

# WSNA CEARP HIGHLIGHTS

January, 2010

**SAVE THE DATE for the NEXT CEARP PROVIDER UPDATE**

**FRIDAY, OCTOBER 29, 2010**

**Cedarbrook Conference Center near SeaTac Airport**

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## **2010 APPLICATION FORMS**

The new 2010 application forms are available on the WSNA website at [www.wsna.org](http://www.wsna.org). These are the *only forms* that will be accepted for review and approval of newly planned CNE activities by the WSNA CEARP. It is strongly advised that applicants READ the guidelines in their entirety PRIOR to completing the application form. The application form is organized in the same order as the criteria cited in the Guidelines.

## **FIRST PROVIDER UNIT (PU) UPDATE September 12, 2009**

WSNA CEARP presented its first Annual PU Update on September 12, 2009 at Cedarbrook near SeaTac. Approximately 29 PUs were represented by 48 participants. The new changes to the ANCC PU criteria, key elements and required evidence (effective October 1, 2009), were reviewed in depth by Pamela Dickerson, PhD, RN-BC who happens to be the current Chair of the American Nurses Credentialing Center's (ANCC) Commission on Accreditation (COA). Each attendee received a copy of the new "draft" criteria, guidelines and forms (which since that time have been modified based on the input from applicants).

## **PROVIDER UNIT 2009 CHANGES**

Changes, common issues and questions faced by PU staff were discussed. Changes reviewed included:

### **NEW Eligibility requirements:**

**Target audience:** If more than 50% of your activities are offered to nurses *within WA* and/or within the states of OR, AK, ID (Region X), CA, NV, UT, WY, MT or HI (these are all contiguous states to Region X), you are eligible to be an

approved PU by WSNA CEARP. For broader audiences, *you must apply for accreditation from ANCC.*

**Commercial entity exclusion effective August 1, 2010:** Commercial entities which either produce, market, re-sell or distribute healthcare goods or services consumed by, or used on, patients or an entity that is controlled by another entity with the same characteristics will be unable to apply for approval after 8/1/10. *Currently approved entities expire on 7/31/10.*

**New “intent to apply or reapply” forms** for PUs must be completed and approved prior to beginning the PU application process.

**Designated Nurse & Lead Nurse Planner roles.**

**PU outcomes, evaluation plan & processes,** including goals for improvement.

**New: Provider Unit Faculty Directed & Independent Study Documentation Forms** are required to be completed by PUs in the planning of all their CNE activities. There also is a new *Independent Study Addendum for PUs interested in converting a faculty directed activity into an independent study activity.*



## **APIE: ASSESSMENT, PLANNING, IMPLEMENTATION & EVALUATION**

**Assessment:** There is a stronger emphasis on documenting *how* the CNE activity is developed in response to the unique educational needs of the PU’s target audience and identifying the *gap in knowledge, skills and practice* which the activity is designed to address.

**Planning:** The activity is designed with an identified goal, explicit measureable objectives, content congruent with the goal and educational objectives, and teaching learning/learning strategies appropriate to the target audience. The Objectives/Content Grid is available on the WSNA CEARP website.

**Implementation:** Rationale/criteria for successful completion and method for verification of participation are documented.

**Evaluation:** A clearly defined method with learner input is used to evaluate the CNE activity effectiveness. There is ANCC interest that PUs consider instituting higher levels of evaluation such as knowledge enhancement, attitude change, skill improvement, change in practice or organizational impact to measure their CNE activities. These levels of evaluation require further preparation for the CNE with pre and post tests or other appropriate measurements conducted several months *after* the CNE activity to assess any changes in practice. Be sure you are not checking off these higher levels of evaluation on the application form unless other evaluation methods are being utilized to assess comprehension, change in practice or other desired behavior changes.



**Post activity quality improvement (QI):** Each activity needs to be reviewed by the Designated and/or Lead Nurse Planner for continual relevance, any needed updates and/or changes. A suggested tool is available in the CEARP PU Appendices.

