. Skills include psychomotor, communication, interpersonal, and diagnostic skills.
validity	Degree to which a measure assesses what it was intended to measure.

ANCC OB-CE COMPETENCY LEVELS



ANCC OUTCOME LEVEL 1: Articulate Knowledge and/or Skill

Definition of Outcome Level

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

Operational Guidelines for Providers

Providers must validate that learners are able to articulate knowledge and/or skill associated with competencies and curriculum for nursing or interprofessional practice; the ability to articulate knowledge and/or skill is not in the context of the practice setting; knowledge and/or skill may include validation of the 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 a description of how the learner meets the expectations of the level
- Learner is able to: define, list, record, recall, repeat, describe, discuss, explain, identify, classify, recognize, paraphrase, select



ANCC OUTCOME LEVEL 2: Apply Knowledge and Skill

Definition of Outcome Level

The learner can apply knowledge and skills associated with competencies and curriculum for nursing or interprofessional practice; the 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 that learners can 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 the 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



ANCC 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 skills associated with competencies and curriculum for nursing or interprofessional practice in a simulated, educational, or practice-like setting; learner has assimilated knowledge and skills and applies them appropriately and in context.

Operational Guidelines for Providers

Providers must validate that learners are able to apply knowledge and skills associated with competencies and the 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 an assessment method to validate performance objectively. 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 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, and simulation scenarios
 - Computer-based simulation scenarios
- Learner is able to: perform, demonstrate, show



ANCC OUTCOME LEVEL 4: Integrate into Practice

Definition of Outcome Level

Learner demonstrates the ability to integrate knowledge and skills 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 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; Providers must determine outcome measures to assess learners and implement a method of assessment to validate performance objectively.

Methods of Evaluation

- Performance of learner's 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 guidelines/protocols, 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



ANCC OUTCOME LEVEL 5:

Impact on Practice, Patient, and/or System Outcomes

Definition of Outcome Level

The learner demonstrates that performance in the practice setting impacts nursing or interprofessional practice and/or patient/system outcomes.

Operational Guidelines for Providers

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

Methods of Evaluation

- Performance of the learner's ability to integrate knowledge and skill associated with competencies and the 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 are 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 ANCC OUTCOME-BASED CE LEVEL CREDIT

ANCC OB-CE Level Credit

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

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 Accredited Provider for the evaluation level.

EXAMPLES

These five examples are offered to help providers operationalize the planning, documentation, and awarding of OB-CE Level Credit. They are intended to demonstrate how different professional practice gaps or opportunities for improvement can be addressed through RNs' engagement in learning experiences designed to enhance knowledge, skills, performance, and/or patient/system outcomes. Learning experiences may be undertaken by an individual RN or by a group of RN learners. The measurement methods listed below are suggestions of strategies a provider may consider assessing achievement of a defined level and are not intended 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 six months as evidenced by fall rate equal to or greater than the median (50%).
target audience	RNs working on the medical floor.



ANCC OUTCOME LEVEL 1: Articulate what makes a patient at risk for falls

- **Underlying educational need:** Ability to articulate knowledge and/or skills
- **Competency:** American Health Care Association
 - Competency 1.1 Demonstrate an understanding of risks that lead to falls (AHCA, 2013)
- **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



ANCC 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
- **Competency:** American Health Care Association
 - Competency 1.4 Review residents' personal habits and lifestyles that may contribute to falls (AHCA, 2013).
- **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, and an essay



ANCC 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
- **Competency:** American Health Care Association
 - Competency 1.2 Demonstrate effective fall prevention strategies (AHCA, 2013)
 - Competency 2.2 Apply skills in effective equipment use, assistive devices, and placement (AHCA, 2013)
- **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 demonstration of critical actions required to reduce a patient's fall risk



ANCC OUTCOME LEVEL 4: Implement falls risk assessment for all new admissions on the medical unit; evaluate RNs' performance of falls risk assessment

- **Underlying educational need:** Ability to apply knowledge and skills into current practice
- **Competency:** American Health Care Association
 - Competency 3.2 Participate in the organization's efforts to manage fall risk and serious injury (AHCA, 2013)
- **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 measures such as documentation of falls risk assessment in electronic health record



