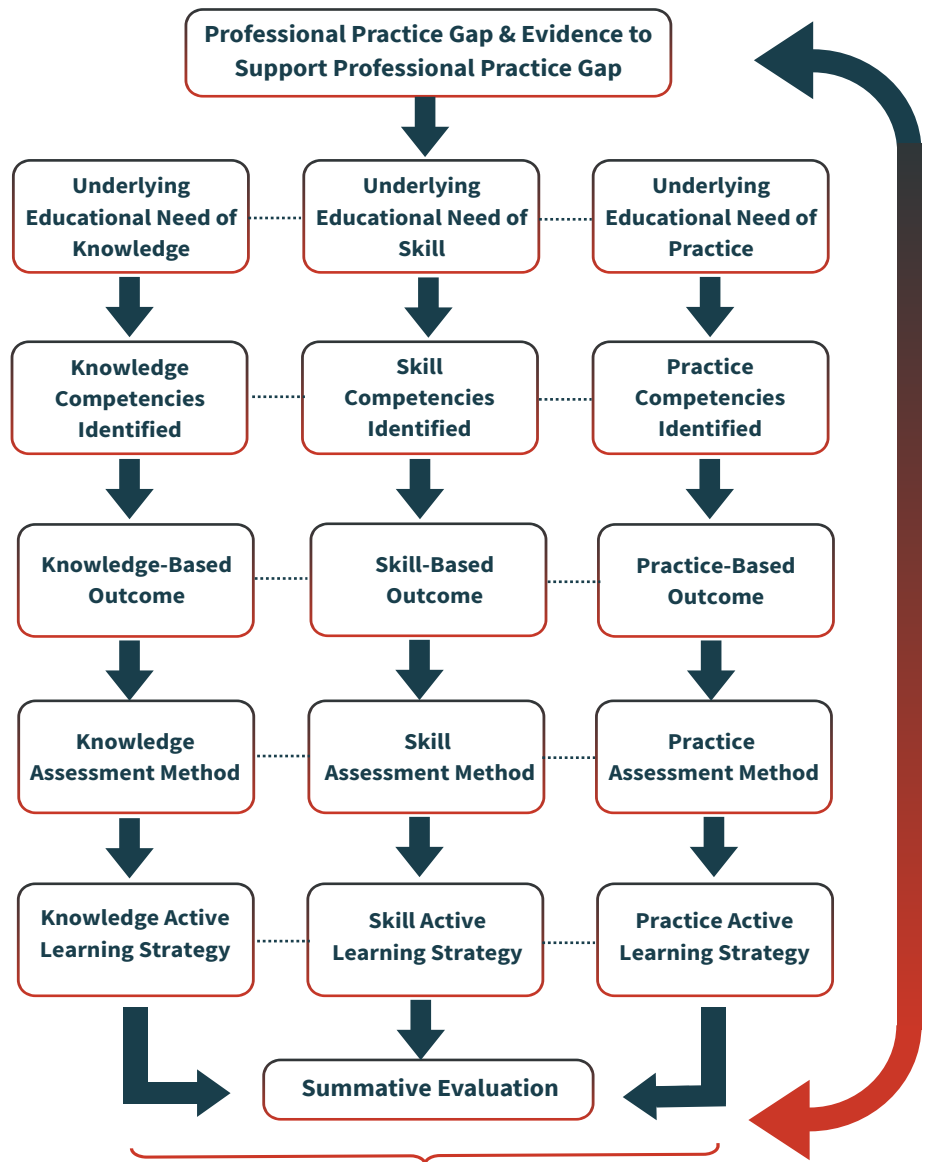


Nurse Planner Competency:

Beyond leadership, the support and development of Nurse Planners are essential to sustaining program quality and compliance. Nurse Planners play a crucial role in the planning, implementation, and evaluation of NCPD activities. Without a structured onboarding process and continuous support, Approved Providers may struggle to meet accreditation standards,

potentially compromising the integrity of the program. A well-defined approach to onboarding, compliance monitoring, and professional growth enhances the effectiveness of individual Nurse Planners and strengthens the overall program by fostering a culture of accountability and excellence.

