Ohio Nurses Association

Instructions and Process Steps for Approved Providers
And Applicants for Approved Provider Status

Effective 7/13/18

Ohio Nurses Association Continuing Education Approver Unit

NOTES:

Ohio Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)

1. All information in this document is obtained from the 2015 Primary Accreditation Approver Application Manual, published by the American Nurses Credentialing Center.

2. The person at ONA accountable for operation of the Accredited Approver Unit is the Director of Continuing Education. This person holds the title of Nurse Peer Review Leader in the approver unit. For convenience, this person will be referred to as the "NPRL" in this document.

3. Approved provider units must have the authority to plan, implement, and evaluate continuing nursing education activities and operate approved provider units using ANCC Accreditation Program criteria.

4. Approved provider units operate under the leadership of a Primary Nurse Planner, who has overall accountability for the approved provider unit and reports to the NPRL at ONA. The Primary Nurse Planner orients, updates, monitors, and evaluates nurse planners who design, develop, implement, and evaluate continuing nursing education activities. Names and credentials of all nurse planners must be reported to ONA. All nurse planners are required to have active, unencumbered nursing licenses and a minimum of a baccalaureate degree in nursing.

5. Approved providers are authorized to plan, implement, and evaluate their own activities and award contact hours for activities that meet accreditation program criteria. They are NOT authorized to approve activities developed by others without involvement of an approved provider unit nurse planner.

6. Commercial entities cannot be providers or joint providers of continuing nursing education activities.

7. Employees of commercial entities cannot be planners or presenters for activities in which the content is related to the products or services of the company.

Part I: The Approval Process for an Approved Provider Unit

ONA Instructions and Process Steps for Approved Providers
And Applicants for Approved Provider Status

Eligibility Criteria

1. Your organization may be a free standing continuing education provider group (its only business is provision of continuing education) or may be part of a multi-focused organization (the organization does more than continuing education; the continuing education function is part of a bigger system)
2. A registered nurse with a current, valid license and a minimum of a baccalaureate degree in nursing (BSN/BAN or equivalent) must serve in the role of Primary Nurse Planner.
3. The Primary Nurse Planner must have authority to implement and maintain all accreditation program criteria as specified by ONA.
4. The Primary Nurse Planner must ensure that a qualified provider unit nurse planner is actively involved in the planning, implementation, and evaluation of all learning activities for which contact hours are awarded.
5. The Primary Nurse Planner must have authority and accountability to orient, update, and monitor the work of all other provider unit nurse planners. All nurse planners must have current valid licenses as RNs, hold a minimum of a baccalaureate degree in nursing, and be specifically named to the nurse planner role within the provider unit. Names and position descriptions for the Primary Nurse Planner and any other nurse planner(s) must be included with the provider application.
6. The Primary Nurse Planner must be accountable to the Nurse Peer Review Leader (NPRL) of ONA for all approved provider unit activities.
7. The target audience for at least 51% of the provider unit's learning activities must be learners within the provider unit's geographic region or states contiguous to the region (see www.hhs.gov/about/regions for map)
8. The applicant must not be a commercial interest entity (an entity that produces, markets, resells, or distributes healthcare goods or services consumed by or used on patients or an entity that is owned or controlled by an entity that produces, markets, resells, or distributes healthcare goods or services consumed by or used on patients).
9. The applicant must have been functional for a minimum of six months prior to initial application for approved provider status.
10. Initial applicants must have planned, implemented, and evaluated at least three continuing nursing education activities in the past 12 months that have been approved by ONA or another ANCC accredited approver *and*:
    a. Demonstrate active involvement of a qualified nurse planner
    b. Demonstrate adherence to all accreditation criteria as specified by ONA
    c. Were at least 60 minutes in length
    d. Were presented independently of another organization (not jointly provided)

The Application (narrative self-study plus 3 sample activity files)

ONA Instructions and Process Steps for Approved Providers
And Applicants for Approved Provider Status

1. Beginning the process:
    a. Determine your current status:
        i. For new applicants, you can begin the process of seeking approval once you have met the eligibility criteria
        ii. For providers already approved by ONA, six months prior to your provider expiration date, you will receive a notice from ONA advising you of the due date for your application to avoid a lapse in your approved provider status. This due date will be 3 months prior to the expiration of your current provider status. Please follow the instructions below to be sure your application is submitted by the due date. Applications submitted after the due date cannot be guaranteed to be reviewed and approved prior to your expiration date.
        iii. For providers already approved by another accredited approver, contact the NPRL at ONA regarding the procedure to transfer your provider status.
    b. Retrieve the form "Eligibility to Apply or Reapply" from the ONA web site.
    c. Complete the form and submit it to the ONA Continuing Education Specialist.
    d. You will receive notice when the form has been reviewed and you are eligible to continue the application process. Should there be any questions about your eligibility, you will be asked to provide additional information to verify eligibility.
    e. Once eligibility has been confirmed, make an appointment for a telephone conference call with the NPRL and Continuing Education Specialist to review the application process and be sure your questions are answered.

