

## INDIANA STATE NURSES ASSOCIATION APPENDICES

The following appendices are included for general information about the continuing education process and to provide assistance in meeting the criteria and rules for approval of continuing nursing education.

**Appendix A**

**CNE vs. Inservice vs. Orientation:** .....2  
Includes a chart, which compares continuing nursing education, inservice, orientation and basic educational preparation. Also there is policy on BLS, ACLS, PALS and other “canned courses”.

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**References & Resources:**

1. Application Manual – Accreditation Program, American Nurses Credentialing Center’s Commission on Accreditation, Washington, D.C., 2009.
2. Scope and Standards of Practice for Nursing Professional Development. American Nurses Association #NPD-20, Washington, DC. 2000.

## APPENDIX A

### DIFFERENTIATION BETWEEN LEVELS OF EDUCATION

#### BASIC EDUCATION

Basic educational information  
Prepares for entry level into practice  
Addresses basic standards of practice

Target audience: nurses preparing for entry level into the profession

#### ORIENTATION

Educates for work at specific institution  
Teaches and tests for skill competency  
Addresses institution-based standards of practice

Target audience: nurses preparing for a new employer or a new career role

#### INSERVICE

Educates to new procedure or equipment  
Enables or increases skill competency  
Involves practice previously learned skills  
Addresses institution-based standards of practice

Target audience: nurses preparing to utilize new tools or utilize information specific to the work setting

#### CONTINUING EDUCATION

Acquires new knowledge and skills to enable advanced decision making  
Acquires greater depth of knowledge and skills in a particular area of nursing  
Enhances professional attitudes and values  
Advances career goals and promotes professional development  
Supports innovation and creativity in practice  
Implements change within the individual's practice and within healthcare in general  
Addresses new standards of practice, laws and rules

Target audience: nurses seeking enhanced professionalism and utilization of advanced nursing decisions and actions

*Developed by Deborah Hague, MS, RN, BC and Karen Groves, BSN, RN, Ohio Nurses Association's Continuing Education Approver Committee, 2001. Reviewed 2009.*

**BLS, ACLS, PALS and related courses - May 21, 2009:**

At their May 19, 2009 meeting, the Commission on Accreditation decided that contact hours for BLS and other **basic** “canned” courses may not be awarded. Any courses currently being presented (by approved providers) must cease to award contact hours by June 1, 2011.

The Commission also decided that contact hours for renewal of ACLS, PALS and other **advanced** “canned” courses shall 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.

Awarding contact hours for initial ACLS, PALS and other **advanced** “canned” courses is still permitted.

BLS is no longer an augment to the nurse’s basic knowledge. Therefore it doesn’t meet the definition of continuing nursing education. 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.

An institution may wish to present certificates of attendance to those nurses who complete skill-based or other inservice activities; however, CNE contact hours may NOT be awarded for basic skill-based activities or others which are required education or which disseminate information specific to the employer or sponsoring institution. To be eligible for contact hours, continuing nursing education must be elective and not a basic job-specific requirement.

Please note:

- § The issue discussed was related to whether the courses meet the definition of continuing nursing education. It did not address the issue of these courses typically being ‘canned’ courses.
- § The effective date of this interpretation is two years away. This was done in order to avoid necessitating any mid-stream changes.

## APPENDIX B

### COPROVIDERSHIP FOR APPROVED PROVIDERS

**ANCC criteria state that the Approved Provider Unit must:**

Maintain responsibility for the following when/if activities are co-provided:

- a. Determination of educational objectives and content.
- b. Selection of content specialist planners and activity presenters;
- c. Awarding of contact hours, as appropriate, to the individual educational activity;
- d. Record keeping procedures;
- e. Evaluation methods and categories; and
- f. Management of any commercial support or sponsorship.

**Definition:** To co-provide is “the process for planning, developing and implementing an educational activity by two or more organizations or agencies.” (ANCC Commission on Accreditation, 2001) These organizations may be:

- Two or more Approved Provider Units;
- One Approved Provider Unit and one or more other organizations or individuals; or
- Two or more organizations or individuals who are not Approved Provider Units.

**Designated Nurse Planner:** The collaborating organizations or individuals must determine which organization will be designated as the primary provider and which organization(s) will be the co-provider(s) for the event. If the primary provider for the event is also an approved provider unit, this unit must have one of their designated Nurse Planners actively involved in the planning from the beginning. This Nurse Planner will be the person responsible for assuring that ANCC COA/ISNA educational design criteria/rules as provided by ISNA are used to plan and implement the activity. When co-providing an educational activity, tasks involved in planning, implementing, and evaluating the activity may be shared; however, the final responsibility and accountability to insure that the criteria are met remain with the designated approved provider unit. For example, the organizations together could meet to discuss desired objectives, but the final decision about which objectives to include and how they are written rests with the designated nurse planner. A written co-provider agreement confirms these arrangements.

**Approval vs. Co-providing:** Co-providing continuing education is not to be confused with approval of continuing education for other agencies (**not permitted**) or within your own organization. If your provider unit Nurse Planner was not actively involved in the planning of the event, you may not provide or co-provide it.

**Advertising:** Any advertising should include all names of the provider and co-provider(s). Your provider unit must be prominently mentioned in the advertising. For example, “ABC Hospital and Chapter x of the Medical/Surgical Nurses Association...”

**Frequent Questions:** There are several instances when an approved provider unit is asked to co-provide an activity and it is not appropriate to do so. For example, when an employee is also involved in an outside organization and wants the approved provider unit to give the contact hours; when an outside organization asks for contact hours for an event they planned, etc.

The approved provider unit must ask certain questions to determine if what they are being asked to do is truly co-providership or an approval process request. (Remember, approved provider units provide continuing education activities. They do not approve activities.) Questions to be considered are:

1. Who is included in the provider unit? Is the group asking for co-providership part of the provider unit or outside of the provider unit?
2. Has one of your designated Nurse Planners been actively involved in planning since the beginning?
3. Who is putting on the event – your organization or another organization?

If your answer is no to one or more of the above questions, this is not co-providership.

As an approved provider unit, one of your designated Nurse Planners listed on p. 5 of your provider application must be involved in planning each educational event. The internal peer review process described by your agency must be followed. Your provider unit may provide continuing education and award contact hours for this activity.

If an employee of your organization is working with a group outside of the work setting, the employee must involve a designated Nurse Planner to see if it would be beneficial or appropriate for your approved provider unit to co-provide with this outside group. The Nurse Planner will develop the co-provider agreement with the group, facilitate the planning process and proceed with the development of the co-provided event. The approved provider unit's name must be included as one of the event providers on the advertising material, not just in the provider statement. If the co-provider relationship is not desired or appropriate, the Nurse Planner may refer the employee and group to an approver.

If one of your employees participates in a local chapter of a professional nursing organization and that organization wants to offer contact hours, the employee should contact the Nurse Planner to see if it would be beneficial and feasible to develop a co-provider arrangement with said professional nursing organization. The Nurse Planner would be in contact with the other agency/organization to plan and implement the co-provided activity. The approved provider unit's name must be prominently included on the advertising material. If the co-provider relationship is not desired or appropriate, the Nurse Planner may refer the employee and group to an approver.

If the Nurse Planner is approached by an entity that has planned and developed a CNE activity and is seeking a contact hour approval process, the Nurse Planner must refer this entity to an approver. In this instance, the Nurse Planner has not been involved in the planning process and, therefore, cannot co-provide.

If the approved provider unit has a co-provider agreement with an organization to put on an event and the co-provider now wants to offer the co-provided activity in another venue without the provider entity, the approved provider unit must refer the organization to an approver. That organization will then need to submit an application to get approval to offer contact hours for the activity from an approver.

In any or all situations, an approved provider unit has the right to say no, we do not want to co-provide.

See the algorithm for a diagrammed copy of the above content on the next page.

**Commercial Support/Sponsorship:** Commercial support and/or sponsorship may be obtained for an event. This might include financial or in-kind contributions. Commercial supports/sponsors are not part of the assessment, planning, implementation, and evaluation process for the activity, so they are not co-providers. However, be sure you follow the appropriate requirements regarding use of commercial support/sponsorship and how learners are informed.

**Fees for Co-providing:** There are no ANCC COA criteria or IBN rules that prevent you from charging a fee for your time, expertise and resources to participate in planning an event, issuing certificates, keeping records, etc. However, be very careful that it is clear to all parties that the fee covers your involvement, not your “approval” of someone else’s activity.

**Co-provider vs. Cosponsor:** ANCC COA criteria do not use the terms “sponsor” or “cosponsor” interchangeably with co-provider. Co-providing is the term used when two or more groups work together to assess, plan, implement and evaluate continuing education activities.

