

INSIGHTS INTO THE CCNE ACCREDITATION PROCESS & STANDARDS

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Presenter

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Expected Outcomes

to be able to identify the purpose and scope of CCNE programmatic accreditation
 to become familiar with the CCNE standards and procedures for accreditation
 to become knowledgeable about the processes related to initial or continuing CCNE accreditation, including timelines, program monitoring, and the decision-making process



CCNE Accreditation: Scope and Purpose

SCOPE OF CCNE ACCREDITATION

CCNE is the autonomous accrediting arm of the American Association of Colleges of Nursing (AACN).

CCNE:

- began accrediting programs in 1998-1999
- □ is governed by a Board of Commissioners
- □ is financially independent
- controls its own bylaws
- establishes and approves accreditation standards, policies, and procedures

SCOPE OF CCNE ACCREDITATION

CCNE is a <u>programmatic</u> accreditor of nursing education programs in the U.S. and its territories.

CCNE accredits:

Baccalaureate
Master's
DNP
Post-graduate Advanced Practice Registered Nurse (APRN) certificate

PURPOSE OF CCNE ACCREDITATION

Accreditation by CCNE is intended to:

Hold nursing programs accountable to the community of interest and to one another by ensuring that these programs have mission statements, goals, and outcomes that are appropriate to prepare individuals to fulfill their expected roles.

- Evaluate the success of a nursing program in achieving its mission, goals, and outcomes.
- Assess the extent to which a nursing program meets accreditation standards.

PURPOSE OF CCNE ACCREDITATION

To inform the public of the purposes and values of accreditation and to identify nursing programs that meet accreditation standards.

To foster continuing improvement in nursing programs-and, thereby, in professional practice.



CCNE by the Numbers

CCNE BY THE NUMBERS

CCNE currently accredits 1,571 nursing programs at 758 institutions.

- **Education Programs:**
 - □ 731 baccalaureate degree nursing programs
 - □ 462 master's degree nursing programs
 - **249 Doc**tor of Nursing Practice (DNP) programs
 - 129 post-graduate APRN certificate programs
- Nurse Residency Programs:
 - 25 entry-to-practice nurse residency programs

CCNE BY THE NUMBERS

New Applicants (institutions new to CCNE):

- **58** baccalaureate
- 19 master's
- G 6 DNP
- **5** post-graduate APRN certificate
- New Programs (institutions already have one or more other programs accredited by CCNE):
 - **2** baccalaureate
 - **29** master's
 - **53 DNP**
 - 166 post-graduate APRN certificate



Standards for Accreditation of Baccalaureate and Graduate Nursing Programs 2013

The Standards were last updated in 2013 and went into effect January 1, 2014. There are four Standards:

- □ Standard I Program Quality: Mission and Governance
- Standard II Program Quality: Institutional Commitment and Resources
- Standard III Program Quality: Curriculum and Teaching-Learning Practices
- Standard IV Program Effectiveness: Assessment and Achievement of Program Outcomes

Each Standard has 6-8 Key Elements (totaling 28).

Standards are found to be "met" or "not met."

- Key Elements are found to have or not have a compliance concern ("yes" or "no").
- The same standards and key elements apply to all degree and/or post-graduate APRN certificate programs under review (regardless of mode of educational delivery).
- The standards and key elements build upon one another and there are relationships among the key elements.

Access the Standards on the CCNE website at: http://www.aacn.nche.edu/ccne-accreditation/Standards-Amended-2013.pdf

Notable differences between the 2009 and 2013 Standards include:

Key Element III-E specifically states CCNE's expectations in relation to clinical practice experiences

Standard IV specifies expected levels of achievement in relation to completion rates, pass rates (licensure and certification), and employment rates.

Review and revision of Standards:

- CCNE reviews and revises the Standards at least every 5 years.
- A Standards Committee has been appointed and will begin its work in the first quarter of 2017.
- The standards review and revision process is expected to take approximately 12 months.
- CCNE will be seeking public comment on the current standards as well as on proposed revisions.