2. Completing the Application:
    a. Retrieve the Approved Provider Unit Application from the ONA web site, ohnurses.org.
    b. Read the entire application to be sure you understand what is required.
    c. Complete each section of the application. The primary nurse planner should be the main person accountable for this function, assisted by other nurse planners and selected stakeholders.
    d. For returning applicants, ensure that all requested information is provided in addition to answering the questions in the application itself. Requested information includes, but is not limited to, an organizational chart for the provider unit, an organizational chart showing how the provider unit links with the larger organization (if applicable), and position descriptions for the primary nurse planner and other nurse planners (if applicable). For existing providers, attach three sample activities provided within the past year that demonstrate adherence to all accreditation criteria. Submit everything that should be in the activity file (a list is provided at the end of the provider application). The three activities should, if applicable, include:
        i. One "live" activity presented real time
        ii. One enduring activity
        iii. One activity that was jointly provided with another organization, with your organization as the provider
        iv. One activity that received commercial support, even if it is older than one year – up to two years prior to the application date.

Ohio Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.
7/13/18

  e. New applicants should follow all of the instructions in (d) above, except that instead of submitting three activities, submit:
    i. One template of a certificate showing the approved provider language that will be used once provider status has been attained.
  f. Organize the application in the order listed above: the application itself, followed by the required attachments, and then the three sample activities or new applicant certificate.

3. Submitting the application:
  a. Submit the application and attachments by email to ONA. You may send separate emails with the application and the three samples – just please clearly mark all documents. If you are an already approved provider, please include your provider number on all correspondence.
  b. Ensure that the application reaches the ONA office by the due date.
  c. Send the application fee. A provider approval decision will not be rendered until the application fee is paid in full.

ONA Peer Review Steps:

1. A quantitative review will be completed by the Continuing Education Specialist or designee to ensure that all required components of the application are present. Missing pieces will be requested if needed. Failure to submit additional required evidence within 15 working days of the request, or providing substantive evidence regarding need for additional time, will result in denial of the application. The application will not be sent to nurse peer reviewers until it is complete.
2. The application is sent to peer reviewers, who conduct independent qualitative reviews. The NPRL also performs a qualitative review of the application. A minimum of two people review each provider application.
3. A virtual visit may be scheduled to clarify, verify, and amplify information provided in the written application. At a minimum, participants include the primary nurse planner for the provider unit, and the NPRL.
4. Reviewers arrive at a consensus recommendation.
5. A final decision is made by the NPRL based on evidence of adherence to criteria.
6. Possible actions on a provider application are:
  a. **Approval with distinction for 3 years** – evidence supports exemplary work of the provider unit in adherence to criteria
  b. **Approval for 3 years** – evidence supports the ability of the organization to adhere to criteria; may include progress reports
  c. **Provisional approval for up to 1 year** – evidence supports the need for close monitoring of the organization to ensure adherence to criteria. If monitoring demonstrates that the organization is effectively meeting criteria, approval will be extended for the balance of the approval period. Failure to demonstrate adherence to criteria during the provisional approval period will result in suspension or revocation of approval.

ONA Instructions and Process Steps for Approved Providers
And Applicants for Approved Provider Status

    d. **Denial** – evidence demonstrates that the applicant is not in adherence to criteria and has not recognized deficiencies or established plans to address deficiencies. An organization whose application has been denied has the right to appeal that decision. The appeal procedure is available from the NPRL upon request. Denial of an application precludes the applicant from submitting another provider application for 12 months, although individual activity applications may be submitted by the organization at any time.

Receiving your Approval Decision

1. After final review is complete, you will be notified of the approval decision by either the Continuing Education Specialist or NPRL. If additional information is required, the details of the required information and the due date will be specified.
2. You will receive an approval letter once your provider unit is approved.
3. You will receive instructions for responding periodically to ONA Approver Unit monitoring activities, which is required for maintaining your approved provider status.