SECTION 2: Educational Design Process



The educational design process criteria (EDP 1-7) must align with the Standards for Integrity and Independence in Accredited Continuing Education.

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

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

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

- Incorporating the active involvement of a Nurse Planner in the planning process;
- Addressing a professional practice gap (change in standard of care, problem in practice, or opportunity for improvement);
- Analyzing educational needs (knowledge, skills, and/or practices) of registered nurses and/or healthcare team members that underlie the problem or opportunity (why the problem or opportunity exists);
- Identifying competencies that align with the identified professional practice gap and underlying educational need(s);
- Identifying one or more learning outcomes to be achieved by learners participating in the activity;
- Evaluating achievement of learning outcomes, using strategies that actively involve the learner in the educational activity and are congruent with the educational needs and desired learning outcomes; and
- Ensuring educational activities adhere to the Standards for Integrity and Independence in Accredited CE.

EDUCATIONAL DESIGN PROCESS ELEMENTS

Content Reviewer:

An individual selected to evaluate an educational activity during the planning process or after it has been planned but prior to delivery to learners for content quality, bias, and any other aspects of the activity that may require evaluation.

Educational Content

What Content Is Eligible?

It is the expectation that for all NCPD activity planning, the Approved Provider or Individual Activity Applicant will adhere to the ANCC educational design process and activity file requirements. Content chosen for educational activities must address a gap in knowledge, skill, and/or practice and must be evidence-based or based on the best available evidence, and the educational activity must be planned independently from the influence of ineligible companies. Content is intended to build upon the educational and professional development of the RN. Content areas may include but are not limited to faculty development, leadership, research, practice theory, onboarding, practice transitioning, shared governance, wellness and self-care, team training, skill-based training (BLS/ACLS), quality, and performance improvement. Additionally, NCPD content may be derived from academic curricula. Educational content must align with the Standards for Integrity and Independence in Accredited Continuing Education Standard 1, and Approved Providers or Individual Activity Applicants are responsible for ensuring that education is fair and balanced and that any clinical content presented supports safe, effective patient care (ACCME, 2020).

Content developed by an ineligible company may NOT be used in approved educational activities. Content for NCPD activities must include supporting best available evidence-based references. There is no minimum number of references. Organizations are responsible for determining what is “best available” evidence. The ANCC NCPD Accreditation criteria do not define a time frame associated with the best available current evidence or define the number of references required for an activity. Stating that the speaker is an expert does not meet the requirement for an evidence-based reference. It is up to the Nurse Planner and expert to identify written resources that support the expert knowledge.

If there is a concern that the content is not based on best available evidence, a **content reviewer** can be utilized to ensure validity and integrity within the educational activity.

Planning Committee Involvement in Content Development

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

Previously Developed Content

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

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

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

Target Audience

The target audience is defined as specific registered nurse learners and may include other healthcare team members the educational activity is intended to impact.



NOTE:

- **Accredited Approvers** are not permitted to approve activities without the RN being a represented member of the target audience.
- **Approved Providers** are not permitted to provide approved educational activities without the RN being a represented member of the target audience.

Professional Practice Gap

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

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

The Nurse Planner (who may also be the Primary Nurse Planner) is the only individual who is required to be part of the planning process.

The planning committee is made up of all individuals who have been identified as influencing the educational content and making planning decisions for the activity.

Underlying Educational Needs

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

In addition to identifying the underlying educational need of the target audience, it is essential to evaluate what the educational activity intends to address. For instance, if the content and assessment methods of an activity are focused on knowledge and skill development without addressing or measuring a change in practice, practice should not be identified as part of the underlying educational need.

Competence

The foundational abilities required for nursing practice in a given context.

