

General Advice for Hosting a CCNE On-Site Evaluation

The Commission on Collegiate Nursing Education (CCNE) is committed to conducting collegial and rigorous on-site evaluations of entry-to-practice nurse residency programs that contribute to the continuous quality improvement of the programs at your institution. CCNE has developed this document to provide advice and guidance for: developing the self-study document, establishing the virtual resource room, and hosting the on-site evaluation. It is the responsibility of the chief nursing officer/chief nurse executive to ensure the accuracy and timeliness of all submissions to CCNE, including the accuracy of profile information presented in the CCNE Online Community.

The Self-Study Document

The self-study process is an opportunity for the entry-to-practice nurse residency program to engage in an in-depth evaluative process leading to the continuous quality improvement of the entry-to-practice nurse residency program(s) under review for accreditation by CCNE. This programmatic analysis should result in a self-study document that clearly articulates the program's compliance with CCNE's accreditation standards. The self-study document is the product of the self-study process and addresses program compliance with each of the four standards and the associated key elements.

The CCNE accreditation standards include a Glossary and provide a list of supporting documentation for each standard to assist program representatives in developing self-study materials and in preparing for the on-site evaluation.

Whether a healthcare organization is hosting an on-site evaluation for one or more entry-to-practice nurse residency programs (employee-based nurse residency program and/or federally funded traineeship nurse residency program), a single self-study document addressing all programs under review must be developed (separate self-study documents are not prepared for each program under review). To facilitate the review process, the self-study document must be organized by standard and key element. The narrative under each key element should provide an analysis of areas of program strength as well as areas for program improvement. The narrative should also include a detailed plan of action addressing any areas that the program has identified as needing improvement. Where appropriate, the narrative should include individualized information for each entry-to-practice nurse residency program under review. Institutions should use the CCNE self-study document template, which is available on the CCNE Online Community (www.ccnecommunity.org) and on the CCNE website at <https://www.aacnnursing.org/CCNE-Accreditation/What-We-Do/CCNE-Accreditation-Process> under "On-Site Evaluations."

It is particularly helpful to the evaluation team and other CCNE reviewers (e.g., committee and Board members) if the self-study document:

- includes a table of contents (including page numbers) for both the main document and the appendices;
- begins with a concise introduction of the nursing program(s) and the institutional setting;
- uses a minimum font size of 10; and
- includes tables, where appropriate. For instance, tables are particularly helpful when presenting faculty qualifications and teaching responsibilities, resident enrollment data, completion data and other outcomes data, and curricular requirements.

The self-study document must be no longer than 75 pages of narrative. **This page count does not include the introduction or the appendices.** However, the appendices should be judiciously selected and pertinent to the program's demonstration of compliance with the standards and key elements. It is appropriate for the program to reference and provide web links to documents, such as catalogs and handbooks, within the self-study document, provided that these be persistent and publicly accessible hyperlinks that will remain active at least until an accreditation action is taken by the Board of Commissioners. Additionally, care should be taken to ensure that these links are internet links and not intranet links (e.g., that may require a password to access or that are limited to internal users). While the following documents should be referenced in the self-study document, it is not necessary to include them in the appendices; instead, they should be made available to evaluators in the virtual resource room:

- current faculty CVs;
- institutional reports;
- meeting minutes;
- examples of resident work;
- copies of resident, alumni, or other constituent survey instruments; and
- summaries/analyses of survey responses.

Please note: Evaluation resource materials are to be made available in electronic form for review by the team. Please see the "Virtual Resource Room" section below and the "Evaluation Resource Materials" section of the CCNE [*Procedures for Accreditation of Entry-to-Practice Nurse Residency Programs*](#) for information regarding this expectation.

At least six weeks prior to the on-site evaluation, the program must submit, via the CCNE Online Community (www.ccnecommunity.org), an electronic copy of the self-study document (including appendices), the Program Information Form (PIF), the agenda, and verification that the program has afforded its communities of interest the opportunity to provide third-party comments. CCNE and the evaluators that have been assigned to the team have access to the electronic version of these materials via the CCNE Online Community as soon as the documents have been uploaded by the institution. Importantly, the program needs to contact each member of the team in advance of the due date to determine if any member of the team would like to receive a hard copy of the self-study document (including appendices) or other materials, and to provide these documents if requested by the due date. Please do not send hard copies of these documents to the CCNE office. The PIF, which provides an overview of the institutional setting and the entry-to-practice nurse residency program, is available both on the CCNE Online Community at www.ccnecommunity.org and on the CCNE website at <https://www.aacnnursing.org/CCNE-Accreditation/What-We-Do/CCNE-Accreditation-Process> under "On-Site Evaluations."