Fees

1. There is no fee for completing and submitting the "Eligibility to Apply" form.
2. The application fees can be found at ohnurses.org
3. Additional fees may be incurred for late submissions.
4. The application fee must be paid in full before a final approval decision is rendered.
5. Note: Routine monitoring projects are conducted by ONA; responses are required in order to maintain your provider status. You will be notified of data required and response dates at least 3 months in advance. There are no fees associated with monitoring projects.

Part II: Planning Educational Activities in an Approved Provider Unit

Approved Provider Activity Planning Template and Attachments

Item by Item Instructions
PLEASE NOTE: The forms are intended to guide your planning process. Please use these resources to help you plan your activity, rather than trying to retrofit your plan into the form fields. You are not required to use the forms provided, but all required evidence must be in the activity file.

    a. Title of Activity: the name of the educational activity as it will appear on marketing materials, learner materials, and the certificate

    b. Location of activity: enter city and state if this will be a "live", face-to-face activity

    c. Number of contact hours is the number of hours you will award for the activity. Calculate this number as follows:

1. Include time spent in each session or part of the learning activity, including the time spent in completing any evaluation process.

2. Do not include time spent in welcome/introductions, breaks, lunch, or viewing of vendor exhibits.

3. For enduring materials (e.g. web based individual learning modules, independent study booklets, videotapes), pilot testing is often the mechanism of choice to determine how long it takes a select group of learners representative of the target audience to complete the activity and its evaluation process. The average of those times is then used to determine the number of contact hours to be awarded to learners. Other methods of determining contact hours for enduring materials include use of evidence-based formulas related to word count and difficulty of material (the Mergener formula) or historical data in publications. Please contact the ONA Director of Continuing Education (your nurse peer review leader) for additional information if needed.

4. One contact hour is equal to 60 minutes of learning time.

5. The unit of measure used in nursing continuing education is the contact hour, *not* the CEU. This is an important distinction, as the two terms do not mean the same thing. Please be sure that all of your marketing pieces, learner materials, and certificates correctly reference the contact hour.

d. Activity Type

1. Provider directed, provider paced activities occur when the provider controls the content, time and pace of the activity. Learners participate in "real time" educational experiences. Indicate the date(s) that the activity will be offered to learners. Please be aware that all activity files must be complete prior to the activity. Retroactive awarding of contact hours is not permitted. Provide the rationale for the number of contact hours to be awarded.

2. Provider directed, learner paced activities occur when the provider controls content, but learners can access the education at a time, place, and pace of their choosing. Examples might include independent study articles in professional journals, web-based learning on learning management systems, or archived webinars. For these events, please specify how you determined the number of contact hours you plan to award. See "number of contact hours" below, and contact the ONA Continuing Education Specialist with any questions about how to

calculate contact hours for these types of activities. Note that these activities meet the definition of "enduring materials", meaning that they exist over time. All enduring materials must be reviewed and revised at least once every three years, depending on the time-sensitivity and relevance of the content. Indicate the planned review data on the form. Learners must be informed of the expiration date of enduring materials.

3. Blended activities incorporate components of both "live" and pre- or post-work materials. For example, a learner may be required to read an article prior to attending an activity and come prepared to discuss it. The learner can get contact hours for both parts of the learning experience. Specify how you determined the total number of contact hours you plan to award.

e. Nurse Planner – Provide the name, credentials, and email address for the nurse planner. This is the person ONA will hold accountable for adherence to all accreditation criteria for this activity.

f. List the members of the planning committee and faculty or others who have the ability to control the content of the educational activity.

   i. Be sure the planning committee consists of at least two people – the nurse planner and one person with expertise in the content of the learning activity. Even if the nurse planner is also a content expert, there must be two people on the planning committee. Document information as required on the documentation form itself, then complete a conflict of interest (COI) form for each member of the planning committee, unless the nurse planner determines that, due to the content of the activity not having any relationship to a product consumed by or used on patients, there is no conflict of interest for anyone. In that case, COI forms are not required. * For activities In Ohio, if LPN's are in the target audience, then an LPN must be on the planning committee.

   ii. Note that employees of commercial interest entities as defined on page 2 *may not* serve as members of the planning committee or as presenters for a continuing nursing education activity.

   iii. On the table in the documentation form, enter the name and credentials of each person, that person's role(s) in the activity, the name of any relevant commercial interest entity with which the individual has a relationship, and the type of relationship that person has. You will find additional information about how to identify these relationships on the conflict of interest form. Always contact the ONA CE office with questions – identifying and managing conflict of interest is critically important.