### SAMPLE CO-PROVIDER AGREEMENT

(Approved provider unit name) and (co-provider’s name) agree to plan and present a CNE activity entitled \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_.

As the approved provider unit, we will maintain responsibility for determination of educational objectives and content; selection of content specialist planners and activity presenters; awarding of contact hours, as appropriate, to the individual educational activity; record keeping procedures; evaluation methods and categories; and management of any commercial support or sponsorship.

(Co-provider name) will assist by .....

The advertising will state that this event is presented by (approved provider unit name) and (Co-provider’s name).

Approved provider unit Nurse Planner’s Signature:

Co-provider’s Signature:

Date:

## Co-Providership Situations

### **As approved Provider:**

- A designated RN Planner must be involved in planning each educational event.
- The internal review process described by your agency must be followed.
- Your agency may provide education and award contact hours for this education to nurses.

### **If your employees are working with a group outside of the work setting:**

- The employee must involve an RN Planner to see if it would be beneficial and appropriate to co-provide with the group.
- The RN Planner will develop the co-provider agreement with the group, facilitate the planning process and proceed with the development of a co-provided event.
- The RN Planner may refer employee and group to an approver (such as ISNA) if the co-provider relationship is not desired.

### **If an employee participates in a local chapter of a professional nursing organization and that organization wants to offer CNE:**

- The employee can notify the RN Planner to see if it would be beneficial and feasible to develop a co-provider arrangement with said professional nursing organization.
- RN Planner in contact with other agency would plan and implement the co-provided event.

### **If you are approached by an entity that has planned and developed a CNE event and is seeking a contact hour approved process:**

- You must refer this entity to an approver (such as ISNA).
- In this instance, the approved provider has not been involved in the planning process and, therefore, cannot co-provide.

### **If the approved provider has a co-provider who now wants to offer the co-provided program in another venue without the provider entity:**

- The RN Planner must refer the former co-provider to an approver (such as ISNA) if contact hours are to be awarded.

## APPENDIX C

### SAMPLE POSITION/ROLE DESCRIPTIONS

Some provider units may have nurse planners and/or reviewers who are in a position other than continuing education/staff development or are volunteers in an association type of provider unit. In these situations, there may be no job description or the person's job description may not describe his/her role in the provider unit. Below are samples in such an organization as described above. Note: These position/role descriptions are only one example of meeting the criteria.

#### **Position Description for Lead Nurse Planner**

##### Qualifications:

1. A minimum of a BSN
2. Experience with the Assessment, Planning, Implementation and Evaluation of continuing education activities

##### Responsibilities:

1. Participate in and ensure that the ANCC COA/ISNA criteria are met in regards to the assessment, planning, implementation and evaluation of all continuing education events offered for nurses.
2. Serve as resource and/or content expert when asked.
3. Select and orient new nurse planners and reviewers.
4. Oversee the functioning of the provider unit.
5. Implement the overall evaluation plan for the provider unit.

#### **Position Description for Nurse Planners**

##### Qualifications:

1. A minimum of a BSN
2. Experience with the Assessment, Planning, Implementation and Evaluation of CNE activities

##### Responsibilities:

1. Participate in and ensure that the ANCC COA/ISNA criteria are met in regards to the assessment, planning, implementation and evaluation of all continuing education events offered for nurses.
2. Serve as resource and/or content expert when asked.
3. Discuss concerns/issues regarding programming with the Lead Nurse Planner.
4. Provide the Lead Nurse Planner with ideas/issues that may be developed into continuing education for nurses.
5. May be called upon, under extraordinary circumstances, to serve as a reviewer when not involved in the planning of that event.

#### **Position Description for Nurse Reviewers**

##### Qualifications:

1. Registered nurse volunteers who have not participated in the planning of a particular activity.
2. Experienced in the CNE process as well as the required criteria as delineated in the latest ISNA Provider CNE Manual.
3. Nurses who maintain confidentiality related to the documentation forms of the programs they review.

##### Responsibilities:

1. To review program documentation forms for adherence to the criteria as defined by the ANCC COA and ISNA.
2. Utilize the appropriate review forms from the latest ISNA Provider CNE Manual.
3. Discuss concerns about a review with the Lead Nurse Planner.
4. Offer suggestions and comments to the Lead Nurse Planner regarding review process improvements and enhancements.

## APPENDIX D CONFLICT OF INTEREST

This appendix includes additional information regarding conflict of interest. It includes (1) information from the Application Manual – Accreditation Program (ANCC 2009) (2) a conflict of interest decision tree; and (3) a sample Terms and Conditions for Presenters form that you can use if you wish.

### RESOLUTION OF CONFLICT OF INTEREST

***A conflict of interest exists if an entity that is in a position to benefit financially from the success of a CNE activity is ALSO in a position to influence the content, design, or implementation of the CNE activity.***

- 1.1 If an organization or an individual within the organization is in a position which affords him/her the opportunity to affect CE content with products or services from which, if purchased, the individual or organization might receive personal financial benefit, the individual or organization must disclose to the CNE activity provider his/her/its relationship to the product or service developer, manufacturer, distributor or seller.
- 1.2 The provider must be able to show that each individual who is in a position to control the content of an education activity has disclosed all relevant relationships with any entity in a position to benefit financially from the success of the CNE activity. Examples of relevant relationships include (but are not limited to) those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g. stocks, stock options, or other ownership interest, excluding diversified mutual funds), or other financial benefit. Relevant relationships can also include “contracted research” sheer the institution receives a grant and manages the grant funds and the individual is the principal or a named investigator on the grant. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking, teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received or expected. ANCCC considers relationships of the individual involved in the continuing nursing education activity to include financial relationships of the individual’s spouse/partner. Relevant relationships must be disclosed to the learners during the time when the relationship is in effect and for 12 months afterward.

ANCC considers relationships occurring within the 12 months prior to the implementation date of the activity as “relevant” to conflict of interest. When a person divests himself/herself of a relationship, it ceases to be a conflict of interest but it must be disclosed to the learners for 12 months after the termination of the relationship.

- 1.3 An individual who refuses to disclose relevant relationships will be disqualified from being a planning committee member, a teacher, or an author of continuing nursing education and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the CNE activity.
- 1.4 The provider must have implemented a mechanism to identify and resolve all conflicts of interest prior to the education activity being delivered.

**TERMS AND CONDITIONS FOR SPEAKERS/AUTHORS TEMPLATE**

Speakers/Authors: This document has been developed to better inform you of our policy. Please review each item, check your response, sign the document and return to \_\_\_\_\_.

Thank you.

	<b>TERMS &amp; CONDITIONS</b>	<b>AGREE</b>	<b>DISAGREE</b>
1.	I have disclosed to ___ all potentially biasing relationship of a financial, professional or personal nature that exist or have existed within the last 12 months. I understand that these relationships will be shared with the learner.		
2.	I will prepare fair & balanced presentations/independent studies that are objective & scientifically rigorous. Content will be well-balanced, evidence based where possible & unbiased.		
3.	If addressing unlabeled &/or unapproved uses: I will clearly acknowledge the unlabeled identification or the investigational nature of drug products and/or devices to the learners.		
4.	I will use generic names to the extent possible when discussing specific health care products or service. If I need to use trade names, I will use trade names from several companies when available, & not just trade names from any single company.		
5.	Validation of content: I have reviewed the proposed content for this activity and find, to the best of my knowledge, the following:		
	A. This presentation/independent study is based on acceptable principles that are generally accepted as valid by the profession.		
	B. This content is based on conclusions or inferences about the evidence that are accepted in the general health care community as valid and sound.		
	C. Scientific research referred to in this presentation conforms to generally accepted standards of experimental design, data collection, & analysis.		
	D. Content is accurate based on best information available at the time the presentation/independent study was developed.		
6.	If I have been trained or utilized by a commercial entity or its agent as a speaker for any commercial interest, the promotional aspects of that presentation/independent study will not be included in any way with this activity.		
7.	If I am presenting research funded by a commercial company, the information presented will be based on generally accepted scientific principles & methods, & will not promote the commercial interest of the funding company.		
8.	The handouts and slides will not include my company logo other than on the first slide. (The copyright symbol may be included on each of the slides.)		
9.	I understand that ___ may need to review my presentation &/or content prior to the activity & I will provide educational content and resources in advance as requested.		

**I have carefully read and considered each item in this attestation form, and have completed it to the best of my ability.**

Signature

Date

Note: This signature may be electronic.

