

**National Nurse Practitioner
Residency and Fellowship Training
Consortium Accreditation
Preparation
2016-2017 Self-Study Guide**

NNPRFTC Office of Program Consultation and Accreditation
3509 Connecticut Avenue, NW
Washington, DC 20008
Phone: 202.780.9651

www.nppostgradtraining.com

INTRODUCTION

Self-study and assessment is an essential part of the process of becoming accredited as a postgraduate training program. The NNPRFTC has developed this framework for organizations considering accreditation to guide you in this process and prepare you for a successful outcome to your accreditation application.

Throughout the instructions you will find that various kinds of data, documents, and materials are required in your self-study, and this may provide you with an opportunity to develop new material that you had not previously had for your program.

During the accreditation process, your self-study will provide the NNPRFTC staff and accreditation committee members with the information needed to ensure that your program is meeting all requirements that can be assessed prior to an on site visit, so that the on site visit can be effectively used for the in person elements of meetings with programs staff, trainees, and site/practice assessment.

ACKNOWLEDGEMENTS

The self-study guide, including the process for performing a self-study and this document, was developed by an expert workgroup of NPs, members of the NNPRFTC, and experts in the field of postgraduate training and education for healthcare professionals. It reflects the standards for accreditation of postgraduate residency and fellowship programs for NPs which have been approved by the NNPRFTC Board of Directors. The NNPRFTC recognizes and appreciates the body of work that has been developed by many disciplines in the area of postgraduate training, and acknowledges the contribution of these disciplines to the development of this self-study guide.

POSTGRADUATE TRAINING PROGRAM SCOPE

The scope of accreditation includes postgraduate (master's degree in nursing or doctor of nursing practice) training programs that provide a minimum of one year of structured, intensive education and training in the service delivery setting that support the transition from the academic program and novice practitioner to clinical practice at the advanced level as a nurse practitioner in primary care or specialty areas.

SELF-STUDY PROCESS

The accreditation self-study process is primarily intended to provide your program an opportunity to systematically review, describe, and evaluate its education and training model and outcomes. The self-study also functions as a program evaluation, by providing the NNPRFTC and assigned site visitors an opportunity to assess the degree to which your program's model and outcomes are consistent with the requirements of accreditation.

Each program is unique, and yet conforms to an emerging model of postgraduate training for NPs. The self-study is expected to reflect accurately both the unique aspects of your program's education and training model as well as the appropriateness of the model to the goals of postgraduate training for NPs in ways that meet the current and emerging health care needs of society. The combination of the self-study, the on-site visit, and the review by the Accreditation

Committee of the NNPRFTC are all essential activities aimed at evaluating your program's model, its components, and the degree to which they meet the standards developed by the NNPRFTC consortium for accreditation. The self-study represents a comprehensive evaluation of the program in preparation for an accreditation review. The self-study benefits from information generated by the ongoing regular assessment of the program. The NNPRFTC suggests the following process as a helpful approach to organizing regular program assessments.

(NOTE: if this is the first time your program is conducting a self-study for accreditation, please review the information that must be submitted for accreditation (below beginning on Page 6). In addition, you may wish to use the process for program assessment as an approach for creating your self-study.)

Eight Step Process for Regular Program Assessment¹

The suggested eight-step sequence described here is intended to offer guidance to programs conducting their formal program assessment. The program assessment is an objective, comprehensive evaluation of the training program, with the aim of improving it. Underlying the assessment is a longitudinal evaluation of the program and its learning environment, facilitated through sequential annual program evaluations that focus on the required components, with an emphasis on program strengths and "self-identified" areas for improvement ("self-identified" is used to distinguish this dimension of the program assessment from areas for improvement the Accreditation Committee of the NNPRFTC identifies during accreditation reviews). The recommended steps in the process are as follows:

1. Assemble the assessment group
2. Engage program leaders and constituents in a discussion of program aims
3. Examine opportunities and threats
4. Aggregate and analyze data to generate a longitudinal evaluation of the program's improvement
5. Obtain stakeholder input
6. Interpret the data and aggregate the assessment findings
7. Discuss the findings with stakeholders
8. Complete the program assessment document for use in further program improvement and as documentation for the program's accreditation site visit

It is not required that a program follow these steps, nor must a program conduct the steps in the order they appear above. The steps are simply offered as an outline for organizing the program's assessment. Additional detail related to each step follows below.

Step 1. Assemble the assessment group

Membership: The members of the Program Evaluation Committee (PEC) are the ideal core foundation for the self-study group. (Note: the Program Evaluation Committee is the group of people established by the program to provide ongoing evaluation of the educational experience of the postgraduate trainees.) Over time, they will be familiar with the annual program assessment process and the resulting action plans and improvement efforts. Including the program coordinator is also recommended.

¹ Adapted from the Accreditation Council on Graduate Medical Education. Accessed on 12/11/15 at www.acgme.org/acgmeweb/tabid/473/ProgramandInstitutionalAccreditation/Self-Study.aspx

Added participants: The NNPRFTC does not require additional participants in the program assessment. However, it may be beneficial to have a few individuals to offer an external perspective. Examples include a departmental leader, a rotation director, or an expert in education, curriculum design, or assessment. These individuals may be included if program leaders think their contributions would be beneficial.

Step 2. Engage program leaders and constituents in a discussion of program aims

The first task of the assessment group is a discussion of program aims. Aims are program and institutional leaders' views of key expectations for the program, and how it differentiates itself from other programs. Aims may focus on the types of trainees recruited into the program, training for particular careers, and other objectives, such as care for underserved patients, health policy or advocacy, population health, or generating new knowledge.

Program aims should generally take a longer-term strategic view, but they also may change over time, in response to factors such as local or national demand for a postgraduate trainee workforce with certain capabilities, or new opportunities to train postgraduates in a different setting.

Step 3. Examine opportunities and threats

The next step is to conduct an assessment of the program's environment. The rationale for examining opportunities for and threats facing the program is to provide context for the program assessment.

Opportunities: Opportunities are external factors that are not entirely under the control of the program, but if acted upon, will help the program flourish. Opportunities take many forms, such as access to expanded populations for ambulatory care, partnering with an academic institution, other collaborations, or availability of new clinical or educational technology through agreements with external parties.

Threats: Threats also are largely beyond the control of the program, and like opportunities, come in many forms. They could result from a change in support for education at the national level, changing priorities at the institutional or state levels, or from local factors, such as erosion of a primary ambulatory system based on voluntary faculty. The benefit of assessing program threats is that plans can be developed to mitigate their effect.

Step 4. Aggregate and analyze data to generate a longitudinal assessment of the program's improvement

A key component to the program assessment is information from successive evaluations of the program. It is recommended that a program conduct an annual program assessment to continually seek to understand the program's performance and opportunities for improvement. While there are no explicit requirements for how information from annual assessments should be aggregated, the NNPRFTC offers two suggested templates for use in this process:

- *The template for reporting key information from a single annual program assessment can be accessed by clicking on the following link*
www.acgme.org/acgmeweb/tabid/473/ProgramandInstitutionalAccreditation/Self-

[Study.aspx](#).²

- The template for aggregating action items and key information from successive assessments can be accessed by clicking on the following link www.acgme.org/acgmeweb/tabid/473/ProgramandInstitutionalAccreditation/Self-Study.aspx.³

For the data from the annual assessment, the focus is on program strengths and self-identified areas for improvement; how improvements are prioritized, selected, and implemented; and follow-up to understand whether interventions are effective. Over time, this process should focus on improvement that goes beyond compliance with requirements, with particular attention to improvements relevant to the program's aims and environmental context.

Additional data for the program assessment should relate to ongoing improvement activities and the perspectives of program stakeholders, such as results of the annual Postgraduate Trainee and Faculty surveys, and other relevant departmental or institutional data.

Step 5. Obtain stakeholder input

The data should be confirmed and augmented by information from program stakeholders (trainees, faculty members, others as relevant). For some programs, important information may include the perceptions of representatives from other specialties who interact with the trainees. To collect this information, the program may use surveys, meetings with trainees, or a retreat. Feedback from recent graduates could also provide useful data on the program's educational effectiveness.

Step 6. Interpret the data and aggregate the findings

The next step is to interpret the aggregated data from the program assessment. Specific elements of the assessment findings will include:

- establishing a working set of program aims;
- listing key program strengths;
- prioritizing among the self-identified areas for improvement to select those for active follow-up, and define the specific improvement activities;
- discussing opportunities that may enhance the program, and develop plans to take advantage of them; and,
- discussing threats identified in the self-study, and develop plans to mitigate their impact.

Step 7. Discuss the findings with stakeholders

The program assessment findings from Step 6 (above) should be shared with faculty members, trainees, and other identified stakeholders. This step should validate the findings and improvement priorities chosen by the assessment group with these key stakeholders.

Step 8. Complete the program assessment document for use in further program improvement and as documentation for the program's accreditation site visit

² Adapted from the Accreditation Council on Graduate Medical Education. Accessed on 12/11/15 at www.acgme.org/acgmeweb/tabid/473/ProgramandInstitutionalAccreditation/Self-Study.aspx

³ Ibid

The final step is for the assessment group or an individual designated by the group to complete the program assessment document.

At the time of the accreditation site visit, the program will be asked to provide a brief written update describing improvements resulting from the most recent program assessment. No information will be requested on areas identified during the program assessment that have not yet resulted in improvements.

SELF-STUDY FORMAT

The attached instructions refer to and follow the sequence of the Postgraduate Nurse Practitioner Training Program Accreditation Standards. There is a narrative component, as well as required Tables 1-4 and Appendices A-C used to summarize information. In many instances, a question can be answered concisely in the self-study document. In some instances, a question may require a more extensive or detailed response. Some answers can be given by carefully referencing your program's website, catalog, and/or handbook. You are strongly encouraged to strike a balance between being succinct and comprehensive in responding to self-study questions. Your program, the site visitors, and the Accreditation Committee are best served by descriptions that are accurate, complete, and concise. If you are unsure about what should be included, please do not hesitate to contact the NNPRFTC Office of Program Consultation and Accreditation for assistance at 202-780-9651 or accreditation@nnpostgradtraining.com.

TEMPLATE AND FORMATTING: These instructions provide you with a template to guide your self-study responses. You may choose to develop your own template, but you must follow the sequence of the headings provided in order to facilitate review of each standard criterion. Use the numbering system and a brief summary heading to identify and label each of your responses as you complete the self-study (e.g., "1.3a, Mission in external communication").