Competency

The ability to apply knowledge, skills, and/or abilities, including intellectual behaviors that are required to meet performance and outcomes in professional practice in a given context (Dodge, Bushway, & Long, 2018).

Competency Identification

The American Nurses Credentialing Center NCPD Accreditation program defines **competence** as “the foundational abilities required for nursing practice in a given context,” and **competency** as “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” (Dodge, Bushway, & Long, 2018, p.1).

Identifying competencies for ANCC educational activities is a thoughtful process that aligns educational offerings with the ever-changing needs of the nursing profession and healthcare demands. The process begins, prior to activity file development, with understanding the overarching goals of the NCPD Program.

Once that understanding is confirmed, an organization may identify key competencies that align with these goals and are reflective of the desired practice for the program’s target audience. These competencies reflect both clinical skills, such as patient management, and nonclinical skills, like communication and leadership. Consideration is also given to shifts in healthcare policies, technological advancements, and evolving patient needs. As these factors change, so do the competencies required to address emerging challenges, making regular updates critical to staying relevant.

Validating competencies to bridge the professional practice gap is foundational in developing accredited education. Competencies establish a clear purpose for educational activities and serve as a planning and instructional design framework. Identifying these competencies early ensures that every aspect of the educational strategy aligns to deliver targeted learning (Graebe & Roy, 2025).

Competencies and learning outcomes must be clearly defined, measurable, and achievable for educational activities aimed at demonstrating impact or improvements in knowledge, skills, and practice. Providers should transparently link competencies to real-world applications, offering actionable examples like patient interactions or team collaboration. Breaking competencies into smaller, practical skills helps nurses relate them to daily practice, promoting meaningful integration into their roles.

Competency selection also considers nurses’ diverse learning styles and professional stages. New nurses may require different competencies than seasoned professionals. Incorporating varied educational methods, such as simulations, case studies, and peer discussions, can accommodate these differences, facilitating deeper understanding and engagement.

By identifying competencies first, educators create a solid foundation for setting precise learning outcomes. A backward design approach ensures alignment between competencies, learning activities, and assessments, preparing learners to demonstrate mastery effectively. This alignment is key to purposeful and learner-centered educational experiences.

Ultimately, the goal of selecting competencies is to ensure that educational content is relevant, actionable, and forward-looking. These efforts empower nurses to maintain and enhance their competence while adapting to the dynamic demands of healthcare systems.

Competency-based learning is the cornerstone of professional excellence, fostering patient trust and high-quality care. As the expectations of nursing evolve, so must the educational systems that support, challenge, and drive innovation in practice. ANCC's NCPD Accreditation criteria emphasize a competency-based approach to education, ensuring purposeful, learner-centered, and impactful learning experiences.

- Approved Providers and Individual Activity Applicants are encouraged to not develop its own competencies but rather it should be identifying established competencies from professorial sources that align with the professional practice gap.
- It is not the expectation that each educational activity will determine competency, unless the Provider makes that determination. The competencies are used to develop the measurable learning outcomes and support the activity's relevance for the target audience.

Learning Outcome(s)

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

OUTCOMES	OBJECTIVES
A statement describing the overall goal for learners at the end of the educational activity.	Defines the content of an education activity.
Must be quantifiable and able to be measured.	Highlights the topics that will be discussed during the presentation.
Is based on the professional practice gap, underlying educational need, and identified competencies.	Is focused on content delivery.

Assessment Methods

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

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

KNOWLEDGE	SKILL	PRACTICE ASSESSMENT METHODS
▪ Polling ▪ Multiple choice ▪ True or false ▪ Verbal response ▪ Written tests ▪ Self-report	▪ Return demonstration ▪ Case study ▪ Role play ▪ Simulation ▪ Essay demonstrating application of knowledge and skill ▪ Computer-based simulation scenarios	▪ Long-term report of actual change in practice ▪ Change in quality outcome measure ▪ Observation of performance in practice



NOTE: The intent to change practice is not an acceptable short-term or long-term assessment method for measuring impact or change in practice.