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

- **Underlying educational need:** Ability to measure impact on practice, patient, and/or system outcomes
- **Competency:** American Health Care Association
 - Establish an effective fall risk management program by improving outcomes performance by using a quality assurance and performance improvement process (AHCA, 2013)
- **Learning outcome:** Learners demonstrate impact of nursing performance by completing a quality improvement (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 regarding falls prevention protocol; chart audit; fall rates

Example B

TOPIC/CONTENT: ACADEMIC SETTING — DEVELOP AN INTERPROFESSIONAL COURSE ON HUMAN TRAFFICKING

gap/problem The Dean has requested that a new course be developed by faculty from the schools of nursing and social work; the course must be interprofessional and focused on human trafficking. The course currently does not exist, and the faculty lack the knowledge and skills to develop the course.

current state The course does not exist; nursing and social work faculty are unfamiliar with/lack the skills needed to develop an interprofessional course for nursing and social work students; nursing and social work faculty rarely collaborate.

desired state An interprofessional course developed collaboratively by faculty from the school of nursing and social work; the course content on human trafficking; faculty collaboration between nursing and social work is enhanced.

target audience Faculty in schools of nursing and social work.



ANCC 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
- **Competency:** IPEC Competencies
 - Engage in continuous professional and interprofessional development to enhance team performance and collaboration (Interprofessional Education Collaborative, 2023)
- **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 a 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



ANCC OUTCOME LEVEL 2: Write an executive summary

- **Underlying educational need:** Ability to apply knowledge and skills
- **Competency:** IPEC Competencies
 - Engage in continuous professional and interprofessional development or enhance team performance and collaboration (Interprofessional Education Collaborative, 2023)
- **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 the executive summary meeting preestablished scoring matrix developed by the Nurse Planner



ANCC OUTCOME LEVEL 3: Create a course syllabus

- **Underlying educational need:** Demonstration of knowledge and skills (educational or simulated setting) required to promote interprofessional collaboration
- **Competency:** IPEC Competencies
 - Use unique and complementary abilities of all members of the team to optimize health and patient care (Interprofessional Education Collaborative, 2023).
- **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 profession
- **Evaluation methods for level:** May consider a 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 a course syllabus example



ANCC OUTCOME LEVEL 4: Develop and launch the course

- **Underlying educational need:** Application of knowledge and skills in current practice
- **Competency:** IPEC Competencies
 - Use unique and complementary abilities of all members of the team to optimize health and patient care (Interprofessional Education Collaborative, 2023).
- **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 the completion and launch of new interprofessional course; observation of collaboration among nursing and social work faculty by the Associate Dean of the program; strategies integrated that promote student collaboration



ANCC 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
- **Competency:** IPEC Competencies
 - Describe how professionals in health and other fields can collaborate and integrate clinical care and public health interventions to optimize population health (Interprofessional Education Collaborative, 2023)
- **Learning outcomes:** Learners demonstrate the impact of faculty designing an interprofessional course on human trafficking for nursing and social work faculty collaboration (short term) and nursing and social work student collaboration (long term)
- **Evaluation methods for level:** May consider an instrument to measure faculty collaboration, an instrument to measure student collaboration, and the number of interprofessional courses created in the future

Example C

TOPIC/CONTENT: INTERPROFESSIONAL TEAM — HIGH READMISSION RATES

gap/problem	High incidence of rehospitalization of patients with heart failure.
current state	Thirty percent of patients with heart failure are readmitted to acute care within 30 days after discharge.
desired state	Reduce heart failure readmissions to 15% over the next six months.
target audience	Interprofessional team—RNs and pharmacists—who prepare patients with heart failure for transition to home/post-acute community care.



ANCC 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
- **Competency:** QSEN competencies
 - Describe strategies for learning about the outcomes of care in the setting in which one is engaged in clinical practice (Quality and Safety Education for Nurses, 2022)
- **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



ANCC OUTCOME LEVEL 2: Develop a summary document describing how interprofessional collaboration between RNs and pharmacists can result in reducing readmissions for patients with heart failure

- **Underlying educational need:** Ability to apply knowledge and skills
- **Competency:** QSEN competencies
 - Recognize that nursing and other health professions are part of systems of care and care processes that affect outcomes for patients and families (Quality and Safety Education for Nurses, 2022)
- **Learning outcome:** Learners demonstrate application of knowledge and skills through creating an executive summary describing strategies to promote interprofessional collaboration among RNs 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 that an executive summary meets the preestablished scoring matrix developed by the Nurse Planner



