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Disclosure Slide

- No one with the ability to control content of this activity has a relevant financial relationship with an ineligible company.
- This activity is Joint Provided with the Indiana Chapter of the Association for Nursing Professional Development
- Thank you to our sponsors: Gold Level RQI Partners and IU Health, Silver Level Purdue Global School of Nursing
- The criteria for successful completion
 - Full Attendance
 - Complete an evaluation – QR code at the end

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Welcome from ANPD President



The background of the slide is a soft-focus photograph of a bright, airy interior. On the left, a window with a white frame allows natural light to filter in. A small potted plant with green leaves sits on the windowsill. To the right, a white ceramic vase holds a bouquet of light pink flowers. In the foreground, an open book lies flat on a white surface, possibly a table or a wide windowsill. The overall color palette is light and calming, with soft blues, greens, and whites.

Fuel Your Passion

Starting With Self: The Anchor of NPD Leadership

2026 IANPD IGNITE CONFERENCE

A close-up photograph of a person's hands writing in a white notebook on a light-colored wooden desk. The person is wearing a white long-sleeved shirt. Their right hand holds a black pen, and their left hand rests on the notebook. In the background, a silver electrical outlet is visible on the desk. The text "Your Career Journey" is overlaid in the bottom right corner of the image.

Your Career Journey

A close-up photograph of a person's hands writing in a white notebook on a light-colored wooden desk. The person is wearing a white long-sleeved shirt. Their right hand holds a black pen, and their left hand rests on the left side of the notebook. In the upper left background, a white electrical outlet is visible on the desk. The text "Career Journey Map" is overlaid in the bottom right corner of the notebook page.

Career Journey Map

LEADERSHIP STANDARD 12



Internal Influence

NPD leadership is defined by the capacity to influence oneself first. Competency 4 requires integrating Emotional Intelligence into daily practice.



Self-Awareness

A learnable skill involving the introspective recognition of internal values and emotions to guide authentic behavior in healthcare education.



Self-Leadership

Applying self-observation and positive self-talk to build psychological capital and resist systemic workplace stressors.

TOOLS TO MEASURE & GROW SELF AWARENESS

Discover insights. Understand yourself. Grow with purpose.

1



EMOTIONAL INTELLIGENCE

Assess and develop your ability to understand and manage emotions.

3



360 DEGREE FEEDBACK

Gain a well-rounded view of your strengths and areas for development from others.

5



PREDICTIVE INDEX

Understand your natural behaviors and drives to improve performance and workplace fit.



Greater self-awareness leads to better decisions, stronger relationships and personal growth.

6

DISC

DISC ASSESSMENT

Identify your behavioral style and improve communication, collaboration and relationships.



MEYER BRIGGS TYPE INDICATOR

Understand your personality preferences and how you interact with the world.

2



PEER REVIEW

Learn through structured feedback and diverse perspectives from your peers.

4



STRENGTHSCOPE

Uncover your unique strengths and how to use them to thrive.

7



Self-awareness is the first step.

Use these tools.

Grow every day.



THE PSYCHOLOGICAL TOLL



This Photo by Unknown Author is licensed under [CC BY-NC-ND](#)

- Burnout in NPD is a psychological disconnect that compromises teaching effectiveness and institutional memory.
- What does the current data tell us?



A close-up photograph of a person's hands writing in a white notebook on a light-colored wooden desk. The person is wearing a white long-sleeved shirt. Their right hand holds a black pen, and their left hand rests on the left side of the notebook. In the upper left background, a white electrical outlet is visible on the desk. The text "What You Know About Yourself" is written in a bold, black, sans-serif font on the right page of the notebook.

**What You Know
About Yourself**





**Energy, not time, is the key to
high performance**



— JIM LOEHR & TONY SCHWARTZ



VS.



A close-up photograph of a person's hands writing in a white notebook on a light-colored wooden desk. The person is wearing a white long-sleeved shirt. Their right hand holds a black pen, and their left hand rests on the notebook. In the background, a silver electrical outlet is visible on the desk. The text "Typical Week" Time is overlaid on the bottom right of the image.

“Typical Week” Time

Framework for Human Wholeness

Physical



Manage the baseline: Rest, nutrition, and intentional movement to sustain daily output

Emotional



Build the capacity to navigate interpersonal conflict and workplace dynamics with empathy

Mental



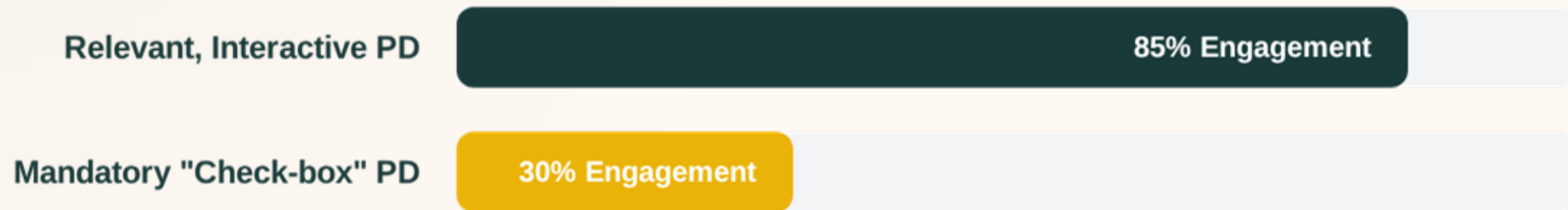
Sustain the “spirit of inquiry” required for complex research and curriculum design

Spiritual



Align your daily work with your original mission and deep-seated values for the nursing profession

IMPACT OF EDUCATIONAL QUALITY



Self-aware practitioners advocate for education that restores meaning, not just compliance.

RETURNING TO THE ROOT

Renewal starts with intentionality.

- **The Tool:** Reflective Journaling
(reconnecting with your "Why")
- **The Challenge:** What is one thought or behavior you can modify tomorrow to lead with more authenticity?
- **The Next Step:** Commit to a concrete SMART goal to sustain this change.



A stack of five smooth, light-colored stones balanced on a sandy beach. The stones are of varying sizes and are stacked in a slightly offset manner, creating a sense of balance and stability. A small, flat pebble sits on top of the stack. The background is a soft, out-of-focus view of the ocean and sky.

Commit to the Pause.

Lead with Purpose. Fuel Your Passion.

Questions?

Thank you for your leadership in Nursing Professional Development.



Break

Visit the Vendor Booths and View Posters
Next Door!

Complete the 2027 Learning Needs
Assessment:



Ignite a Charge Nurse Development Program



Audrey Glossenger MSN, RN, NPD-BC, CCRN



Trisha Eby MSN, RN, NPD-BC, CCRN



Angela Green-Jones MBA, RN, NPD-BC



Objectives



Describe the need for a structured Charge Nurse Development Program



Explain the key components of the redesigned program



Evaluate program outcomes and impact





Indiana University Health Methodist Hospital





Indiana University Health University Hospital



Magnet – What does that mean?

Nursing and Patient Care
Services Contribution



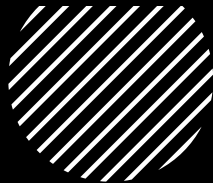
Indiana University Health

Clinical Professional Development Department

- Comprises 27 NPD Generalists and Specialists
 - Assigned by specialties
 - Centralized across both campuses
-
- NPD serves over 3,000 nurses within the AAHC
 - Professional Governance engaged



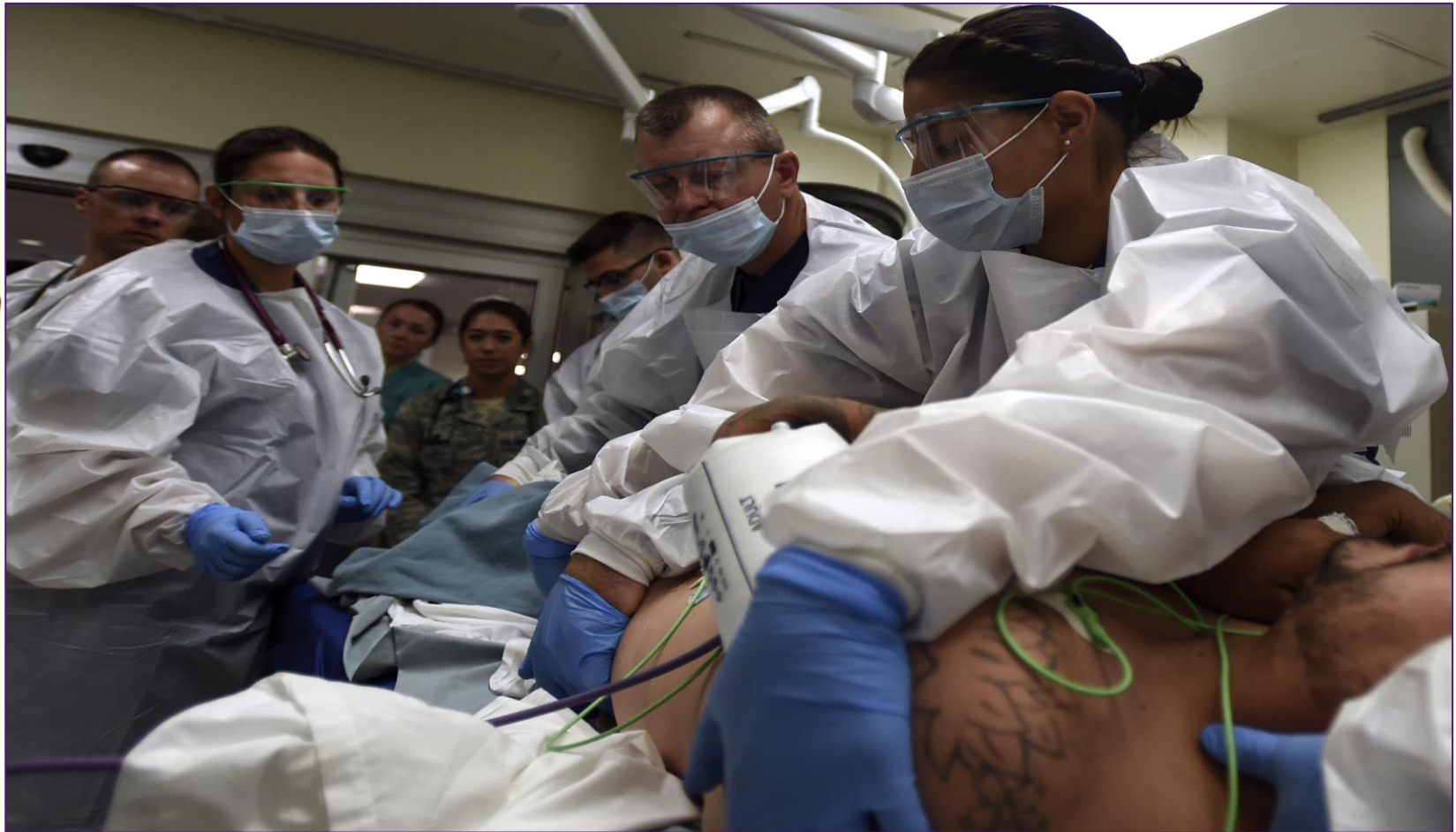
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The World Changed

- COVID
- Transition from in-person to virtual learning
- On-line learning for Nursing Schools and everyone
- Workflow changed
- Nurses leaving profession
- Nursing opportunities at all time high
- Required experienced nursing leaders

NURSE ROLE



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Charge Nurse Role is Impacted

Increased demand for well-prepared Charge Nurses

Charge Nurses with leadership skills

Charge Nurses with communication skills

Charge Nurses with Conflict Resolution skills

Needed practical content, user friendly



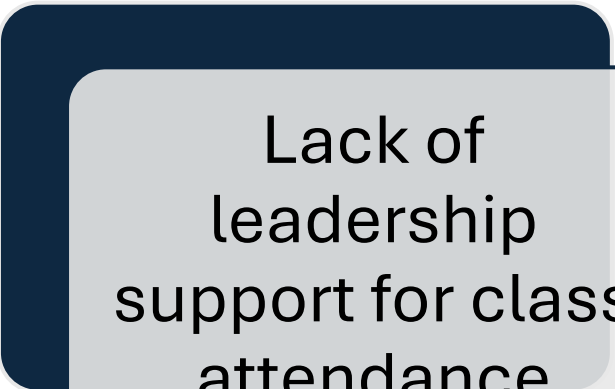
Gap analysis

- Charge Nurse turnover increased
- Less experienced charge nurses lacked leadership experience
- Improvements in patient throughput needed
- Operational CN workflow

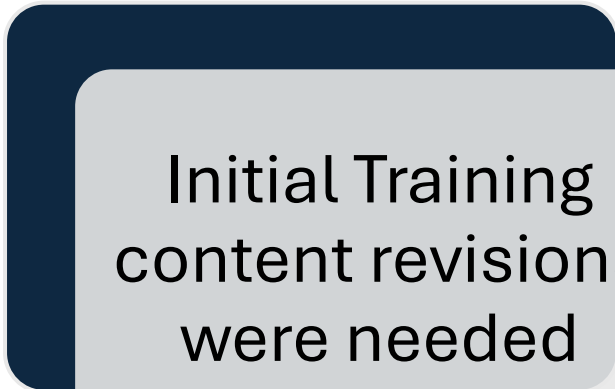




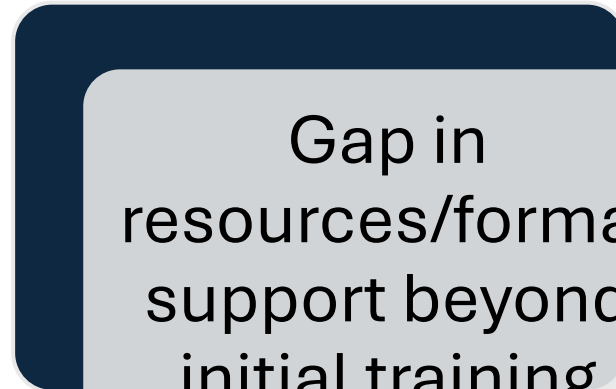
Gaps Identified



Lack of
leadership
support for class
attendance



Initial Training
content revisions
were needed



Gap in
resources/formal
support beyond
initial training

Charge Nurse Development Prework

4-module course → used as prework to class or stand alone for just-in-time education

Topics:

- Role and responsibility of Charge Nurse
- People Management
- Patient Throughput
- Patient and Team Member Safety



Content Review and Update

Marketing: targeted the class to a broader audience than before to capture more charge nurses who need the education

Rotating virtual and in-person options



Revised Course Objectives

- Discuss the essential roles and responsibilities of the charge nurse
- Explain the charge nurse role related to patient safety
- Understand how the charge nurse influences patient throughput and the tools and resources available
- Practice concepts to assist with effective communication and conflict management
- Explore create ways for making unit staffing assignments



Class Agenda

- Welcome and intro
- Get to know your colleagues
- Lecture
- Assignment making activity in small groups
- Lecture
- Scenario practice in small groups
- Resources
- Class evaluation and closing



Assignment Making Activity

Charge Nurse class

Follow me Share

				*Standard	Regular Ward	--			2NW
a	T	L		PROTECTIVE ...	Regular Ward	--	IP Riverview Hospital	17:40	2NW
				*Standard	Regular Ward	03:03	2829/avail	13:00	2NW

Glossenger, Audrey, Eby, Trisha G
Yellow = Isolation
Purple = Regular
Pink = DC
Blue= Possible DC
Green= Transfer Out

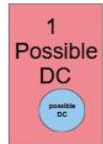
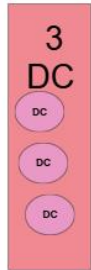
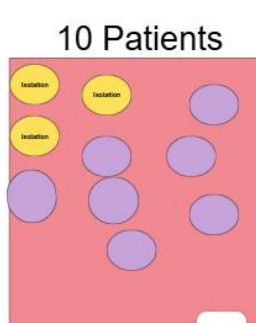
Glossenger, Audrey, Burroughs, Cassie M
Charge Nurse

Glossenger, Audrey, Burroughs, Cassie M
Patients 15
Transfers 1
Discharges 3
Pending Discharge 1
Patients Waiting to Come 4

Burroughs, Cassie M
Unit RN

Burroughs, Cassie M
Unit RN

Glossenger, Audrey, Burroughs, Cassie M
New Grad



18%

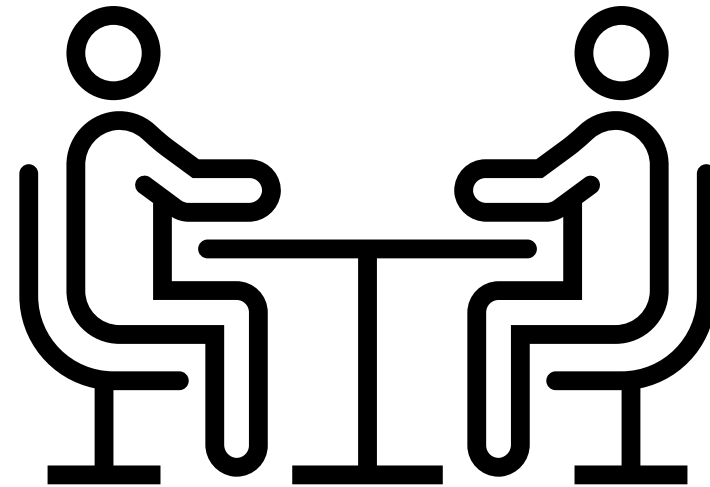


Activity- What would you do?

