



Preparing for CCNE Accreditation & Tips on Reporting Data: Commonly Asked Questions

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Presenter

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BEFORE WE GET STARTED: A FEW FACTS ABOUT CCNE

CCNE currently accredits 1,692 nursing programs at 786 institutions.

Education programs

- 755 baccalaureate degree nursing programs
- 478 master's degree nursing programs
- 264 Doctor of Nursing Practice (DNP) programs
- 168 post-graduate APRN certificate programs

Residency programs

- 27 entry-to-practice nurse residency programs

CCNE will conduct

- 75 on-site evaluations in Spring 2018
- 95 on-site evaluations in Fall 2018
- 77 on-site evaluations in Spring 2019

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Objectives

- To become knowledgeable about the processes related to initial or continuing CCNE accreditation, including timelines and the decision-making process
- To become familiar with CCNE's expectations for demonstrating program effectiveness
- To enhance understanding of how to collect and present program, student, and faculty outcome data

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Preparing for CCNE Accreditation

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PREPARING FOR CCNE ACCREDITATION & TIPS FOR REPORTING DATA

Today we are going to:

- start at the beginning
- use commonly asked questions to de-mystify the accreditation process
- offer easy-to-remember guidance
- provide examples

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COMMONLY ASKED QUESTIONS

- ❑ We are starting a new master's degree program. What is the process for getting it accredited?

If your institution already has a CCNE-accredited program, the chief nurse administrator needs to submit a letter of intent and the new program fee.

The letter of intent needs to be signed by the chief nurse and:

- invite CCNE to initiate the accreditation process
- include the date the program began enrolling students
- specify the term (spring or fall) and year the program wishes to host the on-site evaluation

The process is slightly different if your institution does not currently have an affiliation with CCNE. For more information about the new applicant process, please refer to:

<http://www.aacnnursing.org/CCNE-Accreditation/Resources-for/Education-Administrators/Baccalaureate-Graduate-Nursing-Programs-Application-Process>

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COMMONLY ASKED QUESTIONS

- ❑ Our master's degree program in nursing is already accredited and received initial accreditation in Spring 2016. It received the maximum 5-year term of accreditation. When will we be notified of the dates of our next on-site evaluation for continuing accreditation?

The chief nurse administrator will:

- receive an email from the CCNE Online Community approximately 12-18 months prior to the on-site evaluation
- log in to the CCNE Online Community to choose dates
- update the program's profile information

- ❑ Once a program shares its date preferences, when will CCNE notify the program of the actual dates of the on-site evaluation?

Dates are confirmed as soon as the program logs in to the CCNE Online Community and chooses a date

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COMMONLY ASKED QUESTIONS

❑ Does CCNE offer any consultative services or workshops to assist in preparing for the on-site evaluation?

- CCNE staff are available to respond to questions regarding the accreditation standards and the accreditation procedures
- AACN maintains a directory of individuals who have self-identified as consultants and makes this information available to its members
- CCNE offers a Workshop on Writing Self-Studies twice per year:
 - the Friday prior to the AACN Fall and Spring meetings in Washington DC
 - by invitation only for those institutions that are hosting an on-site evaluation in the coming 12 months.
 - current cost is \$99, including all materials, breakfast, and lunch
 - may send 1-2 individuals.

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COMMONLY ASKED QUESTIONS

❑ Does CCNE have any materials to assist programs engaged in the accreditation process?

Guidance documents are available at <http://www.aacnnursing.org/CCNE-Accreditation/Resource-Documents/Program-Resources> and in the CCNE Online Community (www.ccnecommunity.org), including:

- General Advice for Hosting an On-Site Evaluation
- Checklist for Organizing the On-Site Evaluation
- Overview of the CCNE Accreditation Process

CCNE periodically offers webinars, which are archived at <http://www.aacnnursing.org/CCNE/Resource-Documents>.

Examples include:

- Understanding Standard IV & the Collection and Reporting of Key Data
- A Dialogue about Expectations for Clinical Practice Experiences
- ABCs for New Chief Administrators and Faculty

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COMMONLY ASKED QUESTIONS

- ❑ Team composition: When is the program notified of the members of the team? How big is the team?
 - CCNE starts forming teams approximately 6 months in advance of the accreditation term
 - programs generally receive information 3-4 months prior to the on-site evaluation
 - teams range in size from 3-5 trained evaluators
- ❑ What is the process for forming the team and notifying the program about the evaluation team?
 - CCNE screens evaluators for conflicts of interest
 - complex array of factors are taken into consideration
 - chief nurse is invited to review the proposed team to confirm there are no conflicts of interest
 - team is finalized

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COMMONLY ASKED QUESTIONS

- ❑ What is the cost of the on-site evaluation? When will the program receive an invoice?
 - flat fee of \$1750 per on-site evaluator
 - invoices are sent 6-8 weeks prior to the beginning of the accreditation term
- ❑ How long is the actual on-site evaluation?
 - team is on site for three days
 - evaluation generally lasts 2 ½ days
 - exit interview generally occurs mid-day to early afternoon on the last day

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COMMONLY ASKED QUESTIONS

❑ How does a program submit its self-study document and other required documents? How many copies are required?