PRESENTATION TITLE:

## APPENDIX E

### STANDARDS FOR DISCLOSURE AND COMMERCIAL SUPPORT

This appendix includes additional information regarding (1) Standards for Disclosure and Commercial Support; (2) a Commercial Support/Sponsorship Decision Tree; (3) a sample commercial support agreement; and (4) a sample sponsorship agreement. (Permission was granted by Mary Moon Allison, Director, Accreditation Program, ANCC, to list these standards).

These Standards have been adapted from the Accreditation Council for Continuing Medical Education (ACCME), which articulates its policies for disclosure and commercial support in:

1. *The Standards for Commercial Support: Standards to Ensure Independence in CME Activities*, as adopted by ACCME in September 2004; and
2. ACCME policies applicable to commercial support and disclosure.

#### STANDARD 1: INDEPENDENCE

1.1 An entity has a commercial interest if it is:

- a. An entity that produces, markets, re-sells or distributes health care goods or services consumed by, or used on, patients; OR
- b. An entity that is owned or controlled, in whole or in part, by an entity that produces, markets, re-sells, or distributes health care goods or services consumed by, or used on, patients.

An entity is NOT a commercial interest if it is:

- a. A government entity;
- b. A non-profit 501(c)(3) organization;
- c. A non-health care related entity

This definition permits an accredited [approved] provider to be owned by an entity that is not a commercial interest. It also allows a provider to have a “sister company” or parent company that is a commercial interest, as long as the accredited [approved] provider has and maintains adequate corporate firewalls to prohibit any influence or control by the sister or parent company over the continuing education program of the accredited [approved] provider. In this case, ANCC would expect that the accredited [approved] provider would have an adequate corporate firewall in place to prohibit any influence or control by the “sister company” over the continuing education program.

ANCC does not consider providers of clinical service directly to patients to be commercial interests.

1.2 A continuing nursing education provider must ensure that the following decisions were made free from the control of a commercial interest:

- (a) identification of continuing nursing education needs,
- (b) determination of educational objectives,
- (c) selection and presentation of content,
- (d) selection of all persons and organizations that will be in a position to control the content of the continuing nursing education,
- (e) selection of educational methods, and
- (f) evaluation of the activity.

1.3 An entity with a commercial interest cannot take the role of non-accredited [non-approved] partner in a co-provider relationship.

**STANDARD 2: RESOLUTION OF PERSONAL CONFLICTS OF INTEREST**

- 2.1 An individual must disclose any financial relationships with an entity with a commercial interest (See STANDARD 1).
- 2.2 The provider must be able to show that each individual who is in a position to control the content of an education activity has disclosed all financial relationships with any entity with a commercial interest in the provider. ANCC defines “financial relationships” as those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options , or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial relationships can also include “contracted research” where the institution gets the grant and manages the funds and the individual is the principal or named investigator on the grant. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking, and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received or expected. ANCC considers relationships of the person involved in the continuing nursing education activity to include financial relationships of a spouse/partner. Financial relationships must be disclosed to the learners during the time when the relationship is in effect and for 12 months afterward.

*With respect to personal financial relationships*, “contracted research” includes research funding where the institution gets the grant and manages the funds and the person is the principal or named investigator on the agent.

ANCC considers financial relationships in any amount occurring within the past 12 months as “relevant” in terms of creating a conflict of interest.

- 2.3 An individual who refuses to disclose financial relationships will be disqualified from being a planning committee member, a teacher, or an author of continuing nursing education and cannot have control, or responsibility for, the development, management, presentation, or evaluation of the CNE activity.
- 2.4 The provider must have implemented a mechanism to identify and resolve all conflicts of interest prior to the education activity being delivered to learners.
- 2.5 ANCC considers a “conflict of interest” to exist when an individual has an opportunity to affect continuing nursing education content in relation to a commercial interest with which he/she has a financial relationship.

ANCC considers “opportunity to affect continuing nursing education content” to include content about specific agents/devices, but not necessarily about the class of agents/devices, and not necessarily content about the whole disease class in which those agents/devices are used.

*With respect to financial relationships* with commercial interest, when a person divests himself/herself of a relationship, it is immediately not relevant to conflicts of interest but it must be disclosed to the learners for 12 months.

**STANDARD 3: APPROPRIATE USE OF COMMERCIAL SUPPORT**

3.1 The provider must make all decisions regarding the disposition and disbursement of commercial support.

ANCC defines “commercial support” as financial, or in-kind, contributions given by a commercial interest, which is used to pay all or part of the costs of a continuing nursing education activity.

ANCC does not consider providers of clinical service directly to patients to be commercial interests. For the purposes of eligibility, ANCC considers the following types of organizations eligible for accreditation [approval] and free to control the content of continuing nursing education (Standard 1):

- Liability insurance providers
- Health insurance providers
- Group medical practices
- Acute care hospitals (for-profit and not-for-profit)
- For-profit rehabilitation centers
- For-profit nursing homes
- Universities with nursing development and continuing nursing education programs
- Specialty Nursing Organizations
- Constituent Member Associations
- Federal Nursing Services
- National nurses organizations based outside the United States
- A single-focused organization devoted<sup>1</sup> to offering continuing nursing education

3.2 A provider cannot be required by an entity with a commercial interest to accept advice or services concerning teachers, authors, or other education matters, including content, from the entity as conditions of contributing funds or services.

3.3 All commercial support associated with a continuing nursing education activity must be given with the full knowledge and approval of the provider.

**Written Agreement Documenting Terms of Support**

3.4 The terms, conditions, and purposes of the commercial support must be documented in a written agreement with the entity that includes the provider and its educational partner(s). The agreement must include the provider, even if the support is given directly to the provider’s educational partner or a co-provider.

3.5 The written agreement must specify the entity that is the source of commercial support.

3.6 Both the entity and the provider must sign the written agreement regarding the support to be provided/accepted.

**Expenditures for an individual providing continuing nursing education**

3.7 The provider must have written policies and procedures governing honoraria and reimbursement of out-of-pocket expenses for planners, teachers, and authors.

3.8 The provider, the co-provider, or designated educational partner must directly pay any teacher or author honoraria or reimbursement of out-of-pocket expenses in compliance with the provider’s written policies and procedures.

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<sup>1</sup> The single-focused organization exists for the single purpose of providing education.

- 3.9 No other payment shall be given to the director of the activity, planning committee members, teachers, or authors, co-provider, or any others involved with the supported activity.
- 3.10 If teachers or authors are listed on the agenda as facilitating or conducting a presentation or session, but participate in the remainder of an educational event as a learner, their expenses can be reimbursed and honoraria can be paid for their teacher or author role only.

### **Expenditures for Learners**

- 3.11 Social events or meals at continuing nursing education activities cannot compete with, or take precedence over, the educational events.
- 3.12 The provider may not use commercial support to pay for travel, lodging, honoraria, or personal expenses for non-teacher or non-author participants of a continuing nursing education activity. The provider may use commercial support to pay for travel, lodging, honoraria, or personal expenses for bona fide employees and volunteers of the provider, co-provider or educational partner. This element applies only to nurses whose official residence is in the United States.

### **Accountability**

- 3.13 The provider must be able to produce accurate documentation detailing the receipt and expenditure of commercial support.

## **STANDARD 4. APPROPRIATE MANAGEMENT OF ASSOCIATED COMMERCIAL PROMOTION**

Commercial exhibits and advertisements are promotional activities and not continuing nursing education. Therefore, monies paid by commercial interests to providers for these promotional activities are not considered “commercial support.” However, accredited [approved] providers are expected to fulfill the requirements of Standard 4, and to use sound fiscal and business practices with respect to promotional activities.

- 4.1 Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for continuing education activities.
- 4.2 Product-promotion material or product-specific advertisement of any type is prohibited in or during continuing nursing education activities. The juxtaposition of editorial and advertising material on the same products on subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from continuing nursing education.
- **Print**, advertisements and promotional materials shall not be interleaved within the pages of the continuing nursing education content. Advertisements and promotional materials may face the first or last pages of printed CNE content as long as these materials are not related to the continuing nursing education content they face and are not paid for by the entities with commercial interests in the continuing nursing education activity.

- **Computer-based**, advertisements and promotional materials shall not be visible on the screen at the same time as the continuing nursing education content and shall not be interleaved between computer “windows” or screens of the continuing nursing education content.
  - **Audio and video recording**, advertisements and promotional materials shall not be included within the continuing nursing education. There will be no “commercial breaks.”
  - **Live face-to-face continuing nursing education**, advertisements and promotional materials shall not be displayed or distributed in the educational space immediately before, during, or after a continuing nursing education activity. Providers shall not allow representatives of an entity with commercial interests to engage in sales or promotional activities while in the space or place of the continuing nursing education activity.
- 4.3 Educational materials that are part of a continuing nursing education activity, such as slides, abstracts, and handouts, shall not contain any advertising, trade name, or a product-group message.
- 4.4 Print or electronic information distributed about the non-continuing nursing education elements of a continuing nursing education activity that are not directly related to the transfer of education to the learner, such as schedules and content descriptions, may include product promotion material or product-specific advertisement.
- 4.5 A provider shall not use an entity with a commercial interest as the agent providing a continuing nursing education activity to learners, e.g., distribution of self-study continuing nursing education activities or arranging for electronic access to continuing nursing education activities.