Active Learning Strategies

Evolving beyond engagement strategies, active learning strategies engage students in the learning process, encouraging them to participate actively in acquiring knowledge, developing skills, and practicing competencies.

Active Learning Strategies

Evolving beyond engagement strategies, active learning strategies **engage students in the learning process**, encouraging them to participate actively in acquiring knowledge, developing skills, and practicing competencies. Active learning is any activity in which the learner participates in or interacts with the learning process instead of passively taking in the information. Learners perform better when allowed to engage with the information they are actively learning. (Theobald et al., 2020).

Active learning encourages conversation and debate, while passive learning encourages active listening and paying attention to detail. Examples of active learning include tabletop exercises, simulations, think-pair-share exercises, jigsaw discussions, and pausing for guided reflection during lectures.

Educators can effectively address competencies, learning outcomes, and underlying educational needs by incorporating active learning strategies into educational activities to foster deeper engagement, skill development, and competency attainment among learners. By integrating **active learning strategies** – like discussion, problem-solving, and self-quizzing – learners will retain information longer, build deeper understanding, and become more engaged learners. (Savin et al., 2023).

Another consideration with active learning is the importance of minimizing distractions. Multitasking during learning significantly increases the time required to acquire knowledge and results in less adaptable learning outcomes. This occurs because multitasking engages brain regions that are less effective for retaining information, thereby making it more difficult to recall facts and apply learned material. Additionally, research by Sana, Weston, and Cepeda (2013) demonstrated that students who utilized laptops during lectures scored lower on assessments. Moreover, students seated within the direct view of multitasking peers also exhibited lower test scores than those not exposed to such distractions. These findings underscore that multitasking impairs not only the individual engaging in the activity but also those in their immediate environment.



NOTE: Q&A, post-tests, PowerPoint presentations, and videos are not considered active learning strategies.

Summative Evaluation – For Approved Providers

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

Reminder: The summative evaluation process includes two elements:

- Evaluate data to determine the impact of the educational activity in achieving the desired outcome.
- Evaluate data to guide future educational activities.

The Standards for Integrity and Independence in Accredited Continuing Education

The Standards for Integrity and Independence in Accredited Continuing Education (the Standards) were established by the Accreditation Council for Continuing Medical Education (ACCME) through a collaborative, two-year effort involving open dialogue and consensus-building with the health professions' continuing education (CE) community, including the ANCC. They have been endorsed and adopted by the ANCC along with eight other accrediting bodies from multiple health professions. The Standards serve as a foundational framework to ensure that accredited continuing education activities maintain the highest level of ethical and educational quality. The Standards are designed to safeguard the integrity of educational content, promote independence from commercial interests, and prioritize the needs of learners and the public.



NOTE: The ANCC adopted the Standards for Integrity and Independence in Accredited Continuing Education. Approved Provider and Individual Activity Applicants are required to adhere to these standards. While the standards use the term “accredited,” it is important to note that the education offered by Approved Providers and Individual Activity Applicants are categorized as “approved,” not “accredited.”

The Standards are available **online** and should be reviewed and understood to ensure that processes align with the expectations put forward in the Standards.

The Standards include five key elements:

- **Standard 1:** Ensure Content is Valid
- **Standard 2:** Prevent Commercial Bias and Marketing in Accredited Continuing Education
- **Standard 3:** Identify, Mitigate, and Disclose Relevant Financial Relationships
- **Standard 4:** Manage Commercial Support Appropriately (if applicable)
- **Standard 5:** Manage Ancillary Activities Offered in Conjunction with Accredited Continuing Education (if applicable)

Key terms to understand:

- **Ineligible company:** A company whose primary business is producing, marketing, selling, reselling, or distributing healthcare products used by or on patients. (ACCME, 2020).
- **Financial Commercial Support:** Money supplied by an ineligible company to be used by a provider for expenses related to the educational activity. Financial support may be provided as an unrestricted grant, an educational grant, a donation, or a scholarship. (ACCME, 2020).