Many training programs are extensively documented. Therefore, it is appropriate to refer directly to existing program documentation (e.g., catalog, website, trainee handbook) in narrative responses to self-study items. When referring to existing program documentation, it is imperative that you append the relevant documentation and specify exactly where the requested information can be located in the appended documents (including page number of the documentation in the final self study document). Only material that is **specifically referenced** in the self-study text should be included in the appendices.

Some examples of existing program documentation useful in responding to self-study questions are:

1. Brochures, printouts of your program's website, or other informational materials describing your program's mission, training resources and processes;
2. Program manuals or training handbooks;
3. Publications listing training goals, objectives and norms for a traditional or speciality practice area as defined by its national reference group or professional training community;
4. Didactic seminar schedules, training calendars, listings of training events such as colloquia, workshops, invited lectures, grand rounds;
5. Rotation descriptions, sample training contracts, descriptions of required knowledge and practice competencies;
6. Descriptions of methods of measuring attainment of program and training goals and objectives, samples of performance-based examinations, evaluation forms and other resource, process or outcome assessment methods;
7. Blank copies of forms used in trainee, faculty, preceptor, and program evaluations;
8. Descriptions of training outcomes, e.g., data on current practice settings, research and publication, and leadership activities at the local, state, or national level;
9. Administrative policy and /or procedure manuals, program correspondence, etc.

SELF-STUDY SUBMISSION REQUIREMENTS AND REMINDERS

In addition to the instructions above, your program must follow these additional guidelines:

Physical submission:

- Applicants must provide (1) fully electronic version of the self-study.
- Applicants must complete the Application for Accreditation of Nurse Practitioner Residency and Fellowship Programs BEFORE submitting the self-study. The application can be accessed by visiting www.nnpostgradtraining.com/apply. Call or email the NNPRFTC at 202-780-9651 or email accreditation@nnpostgradtraining.com with any questions about the application or payment.
- It is required to send all documentation in electronic format as either scanned documents or links to electronic documents. Within the self-study document, it is very helpful to have some way of marking/dividing the appendices and sections so that referenced information can be easily located.

Length and formatting:

- There is no page limit. Be as concise as possible without sacrificing depth, quality, or completeness of response.
- Use no smaller than **12-point** typeface.
- The required tables (Tables 1-4 and Appendices A-C) should be attached to the end of the self-study document; please do not incorporate them within the narrative portion of the self-study.
- All pages within the document should be coherently numbered so that information can be easily referenced.
- Form fields (gray boxes for text) indicate where responses are necessary in the narrative. The gray text boxes can be deleted (i.e., your final text should not be highlighted in gray) and are only there to remind you to provide information in that spot. (NOTE: It is sometimes difficult to edit within the form fields. Thus, you may wish to replace the gray boxes with your text responses).
- Appendices should contain materials that support the self-study narrative. Only material that is referenced specifically (Appendix # and page #) within the self-study text and/or requested in these instructions should be included in the appendices.

Multiple Practice Programs Self-Study Format:

- “Multiple Practice Programs” describes a *self-study format* in which two or more postgraduate postgraduate training programs at the same institution submit a single self-study for accreditation. Each program is evaluated individually by the NNPRFTC Committee on Accreditation, and separate accreditation decisions are made for each program.

- This format may be used for two or more primary care programs at the same institution. This format may be used by two or more specialty programs at the same institution. However, this format may NOT be used for primary care and specialty care programs at the same institution.
- When two or more submit a self-study using this format, the self-study must include the following:
 - Separate Transmittal Pages for each program. On the first page, identify your program name and its traditional or specialty practice area. On the second page, make sure to list the training director for the program identified on the first page. The program director's and chief clinical director's credentials and expertise should be consistent with your program's (see Standard 7.3 and 7.4).
 - Self-study narrative sections:
 - Separate sections for Standards 2 and 3 for each program.
 - Within the other Standards, much of the information is likely to apply across programs at an institution. Thus, the information for these Standards may be submitted as a single narrative document. However, if there are differences in Standards 1 or 4-8, the self-study document must specify which information applies to each program.
 - Tables and Appendices:
 - Separate tables and appendices for each program.
- The names assigned to each program should be distinct and should clearly reference each program's identity (e.g., "Postgraduate NP Training Program XXXX," "Postgraduate NP Training Program YYYY").

Miscellaneous:

- Postgraduate Trainee Names: Nothing in the self-study requires you to provide postgraduate trainees' names. If you wish to include postgraduate trainee names, your program must reference and include clear documentation of the postgraduate trainees' written permission to do so in the Appendices. When submitting sample documents (e.g., trainee surveys, evaluation forms), please remove any name that could raise Family Educational Rights and Privacy Act (FERPA) or Health Information Portability and Accountability Act (HIPAA) issues, questions, or concerns.
- CVs: Follow the abbreviated CV format provided in these instructions, answering all questions briefly (this format is modeled after the NIH CV format). Do not exceed the 2-page limit for any CV. Do not send full vitae in addition to the abbreviated CVs; only the abbreviated CVs will be reviewed. Please double-check to make sure that a CV is included for every Faculty/Staff listed in Table 4(a). Exceptions to the CV requirement are noted in the footnotes to that table. Site visits and final decisions can be delayed because CVs are missing and/or incomplete in self-studies.

Important reminders!

- After completing your self-study, please complete and submit the checklist on the following page to ensure that your program has provided all necessary information.

- . Before submitting the final document, please double-check to make sure that:
 - All components of the self-study that need to be submitted are included, in the correct order;
 - The required *Summary Check Sheet and Table of Contents* is included, listing page numbers for all domains, tables and appendices, with pages coherently numbered throughout the entire document;
 - All numbers/data reported are consistent among the narrative, required tables, and publicly available information (e.g., on your program's website or in program brochures,);
 - References to page numbers of policies and other appendices are correct throughout the narrative and the *Summary Check Sheet and Table of Contents*;
 - Every question, item, or concern described in this document has been addressed;
 - You have included the transmittal page, signed by all parties or designee(s).

- REQUIRED CHECKLIST: This completed checklist should be included with the self-study document, immediately after the signed Transmittal Page.**

After completing your self-study, complete the checklist below to ensure that you have provided all necessary information with accurate references. Please double-check to ensure that all page numbers noted here are identical to ones provided within the self-study narrative.

NOTE: Consistent with “Accreditation process for postgraduate training for NPs, procedures for Multiple Practice Programs,” institutions or agencies submitting a single self-study need to provide **separate summaries for Standards 2 and 3** relating to each specific postgraduate residency program **and separate tables for each program**; for the remaining Standards a single self-study may be submitted, except where there are significant differences between programs. Multiple Practice Programs should specify below which sections are separated for each program, and list your program names beside those sections.

Summary Checklist and Table of Contents	
Task	Page #(s)
Transmittal pages signed by all parties	
All pages consecutively numbered including appendices	
Summary Checklist and Table of Contents	
Decision Regarding Program Type	
Standard 1 Mission, Goals, and Objectives	
Standard 2 Curriculum	
Standard 3 Evaluation	
Standard 4 Program Eligibility	
Standard 5 Administration	
Standard 6 Operations	
Standard 7 Staff	
Standard 8 Trainee Services	
Table 1	
Table 2	
Table 3	
Table 4	
Abbreviated CVs for all individuals identified in Table 4	
Appendix A	
Appendix B	
Appendix C	
Consortium Agreement signed by all members (if applicable)	
Documentation that the minimum requirements for successful completion of the training program is 12 months of full participation in trainee activities	
Other: (ADD ADDITIONAL ROWS AS NECESSARY TO INCLUDE ALL RELEVANT INFORMATION PROVIDED IN THE SELF-STUDY DOCUMENT)	

TRANSMITTAL PAGES
Postgraduate NP Training Programs:
Self-Study Report for 2016/2017
Please include all required signatures.

NOTE: If the self-study addresses multiple practice programs include separate transmittal pages for each program addressed in the self-study,

- Initial **Accreditation** Date Submitted:
OR
 Re-accreditation

Sponsoring Institution/Agency Name:

Department Name (if applicable):

Location (City/State):

Does this self-study include multiple practice programs? No Yes
If Yes, you must include separate Transmittal Pages for each program.

Program Name:

Indicate the primary care or specialty practice area of the program (*check only one below*):

Traditional practice area:

- Primary care nurse practitioner (adult, pediatrics, womens health, or family)

Specialty practice area:

- Mental or Behavioral Health

- Add as needed

Date of last Accreditation, if applicable

Number of trainees in program this year:

Number of trainees who have completed the program since inception

Has the program previously been accredited by another accrediting organization?
 No Yes

PROGRAM CONTACT INFORMATION: *The following information will be used to update our internal Office database. The individuals listed will receive copies of important program written correspondence (e.g., site visit reports, decision letters). Please add the relevant contact information for any other individuals who your program would like to receive such correspondence (e.g., co-directors, accreditation coordinator, chief clinical officer, CEO etc.). Signatures indicate that the self-study has been approved for submission and serve as an invitation to conduct a site visit to your program. If this self-study includes multiple practice programs, include separate transmittal pages for each program, and list the program director below who corresponds to the traditional or specialty program identified above.*

Program Director: _____
(Name) (Signature)

Credentials (licensure/certification to practice and earned degrees

Title:

Full Mailing Address:

Phone Number: Ext. Fax: Email Address:

Chief Clinical Officer for program: _____
(Name) (Signature)

Title:

Full Mailing Address:

Phone Number: Ext. Fax: Email Address:

Sponsoring Organization President/CEO: _____
(Name) (Signature or that of designee*)

Title:

Full Mailing Address:

Phone Number: Ext. Fax: Email Address:

*If signed by designee, provide the full name of that individual in addition to the name of the person for whom he/she signed

Self-Study for Postgraduate NP Training Program Accreditation

- ◆ The Accreditation Standards are printed below in italic font, followed by specific questions or requested information that are bolded throughout the text. Form fields (gray boxes) are provided as the place for your response to each question. It is your program's responsibility to ensure that the self-study addresses all accreditation-salient issues. Please be sure to read all introductory information and instructions before proceeding.
- ◆ As noted in these instructions, the following template is **REQUIRED**. It is not necessary to delete any text from the submitted document. Ensure that all checkboxes and form fields (gray boxes) have been completed.

Program Type

NP Postgraduate Training Programs may be called Residency or Fellowship programs. Both are programs of postgraduate clinical and didactic education and training, designed to significantly advance preparation as a provider of health care services in a specialty (including primary care) or subspecialty area. Based on the goals and focus of the program, and factors such as the emphasis on teaching and research as well as clinical education and training, the program leaders are responsible for choosing the designation of Residency or Fellowship for their program(s).