- Conflict scenario examples
- Scenarios and case studies allow application of concepts learned in pre-work module and in class

Scenarios taken from real-life

- Patient and family focus
- Team member focus



Scenario Examples

- You see a group of nurses talking loudly in hallway in front of a patient room. You address them and after you do, you hear one say, “Who does she think she is anyway? She is not our manager.” How do you address this individual and the others?
- A patient’s daughter is a charge nurse in Evansville and is appalled by the workflow of your unit. She compares her department to yours and complains that the doctors and nurses here have no idea what they’re doing. She attempts to dictate the plan of care for her mother and refuses to let the bedside nurse intervene.



Scenario Examples Continued

- A direct admit arrives from out of town at 0300 with 10 family members at the bedside (they're a bit disruptive). After the bedside nurse explains our nighttime visitation policy, the family members become irate and ask to speak to the charge.
- A support staff member approaches you with a concern. She feels she is being bullied by an experienced nurse and that tasks are being over delegated that are outside of her assignment. She states she feels uncomfortable approaching this nurse and asks for your help to mediate.



Outputs



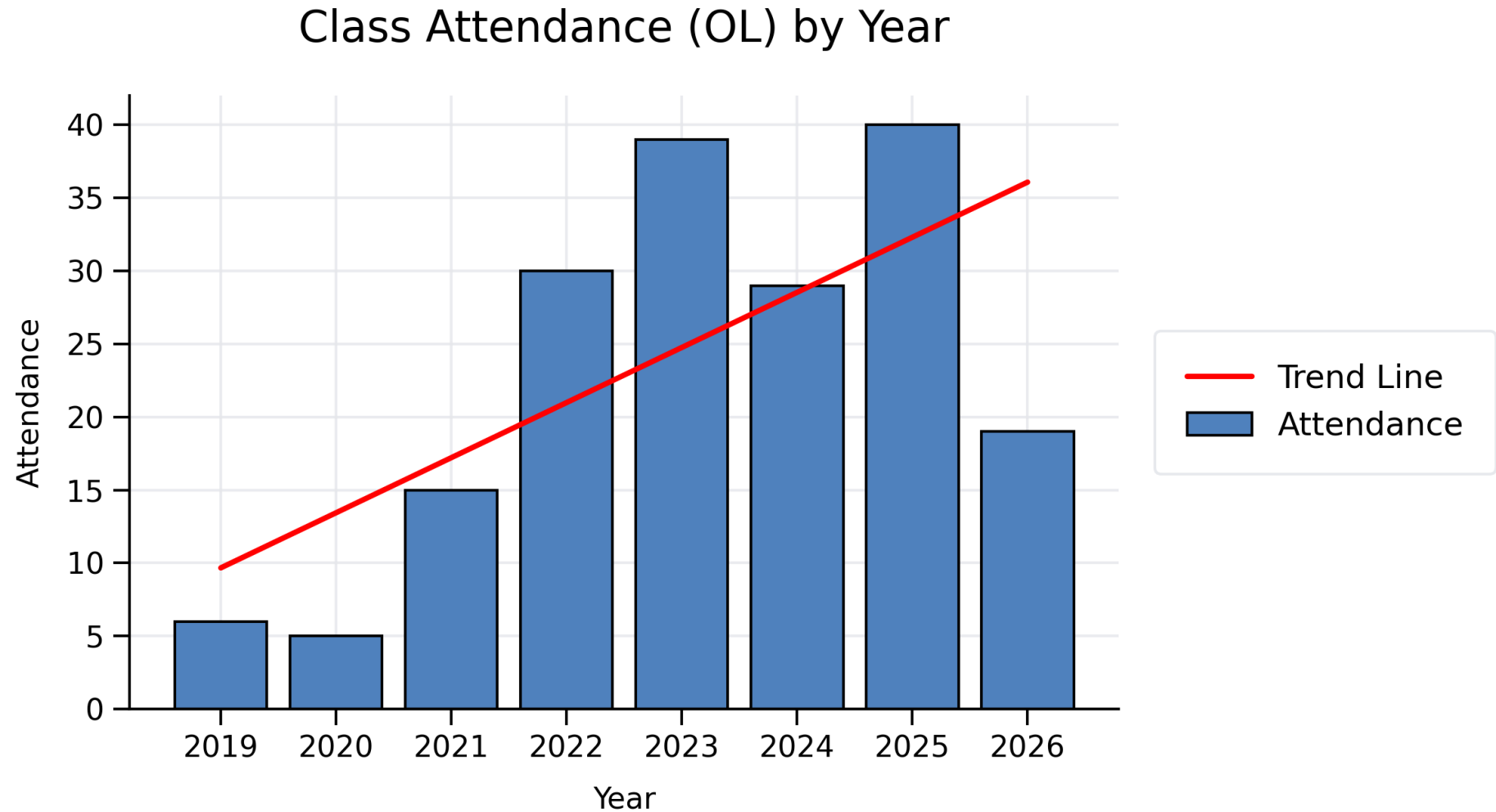
CLASS ATTENDANCE



CLASS FEEDBACK



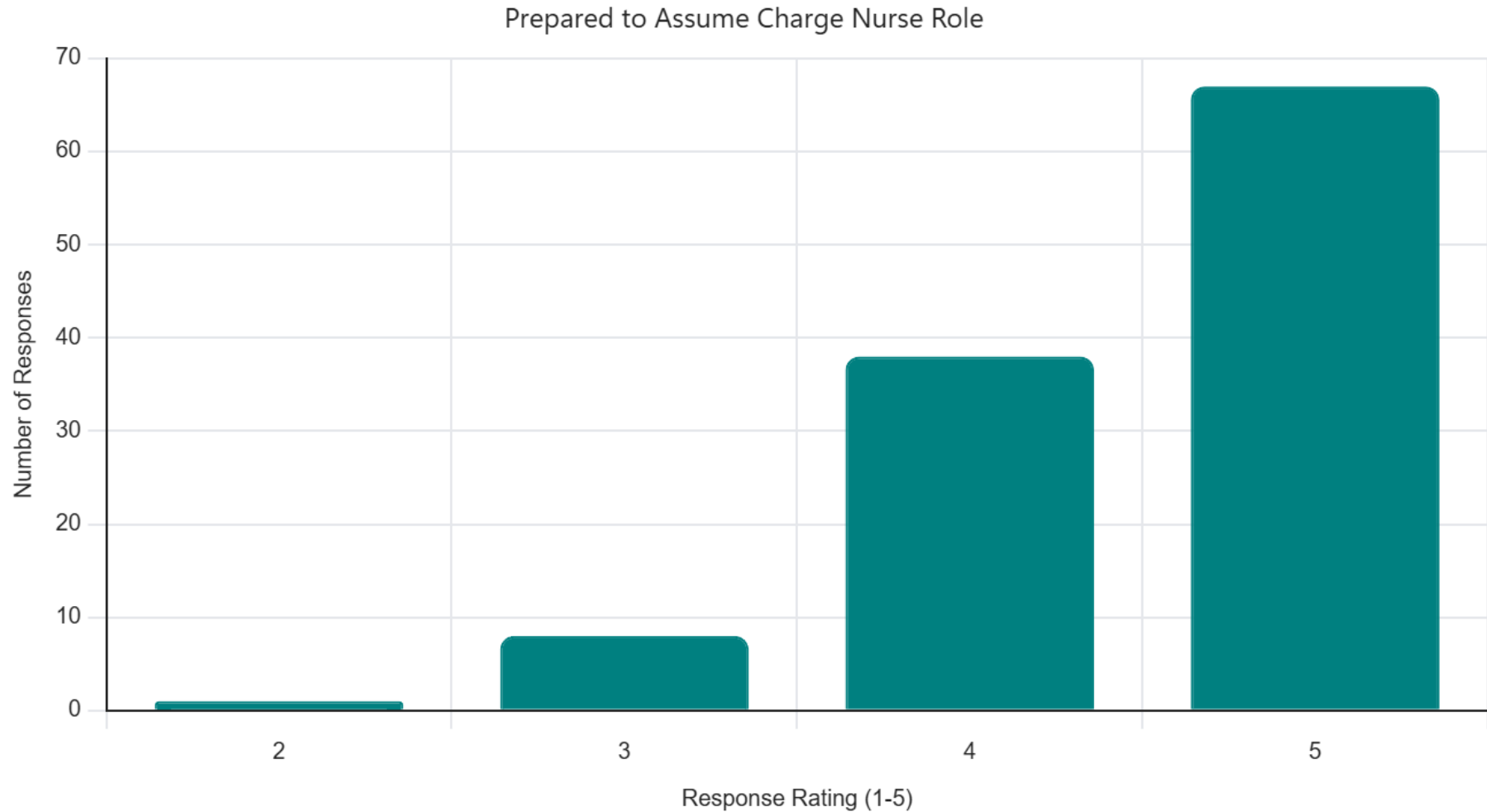
Class Attendance



AI generated graph
using Copilot

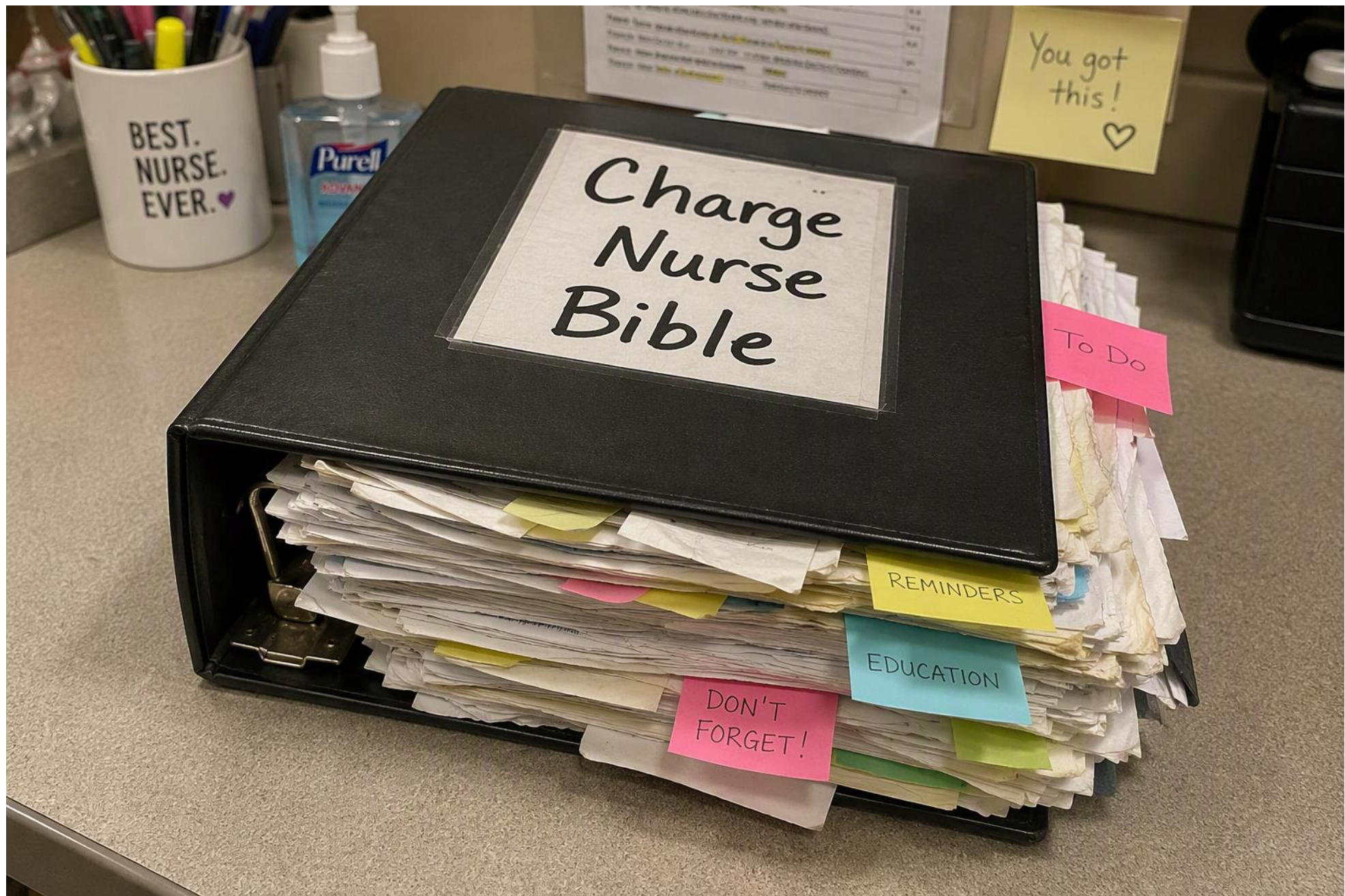


Class Feedback



AI generated graph
using Copilot







Stock image Microsoft 365



Welcome to the Charge Nurse Development and Resource Site!



Having a strong foundation in your role as Charge Nurse is essential for success. Whether you are new to the role or have a lot of experience, **these resources can help you have a rock-solid skillset for thriving in your role.**



Be prepared for the new Sepsis Alert in Cerner!

[Job Aid for Charge RNs](#)

Charge Nurse Development: Quick Reference Links

📄 [Bed Meeting Responsibilities](#)

📄 [Making Patient Assignments](#)



unliving in your role.