- **In-kind Commercial Support:** Materials, space, or other nonmonetary resources or services from an ineligible company used by a provider to conduct an educational activity, which may include but are not limited to human resources, marketing services, physical space, equipment such as audiovisual components, and teaching tools (for example, anatomic models). (ACCME, 2020).
- **Relevant Financial Relationship:** When an individual has a financial relationship with an ineligible company and the educational content is related to the business lines or products of the ineligible company (ACCME, 2020).

Standard 1: Ensure Content Is Valid

Standard 1 applies to all accredited continuing education.

Approved Providers and Individual Activity Applicants are responsible for ensuring that their education is fair and balanced and that any clinical content presented supports safe, effective patient care.

1. All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.
2. All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.
3. Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of Approved Providers and Individual Activity Applicants to facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning.
4. Organizations cannot be accredited if they advocate for unscientific approaches to diagnosis or therapy, or if their education promotes recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.

Standard 2: Prevent Commercial Bias and Marketing in Accredited Continuing Education

Standard 2 applies to all accredited continuing education.

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

1. The Approved Providers and Individual Activity Applicants 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 Approved Providers and Individual Activity Applicants 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.

Standard 3: Identify, Mitigate, and Disclose Relevant Financial Relationships

Standard 3 applies to all accredited continuing education.

Many healthcare professionals have financial relationships with ineligible companies. These relationships must not be allowed to influence accredited continuing education. The Approved Provider and Individual Activity Applicant is responsible for identifying relevant financial relationships between individuals in control of educational content and ineligible companies and managing these relationships to ensure they do not introduce commercial bias into the education. Financial relationships of any dollar amount are defined as relevant if the educational content is related to the business lines or products of the ineligible company.

Approved Providers and Individual Activity Applicants must take the following steps when developing continuing education. Exceptions are listed at the end of Standard 3.

- 1. Collect information:** Collect information from all planners, faculty, and others in control of educational content about all their financial relationships with ineligible companies within the prior 24 months. There is no minimum financial threshold; individuals must disclose all financial relationships, regardless of the amount, with ineligible companies. Individuals must disclose regardless of their view of the relevance of the relationship to the education. Disclosure information must include:
 - a. The name of the ineligible company with which the person has a financial relationship.
 - b. The nature of the financial relationship. Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including for contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.
- 2. Exclude owners or employees of ineligible companies:** Review the information about financial relationships to identify individuals who are owners or employees of ineligible companies. These individuals must be excluded from controlling content or participating as planners or faculty in accredited education. There are three exceptions to this exclusion – employees of ineligible companies can participate as planners or faculty in these specific situations:
 - a. When the content of the activity is not related to the business lines or products of their employer/company.
 - b. When the content of the accredited activity is limited to basic science research, such as pre-clinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.
 - c. When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used.
- 3. Identify relevant financial relationships:** Review the information about financial relationships to determine which relationships are relevant. Financial relationships are relevant if the educational content an individual can control is related to the business lines or products of the ineligible company.
- 4. Mitigate relevant financial relationships:** Take steps to prevent all those with relevant financial relationships from inserting commercial bias into content.
 - a. Mitigate relationships prior to the individuals assuming their roles. Take steps appropriate to the role of the individual. For example, steps for planners will likely be different than for faculty and would occur before planning begins.
 - b. Document the steps taken to mitigate relevant financial relationships.
- 5. Disclose all relevant financial relationships to learners:** Disclosure to learners must include each of the following:
 - a. The names of the individuals with relevant financial relationships.
 - b. The names of the ineligible companies with which they have relationships.
 - c. The nature of the relationships.
 - d. A statement that all relevant financial relationships have been mitigated.

Identify ineligible companies by their name only. Disclosure to learners must not include ineligible companies' corporate or product logos, trade names, or product group messages.