Complete the following:

- a. The label that best describes your postgraduate NP training program is (Check One):
 - Residency
 - Fellowship
- b. Provide a brief description of rationale for this designation.

Standard 1: Mission, Goals and Objectives

The mission of the postgraduate NP training program must be clear, concise, and communicate to program staff, postgraduate trainees, and stakeholders the essential components of a mission: the core purpose of the program, the reason for investment of resources and energy in creating the program, and the focus of the program which will remain over time, even while individual components and activities of the program may change. The mission statement should be reflected in the core documents of the program that guide decision making internally, and prominently featured in external communication vehicles for the benefit of potential applicants, stakeholders, and interested parties.

The mission statement gives rise to the goals of the program, which should be clearly identified. The goals of the postgraduate NP training program will provide the direction and end points to which the program strives to achieve, and may be more broad than specific.

The goals give rise to the objectives of the program which specify what the efforts, actions, content, and work of the program are intended to accomplish, and within specific time frames.

While the mission statement usually remains constant over time, it is likely and advisable that the objectives and goals will change over time as a program matures, expands, or broadens its scope. The mission, goals and objectives serve as cornerstone of a program's operation and provide the context for program evaluation.

1. Program mission

a. Insert the program mission statement here.

2. Program mission in core document

a. Provide examples of how the mission statement is reflected in core documents of the program that guide decision making internally.

3. Mission in external communication

a. Provide examples of how the mission statement is prominently featured in external communication vehicles for the benefit of potential applicants, stakeholders, and interested parties.

4. Program goals

a. Insert the goals of the program here.

5. Program objectives

a. Complete Appendix B.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other

correspondence since the last review, did the NNPRFTC Accreditation Council note any **Standard 1** issues to specifically address *“in the next self-study”*? If so, provide your response here.

- (IF CURRENTLY ACCREDITED):** In your program’s last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any other **Standard 1** issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the NNPRFTC Accreditation Council and whether the NNPRFTC Accreditation Council determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

ADDITIONAL DOCUMENTATION REMINDER FOR STANDARD 1

Include as appendices scanned versions of (or electronic links for) all public materials on your training program publicity and other program related material (brochures, letters, program manuals, handbooks, formal institutional policy and procedure memoranda, etc.).

Standard 2: Curriculum

Program Curriculum and Structure

The Program curriculum must include the following core elements:

1. *Clinical-based practice and patient care experience (examples - precepted sessions, mentored clinics, specialty clinical rotations)*
 - a) *Clinical experiences must be sufficient in depth, breadth, variety, and volume including medical conditions/diagnoses and patient demographics, to prepare the postgraduate trainee for clinical practice in the specialty of the Program*
 - b) *Program must provide structured experience in progressive responsibilities for patient management*
 - c) *For each clinical experience and/or rotation the Program will provide learning objectives to guide the postgraduate trainee achievement of competencies*
 - d) *The Program shall establish objectives for the numbers of patients by relevant factors (age, gender, major health challenges) and procedures deemed necessary to achieve the overall goals of the postgraduate NP Training Program based on the practice setting*

- a. **Complete Appendix C.**
 - b. **Describe the clinical-based practice and patient care experiences in your program's curriculum.**
 - c. **Provide examples that demonstrate the clinical experiences are sufficient in depth, breadth, variety, and volume including medical conditions/diagnoses and patient demographics, to prepare the postgraduate trainee for clinical practice in the specialty of the program.**
 - d. **Provide examples that demonstrate the program provides structured experience in progressive responsibilities for patient management.**
 - e. **Provide examples that demonstrate for each clinical experience and/or rotation the Program will provide learning objectives to guide the postgraduate trainee achievement of competencies.**
 - f. **Provide examples that demonstrate the program establishes objectives for the numbers of patients by relevant factors (age, gender, major health challenges) and procedures deemed necessary to achieve the overall goals of the postgraduate NP Training Program based on the practice setting.**
2. *Regularly scheduled didactic sessions*
 - a) *For each didactic session the Program will provide learning objectives to guide the postgraduate trainee in the mastery of didactic knowledge and its subsequent application to practice*

- a. **Complete Appendix C.**

- b. Describe the regularly scheduled didactic sessions in your program's curriculum.
- c. Provide examples that demonstrate for each didactic session the Program will provide learning objectives to guide the postgraduate trainee in the mastery of didactic knowledge and its subsequent application to practice.

3. *System-based learning and quality improvement tools that underlie effective front-line improvement in care*

- a. Complete Appendix C.
- b. Describe the system-based learning and quality improvement tools that underlie effective front-line improvement in care in your program's curriculum.

4. *Population-based health focus – (assessment of community, environmental, and socioeconomic influences on health of patients and data-driven assessment of the population of focus)*

- a. Complete Appendix C.
- b. Describe the population-based health focus in your program's curriculum.

5. *Leadership and professional development, particularly in inter-professional practice*

- a. Complete Appendix C.
- b. Describe the leadership and professional development, especially the aspects related to inter-professional practice, in your program's curriculum.

Postgraduate NP Training Program Competency Domains

The Program must integrate the following NP competency domains:

- 6. *Patient Care – Provide patient-centered care that is compassionate, valued, appropriate and effective for the treatment of health problems and the promotion of health.*
Postgraduate trainees must demonstrate competence to independently:
 - a) *Perform all screening, diagnostic assessments, and procedures that are essential for area of practice and patient population*
 - b) *Gather essential and accurate information about patients and their conditions through review of records, history-taking, physical examination, and assessment, and review of data derived from laboratory and imaging testing.*
 - c) *Organize and prioritize responsibilities to provide care that is safe, effective and efficient*
 - d) *Interpret laboratory data, imaging studies, other tests required for the area of practice*
 - e) *Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, evidence based information and clinical judgment*

- f) *Develop and carry out patient management plans*
- g) *Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making*
- h) *Provide appropriate referral of patients including ensuring continuity of care throughout transitions between providers or settings, and following up on patient progress and outcomes*
- i) *Provide health care services to patients, families, and communities aimed at preventing health problems or maintaining health*
- j) *Provide appropriate role modeling for the inter-professional team*

a. Describe the ways in which the competency Patient Care is integrated into the curriculum (e.g., how this competency is included in aspects of the curriculum such as didactics, clinical rotations, precepted clinics, other special sessions or lectures).

b. Provide examples that demonstrate postgraduate trainees are developing competence in each of the areas above by participating in the program curriculum.

7. *Knowledge for Practice – Demonstrate knowledge of established and evolving bio-psycho-social, clinical, epidemiological and nursing sciences, for the provision of evidence-based patient care. Postgraduate trainees must:*

- a) *Demonstrate an investigatory and analytic approach to clinical situations*
- b) *Apply established and emerging bio-psycho-social scientific principles fundamental to health care for patients and populations*
- c) *Apply established and emerging principles of clinical sciences to diagnostic and therapeutic decision-making, clinical problem-solving and evidence-based health care*
- d) *Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations*
- e) *Apply principles of social-behavioral sciences to provision of patient-center care, including assessment of the impact of psychosocial and cultural influences on health, disease, care seeking, patient engagement, and barriers to and attitudes toward care*
- f) *Contribute to the creation, dissemination, application, and translation of new health care knowledge and practices*

a. Describe the ways in which the competency Knowledge for Practice is integrated into the curriculum (e.g., how this competency is included in aspects of the curriculum such as didactics, clinical rotations, precepted clinics, other special sessions or lectures).

b. Provide examples that demonstrate postgraduate trainees are developing competence in each of the areas above by participating in the program curriculum.

8. *Practice-Based Learning and Improvement – Demonstrate the ability to evaluate one’s own practice and improve outcomes of patient care based on best available evidence, constant self-evaluation and life-long learning. Postgraduate trainees must develop skills and habits to be able to meet the following goals:*

- a) *Identify strengths, deficiencies, and limits in one’s knowledge and expertise*
- b) *Set learning and improvement goals*

- c) *Identify and perform learning activities that address one's gaps in knowledge, skills, and/or attitudes*
- d) *Systematically analyze practice using quality improvement methods, measures, and processes, and implement and assess impact of changes with the goal of practice improvement*
- e) *Incorporate feedback into daily practice*
- f) *Locate, appraise, and assimilate evidence from scientific studies related to patients' health problems*
- g) *Use information technology to optimize learning*
- h) *Participate in the education of patients, families, students, trainees, peers, and other health professionals*
- i) *Obtain and utilize information about individual patients, populations of patients (panel management), or communities from which patients are drawn to improve care*
- j) *Continually identify, analyze, and implement new knowledge, guidelines, standards, technologies, products, or services that have been demonstrated to improve outcomes*

a. Describe the ways in which the competency Practice-Based Learning and Improvement is integrated into the curriculum (e.g., how this competency is included in aspects of the curriculum such as didactics, clinical rotations, precepted clinics, other special sessions or lectures).

b. Provide examples that demonstrate postgraduate trainees are developing competence in each of the areas above by participating in the program curriculum.

9. *Interpersonal and Communication Skills – Demonstrate effective communication and collaboration with patients, their families, and inter-professional colleagues. Postgraduate trainees must demonstrate competence to:*

- a) *Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds*
- b) *Communicate effectively with colleagues within one's profession or specialty, other health professionals, and health related agencies*
- c) *Work effectively with others as a member or leader of a health care team or other professional group*
- d) *Act in a consultative role to other health professionals*
- e) *Maintain comprehensive, timely, and legible medical records*
- f) *Demonstrate sensitivity, honesty, and compassion in difficult conversations, including those about death, end of life, adverse events, bad news, disclosure of errors, and other sensitive topics*
- g) *Demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions*

a. Describe the ways in which the competency Interpersonal and Communication Skills is integrated into the curriculum (e.g., how this competency is included in aspects of the curriculum such as didactics, clinical rotations, precepted clinics, other special sessions or lectures).

b. Provide examples that demonstrate postgraduate trainees are developing competence in each of the areas above by participating in the program curriculum.