2026 Class Schedule

AAHC Charge Nurse Class

During this instructor-led class, new charge nurses will learn about the role and responsibilities of the charge nurse, develop their knowledge and skills with conflict management and communication, and learn about resources available to the charge nurse.

2026 Class Dates

Feb. 3 *in person

April 7 *virtual

June 2 *in person

Aug 4 *virtual

Oct. 6 *in person

Dec. 1 *virtual

All classes 8 am – 10 am

How to Register: [Search](#)
"AAHC Charge Nurse-
Beginning" in Oracle

Learn or
[Scan](#) or
[Click](#) the
QR Code



Role and Responsibilities

- Creative staffing assignments
- Teletracking
- Leadership and delegation

Conflict Management

- Emotional Intelligence
- Reframing drama statements
- De-escalation

Resources

- Charge Nurse Diagnoses
- The Role of the AA
- Charge Nurse Development SharePoint Site

Communication

- Peer to peer
- Neutralize conversations
- Escalation

Contact Info: Trisha Eby teby@iuhealth.org or Audrey Glossenger aglossenger@iuhealth.org

Reference Links

- [Bed Meeting Responsibilities](#)
- [Making Patient Assignments](#)
- [Proactive Rounding](#)
- [Leading Successful Safety Huddles](#)
- [TeleTracking Reference](#)

Did you know there is a Charge Nurse Development Class?!

*"I loved the class discussion!
Also all the resources that we
got!"*

*"I learned some great
communication tools...."*

Upcoming Classes

[See all](#)[+ Add event](#)



Cheers for a Charge Nurse!



As a Charge Nurse you are an essential member of the leadership team! **"Cheers for Charge"** is a great way for others to celebrate your work and to share their appreciation for all you do.

Click here to check out who is being celebrated ***In Charge!***

Want to recognize a peer Charge RN for their efforts? Ask your manager or NPD/educator for a **Cheers for Charge** card, fill it out and give it directly to the recipient or to their manager.

[Click here to access a printable version of the card](#)



Published on 7/10/2026

[Share](#)DEC
1

Charge Nurse Class (Virtual)

Tue, Dec 1, 8:00 AM

Register in Oracle Learn by searching "AAHC Charge Nurse- Beginning" and selecting your offering date.

AAHC Charge Nurse - Beginning

Course



Top 10 Resources for Charge Nurses



Top 10 Resources for Charge Nurses



How to find to find the Emergency...



Clinical Risk Management



Morgue Services



Language and Interpreter



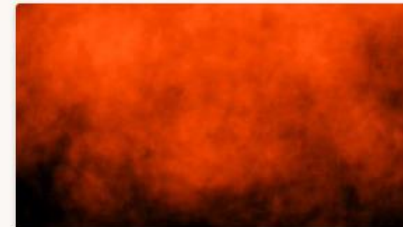
Prisoners as Patients



No Info Patients



IV infusions approved for AAHC units



Patients Leaving AMA



Crisis Algorithm Behavior Alert vs APT



Visitor/Volunteer Injury



Meaningful Recognition



Stock image Microsoft 365

Feedback from:

- Current Charge Nurses
- New Charge Nurses
- Unit Leadership





Cheers for a Charge Nurse!



Charge Nurse Name: _____

Hospital/Unit: _____

Celebrating **YOU** in your Charge Nurse role because:



From: _____

Date: _____





Cheers for a Charge Nurse!



Charge Nurse Name: Libby Collyer

Hospital/Unit: ~~ENH~~ A5E Advanced ♥

Celebrating **YOU** in your Charge Nurse role because:

Libby is the best Charge I've worked with.
She looks for ways to help and never lets
anyone down. She truly cares about the
success of this unit & its patients.

From: Hannah Holland

Date: 4-27-26



CH300214



Libby - Congratulations on being recognized by your peers for your hard work as a charge nurse!
Please click below to see your well-deserved recognition on the Charge Nurse SharePoint site.

We encourage you to save this card and message and share at your annual performance review.

Thank you for your leadership

[Cheers for Charge!](#)

From: The Charge Nurse Workgroup



Cheers for a Charge Nurse!



Charge Nurse Name: Libby Collyer
Hospital/Unit: MH A S E Advanced Heart
Celebrating **YOU** in your Charge Nurse role because:
Libby is the best charge I've ever worked with. She looks for ways to help and never lets anyone down. She truly cares about the success of this unit and its patients.



From: Hannah Holland
Date: 04/27/2026
submitted May 2026



[Cheers for Charge!](#)

Program Next Steps

Class

- Refine content
- Marketing
- Spread to other facilities potentially
- Revise modules

Sharepoint site

- Revise and update
- Build out mentoring section
- Increase usage of the site

Recognition Program

- Encourage more use across the facilities
- Potential spread to other system locations

Focus groups

- Additional needs assessment
- Microlearning, mentorship, quarterly connections?



Upcoming in 2027



Image IU Health internal site

Questions?



Stock image Microsoft 365





Indiana Association for Nursing Professional Development

1st Annual Indiana Association for Nursing Professional Development Conference

From Redundancy to Mastery: Leveraging Artificial Intelligence to Streamline Competency Validation and Support Experienced Emergency Department Nurses

Jody Shiveley, MA, BSN, RNC, NPD-BC

September 25, 2026

By the end of this session, participants will be able to:

- Apply the ADDIE process to identify opportunities for competency validation and redesign.
- Evaluate the use of AI for developing competency-based education and assessment materials.
- Apply at least one practical strategy for safe, ethical, and transparent AI implementation within nursing professional development.

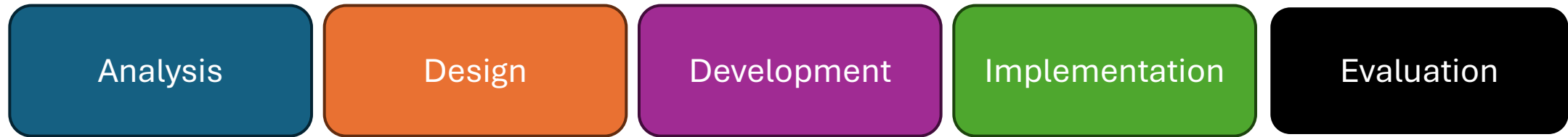
Learner Outcomes



The Question That Started It All:

"Why are experienced ED nurses still sitting through education they already know?"

ADDIE Process



Adapted by author - Branch, R. M. (2009). Instructional design: The ADDIE approach. Springer

Environmental Scanning

Mandatory Education Procedure

C. Franciscan Alliance leadership will provide opportunities to receive and complete mandatory education.

1. Coworkers will be assigned mandatory education. This may be accessed from our electronic learning management system via the Franciscan intranet site.
2. **Supervisors are expected to allow training time within normal work hours.**

D. All mandatory training is required to be completed on or before the due date and **must be done during the coworker's scheduled work hours.**

Environmental Scanning

Mandatory Education Procedure

Analysis

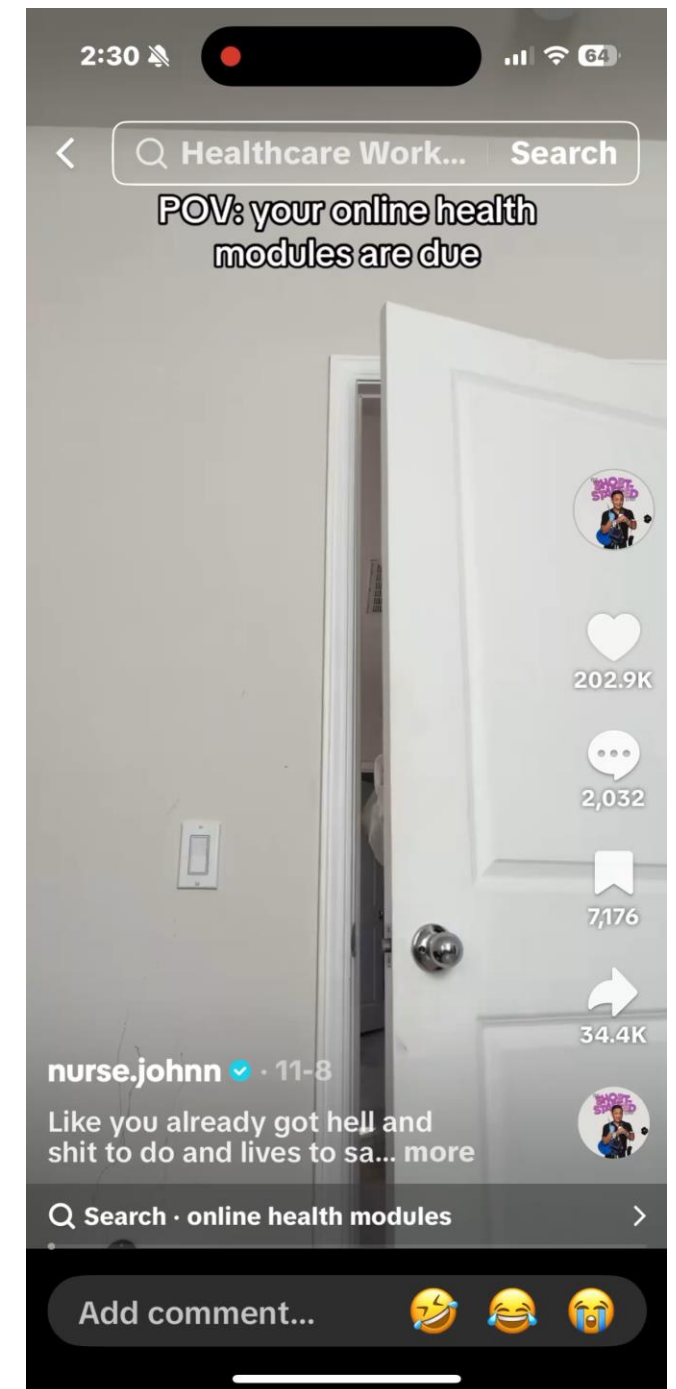
C. Franciscan Alliance leadership will provide opportunities to receive and complete mandatory education.

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Source: Franciscan Health Policy Stat, accessed July 2026.

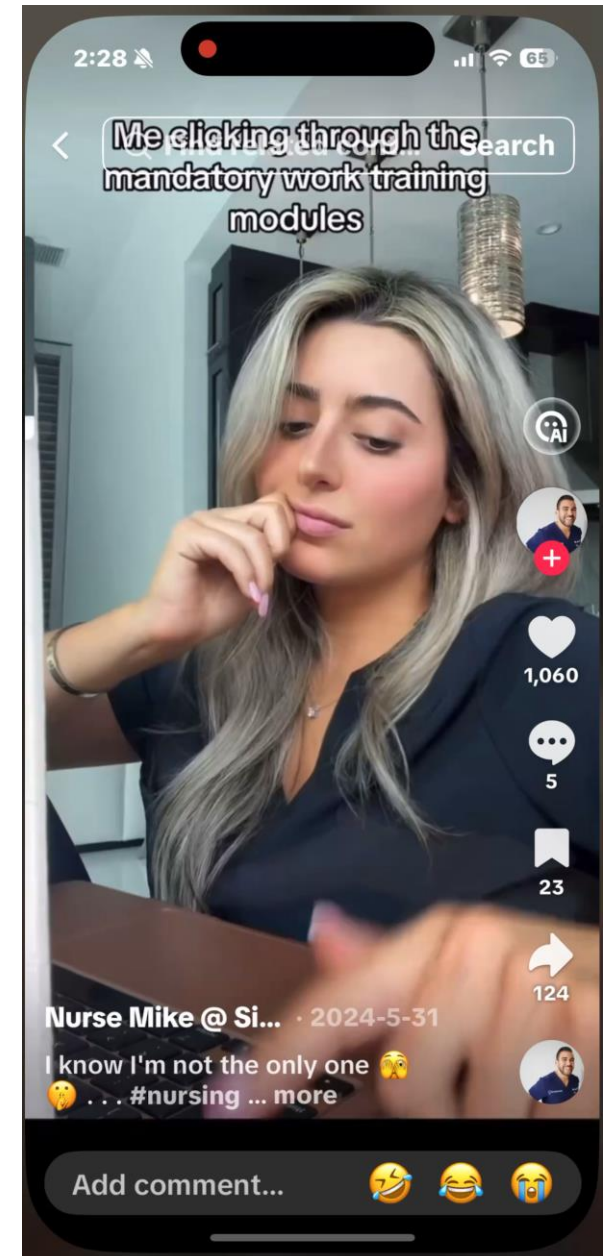
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Gap Analysis

Current State

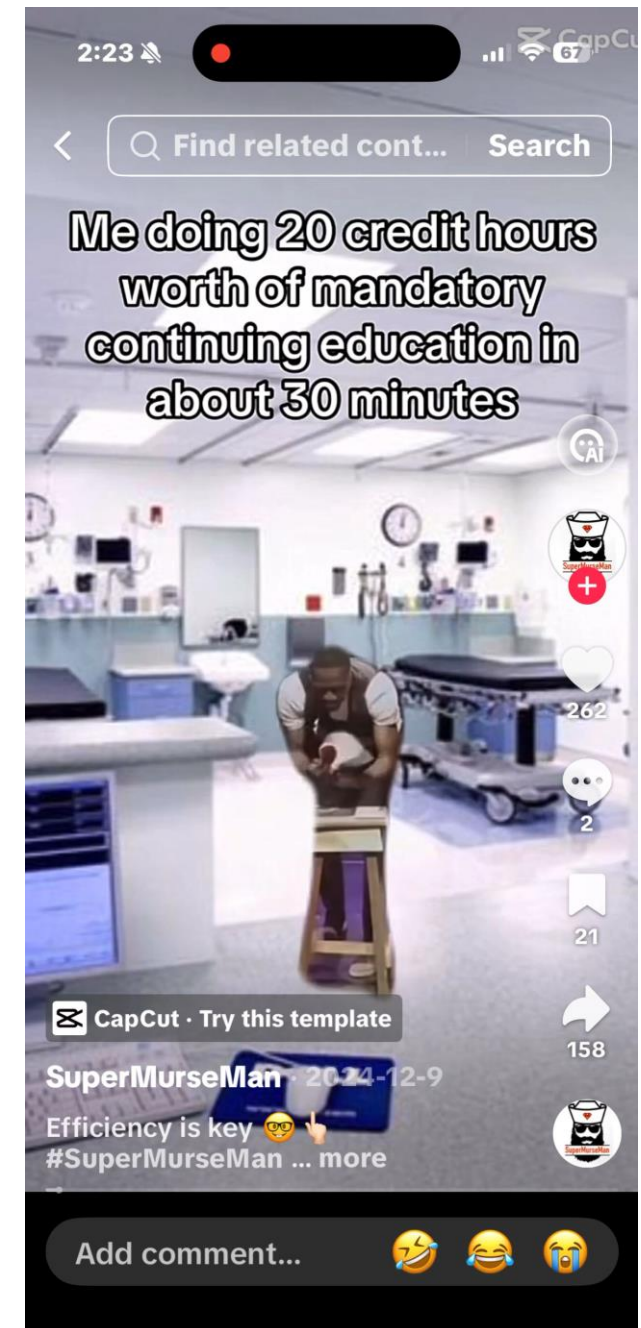
- Experienced ED nurses repeatedly completing content they already mastered
- Competency validation varied across campuses
- Assessment methods were inconsistent
- Nurses could pass mandatory education while still having important knowledge gaps



Gap Analysis

Current State

- Experienced ED nurses repeatedly completing content they already mastered
- Competency validation varied across campuses
- Assessment methods were inconsistent
- Nurses could pass mandatory education while still having important knowledge gaps



Evidence to Validate the Gap

Data sources:

- **Existing competency process and modules**
- Learner feedback
- Educator feedback
- ED leadership feedback
- Review of regulatory requirements



Existing Competency modules- RQI

The patient does not respond to atropine. The vital signs are HR 34/min, BP 66/43 mm Hg, RR 18/min, and SpO₂ is 91%. He is responsive, but dizzy.