Disclose absence of relevant financial relationships. Inform learners about planners, faculty, and others in control of content (either individually or as a group) with no relevant financial relationships with ineligible companies. **Learners must receive disclosure information in a format that can be verified during the approval process. Disclosure statements must be shared with learners before they engage with the approved education.**

Exceptions: Approved Providers and Individual Activity Applicants do not need to identify, mitigate, or disclose relevant financial relationships for any of the following activities:

1. Accredited education that is nonclinical, such as leadership or communication skills training.
2. Accredited education where the learner group is in control of content, such as a spontaneous case conversation among peers.
3. Accredited self-directed education where the learner controls their educational goals and reports on changes that resulted, such as learning from teaching, remediation, or a personal development plan. When accredited providers serve as a source of information for the self-directed learner, they should direct learners only to resources and methods for learning that are not controlled by ineligible companies.

Standard 4: Manage Commercial Support Appropriately

Standard 4 applies only to accredited continuing education that receives financial or in-kind support from ineligible companies.

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

- 1. Decision-making and disbursement:** The Approved Provider and Individual Activity Applicant must make all decisions regarding the receipt and disbursement of the commercial support.
 - a. Ineligible companies must not pay directly for any of the expenses related to the education or the learners.
 - b. The Approved Provider and Individual Activity Applicant may use commercial support to fund honoraria or travel expenses of planners, faculty, and others in control of content for those roles only.
 - c. The Approved Provider and Individual Activity Applicant must not use commercial support to pay for travel, lodging, honoraria, or personal expenses for individual learners or groups of learners in accredited education.
 - d. The Approved Providers and Individual Activity Applicants may use commercial support to defray or eliminate the cost of the education for all learners.
- 2. Agreement:** The terms, conditions, and purposes of the commercial support must be documented in an agreement between the ineligible company and the Approved Provider and Individual Activity Applicant. The agreement must be executed prior to the start of the accredited education. An Approved Provider and Individual Activity Applicant can sign on to an existing agreement with an Approved Provider and a commercial supporter by indicating its acceptance of the terms, conditions, and amount of commercial support it will receive.

3. Accountability: The Approved Provider and Individual Activity Applicant must keep a record of the amount or kind of commercial support received and how it was used, and must produce that accounting, upon request, by the accrediting body or by the ineligible company that provided the commercial support.

4. Disclosure to learners: The Approved Provider and Individual Activity Applicant must disclose to the learners the name(s) of the ineligible company(ies) that gave the commercial support, and the nature of the support if it was in-kind, prior to the learners engaging in the education. Disclosure must not include the ineligible companies' corporate or product logos, trade names, or product group messages.

Standard 5: Manage Ancillary Activities Offered in Conjunction with Accredited Continuing Education

Standard 5 applies only when there is marketing by ineligible companies or nonaccredited education associated with the accredited continuing education.

Approved Providers and Individual Activity Applicants are responsible for ensuring that education is separate from marketing by ineligible companies – including advertising, sales, exhibits, and promotion – and from nonaccredited education offered in conjunction with accredited continuing education.

1. Arrangements to allow ineligible companies to market or exhibit in association with accredited education must not:
 - a. Influence any decisions related to the planning, delivery, and evaluation of the education.
 - b. Interfere with the presentation of the education.
 - c. Be a condition of the provision of financial or in-kind support from ineligible companies for the education.
2. The Approved Provider and Individual Activity Applicant must ensure that learners can easily distinguish between accredited education and other activities.
 - a. Live continuing education activities: Marketing, exhibits, and nonaccredited education developed by or with influence from an ineligible company or with planners or faculty with unmitigated financial relationships must not occur in the educational space within 30 minutes before or after an accredited education activity. Activities that are part of the event but are not accredited for continuing education must be clearly labeled and communicated as such.
 - b. Print, online, or digital continuing education activities: Learners must not be presented with marketing while engaged in the accredited education activity. Learners must be able to engage with the accredited education without having to click through, watch, listen to, or be presented with product promotion or product-specific advertisement.
 - c. Educational materials that are part of accredited education (such as slides, abstracts, handouts, evaluation mechanisms, or disclosure information) must not contain any marketing produced by or for an ineligible company, including corporate or product logos, trade names, or product group messages.
 - d. Information distributed about accredited education that does not include educational content, such as schedules and logistical information, may include marketing by or for an ineligible company.
3. Ineligible companies may not provide access to, or distribute, accredited education to learners.