10. *Professionalism – Demonstrate a commitment to carrying out professional roles and responsibilities and adherence to ethical principles. Postgraduate trainees must demonstrate:*

- a) *Compassion, integrity, and respect for others*
- b) *Responsiveness to patient needs that supersedes self-interest*
- c) *Respect for patient dignity, privacy, confidentiality, and autonomy*
- d) *Accountability to patients, society, and the profession*
- e) *Sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.*
- f) *A moral commitment to the ethical principles pertaining to provision or withholding of care, confidentiality, informed consent, and business practices, including compliance with relevant laws, policies, and regulations*

- a. **Describe the ways in which the competency Professionalism is integrated into the curriculum (e.g., how this competency is included in aspects of the curriculum such as didactics, clinical rotations, precepted clinics, other special sessions or lectures).**
- b. **Provide examples that demonstrate postgraduate trainees are developing competence in each of the areas above by participating in the program curriculum.**

11. *Systems-Based Practice – Demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Postgraduate trainees must demonstrate that they are able to:*

- a) *Work effectively in various health care delivery settings and systems relevant to one's clinical specialty*
- b) *Coordinate patient care within the health care system relevant to one's clinical specialty*
- c) *Incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care*
- d) *Advocate for quality patient care and optimal patient care systems*
- e) *Participate in identifying system errors and implementing potential systems solutions*
- f) *Perform administrative and practice management responsibilities commensurate with one's role, abilities, and qualifications*

- a. **Describe the ways in which the competency Systems-Based Practice is integrated into the curriculum (e.g., how this competency is included in aspects of the curriculum such as didactics, clinical rotations, precepted clinics, other special sessions or lectures).**
- b. **Provide examples that demonstrate postgraduate trainees are developing competence in each of the areas above by participating in the program curriculum.**

12. *Inter-professional Collaboration – Demonstrate the ability to practice within an inter-professional team in a manner that optimizes safe, effective patient- and population-centered care. Postgraduate trainees must demonstrate that they are able to:*

- a) *Work with other health professionals to establish and maintain a climate of mutual respect, dignity, diversity, ethical integrity, and trust*

- b) *Use the knowledge of one's own role and the roles of other health professionals to appropriately assess and address the health care needs of the patients and populations served*
- c) *Communicate with other health professionals in a responsive and responsible manner that supports the maintenance of health and the treatment of disease in individual patients and populations*
- d) *Understand the types of different roles and their associated responsibilities that are needed to establish, develop, and continuously enhance Inter-professional teams to provide patient- and population-centered care that is safe, timely, efficient, effective, and equitable*

- a. **Describe the ways in which the competency Inter-profession Collaboration is integrated into the curriculum (e.g., how this competency is included in aspects of the curriculum such as didactics, clinical rotations, precepted clinics, other special sessions or lectures).**
- b. **Provide examples that demonstrate postgraduate trainees are developing competence in each of the areas above by participating in the program curriculum.**

13. *Personal and Professional Development – Demonstrate qualities required to sustain lifelong growth as healthcare professional and leader. Postgraduate trainees must demonstrate that they are able to:*

- a) *Use self-awareness of knowledge, skills, and emotional limitation to engage in appropriate help-seeking behaviors*
- b) *Demonstrate healthy coping mechanisms to respond to stress*
- c) *Manage conflict between personal and professional responsibilities*
- d) *Practice flexibility and maturity in adjusting to change with the capacity to alter one's behavior*
- e) *Demonstrate trustworthiness that makes colleagues feel secure when one is responsible for the care of patients*
- f) *Provide leadership skills that enhance team functioning; the learning environment, and/or the health care delivery system*
- g) *Demonstrate self-confidence that puts patients, families, and members of the healthcare team at ease*
- h) *Recognize that ambiguity is part of clinical health care and respond by utilizing appropriate resources in dealing with uncertainty*
- i) *Obtain feedback and/or peer review on an aspect of their learning and develop this into a product that can be shared in the residency community or submitted as a scholarly product*

- a. **Describe the ways in which the competency Personal and Professional Development is integrated into the curriculum (e.g., how this competency is included in aspects of the curriculum such as didactics, clinical rotations, precepted clinics, other special sessions or lectures).**
- b. **Provide examples that demonstrate postgraduate trainees are developing competence in each of the areas above by participating in the program curriculum.**

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other

correspondence since the last review, did the NNPRFTC Accreditation Council note any **Standard 2** issues to specifically address *“in the next self-study”*? If so, provide your response here.

- (IF CURRENTLY ACCREDITED):** In your program’s last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any other **Standard 2** issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the NNPRFTC Accreditation Council and whether the NNPRFTC Accreditation Council determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

ADDITIONAL DOCUMENTATION REMINDER FOR STANDARD 2

Submit any other documentation relevant to the above questions, including schedules/descriptions for any didactic experiences. Provide clear references in the responses to the questions above on where the information referred to is located in the appended documentation.

Training calendars, examples of weekly trainee schedules, and rotation descriptions can be helpful in illustrating how the training program is organized. In addition, a Powerpoint presentation about the program would be helpful to include. (NOTE: this presentation could be used at the beginning of the site visit to orient the accrediting team to the program.)

Standard 3: Evaluation

Postgraduate Trainee

1. *The Program must establish and use an objective, systematic and cumulative evaluation and assessment process that is designed based on the Program's core elements, competency, and curriculum components.*

a. **Describe the evaluation and assessment process for your program's curriculum.**

b. **Provide examples that demonstrate the evaluation and assessment process is objective, systematic, and cumulative.**

2. *The Program must assess the performance and development of each postgraduate trainee through periodic and objective assessment focused on core competency areas in both clinical and professional areas. The assessment should include the identification of any deficiencies or performance concerns.*

a. **Describe how the program assesses the performance and development of each postgraduate trainee through periodic and objective evaluations focused on core competency areas in both clinical and professional areas.**

b. **Describe how the assessment includes the identification of any deficiencies or performance concerns. Provide examples of these issues, if any examples exist.**

3. *The Program must have a clear process for promptly identifying and addressing postgraduate trainee performance concerns, as well as the development of an improvement plan with measurable goals.*

a. **Describe the process for promptly identifying and addressing postgraduate trainee performance concerns in the program.**

b. **Describe how an improvement plan with measurable goals is developed. Provide an example of such a plan.**

4. *Program evaluations should include:*

- a) *Postgraduate trainee competency self-assessment*
- b) *Postgraduate trainee evaluation of all core program components (preceptors for continuity clinics and specialty rotations, and weekly didactic sessions)*
- c) *Preceptor (both continuity clinic and specialty) assessment of the postgraduate trainee performance*
- d) *Reflective self-assessment by trainee of their experience*
- e) *Final programmatic evaluation*

a. **Provide examples of each of the evaluations noted above.**

5. *The Program is encouraged to assist the postgraduate trainee in assembling the assessment elements. This assembly could take the form of a learning portfolio. Both the Program and the postgraduate trainee could add elements to the portfolio over time. Such a portfolio could be used by the postgraduate trainee as well as by Program Faculty and/or the Program Director in preparing for evaluation and coaching sessions. Learning goals established during evaluation and coaching sessions would be entered into the portfolio and reviewed a subsequent evaluation and coaching sessions.*

- a. Describe how the program assists the postgraduate trainee in assembling the evaluation elements.
- b. Describe how often the evaluation elements are reviewed and by whom.
- c. Describe the postgraduate trainee's role in the process of reviewing the evaluation elements.
- d. If your program has a system for assembling the evaluation elements such as a portfolio, describe this system.

Organizational Evaluation

6. *The Program must review and assess the operational and financial impact of the Program on the overall organization and evaluate for any improvements or efficiencies in business operations.*

- a. Describe how the program reviews and assesses the operational and financial impact of the program on the overall sponsoring organization and assesses for any improvements or efficiencies in business operations (e.g., regular meetings with the financial leader(s) of the sponsoring organization, decisions made related to such meetings).
- b. When was the most recent assessment of this type performed? Who was involved in the assessment?
- c. What was learned from the most recent assessment? What changes, if any, were made based on these learnings?
- d. Provide a summary of the most recent assessment. (Note: this can be a brief 1-2 page overview of the key areas discussed.)

7. *The Program must have a documented process for the initial and ongoing evaluation of all sites used for postgraduate trainees' clinical practice experiences. The evaluation of each site should include:*

- a) *The site itself (e.g., the resources provided, staffing)*
- b) *The experience for the postgraduate trainees at the site*

- a. Describe the process for the initial and ongoing evaluation of all sites used for postgraduate trainees' clinical practice experiences. Be sure to include both information about the site itself and the postgraduate trainee experience.

- b. When was the most recent evaluation of each site? Who was involved in the evaluation?**
 - c. What was learned from each of the most recent evaluations? What changes, if any, were made based on these learnings?**
 - d. Provide a summary of the most recent evaluation from each site.**
8. *The Program is encouraged, but not mandated, to have a Residency Advisory Committee (RAC). Such a committee would consist of faculty, external members, supervisors, at least one postgraduate trainee representative, and should include the Program Director as an ex-officio member. The RAC should advise and assist the Program Director to:*
- a) Develop and update a written residency mission statement that describes goals and objectives;*
 - b) Develop educational experiences and clinical rotations;*
 - c) Provide new or emerging knowledge, skills, or competencies that may influence the content or conduct of postgraduate trainee education;*
 - d) Review the sponsoring institution's internal review of the program;*
 - e) Review confidential and written postgraduate trainee evaluations of faculty and the program;*
 - f) Review the program director's evaluations of individual postgraduate trainees; and,*
 - g) Review the faculty evaluations of the program director and the program.*
- a. If your program has a Residency Advisory Committee, please describe who serves on the committee, how often it meets, its functions, and the results of the most recent two meetings.**

Clinical Faculty Evaluation

9. *The Program must have an established process to evaluate clinical faculty which include preceptors and didactic presenters. The evaluators may include but are not limited to postgraduate trainee and the Program Director.*
- a. Describe the process to evaluate clinical faculty which include preceptors and didactic presenters.**
 - b. Who is involved in this evaluation process?**
 - c. What has been learned from these evaluations in the past year? What changes, if any, were made based on these learnings?**
 - d. Provide examples of preceptor evaluations and didactic presenter evaluations.**
10. *The Program must have a clear process for promptly identifying and addressing faculty performance concerns, as well as the development of an improvement plan with measurable goals.*
- a. Describe the process for promptly identifying and addressing faculty performance concerns in the program.**

- b. Describe how an improvement plan with measurable goals is developed. Provide an example of such a plan.**