g. **Description of the professional practice gap**: Professional practice gaps reflect the difference between what learners *currently* know, have the ability to do, or perform in practice compared to what they *should* know, have the ability to do, or perform in practice. An educational activity is designed to close that gap. Prior to developing an educational activity, it is necessary to identify the gap and determine the reason for its existence. What is the problem in practice or opportunity for improvement? A problem in practice may be that the rate of patients getting catheter-acquired urinary tract infections is too high, compared to benchmark data, because nurses are not using proper infection control practices. An opportunity for improvement may exist because new guidelines for managing the care of stroke patients have been issued and learners are not aware of the changes. In either of these cases, what is the current issue for the nurse or healthcare team? The first step in planning an educational activity is to ask, "What is the professional practice gap, and why does it exist?" (See "A" on the Approved Provider Activity Planning Template)

h. **Evidence to validate the professional practice gap**: Why is it that learners are not doing what they should be doing? Why do they do something they shouldn't be doing? Why is the current practice no longer acceptable? (e.g. new guidelines have been published). Briefly describe the evidence you have that supports why the practice gap exists. You may wish to look at internal data (fall rates, infection rates, nurse recruitment/retention rates) as well as state or national data (from state health departments or CDC, for example). (See "B" on the Approved Provider Activity Planning Template.)

i. **Educational need that underlies the professional practice gap:** Write the identified gap. Is it a gap in knowledge, skill, or practice. Remember that educators must address the most fundamental problem first – skills cannot be attained before people have underlying knowledge about the process. The level of educational need MUST be supported by the gap ("A") and the evidence ("B"). Note that, in the process of identifying educational needs, you may also find that there are non-educational interventions that are required to address the problem as well. An example would be updating policies and procedures to reflect new guidelines. ((See "C" on the Approved Provider Activity Planning Template.)

j. **Description of the target audience**: Who will be participating in this educational experience? All nurses? Specific groups of nurses, like RNs in the Neonatal Intensive Care Unit? Members of different professions – medicine, pharmacy, pastoral care, social work, and nursing? (See "D" on the Approved Provider Activity Planning Template.)

k. **Desired learning outcome**: What will learners know or do differently upon completion of this activity? How will this change close (or at least lessen) the professional practice gap that created the need for the activity in the first place? An outcome is not the same as an objective. Objectives are not required; a clear outcome statement is required. What is it that you expect of the learner at the end of the activity, and how will you measure progress? One example would be "100% of learners will demonstrate

knowledge of 'X' by passing a post-test with 80% or better accuracy." (See "E" on the Approved Provider Activity Planning Template)

l. **Content of activity – a description of the content, with supporting references**: What will the activity look like? What content will be included? For example: "the session will be a one-hour webinar on the 2014 CDC guidelines for administration of the pneumococcal vaccine. It will include information about the administration schedule, physiological effects, side effects, and contraindications. Attention will be paid to the importance of incorporating this information in patient teaching for persons over the age of 65, and learners will role play patient teaching strategies." Be sure to include references used for development this content, providing evidence that the activity was based on best-available data. If you are planning a conference or a multi-session activity, craft your content description to focus on the conference as a whole, not individual sessions. (See "F" on the Approved Provider Activity Planning Template)

m. **Learner engagement strategies**: How will learners be active (rather than passive) participants in the event? We know that learners are more likely to retain knowledge and transfer knowledge to practice if they are actively involved in the educational experience. To continue with the example above: Learners will have the opportunity to engage in question/answer dialogue about the information, will take a 5-question quiz to assess their knowledge, and will participate in patient teaching role plays to assure that they are teaching current and correct information. (See "G" on the Approved Provider Activity Planning Template)

n. **Criteria for successful completion in order to earn contact hours**: This is an important step in the planning process. This helps to avoid on-the-spot dilemmas like someone arriving 15 minutes late for a one-hour learning activity and asking if he/she can still get contact hours. Criteria for successful completion are based on the identified gaps in knowledge, skill, or practice. If the gap is in skill, there needs to be a skills component to successfully complete the activity and earn the contact hours. Check the appropriate box, or specify your alternate plan. Once determined, the criteria for successful completion must be shared with the learners prior to the beginning of the educational activity. (See "H" on the Approved Provider Activity Planning Template)

