Continuing education planning document

***Before completing this continuing education (CE) planning document, click “Edit” and then “Save as.” This will ensure that no changes will be made to the master template***. The document should be submitted to your CE specialist 45 days before the start of a multisession activity, or 30 days before the start of a single-session activity.

The purpose of the Vizient Continuing Education department is to improve members’ clinical and supply chain performance and patient outcomes, through the development and implementation of high quality and effective educational activities. Our goal is to ensure value in our education, while identifying knowledge gaps and guiding change in practice.

The use of this planning document will aid you in creating an educational activity that meets the guidelines and criteria for Vizient continuing education activities. This form utilizes the instructional design model known as ADDIE. The ADDIE model is a methodology that enables one to create highly effective instruction.

The five components of ADDIE are Analyze, Design, Develop, Implement and Evaluate

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| **Activity title:** |
| **Activity date:** |
| **Course director:** |

A – Analyze the need for this educational activity and who it will be designed for. (C4, 5, 7, 11, 12)

Professional practice gap and needs assessment

**Gap**

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| --- | --- | --- |
| **Please complete the following table regarding the educational gap and need. (C4, 5)** | | |
| Knowledge – being aware of what to do | | |
| Competence – knowing how to do it | | |
| Performance – actually doing it (one activity standing alone will not address this educational gap) | | |
| **What is the practice need or problem? Why does this need or problem exist?** (What is the current knowledge, competence and performance?) |  | **What is the ideal practice?**  (What is the desired knowledge, competence and performance?) |
|  | Professional practice gap |  |

**Purpose** – In a short paragraph, please tell us how your activity will address this need or problem and close or bridge the gap(s).

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Select at least **two sources** below that you used to identify the need, purpose or gap for this activity. Please embed actual evidence to support the need or gap. Use key points collected and pertinent documents such as evaluation results, committee minutes, research findings, etc.

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| --- | --- | --- |
| **Source** | **Description of evidence** | **Actual evidence1** |
| Activity planning  notes or minutes |  |  |
| Research findings/ peer-reviewed literature |  |  |
| Evaluation results (activity score, summary and comments) |  |  |
| Public health data |  |  |
| Patient data/feedback |  |  |
| Recently released practice guidelines |  |  |
| Surveys of learners reporting key issues or obstacles (e.g., outcomes surveys) |  |  |
| Other |  |  |

1Embedkey points collected and documents such as evaluation results, committee minutes, etc. Please do not use links to webpages. To embed a document, select: Insert/Object/Create from file/Browse/Select document/Click Insert/Display as icon/OK.

**Target audience** – Who is your target audience? Include all areas regardless of credit type offered.

Nurses

Pharmacists

Pharmacy techs

Physicians

Health care executive

Other

Click here to enter text.

If pharmacists or pharmacy techs are included, please identify the pharmacy area(s) for your activity. Please **choose only one** area of pharmacy unless this is a multiday, multisession activity.

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| --- | --- | --- |
| 01-Disease state management/drug therapy | 04-General pharmacy | 07-Compounding |
| 02-AIDS therapy | 05-Patient safety | 08-Pain management |
| 03-Law related to pharmacy practice | 06-Immunizations |  |

**Barriers -** What potential barriers could prevent your audience from incorporating change into their practice?(C11)

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| Lack of experience | Hesitant to accept recommendations |
| Lack of time or resources | Reimbursement/insurance loss |
| Cost/financial issues | Organizational |
| Lack of opportunity (patient population) | Other: |

How might you address the barriers that you have identified? (C12)

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**D - Design** the desired activity results**.** (C5, 6, 8, 10, 13)

Please identify the competencies your activity will address – check all that apply2: (C8)

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|  | **Provide patient-centered care** – Identify, respect and care about patients’ differences, values, preferences and expressed needs; listen to, clearly inform, communicate with and educate patients; share decision-making and management; and continually advocate disease prevention, wellness and promotion of healthy lifestyles, including a focus on population health. |
|  | **Work in interdisciplinary teams** – Cooperate, collaborate, and communicate using teams to ensure that care is continual and reliable. |
|  | **Employ evidence-based practice** – Integrate best research, clinical expertise and patient values for optimum care, and participate in learning and research activities to the extent feasible. |
|  | **Apply quality improvement** –Identify errors and hazards in care; understand and implement basic safety design principles, such as standardization and simplification; continually understand and measure quality of care in terms of structure, process and outcomes in relation to patient and community needs; and design and test interventions to change processes and systems of care, with the objective of improving quality. |
|  | **Use informatics** –Communicate, manage knowledge, mitigate error, and support decision-making using information technology. |

2From Health Professions Education: A Bridge to Quality. Institute of Medicine, 2003.