Ongoing Program Self-Assessment

11. *The Program must have an established process of ongoing program self-assessment that should use the Accreditation standards as a method to identify the program's compliance. Self-assessment should be done on a periodic basis, no less than annually, and document its results. The Program self-assessment should include:*

a) *Programmatic assessment and corresponding outcome measures:*

- *Postgraduate trainee completion rates*
- *Postgraduate trainee withdrawals or dismissals*
- *Postgraduate trainee evaluations of core program elements*
- *Preceptor evaluations of postgraduate trainee performance*
- *Graduate employment data*
- *Alumni satisfaction*
- *Employer satisfaction (if possible)*
- *Program staff turn-over*

b) *Documentation of program's self-assessment results and corresponding action plan that includes:*

- *Identified strengths, weaknesses and opportunities for improvement*
- *Structural or content program adjustments to address areas of weakness and areas of improvement*
- *Evidence of improvement through implementing the action plan developed from evaluation results*

- a. Describe the process of ongoing program self-assessment that uses the Accreditation standards as a method to identify the program's compliance.**
- b. Provide an example of a program self-assessment that demonstrates the frequency of the program's self-assessment and a summary of recent results.**
- c. Provide an example of an action plan from a program self-assessment that demonstrates the program's efforts to improve.**

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any Standard 3 issues to specifically address "*in the next self-study*"? If so, provide your response here.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any other Standard 3 issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the NNPRFTC Accreditation Council and whether the NNPRFTC Accreditation Council determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

ADDITIONAL DOCUMENTATION REMINDER FOR STANDARD 3

Provide documentation of self-evaluative activities, including copies of program and supervisor evaluation forms or instruments, trainee performance evaluations, examinations or tests of trainee competency or knowledge, and any other methods of assessing attainment of trainee and program training goals and objectives (i.e. resource, process and outcome evaluation standards, methods and measurement instruments, and results.)

Complete Table 3 requesting information on trainees' first employment after completing your program, licensure, other credentialing and/or professional activities and accomplishments. If your program has not been able to track these results, please explain what efforts have been made and how the program intends to address in future the tracking of trainees after completing the program.

Standard 4: Program Eligibility

Application for Accreditation for Postgraduate NP training programs should be completed by the primary sponsoring organization. Postgraduate NP training programs must meet the following basic criteria in order to be eligible for consideration of accreditation.

1. *The sponsoring organization must be located within the US and operate Postgraduate NP training programs in settings that may include but are not limited to:*
 - *Federally qualified health centers (FQHCs) and FQHC look-alike organizations*
 - *Nurse managed health centers*
 - *Other safety net settings such as the Indian Health Service*
 - *Veterans Health Administration system*
 - *Integrated Health Systems*
 - *Private clinic systems and practices*
 - *Academic health centers/medical centers, both public and private*

- a. Specify the location of the sponsoring organization.**

- b. Describe the sponsor institution's service delivery setting(s) (using the list above) in which your program's training and education activities take place and the service recipient population(s) (clients, patients) in those settings. If the training takes place in more than one setting, describe the multiple settings, their service recipient populations and the types of training experiences offered in each setting.**

2. *The sponsoring organization must hold and maintain a current accreditation and/or certification by an entity that recognizes quality and safety of care. These entities may include but are not limited to:*
 - *A nationally recognized regional or specialized/professional accrediting agency that accredits the institution of higher education that offers the postgraduate training program*
 - *Accreditation Association for Ambulatory Health Care (AAAHC)*
 - *The Joint Commission, with specific accreditation under the Standard applicable to the practice site of the postgraduate residency training program.*

- a. Provide information here regarding sponsoring organization's current accreditation and/or certification. Specifically include a) the name of the accrediting and/or certification agency, b) the date of accreditation and/or certification, and c) the level of accreditation and/or certification.**

3. *Program applicants must be:*
 - *A graduate of an accredited Nurse Practitioner program who has earned either a Master of Science in Nursing or Doctor of Nursing Practice. The educational program should be accredited by CCNE or ACEN*

- *Board certified (by ANCC or AANP) and license eligible as an advance practice nurse in the state in which the program is located by a date determined by the Program in accordance with the planned program curriculum*

a. Complete Table 1.

b. Complete Table 2.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any Standard 4 issues to specifically address "*in the next self-study*"? If so, provide your response here.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any other Standard 4 issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the NNPRFTC Accreditation Council and whether the NNPRFTC Accreditation Council determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

ADDITIONAL DOCUMENTATION REMINDER FOR STANDARD 4

Provide any relevant information about the sponsoring organization related to its location, setting, certification, or accreditation.

Standard 5: Administration

Organizational Sponsorship

1. *There is a clearly identified single sponsoring organization that is ultimately responsible for the Program.*
 - a. **Specify the sponsoring organization that is responsible for the program.**
 - 2. *The Program must have a defined mission statement that defines the specific mission of the Program and also reflects the mission and goals of the sponsoring organization.*
 - a. **Briefly describe the mission of the sponsoring organization for your postgraduate NP training program.**
 - b. **Explain how your program mission reflects the mission and goals of your sponsor organization. How is your program mission viewed/valued by your sponsor organization and its administration?**
 - c. **Since your last site visit (if applicable) have there been any changes in your, or your sponsoring organization's, mission or resources, or in your training program's processes or practices, or other issues that have influenced the quality of the training program, the training staff or the trainees' experiences? If so, describe them.**
 - 3. *The sponsoring organization must demonstrate that it has the sufficient resources, and is of a size, scope, and depth to either directly or through formal affiliation provide each of the core elements of the postgraduate Program including precepted clinical sessions, didactic lectures and presentations, training in specified procedures, and specialty rotations as defined in the Program manual, and ongoing evaluation of the program, curriculum, and individual postgraduate trainees' progress. Programs must be able to demonstrate that the sponsoring organization, not the affiliated organizations, maintains the ownership and control over the educational content of the program and the overall management, leadership, and evaluation of the program. The sponsoring organization must be able to assure its postgraduate trainees that it can provide adequate number and range of patients to assure the depth, breadth, and volume of training to meet the educational and training goals of the Program and the postgraduate trainees.*
 - a. **Provide information about the number of trainees in your program. If the number of trainees has changed in the past two years, please indicate how it has changed and the reason(s) for the change.**
 - b. **Provide information that demonstrates your sponsoring organization has sufficient resources, and is of a size, scope, and depth to either directly or through formal affiliation provide each of the core elements of the program.**

- c. Provide information that demonstrates your sponsoring organization, not the affiliated organizations, maintains the ownership and control over the educational content of the program and the overall management, leadership, and evaluation of the program (e.g., how the sponsoring organization works with the affiliated organization(s) to implement and evaluate the curriculum).
- d. Provide information that demonstrates your sponsoring organization is able to assure its trainees that it can provide adequate number and range of patients to assure the depth, breadth, and volume of training to meet the educational and training goals of the program and the trainees (e.g., total number of patients/patient visits per year, by age range; for FQHCs, may use most recent UDS report).
- e. Does your program or its sponsoring organization have any plans that might substantially change the nature, function or mission of your postdoctoral program in the foreseeable future? Describe these plans and their potential consequences to your program's accreditation status.

4. *When education and training elements of the Program are provided outside of the sponsoring organization, there must be clear written and signed agreements between the sponsoring organization and the affiliated organization, detailing the responsibilities and contributions of each party. At a minimum, the affiliated organization must be able to provide assigned resources to meet the goals of the educational experience, and to provide an evaluation to the sponsoring organization following the experience when relevant.*

- Not applicable – the program provides all education and training within the sponsoring organization. *(Please skip to question #5 of this standard.)*
- a. Describe the education or training elements of the program provided outside the sponsoring organization.
- b. Describe the resources provided by each affiliated organization to meet the educational goals of the program.

5. *The Program should consider having a formal academic partnership or affiliation. While this is not a requirement for accreditation, an academic partnership or affiliation supports the Program in their implementation and development of key program components including curriculum, clinical-based practice opportunities, didactic sessions, faculty development, evaluation, and additional training. In addition, a connection to an academic partner can support the program's positive relations with an accredited NP academic program and provide a source of future postgraduate trainee candidates interested in further postgraduate training.*

- a. Describe any formal academic partnership or affiliation that exists with the program.

Organizational Responsibilities and Resources

6. The sponsoring organization of the Program has primary responsibility for providing the following programmatic components:
- a) Ensuring that curriculum is planned, developed, and finalized prior to entry of first class of postgraduate trainees, and subsequently evaluated and revised as needed on a regular and on-going basis
 - b) Coordination and documentation of all clinical experiences, including precepted clinics, didactic education, and experiential learning
 - c) Sufficient provision of administrative and clinical faculty time for training, administrative and teaching requirements.
 - d) Conducting the Program recruitment process in a transparent manner including selection of candidates for interviews, identification of the review committee members and standards for review, selection of final applications, and the process for notification of decisions to candidates and the process of offering positions to the candidates. These processes must ensure equal opportunity for qualified candidates to learn about the program, understand core requirements and factors influencing acceptance, and submit application
 - e) Establishing a timeline for the recruitment, selection, and contracting process for postgraduate trainees
 - f) Providing a formal written agreement, sometimes referred to as contracts or “enrollment agreements” to all postgraduate trainees that details the terms and conditions of participation in the Program including clear expectation of program completion with the established timeframe. These agreements also include information in the eventuality of program cancellation. The execution and maintenance of this agreement is supervised by the Program Director and supporting organizational staff during the defined term of the agreement.
 - g) Providing all postgraduate trainees with the appropriate liability coverage for the duration of the program in accordance with other health care professionals at the organization.
 - h) Assuring that postgraduate trainees are provided with appropriate salary, as determined by the sponsoring organization, plus employee benefits as defined by the organization and described in the organization’s policies. The sponsoring organization should be able to demonstrate that compensation is competitive with similar programs and reasonable for the geographic location of the program.
 - i) Assuring that the environment in which the postgraduate trainees and staff are assigned meet the sponsoring organization’s standards for safety and security

- a. Complete the information below related to the sponsoring organization’s provision of programmatic components.