## **DIFFERENCE BETWEEN CNE AND STAFF DEVELOPMENT**

Approved Provider Units are authorized to confer contact hour credits for educational activities designed to augment the knowledge, skill and attitudes of nurses and, therefore, enrich the nurses’ contributions to quality health care. The knowledge, skills or attitudes gained from CNE activities can be applied regardless of the employer of the activity participant.

Staff development activities are typically designed to enhance performance in participants’ current job roles and are based on a specific facility’s policies and procedures, equipment and resources. However, in those cases when staff development learning activities convey new content knowledge that would be transferable to other job settings, they can be eligible to offer CNE contact hours.

## CONTACT HOURS FOR PALS, BLS, ACLS CERTIFICATION COURSES

ANCC sent a notice of interpretation of the Commission on Accreditation (COA) action taken at their May 19, 2009 meeting regarding the practice of awarding contact hours for activities such as BLS, ACLS, PALS, etc. The COA decided that contact hours for BLS, other basic “canned” courses, renewal of ACLS, PALS and other “advanced canned” courses *may not be awarded*. Any courses currently being presented (by either accredited providers or approved providers) **must cease to award contact hours by June 1, 2011**.

For the BLS, ACLS, PALS, etc. **Instructor** courses, *contact hours can be awarded for the teaching modality content only* of the classroom based BLS Instructor course. Note that this does not include the content portion of the course. In addition, accredited providers and approved providers cannot award ANCC contact hours for the course offered online or on CD-ROM by AHA, as these formats



preclude the involvement of the accredited/approved CNE Unit in the planning or implementation of the activity. The rationale for the COA’s action was: BLS is no longer an augmentation to the nurse’s basic knowledge. Therefore, it does not meet the definition of CNE. Universities now require the student to be certified in BLS before ever entering the academic program. BLS is not an augmentation of knowledge; it is a basic preparation for training.

The advanced life support activities meet the definition of CNE because they are not included in the nurse’s basic training and therefore augment that training. However, these courses do not change often or significantly. Therefore, renewal of certification is meant to validate that the knowledge previously obtained has been retained. It does not augment that knowledge. The COA understands that the courses sometimes see significant revisions based on

new evidence. It has agreed to continually monitor the more common advanced courses for significant revisions. If such occurs, then the COA may revisit the current interpretation of whether the course meets the definition of CNE.

## CONTACT HOURS FOR POSTER SESSIONS

The same criteria must be followed as for any other CNE activity, including a logical and defensible method of determining the number of contact hours to award. The approach chosen depends on the location of the posters, the schedule of the conference, and the objectives of the poster session. Feel free to contact WSNA CEARP for assistance in identifying options for your specific poster session.



## SOME FRIENDLY REMINDERS COMPLETING CEARP APPLICATIONS

**Records** must be maintained/kept on file for six years in a secure area. *NOTE:* It is not necessary to require participants to maintain their certificates on file for six years. Only the CNE provider is required to maintain such files.

### **Bio Data Forms Require Complete**

**Disclosure** about any conflicts of interest. Further, individuals need to do a better job of describing the expertise of whatever role they are playing in the activity such as planner, presenter or reviewer. Merely stating one’s position title does not validate or provide evidence that the person is qualified to either plan, present, and/or review that particular activity.

Please note that a *new bio data form* needs to be completed with each *new* activity. It is not necessary for repeated activities.

### **Qualified Planners Required for All Activities**

Nurse planners contribute oversight and are actively involved in both the planning and analysis of evaluation data of the CNE activity.

Each activity must be planned collaboratively by *at least one lead* nurse planner (or designated nurse planner of a provider unit) with a minimum of a baccalaureate or higher degree in nursing, and one other planner. Other nurse planners are not required to have a minimum of a baccalaureate.



Each member of the planning group should represent at *least one* of the following areas:

- Target audience
- Relevant content expertise
- Responsibility for adherence to ANCC accreditation.

