

Practice Transition Accreditation Program™ Self-Study Template

Applicant Program Name: Sample New Graduate RN Transition Program

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Responses to the criteria in this template form the basis of the self-study package. Applicants will write a separate narrative to address each program criterion. Descriptions must be accompanied by a specific example to illustrate how each is operationalized.

These narrative responses to criteria along with all supporting attachments, appropriately labeled, should be loaded onto three separate USB drives. The first USB drive must be mailed to ANCC at the address below by your assigned self-study due date.

American Nurses Credentialing Center
ATTN: Accreditation Program Office – PTAP
8515 Georgia Ave., Suite 400
Silver Spring, MD 20910

When an appraiser team is assigned to your self-study review, Accreditation Staff will provide you with mailing addresses for the 2 appraiser USB drives.

Program Overview (PO) and Required Program Documents

The program overview is an essential component of the application process that provides a context for understanding the RN Residency/RN or APRN Fellowship Program (“the program”) and the organization or practice setting(s) where the program is provided. The applicant must submit the following documents and/or narratives:

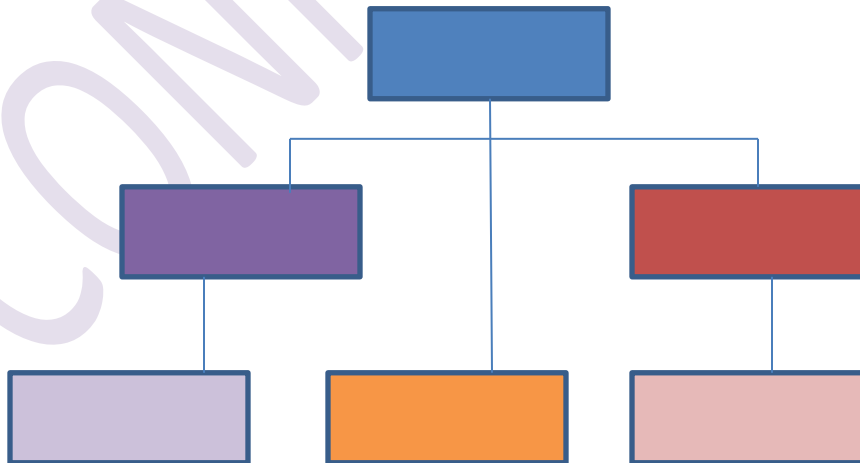
PO: Contextual Information

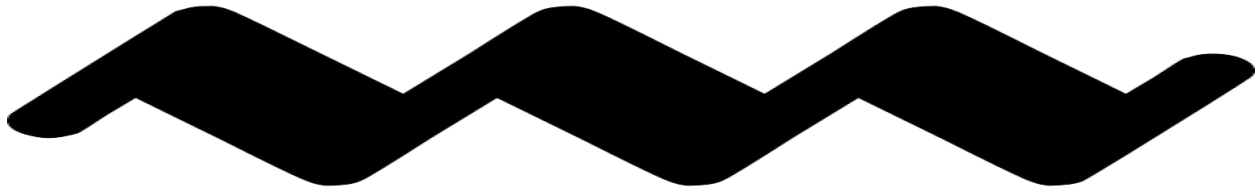
PO 1. Submit an executive summary of the program, including description of the organization or practice setting, program length, scope of the program, and number of residents/fellows accepted annually.

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PO 2. Submit the organizational chart for nursing and/or medical services, including the program and other areas as applicable to reflect lines of authority.

Chart:





(Some criteria content has been removed. The purpose of this document is only to provide an example of how to bookmark a self-study for electronic submission.)

PO: Program Leadership

PO 6. List the personnel for the program, including the following: Program Director, CNO/Executive Leader, and other key stakeholders involved in the program planning, evaluation, or both as applicable.

List (Or complete the *Personnel Form for the RN Residency/RN or APRN Fellowship Program*): See Attachment A Personnel Form

PO 7. Submit position description(s) for the Program Director and other key stakeholders as applicable, such as individuals who develop or deliver program content, and individuals who validate competencies.

Position Description(s):

Program Director: Duis autem vel eum iriure dolor in hendrerit in vulputate velit esse molestie consequat, vel illum dolore eu feugiat nulla facilisis at vero eros et accumsan et iusto odio dignissim qui blandit praesent luptatum zzril delenit augue dui dolore te feugait nulla facilisi. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed diam nonummy nibh euismod tincidunt ut laoreet dolore magna aliquam erat volutpat.

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Clinical Educator: Ut wisi enim ad minim veniam, quis nostrud exerci tation ullamcorper suscipit lobortis nisl ut aliquip ex ea commodo consequat. Duis autem vel eum iriure dolor in hendrerit in vulputate velit esse molestie consequat, vel illum dolore eu feugiat nulla facilisis at vero eros et accumsan et iusto odio dignissim qui blandit praesent luptatum zzril delenit augue dui dolore te feugait nulla facilisi.