o. **Description of the evaluation method(s) – evidence that change in knowledge, skills, or practice of the target audience will be assessed:** How will you determine that the educational activity has been successful? How will you measure change in knowledge? In skill? In intent to change (or actual change in) practice? Explain what process(es) you will use to collect this data. You are not required to have a specific "evaluation form" for learners to complete, and a "one size fits all" evaluation tool will not suffice for every activity. Think instead about the specific questions you want to ask or the evidence you need (post-test or skills demonstration, for example) to show that the practice gap has been closed for the learner. Please do be aware that, at the conclusion of your activity, you are required to add a nurse planner evaluation summary to your activity file. It is

most helpful if this summative includes both data from the learners and a summary by the nurse planner. You are required to evaluate every activity at the level of need that has been identified in the planning process (knowledge, skill, or intent to change practice). You are not required to evaluate each activity in the longer-term, although you will do that for certain activities that are most critical to your organization (see OO4b and QO3 on the approved provider application). An excellent article by Moore, Green, and Gallis (2009) highlights progressive levels of outcomes evaluation. (See "I" on the Approved Provider Activity Planning Template)

p. **Activity is receiving commercial support –** check yes or no. If yes, be sure you have a signed commercial support agreement in the activity file. Commercial support is money or in-kind services received by your provider unit for an educational activity from a company that makes, sells, distributes, or markets products or services consumed by or used on patients. (See Attachment 4 on the Approved Provider Activity Planning Template)

q. **Activity is jointly provided –** check yes or no. If yes, be sure a representative of the joint provider organization is on the planning committee. Also be sure that the marketing material and the certificate are issued in the name of your approved provider unit, not the joint provider. (See Attachment 5 on the Approved Provider Activity Planning Template)

r. **Attachments**

   i. Conflict of interest (COI) forms for all individuals who are in a position to control the content of the educational activity. See specific instructions on the COI form. The form must be completed by the individual as far as the individual's signature/date line. The subsequent section must be completed and signed by the nurse planner, addressing how any identified conflict of interest is resolved. Please note that the nurse planner cannot validate his/her own status. Another person familiar with the COI regulations must validate the nurse planner's COI form. Identifying and resolving COI is a critical step in assuring the integrity of the educational activity. Please contact the ONA Continuing Education Specialist or Director of Continuing Education if you need assistance with this work.

   ii. Agenda: If your activity is a "live" activity and is longer than 2 hours, please be sure to have an agenda, including breaks and meal times, as applicable, in your activity file to support the number of contact hours you are awarding.

   iii. Include the marketing material for the activity in the activity file, if applicable. This may include, but is not limited to, email announcements, a screen shot of a web page, or a flyer or brochure. DO NOT simply list the web link – after the activity, this link will disappear, and you will not have evidence of your marketing material. While this is not a criterion-related requirement, having the marketing material available ensures consistency in sharing of information and provides evidence of information received by the learner prior to participating

in the activity. * In Ohio, marketing is required to have the approved provider statement with the OBN #.

iv. Evidence of disclosures provided to the learners: learners must receive, prior to the activity, information about the things listed here. The disclosure information can be provided on marketing material, an agenda, an introductory slide, or at the beginning of a syllabus or program guide. Include in your activity file evidence of disclosure to include:

1. Your approved provider statement
2. Criteria for successful completion in order to earn contact hours
3. Presence or absence of conflict of interest for all persons with ability to control content of the activity.
   a. Sample 1: "There is no conflict of interest for anyone in a position to control content of this activity.
   b. Sample 2: "There is no conflict of interest for anyone in a position to control content of this activity, except John Doe, who is on the speakers' bureau for Pfizer.
4. Name(s) of entities providing commercial support, if applicable.
5. Expiration date – for enduring material only.
6. Name(s) of joint providers, if applicable

v. Certificate to be awarded to learners upon completion of the activity. The certificate must include:

1. Space for the name of the learner
2. The name and address of the provider (web address is acceptable) – note that this is the address of the provider, NOT the address where the activity is being held.
3. The name of the educational activity
4. The date the certificate was issued
5. The number of contact hours awarded
6. Your approved provider statement: (Your organization) is approved as a provider of continuing nursing education by Ohio Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)

vi. If commercial support has been received for the activity, include a copy of the signed agreement in your activity file. (See information below describing commercial support.)