- A Call for Comments on the <u>current (2013)</u> <u>standards</u> will be one of the first activities of the Standards Committee.
- Comments should be sent to:

CCNEStandards@aacn.nche.edu



Procedures for Accreditation of Baccalaureate and Graduate Nursing Programs 2014

The CCNE Procedures include information about: **CCNE** Board and Committees Initial Accreditation Scheduling the On-Site Evaluation The Accreditation Review Process The Accreditation Decision-Making Process **Categories of Accreditation**

Accreditation Terms

Communication of Actions

Disclosure of Accreditation (http://www.aacn.nche.edu/ccneaccreditation/Accreditation-Disclosure-Statement.pdf) and (http://www.aacn.nche.edu/ccneaccreditation/seal-policy/baccalaureate-graduate)

Monitoring Program Performance

Highlights of 2014 procedural revisions include:

- New language throughout for the accreditation of postgraduate APRN certificate programs
- Compliance Report now a separate requirement from Continuous Improvement Progress Report (CIPR) if compliance concerns
- Third-party comments process revised
- Substantive change notification section rewritten for consistency with revised standards
- Conduct of all business in English

new applicant programs now submit substantive change notification, if needed, prior to Board action

the definition of the practicing nurse representative who serves on the team has been revised

Access the Procedures on the CCNE website at: http://www.aacn.nche.edu/ccne-accreditation/Procedures.pdf



CCNE Reporting Requirements

CONTINUOUS IMPROVEMENT PROGRESS REPORT (CIPR)

The CIPR is due at the midpoint of the accreditation term. The due date is provided in the Board action letter awarding accreditation.

A reminder regarding the due date of the CIPR is sent several months in advance of the due date.

For more information go to: http://www.aacn.nche.edu/ccne-accreditation/standardsprocedures-resources/baccalaureate-graduate/progressreport

ANNUAL SURVEY

All CCNE-accredited programs are required to complete the AACN annual survey.

The AACN survey includes questions that are relevant to accreditation.

AACN shares selected, relevant data with CCNE, and CCNE informs the chief nurse administrators of this process each year.

COMPLIANCE REPORTS

Compliance reports are required if at the time of accreditation a program has (a) compliance concern(s) at the key element level.

Compliance reports are generally due in 12 months.

For more information go to: http://www.aacn.nche.edu/ccne-accreditation/Procedures.pdf

SPECIAL REPORTS

Special reports are required if at the time of accreditation a program has a "not met" standard(s).

Special reports are generally due in 12 months.

For more information go to: http://www.aacn.nche.edu/ccne-accreditation/Procedures.pdf

FOLLOW-UP REPORTS

Follow-up reports are required if concern(s) remain at the key element level and/or a standard is found to be "not met" following the submission and review of a required report.

For more information go to: http://www.aacn.nche.edu/ccne-accreditation/Procedures.pdf

SUBSTANTIVE CHANGE NOTIFICATIONS

Submit to CCNE no earlier then 90 days prior to but no later then 90 days after implementation, including as appropriate:

- Description of the change
- □ Timeline for implementation
- **Expectations**
- Impact on resources
- □ Change in status of approval from other bodies/regulators
- Curriculum overview
- Impact on the accredited nursing program(s)
- Other relevant documentation

Submit substantive change notifications to CCNE at: ccnesubchange@aacn.nche.edu



The CCNE Accreditation Process

APPLYING FOR CCNE ACCREDITATION

New Applicants

- A program begins the accreditation process by requesting new applicant status and submitting the required documentation and fee.
- New applicant status signifies an affiliation with CCNE; it is not a status of accreditation.
- New applicants must host an on-site evaluation within 2 years of completing the new applicant process.
 New applicants for accreditation are eligible for a

maximum accreditation term of 5 years.

APPLYING FOR CCNE ACCREDITATION

New Programs

- Institutions that already have a CCNE-accredited program and seek accreditation of a new program are required to submit a letter of intent and fee to request an accreditation review.
- The letter of intent needs to be signed by the chief nurse administrator and include:
 - the type of program (degree and/or certificate) seeking accreditation
 - when the program began enrolling students
 - when the program plans on hosting the on-site evaluation

SCHEDULING AN ON-SITE EVALUATION

New Applicants & New Programs

- A degree program must have students enrolled for the equivalent of one academic year (e.g., two semesters) prior to hosting an on-site evaluation.
- On-site evaluations are generally scheduled with CCNE a minimum of 12 months in advance.
- CCNE conducts on-site evaluations during the spring and fall.
- Date availability is on a first-come, first-served basis.
- Post-graduate APRN certificate programs must host an on-site evaluation concurrently with a degree program.
- □ The entire degree and/or post-graduate APRN certificate program must be presented for accreditation.