ANCC 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 RNs 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
- **Competency:** QSEN competencies
 - Use tools to make processes of care explicit (Quality and Safety Education for Nurses, 2022)
- **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 the 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



ANCC OUTCOME LEVEL 4: Create and implement a hospital discharge program that identifies patients with heart failure at high risk for readmission within thirty days and incorporates an individualized discharge care plan planned collaboratively between RNs and pharmacists

- **Underlying educational need:** Application of knowledge and skills into current practice
- **Competency:** QSEN competencies
 - Demonstrate effective use of strategies to reduce risk of harm to self or others and standardized practices that support safety and quality (Quality and Safety Education for Nurses, 2022)
- **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 RNs and pharmacists by Nurse Planner



ANCC 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
- **Competency:** QSEN competencies
 - Use measures to evaluate the effect of change. Practice aligning the aims, measures, and changes involved in improving care (Quality and Safety Education for Nurses, 2022)
- **Learning outcome:** Learners demonstrate the impact of RNs and pharmacists designing an interprofessional discharge program to maintain patients with heart failure in the community safely
- **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 three months and six 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 has not been successful in reaching consensus-based decisions; the time to reach decisions is lengthy, resulting in high costs associated with frequent meetings and reducing time available for other job responsibilities; individual satisfaction among team members is low.

current state Poor collaboration and communication skills among executive leadership team members resulted in high costs and low individual satisfaction.

desired state Executive leadership team members communicate and collaborate to address strategic planning initiatives for the organization successfully; costs associated with meetings decrease; individual satisfaction among team members increases by 25% more than the current level.

target audience Members of the executive leadership team.



ANCC OUTCOME LEVEL 1:

Articulate effective collaboration and communication skills

- **Underlying educational need:** Ability to articulate knowledge and/or skills
- **Competency:** IPEC Competencies
 - Communicate one’s roles and responsibilities clearly. Communicate clearly, authentically, and with cultural humility, avoiding discipline-specific terminology (Interprofessional Education Collaborative Competencies, 2023).
- **Learning outcome:** Learners demonstrate acquisition of knowledge and skills following assessment of resources regarding effective communication styles; articles about group cohesion, trust, and collaboration; videos; and self-assessment tools
- **Evaluation methods for level:** May consider a complete checklist tool, self-assessment of understanding of collaboration and effective communication



ANCC OUTCOME LEVEL 2: Identify barriers to cohesiveness in decision-making at executive leadership level

- **Underlying educational need:** Ability to apply knowledge and skills
- **Competency:** IPEC Competencies
 - Use constructive feedback to connect, align, and accomplish team goals (Interprofessional Education Collaborative Competencies, 2023)
- **Learning outcome:** Learners demonstrate application of knowledge following participation in a webinar with leadership examples, a live educational activity with discussion/Q&A, and a self-learning program with practice questions
- **Evaluation methods for level:** May consider case scenario with questions, essay, Audience Response System



ANCC 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
- **Competency:** IPEC Competencies
 - Practice active listening that encourages ideas and opinions of other team members. Use shared leadership practices to support team effectiveness (Interprofessional Education Collaborative Competencies, 2023)
- **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



ANCC 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
- **Competency:** IPEC Competencies
 - Use constructive feedback to connect, align, and accomplish team goals. Facilitate team coordination to achieve safe, effective care and health outcomes (Interprofessional Education Collaborative Competencies, 2023)
- **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 360-degree feedback to assess each executive leadership team member's ability to use standard methods when communicating; direct observation in team meetings



ANCC 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 the impact of performance on the system outcomes
- **Competency:** IPEC Competencies
 - Discuss organizational structures, policies, practices, resources, access to information, and timing issues that impact the effectiveness of the team. Examine one’s position, power, role, unique experience, expertise, and culture to improve communication and manage conflicts (Interprofessional Education Collaborative Competencies, 2023)
- **Learning outcome:** Learners evaluate the impact of improving executive leadership team performance on average length of time to reach consensus, financial return on investment, 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 a personal performance gap related to the ability to be an effective preceptor for new graduate RN residents.
current state	Poor scores on the preceptor evaluation survey from new graduate RNs participating in the organization’s residency program.
desired state	Scores in the top 10% of all preceptors on preceptor evaluation summary from new graduate RNs participating in an organization’s residency program (proxy measure for effective precepting).
target audience	Individual nurse learner.