#### **STANDARD 5. CONTENT AND FORMAT WITHOUT COMMERCIAL BIAS**

- 5.1 The content or format of a continuing nursing education activity or its related materials must promote improvements or quality in health care and not a specific proprietary business interest of an entity with a commercial interest.
- 5.2 Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the continuing nursing education educational material or content includes trade names, when available, trade names from several companies should be used, not just trade names from a single company.

#### **STANDARD 6. DISCLOSURES RELEVANT TO POTENTIAL COMMERCIAL BIAS**

Relevant financial relationships of those with control over continuing nursing education content.

Disclosure of information about provider and faculty relationships may be disclosed verbally to participants as a continuing nursing education activity. When such information is disclosed verbally at a continuing nursing education activity, providers must be able to supply ANCC with written verification that appropriate verbal disclosure occurred at the activity. With respect to this written verification:

- A. A representative of the provider who was in attendance at the time of the verbal disclosure must attest, in writing:
- That verbal disclosure did occur; and
  - Itemize the content of the disclosed information (Standards 6.1) or that there was nothing to disclose (Standard 6.2).

- B. The documentation that verifies that adequate verbal disclosure did occur must be completed within one month of the activity.
- 6.1 The accredited [approved] provider is responsible for ensuring that learners are aware of any relevant financial relationship(s), to include the following information:
- The name of the individual,
  - The name of the commercial interest(s), and
  - The nature of the relationship the person has with each commercial interest.
- 6.2 For an individual with no relevant financial relationship(s), the learners must be informed that no relevant financial relationship(s) exist.

### **Commercial Support for the Continuing Nursing Education Activity**

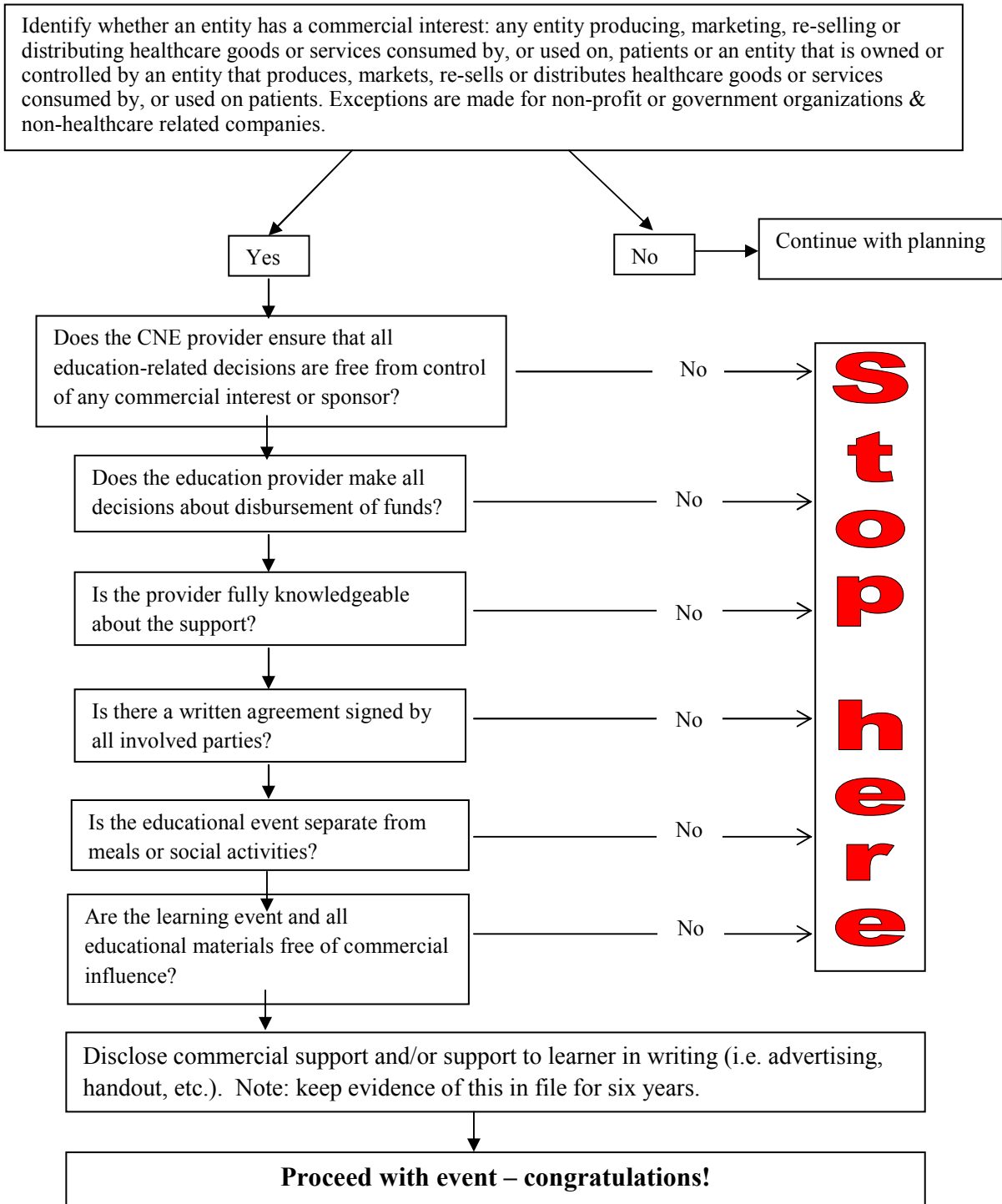
The provider's acknowledgment of commercial support as required by Standard 6.3 and 6.4 may state the name, mission, and areas of clinical involvement of the company or institution and may include corporate logos and slogans, if they are not product-promotional in nature.

- 6.3 The source of all support from entities with commercial interests must be disclosed to learners. When commercial support is other than monetary support, the nature of the support must be disclosed to learners.
- 6.4 "Disclosure" must never include the use of a trade name or a product-group message.

### **Timing of Disclosure**

- 6.5 A provider must disclose the above information to learners prior to or at the time of the beginning of the educational activity.

## Commercial Support / Sponsorship Decision Tree



*Developed by Pam Dickerson, PhD, RN,BC*

**SAMPLE COMMERCIAL SUPPORT AGREEMENT**

Date:

Parties Involved in Agreement:

Provider name and representative's name:

Co-provider(s) name (if applicable):

Entity providing commercial support's name:

The CNE activity entitled \_\_\_\_\_ will be presented by (Provider name) and (Coprovider's name(s) if applicable) on \_\_\_\_\_ at \_\_\_\_\_.

(Commercial Support Entity's name) will provide: \_\_\_\_\_.

The (Entity) will be recognized as providing commercial support in the advertising.

The commercial support and/or entity will in no way influence or bias the content of the CNE presentation. According to commercial support standards as listed in Appendix E of the 2009 ISNA Provider CNE Manual, the following must be met:

**STANDARD 3: APPROPRIATE USE OF COMMERCIAL SUPPORT**

3.1 The provider must make all decisions regarding the disposition and disbursement of commercial support.

ANCC defines "commercial support" as financial, or in-kind, contributions given by a commercial interest, which is used to pay all or part of the costs of a continuing nursing education activity.

**ANCC does not consider providers of clinical service directly to patients to be commercial interests.** For the purposes of eligibility, ANCC considers the following types of organizations eligible for accreditation [approval] and free to control the content of continuing nursing education (Standard 1):

- Liability insurance providers
- Health insurance providers
- Group medical practices
- Acute care hospitals (for-profit and not-for-profit)
- For-profit rehabilitation centers
- For-profit nursing homes
- Universities with nursing development and continuing nursing education programs
- Specialty Nursing Organizations
- Constituent Member Associations
- Federal Nursing Services
- National nurses organizations based outside the United States
- A single-focused organization devoted<sup>2</sup> to offering continuing nursing education

<sup>2</sup> The single-focused organization exists for the single purpose of providing education.

- 3.2 A provider cannot be required by an entity with a commercial interest to accept advice or services concerning teachers, authors, or other education matters, including content, from the entity as conditions of contributing funds or services.
- 3.3 All commercial support associated with a continuing nursing education activity must be given with the full knowledge and approval of the provider.

