CCNE Presents the Revised Accreditation Standards
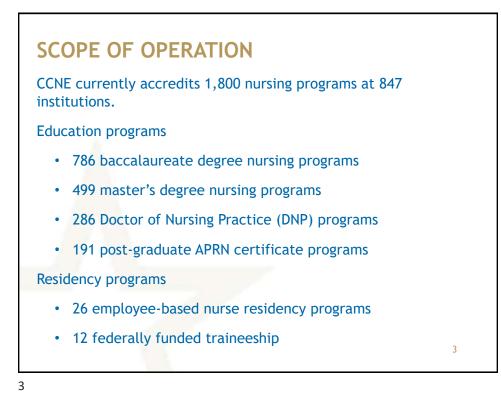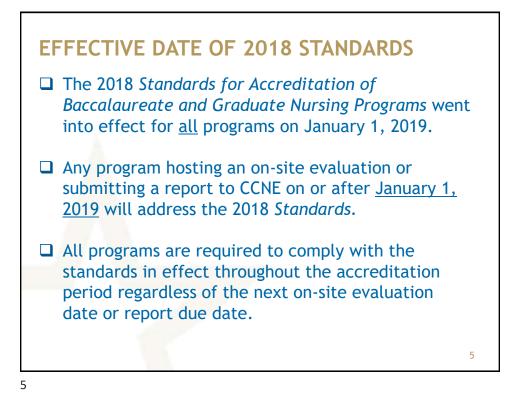
February 23, 2019
Tampa Marriott Waterside Hotel & Marina
Tampa, FL
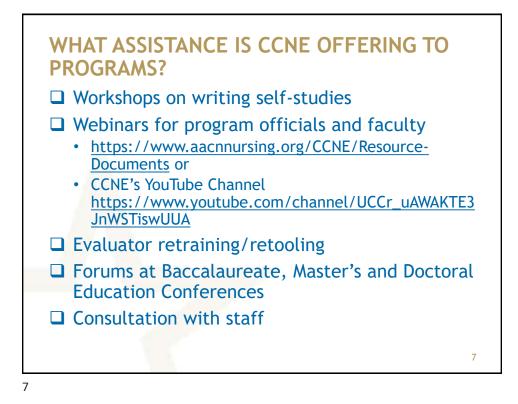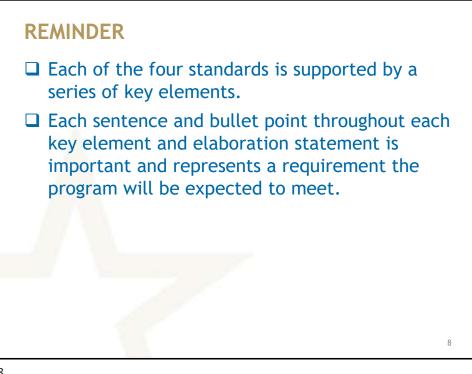
1

Presenters

Nancy DeBasio, PhD, RN, FAAN
President Emerita
Research College of Nursing

Lori Schroeder, MA
CCNE Director of Accreditation Services

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SCOPE OF OPERATION

CCNE currently accredits 1,800 nursing programs at 847 institutions.

Education programs

- 786 baccalaureate degree nursing programs
- 499 master's degree nursing programs
- 286 Doctor of Nursing Practice (DNP) programs
- 191 post-graduate APRN certificate programs

Residency programs

- 26 employee-based nurse residency programs
- 12 federally funded traineeship

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CCNE STANDARDS COMMITTEE 2017-2018

❑ Debra C. Davis, PhD, RN, <u>Co-Chair</u>
❑ Jane C. Voglewede, JD, ACTL, <u>Co-Chair</u>
❑ Linda M. Caldwell, DNSc, ANP-BC
❑ Nancy O. DeBasio, PhD, RN, FAAN
❑ Mary Jane S. Hanson, PhD, CRNP, CNS ACNS-BC, FNP-BC, ANP-BC, FAANP
❑ Christine M. Pacini, PhD, RN
❑ Susan D. Ruppert, PhD, RN, FNP-C, ANP-BC, FCCM, FNAP, FAANP, FAAN
❑ William Michael Scott, DNP, FNP-BC, FAANP
❑ Pamela B. Simmons, PhD, APRN, FNP-BC

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EFFECTIVE DATE OF 2018 STANDARDS

❑ The 2018 *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs* went into effect for <u>all</u> programs on January 1, 2019.