THE ON-SITE EVALUATION

- New Applicants & New Programs
- \Box The on-site evaluation is typically 2 $\frac{1}{2}$ days.
- The self-study document is due 6 weeks prior to the on-site evaluation.
- Terms of accreditation:
 - □ Initial (maximum 5 year term)
 - **Continuing (maximum 10 year term)**
 - Post-graduate APRN certificate programs are eligible for the maximum term of accreditation of the other degree program(s) under review.

THE ON-SITE EVALUATION TEAM

- □ Reviews the self-study document.
- Meets with the program's community of interest (e.g., students, alumni, employers, faculty, administration).
- □ Reviews documents provided in the resource room.
- Develops a written report of its findings.
- The team determines whether each standard is "met" or "not met" and whether there are compliance concerns ("yes" or "no") at the key element level
- The team makes a determination about each standard and each key element for each degree and/or certificate program under review.
- The team does not make a recommendation regarding accreditation.

COORDINATING THE ON-SITE EVALUATION

- The on-site evaluation is coordinated through the CCNE Online Community (www.ccnecommunity.org).
- All communications regarding the on-site evaluation occur via the CCNE Online Community and are sent to the chief nurse administrator.
- The CCNE Online Community allows you to manage your program's profile to ensure that information about the program(s) under review is accurate.
- The CCNE Online Community provides access to important resources, announcements, reminders, deadlines, etc.
COORDINATING THE ON-SITE EVALUATION

- Documents related to the on-site evaluation (self-study, agenda, program information form, verification of third party comment process, team report, and the program's response to the team report) are uploaded to the CCNE Online Community.
- The evaluation team accesses all information about the on-site evaluation via the CCNE Online Community.
- CCNE provides user names and passwords only to the chief nurse administrator; the chief nurse administrator may share this information with (a) designee(s).



The Decision-Making Process

- After the on-site evaluation, the team submits a report of its findings to CCNE. The team report is:
- □ uploaded to the CCNE Online Community by the team
- reviewed and edited by staff
- uploaded to the CCNE Online Community for review by the nursing program
- This process can take up to 8 weeks from the time of the onsite evaluation.

The program is provided the opportunity to provide a written response to the team report. The program's response may:

- offer corrections of errors as they relate to names, positions, data, and other documentable facts; and/or
- offer comments that agree or disagree with the opinions and conclusions stated in the team report; and/or
- provide any documentation demonstrating additional progress made toward compliance with the accreditation standards, key elements, or ongoing program improvement.

Or, the program's response may indicate that there are no concerns and that the institution is in agreement with the team report.

Prior to the CCNE Board of Commissioners reviewing a program for accreditation, all programs are reviewed by the Accreditation Review Committee (ARC).

The ARC meets twice per year (generally early spring and midsummer)

- The ARC is:
- appointed by the Board Chair
- composed of experienced CCNE evaluators

responsible for making confidential recommendations regarding accreditation to the Board

- The ARC and Board review:
- Self-study document
- Team report
- Program's response to team report
- The ARC may reach a different decision than that of the team.
- If the ARC adds a compliance concern and/or a not met standard, the program will be provided an additional opportunity to respond, in writing, prior to the Board's decision-making meeting.
- In addition, the Board reviews:
- Program's response to any concerns added by the ARC
- ARC's confidential recommendation regarding accreditation 42

- The Board can vote to:
- □ grant accreditation
- deny accreditation
- withdraw accreditation(this only applies to programs that are currently accredited by CCNE)
- issue a show cause directive (this only applies to programs that are currently accredited by CCNE)
- Programs are notified of the Board's decision, in writing, within 30 days of the last day of the Board's decision-making meeting.