What options do you have to treat the patient?

You did not select all the correct answers...



Correct

Administer epinephrine 2 to 10 mcg per minute infusion

[Algorithm](#)

[Learn more](#)



Correct

Initiate transcutaneous pacing



Correct, but
Not Selected

Administer dopamine 5 to 20 mcg/kg per minute infusion

If a question is missed, **the correct answer is given without education or rationale.**

Question asked again until correct answer selected.



Not Sure

CHALLENGE US

NEXT

Existing Competency modules- Annual Mandatory Education



Test Now

If you already know this information,
you may test out by going directly to the quiz –

Click Here

If you do not receive the minimum passing score of 80%, you will
need to review the entire CBT again and retake the quiz. You may
Exit the course and do this at a later time.

Existing Competency modules- mandatory education



CURRENT STATE

- Recent Code Blue event debriefs have identified a gap in knowledge related to how to call a code blue and how to talk with the operator once the call is made.
- The following knowledge gaps were identified:
 - Dialing “0” to contact operator instead of 5-5555
 - Hanging up before operator had all the information needed
 - Not knowing where in the facility the person was calling from

PURPOSE OF EDUCATION

- Provide a summary of the process for activating a code blue emergency

TEST OUT OPTION

- If you are confident in your knowledge, you may proceed directly to the quiz. If you score lower than 100%, you will be required to review the course in its entirety before attempting again

Proceed to Q << Prev Next >>



BEGIN KNOWLEDGE CHECK
3 questions, 100% required to pass

Existing Competency modules- Workday Learning

CLINICAL Emergency Department Cardiac Emergency Education and Competency

The purpose of Emergency Department Cardiac Emergencies Education and Competency is to review key concepts in the care of cardiac emergencies that ...

Course • 1 lesson



COMPETENCY Emergency Department Cardiac Crisis Western Indiana

This Western Indiana Specific course highlights Cardiac Crisis concepts in the Emergency Department.

Course • 1 lesson

COMPETENCY Cardiac Crisis in the Emergency Department

The purpose of COMPETENCY Cardiac Crisis in the Emergency Department is to demonstrate competency in accomplishing rapid assessment and developing i...

Course • 1 lesson



Evidence to Validate the Gap

Data sources:

- Existing competency process and modules
- **Competency validation records**
- Learner feedback
- Educator feedback
- ED leadership feedback
- Review of regulatory requirements



Competency Validation Records

Key findings:

- **Redundancy**
- **Variation**
- **Inconsistent measurement**
- **Need for standardization**
- **Opportunities to improve validation**

Evidence to Validate the Gap

Data sources:

- Existing competency process and modules
- Competency validation records
- **Learner feedback**
- **Educator feedback**
- **ED leadership feedback**
- **Review of regulatory requirements**



Learner feedback
Educator feedback
ED leadership feedback
Review of regulatory requirements

- New
- Changing
- High Risk
- Problematic
- **Include priorities as suggested topics** (what are the service lines tracking on scorecards?)

Wright, D. (2026, August 11). Competency Assessment the Wright Way: An Overview of the Wright Competency Model™, Lafayette, Indiana

Gap Analysis

Current State

- Experienced ED nurses repeatedly completing content they already mastered
- Competency validation varied across campuses
- Assessment methods were inconsistent
- Nurses could pass mandatory education while still having important knowledge gaps

Desired State

- **Standardized competency validation**
- **Efficient use of learner time**
- **Learner-centered**
- **Defensible measurement of competence**
- **Consistent compliance with accreditation requirements**

Mandatory Education Procedure

G. Effectiveness of education courses and methods shall be measured by but not limited to training evaluations and/or tests.

- 1. The standard passing score for mandatory education is 80%, unless otherwise noted.**
2. For Epic education, coworkers will be granted three opportunities to achieve a passing score.

80% passing score

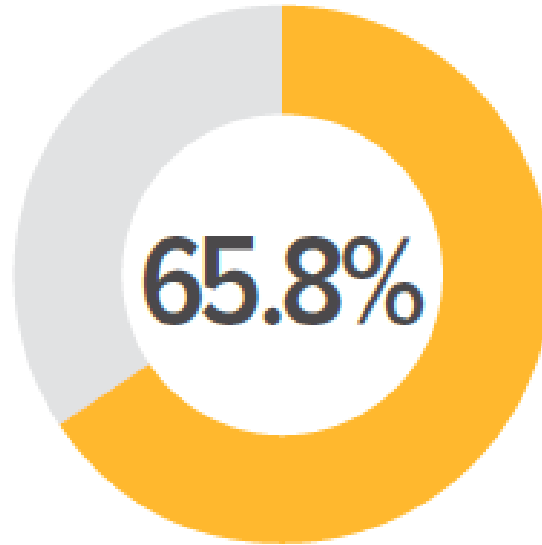
Congratulations! You passed your driving test with an 80% score!

Questions missed:

- What side of the road do you drive on?
- Where do babies ride in the car?
- Do you Stop or Go at a red light?

Are nurses making confident errors at the bedside while still “passing” their education?

**34.2% of Nurses were:
Wrong and Confident
Wrong and Not Confident
Right and Not Confident**



Confident and Correct

65.8 % of nurses when answering competency questions

Root Cause Questions

- Is the issue poor assessment design?
- Are we measuring completion instead of competency?
- Are we creating unnecessary work for experienced nurses?
- How do we make sure that nurses have the RIGHT information?
- How do we honor nurse's time and customize their education?

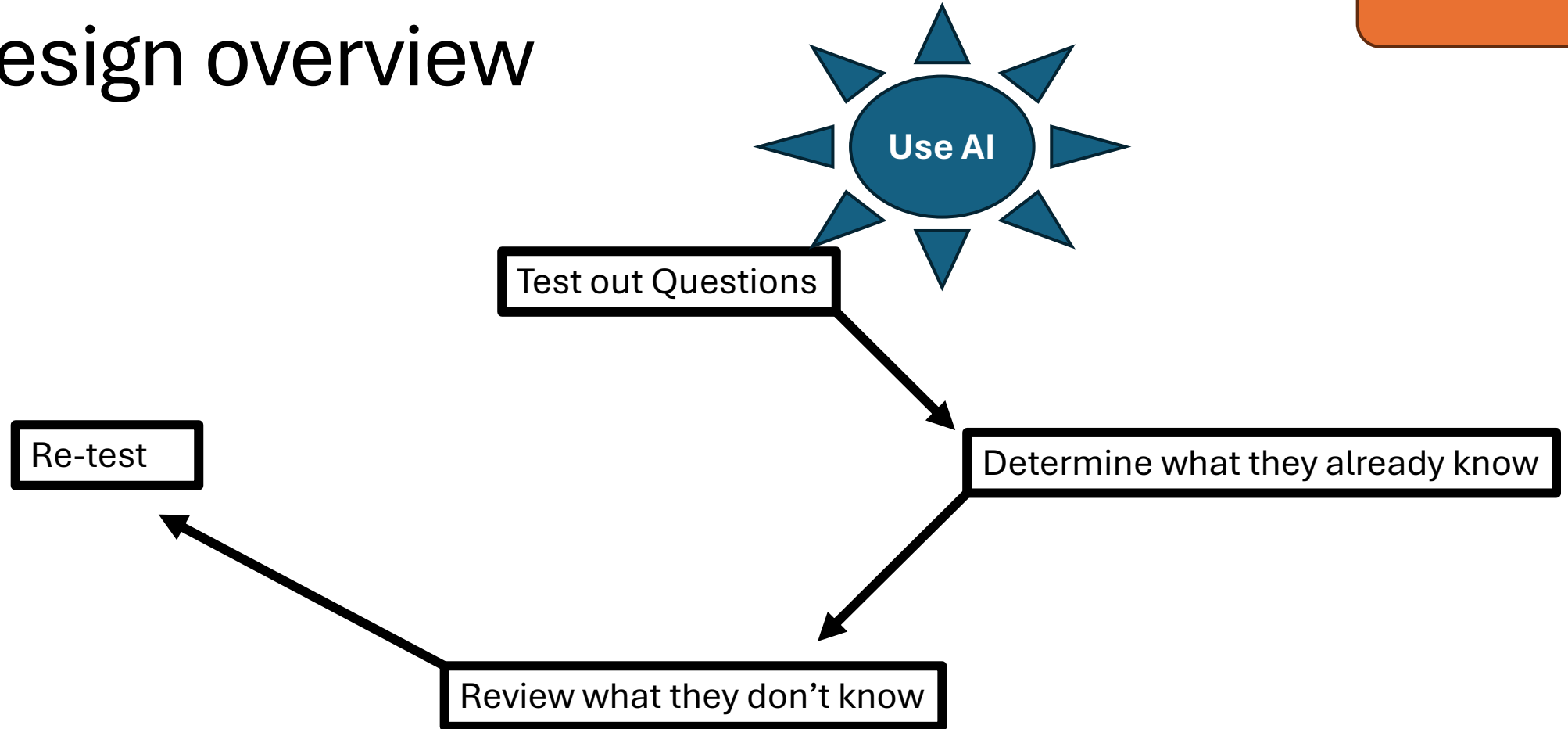
I'm bringing you a little treasure today in the form of my Granny Jordan's old-fashioned Southern chicken casserole recipe. Back in the day, this baked

JUMP TO RECIPE ↓



chicken salad recipe. All we need to do is mix our ingredients together, which are mayo, cream of chicken soup, shredded chicken, celery, onion, and boiled eggs. We add this to a casserole dish, top it with lots of crunchy and salty potato chips, and bake! That's it! It will be ready in just 20 minutes.

Redesign overview



Our Design Philosophy

Important message:

AI did NOT replace nurse educators.

AI accelerated repetitive work.

Humans remained responsible for:

- Educational design
- Content review
- Regulatory compliance
- Assessment validation
- Final approval

Develop: Guardrails

- Most Nursing Profession Development work isn't full of PHI but it's full of other sensitive content
- Same care, different category
- No patient information that could re-identify someone
- No identifiable learner or staff records
 - Named competency tracking, individual performance feedback, evaluation notes tied to a specific person
- No proprietary, strategic or pre-publication content
 - Internal frameworks, policies, curriculum strategy, QI work in progress, anything competitive



Develop: Guardrails

What AI was NOT allowed to do

- Publish content independently
- Make final clinical decisions
- Replace SME review
- Replace competency validation



Content Standardization

- Collected and reviewed all existing system ED competency content
- Used AI to combine and remove duplication (did not create content)
- Used AI to develop test questions
- Aligned with:
 - Regulatory requirements
 - Evidence-based practice
 - Organizational standards
 - ENA resources

Result:

Single source of truth.

Prompting Matters

- Poor prompt:
Write 10 questions on sepsis.
- Better prompt:
Critique these case study questions against clinical accuracy, Blooms application vs recall, distractor quality, and NCSBN guidelines. Flag any issues.



Images courtesy of Microsoft Stock Images.



Prompting Formula

- WHO you are
- CONTEXT
- AUDIENCE
- TASK
- FORMAT
- RATIONALE

Prompt Lab in Copilot

Hi, what can I help you with?

+ Message Copilot



Refine Writing

Draft Content

Summarize

Find Content

...

Prompt Lab

Prompt topics

Analyze

Ask

Assist

Catch up

Code

Create

Edit

Learn

Optimize

Personalize

Find by keyword

Job type

AI vs manual comparison

Compare the advantages of using AI tools versus manual analysis for [purpose].

Suggested by Microsoft

Compare A vs B details

Compare the [advantages and weaknesses] of [option A versus option B].

Suggested by Microsoft

Compare history perf

Compare historical performance of [projects / approaches] and suggest lessons learned

Suggested by Microsoft

Compare options A vs B

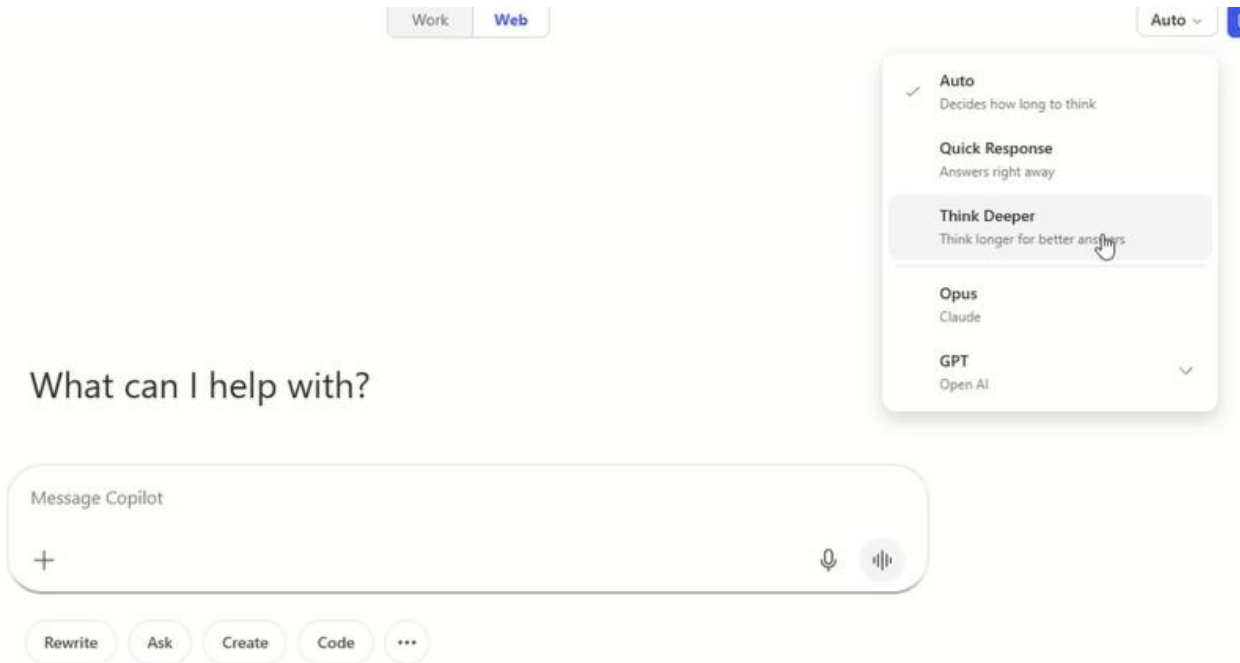
Compare the pros and cons of [option A vs option B] for [project / topic]

Development

Prompting Time options

- Copilot: Take all the time copilot allows. I don't need the fastest answer

- Chat GPT:



Prompt #1

- I'm an expert Emergency department nurse and educator.
- I have attached presentations from various facilities on Pain Assessment and Opioid management in the Emergency Department.
- Combine these into one standard presentation.
- Organize into topics.
- Remove any redundancies.
- Do not use outside material - only the presentations I've provided.
- Take all the time copilot allows. I want quality material.