ANCC OUTCOME LEVEL 1: Articulates characteristics associated with effective preceptors for new graduate RN residents

- **Underlying educational need:** Ability to articulate knowledge and/or skills
- **Competency:** ANPD Preceptor Competencies
 - Recognizes the impact of the preceptor’s personal attitudes/attributes, behaviors, and competency level on the preceptee (Association of Nursing Professional Development, 2023)
- **Learning outcome:** RN demonstrates acquisition of knowledge and skills for effective preceptors of new graduate RN residents following review of resources that include reading the preceptor preparation book, review of best practices in published literature, and seeking out feedback from the last three new graduate RN residents
- **Evaluation methods for level:** May consider a written summary of the characteristics of an effective preceptor for new graduate RN residents reviewed by the Nurse Planner



ANCC OUTCOME LEVEL 2: Writes two case studies comparing and contrasting characteristics of effective preceptors for new graduate RN residents

- **Underlying educational need:** Ability to apply knowledge and skills
- **Competency:** ANPD Preceptor Competencies
 - Modifies experiences based on assessment of preceptee’s individual needs (Association of Nursing Professional Development, 2023)
- **Learning outcome:** RN demonstrates application of knowledge and skills through developing case studies that compare the characteristics of effective preceptors for new graduate RN residents
- **Evaluation methods for level:** May consider the review of two case studies that incorporate characteristics of effective preceptors for new graduate RN residents



ANCC OUTCOME LEVEL 3: Demonstrates actions intended to improve preceptor skills with new graduate RN residents

- **Underlying educational need:** Ability to demonstrate knowledge and skills (educational or simulated setting) required to be an effective preceptor for new graduate RN residents
- **Competency:** ANPD Preceptor Competencies
 - Use a positive approach to ask questions, promote self-awareness, search for solutions, and focus on processes (Association of Nursing Professional Development, 2023)
- **Learning outcome:** RN 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 RNs in a simulated environment, role-play



ANCC OUTCOME LEVEL 4: Integrates effective preceptor skills into practice when precepting new graduate RN residents

- **Underlying educational need:** Ability to apply knowledge and skills to current practice
- **Competency:** ANPD Preceptor Competencies
 - Creates purposeful learning experiences related to the preceptee’s assessed learning needs and interests. Demonstrates healthy and safe behaviors (Association of Nursing Professional Development, 2023)
- **Learning outcome:** RN demonstrates application of knowledge and skills to precept new graduate RN residents in the clinical setting effectively
- **Evaluation methods for level:** May consider New graduate RN preceptor evaluation scores, nurse preceptor evaluation, nurse mentor/Nurse Planner’s observed assessment summary



ANCC OUTCOME LEVEL 5: Evaluates the impact of effective precepting on new graduate RN residents’ satisfaction and retention

- **Underlying educational need:** Ability to measure impact of performance on new graduate RN residents and system outcomes
- **Competency:** ANPD Preceptor Competencies
 - Provides opportunities for unit, interprofessional, and organizational engagement for the preceptee. Includes the preceptee in unit/department activities. Reflects on own leadership competencies (Association of Nursing Professional Development, 2023)
- **Learning outcome:** RN evaluates the impact of improving precepting skills on new graduate RN residents’ satisfaction and retention
- **Evaluation methods for level:** May consider a new graduate RN resident survey outcomes, new graduate RN resident retention/turnover

ACCREDITED PROVIDER OB-CE PLANNING TEMPLATE

PLANNING DOCUMENTATION FORM FOR AWARDING ANCC OUTCOME-BASED LEVEL CREDIT

Using 2025 ANCC Nursing Continuing Professional Development (NCPD) Accreditation Criteria

This planning documentation form for awarding OB-CE credit **must be developed by the learner(s) in collaboration with an Accredited Provider's Nurse Planner**. The activity must be designed for learner achievement of outcomes that address one or more of the following levels:

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

The Nurse Planner (NP) must be a registered nurse (RN) with a current, unrestricted nursing license (or international equivalent) and 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 by the Accredited Provider.

