CROSSWALK
"2015 Criteria" to "2015 Criteria with Revisions"
Approved Provider Units

ORGANIZATIONAL OVERVIEW (OO)	Old Version	New Version 2020	Rationale
OO1	**Demographics** a. Submit a description of the Provider Unit, including but not limited to size, geographic range, target audience(s), content areas, and the types of educational activities offered. b. If the Provider Unit is part of a multi-focused organization, describe the relationship of these dimensions to the total organization.	**Executive Statement/High-Level Summary** Submit an executive statement and/or high-level strategic summary of the Provider Unit (E.G., Overall description on how the provider unit functions, the mission of the provider unit as it relates to its NCPD/CNE offerings, including the impact the provider unit has on the organization and its learners). (1000-word limit).	This change aide the provider unit in explaining the overall functions of its Provider unit. Each Provider Unit has its unique process to ensure the ANCC criteria are utilized and maintained
OO2	LINES OF AUTHORITY AND ADMINISTRATIVE SUPPORT a. Submit a list including names and credentials, positions, and titles of the Primary Nurse Planner and other Nurse Planners (if any) in the Provider Unit. b. Submit position descriptions for the Lead Nurse Planner and Nurse Planners (if any) in the Provider Unit. c. Submit an organizational chart, flowchart, or similar image that depicts the structure of the Provider Unit, including the Primary Nurse Planner and other Nurse Planners (if any). d. If part of a larger organization, submit an organizational chart, flowchart, or similar image that depicts the organizational structure and the Provider Unit's location within the organization.	**Role Description** a. Submit a list including names and credentials, positions, and titles of the Primary Nurse Planner and other Nurse Planners (if any) in the Provider Unit. b. Submit position descriptions for the Primary Nurse Planner and Nurse Planners (if any) in the Provider Unit.	Requirement for organization charts were removed.

| OO3 | DATA COLLECTION AND REPORTING
Approved Provider organizations report data at a minimum, annually to their ANCC Accredited Approver. Required Submissions include all of the following:
a. Submit a complete list of all CNE offerings provided in the past twelve months, including activity dates, titles, target audience, total number of participants, number of contact hours offered for each activity, joint provider status, and any commercial support, including monetary or in-kind contributions.
b. New applicants must submit a list of the CNE offerings provided within the past twelve months. If available, include the items listed above.
c. Any additional requirements of the ANCC accredited Approver. | **Removed** | This information is collected at the time the organization applies for accreditation or reaccreditation. Organizations are required to ensure their NARS activity, organizations and PNP/NP demographic data are up to date at the time the self-study is submitted. |
| OO4 | EVIDENCE
A provider organization must demonstrate how its structure and processes result in positive outcomes for itself and for registered nurses participating in its educational activities.
a. Submit a list of the quality outcome measures the Provider Unit has collected, monitored, and evaluated over the past twelve months specific to the Provider Unit. Outcomes must be written in measurable terms.
b. Submit a list of the quality outcome measures the Provider Unit has collected, monitored, and evaluated over the past twelve months specific to | **Removed and integrated into the Quality Outcomes Criteria.** | |

STRUCTURAL CAPACITY (SC)	Old Version	New Version 2020	Rationale
	Nursing Professional Development. Outcomes must be written in measurable terms.		
SC 1	The Primary Nurse Planner's (PNP) commitment to learner needs, including how Provider Unit processes are revised based on aggregate data, which may include but are not limited to individual educational activity evaluation results, stakeholder feedback (staff, volunteers), and learner/customer feedback.	The Primary Nurse Planner's (PNP) commitment to learner needs, including how Provider Unit processes are revised based on aggregate data, which may include but are not limited to individual educational activity evaluation results, stakeholder feedback (staff, volunteers), and learner/customer feedback.	N/A
SC 2	How the Primary Nurse Planner ensures that all Nurse Planners of the Provider Unit are appropriately oriented and trained to implement and adhere to the ANCC accreditation criteria.	How the Primary Nurse Planner ensures that all Nurse Planners of the Provider Unit are appropriately oriented and trained to implement and adhere to the ANCC accreditation criteria.	N/A
SC 3	How the Primary Nurse Planner provides direction and guidance to individuals involved in planning, implementing, and evaluating CNE activities in compliance with ANCC accreditation criteria.	How the Primary Nurse Planner/**Nurse Planner** provides direction and guidance to individuals involved in planning, implementing, and evaluating CNE activities in compliance with ANCC accreditation criteria.	The Nurse Planner has a valuable and critical role within the provider unit. The Primary Nurse Planner may not be involved in the activity planning, implementation, and evaluation processes. Therefore, the addition of Nurse Planner to this criterion clarifies and emphasizes that the focus is on providing guidance and direction to others; not the PNP's guidance to the NP. Additionally, the Nurse Planner(s) may be providing the guidance independent of or in tandem with the PNP.