Programmatic Component	Sponsoring Organization Provides	If ‘No’, provide comment as to why not
<i>Planning and evaluation of curriculum</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Coordination and documentation of clinical experiences</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Sufficient administrative and clinical faculty time</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Program recruitment in a</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

<i>transparent manner</i>		
<i>Establish a timeline for recruitment, selection and contracting</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Provides formal written agreement to postgraduate trainees</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Provides postgraduate trainees with appropriate liability coverage</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Assures postgraduate trainees are provided appropriate salary</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Assures a safe and secure environment for postgraduate trainees</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

7. *The sponsoring organization must provide the program with the financial resources to adequately operate and meet the defined core program elements, as reflected in the budget and operating plan developed and submitted by the Program to the sponsoring organization.*

a. **Describe how your program is funded and how it is represented in the sponsor organization's operating budget.**

b. **Describe any issues encountered related to funding for the program.**

8. *The sponsoring organization must provide the Program with the necessary human resources for required program operations and the needed support for enrolled postgraduate trainees. Such resources include both general organizational HR support as well as specific support, particularly during their recruitment, on-boarding, and orientation processes.*

a. **Describe the human resources support provided by your sponsoring organization for the program in general.**

b. **Specifically describe the human resources support provided by your sponsoring organization for the program recruitment, on-boarding, and orientation processes for trainees.**

9. *The sponsoring organization must provide the Program with the full range of resources needed by the Program, faculty, staff and postgraduate trainees to operate the Program and to fulfill obligations of the Program to enrolled postgraduate trainees. Such resources include sufficient patient population for the desired clinical experiences, adequate technology support in hardware, software, and training to ensure that the postgraduate trainees are trained using current technology, sufficient videoconference and distance learning technologies to remove any geographic barriers to learning, access to current, on-*

line learning resources, and instructional materials sufficient to support procedural training. These resources are reflected physically by demonstrating the following resources:

- a) Assigned clinical practice sites for postgraduate trainees for both precepted and specialty rotations*
- b) Electronic technology that provides the postgraduate trainees with the opportunity to learn and practice in a technically sophisticated environment including EMR, videoconferencing, and evaluations*
- c) Appropriate space within the clinical practice environment for trainees to interact as part of a full clinical interdisciplinary and inter-professional team*

- a. Describe the resources provided by your sponsoring organization for assigned clinical practice sites for postgraduate trainees for both precepted and specialty rotations. Also, comment on how these resources promote the postgraduate trainee's experience in the program.
- b. Describe the resources provided by your sponsoring organization for electronic technology that provides the postgraduate trainees with the opportunity to learn and practice in a technically sophisticated environment including EMR, videoconferencing, and evaluations. Also, comment on how these resources promote the postgraduate trainee's experience in the program.
- c. Describe the resources provided by your sponsoring organization for appropriate space within the clinical practice environment for trainees to interact as part of a full clinical interdisciplinary and inter-professional team. Also, comment on how these resources promote the postgraduate trainee's experience in the program.

10. The sponsoring organization must provide access to appropriate clinical support services either through direct availability or through an established referral relationship. Available clinical support services must be sufficient in scope and number to support the clinical practice and learning of the postgraduate trainees. Clinical support services include, but are not limited to, staff such as medical assistants, nurses and technicians relevant to the specialty area.

- a. Describe the clinical support services provided by your sponsoring organization for postgraduate trainees in the program.
- b. How do you ensure that the clinical support services provided are sufficient in scope and number to support the clinical practice and learning of the postgraduate trainees?

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any **Standard 5** issues to specifically address "*in the next self-study*"? If so, provide your response here.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any

other Standard 5 issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the NNPRFTC Accreditation Council and whether the NNPRFTC Accreditation Council determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

ADDITIONAL DOCUMENTATION REMINDER FOR STANDARD 5

Include as appendices scanned version of any public materials on your sponsoring organization (brochures, handbooks, formal institutional policy and procedure memoranda, etc.) that you feel are relevant to Standard 5.

Standard 6: Operations

1. *Once an applicant is successfully accepted by the Program they will be provided with a formal agreement outlining the terms, conditions, and benefits, either in writing or by electronic means. The agreement should include:*
 - a) *Postgraduate trainee requirements and responsibilities*
 - b) *Length of agreement*
 - c) *All program requirements*
 - d) *Financial compensation and other included benefits*
 - e) *Professional liability insurance coverage or FTCA (federal tort claim act) coverage*
 - f) *Policies and procedures for postgraduate trainee withdrawal or dismissal*
 - g) *Other policies and procedures in accordance with the sponsoring organization*

a. Provide an example of the formal agreement provided to the applicants who are successfully accepted to the program.

2. *Postgraduate trainees must have access at all times when they are engaged in program activities, either in person or electronically, to Program staff and/or supervising providers as determined by the sponsoring organization.*

a. Describe how the program ensures that postgraduate trainees have access to program staff and/or supervising providers at all times.

3. *Clinical precepted sessions require the time and support of an on-site preceptor for the duration of the session. The preceptor must have sufficient time and availability to be fully available to the postgraduate trainees for consultation, teaching, and direct assessment of patients. Preceptors who are precepting more than (1) postgraduate trainee should not be scheduled for any other direct patient care responsibility during the precepted session.*

a. Describe the program's policy for clinical precepting.

b. Provide information that demonstrates your preceptors have sufficient time and availability to be fully available to the postgraduate trainees for consultation, teaching, and direct assessment of patients.

c. Provide information that demonstrates your preceptors who are precepting more than (1) trainee should not be scheduled for any other direct patient care responsibility during the precepted session.

4. *Postgraduate trainees must not be required to perform non-clinical related administrative work for the Program that is not for the purpose of educational training or to meet the Program's training goals, objectives and competencies.*

- a. Are your postgraduate trainees required to perform any non-clinical administrative work for the program? Yes No
- b. If 'Yes', describe the nature of this work. If 'No', skip to question #5.
- c. Provide information that demonstrates the non-clinical related administrative work for the program by your postgraduate trainees is for the purpose of educational training or to meet the Program's training goals, objectives and competencies.

5. *Grievance policies must be defined, published, and readily available to postgraduate trainees and Program staff. The policy and procedures must address:*

- a) *The policy and procedures for disciplinary action should follow the general guidelines of the sponsoring organization and detail procedures to deal with any clinical or administrative deficiencies identified, including plans for improvement and remediation.*
- b) *Resolution of postgraduate trainee complaints and grievances related to the work environment or issues related to the Program or Program faculty.*
- c) *The right of the postgraduate trainees to file a complaint concerning the program with the NNPRFTC*

- a. Describe how the grievance policies are defined, published, and readily available to postgraduate Trainees and Program staff.
- b. Provide information that demonstrates the policy and procedures for disciplinary action follow the general guidelines of the sponsoring organization and detail procedures to deal with any clinical or administrative deficiencies identified, including plans for improvement and remediation.
- c. Provide information that demonstrates resolution of postgraduate trainee complaints and grievances related to the work environment or issues related to the program or program faculty.
- d. Provide information that demonstrates the right of the postgraduate trainees to file a complaint concerning the program with the NNPRFTC.

6. *The HR department of the sponsoring organization will maintain records and documentation of the postgraduate trainee which contains information in accordance with the organization's policies and procedures.*

- a. Provide information that demonstrates the HR department of the sponsoring organization maintains records and documentation of the postgraduate trainee which contains information in accordance with the organization's policies and procedures.

7. *Postgraduate trainee documentation kept by the Program should include the following records:*

- a) *The postgraduate trainee has met published eligibility criteria*
- b) *Evaluation of postgraduate trainee performance while enrolled including meeting set forth competency requirements throughout the program*
- c) *Any disciplinary action*
- d) *Any grievances filed by the postgraduate trainee*

- a. Provide information that demonstrates postgraduate trainee documentation kept by the program includes that the postgraduate trainee has met published eligibility criteria.
- b. Provide information that demonstrates postgraduate trainee documentation kept by the program includes the evaluation of postgraduate trainee performance while enrolled including meeting set forth competency requirements throughout the program.
- c. Provide information that demonstrates postgraduate trainee documentation kept by the program includes any disciplinary action.
- d. Provide information that demonstrates postgraduate trainee documentation kept by the program includes any grievances filed by the postgraduate trainee.

8. *Records of all key program staff, including but not limited to the Program Director, Chief Clinical Director and additional Program staff assigned to the Program will be maintained by the Program and should include a current resume and job description that outlines the role and responsibilities as it relates to the Postgraduate NP Training Program.*

- a. Provide information that demonstrates the records of all key program staff, including but not limited to the Program Director, Chief Clinical Director and additional Program staff assigned to the Program are maintained by the program.
- b. Provide information that demonstrates the records of all key program staff include a current resume and job description that outlines the role and responsibilities as it relates to the Postgraduate NP Training Program.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any **Standard 6** issues to specifically address "*in the next self-study*"? If so, provide your response here.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any other **Standard 6** issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the NNPRFTC Accreditation Council and whether the NNPRFTC Accreditation Council determined the issue was

satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

ADDITIONAL DOCUMENTATION REMINDER FOR STANDARD 6

Provide relevant personnel policies, appropriate sections of procedure manuals or other documentation on conflict, problem or grievance resolution, due process, etc. If your program has existing documents (e.g., a detailed personnel handbook, procedure manual, etc.) append it and refer to the sections in which the requested information can be located.

Standard 7: Staff

Program Staff

1. *The Program must have a designated Program Director, Chief Clinical Director, and organizational support staff that are sufficient in time and effort to fulfill all Program components. Based on the size and resources of the sponsoring organization the Program Director and Chief Clinical Director positions may be combined, provided the requirements for each position are met.*
 - a. **Complete Table 4(c).**
 - b. **Describe how the program ensures that the time and effort of its program staff are sufficient to fulfill all program components.**
 - c. **If the Program Director and Chief Clinical Director positions are combined, provide information that demonstrates the requirements for each position are met.**

 2. *Program staff is responsible for:*
 - a) *Managing the implementation of all core program components*
 - b) *Selecting potential applicants and choosing of final candidates*
 - c) *Administering and collecting comprehensive performance evaluations of each postgraduate trainee*
 - d) *Identifying and resolving unanticipated obstacles or problems that might impede successful achievement of objectives*
 - e) *Designing, implementing, and evaluating curriculum*
 - f) *Promoting the understanding of the Program internally within the sponsoring organization*
 - g) *Disseminating outcomes and findings from the Program to the larger health care community*
 - h) *Administering and coordinating all clinical practice, didactics, and other organizational activities of the Program*
 - i) *Developing and implementing strategic plan as well as assessment plan*
- Brefly describe how your program staff accomplishes each of the following:**
- a. **Managing the implementation of all core program components.**
 - b. **Selecting potential applicants and choosing of final candidates.**
 - c. **Administering and collecting comprehensive performance evaluations of each postgraduate trainee.**
 - d. **Identifying and resolving unanticipated obstacles or problems that might impede successful achievement of objectives.**