Commonly Asked Questions

COMMONLY ASKED QUESTIONS

- Our institution has an accredited DNP program that is offered postmaster's. We have just admitted our first post-baccalaureate cohort.
 Do we need to submit a substantive change notification to CCNE? Do we need to host an on-site evaluation for this new track/pathway?
- Do all tracks (e.g., family nurse practitioner, executive leadership) in our DNP program need to be operational for one academic year to be eligible for accreditation?
- We only admit students into our DNP program that have a graduate degree in nursing and are already certified in a specialty area. Are these students required to have clinical practice experiences? (Key Element III-E)
- We have a post-master's DNP program. Can we admit students who are not nurse practitioners?
- We would like to offer a DNP program with an education focus. Does CCNE accredit DNP programs with an education focus?

COMMONLY ASKED QUESTIONS

- Our students are located all over the country. Do their clinical practice experiences need to be supervised by faculty? If yes, do we need to send faculty across the country? (Key Elements III-E and III-G)
- ❑ We require all students in our DNP program to be employed at the time they enter the program. Do we still need to collect employment data within 12 months of graduation (Key Element IV-D)?
- What are acceptable sources of pass rate and employment data? (Key Elements IV-C and IV-D)
- What are "other program outcomes"? Are they required? (Key Element IV-E)
- □ What is meant by aggregate faculty data? (Key Element IV-F)
- Why do programs need to present *expected* outcome data and *actual* outcome data? (Key Elements IV-E and IV-F)



Accreditation Resources

RESOURCES

- Procedures for Accreditation of Baccalaureate and Graduate Nursing Programs (2014)
- Standards for Accreditation of Baccalaureate and Graduate Nursing Programs (2013)
- Supplemental Resource to the Standards for Accreditation of Baccalaureate and Graduate Nursing Programs (October 2016)
- Guidelines for Assessment of Student Achievement
- Overview of the CCNE Accreditation Process
- General Advice for Hosting a CCNE On-Site Evaluation

RESOURCES

Crosswalk Table Comparing CCNE's 2009 and 2013 Standards

- Crosswalk Table Between CCNE 2013 Standards and National Task Force (NTF) 2012 Criteria for Evaluation of Nurse Practitioner Programs (N/A if no NP offerings)
- Crosswalk Table Between CCNE 2013 Standards and National Task Force (NTF) 2016 Criteria for Evaluation of Nurse Practitioner Programs (N/A if no NP offerings)
- □ All professional nursing standards and guidelines required by CCNE

Access resources on the CCNE website at: http://www.aacn.nche.edu/ccne-accreditation/standards-proceduresresources/baccalaureate-graduate/standards

ADDITIONAL RESOURCES/LINKS

FAQs

□ Clinical Practice Experiences FAQ:

http://www.aacn.nche.edu/ccne-accreditation/Clinical-Practice-FAQs.pdf

□ CIPR FAQ:

http://www.aacn.nche.edu/ccne-accreditation/CIPRFAQs.pdf

DNP FAQ:

http://www.aacn.nche.edu/ccne-accreditation/DNP-FAQs.pdf

Post-Graduate APRN Certificate FAQ: http://www.aacn.nche.edu/ccne-accreditation/Post-Graduate-APRN-Certificate-FAQs.pdf

AACN RESOURCES/LINKS*

Expectations for Practice Experiences in the RN to Baccalaureate Curriculum (AACN, 2012)* http://www.aacn.nche.edu/aacn-publications/white-papers/RN-BSN-White-Paper.pdf

The Doctor of Nursing Practice: Current Issues and Clarifying Recommendations (Report from the Task Force on the Implementation of the DNP, August 2015) http://www.aacn.nche.edu/news/articles/2015/dnp-white-paper

*Although not required by CCNE, programs have found these documents to be helpful.

PROGRAM MONITORING RESOURCES/LINKS

□ Continuous Improvement Progress Report (CIPR):

http://www.aacn.nche.edu/ccne-accreditation/standardsprocedures-resources/baccalaureate-graduate/progress-report

□ Substantive Change Notification:

http://www.aacn.nche.edu/ccne-accreditation/standardsprocedures-resources/baccalaureate-graduate/change-notification

Substantive Change Notification Template: http://www.aacn.nche.edu/ccne-accreditation/Substantive-Change-Template.pdf



Questions & Final Thoughts



Contacting CCNE Staff

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