If target audience is interdisciplinary, the planning committee must be interdisciplinary.

### **Every Provider Unit must have Designated Nurse Planner (DNP)**

who has a minimum of a baccalaureate or higher degree in nursing is to serve as the contact person for PU applications and is responsible for the following:

- monitors and ensures ANCC/WSNA CEARP criteria are followed;
- checks that application forms are complete;
- is involved in or is informed of each stage of the implementation process, from initial planning to making recommendations for changes based on evaluations;
- sees that all required documents are filed and stored/accessible for *six* years;
- signs attestation form;
- keeps oversight responsibilities separate from those of the nurse responsible for reviewing the final documents.

### **Lead Nurse Planner (LNP) in a Provider Unit**

*is* responsible for the overall planning and implementation of a particular CNE activity. The DNP can also be the LNP. It is important that *each* Lead Nurse Planner is kept knowledgeable about ANCC criteria.

**Nurse Reviewer** may or may not be one of a pool of lead nurse planners *as long as they are not involved in the planning*; completes and signs a criteria form designed to indicate whether or not required criteria are met prior to the educational event; notifies appropriate persons if discrepancies need to be addressed; keeps review role separate from planning and implementing role.



**KEEP NURSE PLANNER AND REVIEWER ROLES SEPARATE**

**Provider Unit Evaluation Plan** provides an ongoing process for internal assessment of the PU's achievement of internal goals for meeting ANCC/WSNA CEARP criteria (e.g.: sufficient staff, operating policies for the APIE, technology, resources, other).

Describe:

- How goals for improvement have been addressed with set timelines;
- What changes and progress have been made toward meeting these goals;
- What new goals for improvement have been identified.

A sample chart for documenting this plan is located in Appendix F of the CEARP Guidelines.

### **Business Practices**

The provider unit must attest that it adheres to all regional, state and national laws and regulations, and operates the business and management policies and procedures of its continuing nursing education program (as they relate to human resources, financial affairs and legal obligations) so that its obligations and

commitments are met. This attestation must be signed by the administrator of the Provider Unit and noted in the application. (e.g. Chief Nursing Officer, Department Director, or Designated Nurse Planner, if has such authority)

**NOTE: Provider Units can only provide activities, not approve. Under the operational requirements, it further states that Provider Units can only provide activities in which at least one of the Unit's nurse planners assumes an active role in the entire process from planning through evaluation.**



### **Reapplying PROVIDER UNIT**

**Applicants** are required to submit 3 copies of one completed activity with all the usual required information including learning objectives, bio forms, summary evaluations, promotional materials, certificate of completion. In addition, a list of all educational activities (title, dates presented, contact hours awarded) provided during the three-year approval period must be submitted with the application.

The assigned CEARP reviewer will randomly select two or more additional activities from that list and notify the applicant to submit three copies of the requested additional activities with all the accompanying paperwork to WSNA within a week after notification by the reviewer. This should not present a hardship as it is assumed that all the appropriate information is being kept in the appropriate files and will merely need to be retrieved and duplicated. *If for some reason, the deadline cannot be met, notify the reviewer.*

### **DEFINITION OF “CONFLICT OF INTEREST”**

*“When an individual has an opportunity to affect CNE content with products or services from a commercial interest with which s/he has a financial relationship. This includes an opportunity to affect content about specific agents/devices (NOT the class of*

*agents/devices; NOT the whole disease class in which agents/devices used).”*

Conflict of Interest (COI) by commercial supporters, sponsors, foundations, funding sources, reviewers, planners and presenters must be fully disclosed. *All* planning committee members, presenters, and reviewers *must complete and* sign a Bio Data Form disclosing any COI.

The ANCC requires that accredited/approved providers establish mechanisms to identify and resolve COI. It is expected that providers will engage in a process that goes beyond simple disclosure, with necessary interventions to resolve COI implemented *before* the activity.