Logistics of Managing Education al Activities

1. Logistics of managing educational activities

    a. Determining criteria for successful completion

    Criteria for successful completion are based on the desired outcome related to knowledge, skill, or practice. Determination of the criteria for successful completion is undertaken by the planning committee and must be decided in advance of the activity. It is not acceptable for a decision to be made at the time of the event – a person arrives 15 minutes late for a one-hour activity and the question arises as to whether or not he/she should receive contact hour credit. Criteria for successful completion are determined in advance and must be disclosed to the learner *prior* to the learner's engagement in that experience. If there is a post-test or return demonstration, for example, the learner needs to know that a passing score of xx% or successful demonstration of a skill will be required in order to receive contact hours.

    b. Structuring enduring materials that learners can access at their convenience

    For enduring materials (e.g. independent study web-based learning, podcasts, articles) a plan should be established regarding the type of medium to be used, the ability of learners to access that medium, the appropriateness of the medium to the type of learning activity, and the ability of the learner to achieve the desired outcome through use of the medium selected. Additionally, there should be a mechanism in place to enable the learner to contact an appropriate provider unit resource person for either content-related questions or for technical issues related to using the enduring material. Publication of enduring material must be accompanied by a disclosure to the learner about the length of time the learning activity will be available for awarding of contact hours. Accreditation criteria require that enduring materials must be reviewed *at least once every 3 years* to determine that content is still timely, relevant, and based on best-available evidence. Once that analysis has been completed and any required updates made, the educational activity can be re-issued.

    c. Awarding contact hours

    Contact hours are currently awarded to learners based on time. For "live" activities" 60 minutes is equal to one contact hour. You may award contact hours in increments up to the hundredth, but "rounding up" is not permitted. For example, if your calculation showed that 4.67 contact hours could be awarded, you could give 4.6 or 4.67; you cannot award 4.7. Evaluation time is part of the learning experience and can be included in calculation of contact hours. Learning time *does not* include general introductions, breaks, meals, and viewing vendor displays. For enduring materials, there must be a logical and defensible method for determining the number of contact hours to be awarded. For many providers, a pilot study is the mechanism of choice to determine how long it takes a select group of learners who represent the target audience to complete the activity and evaluate it. The

average of those times is then used to determine the number of contact hours to be awarded to learners. Please note that those who participate in the pilot study may earn contact hours for their participation, once the number of hours to be awarded has been determined. Other methods of determining contact hours for enduring material include use of evidence-based formulas related to word count and difficulty of material (the Mergener formula) or historical data in publications. Please contact the NPRL for additional information if needed.

The unit of measure used in continuing nursing education is the **contact hour**, *not* the CEU. This is an important distinction, as the two terms do not mean the same thing. Please be sure that all of your marketing pieces, learner materials, and certificates correctly reference the contact hour.

Certificates are awarded to learners when they have successfully completed the learning activity, based on criteria noted above. The certificate is required to include:
1) Space for the name of the learner
2) Title and date of the educational activity (for a multi-day session, the date should reflect when the learning activity was completed and the certificate awarded)
3) Name and address of the provider of the learning activity (web address is acceptable)
4) Number of contact hours awarded
5) Your approved provider statement

d. Acknowledging the Provider of the Activity; Use of Approved Provider Statement

The provider of the activity is the entity awarding contact hours. The name of the provider must be clearly evident to the learner on marketing and educational activity materials. The approved provider statement must be visible to learners in two places: on written material received prior to the beginning of the educational activity and on the certificate. The provider statement must read as follows: "(Your organization) is approved as a provider of continuing nursing education by Ohio Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)"

e. Providing disclosures to learners

The learner must be informed of certain things prior to the beginning of the educational activity. Disclosures can be on advertising material, an agenda, the opening page of a syllabus, or introductory PowerPoint slides. A copy of the disclosures must be retained in the activity file. Required disclosures include:

1) Requirements for successful completion
2) Conflict of interest information for everyone in a position to control the educational activity

        a. If there is no conflict of interest, one example statement is "There is no conflict of interest for anyone in a position to control the content of this activity".

        b. If there is a conflict of interest, one example statement is "There is no conflict of interest for anyone in a position to control the content of this activity except Susan Smith, who is on the speakers' bureau for XYZ Pharmaceutical Company".