❑ Any program hosting an on-site evaluation or submitting a report to CCNE on or after <u>January 1, 2019</u> will address the 2018 *Standards*.

❑ All programs are required to comply with the standards in effect throughout the accreditation period regardless of the next on-site evaluation date or report due date.
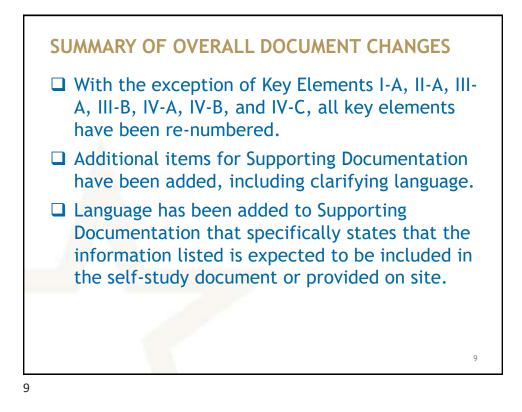
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CCNE RESOURCES

❑ Self-Study Template
❑ Executive Summary of Changes to the 2018 *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs*
❑ Crosswalk table for CCNE's 2013 and 2018 *Standards*
❑ Crosswalk table for 2018 CCNE *Standards* and the <u>revised</u> *Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force on Quality Nurse Practitioner Education, 2016) (N/A if no NP offerings)
❑ Worksheet for *Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force on Quality Nurse Practitioner Education, 2016)

http://www.aacnnursing.org/CCNE-Accreditation/Resource-Documents/CCNE-Standards-Professional-Nursing-Guidelines

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WHAT ASSISTANCE IS CCNE OFFERING TO PROGRAMS?

❑ Workshops on writing self-studies
❑ Webinars for program officials and faculty
  • https://www.aacnnursing.org/CCNE/Resource-Documents or
  • CCNE's YouTube Channel https://www.youtube.com/channel/UCCr_uAWAKTE3JnWSTiswUUA
❑ Evaluator retraining/retooling
❑ Forums at Baccalaureate, Master's and Doctoral Education Conferences
❑ Consultation with staff

REMINDER

❑ Each of the four standards is supported by a series of key elements.

❑ Each sentence and bullet point throughout each key element and elaboration statement is important and represents a requirement the program will be expected to meet.

SUMMARY OF OVERALL DOCUMENT CHANGES

❑ With the exception of Key Elements I-A, II-A, III-A, III-B, IV-A, IV-B, and IV-C, all key elements have been re-numbered.

❑ Additional items for Supporting Documentation have been added, including clarifying language.

❑ Language has been added to Supporting Documentation that specifically states that the information listed is expected to be included in the self-study document or provided on site.

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BEFORE WE CONTINUE

Please open a hard copy of the revised 2018 *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs*

OR go to:

https://www.aacnnursing.org/Portals/42/CCNE/PDF/Standards-Final-2018.pdf

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STANDARD I. PROGRAM QUALITY: MISSION AND GOVERNANCE

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program's mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.