There are a variety of mechanisms and strategies for compliance. Examples include:

1. Require presentation to be supported by best available evidence;
2. Refrain from providing clinical recommendations re products or services of a commercial entity;
3. Recommend an alternate speaker;
4. Submit presentation for peer review;
5. Divest oneself of the financial interest.

Refer to Appendix I in the CEARP Guidelines re *Resolution of Conflict of Interest* for further information. This appendix will be expanded to include more specific information regarding “Resolution Methods of COI.”

The CNE provider must implement a mechanism to identify and resolve all conflicts of interest *prior* to the CNE activity being delivered.



### **DISCLOSURES**

If you haven't already noticed, there is a greater emphasis on disclosure of the *presence or absence* of conflict of interest or commercial support. Notice must be given whether there is

or is not the presence of conflict of interest or commercial support.

It is critical that the design and scientific objectivity of any educational activity is not influenced by any biases or pertinent financial relationships that may be held by planners, presenters, reviewers and commercial or foundation funding sources. This information is to be noted on the bio data form which requests information about any financial relationships with entities that may influence content presented in an educational activity.

A disclosure of conflict by the nurse planner/ reviewer must be done in the context of each activity. Therefore, the Provider Unit must have a mechanism in place to monitor potential bias. It must be demonstrated how bias was mitigated.

*It is important that the bio data forms of all staff, planners, reviewers, presenters are fully completed with the requested information including any possible conflict of interest.*

In the event that any form of bias or conflict of interest does exist, this information must be disclosed to CNE participants **prior** to the presentation of the activity. At a minimum, it is required by CEARP to use the sample written disclosure form found in *Appendix J-2* of the CEARP Guidelines.

There are a variety of additional ways to inform participants:

- Acknowledgement in any promotional materials including brochures and/or other printed material for the activity;
- Verbal disclosure to participants at the *beginning* of the CNE activity along with the required written documentation;
- Distribution of a list of all planners and presenters citing their disclosures, to participants;

- Noted in the evaluation form, with a question to participants about their awareness of the vested interest and to rank the speaker as to level of perceived objectivity or even when there is no conflict.

## **USE OF COMMERCIAL SUPPORT**

“*Commercial support*” includes financial or in-kind contributions given by a commercial interest such as co-sponsors or special grants, given with full knowledge and approval of the CNE provider. The CNE provider must make all the decisions for how these funds are to be allocated.

Appropriate use of commercial support requires a written agreement documenting the terms of the support with signatures of all involved parties including the CNE provider, educational partner or co-provider as well as the commercial support entity.

The CNE provider must have written policies for direct payment of honoraria or reimbursement expenses; documentation detailing receipt and expenditure of commercial support; management of commercial promotion; control of content and format without commercial bias.

**Note:** A written agreement is not required of exhibitors who have had no role in the planning or presentation of the educational activity, and are located in a separate room.

**Note:** There are very specific guidelines regarding this issue located in *Appendix I* of the Guidelines.



## BIO DATA FORMS NEED TO BE MORE COMPLETE

Credentials and educational background are critical to confirm that the *designated nurse planner*, other planners, reviewers and presenters are qualified and meet the required educational criteria. *Please define (or spell out) those less common credentials to clarify what they mean.* Bio data forms for presenters must clearly inform us about their qualifications and experience with the target audience. This form has a separate space dedicated for the planner and/or presenter information.

**NOTE: If there is conflict of interest by planners, reviewers, presenters, then it is important to note such conflict, both in the signed bio forms and the advertising materials.**

***NOTE: All learners must be informed prior to registration that in order to receive contact hours, participants must be present for 100% of the educational activity including question and answer period and any discussion that may result from the presentation.***

## DO'S AND DON'TS OF WRITING BEHAVIORAL OBJECTIVES

Writing behavioral objectives in measurable terms continues to be a significant challenge for many applicants. Please remember to check Appendix D in the Guidelines which explains what they are and offers a sample list of verbs to consider when writing objectives. This will help prevent needless delay in timely review of applications.