EDUCATION DESIGN PROCESS (EDP)	Old Version	New Version 2020	Rationale
EDP 1	The process used to identify a problem in practice or an opportunity for improvement (professional practice gap).	The process used to identify a problem in practice or an opportunity for improvement (professional practice gap).	N/A
EDP 2	How the Nurse Planner identifies the educational needs (knowledge, skills, and/or practice) that contribute to the professional practice gap (PPG).	How the Nurse Planner identifies the **underlying** educational needs (knowledge, skills, and/or practice) that contribute to the professional practice gap(s) (PPG).	EDP2 requires an identification of the underlying educational need (knowledge, skills, and/or practice). The addition of the word _underlying_ provides context to the criterion. It emphasizes the fundamental need in addressing where the professional practice gap exists to determine appropriate intervention strategies.
EDP 3	The process used to identify and resolve all conflicts of interest for all individuals in a position to control educational content.	How the Nurse Planner **identifies, and measures** change in knowledge, skills, and/or practice of the target audience that are expected to occur as a result of participation in the educational activity. (Formally EDP 7)	Moving EDP 7 to EDP 3 provides the PNP/NP an opportunity to plan an activity with logical flow. How the PNP/NP identifies, and measures change in knowledge, skills, and/or practice should be in tandem with the underlying educational need for the activity (knowledge, skills, and/or practice) in alignment to the identified PPG(s), and the learning outcome(s). The PNP/NP must know how they will identify and evaluate change prior to content development.
EDP 4	How the content of the educational activity is developed based on best available current evidence (e.g., clinical guidelines, peer-reviewed journals, experts in the field) to foster achievement of desired outcomes.	The process used to identify and resolve all conflicts of interest for all individuals in a position to control educational content. (Formally EDP 3).	A sequential move of EDP 3 moved to EDP 4.

EDP 5	How strategies to promote learning and actively engage learners are incorporated into educational activities.	How the content of the educational activity is developed based on best available current evidence (e.g., clinical guidelines, peer-reviewed journals, experts in the field) to foster achievement of desired outcomes (Formally EDP 4).	A sequential move of EDP 4 moved to EDP 5.
EDP 6	How summative evaluation data for an educational activity are used to guide future activities.	How strategies to promote learning and actively engage learners are incorporated into educational activities (Formally EDP 5).	A sequential move of EDP 5 moved to EDP 6.
EDP 7	How the Nurse Planner measures change in knowledge, skills, and/or practices of the target audience that are expected to occur as a result of participation in the educational activity.	How **the** summative evaluation data for an educational activity are used to **analyze the outcomes of that activity and** guide future activities. (Formally EDP 6) (EDP 7 moved to EDP 3)	A sequential move of EDP 6 moved to EDP 7. The summative evaluation is an aggregate of the evaluation data that the PNP/NP should analyze to determine if the *learning outcomes* identified were achieved. The summative evaluation also includes how that data will be used to guide future activities. This asking the Nurse Planner to strategically analyze the degree to which the educational activity had an IMPACT!
QUALITY OUTCOMES (QO)	**Old Version**	**New Version 2020**	**Rationale**
QO1	The process utilized for evaluating effectiveness of the Provider Unit in delivering quality CNE.	The process used for evaluating the overall effectiveness of the Provider Unit in carrying out its work as a provider of continuing nursing education (CNE).	Emphasizes evaluation of the provider unit as a whole

QO2	How the evaluation process for the Provider Unit resulted in the development or improvement of an identified quality outcome measure for the Provider Unit. (Refer to identified quality outcomes list in OO4a.)	QO2a: Identify at least one quality outcome the provider unit has established and worked to achieve over the past twelve months to improve provider unit operations. Identify the metrics used to measure success in achieving that outcome. QO2b: Using one of the quality outcomes identified in QO2a, explain how the most recent evaluation process (QO1) resulted in the development and/or improvement of an identified outcome for provider unit operations, including how that outcome was measured and analyzed.	Clarifies the relationship between the outcome (goal) for the provider unit's structure and/or function and how the provider unit developed, measured, and analyzed its success in achieving that outcome.
QO3	How, over the past twelve months, the Provider Unit has enhanced nursing professional development. (Refer to identified quality outcomes list in OO4b.)	QO3a: Identify at least one quality outcome the provider unit has established and worked to achieve over the past twelve months to improve the professional development of nurses. Identify the metrics used to measure success in achieving that outcome. QO3b: Using one of the outcomes identified in QO3a, explain how the most recent evaluation process (QO1) resulted in the development and/or improvement of an identified outcome to improve the professional development of nurses, including how that outcome was measured and analyzed.	Clarifies the relationship between the outcome (goal) for professional development of the provider unit's learners and how the provider unit developed, measured, and analyzed its success in achieving that outcome.

References

- American Nurses Credentialing Center: Commission on Accreditation http://www.nursecredentialing.org/

- Graebe, J. (2018). Measuring change as a result of participation in educational activities. *The Journal of Continuing Education in Nursing 49*(8), 340-342.