- all required documents (self-study document, program information form, agenda, and verification of third party comment process) are uploaded to the CCNE Online Community
- all required documents are due to CCNE six weeks prior to the first day of the on-site evaluation
- program only submits required documents to CCNE electronically
- team accesses all required documents via the CCNE Online Community
- team may request hard copies of the self-study document and appendices

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COMMONLY ASKED QUESTIONS

❑ What is the process for third-party comments? Does CCNE provide guidance?

- approximately two months prior to the on-site evaluation, the chief nurse administrator receives instructions from CCNE
- program(s) must notify the community of interest that it is engaged in the accreditation process
- program(s) must notify the community of interest of the opportunity to provide comments directly to CCNE
- program uploads verification of its adherence to the third-party comment process to the CCNE Online Community six weeks prior to the on-site evaluation
- comments received are shared only with the team

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COMMONLY ASKED QUESTIONS

❑ What can a program expect at the exit interview? Who should be present at the exit interview?

- attendees are at the discretion of the chief nurse administrator
- team presents its findings verbally
- team makes an assessment regarding compliance with each standard and key element
- team does not form an accreditation recommendation
- team submits a written report of its findings to CCNE

❑ Does the program receive a copy of the team report?

- yes, after the team report is reviewed and edited by CCNE staff
- final team report is uploaded to the CCNE Online Community and the chief nurse administrator is notified of its availability

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COMMONLY ASKED QUESTIONS

❑ Can the program comment on the team report? What kind of comments are acceptable? Can the program submit additional information?

All programs are required to provide a written response within 15 days of receiving the team report. The program response may include:

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

The program response is appended to the team report and provided to the Accreditation Review Committee (ARC) and the Board of Commissioners. The team report is not amended.

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COMMONLY ASKED QUESTIONS

☐ Who comprises the ARC? What is the role of the ARC in the accreditation process?

- ARC is appointed by the Chair of the CCNE Board of Commissioners
- composed of 18 members
- ARC is responsible for reviewing the self-study document, program information form, team report, and program response to the team report
- ARC provides a confidential recommendation regarding accreditation to the CCNE Board of Commissioners

☐ When does the ARC meet? Can a program participate in the ARC meeting?

- twice per year, generally in March and July/August
- there is no expectation that a program participates
- if a program chooses to participate, officials are invited to provide additional information, offer clarification, and respond to questions by the committee

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COMMONLY ASKED QUESTIONS

☐ When does the Board meet?

- twice per year, generally in April/May and September/October

☐ When is the program notified of the Board's decision?

- programs that host an on-site evaluation in the fall are reviewed by the Board in the spring, and programs that host an on-site evaluation in the spring are reviewed by the Board in the fall
- programs are notified in writing within 30 days of the last day of the Board's decision-making meeting. No notification is provided via email or phone

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Tips on Reporting Data (Standard IV)

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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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STANDARD IV - SETTING THE STAGE

All programs must have a systematic process to determine program effectiveness (Key Element IV-A).

The purpose of the systematic process is to identify, collect, and analyze data to assess achievement of program outcomes.

Program outcomes are composed of:

- student outcomes
- faculty outcomes
- other outcomes

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COMMONLY ASKED QUESTIONS: KEY ELEMENT IV-A

☐ Should the systematic evaluation process be based on the CCNE Standards for Accreditation?

- **This is not required.** Some programs choose to align their systematic evaluation process with the CCNE standards for accreditation, others do not. This is up to the program.

☐ What is meant by “outcomes”?

- The CCNE Standards for Accreditation defines outcomes as “indicators of achievement that may be quantitative or qualitative, broad or detailed.”

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STANDARD IV - MAKE A NOTE

Outcomes are indicators of achievement and should be:

- specific
- measureable

Example of specific and measureable outcome:

Alumni from the master's degree program in nursing will express satisfaction with overall program effectiveness and in meeting expected student learning outcomes at 80% or higher on the alumni survey.

Example of an outcome that is not specific and measureable:

Upon graduation, students will be better citizens of the world.

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STANDARD IV - MAKE A NOTE

To analyze and use data for program improvement, all outcomes must have an:

- expected level of achievement - statements of *desired* and *predetermined* levels of student, faculty, and program achievement
- actual level of achievement - results describing real student, faculty, and program achievement

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STANDARD IV - MAKE A NOTE

CCNE has set the expected levels of achievement (rates) for Key Elements IV-B, IV-C, and IV-D. These expected levels of achievement are noted in each elaboration statement.

Expected levels of achievement:

- Key Element IV-B = 70% (completion rates)
- Key Element IV-C = 80% (pass rates)
- Key Element IV-D = 70% (employment rates)

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STANDARD IV - MAKE A NOTE

- Program completion and employment data must be provided for the entire degree/certificate program under review (Key Elements IV-B and IV-D)
- Licensure pass rate data must be provided for each campus/site and track under review (Key Element IV-C)
- Certification pass rate data must be provided for each certification exam **for which the program prepares graduates** (Key Element IV-C)

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STANDARD IV - MAKE A NOTE

For CCNE purposes, “completer” refers to:

- any student who has *graduated* from a nursing degree program or *completed* a post-graduate APRN certificate program.