Note:

The self-study document must be uploaded as one document/file (including appendices). If the program prefers to keep the documents separate, one zip or compressed folder may be uploaded. Documents within this zipped or compressed folder must be clearly labeled to facilitate their review.

The Virtual Resource Room

At least 7 days prior to the CCNE on-site evaluation, the program must provide the team access to evaluation resource materials, commonly referred to as a "virtual resource room." The program shall notify the team when it has access to the virtual resource room and provide instructions to the team about how to access the information. In general, the information should include any materials referenced in the self-study document that were not included in the appendices, and any other information that provides evidence of compliance with the accreditation standards and their key elements. The resources and documents in the virtual resource room should be organized to facilitate the team's assessment of the program's compliance with each accreditation standard. The information in the virtual resource room shall remain accessible to the team until the on-site evaluation concludes.

It is helpful for the program to organize the resource room materials by standard and key element as well as to provide an index of available materials. Programs can expect the team to review:

- samples of resident work;
- the schedule of learning sessions offered (with instructors identified) for the past three years;
- faculty CVs and teaching assignments;
- description of seminar content, clinical activities/narrative, and other learning experiences;
- personnel manuals (if not included as part of the self-study document);
- survey responses and data summaries;
- evaluation responses and data summaries from learning sessions;
- minutes of committee meetings or other meetings that document compliance with standards and key elements;
- the entry-to-practice nurse residency program budget for the current and previous two fiscal years;
- evidence that the program afforded its constituents the opportunity to send third-party comments to CCNE in advance of the review and in accordance with CCNE policy;
- a record of formal resident complaints, if any; and
- a summary of program faculty accomplishments and publications (in the aggregate, not individually by faculty member) for quick reference.

Protection of Personal Identifiable Information

The program is responsible for ensuring that no Personal Identifiable Information (PII) is included in the self-study document or other reports or information that is submitted to CCNE. Examples of PII include but are not limited to driver's license numbers, social security numbers, birth dates, and student identification numbers. Additionally, CCNE staff, on-site evaluators, and other CCNE representatives will not be expected to provide PII, including but not limited to driver's license numbers, social security numbers, birth dates, and student identification numbers, in order to carry out their roles and responsibilities, such as participating in an evaluation or review process or accessing documentation relating to a program under review.

Facilities and Support

CCNE evaluators typically arrive the day prior to the on-site evaluation and typically depart on the final day of the review. Hotel rooms (single, non-smoking) are to be reserved and guaranteed by the institution for each member of the evaluation team. However, team members are responsible for the payment of their hotel accommodations, which is then reimbursed by CCNE. It is important to provide each team member emergency (not office) contact information for a designated program representative in the unlikely event that travel plans are impacted by unforeseeable circumstances (e.g., weather, illness).

When choosing a hotel for the evaluators, please take into consideration that the team will continue its work into the evening. As such, internet access, a business center with a printer, and a meeting space that is large enough for small group work is preferable. This meeting space could be an individual hotel room/suite or a small meeting room. Individual sleeping rooms should also have a desk with appropriate lighting and internet access. CCNE recognizes that the availability of hotels, particularly in rural areas, is limited and appreciates the program's efforts to select accommodations that facilitate the work of the team.

During the on-site evaluation, it is helpful if the program can arrange for the team to have a dedicated, secure room that is large enough for the entire team to leave its belongings, review materials, and meet in executive session. Additionally, while most evaluators travel with their own laptops, it is possible that an evaluator may ask to use a computer for the duration of the on-site evaluation. As a courtesy, such equipment requests should be made in advance through the team leader.

Please be sure that appropriate personnel are available during the on-site evaluation to assist the team with technical or other issues that may arise and to escort them to and from appointments with various constituent

groups.

Transportation

Team members are responsible for their own travel arrangements. However, it is helpful for evaluators to receive information about traveling to and from the airport and hotel. For instance, if the hotel provides complimentary van service to and from the airport, please inform team members of the availability of that service.

