



Welcome to our new Director of Professional Development!

Please help us welcome Kristi Anderson, MN, RN, NPD-BC, CNL, who will be transitioning to the role of Director of Professional Development. Kristi will start full time with MNA on July 6. Her responsibilities will include accountability for the operation of the ANCC-accredited approver and provider units to support professional development and quality of nursing practice.

Kristi comes to us from her most recent position as Continuing Education Coordinator, Primary Nurse Planner at Kalispell Regional Healthcare Services in Kalispell, MT, where she has been involved in their approved provider unit for the last 7 years. Prior to that role, she worked in a variety of clinical settings in inpatient and outpatient areas. She has a bachelor of science in nursing and a master's degree in nursing from Montana State University in Bozeman, MT. Kristi is a Nursing Professional Development Specialist and also holds certification as a Clinical Nurse Leader.

Pam will be working closely with Kristi during the next several months to facilitate a smooth transition. We will provide Kristi's contact information in the July newsletter. For now, please continue the usual process of contacting Pam and/or Caroline with your questions and information. We will keep you updated as Kristi gradually assumes increasing accountability for approver unit functions.

Education in “Chunks”

“Chunking” is a term used in education and cognitive psychology to refer to learning in bite-size “chunks” rather than by asking learners to remember and recall large amounts of information. Grouping content into logical patterns helps people remember things better. Consider making a trip to the grocery store. Do you go without a list? Have you prepared a long, random list of things that you think of during the week? Have you considered the layout of the store and the products you need from each section? For example, it's easier to remember getting milk, ice cream, and yogurt from the dairy section if those aren't mixed in with your list that includes cereal, turkey breast, and toilet paper!

Chunking might also include looking at patterns or processes. For example, what are the patient's needs preoperatively? During surgery? Post-anesthesia care? Discharge teaching? Separating details into component parts creates a logical way for the brain to process information, leading to better retention and recall.

Researchers analyzing how learning occurs have identified that an average of four to seven pieces of information are retained at one time. An example is phone numbers. Was it easier to remember phone numbers when they were only 7 digits, as opposed to the 10 we now have to remember with the addition of area codes? (Of course, most of us just rely on our phones to store that data for us now!)

The process of learning includes several components – intake, storage, recall, and use of information. These functions occur in different parts of the brain, and the more ways the brain is stimulated, the better the full process of “learning” occurs. Further, there is a difference between short term “working” memory and long-term memory. Evidence shows that long-term memory leads to better recall and application when information pieces are associated with one another. This “connect-the-dots” process is facilitated by chunking information into meaningful concepts that have relevance to both the content and the learner’s expected use of that content.

As an example, think about the way PowerPoint presentations are often developed. Lots of words for learners to read leads to clutter – not only on the page, but in the brain. The more clutter, the less clarity. Use of numbered items or bullet points, in contrast, helps the learner think in “chunks” that are logical, sequential, and related to the concept being taught. The role of an educational facilitator is not reading slides, but helping learners process information. Working memory is at play in the moment, but building bridges between the “chunks” helps the learner think about not only each piece of information but how those pieces of information relate to each other and have relevance in the learner’s real world. This leads to better retention, recall, and application.

This approach is consistent with the ANCC accreditation criteria related to gap analysis and learning needs assessment. Knowing the specific problem the education is designed to address helps to focus education on what matters, rather than loading the brain with unnecessary “stuff” that can interfere with processing what’s really important. Once the gap has been determined, using a learning needs assessment to identify the appropriate level of intervention (knowledge, skill, and/or practice) further targets the education to the specific area of need for the target audience. As content is developed, “chunking” that content then helps learners understand key concepts, explore connections between concepts, and develop strategies for narrowing or closing the identified gap.

Selected References:

Pilcher, J. (2017). Educational neuroscience. In Dickerson, P. Core Curriculum for Nursing Professional Development, 5th ed., pgs. 38-46. Chicago: Association for Nurses in Professional Development.
<http://www.skillstoolbox.com/career-and-education-skills/learning-skills/effective-learning-strategies/chunking/>
http://thelearningcoach.com/elearning_design/chunking-information/
<https://www.mindtools.com/pages/article/cognitive-load-theory.htm>

What's the Difference between Providing and Approving?

Your status as an approved provider gives you the ability to plan, implement, and evaluate continuing nursing education activities and award contact hours for those activities that meet ANCC accreditation program criteria. You are not authorized to award contact hours for activities that are not related to your provider unit's scope. In the provider unit description or executive summary of your provider unit as written in your self-study (OO1), you describe the purpose of the provider unit, its scope of work, and its relationship to the larger organization, if applicable. This should be your guiding framework for making decisions about your provider unit's activities.