**Note:** A behavioral objective contains *only one action verb* which describes the desired end behavior of the learning activity rather than the learning process itself. It includes information about the level of performance that will be considered acceptable at the end of the activity. It is measurable in terms of observable behavior.

*Do not use “learn”, “know” or “understand” as they are not measurable behavioral objectives.*

## REQUIRED WORDING FOR ADVERTISING MATERIALS & CERTIFICATES OF SUCCESSFUL COMPLETION

Promotional material includes any method of announcing an educational event. This may include a brochure, flyer, bulletin board announcement, newsletter, memo, email or web site. This material must be submitted with the application.

Promotional materials for *approved Faculty Directed and Independent Study activities* must include the following statement once the documentation form has been reviewed and if contact hours are being listed: ***“This continuing nursing education activity is approved by the Washington State Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.”*** This same wording is to be used on the Certificate of Completion.

**Note:** The Certificate of Completion must have the physical address of the approved provider on it.



To publicize the learning activity *prior* to CEARP approval, the following language is required to indicate that the activity has not yet been approved: ***“Contact hours for this continuing nursing education activity have been submitted to WSNA, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation. Please contact (name of applicant representative) at (sponsoring organization) for more information about contact hours.”***

To publicize the learning activity offered by an *approved* Provider Unit, the following language is required: ***“(Provider name) is an approved provider of continuing nursing education by the Washington State Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.”*** (Same wording required for certificates of completion.)

**Note:** When there are multiple approvers (for other disciplines) listed on the promotional materials and on the certificate, *it is required that the ANCC required language remains on a separate line(s) from all other approvers. It is to stand alone.*

## CONTACT HOUR EQUIVALENCIES

We still hear from applicants who substitute the terms CEUs or CMEs for contact hours. They are not the same. **The only accepted and official term for ANCC / WSNA approved CNE activities is “contact hour(s).”**



## **Rounding “UP” of Contact Hours Not Permitted**

*The determination of an appropriate number of contact hours may not be reached by rounding up. This would imply that the learner attended more hours of CNE than s/he actually did. This is not permissible.*



## **YOU MUST NOTIFY WSNA WHEN...**

As a condition of your approval, all applicants are required to notify WSNA by written correspondence or email when the following changes occur:

- 1) You have a different Designated Nurse Planner. All new Nurse Planners must complete and sign a Bio Form and Attestation Form agreeing to meet the criteria. These should be sent with the notice to WSNA;
- 2) Your organizational structure changes. (Your approval is for the organization listed as the applicant on your application and is **not transferable**);
- 3) A decision to discontinue the Provider Unit, Faculty Directed or Independent Study activity is made;
- 4) Whenever there is a telephone, e-mail, name or address change.

Applicants for approval of individual **Faculty Directed or Independent Study** activities must notify WSNA if there is a change in any of the elements of an approved course, such as in the presenter, objectives, content outline, or scheduled times. If these changes are significant, a new application is required.

## WHAT ABOUT JOURNAL CLUBS?

There have been numerous inquiries regarding how to determine contact hours for the participant in a “journal club”? Here are some considerations:

- Do you want to give contact hours for meeting time or do you want to include the reading time also?
- If yes to the latter, how do you determine the average amount of time for the reading in advance?
- You would have to check that out for each article and include rationale in the documentation for each activity.
- One can consider this a faculty directed activity and factor in the reading and meeting time for each journal article.
- Just reading the article will not count for contact hours. It is the application of the purpose/objective of reading the article and how it applies to practice that counts. Therefore, the discussion of the application of the content is essential.

### A journal club scenario could look like this:



A series of articles on a particular content area such as cardiac care would be pre-selected and discussed over a series of meetings; nurses would be asked to read each one prior to the meeting; then meet to discuss the application of the content of each particular article to their practice. Specific behavioral objectives would relate to the application of cardiac care content from the articles to their respective practice settings. An evaluation tool would be designed to assess outcomes based on the behavioral objectives for these sessions.