PO: Organizational Enculturation

PO 9. Submit the mission, vision, and/or values of the organization or practice setting(s) in which the program is provided.

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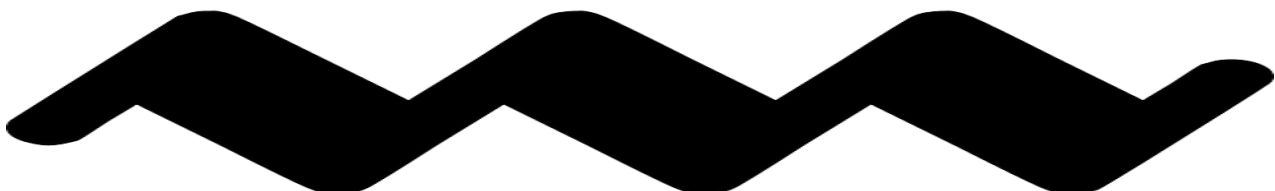


PO: Development and Design

Program Faculty

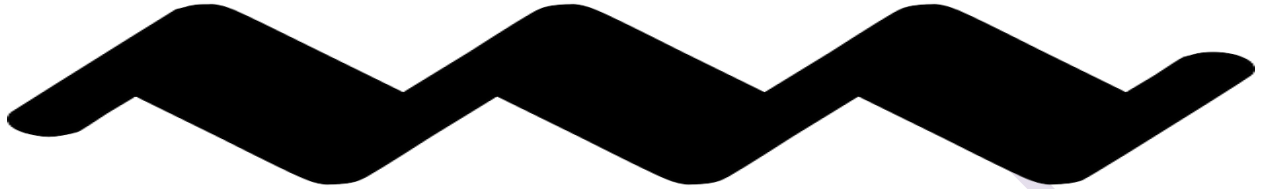
PO 12. List all individuals involved in developing and delivering content for the program, its competencies, and its curriculum.

List (Or complete the *Faculty Form for the RN Residency/RN or APRN Fellowship Program*): See Attachment B Faculty Form

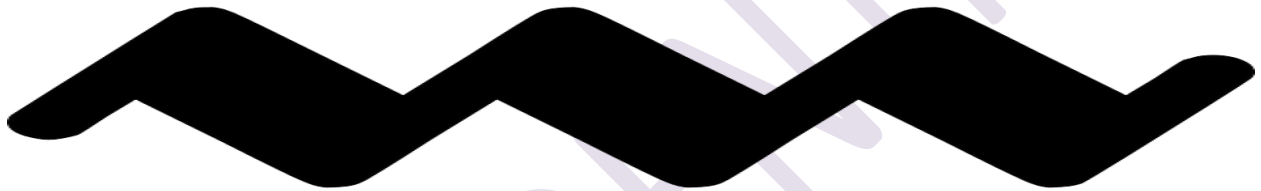


Program Content

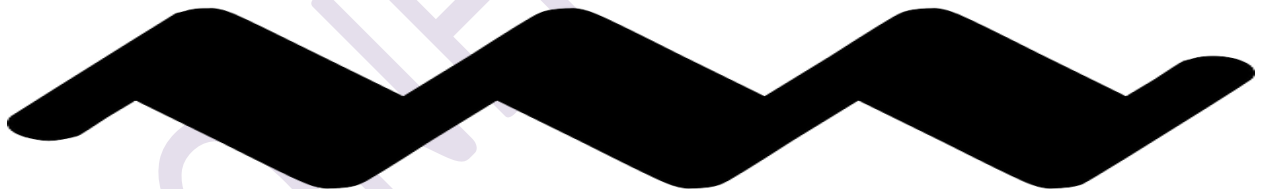
PO 15 Submit tool(s) used to develop and evaluate program content (e.g., needs assessment).