AI response

- This draft contains strong content, but it feels content-heavy, repetitive in places, and not yet organized into a learner-friendly flow.
- Since this is a competency/compliance training, I would recommend organizing it into 6 major sections that move from
 - assessment →
 - treatment →
 - monitoring →
 - special populations →
 - clinical applications →
 - key takeaways

Prompt #2

- I need test out questions for experienced emergency department nurses.
- I've attached the presentation*. Do not use outside material - only the presentation I've provided.
- Write 15 assessment questions that cover the content discussed in the training.
- Each question should have 4 plausible item responses.
- Good item responses should be clear, measure one concept or idea, be free of bias, mutually exclusive of one another, similar in length and free of jargon.
- Each item response should also include a rationale of why it is wrong or right to provide feedback to the learner and reinforce the key concept correctly.
- Add slide number references for learners to review if they answer incorrectly.
- Take all the time copilot allows. I want quality questions.

AI response example

A 27-year-old male presents with a displaced tibia/fibula fracture after a motorcycle crash. He reports pain is 10/10. Weight is 118 kg. He is alert, oriented, and answers questions appropriately. The nurse documents a numeric pain score and administers titrated IV opioid medication.

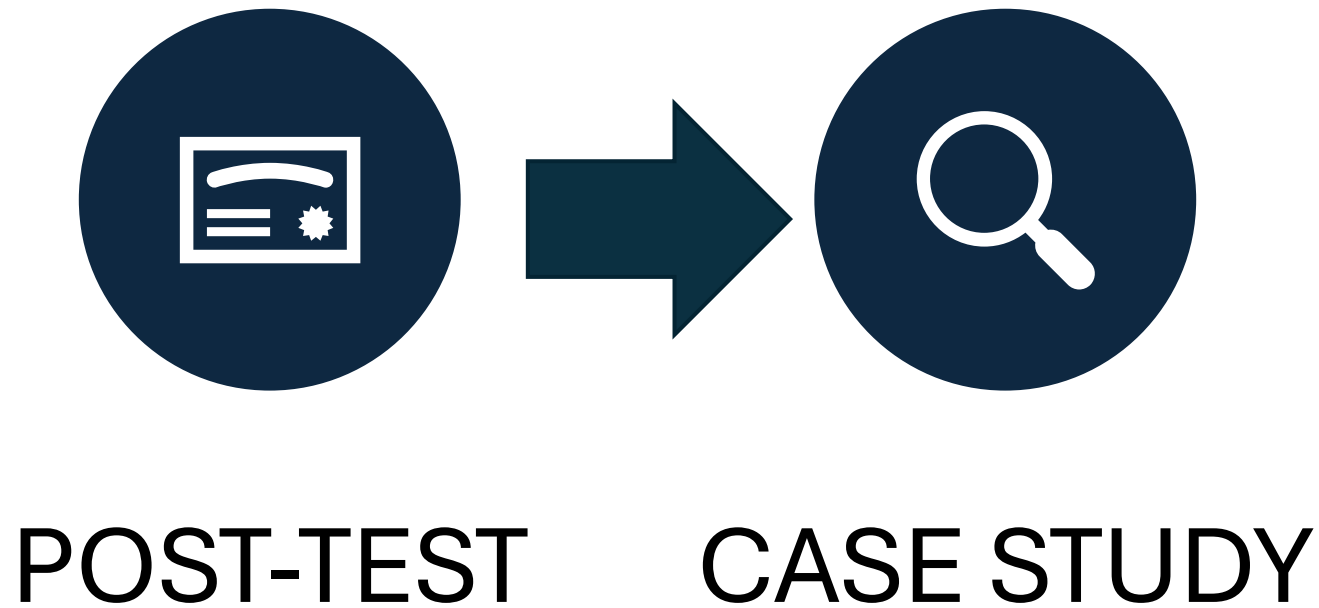
Thirty minutes later, pain is 7/10 and the patient reports he can now tolerate splinting. Which pain scale should be used?

- A. FLACC
- B. Numeric Rating Scale
- C. PAINAD
- D. NIPS

Correct Answer: B

Competency verification methods

Development



Wright, D. (2026, August 11). Competency Assessment the Wright Way: An Overview of the Wright Competency Model™, Lafayette, Indiana

Prompt #3

Turn this into a case scenario with a complex problem for ED nursing to solve that asks what the nurse's priority action should be. Answer choices are not rote memory:

A 27-year-old male presents with a displaced tibia/fibula fracture after a motorcycle crash. He reports pain is 10/10. Weight is 118 kg. He is alert, oriented, and answers questions appropriately. The nurse documents a numeric pain score and administers titrated IV opioid medication.

Thirty minutes later, pain is 7/10 and the patient reports he can now tolerate splinting. Which pain scale should be used?

Output from Copilot:

A 27-year-old male presents to the ED after a high-speed motorcycle crash with an obviously displaced tibia/fibula fracture. He weighs 118 kg and initially reports pain as 10/10. He is alert, oriented, and hemodynamically stable. The nurse administers titrated IV opioid medication per protocol.

Thirty minutes later, the patient's pain has improved to 7/10, and he states he can tolerate splinting. However, during preparation for splint placement, he becomes increasingly anxious and diaphoretic. He reports worsening pain with movement but also complains of numbness and tingling in his foot. His pedal pulse is present but weaker than on arrival. The orthopedic team is delayed due to another trauma activation, and the ED is managing several critical patients simultaneously.

What is the nurse's priority action?

Output from Copilot:

What is the nurse's priority action?

- A. Administer additional opioid medication to reduce the patient's pain before further assessment is done.
- B. Continue with splint placement, document the new findings afterward, and notify orthopedics when they arrive.
- C. Reassess neurovascular status, discuss findings with the provider, trial splint positioning adjustments, evaluate the patient's response, and adapt the plan of care as new information emerges.
- D. Delay all interventions until orthopedic surgery arrives because the cause of the patient's worsening symptoms is uncertain.

Correct Answer C

Copilot rationale

C. Correct

This patient is demonstrating a **change in condition** with worsening pain, new numbness/tingling, diaphoresis, anxiety, and a weaker pedal pulse. These findings require immediate reassessment and communication with the care team. The presentation emphasizes that pain assessment and reassessment are required whenever pain changes and that reassessment should include clinical progression and ongoing interventions. While pain management remains important, recognizing and communicating a potentially worsening condition takes priority.

Key concepts tested:

- Pain reassessment when condition changes
- Clinical progression must be assessed and documented
- Pain should not be viewed in isolation from the underlying condition
- Ongoing communication with the healthcare team

Slide References: 8, 18, 19, 20

SME review process

- ~~I'm an expert Emergency department nurse and educator.~~
- Accuracy review
- Regulatory review
- Clinical review
- Bias review



Spotting hallucinations

What to look for, and what to do when AI gets weird

- Overconfidence
 - On uncertain points
 - On ambiguous areas
 - About your organization specifics that AI shouldn't know
- Fabricated citations or reference
- Suspiciously clean clinical numbers

You know your learners' actual gaps. You know what real practice looks like. You know your unit and your organization.



AI Disclosure Statement

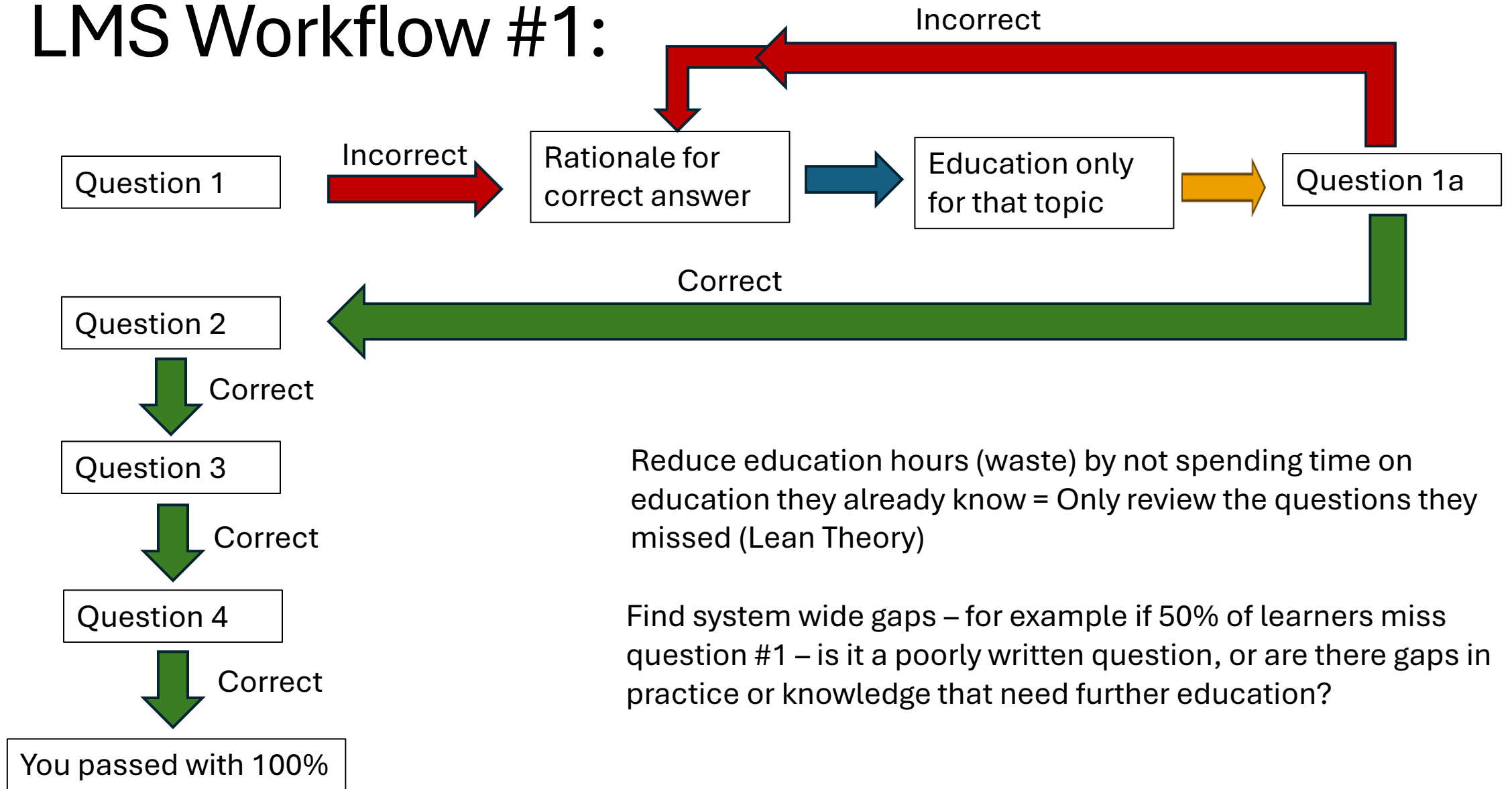
Portions of this educational content were generated or edited with the assistance of artificial intelligence (AI). All content has been reviewed and validated by qualified clinical educators to ensure alignment with current evidence-based practice, organizational policy, and applicable professional standards.

Why transparency matters.

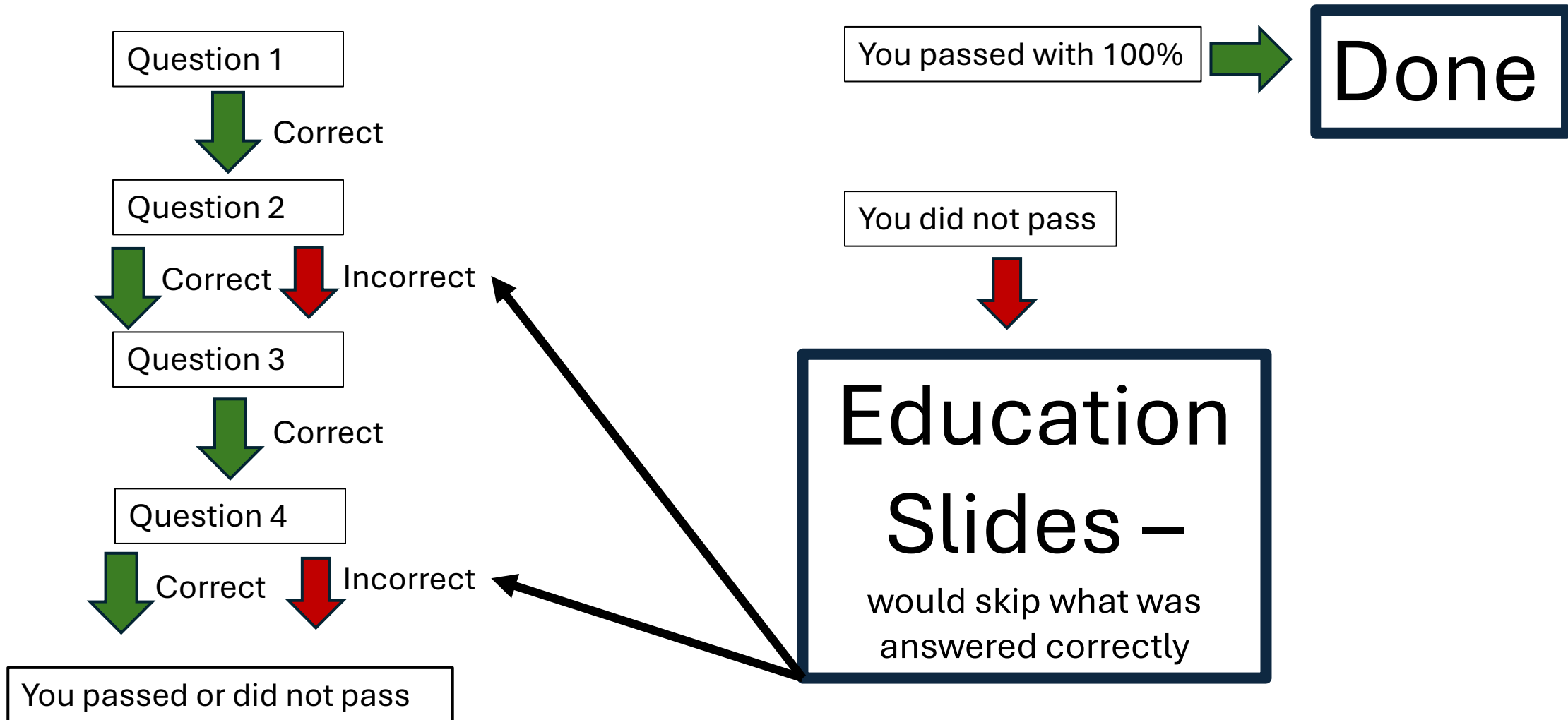
LMS Integration

- Partnered with instructional designers
- Built adaptive pathways
- Automated remediation
- Tracked completion and performance

