

Frequently Asked Questions Preparation of the Continuous Improvement Progress Reports (CIPR) Entry-to-Practice Nurse Residency Programs

1. What is the CIPR?

The CIPR is the report that *every* CCNE-accredited nursing program is required to submit at the mid-point of its accreditation term. The CIPR is one way that CCNE monitors accredited programs' continued compliance with the accreditation standards in between comprehensive on-site evaluations. All programs are required to address all four accreditation standards and each of the key elements within the standards in the CIPR. Programs are informed about the report and the submission deadline, as well as any areas (e.g., key elements) on which the report must focus, in the CCNE accreditation action letter.

2. When is the CIPR due to CCNE offices?

The CIPR submission deadline is identified in the most recent CCNE accreditation action letter. The deadline for most programs is either June 1 or December 1 of a specified year (the mid-point of the term of accreditation). CCNE sends a reminder email to the chief nursing officer/chief nurse executive of the program whose CIPR is due approximately 4-5 months in advance of the report submission deadline. The reminder notice is sent as a courtesy; the report is due on time even if the chief nursing officer/chief nurse executive did not receive the reminder notice.

3. How can I access the most current template to use for preparation of the CIPR?

The CCNE reminder email contains the link to access the current CIPR template on the [CCNE website](#). Programs are required to use the template, which ensures that the correct set of accreditation standards is being used. Another advantage to using the template is that the program does not need to re-type the standards and key elements.

4. Who reviews the CIPR and when will the program be notified of the outcome?

The CIPR is reviewed by the Entry-to-Practice Residency Accreditation Committee (EPRAC), a standing committee of CCNE. Upon its review of the CIPR, the EPRAC formulates a confidential recommendation to the CCNE Board of Commissioners. The Board will review the CIPR, as well, and consider the EPRAC's recommendation at its next scheduled meeting. The chief nursing officer/chief nurse executive is notified of the Board's action in writing within 30 days of the Board meeting.

5. What standards should be used and where are they located?

The CCNE website clearly identifies which set of *Standards* are in effect. Programs submitting reports must address the [Standards for Accreditation of Entry-to-Practice Nurse Residency Programs \(amended 2021\)](#).

6. Where can I find procedures and guidelines for the CIPR?

Important information regarding the CIPR can be found in CCNE's [Procedures for Accreditation of Entry-to-Practice Nurse Residency Programs](#), under "Monitoring Program Performance" (pages 18-19). Possible recommendations and outcomes of the Board's review of the report are discussed in this section.

Guidelines for preparing the CIPR are linked in the reminder email. They are also located on the [CCNE website](#).

7. Can I simply refer to a section of our previous self-study when writing the CIPR?

No. The EPRAC and Board of Commissioners will not have a copy of the self-study submitted during the program's most recent accreditation review or any other previously submitted documents. The self-study also will be out of date. The CIPR is a stand-alone report showing evidence of the program's continued compliance with all accreditation standards, including all key elements, since the last accreditation review. New and updated information must be provided, as appropriate. View the CIPR as an opportunity to identify improvements and changes, present action plans, and celebrate accomplishments since the last review.

8. What should be reported if there have been no changes since the last accreditation review?

Use of "no change" as the only response to a standard or key element is insufficient to document that a program remains in compliance. When no changes have occurred, please submit supporting narrative and/or data that allows CCNE to evaluate that the program is in compliance with the standard or key element.

9. What is expected of programs that had a compliance concern noted at the time of their last comprehensive accreditation review?

When a compliance concern at the key element level was noted in the program's previous CCNE accreditation action letter, the program must present information in the CIPR demonstrating that measures have been taken to ensure compliance and continuous improvement during the accreditation period. The CIPR must contain sufficient detail so that compliance and continuous improvement can be evaluated by the EPRAC and Board of Commissioners.

10. Are sample CIPRs available for review?

No. CCNE does not provide sample CIPRs as these reports are not deemed public documents.

11. What is the required formatting for the CIPR?

The font size must be a minimum of 10 and the program responses must be single spaced. The template includes the standard, key element, and elaboration statements; and these are not to be altered or deleted by those preparing the CIPR.

12. What is the page limit for the CIPR?

The CIPR should not exceed 50 pages, unless otherwise negotiated with CCNE staff. Well-selected appendices may be submitted in addition to the CIPR, if necessary, as one document. The appendices, in total, should not exceed 25 pages, unless otherwise negotiated with CCNE staff.

13. Who should I contact if I have questions regarding the CIPR?

Please contact Renée Kalan, CCNE Accreditation Manager, at rkalan@ccneaccreditation.org or 202-887-6791 x230.

14. How should the CIPR and appendices be submitted to CCNE?

All reports must be submitted on or before the due date (but no sooner than 30 days before the due date). Email the completed report, PIF, and appendices, if any, as a PDF attachment, to cnereports@ccneaccreditation.org. Please do not send hard copies.