NURSE PLANNER FOR THIS ACTIVITY:

Name *and* Credentials: _____

Title of Educational Experience: _____

Activity Location: _____

Activity Format: Live Blended Other: _____

Anticipated Date(s) of Activity: _____

Activity to Be Completed By: _____

Target Audience: The target audience *must* include the RN but may also include other healthcare team members.

- | | |
|--|---|
| <input type="checkbox"/> RN (includes APRNs) (required) | <input type="checkbox"/> Social worker(s) |
| <input type="checkbox"/> LPN/LVN | <input type="checkbox"/> CNA |
| <input type="checkbox"/> PA | <input type="checkbox"/> MD |
| <input type="checkbox"/> Other (describe) | |

REMINDER: When an educational activity is designed to incorporate multiple levels of learner outcomes, documentation can occur incrementally (starting at the initial level and proceeding to subsequent levels as needed) or in a single step. Based on identified learner gaps, the educational intervention can encompass one or more levels, starting with the lowest relevant level to achieve the expected outcomes.

The expectation for successful completion may be changed during the activity by mutual agreement of the NP and the RN or RNs. If changes are made, document the new level and rationale here.

INTENDED ANCC OB-CE LEVEL CREDIT TO BE AWARDED; CHECK ALL THAT APPLY:

Level 1 Level 2 Level 3 Level 4 Level 5

Actual ANCC OB-CE Level Credit to be awarded; check all that apply:

Level 1 Level 2 Level 3 Level 4 Level 5

Document the rationale for each level awarded (must be logical and defensible):

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 required elements for all Accredited NCPD activities.
- Learners are to be awarded OB-CE Level Credit for each level achieved but may only receive one certificate of completion. However, each level **MUST** be included on the certificate of completion.
- May also include the inside course description, the competencies, and the learning outcomes achieved.

Required Disclosures and Attestation:

A list of learners' names and credentials, with their acknowledgment, must be included.

As the learner engaging in this educational experience, I attest to knowing that:

1. Is accredited as a provider of NCPD by the ANCC's Commission on Accreditation.
2. Criteria for successful completion of this activity to receive the negotiated number of OB-CE Level Credits are as noted above.



NOTE: EDP1 through EDP5 must be aligned to ensure that every component of the educational activity consistently addresses the identified professional practice gap(s). The Nurse Planner and learner(s) must collectively review these elements to confirm that the activity is designed to address the gap and includes a clear plan for assessing its impact on the learner and/or the learner’s professional practice.

LEVEL 1—ARTICULATE KNOWLEDGE AND/OR SKILLS <input type="checkbox"/> NOT APPLICABLE	
<p>EDP1: Professional practice gap</p>	
<p>EDP2: Educational needs that underlie the professional practice gap (knowledge/skill).</p>	
<p>EDP3: Identify the established professional competency(ies) that align with the identified professional practice gap and underlying educational needs (knowledge, skill, and/or practice) and the professional source that developed the competency(ies).</p>	
<p>EDP4: Desired learning outcome(s) must be measurable learning outcome statements that are aligned to the professional practice gap, underlying educational need(s) (knowledge, skill, and/or practice), and identified competency(ies).</p> <ul style="list-style-type: none"> ■ What will the RN(s)/learners 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. 	
<p>EDP5: Identify the assessment method(s) used to measure changes in learner knowledge, skills, and/or practice expected from participating in the educational activity.</p> <ul style="list-style-type: none"> ■ What evaluation method will be used to determine the success of each identified OB-CE level of achievement? ■ Note: Self-report is not an acceptable outcome in outcome-based CE. 	

LEVEL 2—APPLY KNOWLEDGE AND SKILLS ☐ NOT APPLICABLE	
<p>EDP1: Professional practice gap</p>	
<p>EDP2: Educational needs that underlie the professional practice gap (knowledge/skill).</p>	
<p>EDP3: Identify the established professional competency(ies) that align with the identified professional practice gap and underlying educational needs (knowledge, skill, and/or practice) and the professional source that developed the competency(ies).</p>	
<p>EDP4: Desired learning outcome(s) must be measurable learning outcome statements that are aligned to the professional practice gap, underlying educational need(s) (knowledge, skill, and/or practice), and identified competency(ies).</p> <ul style="list-style-type: none"> ■ What will the RN(s)/learners 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. 	
<p>EDP5: Identify the assessment method(s) used to measure changes in learner knowledge, skills, and/or practice expected from participating in the educational activity.</p> <ul style="list-style-type: none"> ■ What evaluation method will be used to determine the success of each identified OB-CE level of achievement? ■ Note: Self-report is not an acceptable outcome in outcome-based CE. 	