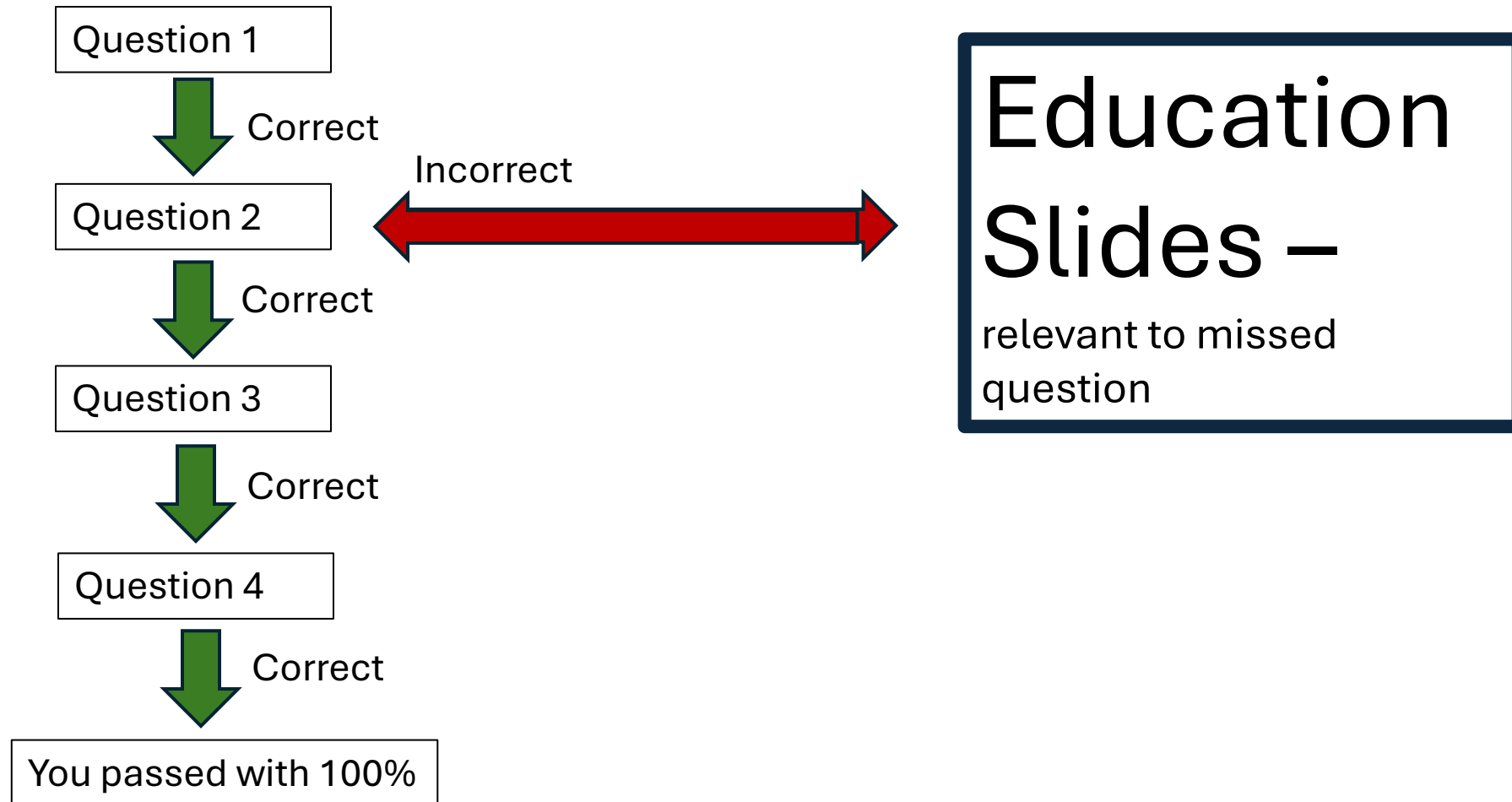
LMS Workflow #1:



LMS Workflow #2:



LMS Workflow #3:



Deployment

- 4 modules assigned to learners
 - OB Postpartum Hemorrhage module assigned to all OB RNs in June 2026
 - 3 ED modules assigned to Staffing Solutions ED RNs in August 2026

Early Outcomes

Postpartum Hemorrhage: 86% completion

Cardiac Crisis in the ED: 64% completion

OB/GYN Crisis in the ED: 44% completion

Orthopedic Crisis in the ED: 67% completion

- Note: ED modules are due 10/31/26

Outcomes

Level 1

- **Learner satisfaction**

Level 2

- Knowledge assessment performance
- Data on which questions were missed most

Level 3

- Behavioral application

Level 4

- Organizational outcomes

Level 1: Learning Satisfaction

Why Experienced Nurses Loved It

- Honors prior knowledge
- Less duplication
- Faster completion
- Increased autonomy
- More relevant learning
- 100% competency required
- No penalty for remediation
- Learn only what you missed
- Focus on competency, not seat time

Outcomes

Level 1

- Learner satisfaction

Level 2

- Knowledge assessment performance
- Data on which questions were missed most

Level 3

- Behavioral application

Level 4

- **Organizational outcomes**

Time and cost savings

Evaluation

Module Name	Time to do the full module and test*	Time to do the test-out*	Time savings	Cost savings per RN**	Cost savings for Staffing Solutions~	Cost savings for the organization^
Postpartum Hemorrhage	63.6 minutes	37.2 minutes	26.4 minutes	\$17.60	\$35.20	\$4100.80
Cardiac Crisis in the ER	48 minutes	19.8 minutes	28.2 minutes	\$18.80	\$1278.40	\$5940.80
OB and GYN Crisis in the ER	63 minutes	37.2 minutes	25.8 minutes	\$17.20	\$1169.60	\$5435.20
Ortho/Neurovascular Crisis in the ER	65.4 minutes	37.8 minutes	27.6 minutes	\$18.40	\$1251.20	\$5814.40

*Time calculated using Mergener formula; staff totals per Workday Learning LMS run on 8/10/26

**Cost savings using \$40/hour RN wage

~OB Staffing Solutions internal travel nurses = **2**

~ED Staffing Solutions internal travel nurses = **68**

^OB Franciscan Health nurses = **233**

^ED Franciscan Health nurses = **316**

What worked

- Standardize content before creating test questions
- Develop strong prompts
- SME validation is key
- Transparency with the learner

What surprised us

- LMS build was complicated
- System wide SME review took time
- Prompt refinements had to be made
- Change management – SME focused on content vs test questions
- AI skepticism

Lessons Learned

Future Opportunities

Evaluation

- Level 2
 - Knowledge assessment performance
 - Analysis of frequently missed questions
- Level 3
 - Behavioral application

Next Steps

- One ED module currently in design, with two additional modules undergoing SME review
- Standardized process established
- System-wide deployment

Future Opportunities

Revamp Competency Process

- Check our policies for these words:
 - Competency
 - Check off
 - Annual (change to periodic)
 - Mandatory
- Ask staff how they can demonstrate their competency → get ideas

Future Opportunities

Could AI support:

- Competencies development
- Cross competency comparisons
- Simulation
- Evaluation analysis
- Coaching
- Provide source documents and allow AI to generate slide decks, flyers and infographics
- Multi-step literature reviews

Takeaways

- We have become the “gatekeepers” to learner’s time.
- Honor what experienced nurses already know.
- Establish a process before you automate.
- Use AI to support, not replace, educator expertise.
- Target education to identified gaps, not seat time.
- Maintain transparency, validation, and oversight.
- Your role is expanding, not shrinking.

The goal wasn't to use AI. The goal was to create a more efficient, learner-centered competency process. AI was simply one of the tools that helped us get there.





IANPD 2027 Education Needs
Assessment & Engagement Survey



Lunch Break

Lunch served in separate room
Bring food back into this room to eat

Visit the Vendor Booths and View
Posters Next Door!



Growing Our Own: Student Nurse Tech Development Program

Presenters:

Andrea Draine, DNP, RN, NPD-BC

Heather Genson, MSN, RN

Gabriela Mansfield, BSN, RN

Zannah Harbert, MSN, RN, NPD-BC

Co-Creator: Trisha Eby, MSN, RN, NPD-BC

Beachball Introduction

- Throw to a couple people in the audience NOTE to self



Image source: Creative Commons, Licensed CC-BY-NC

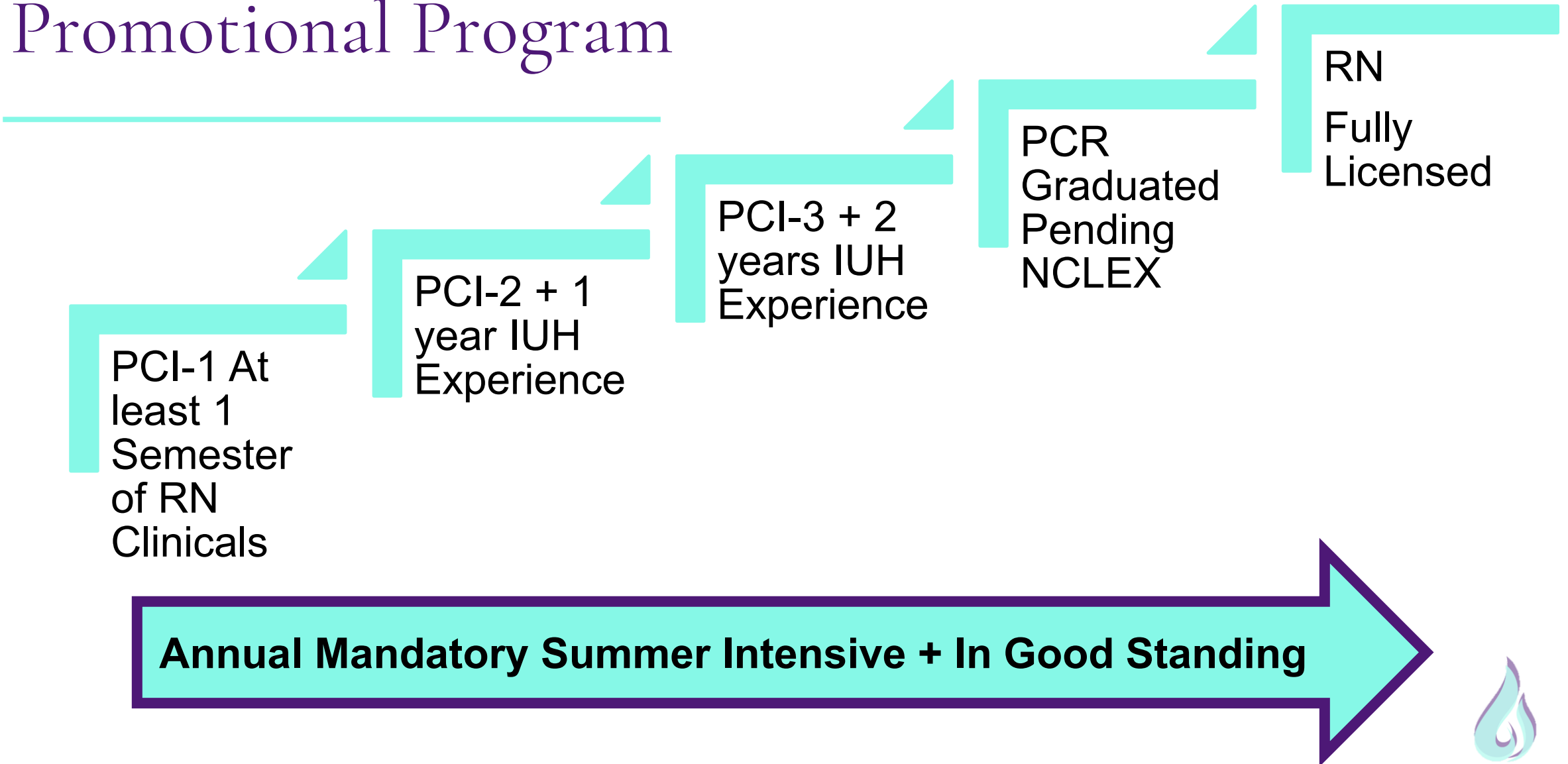


Objectives

- Overview of Promotional Program
- Strategy for Curriculum Development
- Outcomes and Lessons learned



Overview of Promotional Program



Summer Intensive Logistics

- 4-hours
- Mandatory Attendance
- Transition to Practice
- Curriculums A, B, & C to rotate each year



Credit: Photo: Courtesy of NBC, Graphic: Apartment Therapy

Ability to Apply

Improve Understanding

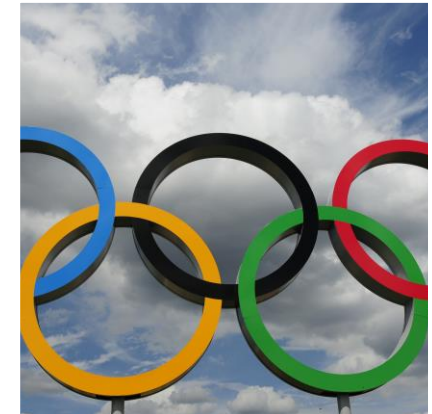


Image source: Creative Commons, Licensed CC-BY-NC



Image source: Creative Commons, Licensed CC-BY-NC

Increase Awareness

Team Training Tower



Image source: Creative Commons, Licensed CC-BY-NC



Team Training Tower: Rules

You will have 1 minute to build the tallest tower

- You must use the building pattern of 1 large, 3 small blocks, repeat
- No 2 blocks of the same color may touch
- All materials are located at one end of the room. Runners may only take 5 items at a time.
- Runners are not allowed to build, and builders are not allowed to run
- Any unused materials on the table when time is called will detract one block (for each unused item) from the overall height of the tower.



Content Creation

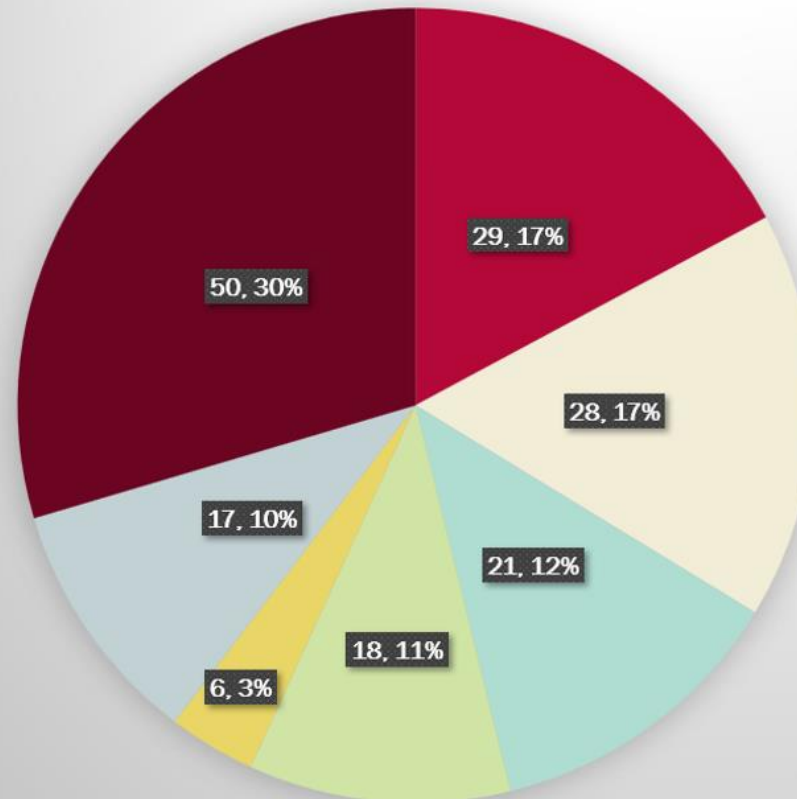
Environmental
Scanning

Needs
Assessment



Content Creation

PCI Themes: What do you want to learn? What Myths have you heard? What worries you about becoming a nurse?