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SUMMARY OF CHANGES: STANDARD I

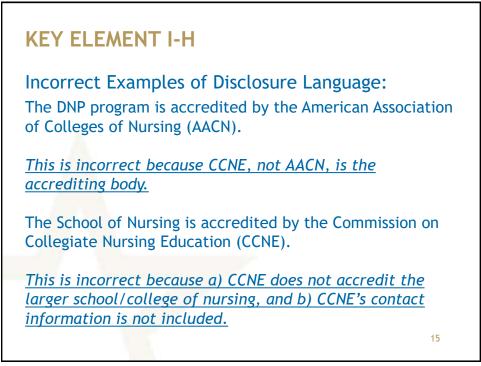| 2013 Key Element	2018 Key Element	Changes Made
Key Element I-A	Key Elements I-A and I-B	Key Element I-A was split into two key elements
Key Element I-C	Key Element I-D	Clarifies what is meant by "faculty"
Key Element I-F	Key Element I-F	Key Element I-F was previously the last key element in Standard I but has changed position within Standard I
Key Element IV-G	Key Element I-G	Moves the key element related to formal complaints from Standard IV to Standard I
Key Element I-E	Key Element I-H	Updates and re-orders the approved accreditation disclosure language

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KEY CHANGES: STANDARD I

❑ With the exception of Key Element I-A, all key elements have been re-numbered.

❑ The National Taskforce *Criteria for Evaluation of Nurse Practitioner Programs* (for NP programs only) has been updated (Key Element I-B)

❑ The term faculty has been clarified to be inclusive of different types of faculty groups (Key Element I-D)

❑ Expectations about formal complaints have been moved from Key Element IV-G to Key Element I-G

❑ Program disclosure language has been updated (Key Element I-H)

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KEY ELEMENT I-H

Correct Examples of Disclosure Language:

"The baccalaureate degree program in nursing and master's degree program in nursing at Generic State University are accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791."

"The Doctor of Nursing Practice program and post-graduate APRN certificate programs at Generic State University are accredited by the Commission on Collegiate Nursing Education (http://www.ccneaccreditation.org)."

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KEY ELEMENT I-H

Incorrect Examples of Disclosure Language:

The DNP program is accredited by the American Association of Colleges of Nursing (AACN).

This is incorrect because CCNE, not AACN, is the accrediting body.

The School of Nursing is accredited by the Commission on Collegiate Nursing Education (CCNE).

This is incorrect because a) CCNE does not accredit the larger school/college of nursing, and b) CCNE's contact information is not included.

KEY ELEMENT I-H

Incorrect Example of Disclosure Language:

The Doctor of Nursing Practice program is accredited by the Commission on Collegiate Nursing Education (CCNE), One Dupont Circle NW, Suite 530, Washington, DC 20036, 202-887-6791.

This is incorrect because CCNE's mailing address has changed; the phone number is the same. Programs alternatively may refer to the CCNE website, which also has changed.
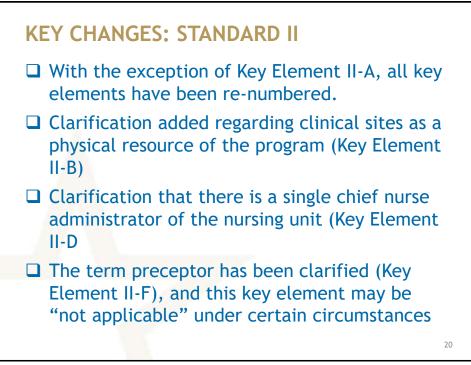
STANDARD II. PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty and staff, as resources of the program, enable the achievement of the mission, goals, and expected program outcomes.

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SUMMARY OF CHANGES: STANDARD II

2013 Key Element	2018 Key Element	Changes Made
Key Element II-A	Key Elements II-A and II-B	Key Element II-A was split into two key elements
--	Key Element II-B	Clarifies that programs are responsible for ensuring adequate and appropriate clinical sites
Key Element II-B	Key Element II-C	Simplified and streamlined
Key Element II-C	Key Element II-D	• Clarifies that a single chief nurse administrator is required • Clarifies the educational requirements of the chief nurse administrator

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SUMMARY OF CHANGES: STANDARD II

2013 Key Element	2018 Key Element	Changes Made
Key Element II-D	Key Element II-E	Clarifies faculty and faculty workload definitions
Key Element II-E	Key Element II-F	Clarifies the term "preceptor" and adds the option of "not applicable"
Key Element II-F	Key Element II-G	Modified to be consistent with other key elements related to faculty

KEY CHANGES: STANDARD II

❑ With the exception of Key Element II-A, all key elements have been re-numbered.