**Learning objectives** –These objectives should be used to create your activity evaluation and measure what your audience has learned. Please note: There should be a learning objective(s) for each discipline getting credit for a course. For example, if this activity is requesting nursing, physician and pharmacy credit, there should be a learning objective(s) for each discipline. For pharmacy technician credit, at least one objective must be specific to pharmacy technicians. (C6)

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|  | I have acquired the knowledge and/or skills that will enable me to3: | Choose a discipline(s) for each objective |
| 1. |  | Pharmacist  Pharmacy tech  Nurse  Physician  General  Other: Click here to enter text. |
| 2. |  | Pharmacist  Pharmacy tech  Nurse  Physician  General  Other: Click here to enter text. |
| 3. |  | Pharmacist  Pharmacy tech  Nurse  Physician  General  Other: Click here to enter text. |
| 4. |  | Pharmacist  Pharmacy tech  Nurse  Physician  General  Other: Click here to enter text. |
| 5. |  | Pharmacist  Pharmacy tech  Nurse  Physician  General  Other:  Click here to enter text. |
| 6. |  | Pharmacist  Pharmacy tech  Nurse  Physician  General  Other: Click here to enter text. |

3An objective may apply to more than one discipline. Carefully consider whether a learning objective is fully within the expected scope of knowledge for the discipline(s) chosen.

**Outcomes measurements** –Outcomes measurements do not apply to the American College of Healthcare Executives (ACHE)-only credit. Outcomes are measured to show if or how an activity has made a difference in practice. These measurements relate to the gap(s) and learning objectives. Future activities can then be planned based on the feedback from these measurements.

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| **In what area do you want to measure change?** Check all that apply. The continuing education department will automatically distribute an outcomes survey with the questions below approximately six weeks after every activity and will provide the course director with results. (C5, 13) |
| Skills/Strategy: The ability to do something well; expertise/a plan of action |
| Performance: Implementation of new skills, abilities and strategies into practice |
| Patient outcomes: A measurable change in patient health status |

Noneducational support strategies – These types of strategies help to strengthen the education you provide. Select the method(s) you will be using and provide a description. (C10)

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| **Method** | | **Specify – please describe and embed example(s)** |
|  | Reinforce information in another meeting or call |  |
|  | Relevant resources are made available to the audience either online or on-site |  |
|  | Provide tools for use after activity  (e.g., calculator or toolkit) |  |
|  | Other, please specify: |  |

**D – Develop** the content and logistics of your activity. (C6, 7, 9a, 9d)

**Agenda** –Outline your proposed agenda below. If a presentation does not relate to an objective listed above, indicate “N/A” and that session will not be reviewed for credit. Please enter time as a time frame (e.g., 8 a.m.-9 a.m.).

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| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Start time/ End time** | **Presentation title** | **Presenter** | **Content description (with teaching method)** | **Active learner engagement strategies4** | **Related learning objective (by number)** |
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4 Active learner engagement strategies are required for **nursing and pharmacy credit**.

Suggested strategies may include but are not limited to:

* Analyzing a case study
* Solving a problem independently or in groups
* Responding to questions using an audience response system (e.g., raising colored cards or raising hands)
* Participating in small group discussions
* Thinking and pairing with teammates, and sharing activities
* Practicing – return demonstration
* Self-checking using Q&A
* Incorporating social media platforms
* Role playing

**Planning committee**

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| --- | --- | --- | --- | --- | --- |
| Planning committee | Degree/ credentials | Professional title | Embed bio (optional)5 | Company name and email address | Embed disclosure6 |
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7For California nursing credit (CBRN) speaker bios are required; all other credit types, bios are optional.   
6To embed a document, select: Insert/Object/Create from file/Browse/Select document/Click Insert/Display as icon/OK.

**Speaker(s)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Speaker(s) | Degree/ credentials | Professional title | Embed bio (optional)7 | Company name and email address | Embed disclosure8 |
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7For California nursing credit (CBRN) speaker bios are required; all other credit types, bios are optional.   
8To embed a document, select: Insert/Object/Create from file/Browse/Select document/Click Insert/Display as icon/OK.

**I – Implement** the activity. (C9c)

**Marketing and promotion** – How will you market this activity? (e.g., emails, save-the-date pieces or brochures)

Prior to **any** marketing or promotion of your activity, be sure you are familiar with the marketing policy for accredited activities.

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**Note:**Any marketing or invitation to register must include the official designation statement. A save-the-date template is available on our website and does not require the official designation statement.

**Important:** Once you receive your designation statement, add it to your marketing and promotional items and send to your education specialist for final review before distributing.

**E – Evaluate** the content, speakers and activity. (C11)

**Activity evaluation** – Completion of an activity evaluation will be required for participants to receive credit.

**Outcomes survey** – The continuing education department will automatically distribute an outcomes survey approximately eight weeks after each activity. Results will be provided to the course director. Outcomes measurements do not apply to ACHE-only credit; or activities with less than ten participants. Outcomes are only relevant to those courses who choose “Performance” under the outcomes measurement section. (C13)