- Hands-On Nursing Skill Development
- Soft Skill Development: Prioritizing, organizing, time management, delegation, strategic planning, problem solving
- TA/HR: Job opportunities, Resume building,
- Interpersonal Skills: Communication, Collaboration
- NCLEX
- Making a Mistake
- Role Transitions, Confidence, Competence, and Responsibility



Scope of Practice

The **Patient Care Intern (PCI)** role maintains the **Patient Care Technician (PCA)** scope while offering expanded opportunities for learning.



Image source: IU Health Brand Center; Used with Permission



Hands-On Skills



Phlebotomy



Safety Simulation



HAPI Prevention



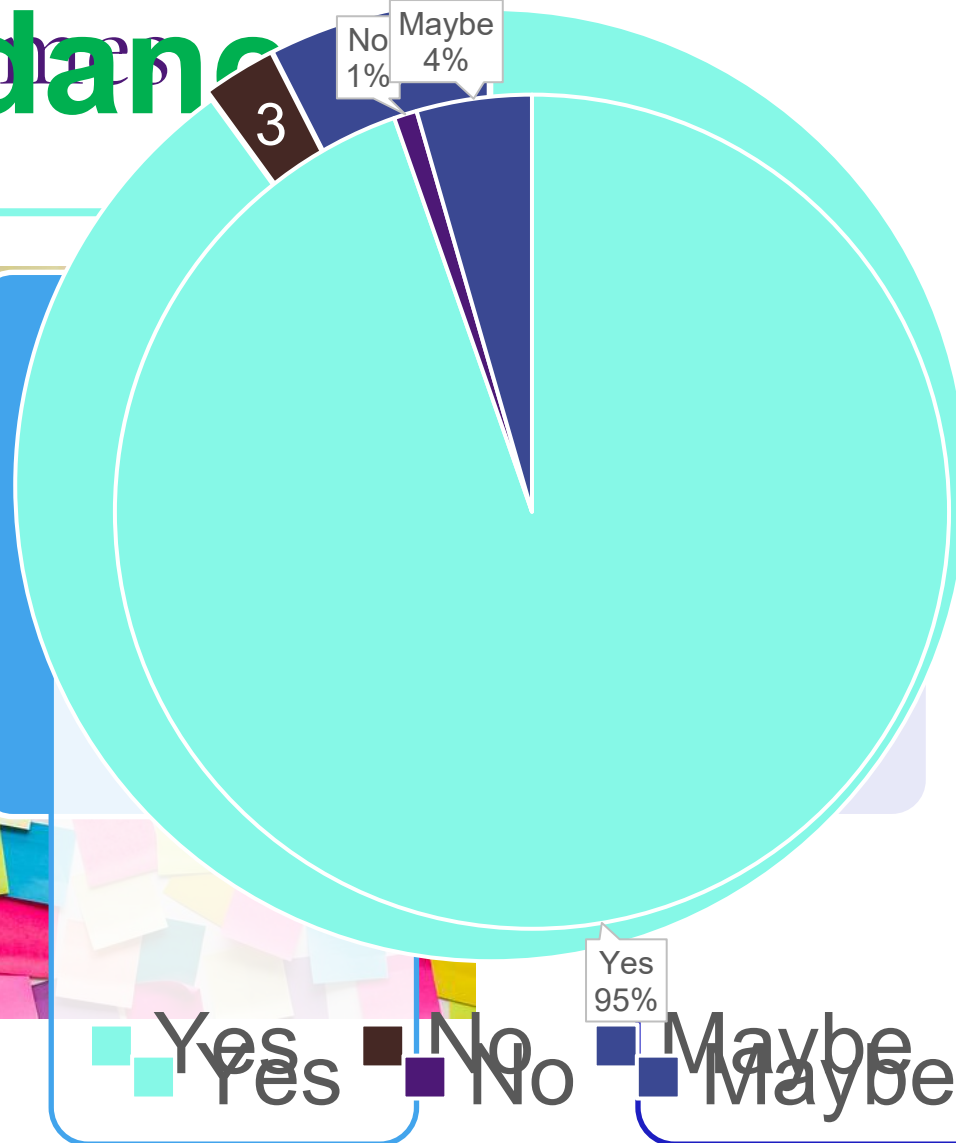
Create Community

Growing Our Own:
Student Nurse Tech
Development Program



2025 Customer Performance

Would you Recommend?



2023

• 73%
(132/181)

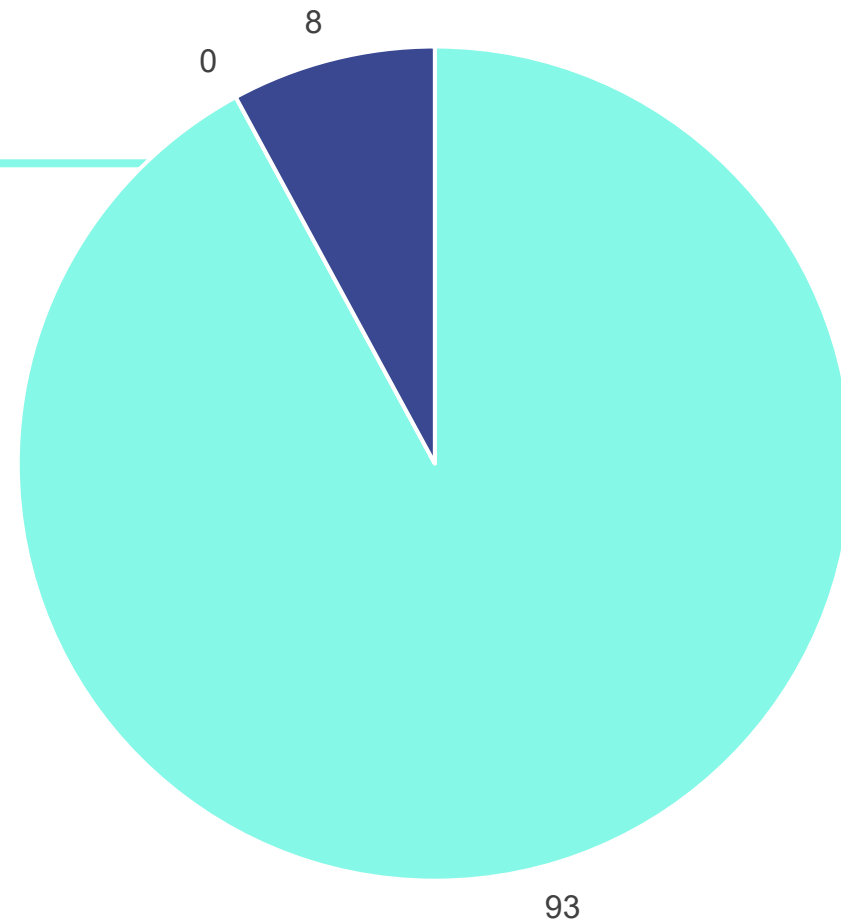
2026

• 95%
(126/132)



2026: 90% YES

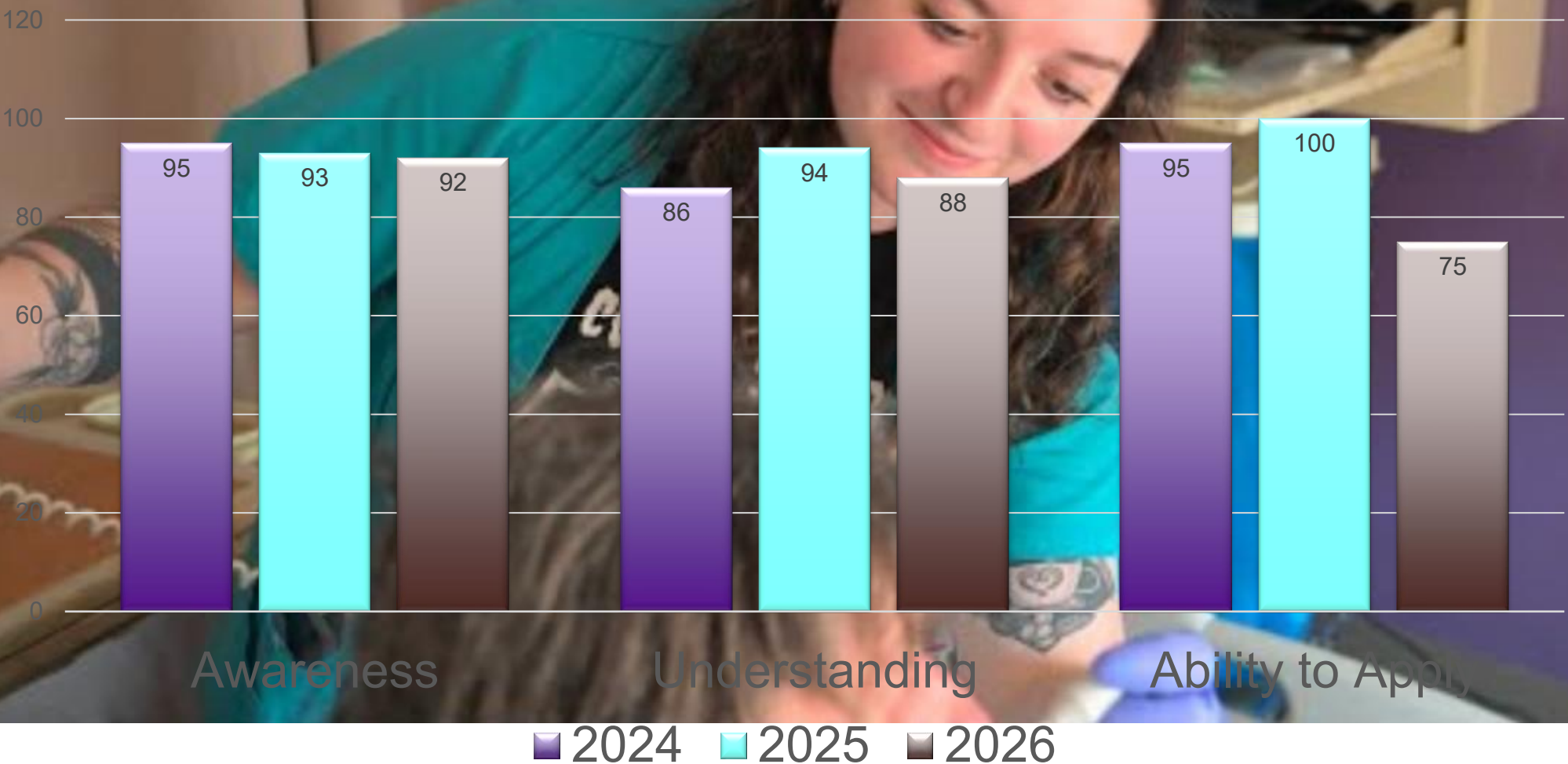
Would you recommend?



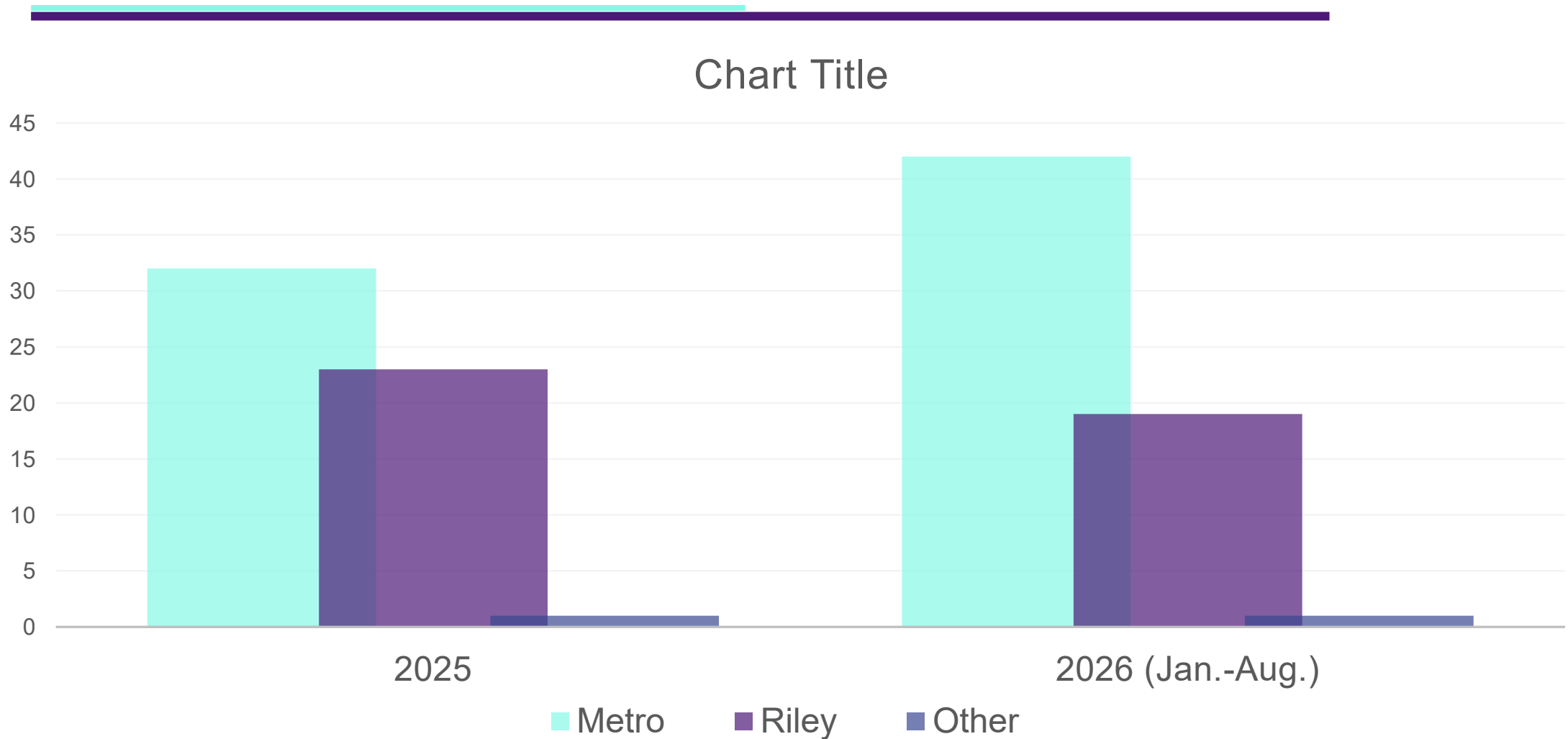
■ Yes ■ No ■ Maybe



Summer Intensive Evaluations



PCI to RN Conversions



The Road Ahead...

1

**Continuous Program
Improvement**



**Tracking &
Partnerships**

2

**Community &
Professional Growth**

3

Image source: Creative Commons, Licensed CC-BY-NC

Reference List

To View Olivia PCI's Video:
<https://www.youtube.com/watch?v=zLMQb1FdW3E>

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<https://www.lifesize.com/blog/speaking-without-words/#:~:text=However%2C%20most%20experts%20agree%20that,of%20a%20communication%20is%20nonverbal.>





Break

Visit the Vendor Booths and View
Posters Next Door!

IANPD 2027 Education Needs
Assessment & Engagement Survey



Professional Branding

Sarah E. Gray, DNP, RN, NEA-BC, CEN, FAEN

Sr. Vice President of Nursing Impact

Sarah.Gray@ana.org



Disclosure

The presenters for this presentation have disclosed no conflict of interest related to this topic.