LEVEL 3—DEMONSTRATE KNOWLEDGE AND SKILLS IN A SIMULATED OR EDUCATIONAL SETTING ☐ NOT APPLICABLE	
<p>EDP1: Professional practice gap</p>	
<p>EDP2: Educational needs that underlie the professional practice gap (knowledge/skill).</p>	
<p>EDP3: Identify the established professional competency(ies) that align with the identified professional practice gap and underlying educational needs (knowledge, skill, and/or practice) and the professional source that developed the competency(ies).</p>	
<p>EDP4: Desired learning outcome(s) must be measurable learning outcome statements that are aligned to the professional practice gap, underlying educational need(s) (knowledge, skill, and/or practice), and identified competency(ies).</p> <ul style="list-style-type: none"> ■ What will the RN(s)/learners 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. 	
<p>EDP5: Identify the assessment method(s) used to measure changes in learner knowledge, skills, and/or practice expected from participating in the educational activity.</p> <ul style="list-style-type: none"> ■ What evaluation method will be used to determine the success of each identified OB-CE level of achievement? ■ Note: Self-report is not an acceptable outcome in outcome-based CE. 	

LEVEL 4—INTEGRATE KNOWLEDGE AND SKILLS INTO PRACTICE <input type="checkbox"/> NOT APPLICABLE	
<p>EDP1: Professional practice gap</p>	
<p>EDP2: Educational needs that underlie the professional practice gap (knowledge/skill and practice).</p>	
<p>EDP3: Identify the established professional competency(ies) that align with the identified professional practice gap and underlying educational needs (knowledge, skill, and/or practice) and the professional source that developed the competency(ies).</p>	
<p>EDP4: Desired learning outcome(s) must be measurable learning outcome statements that are aligned to the professional practice gap, underlying educational need(s) (knowledge, skill, and/or practice), and identified competency(ies).</p> <ul style="list-style-type: none"> ■ What will the RN(s)/learners 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. 	
<p>EDP5: Identify the assessment method(s) used to measure changes in learner knowledge, skills, and/or practice expected from participating in the educational activity.</p> <ul style="list-style-type: none"> ■ What evaluation method will be used to determine the success of each identified OB-CE level of achievement? ■ Note: Self-report is not an acceptable outcome in outcome-based CE. 	

LEVEL 5–IMPACT PRACTICE, PATIENT, AND/OR SYSTEM OUTCOMES ☐ NOT APPLICABLE	
<p>EDP1: Professional practice gap</p>	
<p>EDP2: Educational needs that underlie the professional practice gap (knowledge/skill and practice).</p>	
<p>EDP3: Identify the established professional competency(ies) that align with the identified professional practice gap and underlying educational needs (knowledge, skill, and/or practice) and the professional source that developed the competency(ies).</p>	
<p>EDP4: Desired learning outcome(s) must be measurable learning outcome statements that are aligned to the professional practice gap, underlying educational need(s) (knowledge, skill, and/or practice), and identified competency(ies).</p> <ul style="list-style-type: none"> ■ What will the RN(s)/learners 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. 	
<p>EDP5: Identify the assessment method(s) used to measure changes in learner knowledge, skills, and/or practice expected from participating in the educational activity.</p> <ul style="list-style-type: none"> ■ What evaluation method will be used to determine the success of each identified OB-CE level of achievement? ■ Note: Self-report is not an acceptable outcome in outcome-based CE. 	

STANDARDS FOR INTEGRITY AND INDEPENDENCE

ACTIVITY PLANNING REQUIREMENTS

EDP8 STANDARD 1: Description of evidence-based content for each level to be addressed:



NOTE: 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/references are identified). Add incremental changes as appropriate, including the date of the additional information.

EDP8 STANDARD 2: Prevent Commercial Bias and Marketing in Accredited Continuing Education

Accredited continuing education must protect learners from commercial bias and marketing.