3) If applicable, name(s) of organization(s) providing commercial support
4) If applicable, expiration date for enduring materials
5) If applicable, name(s) of organization(s) jointly providing the activity in conjunction with the stated provider

2. Addressing specific issues

    a. **Conflict of interest** – Conflict of interest (COI) occurs when a person with the ability to control content for an educational activity has a financial relationship with a commercial entity, the products or services of which are relevant to the activity. Managing conflict of interest is a crucial step in ensuring the integrity of the activity. The first thing to do is to assure that the nurse planner for the activity has no conflict of interest. Someone besides the nurse planner must evaluate his/her evidence on the COI form to determine that this person is acceptable to continue in the nurse planner role. Once the nurse planner's ability to be involved has been confirmed, he/she then validates the COI for all others. For each person, the key questions are: Does the person have the ability to control content for the activity? Does the person have a financial relationship with a commercial entity? Is the relationship of a non-employee nature? (Employees of commercial entities are automatically excluded from participation if the topic of the activity relates to the products/services of the commercial entity.) Are the products or services of the commercial entity related to the topic of the educational activity? A yes answer to any of these questions requires further analysis by the nurse planner. A conflict of interest can be resolved in a number of ways (see the COI form for a listing of options), but resolution MUST occur before a person is eligible to continue engagement with the activity. See separate documents on the ONA web site related to assessing and resolving conflicts of interest for planners and faculty/authors (COI forms and the ANCC Content Integrity Standards). The nurse planner may wish to add comments to the COI form to provide an explanation for why a conflict was identified (or not) and what actions were taken to ensure the integrity of the activity. You will address how you handle COI in your provider unit when you respond to criterion EDP 3.

    b. **Bias** – Bias refers to the tendency to influence learners by showing partiality or favoritism for a particular product, service, or point of view. Learning activities are to be planned and implemented based on best available evidence and should avoid bias.

Planners take steps in addressing bias through assessing for possible conflict of interest, assuring that content is based on best available evidence, verifying that content is not influenced by commercial interests, and determining that content is balanced rather than slanted toward a specific point of view. Collectively, these actions preserve **content integrity**. Steps to ensure that bias does not occur might be reviewing speaker's slides, asking for balance in references and resources used in the presentation, having the speaker sign an agreement to present information fairly and impartially, and monitoring the presentation to validate that content integrity is being maintained.

c. **Commercial support** – see separate document on the ONA web site: ANCC Content Integrity Standards in the Presence of Commercial Support. Commercial support is defined as a financial or in-kind contribution for a learning activity given by a commercial interest (an entity that produces, markets, resells, or distributes goods or services consumed by or used on patients or an entity that is owned or controlled by a company that does those things. A pharmaceutical company or a manufacturer of wound dressing products would be considered a commercial entity. An organization providing commercial support cannot have a representative on the planning committee or require that certain speaker(s) be used. Commercial support is given to the provider; the provider controls how money is spent to develop and implement the activity and is accountable to the commercial entity for appropriate use of funds. The commercial support provider cannot have any control over any aspect of the activity.

d. **Joint providership** – Joint providership relates to two or more organizations *working together* to plan, implement, and evaluate continuing nursing education activities. The provider unit's nurse planner is actively involved in all phases of the educational design process, and the provider is required to be accountable for adherence to all accreditation program criteria. While a written agreement is not required as part of the activity file, having such an agreement is a good business practice. Marketing materials for the learning activity must prominently indicate the name of the provider, and the provider's name is clear in all educational materials. The certificate is issued in the name of the provider. As noted in the earlier section on disclosures, the learner must be made aware of the names of organizations that have worked together to plan the activity.

e. **Interprofessional education** – Increasingly, gap analysis and needs assessment data will show that the issue is not a nurse-specific issue, but that the problem in practice is impacted by several professional groups. Interprofessional education is that which is purposefully designed by the team and for the team (not simply inviting members of another professional group to attend an already planned activity). When interprofessional education is planned, sharing of documents and resources is encouraged. For example, a speaker would not need to complete separate COI form for medicine and nursing – one form will suffice. For nursing, the nurse planner must add a notation regarding resolution of any conflict, then sign and date the form. Collaborative planning and implementation of educational activities facilitates members of different

professional learning from, with, and about each other to improve the quality of care provided by the team.

f. **Vendors** – Vendors are people or organizations who pay for exhibit space at learning activities. This is different than commercial support, although a vendor might be an organization that has also provided commercial support. There are no specific accreditation program-related requirements about agreements with vendors, though any time money changes hands, it is good business practice to have written agreements.

From the perspective of education, the nurse planner is accountable for assuring that the integrity of the learning experience is not compromised. Vendor tables, therefore, should be separate from the learning activity, and vendor goods or services should not be required to be viewed/used by learners. Promotional materials are to be kept separate from the learning activity.