ADMINISTRATIVE ELEMENTS WITHIN THE EDUCATIONAL DESIGN PROCESS

Criteria for Awarding Contact Hours

During the planning phase, the Nurse Planner will establish the criteria for successful completion for learners to be awarded contact hours. These requirements may include, but are not limited to, active engagement in the activity (e.g., completion of a group tabletop exercise), demonstrating proficiency on a post-test, completing a self-reflection assessment, or successfully performing a return demonstration. The criteria for successful completion should be realistic and practical, and appropriate for the underlying educational need, format of the educational activity, while aligning meaningfully with the learning outcomes.

Reminder:

- Speakers do not earn contact hours for sessions presented. If presenting one or more sessions at a conference and also attending other sessions, contact hours may be earned for sessions attended as a learner.
- Planning committee members may earn contact hours if participating in the activity as learners.

Calculating Contact Hours

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

✓ ANCC contact hours

✓ ANCC CNE credit

✓ ANCC NCPD contact hours

Approved Providers and Individual Activity Applicants should not use the term “CEU.”

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

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

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

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

Individual NCPD Activities Approval Statement

Individual Activity Applicants are required to provide the official activity approval statement to learners prior to the start of each educational activity and on each certificate of completion. The official approval statement for Individual NCPD Activities must be displayed clearly to the learner and worded according to the guidance below.

If advertising is released prior to approval AND after an application has been submitted, the following statement may be used:

This activity has been submitted to the [Name of Accredited Approver] for approval to award contact hours. The [Name of Accredited Approver] is accredited as an approver of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

For material released after approval is received, use the following statement:

This nursing continuing professional development activity was approved by [Name of Accredited Approver], an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Certificate or Documentation of Completion

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

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

Approved Provider Statement

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

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

Approved Providers who are awarded Approved Provider with distinction from an Accredited Approver may use the following statement:

[Name of Approved Provider] is approved with distinction as a provider of nursing continuing professional development by [Name of Accredited Approver], an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

The certificate of completion or document must include:

- Title and date of the educational activity;
- Date of the educational activity (if enduring, include the actual date the learner completed the activity);
- Name and address of the provider of the educational activity (web or email address is acceptable);
- Number of contact hours awarded;
- Approval statement; and
- Place for the learners name.

Required Disclosures Provided to the Learner

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

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

Required disclosures to learners include the following:

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

Additional disclosures to learners, if applicable:

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

Joint Providership

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

Requirements for Reviewing Enduring Activities

Enduring activities are provider-directed, learner-paced activities. Enduring materials have an expiration date after which no contact hours may be awarded. **The expiration date of enduring material cannot exceed three years.** Providers must review content of enduring materials at least once every three years, or more frequently if indicated by new developments in the field specific to the enduring material.



NOTE: Individual Activity Applications are approved for two years; therefore, the review of enduring materials is not applicable. If an Individual Activity Applicant intends to resubmit an enduring activity for approval, a new application must be submitted.

Review of enduring material content should be conducted for:

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

Upon completion of the enduring material, ensure the following:

- The activity file is amended to reflect accreditation criteria updates,
- A new expiration date is established of no more than three years,
- The Approved Provider has a process for ensuring that periodic summative evaluations are occurring to determine impact of the enduring activity, and
- Summative evaluations are completed at regular intervals (monthly, quarterly, or yearly) to determine if the activity was effective and if revisions to the activity are needed.

Converting Live Activities to Enduring Activities – For Approved Providers

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

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