#### **Written Agreement Documenting Terms of Support**

- 3.4 The terms, conditions, and purposes of the commercial support must be documented in a written agreement with the entity that includes the provider and its educational partner(s). The agreement must include the provider, even if the support is given directly to the provider's educational partner or a co-provider.
- 3.5 The written agreement must specify the entity that is the source of commercial support.
- 3.6 Both the entity and the provider must sign the written agreement regarding the support to be provided/accepted.

#### **Expenditures for an individual providing continuing nursing education**

- 3.7 The provider must have written policies and procedures governing honoraria and reimbursement of out-of-pocket expenses for planners, teachers, and authors.
- 3.8 The provider, the co-provider, or designated educational partner must directly pay any teacher or author honoraria or reimbursement of out-of-pocket expenses in compliance with the provider's written policies and procedures.
- 3.9 No other payment shall be given to the director of the activity, planning committee members, teachers, or authors, co-provider, or any others involved with the supported activity.
- 3.10 If teachers or authors are listed on the agenda as facilitating or conducting a presentation or session, but participate in the remainder of an educational event as a learner, their expenses can be reimbursed and honoraria can be paid for their teacher or author role only.

#### **Expenditures for Learners**

- 3.11 Social events or meals at continuing nursing education activities cannot compete with, or take precedence over, the educational events.
- 3.12 The provider may not use commercial support to pay for travel, lodging, honoraria, or personal expenses for non-teacher or non-author participants of a continuing nursing education activity. The provider may use commercial support to pay for travel, lodging, honoraria, or personal expenses for bona fide employees and volunteers of the provider, co-provider or educational partner. This element applies only to nurses whose official residence is in the United States.

#### **Accountability**

- 3.13 The provider must be able to produce accurate documentation detailing the receipt and expenditure of commercial support.

## STANDARD 4. APPROPRIATE MANAGEMENT OF ASSOCIATED COMMERCIAL PROMOTION

Commercial exhibits and advertisements are promotional activities and not continuing nursing education. Therefore, monies paid by commercial interests to providers for these promotional activities are not considered “commercial support.” However, accredited [approved] providers are expected to fulfill the requirements of Standard 4, and to use sound fiscal and business practices with respect to promotional activities.

- 4.1 Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for continuing education activities.
- 4.2 Product-promotion material or product-specific advertisement of any type is prohibited in or during continuing nursing education activities. The juxtaposition of editorial and advertising material on the same products on subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from continuing nursing education.
  - **Print**, advertisements and promotional materials shall not be interleaved within the pages of the continuing nursing education content. Advertisements and promotional materials may face the first or last pages of printed CNE content as long as these materials are not related to the continuing nursing education content they face and are not paid for by the entities with commercial interests in the continuing nursing education activity.
  - **Computer-based**, advertisements and promotional materials shall not be visible on the screen at the same time as the continuing nursing education content and shall not be interleaved between computer “windows” or screens of the continuing nursing education content.
  - **Audio and video recording**, advertisements and promotional materials shall not be included within the continuing nursing education. There will be no “commercial breaks.”
  - **Live face-to-face continuing nursing education**, advertisements and promotional materials shall not be displayed or distributed in the educational space immediately before, during, or after a continuing nursing education activity. Providers shall not allow representatives of an entity with commercial interests to engage in sales or promotional activities while in the space or place of the continuing nursing education activity.
- 4.3 Educational materials that are part of a continuing nursing education activity, such as slides, abstracts, and handouts, shall not contain any advertising, trade name, or a product-group message.
- 4.4 Print or electronic information distributed about the non-continuing nursing education elements of a continuing nursing education activity that are not directly related to the transfer of education to the learner, such as schedules and content descriptions, may include product promotion material or product-specific advertisement.
- 4.5 A provider shall not use an entity with a commercial interest as the agent providing a continuing nursing education activity to learners, e.g., distribution of self-study continuing nursing education activities or arranging for electronic access to continuing nursing education activities.

## STANDARD 5. CONTENT AND FORMAT WITHOUT COMMERCIAL BIAS

- 5.1 The content or format of a continuing nursing education activity or its related materials must promote improvements or quality in health care and not a specific proprietary business interest of an entity with a commercial interest.
- 5.2 Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the continuing nursing education educational material or content includes trade names, when available, trade names from several companies should be used, not just trade names from a single company.

The signatures below by representatives from each organization listed above indicate agreement with the above statements.

Provider representative \_\_\_\_\_ Date \_\_\_\_\_

Coprovider (if applicable) representative \_\_\_\_\_ Date \_\_\_\_\_

Commercial Support Entity \_\_\_\_\_ Date \_\_\_\_\_

**SAMPLE SPONSOR AGREEMENT**

Date:

Parties Involved in Agreement:

Provider name and representative’s name:

Co-provider(s) name (if applicable):

Sponsor’s name:

The CNE activity entitled \_\_\_\_\_ will be presented by (Provider name) and (Co-provider’s name(s) if applicable) on \_\_\_\_\_ at \_\_\_\_\_.

(Sponsor’s name) will provide: \_\_\_\_\_. The (Entity) will be recognized as a sponsor in the advertising. They have not been nor will be involved in the planning, implementation or evaluation of this activity.

The signatures below by representatives from each organization listed above indicate agreement with the above statements.

Provider Unit Representative \_\_\_\_\_ Date \_\_\_\_\_

Coprovider (if applicable) representative \_\_\_\_\_ Date \_\_\_\_\_

Sponsor \_\_\_\_\_ Date \_\_\_\_\_

**APPENDIX F****POLICIES AND PROCEDURES RELATED TO RECONSIDERATION AND APPEAL**

The reconsideration process allows the applicant to obtain a review of an adverse decision on an "Application for Approval" by the original decision-making body. The appeal process allows the applicant to obtain a redetermination by the Executive Committee of the Indiana State Nurses Association, Inc., Board of Directors regarding an adverse decision made by the Committee on Approval of Continuing Nursing Education (COA) of the Indiana State Nurses Association, Inc.

**I. RECONSIDERATION**

- A. The reconsideration process allows the applicant to obtain a review of an adverse decision on an "Application for Approval" by the ISNA Committee on Approval.
- B. An applicant seeking review of an adverse decision must request reconsideration within five (5) business days after receiving written notification of the Committee's decision on the application. The request for reconsideration must be filed by mail, fax or email requested and addressed to:

Director of Continuing Nursing Education  
Indiana State Nurses Association  
2915 North High School Road  
Indianapolis, IN 46224  
Email: [ce@indiananurses.org](mailto:ce@indiananurses.org)  
Fax: 317-297-3525

The request must be accompanied by the following:

- 1. A written statement setting out why the applicant believes the Committee's decision was incorrect; and
  - 2. A written statement of the remedial action which the applicant is requesting; and
  - 3. Three (3) sets of materials addressed to the clarification and remediation of any deficiencies found by the reviewers to be present in the original application. A new application will not be considered an acceptable submission.
- C. The material submitted by the applicant requesting reconsideration will be forwarded to the member(s) of the Committee on Approval who reviewed the original application. The COA reviewers will review the materials and present their findings and recommendations to the Director of Continuing Nursing Education.
  - D. The applicant will be notified of the decision and the reasons for the decision in writing within ten (10) business days following receipt of the request for reconsideration.
  - E. An applicant who receives an adverse decision on the reconsideration request may initiate the appeal process under Section II of these Policies and Procedures.

**II. APPEAL**

- A. The appeal process may be initiated by an applicant only after the applicant has requested reconsideration and approval was still denied.

- B. Decisions made by the Committee on Approval are appealed to the Executive Committee of the ISNA Board of Directors.
- C. An appeal must be filed by the applicant within five (5) business days after receiving written notification of the adverse decision on the reconsideration. An appeal is considered filed by an applicant when the ISNA office receives a written statement by the applicant, setting out why the applicant believes the reconsidered decision was incorrect and what remedial action the applicant is requesting.
- D. The ISNA staff will acknowledge the request and notify the ISNA President and the Chairperson of the Committee on Approval of its filing.
- E. The President shall appoint an Ad Hoc Appeal Review Panel to review the materials submitted for the approval process. Members of the Ad Hoc Appeal Review Panel will include three (3) members of the Indiana State Nurses Association who may be Board members and who are familiar with the Continuing Nursing Education approval process. These persons shall not be part of the original decision-making body or of the Executive Committee of the Board of Directors.