Objectives:

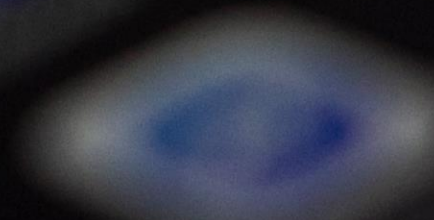
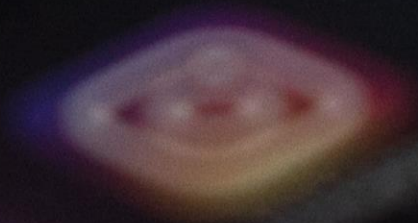
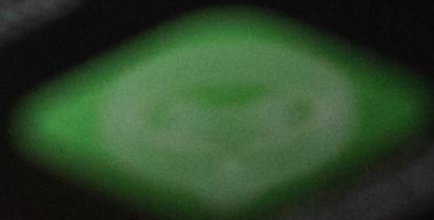
- Illustrate the impact a professional brand has on one's professional identity by the conclusion of the presentation.
- Identify at least two ways to enhance one's professional brand to impact one's influence.
- Complete the first step in articulating one's personal mission/vision.

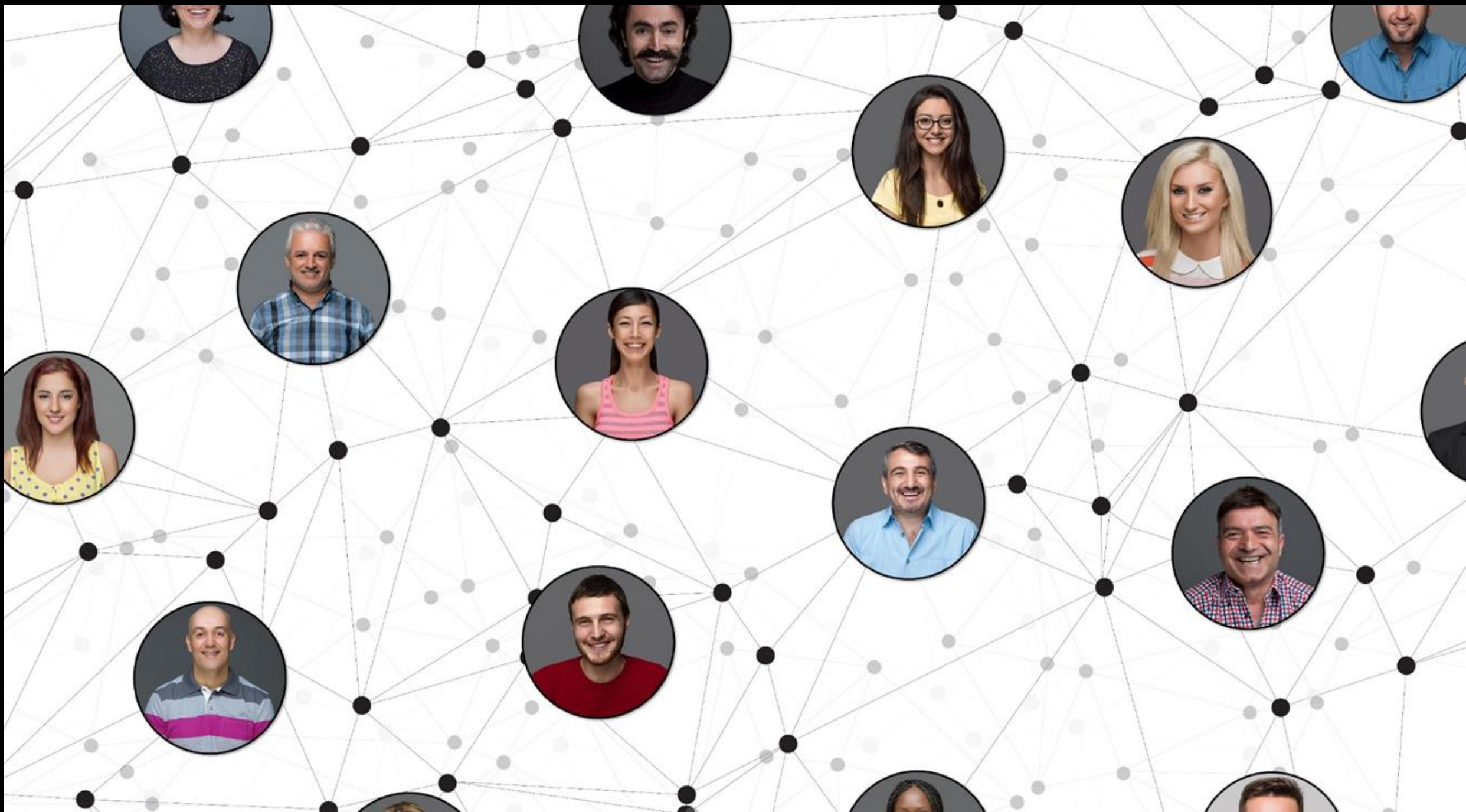
amazon

The Amazon logo is mounted on a grey tiled wall. It features the word "amazon" in a bold, lowercase, sans-serif font. The letters are dark grey and have a three-dimensional appearance with shadows. Below the word, there is a bright orange arrow that curves from the bottom of the letter 'a' to the bottom of the letter 'z', pointing to the right.



Social Media













Identify your core values

Name the population you serve

Set your vision

Plan how you will achieve your vision (mission)

Identify activities that align with our mission

Review, revise, and refine your mission statement

Enlist others to help you accomplish your mission

B

R

A

N

D

Authenticity	Creativity	Justice	Religion
Achievement	Curiosity	Kindness	Reputation
Adventure	Determination	Knowledge	Respect
Authority	Fairness	Leadership	Responsibility
Autonomy	Faith	Learning	Security
Balance	Fame	Love	Self-Respect
Beauty	Friendships	Loyalty	Service
Boldness	Fun	Meaningful Work	Spirituality
Compassion	Growth	Openness	Stability
Challenge	Happiness	Optimism	Success
Citizenship	Honesty	Peace	Status
Community	Humor	Pleasure	Trustworthiness
Competency	Influence	Poise	Wealth
Contribution	Inner Harmony	Popularity	Wellness
Courage	Integrity	Recognition	Wisdom

Character Strengths Survey

www.viacharacter.org/Account/Register



SCAN ME

1: Creativity 🧠

Thinking of novel and productive ways to conceptualize and do things; includes artistic achievement but is not limited to it.

2: Perseverance 🏆

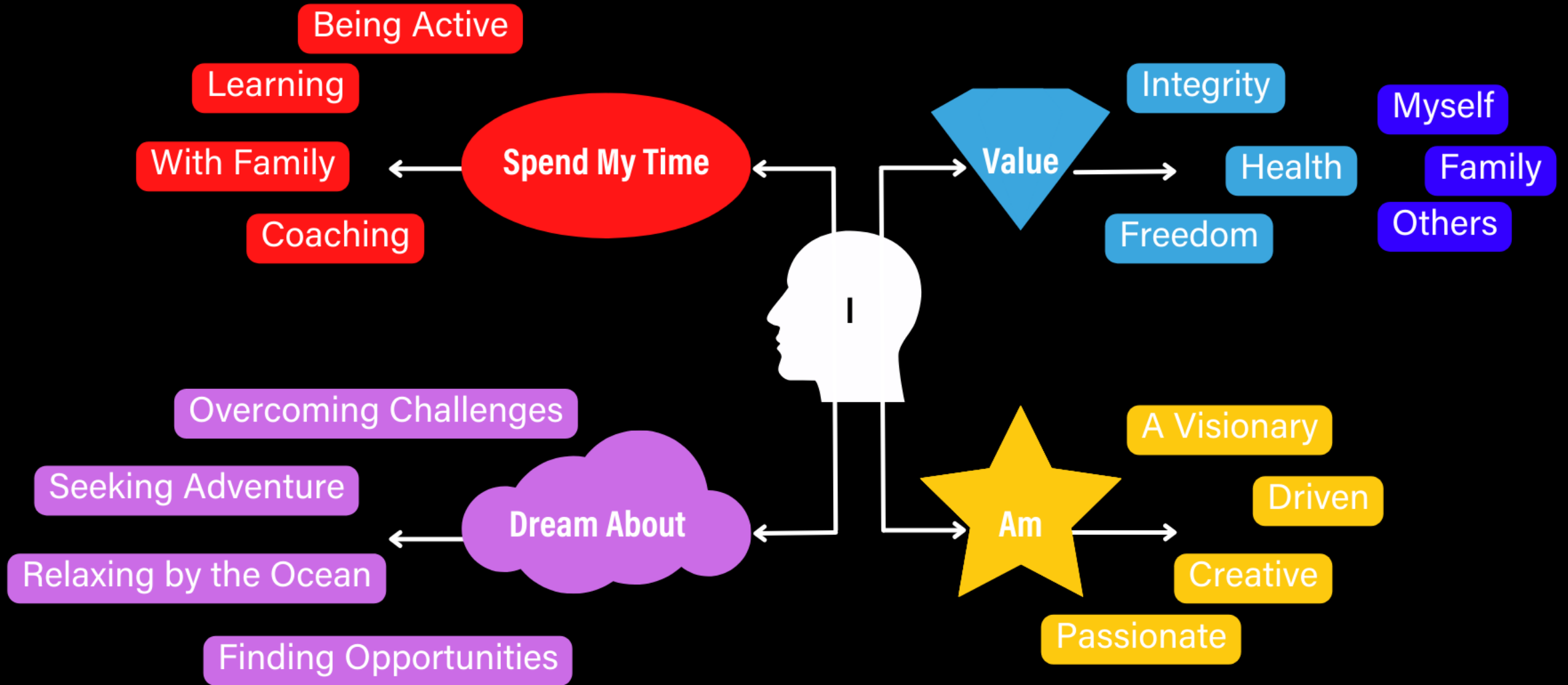
Finishing what one starts; persevering in a course of action in spite of obstacles; "getting it out the door"; taking pleasure in completing tasks.

3: Honesty 🗣️

Speaking the truth but more broadly presenting oneself in a genuine way and acting in a sincere way; being without pretense; taking responsibility for one's feelings and actions.

4: Bravery 🦁

Not shrinking from threat, challenge, difficulty, or pain; speaking up for what's right even if there's opposition; acting on convictions even if unpopular; includes physical bravery but is not limited to it.



Identify your core values

Name the population you serve

Set your vision

Plan how you will achieve your vision (mission)

Identify activities that align with our mission

Review, revise, and refine your mission statement

Enlist others to help you accomplish your mission

B

R

A

N

D

Mission Statement

Action

Population

Contribution

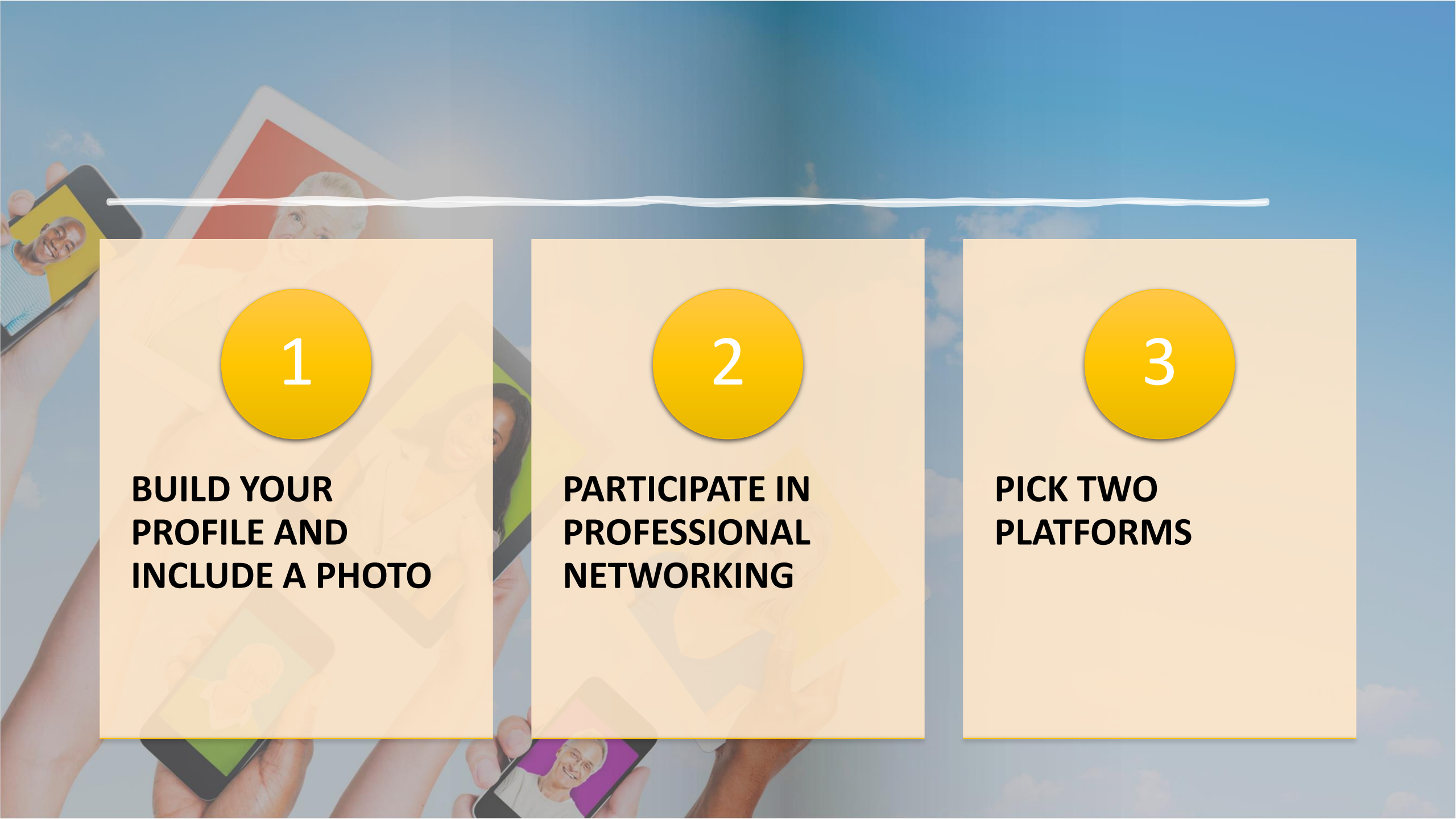
Equip and empower others with the support and opportunities they need

Impact

to enhance their overall health and vitality.

Connecting

- professional career goals
- dreams or aspirations in nursing
- what role they want but don't have yet
- what they wish they could fix about their work environment
- ideas they have



1

**BUILD YOUR
PROFILE AND
INCLUDE A PHOTO**

2

**PARTICIPATE IN
PROFESSIONAL
NETWORKING**

3

**PICK TWO
PLATFORMS**



Ego
Fault
Crowd
Surfer





Rebrand





Professional Organizations
are a toolbox,
they aren't useful unless
you open them.

“People will forget what you said, they will forget what you did, but they will never forget how you made them feel.”

Maya Angelou





Sarah E. Gray, DNP, RN, CEN, FAEN
Sarah@sigmanursing.org



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Chapter Announcements

- 2026 Recognition Award Nominations are open!
- Board Member Voting Survey now open!
- Learning Needs Assessment now open!





NOTE: CHECK YOUR JUNK FOLDER. The CE will come from "Formstack Documents" noreply@webmerge.me

You must move it to your Inbox to open the CE

https://franciscanhealthcare.formstack.com/forms/ianpd_ignite



Evaluation