

Alabama State Nurses Association

Helpful Hints to a Narrative Style of Documentation

Writing to the Criteria

A narrative description of how the organization operationalizes each criterion is required for the sections on Structural Capacity, Educational Design Process and Quality Outcomes.

Narrative documentation is an opportunity to tell how the organization is adhering to the accreditation/Approver Unit criteria and requires both a *description (Describe)* and an *example (demonstrate)* for each criterion.

Narrative documentation with supporting evidence/examples:

- “Telling a story”
- “Description of the wonderful work done by your organization for registered nurses”

Examples may be chosen from supplemental activity files but examples may also come from other activities or work done within the organization

- “***Describe***” – tell the story
- “***Demonstrate***” – provide evidence to substantiate the story

Some Tips for Writing

- Pause and reflect on the intent of the question
- Answer the question directly
- Do not add unnecessary extraneous information
- If an individual’s name is used in the narrative, indicate the position/title of the individual to ensure the reader can follow the response
- Give enough background/context for the reader to understand the response
- Ask several colleagues to read the responses and tell you if they make sense
- Remember to answer all parts of the criterion requirement in each response.

NOTE:

- Process description should be a general overview of the process used by the Approved Provider applicant to meet the criterion requirement
- Example should be a specific and detailed description demonstrating how the Approved Provider applicant operationalized the process. Examples should include details such as who, when, where, how and why.

Alabama State Nurses Association

Helpful Hints to a Narrative Style of Documentation

EXAMPLE OF A PROCESS DESCRIPTION AND SUPPORTING EXAMPLE:

EDP5. The process for resolution of an actual or potential conflict of interest and the outcome achieved.

Process description:

The process used by our Provider Unit to resolve an actual or potential conflict of interest is the one outlined in the *2013 Primary Accreditation Application Manual for Providers and Approvers*. Although there are five potential options for resolving an actual or potential conflict of interest outlined in the 2013 manual, our Provider Unit has chosen to use one of the following options: 1.) removing the individual with the actual or potential conflict of interest from all parts of the activity; 2.) having a content reviewer review the educational activity to evaluate for potential bias, balance in presentation, evidence-based content or other indicator of integrity, and absence of bias, AND monitoring the educational activity to evaluate for commercial bias in the presentation; or 3.) having a content reviewer review the educational activity to evaluate for potential bias, balance in presentation, evidence-based content or other indicator of integrity, and absence of bias, AND reviewing participant feedback to evaluate for commercial bias in the activity.

Example:

Using the process of resolution as described above, the following is an example of how our Provider Unit resolved an actual conflict of interest for an educational activity that we provided.

We were planning an activity on triaging and evacuating patients during a hurricane emergency. As part of the planning process, we identified a nationally recognized expert in hurricane disasters. He has published extensively on the subject and has conducted research in the best methods of triage and evacuation. On his bio/coi form, he indicated that he conducted a research study that was funded with a grant from a company that makes splinting equipment for trauma patients. We recognized that this type of company would be classified as a commercial interest organization based on the ANCC definition. His research was conducted within the past 12 months therefore would be considered an actual conflict of interest as defined by ANCC. Resolution was required. We chose to implement resolution #3 as described above and we took the following actions:

- A content reviewer evaluated the presentation to ensure the content was evidence-based, balanced, and bias-free
- We notified participants in both written materials they received for the program as well as verbally at the start of the presentation that our Provider Unit is committed to ensuring all educational activities include only evidence-based content or content based on the best-available evidence and that all activities are presented in a balanced manner and bias-free. Participants were instructed to immediately contact a member of the Provider Unit (names of the Nurse Planner and other PU members at the conference were given) if they felt that the educational activity was presented in a manner that violated these principles.

The content reviewer found that the content was evidence-based and the presentation was balanced and bias free. There were two reports of bias following the presentation that were reported to the Nurse Planner (approximately 150 individuals participated in the activity). The Nurse Planner discussed the concerns that were brought to her attention and determined the reports were unfounded, i.e. did not demonstrate commercial bias in the activity. Both reports came from participants who thought that because the speaker mentioned his place of employment (a hospital system), it was a reflection of bias.