MEMORANDUM

February 1, 2024

To: Chief Executive Officers, CCNE-Affiliated Colleges and Universities
        Chief Nurse Administrators, CCNE-Affiliated Nursing Programs
        Chief Nursing Officers/Chief Nurse Executives, CCNE-Affiliated Nurse
        Residency/Fellowship Programs
        Nurse Residency/Fellowship Program Coordinators, CCNE-Affiliated Nurse
        Residency/Fellowship Programs
        CCNE On-Site Evaluators
        Accrediting Agencies
        Selected Federal Agencies
        National Nursing Organizations
        State Boards of Nursing
        Statewide Higher Education Agencies
        Other Interested Parties

From: Anne Hirsch, PhD, ARNP, FAANP, FAAN, Co-chair, CCNE Standards Committee
        Pamela B. Simmons, PhD, APRN (ret.), FNP-BC, CNE, Co-chair, CCNE Standards Committee

Re: Final Call for Comments on Proposed CCNE *Standards for Accreditation of
        Baccalaureate and Graduate Nursing Programs*

Over the past year, the Commission on Collegiate Nursing Education (CCNE), a
nationally recognized nursing accrediting agency, has undertaken a comprehensive
review of its *Standards for Accreditation of Baccalaureate and Graduate Nursing
Programs* (2018), which apply to baccalaureate and master's degree programs in
nursing, Doctor of Nursing Practice (DNP) programs, and post-graduate APRN certificate
programs. To conduct this work, the CCNE Board of Commissioners appointed a
Standards Committee to review the current standards and to solicit feedback from
CCNE's communities of interest.

The Standards Committee and Board of Commissioners have reviewed the 2018
Standards and the feedback provided by chief nurse administrators, faculty, students,
practicing nurses, employers of nurses, state agencies, various professional nursing
organizations, and other interested parties. Please note that all comments submitted
previously have already been considered by CCNE; there is no need to resubmit
comments.

CCNE is now releasing the latest version of its proposed *Standards for Accreditation of
Baccalaureate and Graduate Nursing Programs* for public comment and is requesting
feedback from its constituents. At this time, CCNE is especially interested in receiving
comments about the latest proposed changes, summarized below in red text, which
have been made based on feedback CCNE received during the most recent (October 26-
December 8, 2023) Call for Comments period.

**Please email comments about the proposed *Standards* to
ccnestandards@ccneaccreditation.org by the February 22, 2024 deadline.** Please be
specific in offering your comments, including specific language you would like to see
incorporated, deleted, or amended, along with the rationale.

**Below is a summary of the most substantive changes that are proposed to the
Standards (latest revisions shown in red text):**

- Added language in Standard I regarding policies and publications related to
  clinical requirements and placements (Standard I, Key Elements I-F and I-H).

- Changes in Standards I and III regarding required professional nursing standards and guidelines, including:
    - Removal of references to the "old" AACN *Essentials*, and incorporation of three components (the 10 "Domains for Nursing," the 8 "Concepts for Nursing Practice," and the 45 "Competencies") from *The Essentials: Core Competencies for Professional Nursing Education* (AACN, 2021).
    - Removal of references to the 2016 *Criteria for Evaluation of Nurse Practitioner Programs* [National Task Force on Quality Nurse Practitioner Education (NTF)] and an updated footnote reference to the 2022 *Standards for Quality Nurse Practitioner Education* (NTF) and a note about its endorsement by 18 organizations in the Glossary.
- Creation of two distinct key elements in Standard II related to physical resources and clinical sites; these were previously combined in one key element (Standard II, Key Elements II-B and II-C).
- Clarification of and added flexibility with regard to requirements for academic and experiential preparation of faculty teaching in the nursing program (Standard II, Key Element II-F).
- Added language regarding a recommended 1:8 faculty-to-student ratio for indirect faculty supervision in nurse practitioner tracks (Standard II, Key Element II-F).
- Added language regarding appropriate "exceptions" related to certification and qualifications of faculty who oversee APRN tracks (Standard II, Key Element II-F).
- Expanded option to include nurse educator tracks in DNP programs, and clarification that DNP programs that have a direct care focus but are not APRN education programs incorporate graduate-level content addressing the APRN core (Standard III, Key Element III-D).
- Separation of key elements in Standard III related to teaching-learning practices and preparation of students to provide care to diverse individuals and populations (Standard III, Key Elements III-G and III-H).
- Separation of key elements in Standard III related to clinical practice experiences and planned experiences that foster interprofessional collaborative practice (Standard III, Key Elements III-I and III-J).
- Clarification regarding required direct care experiences for programs offering tracks with a direct care focus (Standard III, Key Element III-I).
- Specified minimum number of practice hours for students in DNP programs and minimum direct patient care clinical hours for students in nurse practitioner tracks (master's and DNP) (Standard III, Key Element III-I). Specifically:
    - DNP programs require a minimum of 1,000 hours of practice post-baccalaureate as part of a supervised academic program; this is consistent with *current* CCNE expectations.
    - Programs preparing individuals for nurse practitioner certification provide a minimum of 500 direct patient care clinical hours (included in the 1,000 practice hours noted above); this is consistent with *current* CCNE expectations.
- Added content about expectations for clinical practice experiences and requirements for programs that prepare students for certification (Standard III, Key Element III-I).
- Clarification that the key element is applicable to programs that prepare individuals for the NCLEX-RN® or other nursing licensure examination (Standard IV, Key Element IV-C).
- Added flexibility allowing a program to exclude test takers who took the licensure examination more than two years after program completion (Standard IV, Key Element IV-C).

- Added flexibility allowing a program to exclude test takers who took the certification examination more than two years after program completion (Standard IV, Key Element IV-D).
- An increase in CCNE's expected level of achievement for employment rates from 70% to 80% (Standard IV, Key Element IV-E).

As part of its review of the proposed *Standards*, the CCNE Board affirmed that CCNE will:

- Continue to accredit nursing programs at the baccalaureate, master's, DNP, and post-graduate APRN certificate levels, acknowledging and respecting the autonomy of institutions within its community of interest and the diversity of nursing programs and their respective missions.
- Continue to accredit APRN programs offered at the master's and DNP levels.
- Continue to accredit nursing programs that offer nurse educator tracks.

The proposed *Standards* (both a clean version and a tracked version showing all proposed revisions to CCNE's 2018 *Standards*) can be accessed on the CCNE website at https://www.aacnnursing.org/ccne-accreditation/2018-standards.

Final approval of the accreditation standards rests with the CCNE Board of Commissioners. The membership of the Board is accessible at https://www.aacnnursing.org/CCNE-Accreditation/Who-We-Are/Board-of-Commissioners.

The CCNE Standards Committee looks forward to receiving and considering your comments in this final stage of the revision process. If you have any questions about the standards revision process, please contact Dr. Daniel Michalski, CCNE Director of Accreditation Services, at 202-887-6791 x253 or dmichalski@ccneaccreditation.org.

Thank you.