Let's look at four scenarios:

1. You are planning an activity for the nurses in your NICU or for the faculty in your college of nursing. This education is part of the work of your provider unit – to make sure your learners are getting evidence-based information to guide their practice. One of your provider unit nurse planners works with a planning committee to develop, implement, and evaluate the activity according to ANCC accreditation program criteria. You develop and maintain an activity file for the course and award contact hours for those who successfully complete it.
2. You are approached by the local community mental health agency to partner with them in developing resources to help healthcare providers manage unprecedented stressors during the current pandemic. The community mental health agency has identified this as a global problem affecting all healthcare providers in the area, not just those who work at your hospital or university. As you look at the description of your provider unit, you realize that it addresses the ability to interface with both internal and external stakeholders in providing nursing continuing professional development (or interprofessional) activities that support improving healthcare in the community. On that basis, you identify that a planned activity will benefit the employees of your own organization as well as those nurses or other healthcare providers living in your community. You decide to jointly provide the activity with the community mental health agency. Both parties understand that you are the educational provider; that marketing materials, the disclosure to learners, and the certificate will all be issued in your organization's name; and that you are accountable for adherence to all ANCC accreditation program criteria. The activity is marketed as "ABC Hospital and XYZ Community Health Agency provide..." or perhaps "ABC Hospital, in collaboration with XYZ Community Health Agency, provides..." In other words, your organization is clearly identified to learners as the provider, while the joint provider is given recognition for their role in the activity. Your nurse planner and planning committee members (which would prudently include at least one person from the community mental health agency) develop, implement, and evaluate the activity, with your organization issuing the certificates and maintaining the activity file.
3. You are approached by the local chapter of a national school nurses association. They plan to have a meeting in September and want the educational topic to be about pediatric immunizations. They ask you if you can award contact hours, because the topic is important to your pediatric department nurses. They want to put an announcement on their web site that "the school nurses association is offering education on pediatric immunizations at its September meeting". While they want you to award the contact hours, they want "ownership" of the activity so they can market it to their members under their name. In this context, it would be

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inappropriate for your provider unit to develop the activity and award contact hours. You could refer the individual requesting the contact hours to MNA or another accredited approver. In that context, they can develop their own educational plan and receive approval to award contact hours for the activity, while retaining full “ownership” of the activity and accountability for adherence to ANCC accreditation program criteria.

4. One of your nurse planners is approached by the manager of the hospital’s outpatient clinic. The clinic staff have determined that they need education on chronic disease management for patients with COPD. The education is going to be recorded and placed on the hospital’s LMS system, the speaker has been selected, and the recording is going to be made this afternoon. The manager wants the clinic nurses to be able to receive contact hours. Clearly the outpatient clinic is part of your hospital, and your description in the self-study includes education for this area. However, the education is already developed and is ready for implementation, so the nurse planner has no opportunity for input to ensure that educational design criteria are met. In this case, you cannot award contact hours for this activity. There’s a caveat to this one, though – using the same scenario, let’s say the taping of the webinar is scheduled for 3 weeks after the nurse manager approaches your nurse planner. It is acceptable for a nurse planner to look at “predeveloped content” in light of accreditation criteria. All requirements still have to be met, but in this case, there is time to engage a content expert and perhaps other planning committee members (that nurse manager can be one of them!). The nurse planner can analyze gap analysis data, determine that the planned content is relevant to closure of the practice gap, select a measurable outcome, and then proceed with planning. That additional planning will focus on things like evidence-based content, validity of references/resources, learner engagement for a recorded webinar, criteria for successful completion, evaluation methods to show closure or narrowing of the practice gap, and management of conflict of interest. Presuming all criteria are met, contact hours could then be awarded for the activity.

Some of these situations can get very complex. We appreciate your reaching out to us when you have questions or are unsure about best processes to follow to keep your provider unit operating in adherence to ANCC accreditation criteria.

References and Resources

Here are some references and resources that you might find helpful in your provider unit work. Please mail us if you have something you would like to share with your colleagues.

Cadavero, A., Sharts-Hopko, N., & Granger B. (2020). Nurse graduates’ perceived educational needs after the death of a patient: a descriptive qualitative research study. *Journal of Continuing Education in Nursing* 51(6), pgs. 267-273.

Hall, S., Brady, S., & Altobar, C. (2020). Developing organizational capacity through an innovative transition RN fellowship. *Journal for Nurses in Professional Development* 36(3), pgs. 170-173.

NARS

As you consider your NARS entries so far in 2020, how many have changed designations as originally planned? If you're providing more enduring material than you have in the past, don't forget that you can track expiration dates of activities within NARS itself and make revisiting/reevaluating accuracy easier with the simple download of your report at the end of the year. You can also duplicate these activities across years to make it easier on your team's NARS entry time!

Have something you think would be a good topic for the NARS Corner? Email me at caroline@mtnurses.org

National Professional Development Conferences in 2021

Association for Nursing Professional Development

April 20-23, 2021

Atlanta, GA

Call for abstracts is open until 6/28! See information at www.anpd.org/e/sx/tk/eid=36

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Find self-study modules for nurse planners at:



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