The Ad Hoc Appeal Review Panel will review materials to determine if the Continuing Nursing Education criteria have been met and if the approval process has been appropriately followed. The Indiana State Nurses Association staff will provide the members of the Ad Hoc Appeal Review Panel with copies of the application, supporting documents, and correspondence.

- F. Within fifteen (15) business days after receipt of the request for appeal, the ISNA President will designate the date and time of a meeting of the Executive Committee of the ISNA Board of Directors to hear the appeal.
- G. The ISNA Director of Continuing Nursing Education will present to the Executive Committee the results of the review by the Ad Hoc Appeal Review Panel.
- H. At the applicant's option and expense, the applicant and/or a representative may be present during the meeting at which the appeal is heard. Opportunity will be given to the applicant and/or representative to speak for no more than twenty (20) minutes and to answer any questions posed by members of the Executive Committee.
- I. The Executive Committee may require that a representative of the Committee on Approval be present at the meeting at which the appeal is heard.
- J. The Executive Committee will vote. The decision of a majority of the Executive Committee hearing the appeal is final and will be transmitted to the applicant in writing. The letter of notification will become part of the record.
- K. Should a member of the Executive Committee believe he/she has a conflict of interest, he/she shall so declare and absent him/herself from the discussion and vote.

## APPENDIX G BEHAVIORAL OBJECTIVES

### A. General Policies Related to Behavioral Objectives

1. Behavioral objectives are defined for each continuing education offering and used as a basis for determining content and learning activities, and evaluating effectiveness.
2. The objectives indicate the relationship to nursing and/or the bodies of knowledge which contribute to nursing practice.
3. Objectives are clearly stated, appropriate for the audience, relevant and attainable for the allotted time, observable and measurable.
4. Behavioral objectives describe what the learner will be able to do after participating in the offering. They will complete the sentence: "After this offering, the participants will be able to..."

### B. Definitions Related to Behavioral Objectives

1. Behavior--any relevant, visible activity displayed by the learner (action verb).
2. Objective--communication of intent.
3. Learning--a relatively permanent change in behavior.
4. Exit behavior--behavior shown at the end of the learning experience.
5. Conditions--situations, equipment, weather, etc.
6. Criterion--standard or test by which exit behavior will be evaluated.

### C. Characteristics of a Behavioral Objective

1. Contains one action verb.
2. Tells about the behavior or performance of learners.
3. Concerns the ends rather than the means--the exit behavior rather than the learning process.
4. Describes the conditions under which the learner will be performing exit behavior.
5. Includes information about the level of performance that will be considered acceptable.
6. Measurable in terms of observable behavior.

### D. Suggested verbs in the cognitive domain

<u>Knowledge</u>	<u>Comprehension</u>	<u>Application</u>	<u>Analysis</u>	<u>Synthesis</u>	<u>Evaluation</u>
define	translate	interpret	distinguish	compose	judge
repeat	restate	apply	analyze	plan	evaluate
record	discuss	employ	differentiate	propose	rate
list	describe	use	calculate	design	compare
recall	explain	demonstrate	experiment	formulate	value
name	express	dramatize	test	arrange	revise
underline	identify	practice	compare	assemble	score
identify	locate	illustrate	contrast	collect	select
recognize	report	operate	solve	construct	choose
	review	schedule	diagram	create	assess
	tell	shop	inspect	set up	estimate
	conclude	sketch	debate	organize	measure
	detect	develop	inventory	prepare	appraise
	predict	generalize	question	classify	critique
	differentiate	relate	examine	organize	validate
	select		categorize		

<b><u>Knowledge</u></b>	<b><u>Comprehension</u></b>	<b><u>Application</u></b>	<b><u>Analysis</u></b>	<b><u>Synthesis</u></b>	<b><u>Evaluation</u></b>
	interpret		criticize		
	estimate				
	cite examples of				
	demonstrate use				

**E. Suggested verbs in the affective domain**

<b><u>Receiving</u></b>	<b><u>Responding</u></b>	<b><u>Valuing</u></b>	<b><u>Organization</u></b>	<b><u>Characterization of values by value</u></b>
acknowledge	acts	accepts	argues	acts consistently
shares	willingly	acclaims	debates	is accountable
shows awareness of	listens to	agrees	declares	stands for
	practices	cooperates	defends with	takes a stand
			responds	helps
			selects	respects
			shows interest	supports

**F. Suggested verbs in the psychomotor domain**

<b><u>Imitation</u></b>	<b><u>Manipulation</u></b>	<b><u>Precision</u></b>	<b><u>Articulation</u></b>	<b><u>Naturalization</u></b>
follows example of	carries out	demonstrates	carries out	is competent
follows lead of	according to	skill in using	is skillful in using	is skilled
	procedure	follows	procedure	carries out
		practices		uses

Adopted from:

Johnson & Johnson. Assuring Learning with Self-Instructional Packages. Self Instructional Packages, Inc., 1973.

Reilly, Dorothy E. Behavioral Objectives. Evaluation in Nursing. 2nd edition. New York: Appleton-Century-Crofts, 1980.

## APPENDIX H GLOSSARY

This glossary is drawn from the glossary in the American Nurses Association Scopes and Standards of Practice for Nursing Professional Development, ANCC Commission on Accreditation's Application Manual (2009), and the Indiana Board of Nursing rules. The selected definitions are frequently used in the context of accreditation and approval and may in some cases require further elaboration in order to carry out the accreditation and approval processes. The definitions from the standards and rules are in ordinary type; operational elaboration or, if necessary, definition by the ANCC Commission on Accreditation is printed in italics.

**Accreditation:** A voluntary process in which an institution, organization, or agency submits to an in-depth analysis to determine its capacity to provide or approve quality continuing education over an extended period of time.

**Administrator:** The person designated to have administrative responsibility for the approver and/or provider unit.

**Adult Learning Principles:** The basis for, or the beliefs underlying, the teaching and learning approaches to adults as learners based on recognition of the adult individual's autonomy and self-direction, life experiences, readiness to learn, and problem orientation to learning. Approaches include mutual, respectful collaboration of educators and learners in the assessment, planning, implementation, and evaluation of education activities.

**Appeal:** A process that allows the applicant to obtain a redetermination by an appellate body with regard to an adverse decision made by an original decision-making body.

**Approval:** A decision made by ISNA's Committee On Approval that the criteria and rules for approval of continuing education have been met.

**Approved Provider:** Recognition by (ISNA) of a provider's capacity to award contact hours for continuing education activities, planned, implemented, and evaluated by the provider.

**Autonomy of the Provider Unit:** The provider unit (not the larger organization) must be solely administratively and operationally responsible for coordinating all aspects of the continuing nursing education activities.

**Beliefs:** Opinions, doctrines or principles held to be true; may be stated as a philosophy, mission, vision or within a strategic plan.

**Biographical Data:** Information required of persons involved in the peer review process or planning and delivery of continuing education activities. The data provided should document their qualifications relevant to the continuing education process or a specific activity with respect to their education, professional achievements and credentials, work experience, honors, awards, and/or professional publications.

**Commercial Interest:** Any entity either producing, marketing, re-selling or distributing healthcare goods or services consumed by, or used on, patients or an entity that is owned or controlled by an entity that produces, markets, re-sells or distributes healthcare goods or services consumed by, or used on,

patients. Exceptions are made for non-profit or government organizations and non-healthcare related companies. The definition allows an accredited [approved] provider to be owned by a firm that is not a commercial interest. It also allows a provider to have a “sister company” that is a commercial interest, as long as the accredited [approved] provider has and maintains adequate corporate firewalls to prohibit any influence or control by the “sister company” over the continuing education program of the accredited [approved] provider. In this case, ANCC would expect that the accredited [approved] provider would have an adequate corporate firewall in place to prohibit any influence or control by the “sister company” over the continuing education program.

**Commercial Support:** Financial, or in-kind, contributions given by a commercial interest, which is used to pay all or part of the costs of a CNE activity.

**Commercial Supporter:** An entity providing commercial support.

**Commission on Accreditation (COA):** Appointed by and accountable to the ANCC Board of Directors, this body is responsible for development and implementation of the ANCC program for accreditation and approval of continuing nursing education. The Commission is composed of 9 members representing accredited organizations, consumers, the ANA Congress on Nursing Practice and Economics, nursing evaluation, and adult education/society.

**Conflict of Interest:** See Appendices E & F.

**Consistency:** Holding to the same or comparable principle or practice.

**Contact Hour:** A contact hour is 60 minutes of an organized learning activity which is either a didactic or clinical experience. The minimum number of contact hours to be awarded is 0.50 (30 minutes).