1. The Accredited Provider must ensure that all decisions related to the planning, faculty selection, delivery, and evaluation of accredited education are made without any influence or involvement from the owners and employees of an ineligible company.
2. Accredited education must be free of marketing or sales of products or services. Faculty must not actively promote or sell products or services that serve their professional or financial interests during accredited education.
3. The Accredited Provider must not share the names or contact information of learners with any ineligible company or its agents without the explicit consent of the individual learner.

We attest that this activity meets the expectations of all three elements of Standard 2.

EDP8 STANDARD 3: Identification and Mitigation of Relevant Financial Relationships

- ✓ **Regarding EDP8 Standard and Relevant Financial Relationships:** OB-CE is self-directed education (the learner is in the educational process); therefore, the provider is not required to identify or disclose the presence or absence of relevant financial relationships.

EDP8 STANDARD 4: Commercial Support (if applicable)

Does this activity receive commercial support?

- Yes, this activity received commercial support.
 - ✓ If yes, provide the dated commercial support agreement as **Attachment 5**.
 - ✓ If yes, include evidence of the disclosures to learners of commercial support in **Attachment 3**.
- No, this activity did not receive commercial support.

EDP8 STANDARD 5: Managing Ancillary Activities (if applicable)

Accredited Providers are responsible for ensuring that education is separate from marketing by ineligible companies, including advertising, sales, exhibits, and promotion, and from non-accredited education offered in conjunction with accredited continuing education.

- **Standard 5 applies only** when marketing by ineligible companies or non-accredited education is associated with the accredited continuing education.

Does this activity have ancillary activities (i.e., exhibits from ineligible companies) offered in conjunction with the accredited continuing education?

- Yes, this activity has ancillary activities.
 - ✓ Upload marketing materials associated with the activity in which advertising or marketing for or on behalf of ineligible companies is permitted, as **Attachment 4**.
- OR**
- ✓ Upload evidence to demonstrate that the accredited education is separated in space and/or time from non-accredited ancillary activities (i.e., exhibits or non-accredited education), as **Attachment 4**.
- No, this activity does not have ancillary activities.

EDP8: Summative evaluation to be completed collaboratively by NP and learner(s)

- Provide a post-activity analysis of individual educational activity data that determines if the educational activity successfully changed the learners' knowledge, skill, and/or practice.
- Did the activity meet the intended outcome(s)?

- How will the assessment data guide future activities?

NURSE PLANNER COMMENTS

NARRATIVE NOTES:

REQUIRED ATTACHMENTS

<p>Attachment 1</p>	<p>Attach the certificate of completion or learner transcript, including:</p> <ul style="list-style-type: none"> ■ Title of the educational activity ■ Date of the educational experience (completion date) ■ Name and address of the provider of the educational activity (web address or email address is acceptable) ■ OB-CE Level Credit awarded: [Name of Accredited Provider] designates this learning experience as Outcome Level [insert level number]. ■ ANCC Accredited Provider Accreditation statement ■ Space for participant’s name
<p>Attachment 2</p>	<p>Attach evidence of disclosure statements that are provided to learners, including:</p> <ul style="list-style-type: none"> ■ Accredited Provider Accreditation statement ■ Criteria for awarding OB-CE Level Credit ■ Commercial support (<i>if applicable</i>) (<i>EDP8 Standard 4</i>) ■ Joint providership (<i>if applicable</i>)
<p>Attachment 3</p>	<p>If the activity received commercial support:</p> <ul style="list-style-type: none"> ■ Attach the fully executed (prior to the accredited education) commercial support agreement(s) that demonstrate that the education remains independent from the ineligible company (<i>EDP8 Standard 4</i>)
<p>Attachment 4</p>	<p>If the accredited activity included ancillary activities (i.e., advertising, sales, exhibits, or promotion):</p> <ul style="list-style-type: none"> ■ Upload marketing materials associated with the activity in which advertising or marketing for or on behalf of ineligible companies is permitted. <p>OR</p> <ul style="list-style-type: none"> ■ Upload evidence to demonstrate that the accredited education is separated in space and/or time from non-accredited ancillary activities (i.e., exhibits or non-accredited education). (<i>EDP8 Standard 5</i>)

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