The program is responsible for advising the team about transportation between the hotel and the institution (e.g., university/hospital vanpool, taxi companies, Uber/Lyft). If the program is providing the transportation, please provide the team leader with specific details about who will meet the team, when, and where. Keep in mind that due to varying departure schedules, team members may need to bring and store their luggage on site on the final day of the evaluation.

The Agenda

The program has primary responsibility for preparing the agenda for the on-site evaluation. When developing the agenda, please take the following into consideration:

- schedule constituent meetings in approximately one-hour blocks unless a shorter or longer meeting is appropriate for the team to collect the information it needs;
- reserve time on the agenda for occasional breaks for the team;
- set aside time for the team to review the materials in the virtual resource room without disruption;
- schedule a meeting with a program administrator at the end of each of the first two days to discuss any questions the team may have or to respond to requests for additional materials;
- allow time in the schedule to transport the team between campuses, clinical sites, and/or teaching sites; and
- reserve the last day of the evaluation for the team to conclude its review of materials in the virtual resource room, seek clarification from program representatives or constituents, finalize the accreditation report, and prepare for the exit interview.

CCNE encourages the program to involve the team leader in the development and finalization of the agenda. Once the proposed agenda has been developed, it should be shared with the team leader who may offer suggestions, ask questions, and/or request changes to the agenda. The finalized agenda, along with the complete self-study document (including appendices) and the PIF, should be uploaded to the CCNE Online Community (www.ccnecommunity.org) six weeks prior to the evaluation. If questions or concerns arise, CCNE staff are available to provide assistance.

If the program has elected to host a joint evaluation by CCNE and another regulatory or approval entity, please notify both CCNE and the team of this arrangement in writing, at least six weeks in advance of the on-site evaluation.

The on-site evaluation team will expect a tour of the program's physical facilities as well as an opportunity to observe residents engaged in classroom and clinical activities. If there are no opportunities for the team to observe residents in class, the program should make arrangements to provide the team access to these activities in advance of the evaluation (e.g., a video or opportunity to observe an online class for each program under review). If the team is to access classes remotely, the program must provide the team with all necessary access codes, passwords, specific instructions, and technology support. Refer to the section above about PII.

It is common practice for the team to meet with a variety of constituents, including residents, program faculty, alumni, nurse managers, program administrators, and institution officials. The program must ensure that sessions with the team are not recorded and that *only* members of the designated constituent group participate in the meeting. In addition, it is important that the program arranges for the team to meet with residents who

are representative of each entry-to-practice nurse residency program under review for accreditation.

The program should provide name tags for each member of the evaluation team. This helps to identify the members of the team to the program's communities of interest. It is also helpful if the program provides the team with a list of meeting participants' names, titles, and affiliations, if known in advance.

Please note that the chief nursing officer/chief nurse executive may only attend meetings that are specifically designated for program officials. Additionally, program faculty may not attend sessions that are designed for residents or alumni (even if a current program faculty member is an alumnus).

Finally, it is at the chief nursing officer's/chief nurse executive's discretion as to who will attend the exit interview. Minimally, it is expected that all members of the evaluation team and the chief nursing officer/chief nurse executive participate in the exit interview.

Dining

As members of the team have limited access to transportation and are unfamiliar with the geographic area, it is helpful to provide the team with names and addresses of several area restaurants offering a variety of food options, prices, and atmospheres. It is also helpful to the team if the hotel has a restaurant on site that offers breakfast, dinner, and room service.

Working lunches are acceptable and work well if sufficient time is included in the schedule to transport the group to and from the luncheon site, *and* if the designated group is small enough to permit meaningful discussion. Meals with very large groups can be unwieldy, making it difficult for the team to interact and gather information. Additionally, receptions are not conducive to gathering information and should not be substituted for small group meetings.

Lunch on the last day of the on-site evaluation should be a working lunch limited to the team. It would be helpful if lunch is brought into the dedicated room where the team is working.

Evaluators are appreciative of the availability of refreshments (e.g., fruit, granola bars, snacks), as well as hot and cold drinks (including some caffeine-free and low-calorie choices) throughout the day.

Fees

Information regarding the fees for the on-site evaluation can be found at <https://www.aacnnursing.org/Portals/42/CCNE/PDF/Fee-Structure-Nurse-Residency.pdf>.

January 2025