Part III: Approved Provider Responsibilities

1. Using the Nurse Peer Review Leader as a Resource

   The Nurse Peer Review Leader of the Accredited Approver Unit (the Director of Continuing Education at the Ohio Nurses Association) is the person accountable to the ANCC Accreditation Program to ensure that approved providers are adhering to criteria and that the approver unit is appropriately providing information, guidance, and support for approved providers. Any time you have questions about provider unit operations, issues that arise with your educational activities, or considerations in relation to completing your provider application, please feel free to contact the NPRL. From time to time, you will be asked to evaluate the work of the approver unit in providing support to your provider unit. Your feedback will help us continue to strengthen our processes.

2. Recordkeeping

   a. Activity files must be retained for 6 years.
   b. The Approved Provider Activity Planning Template and attachments constitute the activity file.
   c. After the activity, add to your file:
      i. The summative evaluation data showing the effectiveness of the activity and any nurse planner comments about how you plan to use the data from this evaluation
      ii. List of participant names and number of contact hours awarded to each person
   d. Add activity data to your Nursing Activity Reporting System (NARS) report as directed by ONA. Please contact the office for assistance if needed.

3. Responding to monitoring requests

Accreditation criteria require that accredited approvers monitor the activities of approved providers on a regular basis, not just at the time of submission of a new provider application every three years. Monitoring activities could occur at any time and will typically focus on one aspect of your provider unit – submitting a sample marketing brochure, certificate, outcome example, or conflict of interest form, for example. Participation in monitoring activities is required. Failure to submit material as requested will result in suspension and/or revocation of provider status.

4. Responding to inquiries and/or complaints

Should a situation arise where the ONA approver unit and Nurse Peer Review Leader have a concern about your provider unit's operations, you will be asked to provide explanations and/or evidence to address the concern. Examples may include data found on an approved provider's web site that is not in adherence to criteria or a complaint from a learner. If you are asked to respond to an inquiry or a complaint, you will be provided with detailed information about the nature of the complaint and what is requested (although confidentiality of complainants will be maintained) and a specific time frame for your response. Failure to provide the required information or address the issue at hand will result in suspension and/or revocation of your provider status.

5. Adhering to federal, state, and/or local laws or regulations

Your provider unit has agreed as part of the provider application to follow all applicable local, regional, state, and national laws/rules that affect your ability to adhere to accreditation criteria. Evidence of violation of such laws/rules will result in suspension and/or revocation of your provider status. Please note that this includes copyright laws, which can present challenges for planners and presenters. Please contact ONA if you have questions about this issue.

6. Issues of Nonadherence

The ONA Approver Unit reserves the right to suspend or revoke the status of an approved provider in situations where criteria are not followed, complaints are not resolved, laws/rules are not followed, or fees are not paid. Notification of suspension/revocation will occur by certified mail or by email with read verification. If suspension and/or revocation occur, the organization must immediately cease awarding contact hours, representing itself as an approved provider, and using the approved provider statement. Suspended organizations may apply for reinstatement within 120 days of the suspension date, based on evidence of resolution of the issue(s) in question. Failure to apply for reinstatement within the 120 day limit will result in revocation of approved provider status. Organizations whose approver status has been revoked may not apply to ONA for 1 year following the date of revocation. If, after that time, the organization wishes to reapply, it would be considered a new applicant and would be required to meet all new-applicant eligibility criteria. During a period of suspension or revocation, an organization may continue to submit individual activities to ONA for approval

but may not operate a provider unit. The organization whose approved provider status has been suspended and/or revoked may appeal the decision. Contact the Director of Continuing Education at ONA for a copy of the appeal process.

References:

American Nurses Credentialing Center. (2015). Primary Accreditation Approver Application Manual. Silver Spring, MD; Author.

Dickerson, P., ed. (2017). Core Curriculum for Nursing Professional Development, 5th ed. Chicago: Association for Nursing Professional Development.

Harper, M., & Maloney, P. (2016). Nursing Professional Development Scope and Standards of Practice, 3rd ed. Chicago: Association for Nursing Professional Development.

Moore, D., Green, J., and Gallis, H. (2009). Achieving desired results and improved outcomes: integrating planning and assessment throughout learning activities. Journal of Continuing Education in the Health Professions 29(1), pgs. 1-15.

Thank you for your commitment to quality

continuing nursing education!

Contact Information

Kelli Schweitzer,MSN, RN-BC
Director of Continuing Education and Nurse Peer Review Leader
kschweitzer@ohnurses.org

614-448-1026

Sandy Swearingen
Continuing Education Specialist
sswearingen@ohnurses.org

614-448-1030