❑ Clarification added regarding clinical sites as a physical resource of the program (Key Element II-B)

❑ Clarification that there is a single chief nurse administrator of the nursing unit (Key Element II-D

❑ The term preceptor has been clarified (Key Element II-F), and this key element may be "not applicable" under certain circumstances

STANDARD III. PROGRAM QUALITY: CURRICULUM AND TEACHING-LEARNING PRACTICES

The curriculum is developed in accordance with the program's mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.
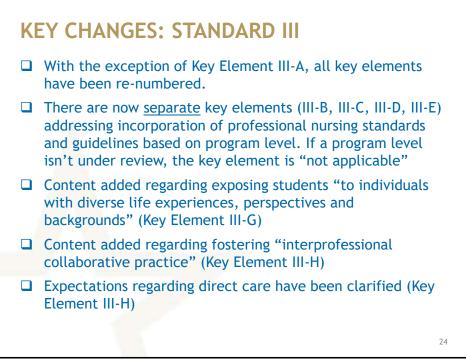
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SUMMARY OF CHANGES: STANDARD III

2013 Key Element	2018 Key Element	Changes Made
Key Element III-A	Key Element III-A	Adds "community of interest"
Key Element III-B	Key Elements III-B, III-C, III-D, and III-E	Unbundles the curricular key elements for each program level.
Key Element III-C	Key Element III-F	Clarifies requirement of incorporating the *Master's Essentials* in a post-baccalaureate DNP program that awards a master's degree
Key Elements III-D and III-F	Key Element III-G	Combines the two key elements related to teaching-learning practices into one

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SUMMARY OF CHANGES: STANDARD III

2013 Key Element	2018 Key Element	Changes Made
--	Key Element III-G	Includes a statement regarding diversity
Key Element III-E	Key Element III-H	• Includes interprofessional collaborative practice • Clarifies requirements for program tracks that prepare students for a direct-care role

KEY CHANGES: STANDARD III

❑ With the exception of Key Element III-A, all key elements have been re-numbered.

❑ There are now separate key elements (III-B, III-C, III-D, III-E) addressing incorporation of professional nursing standards and guidelines based on program level. If a program level isn't under review, the key element is "not applicable"

❑ Content added regarding exposing students "to individuals with diverse life experiences, perspectives and backgrounds" (Key Element III-G)

❑ Content added regarding fostering "interprofessional collaborative practice" (Key Element III-H)

❑ Expectations regarding direct care have been clarified (Key Element III-H)
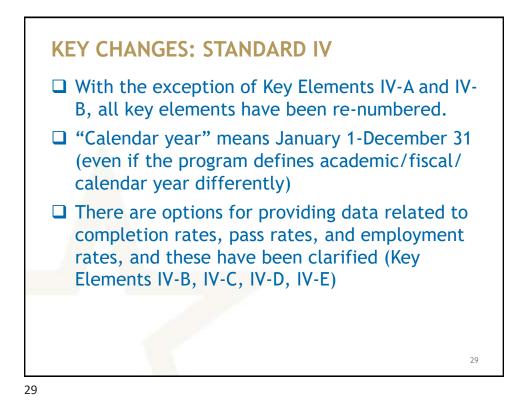
STANDARD IV. PROGRAM EFFECTIVENESS: ASSESSMENT AND ACHIEVEMENT OF PROGRAM OUTCOMES
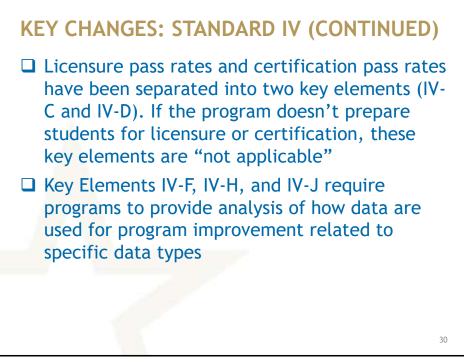
The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.
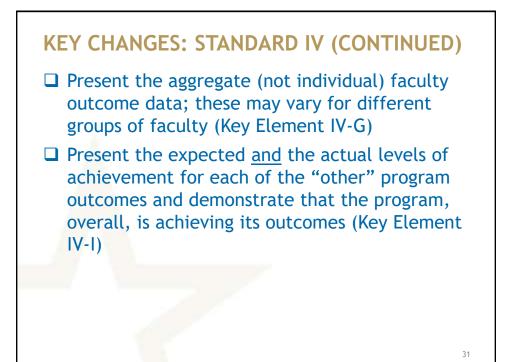
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SUMMARY OF CHANGES: STANDARD IV

