August 31, 2021

To: Chief Executive Officers, Healthcare Organizations
    Chief Nursing Officers/Chief Nurse Executives, Healthcare Organizations
    Chief Nurse Administrators, CCNE-Affiliated Baccalaureate & Graduate Nursing Programs
    Entry-to-Practice Nurse Residency Program Coordinators
    CCNE On-Site Evaluators
    Accrediting Agencies
    Selected Federal Agencies
    National Nursing Organizations
    State Boards of Nursing
    Other Interested Parties

From: Dr. Elizabeth Ritt, Chair
      CCNE Board of Commissioners

Re: Opportunity to Comment on Proposed Revisions to CCNE Procedures for Accreditation of Entry-to-Practice Nurse Residency Programs

The Commission on Collegiate Nursing Education (CCNE)--a nationally recognized accrediting agency for entry-to-practice nurse residency programs--invites your comments about proposed revisions to the CCNE Procedures for Accreditation of Entry-to-Practice Nurse Residency Programs. In accordance with its commitment to ongoing self assessment and continuous quality improvement, CCNE periodically undertakes a review of its core documents and provides opportunity for constituents to review the documents and suggest revisions.

The proposed Procedures document shows changes in tracking. As you review the document, you will find that many of the proposed changes are non-substantive in nature and codify existing CCNE practice. A summary of proposed substantive changes is provided below.

- Renames the Residency Accreditation Committee (RAC) to the Entry-to-Practice Residency Accreditation Committee (EPRAC) to differentiate it from the new CCNE Nurse Practitioner Fellowship/Residency Accreditation Committee (see p. 2).
- Extends the maximum term of accreditation for programs seeking continuing accreditation from 5 years to 10 years (see pp. 5, 13, and 18).
- Clarifies the reporting timelines programs are to follow in the event there is a change in status with an institutional accreditation agency (see pp. 5 and 22).
- Establishes a policy for conducting virtual evaluations in place of on-site evaluations when extraordinary circumstances warrant (e.g., pandemic), including conducting in-person verification visits, consistent with new U.S. Department of Education requirements (see p. 10).
- Updates sections titled Accreditation Denied and Accreditation Withdrawn to align with current practices in the accreditation community to notify residents and prospective residents of denial or withdrawal of accreditation within 7 business days of being notified of such an action by the accrediting agency. Additionally, the proposed revisions require CCNE to notify various entities of
the adverse action at the same time the program is notified and to notify the public within 1 business day (see pp. 13-14).

- Provides a process for programs that have accreditation withdrawn to request an effective date that is different than the date of the adverse action. Such request must be made in writing following established timelines and must be particularly related to resident protection and the imminent completion of residents in the affected program (see pp. 14 and 24).

- Establishes that actions by the CCNE Board to issue a show cause directive (i.e., “show cause as to why accreditation should not be withdrawn”) are public actions, consistent with current practices in accreditation. CCNE and the program will notify various entities of said action (see p. 16).

- Establishes that “CCNE may require a program to publicly correct any misleading or inaccurate advertising, marketing materials, published documents, or public claims regarding the program’s offerings, outcomes, and accreditation status” (see p. 18).

- Allows the CCNE Board, at its discretion, to waive the requirement to submit a continuous improvement progress report (CIPR) when a program is awarded an accreditation term of less than 3 years as the program would already be under special monitoring by CCNE during the shortened term of accreditation (see p. 19).

- Establishes the effective date of decisions by the CCNE Hearing Committee to affirm or amend adverse decisions of the CCNE Board as “no earlier than the date of the Hearing Committee’s decision.” Further, if the CCNE Hearing Committee remands an action to the CCNE Board for further consideration, the effective date of a resulting adverse action will be “no earlier than the Hearing Committee’s decision to remand” (see p. 24).

- Establishes policies for the recording and transcription of an appeal hearing (see p. 26).

- Revises the actions that may be taken by a CCNE Hearing Committee, in alignment with current practice in the accreditation community (see pp. 26-27).

- Updates CCNE’s records retention practices to align with current practices in the accreditation community (see p. 31).

Finally, no new sections are proposed, and no sections are proposed to be removed from the Procedures document.

It is the intent of CCNE that any revisions to its procedures will serve the following purposes:

1. reflect the CCNE values, good accreditation practices, and what occurs in practice;

2. ensure consistency within and among CCNE publications;

3. be responsive to constituents’ suggestions for clarifying the procedures; and/or
4. continue to align with current practices in the accreditation community.

CCNE looks forward to receiving your comments regarding the proposed changes to the procedures. Please submit your comments to CCNE by September 22, 2021. Email comments to ccneprocedures@ccneaccreditation.org. When submitting your comments, please use “Comments on CCNE Entry-to-Practice Nurse Residency Procedures” as the Subject to the email.

CCNE values your input and will consider all written comments before adopting final changes to the procedures. Once the CCNE Board of Commissioners approves a revised Procedures document, it will go into effect immediately. If you have any questions about the proposed changes or the revision process, please contact Ms. Renée Kalan, CCNE Accreditation Manager, at 202-887-6791 x230 or rkalan@ccneaccreditation.org.

Thank you.