The formula for calculating contact hours: number of minutes divided by 60 equals number of contact hours. Welcomes, introductions, breaks, orientation, and viewing of exhibits are not included in the calculation of contact hours. Evaluation is considered part of the learning activity and should be included in the calculation of the contact hours. Poster sessions may also be included if there are specific goals for the sessions and the availability to evaluate each separate poster session. When calculating hours, include any pre- and post-tests, practice, discussion, and evaluation. The calculation of contact hours may be carried to two (2) decimal points. It may be round down but never rounded up. For instance 5.667 would be 5.66 contact hours.

The Continuing Education Unit (CEU) system is NOT authorized by the ANCC Commission on Accreditation. Therefore, the term “CEU” is NOT to be used for ISNA approved educational activities.

Example of calculation of contact hours for a workshop:

8-8:10 a.m.	Welcome/Introductions	10 minutes (not applicable)
8:10-8:30	Pre-Test	20 minutes
8:30-9	Presentation No. 1	30 minutes
9-9:20	Discussion	20 minutes
9:20-10:10	Case studies	50 minutes
10:10-10:25	Break	15 minutes (not applicable)
10:25-11:15	Supervised Practice	50 minutes
11:15-12:15	Lunch & Exhibits	60 minutes (not applicable)
12:15-1:55	Panel Discussion	100 minutes
1:55-2:10	Break	15 minutes (not applicable)
2:10-3	Presentation No. 2	50 minutes
3-3:15	Questions & Answers	15 minutes
3:15-3:30	Evaluation	15 minutes
<b>Total</b>	<b>350 minutes divided by 60 = 5.83 contact hours</b>	

**Content:** Subject matter of an educational activity that relates to the educational objectives.

**Content Specialist:** An individual with documented qualifications that demonstrate education, knowledge and experience in a particular subject matter. A content specialist is the person(s) responsible for the design and selection of resources to be used for the learning activity. On the basis of their education and expertise in the content of any learning activity, content specialists may select videotapes, publications, computer programs, skill demonstrations or other teaching/learning resources. Expertise in subject matter can be evaluated based on education, professional achievements and credentials, work experience, honors, awards, professional publications, etc.

**Continuing Competence:** A demonstration of knowledge and skills in meeting professional role expectations. Also: Ongoing professional nursing competence according to level of expertise, responsibility, and domains of practice as evidenced by behavior based on beliefs, attitudes, and knowledge matched to and in the context of a set of expected outcomes as defined by nursing scope of practice, policy, code of ethics, standards, guidelines, and benchmarks that ensure safe performance of professional activities.

**Continuing Nursing Education:** Systematic professional learning experiences designed to augment the knowledge, skills, and attitudes of nurses and therefore enrich the nurses' contributions to quality health care and their pursuit of professional career goals.

**Continuing Education Unit:** (CEU) A specific, standard measure (10 clock hours) of educational achievement used by many universities and professional organizations under the criteria of the International Association for Continuing Education and Training (IACET) to attest to clock hour completion of continuing education activities. This terminology is **not** authorized by the ANCC Commission on Accreditation.

**Co-providership:** Planning, developing, and implementing an educational activity by two or more organizations or agencies. When educational activities are co-provided and one of the providing entities is ANCC-accredited [ISNA approved], the ANCC-accredited [ISNA approved] provider unit retains responsibility for particular aspects of the process to assure adherence to all the ANCC [ISNA] criteria. If collaborating providers are all ANCC-accredited [ISNA approved], one is designated to retain the provider responsibilities by mutual, written agreement. The unit designated to retain these responsibilities is referred to as the provider, and the other collaborating providers are referred to as co-providers. If neither entity is approved as a provider, one takes the lead and is referred to as the provider of the activity; the other is the co-provider.

**Criteria:** Relevant, measurable indicators of the standards.

**Deferral:** A decision made to delay action on an application.

**Denial:** A decision made to not approve an application.

**Distance Learning:** A formal educational activity in which most of the instruction occurs when the learner and the educator are not in the same place. The instruction may take place either synchronously (at the same time) (e.g., interactive video) or asynchronously (at different times) (e.g., online/Internet or correspondence courses).

**Education Activity:** A planned, organized effort aimed at accomplishing educational objectives.

**Educational Design:** A plan for instruction documenting a needs assessment, description of the target audience, educational objectives, content outline, teaching methods, evaluation strategies, and designation of appropriate physical facilities and resources.

**Educational Objective:** A statement of the learner-oriented outcome(s) of an educational activity that is measurable and achievable within the designated time frame.

**Enduring Materials:** A non-live continuing nursing education activity that “endures” over time. Examples of enduring materials include programmed texts, audio tapes, videotapes, monograph or computer assisted learning materials which are used along with printed or written materials. Enduring materials can also be delivered via the Internet. The learning experience by the nurse can take place at any time in any place, rather than only at one time, on place, like a live CME activity. (Based in large part on [http://www.accme.org/index.cfm/fa/faq.detail/category\\_id/47bf141f-9c79-4867-be8b-e08409083qa47.cfm](http://www.accme.org/index.cfm/fa/faq.detail/category_id/47bf141f-9c79-4867-be8b-e08409083qa47.cfm))

**Evaluation:** A systematic process by which a judgment is made about consequences, results, effects, or merit of a continuing education provider unit or continuing education program in order to make subsequent decisions. The process of determining significance or quality by systematic appraisal and study.

**Evidence:** Specific indicators that document compliance with criteria and rules.

**Gift “in-kind”:** Non-monetary support (e.g. marketing assistance, meeting room, event registration assistance, etc.) provided by the giver to the taker. (In the Accreditation community, the “taker” is the provider of the continuing education.)

**Goal:** A statement of broad direction or general intent.

**Independent Study CNE Activity:**

An independent study CNE activity is designed for completion by learners, independently, at the learner’s own pace and at a time of the learner’s choice. The provider designs the educational activity and determines the amount of credit to be awarded. Examples of independent study activities include but are not limited to viewing videotapes or listening to audio tapes and completing post test questions; accessing computer on-line activities; reading selected article(s) and completing post-test questions; and learning and practicing skills independently and seeking an instructor to evaluate a return demonstration. Knowledge and use of adult learning principles should be reflected in all aspects of the educational design, i.e. objectives, content, teaching methods, etc. Periodic review of evaluation feedback from learners is an important aspect of ongoing monitoring of effectiveness of the activity.

An independent study activity may be repeated as often as desired and as determined by the Nurse Planner. There must be a mechanism in place for periodic review of activities to determine that content is still relevant, objectives are addressing needs of the target audience, etc. The designated Nurse Planner is accountable for establishing and implementing this process. If approval as a provider unit expires, the activity may no longer be repeated with contact hours being awarded to attendees.

**Independent Study Contact Hour Calculation:** Contact hours are determined in a logical and justifiable manner, consistent with the objectives, content, teaching/learning strategies, and target audience. The rationale used to determine the number of contact hours to be awarded needs to be described. For example: Was a pilot study done? Was the determination made based on historical data? (For example, has an independent study of the same length and complexity been included in each monthly newsletter and it consistently takes learners “x” amount of time to complete it?) Is complexity of the content and data determined and if so, how?

Participants in the pilot study may receive contact hours for their participation once the contact hours have been calculated.

If this independent study expires and it is being reviewed again for period, the people who have completed the study during the past period become the pilot group. You need to describe how many took the study during the past period, what comments/suggestions they had, what problems they had with the post-test (if applicable), and how long it took them to complete the study. It is not appropriate to use the initial pilot information for the sections on effectiveness of the study and rationale for contact hours in this documentation form.

**Independent Study Effectiveness:** Prior to its use by learners, there must be a method of documenting the effectiveness of the independent study in meeting objectives. This could be done through various ways such as a pilot study, review by experts, evaluation of degree of difficulty of material, etc.

**In-service Education:** Learning experiences provided in the work setting for the purpose of assisting staff members in performing their assigned functions in that particular agency or institution. Also: In-service education consists of planned instruction or training programs to assist the nurse perform in the work setting. In-services are provided to maintain or increase competency in promoting compliance with institutional policies and procedures, the demonstration of new equipment, the explanation of procedures and the practice of previously learned skills.

**Key Element:** Essential components of each criterion.

**Learner Directed Activity:** A learning activity where the learner takes the initiative, with or without the help of others, in diagnosing their learning needs, formulating learning goals, identifying human and material resources for learning, choosing and implementing appropriate learning strategies, and evaluating learning outcomes.

**Learning package:** Materials and description of resources and requirements of the process for completing an independent study.

**Lead Nurse Planner:** Role: The Lead Nurse Planner is responsible for ensuring that all Nurse Planners are performing in a manner consistent with the policies, procedures, position descriptions, and expectations of the accredited [approved] provider unit and with the ANCC [ISNA} criteria. All nurse planners contribute oversight and must be actively involved in both the planning and the analysis of evaluation data for the educational activity.