- e. **Designing, implementing, and evaluating curriculum.**
- f. **Promoting the understanding of the program internally within the sponsoring organization.**
- g. **Advocating for Postgraduate postgraduate training programs nationally within the professional and health care communities.**
- h. **Administering and coordinating all clinical practice, didactics, and other organizational activities of the program.**
- i. **Developing and implementing strategic plan as well as assessment plan.**

Program Director

3. The Program Director must:

- a) *Be an NP or operate under the direction of a Chief Clinical Director who is a NP.*
- b) *If the Program Director is an NP he/she must hold state current licensure by the state where the Program exists unless exempted from licensure under state or federal law.*
- c) *Be knowledgeable about and responsible for the Program's:*
 - *Sponsoring organization*
 - *Day to day program operations*
 - *Fiscal management*
 - *Program self-analysis and evaluation*
 - *Program development and improvement*
 - *Accreditation standards and process*

- a. **Provide information that demonstrates the Program Director meets all of the criteria specified in Standard 7.3.**

Chief Clinical Director

4. The Chief Clinical Director must:

- a) *Hold a current, valid, unrestricted, and unqualified license to practice as an NP in the state in which the Program exists, and she/he may not hold any license that is restricted or qualified in any manner; however, if the Program Director is an NP, this requirement shall be waived and the CCO may be licensed in any appropriate clinical discipline.*
- b) *Be currently certified and experienced in the delivery of the type of health care services for which the postgraduate trainee is being trained and knowledgeable about the current practice standards for NPs*
- c) *Support the Program Director in assuring that clinical practice experiences and other core program components meet and incorporate current practice standards and recognized best practices*
- d) *Promote understanding of and support for the Program internally within the sponsoring organization*
- e) *Be an advocate for Postgraduate NP training programs nationally within the NP profession and broader health care communities*

- a. Provide information that demonstrates the Chief Clinical Director meets all of the criteria specified in Standard 7.4.

Clinical Program Faculty

5. *There must be sufficient Clinical Program Faculty to provide postgraduate trainees with the dedicated support during clinical practice experiences that enable the essential knowledge and skills to be acquired in order to meet Program goals and competencies. Clinical Program Faculty includes preceptors, mentors, didactic lecturers, faculty with expertise in areas such as quality improvement or leadership, and any other clinical training staff.*

- a. Complete Table 4.
- b. Provide information that demonstrates there are sufficient Clinical Program Faculty to provide postgraduate trainees with the dedicated support during clinical practice experiences that enable the essential knowledge and skills to be acquired in order to meet Program goals and competencies.

6. *Clinical Program Faculty must be:*

- a) *In good standing within the sponsoring organization*
- b) *Qualified through academic preparation and clinical/organizational experience*
- c) *Practice in the specific assigned clinical areas and topics*

- a. Complete Table 4.

7. *The program must demonstrate that the appropriate level of guidance and supervision is in place for all postgraduate trainees who care for patients.*

- a. Describe how the program demonstrates that the appropriate level of guidance and supervision is in place for all trainees who care for patients.

8. *Clinical Program Faculty assigned to train postgraduate trainees are required to provide performance evaluations that assess the postgraduate trainee's progress in achieving expected competencies and provide appropriate feedback through established means to the postgraduate trainee and appropriate Program staff. Clinical program faculty must be provided appropriate initial training and on-going professional development by the sponsoring organization that supports the development of skills to successfully carry out their responsibilities as faculty.*

- a. Describe how the program ensures that Clinical Program Faculty assigned to train postgraduate trainees provide performance evaluations that assess the trainee's progress in achieving expected competencies.
- b. Describe how the program ensures that Clinical Program Faculty assigned to train postgraduate trainees provide appropriate feedback through established means to the

Trainee and appropriate Program staff.

- c. Describe how Clinical Program Faculty are provided appropriate initial training and on-going professional development by the sponsoring organization that supports the development of skills to successfully carry out their responsibilities as faculty.**

- 9. There must be a key individual designated to facilitate the postgraduate trainee's progress in achieving program requirements at each site to which a postgraduate trainee is primarily assigned.*

- a. List the key individual designated to facilitate the postgraduate trainee's progress in achieving program requirements at each site to which a trainee is primarily assigned. In addition, include the credentials, experience and time allocated for the key individual.**

- 10. All Program staff that provides clinical supervision to postgraduate trainees are required to use the Program's established evaluation tools to document their appraisal of the postgraduate trainees' performance and progress.*

- a. Describe how the program ensures that all Program Staff that provide clinical supervision to postgraduate trainees use the program's established evaluation tools to document their appraisal of the postgraduate trainees' performance and progress.**

- 11. The Program commits to provide Clinical Program Faculty with faculty development opportunities throughout the year including but not limited to initial and ongoing training, didactic education sessions, and postgraduate trainee management guidance.*

- a. Describe how the program commits to provide Clinical Program Faculty with faculty development opportunities throughout the year.**

- 12. There must be an evaluation process to critically review the quality of the Clinical Program Faculty.*

- a. Describe the evaluation process to critically review the quality of the Clinical Program Faculty.**

Professional Development

- 13. The sponsoring organization is encouraged to provide Program staff with the opportunity for continuing professional development to support the Staff in the development of their clinical, training, and administrative skills required for their role in the Program. Professional Development may include continuing education conferences, professional organizational meetings, and training opportunities.*

- a. Describe any opportunities provided by the sponsoring organization to Program Staff for continuing professional development to support the Staff in the development of their clinical, training, and administrative skills required for their role in the program.

Organizational Support Staff and Services

14. There must be sufficient organizational support staff (administrative and technical) to support Program staff and postgraduate trainees in their day to day operations. The organizational support staff and services may include, but are not limited to:

- a) Information Technologies (IT)
- b) Business intelligence (reports and data analytics)
- c) Practice management (schedules, templates, case mix)
- d) Clinical support staff (medical assistants, RNs, and others to support the team care model)
- e) Quality improvement to support continuous QI activities within the practice
- f) Human Resources

- a. Describe how and what type of staff (administrative and technical) are provided by the sponsoring organization that support Program Staff and postgraduate trainees in their day to day operations.

- b. Provide information that demonstrates the sponsoring organizational support is sufficient for the program.

- (IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any Standard 7 issues to specifically address "in the next self-study"? If so, provide your response here.

- (IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any other Standard 7 issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the NNPRFTC Accreditation Council and whether the NNPRFTC Accreditation Council determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

ADDITIONAL DOCUMENTATION REMINDER FOR STANDARD 7

If this self-study is using the "multiple practice programs" format, complete separate tables on Staff and Trainee Qualifications and Characteristics for each program. Clearly label tables regarding the program to which they apply.

Standard 8: Trainee Services

Postgraduate Trainee Benefits

1. *Postgraduate trainees must be provided the same employee benefits as other full-time health profession trainees or employees in accordance with the sponsoring organization's policies. Including but not limited to health insurance and other benefits, paid time off and continuing education funding.*
 - a. **Describe the benefits for postgraduate trainees.**
 - b. **Provide examples to demonstrate the postgraduate trainee benefits are the same as other full-time health professional trainees or employees.**

2. *Postgraduate trainee salary must be commensurate with other professional trainees training in the organization. If the postgraduate NP Training Program is the only program within the organization, the salary must be commensurate with other training programs in the same geographic area.*
 - a. **Describe the approach used to calculate an postgraduate trainee's salary.**
 - b. **Provide examples of other professional trainee's salaries to demonstrate that the postgraduate trainee's salary is commensurate. Please note if these examples are from a program outside of your organization**

3. *The sponsoring organization must provide the same benefits covering professional organization membership, provision of licenses and certifications as they do for full-time providers.*
 - a. **Describe the benefits covering professional organization membership, provision of licenses, and certifications for postgraduate trainees.**
 - b. **Provide examples to demonstrate the postgraduate trainee benefits are the same as other full-time providers of similar type and longevity.**

Postgraduate Trainee Health

4. *Postgraduate trainees must provide access to necessary health screening and immunizations in accordance with other health employees and those required by organizational policy. Health screening and immunizations must:*
 - a) *Be based on current recommendations for health professionals*
 - b) *Be consistent with organizational policy for other health professionals*
- a. **Describe the health screening and immunizations provided to postgraduate trainees.**

- b. Demonstrate how these are based on current recommendations for health professionals.
- c. Demonstrate how these are consistent with organizational policy for other health professionals.

5. *Postgraduate trainee health records and immunization information must be maintained confidentially and may be released for the purposes of program operations with the permission of the postgraduate trainee.*

- a. Describe the processes for maintaining postgraduate trainee health records and immunizations confidentially.
- b. Describe the process for releasing postgraduate trainee records.

Postgraduate Trainee Work Environment

6. *Each postgraduate trainee must be provided the necessary workstation space and equipment, necessary to meet the objectives of the Program and generally at a level consistent with other members of the clinical staffs.*

- a. Describe the workstation, space, and equipment provided to postgraduate trainees.
- b. Demonstrate how these resources are sufficient to meet the objective of the program.
- c. Compare these resources to those provided to other members of the clinical staff.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any Standard 8 issues to specifically address "*in the next self-study*"? If so, provide your response here.

(IF CURRENTLY ACCREDITED): In your program's last decision letter and/or other correspondence since the last review, did the NNPRFTC Accreditation Council note any other Standard 8 issues to address (i.e., narrative responses due by a certain date)? If so, briefly describe what information was provided to the NNPRFTC Accreditation Council and whether the NNPRFTC Accreditation Council determined the issue was satisfactorily addressed. You may reference correspondence in the appendices as necessary, but provide a brief summary of those issues here.

ADDITIONAL DOCUMENTATION REMINDER FOR STANDARD 8

Provide relevant personnel policies, appropriate sections of procedure manuals or other documentation on trainee services. If your program has existing documents (e.g., a detailed personnel handbook, procedure manual, benefits description, etc.) append it and refer to the sections in which the requested information can be located.

Table 1(a)

Trainee Statistics

<i>For the last seven years, report the number of trainees for each entering trainee cohort who:</i>	2015-2016	2014-2015	2013-2014	2012-2013	2011-2012	2010-2011	2009-2010
Applied to program							
Offered admission							

Trainee Support: Please provide the following information:

of hours/week required of a full-time trainee

Stipend for a full-time one-year trainee

of hours/week required of a part-time trainee

Total hours required to complete the program

Trainee Professional Activities

<i>Of the trainees entering in each cohort, the number who are currently:</i>	2015-2016	2014-2015	2013-2014	2012-2013	2011-2012	2010-2011	2009-2010
Members of Professional/Research Societies (include student affiliates)							
Authors/Co-Authors of Papers at Prof. Mtg.							
Authors/Co-Authors of Articles in Prof. and/or Scientific Journals ⁴							
Recipients of Federal Grants or Private Foundation Awards							
Recipients of State or Local Grants or Contracts							
Leadership roles/activities in state/provincial, regional or national professional organizations							

⁴ Work published (or in press)/presented during or after graduate training. Books may be included.

