**NURSING ACTIVITY COMPLETION SUMMARY SHEET**

Please assist us in tracking (required by ANCC accreditation) this educational activity by completing this form.

|  |  |
| --- | --- |
| Title of Educational Activity: |  |
| Date of Educational Activity: |  |
| Person Clinically Responsible: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Total # of Attendees** | **# of NPs, CNMs or CRNAs** | **# of RNs** | **# of LPNs** | **# of All Others** |
|  |  |  |  |  |

Note: Column 1 should be the total of columns 2 – 5.

**JOINT PROVIDERSHIP**

*Joint Providership Definition:* Planning, developing, and implementing an educational activity by two or more organizations or agencies. When educational activities are joint provided and one of the providing entities is ANCC-accredited, the ANCC-accredited provider unit retains responsibility for particular aspects of the process to assure adherence to all the ANCC criteria. **A written agreement is completed.**

**Did your program have joint providership? Yes No**

**COMMERCIAL SUPPORT/EXHIBIT FEES**

*Commercial Support Definition:* Financial or in-kind contributions given by an ineligible company that are used to pay for all or part of the costs of a CNE activity. Commercial Support must be acknowledged to learners. Providers of commercial support may not be providers or joint providers of an educational activity**. A written agreement (Letter of Agreement for grants / Intention to Exhibit for exhibits) is completed.**

*Ineligible Company Definition:* *An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling or distributing healthcare products used by or on patients.* Exceptions are made for nonprofit or government organizations and non-healthcare-related companies.

**Did your program have commercial support? Yes No**

**If yes, please include written agreement(s) and complete the following section:**

**1a. Amount of $ (Total) Received in Commercial Support (Grants)**

**1b. List entities that provided Commercial Support and attach agreements**

**2a. Amount of $ (Total) Received in Exhibit Fees**

**2b. List entities that provided Exhibits and attach agreements**

**SPONSORSHIP**

*Sponsorship Definition:* Financial or in-kind contribution from an organization that does not fit the category of an ineligible company that is used to pay for all or part of the costs of a CNE activity. When an educational activity is supported by more than one entity, each entity is a sponsor. Sponsors do NOT participate in planning developing, and implementing the educational activity.

**Did your program have sponsorship? Yes No**

**If yes, please complete the following section:**

**3a. Estimate of Monetary or In-Kind Contribution Received in Sponsorship**

**3b. List of entities who provided Sponsorship**

Please return this form by email to [Judith.M.Langhans@hitchcock.org](mailto:Judith.M.Langhans@hitchcock.org). If you have any questions, please call 603-653-6605.