For CCNE’s purposes, “completion rate” means:

- those who have *completed* the post-graduate APRN certificate program (if under review); and
- those who have *graduated* from the nursing degree program under review

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STANDARD IV - MAKE A NOTE

“Not applicable” is **only** used when:

- there have been **no completers (graduates)** for the **overall** degree or certificate program (Key Elements IV-B, IV-C, and IV-D)
- the program does **not** prepare individuals to take certification exams (Key Element IV-C)

If there is **one completer (graduate) from any track**, the key element is **APPLICABLE** and must be addressed.

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COMMONLY ASKED QUESTIONS: KEY ELEMENT IV-B and IV-C

- ❑ Are completion and graduation rates the same? What formula does CCNE require? (Key Element IV-B)
 - “completion” and “graduation” are used interchangeably in the CCNE standards
 - no formula for program completion is prescribed
- ❑ It can be challenging to obtain licensure/certification pass rate data. Suggestions? (Key Element IV-C)
 - state boards of nursing or certifying bodies
 - other sources (e.g., students self-report)

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COMMONLY ASKED QUESTIONS: KEY ELEMENTS IV-B AND IV-C

- ❑ Can a program meet the completion or pass rate using any of the examples provided in the elaboration statement, or does the program need to meet the completion or pass rate for each example provided? (Key Elements IV-B and IV-C)
 - program must meet expected level of achievement using **one** of the methods described in the elaboration statement
- ❑ If the program **prepares** students to take an exam, but the exam isn't required for practice, does the program still need to provide the exam pass rate data? (Key Element IV-C)
 - yes

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COMMONLY ASKED QUESTIONS: KEY ELEMENT IV-D

- ❑ Do students need to be employed in nursing and/or the specific role for which they have been prepared? (Key Element IV-D)
 - no
- ❑ If the program states that it requires students to be employed at the time of admission, does the program still need to collect employment data within 12 months of graduation? (Key Element IV-D)
 - yes, data must be collected within 12 months of graduation

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GUIDELINES FOR ASSESSMENT OF STUDENT ACHIEVEMENT

For examples of completion (IV-B), licensure (IV-C), certification (IV-C), and employment (IV-D) rates that meet or do not meet CCNE's expectations, refer to the *Guidelines for Assessment of Student Achievement*:

<http://www.aacnnursing.org/Portals/42/CCNE/PDF/Guidelines-for-Assessing-Student-Achievement.pdf>

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EXAMPLES OF OTHER PROGRAM OUTCOMES: KEY ELEMENT IV-E

- Student/alumni/employer surveys will reflect a score of at least 3 on a 4-point Likert scale.
- 25% of master's students will participate in service learning.
- On exit surveys, 50% of master's students will report an intent to seek a doctoral degree within 5 years.
- The alumni survey documents that 50% of graduates have served in at least one professional leadership role after graduation.

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EXAMPLES OF FACULTY OUTCOMES: KEY ELEMENT IV-F

- At least 90% of the faculty will engage in a professional development activity related to their teaching assignments.
- The amount of revenue generated through faculty practice will increase by 3% over the prior year.
- The amount of grant funding for the school of nursing will increase by 10% over the prior year.
- 75% of faculty will serve on a college or university level committee.

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COMMONLY ASKED QUESTIONS: KEY ELEMENTS IV-E AND IV-F

- ❑ What are aggregate outcomes? (Key Elements IV-E and IV-F)
 - refers to the total outcome for the whole group (e.g., faculty, students) for each identified expectation
- ❑ Do aggregate faculty outcomes need to be presented when there is a small number of faculty (e.g., 5 or fewer faculty)? (Key Element IV-F)
 - yes, aggregate faculty outcomes must be presented regardless of the number of faculty

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COMMONLY ASKED QUESTIONS: KEY ELEMENT IV-H

- ❑ How are the expectations in Key Element IV-H different from those in Key Elements IV-B, IV-C, IV-D, IV-E, and IV-G?
 - Key Element IV-H requires the program to provide an analysis of the collected data from Key Elements IV-B, IV-C, IV-D, IV-E and IV-G
 - Key Element IV-H requires the program to provide a description and examples of how the collected data from Key Elements IV-B, IV-C, IV-D, IV-E and IV-G are used for program improvement

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RESOURCES

- *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs (2013)*
(<http://www.aacnnursing.org/Portals/42/CCNE/PDF/Standards-Amended-2013.pdf?ver=2017-06-28-141019-360>)
- *Supplemental Resource to the Standards for Accreditation of Baccalaureate and Graduate Nursing Programs (September 2017)*
(<http://www.aacnnursing.org/Portals/42/CCNE/PDF/Supplemental-Resource.pdf>)
- *Guidelines for Assessment of Student Achievement*
(<http://www.aacnnursing.org/Portals/42/CCNE/PDF/Guidelines-for-Assessing-Student-Achievement.pdf>)

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