2013 Key Element	2018 Key Element	Changes Made
Key Element IV-A	Key Element IV-A	Defines "program" as "baccalaureate, master's, DNP, and post-graduate APRN certificate"
Key Element IV-B	Key Element IV-B	• Re-organized to more clearly delineate options for demonstrating compliance • More specifically states how the completion rate should be reported
Key Element IV-C	Key Elements IV-C and IV-D	Key Element IV-C has been split into two key elements: Key Element IV-C (licensure pass rates) and Key Element IV-D (certification pass rates)

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SUMMARY OF CHANGES: STANDARD IV

2013 Key Element	2018 Key Element	Changes Made
Key Element IV-C	Key Elements IV-C and IV-D	• Re-organized to more clearly delineate options for demonstrating compliance • Provides further guidance on counting repeat takers
--	Key Element IV-D	Provides option to combine certification pass rate data if multiple exams relate to same role and population focus (e.g., FNP)
Key Element IV-D	Key Element IV-E	Clarifies that employment rate data need to be collected within 12 months of program completion/ graduation (not at time of admission)
Key Element IV-H	Key Element IV-F	Speaks to how completion, licensure, certification, and employment data are used for program improvement 27

SUMMARY OF CHANGES: STANDARD IV

2013 Key Element	2018 Key Element	Changes Made
Key Element IV-F	Key Element IV-G	Requests only aggregate faculty outcome data (not individual)
Key Element IV-H	Key Element IV-H	Speaks to how aggregate faculty outcome data are used for program improvement
Key Element IV-E	Key Element IV-I	Clarifies requirement to compare *expected* outcomes to *actual* outcomes
Key Element IV-H	Key Element IV-J	Speaks to how other program outcome data are used for program improvement

KEY CHANGES: STANDARD IV

❑ With the exception of Key Elements IV-A and IV-B, all key elements have been re-numbered.

❑ "Calendar year" means January 1-December 31 (even if the program defines academic/fiscal/calendar year differently)

❑ There are options for providing data related to completion rates, pass rates, and employment rates, and these have been clarified (Key Elements IV-B, IV-C, IV-D, IV-E)

KEY CHANGES: STANDARD IV (CONTINUED)

❑ Licensure pass rates and certification pass rates have been separated into two key elements (IV-C and IV-D). If the program doesn't prepare students for licensure or certification, these key elements are "not applicable"

❑ Key Elements IV-F, IV-H, and IV-J require programs to provide analysis of how data are used for program improvement related to specific data types

KEY CHANGES: STANDARD IV (CONTINUED)

❑ Present the aggregate (not individual) faculty outcome data; these may vary for different groups of faculty (Key Element IV-G)

❑ Present the expected <u>and</u> the actual levels of achievement for each of the "other" program outcomes and demonstrate that the program, overall, is achieving its outcomes (Key Element IV-I)

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