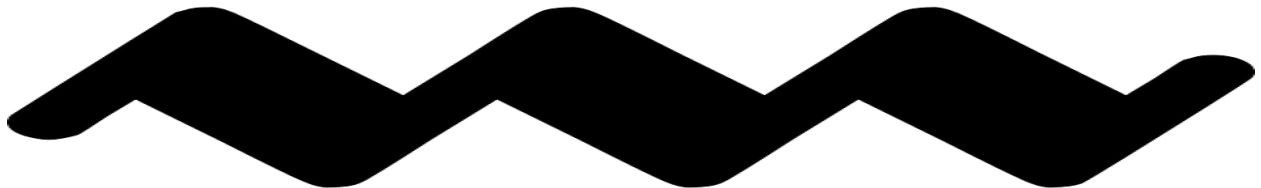
PO: Practice-Based Learning



PO: Nursing Professional Development



PO: Quality Outcomes



Program Criteria

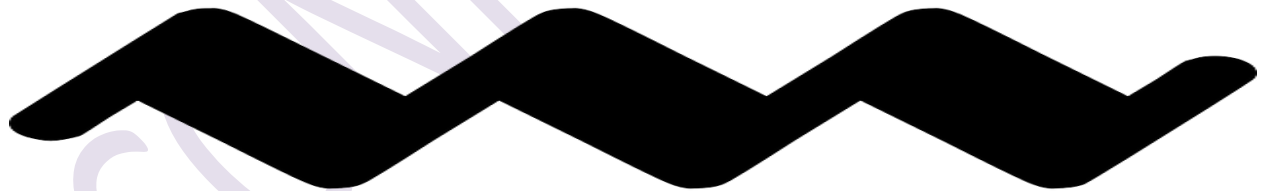
Describe and, using an example, demonstrate how each of the following criteria is met. Each response must include a succinct narrative description of the process used AND a specific example that illustrates how the criterion is operationalized within the RN Residency/RN or APRN Fellowship Program.

Program Leadership (PL)

PL 1. Describe and, using an example, demonstrate how the Program Director ensures that residents'/fellows' learning needs are met through actions such as evaluating aggregate residents'/fellows' evaluation results, stakeholder feedback, and quality outcomes.

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Organizational Enculturation (OE)

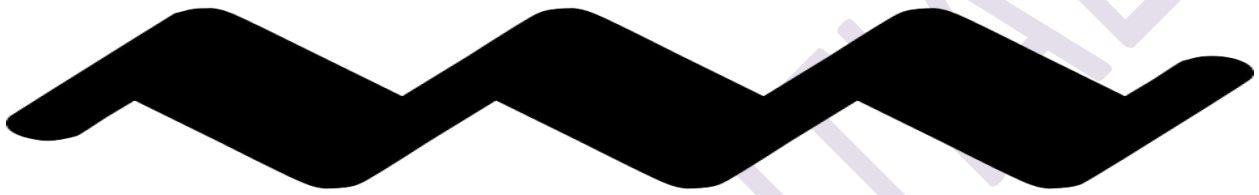
OE 1. Describe and, using an example, demonstrate how the goals of the program are aligned with the mission, vision, and/or values of the organization or practice setting(s).

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Development and Design (DD)

Program Faculty:

DD 1. Describe and, using an example, demonstrate how individuals who are selected to develop, implement, and maintain the program have documented expertise in adult education, program development, or content expertise in subject matter, or a combination thereof.

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Program Content:

DD 4. Describe and, using an example, demonstrate the process used to develop or revise the program content based on data gathered through needs assessments.

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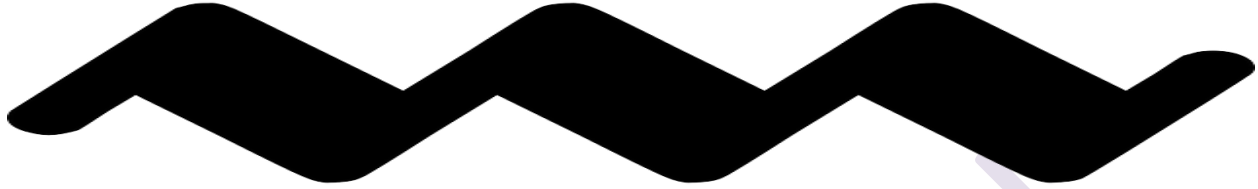
Practice-Based Learning (PBL)

PBL 1. Describe and, using an example, demonstrate how individual incremental goals reflect the psychosocial/developmental needs of the resident or fellow.

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Nursing Professional Development (NPD)

NPD 1. Describe and, using an example, demonstrate how the program supports nursing professional development (refer to opportunities stated in PO19).

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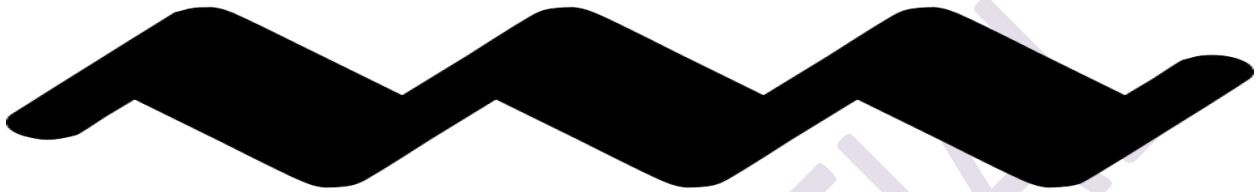
Quality Outcomes (QO)

QO 1. Describe and, using an example, demonstrate the process used for identifying quality outcome measures that are appropriate for the program (e.g., as noted in PO20).

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