Table 1(b)

Trainee Demographics

<i>Trainees entering each year who identify themselves as:</i>		2015-2016	2014-2015	2013-2014	2012-2013	2011-2012	2010-2011	2009-2010
African-American/Black	M							
	F							
Caucasian	M							
	F							
Hispanic/Latino	M							
	F							
Asian/Pacific Islander	M							
	F							
American Indian/Alaska Native	M							
	F							
Multiethnic or None of the Above⁵	M							
	F							
TOTAL NUMBER	M							
	F							
Other⁶	M							
	F							
Total Number Subject to Americans with Disabilities Act	M							
	F							
Foreign Nationals⁷	M							
	F							

⁵ Individuals identifying with more than one OR none of the above areas. For those individuals who are categorized as multiethnic, be sure to only include them in this category and not in other ethnicity categories.

⁶ Programs may choose to note other specific types of diversity as broadly described in Domain A.5 of the G&P for doctoral programs or [IR C-22](#).

⁷ Individuals who are not US citizens or Permanent Residents (i.e., have student or other type of visa to attend residency program).

Table 2

Program Trainees - Pre-Program Experience/Education

Starting with the most recent trainee cohort **ENTERING** your program (consistent with Table 2), provide the following information for each trainee entering your program for the last seven (7) training years. **DO NOT IDENTIFY THE TRAINEES BY NAME.** Start with trainees who will be entering your program in the 2016-2017 training year (if data are available) and report back to those entering in the 2009-2010 training year. Place the requested information in the following format and identify by year of entry (e.g., 16.01, 16.02, 16.03, etc).

ID#	Name and location of doctoral degree program and year of completion	Degree program type (PhD, DNP, ARNP)	Area of training emphasis in doctoral program (if applicable)

Table 3

Program Trainees - Post-Program Experience

Starting with the most recent trainee cohort **COMPLETING** your program, provide the following information for each trainee who completed your program for the last seven (7) years. (DO NOT IDENTIFY THE TRAINEES BY NAME.) Start with trainees completing in 2016 and report back to those finishing in 2010. Place the requested information in the following format and identify by year of admission (e.g., 15.01, 15.02, 15.03, etc).

ID#	Year Degree Completed	INITIAL (first) Post-Program Employment Setting Code*	INITIAL Job Title*	CURRENT Employment Code*	CURRENT Job Title*	Medical Licensure (Y/N)?	Licensed in State(s)	Other Professional Achievements (e.g. faculty)

*See codes on next page.

Post-Program Employment Setting Codes

1. Federally Qualified Health Center
2. Other Community Health Center
3. Private Practice
4. Hospital
5. Veterans Affairs Medical Center
6. Hospital/Health System
7. University
8. Government

Post-Program Job Title (Role) Codes

9. Academic Teaching Position
 - 9a. doctoral program
 - 9b. masters program
 - 9c. 4-year college
 - 9d. community/2 yr. College
 - 9e. adjunct professor
10. Practitioner/clinician
11. Administrator
12. Consultant
33. Current student
99. Not currently employed

Table 4(a)

Current Program Faculty (Summary Information)⁸

Program Faculty (involved with planning/implementation of postgraduate residency; have direct contact with trainees):

Name	Role/Contribution(s) to this residency program (List All)	Highest Degree Earned	Professional Licensure (Y/N)	Good Standing in Sponsoring Organization (Y/N)	Qualified to Serve as Faculty (Y/N)	Clinical Practice Area (Specialty)	Page # for CV

⁸ For **EACH** person identified in this table as having direct contact with trainees, please prepare an abbreviated curriculum vitae according to the format provided.

Adjunct Staff/Faculty (Faculty and staff who are not involved with planning/implementation of residency but who have direct contact with trainees):

Name	Role/Contribution(s) to this residency program (List All)	Highest Degree Earned	Professional Licensure (Y/N)	Good Standing in Sponsoring Organization (Y/N)	Qualified to Serve as Faculty (Y/N)	Clinical Practice Area (Specialty)	Page # for CV

Other Contributors to Program⁹ (e.g., didactic seminar presenters):

Name	Role/Contribution(s) to this residency program (List All)	Highest Degree Earned

⁹ Curriculum vitae not necessary for other contributors who have minimal contact with trainees.

PLEASE NOTE:

- Remember to include an abbreviated CV (max. 2 single-sided pages or 1 double-sided page), using the required format in these instructions, for EACH person listed in this table in the “Program Faculty” and “Adjunct Faculty and Staff” categories. Submit only abbreviated CVs; full-length vitae should not be included. Please provide the self-study page number for the respective CV as indicated in the right-hand column.

- CVs should be organized in an appropriate manner (e.g., in the order the individuals appear in this table; alphabetically) so that reviewers can locate them easily. CVs are provided in Appendix #:

Self-Study Abbreviated Curriculum Vitae

(Limit of 2 single-sided or 1 double-sided pages per faculty member)

Answer all items including names/types of sites (e.g., University of X; Y Hospital), and "yes" or "no" where indicated. Submit an abbreviated CV for each person listed on Table 4(a) as specified in the instructions for that table. Failure to include the necessary CVs may result in delayed or adverse accreditation decisions.

Name:

Primary Professional Appointment (name of institution/agency):
appointment:

Year of

Position Title: _____ **Type of Setting (e.g., Hospital; Health Center):** _____

Highest Degree Earned: Ph.D. D.N.P. Ed.D. M.D. Other: _____

Date of Degree: _____ **Institution/Program Name:** _____ **Area of Degree (e.g., Clinical):** _____

Professional Licensure: No Yes **State(s)/Province(s):** _____

Board Certified: No Yes **Specialty:** _____

Currently listed in National Register and/or Canadian Register? No Yes

Describe Clinical/Services Delivery Position or Responsibilities in current position with program under review:

Professional Honors & Recognition (*Member/Fellow of Professional or Scientific Society, etc.*):

Selected Presentations to Professional/Scientific Groups in Last 7 Years (*List chronologically using NIH format for bibliographic citations*):

Selected Publications in Last 7 Years (*List chronologically using NIH format for bibliographic citations*):

Selected Funded Research Grants or Training Contracts in Last 7 Years (*Include funding source, duration of funding, total direct costs*):

Other Professional Activities in Last 7 Years (Include leadership activities/roles in state/provincial, regional or national professional organizations):

Table 4(b)

Current Program Faculty Demographics

(Please ensure that numbers reported on this Table are consistent with number of individuals reported in Table 4(a)).

<i>Number of individuals who identify themselves as:</i>		Program Faculty	Adjunct Faculty and Staff	Other Contributors
African American/Black	M			
	F			
Caucasian	M			
	F			
Hispanic/Latino	M			
	F			
Asian/Pacific Islander	M			
	F			
American Indian/Alaska Native	M			
	F			
Multiethnic ¹⁰	M			
	F			
TOTAL NUMBER	M			
	F			
Other ¹¹	M			
	F			
Subject to Americans with Disabilities Act	M			
	F			
Foreign Nationals ¹²	M			
	F			

¹⁰ Individuals identifying with more than 1 of the above categories. For those individuals who are categorized as multiethnic, be sure to only include them in this category and not in other ethnicity categories.

¹¹ Programs may choose to note other types of diversity described in Domain A.5 and [IR C-22](#).

¹² Individuals who are not U.S. citizens or Permanent Residents.

Table 4(c)

Program Staff

(Summary Information – please list all staff who support the program; this list excludes faculty)

Name	Role/Contribution(s) to this postgraduate training program	Percent Effort in program

(ADD ROWS IF NEEDED)

Appendix A

Policy Item	Document(s) in which policy appears	Page #(s) of Self-Study
Trainee selection		
Academic preparation requirements		
Administrative assistance <i>(this may be a statement in your materials regarding the clerical and technical support available to your trainees)</i>		
Financial assistance <i>(this may be a statement in your materials regarding the trainees' salary and benefits, travel money, etc.)</i>		
Trainee performance evaluation, feedback, advisement, retention, minimal requirements		
Trainee termination		
Due process		
Grievance procedures		
Statement of nondiscrimination		
Other relevant institutional/agency policies with which your program is required to comply (specify)		

Appendix B

Please complete this table for EACH of the program's goals.

Goal #X:
Objective(s) for Goal #X:
Curricular Element(s) linked to each Objective:
Goal #X:
Objective(s) for Goal #X:
Curricular Element(s) linked to each Objective:
Goal #X:
Objective(s) for Goal #X:
Curricular Element(s) linked to each Objective:
Goal #X:
Objective(s) for Goal #X:
Curricular Element(s) linked to each Objective:
Goal #X:
Objective(s) for Goal #X:
Curricular Element(s) linked to each Objective:
(ADD ROWS TO TABLE AS NEEDED)

Appendix C

Table of Curriculum Elements:

Curriculum element:	<i>(2.1) Clinical-based practice and patient care experience (examples - precepted sessions, mentored clinics, specialty clinical rotations)</i>
Required activities	
Competencies expected	
How outcomes are measured	
Appendix and page number for evaluation form used (specify which items on evaluation form correspond)	
Curriculum element:	<i>(2.2) Regularly scheduled didactic sessions</i>
Required activities	
Competencies expected	
How outcomes are measured	
Appendix and page number for evaluation form used (specify which items on evaluation form correspond)	
Curriculum element:	<i>(2.3) System-based learning and quality improvement tools that underlie effective front-line improvement in care</i>
Required activities	
Competencies expected	
How outcomes are measured	
Appendix and page number for evaluation form used (specify which items on evaluation form correspond)	

Curriculum element:	<i>(2.4) Population-based health focus – (assessment of community, environmental, and socioeconomic influences on health of patients and data-driven assessment of the population of focus)</i>
Required activities	
Competencies expected	
How outcomes are measured	
Appendix and page number for evaluation form used (specify which items on evaluation form correspond)	
Curriculum element:	<i>(2.5) Leadership and professional development, particularly in inter-professional practice</i>
Required activities	
Competencies expected	
How outcomes are measured	
Appendix and page number for evaluation form used (specify which items on evaluation form correspond)	