Qualifications: The lead nurse planner of an approved provider unit must:

- Be a registered nurse and hold a baccalaureate or higher degree in nursing.
- Have education or experience in the field of education or adult learning. This education or experience may be demonstrated in a professional portfolio. Accepted demonstration of competence is evaluated by review of the nurse planner's curriculum vitae, biographical data form, and professional portfolio. The information should demonstrate the presence of the following knowledge and skills: knowledge of the ISNA Approver Unit Program and its requirements, knowledge of adult learning theory, ability to analyze/synthesize information related to meeting the criteria and key elements (as evidenced by having planned, implemented and evaluated continuing nursing education activities), understanding of the policies/procedures of the ISNA Approver Unit Program, knowledge of the Scope and Standards of Practice for Nursing Professional Development.

**Learner Directed Activity:** A learning activity in which the learner takes the initiative, with or without the help of others, in diagnosing their learning needs, formulating learning goals, identifying human and material resources for learning, choosing and implementing appropriate learning strategies, and evaluating learning outcomes. Learner –directed activities may be developed with or without the help of others, but they are engaged in by only one individual.

**Learner-Paced:** A continuing nursing education activity where the learner determines the pace at which s/he engages in the learning activity.

**Learning Goal:** A statement describing why and for whom an educational program has been designed. (Synonym: Purpose)

**Monitor:** To periodically assess and evaluate continuing compliance with the criteria and operational requirements.

**Multidisciplinary:** To relate to or include several disciplines at once, e.g., a multidisciplinary approach to planning a continuing education activity; also may be referred to as interdisciplinary or transdisciplinary.

**Multi-Focused Organization:** The multi-focused organization exists for more than the purpose of providing education.

**Need:** Discrepancy between what is desired and what exists.

**Needs Assessment:** The process by which a discrepancy between what is desired and what exists is identified.

**Nurse Planner:** The Nurse Planner is actively involved in all aspects of planning, implementation and evaluation of the continuing nursing education activity. Typically, the Nurse Planner is responsible for ensuring appropriate educational design principles are used and processes are consistent with the requirements of the ISNA CNE Approval Process.

**Qualifications:** The lead nurse planner of an approved provider unit must:

- Be a registered nurse and hold a baccalaureate or higher degree in nursing.
- Demonstrate competence in performing successfully at the expected level. Accepted demonstration of competence is evaluated by review of the nurse planner's curriculum vitae, biographical data form, or professional portfolio. The information should demonstrate the presence of the following knowledge and skills: knowledge of the [ ISNA Approver Unit Program] and its requirements, knowledge of adult learning theory, ability to analyze/synthesize information related to meeting the criteria and key elements (as evidenced by having planned, implemented and evaluated continuing nursing education activities), understanding of the policies/procedures of the ISNA Approval Process, knowledge of the Scope and Standards of Practice for Nursing Professional Development.

**Nursing Professional Development:** The lifelong process of active participation by nurses in learning activities that assist in developing and maintaining their continuing competence, enhance their professional practice, and support achievement of their career goals.

**Objective:** Objectives are derived from the overall purpose of the activity. Educational objectives are written statements that describe the learner-oriented outcomes which may be expected as a result of participation in the educational activity. These statements describe knowledge, skills, and attitude changes that should occur upon successful completion of the activity. Determination of objectives is a collaborative activity between planners and content specialists.

Learner-oriented objectives are expressed in measurable terms, identify observable actions, and specify one action or outcome per objective. The number of objectives for the program should be sufficient to accomplish the intended purpose of the activity. It is recommended that objectives be limited to two to four per hour. Please number each objective consecutively.

The objectives and content must be appropriate to the learners in the target audience. Factors that may be considered in relation to appropriateness should include education, experience, and scope of practice. When

content relates to practice differences within the target audience (RN, LPN), the applicant must clearly identify which objectives are applicable to the various learners in the audience.

**Off-label:** Using products for a purpose other than that for which it was approved by the Food and Drug Administration (FDA).

**Organization:** The overall administrative and functional structure that includes the provider unit - e.g., hospital, college, association or private business.

**Organizational chart:** A diagram or other schematic used to depict informal and formal lines of communication and relationships within the overall organization as well as the approver and/or provider unit.

**Orientation:** The process of introducing new staff to the philosophy, goals, policies, procedures, role expectations and other factors needed to function in a specific work setting. Orientation takes place both for new employees and when changes in nurses' roles, responsibilities and practice settings occur.

**Outcome:** The end result of a learning activity – usually a change in knowledge, practice or patient care - measured by written evaluation or change in practice. (The overall learning goal (purpose) of a learning activity is different from measured outcomes. An outcome may measure whether an activity's learning goal (purpose) is met but may also address other elements of learning.)

**Peer Review:** Professional judgment on the quality of the continuing education offered based on designated standards, criteria and rules for continuing education.

**Philosophy:** A statement of beliefs.

**Pilot Study/Testing:** The process of assessing the capability of an activity or product to achieve the intended purpose(s). Pilot testing of an educational activity guides the determination of the effectiveness of the teaching/learning materials and contact hour credit to be awarded.

**Planning Committee:** A group of knowledgeable individuals, including potential participants from or representatives of the target audience, who design continuing education.

**Policy:** A written statement defining "what" determines actions or decisions.

**Portfolio:** A collection of documents, articles and exhibits that summarizes an individual's abilities, skills, growth, achievements and specific accomplishments attained over an extended period of time.

**Procedure:** A written statement defining "how" a particular policy is implemented.

**Provider:** An individual, institution, organization, or agency responsible for the development, implementation, evaluation, financing, record keeping, and quality of CNE activities.

**Provider-Directed Activity:** The provider controls all aspects of the learning. The provider determines the learning objectives based on needs assessment, content of the learning activity, the presentation method, number of contact hours, evaluation and evaluation methods. Provider directed activities may be presented in a number of different vehicles - electronic, journal, lecture, etc.

**Provider Unit:** Within the organization, the distinct body responsible for coordinating all aspects of continuing education activities.

**Purpose:** A statement describing why and for whom an educational program has been designed. Note: In a CNE activity, the purpose is the statement(s) of intent that describe how this activity will enrich the learner's contribution to quality health care and his or her pursuit of professional career goals. (Activities intended to assist the participant to acquire, maintain, and/or increase the level of competence in fulfilling his or her assigned responsibilities specific to the expectations of the employer are considered in-service education or orientation and do not qualify as continuing education).

**Reconsideration:** A process that allows an applicant to obtain a review of an adverse decision on an application for approval by submission of clarifying materials to the original decision-making body. Also a process that allows for a review of a revocation decision.

**Resources:** Individuals, materials, facilities, equipment and funds needed to implement educational activities.

**Resubmission:** A process that provides for review and action on applications that had been previously submitted and withdrawn prior to action.

**Retroactive Approval:** Peer review and approval of an activity that has already taken place; not authorized in the ANCC Commission on Accreditation.

**Revoke:** To rescind approved status.

**Sentinel Event:** A sentinel event is one of high risk and high impact related to the improper or inappropriate provision of continuing nursing education in compliance with the ANCC Accreditation Program criteria [or IBN rules]. Examples include, but are not limited to, misuse of accredited [approved] status, illegal actions perpetrated or experienced by the accredited unit – or its approved entities.

**Single-focused Organization:** The single-focused organization exists for the single purpose of providing education.

**Sister Company:** A sister company is one which is a subsidiary of an accredited [approved] organization/unit's parent company but which maintains a governance structure and activities separate from the accredited [approved] organization/unit. The sister company does not control or direct, in whole or in part, the operations of the accredited [approved] organization/unit.

**Sponsorship:** Support (monetary or "in-kind") furnished to the provider of the education activity. Sponsorship must be acknowledged to learners. A written agreement is completed. When an educational activity is supported by more than one entity, each entity is a co-sponsor. Sponsors and co-sponsors do NOT participate in planning, developing, and implementing the educational activity.

**Staff Development:** Those learning activities which facilitate the nurse's job-related performance. The systematic process of assessment, development and evaluation that enhances the performance or professional development of healthcare providers and their continuing competence (NNSDO 1999; ANA, 2000, p.25)

**Standard:** Authoritative statement, promulgated by the profession, by which the quality of practice, service or education can be judged.

**Target Audience:** Group for which an educational activity has been designed.

**Teaching Strategies:** Instructional methods and techniques in accord with principles of adult learning.

**Withdrawal:** Termination of an application, without prejudice to any future applications, prior to the date on which an official decision is made.