## ADVERTISING YOUR EDUCATIONAL ACTIVITIES WITH WSNA

If you would like more than a listing of your workshop on the WSNA CNE calendar or website, or you did not submit your application to WSNA for approval, you can request the rates for paid advertising in *The Washington Nurse* by contacting Duncan Taylor at WSNA, (206) 575-7979, ext. 3003 or [www.wsna.org/pubrel/washington.nurse.asp](http://www.wsna.org/pubrel/washington.nurse.asp) *Provider Units* - Be sure to notify WSNA of your planned courses and conferences. WSNA has no way of knowing anticipated activities unless you include WSNA on your mailing list. Be sure to put the WSNA CEARP staff on your mailing list or send periodic e-mail announcements to [hfaber@wsna.org](mailto:hfaber@wsna.org) and [kmacleod@wsna.org](mailto:kmacleod@wsna.org). We need to know the title of your course, the date, the city, contact hours awarded, fee for RNs, a contact person and phone number or web site address. This information will also be placed on the WSNA website at no extra charge.



## ADDITIONAL REMINDERS FOR ALL APPLICANTS

*New and returning applicants* must submit *three (3) complete, collated, typed, single-sided copies of the entire application* when you apply. Pages must be numbered. Do not use heavy binders, comb binding, 3-ring binders, staples or rubber bands. Binder clips are recommended. Include a table of contents to indicate where information may be found.

A check with the correct amount must accompany your application or it will be held in the WSNA office until payment is received. This delays your review. **Do not** attach a purchase order request nor submit an invoice.

*Returning Provider applicants* need to submit three copies of the completed application to arrive at WSNA **at least 90 days** prior to the current expiration date. (WSNA always uses the last working date of the month.)

*See WSNA's Website for a list of Approved Providers*  
[www.wsna.org](http://www.wsna.org)

### **CEARP REVIEWERS NEEDED!**

*The CEARP Committee is always recruiting for interested RNs to be considered for appointment to the CEARP Committee.*

*Functions of this Committee are to review and approve continuing nursing education activities covering a range of topics from a variety of applicants including hospitals, community colleges, universities and commercial entities.*

*Criteria for appointment include: previous experience in successfully planning continuing nursing education offerings (i.e., writing behavioral objectives, developing evaluations, designing content) for adult learners; member of WSNA; time to review about two*

*applications a month; able to attend three Continuing Education Approval & Recognition Program Committee (CEARP) meetings, and participate in two 1.5-hour teleconferences each year. WSNA membership is required and a master's degree in nursing preferred.*

*Volunteer yourself and a friend. This experience provides a valuable needed service to nurses in Washington State. Your careful evaluation of applications will help assure that educational activities meet the standards set by ANCC for continuing nursing education. P.S. Approved CEARP applicants are especially welcome to apply, given your expertise in completing our applications.*

**Contact Hilke Faber**  
206-575-7979, ext. 3005 to learn more or  
email [hfaber@wsna.org](mailto:hfaber@wsna.org).

#### "Frequently Asked Questions"

Another resource for answers regarding the accreditation process is the ANCC website:  
<http://www.nursecredentialing.org/accred/FAQs.html>

### **CEARP WANTS TO HEAR FROM YOU!**

We often hear through the grapevine that people are frustrated about our application forms, however, we never hear specifics. It would be more helpful to hear directly about these concerns with constructive suggestions on how we can make this process more user friendly.

**NEW:** We now are enclosing a "customer satisfaction survey" with every official approval notice inviting approved applicants to complete and return to WSNA CEARP in the enclosed self addressed envelope. **WE REALLY WANT TO HEAR FROM YOU!!**

Any suggestions on how to streamline the application process is always welcome. Our goal is to develop forms and instructions that are easy to understand. We need you to help us find all the omissions and redundancies to make the forms consistent with each other and with the instructions. *Thank You!*

(206) 575-7979, ext. 3005 or [hfaber@wsna.org](mailto:hfaber@wsna.org)