Frequently Asked Questions
DNP Programs & CCNE Accreditation

1. What types of doctoral programs in nursing are eligible for CCNE accreditation?

Practice doctorates with the degree title Doctor of Nursing Practice (DNP) are eligible to pursue accreditation by CCNE. Research doctorates (e.g. PhD and DNSc) are not eligible for accreditation. As is the case with all degree programs that are accredited by CCNE, all tracks/program areas within the degree program must be presented for accreditation.

DNP programs presented for accreditation are required to demonstrate incorporation of *The Essentials of Doctoral Education for Advanced Nursing Practice (DNP Essentials)* (AACN, 2006). In keeping with the two foci for DNP programs identified in the *DNP Essentials* (p. 18), CCNE accredits DNP programs with an advanced practice nursing direct care focus, an aggregate/systems/organizational focus, or both foci.

The CCNE Board determined at its April 10-12, 2008 meeting that DNP programs with a nursing education track (major) will not be eligible to pursue accreditation, as CCNE subscribes to the definition of practice identified in the *DNP Essentials*, which broadly defines advanced nursing practice as “any form of nursing intervention that influences health care outcomes for individuals or populations, including the direct care of individual patients, management of care for individuals and populations, administration of nursing and health care organizations, and the development and implementation of health policy” (p. 2). This means that the 1,000 post-baccalaureate clinical hour requirement (required by the *DNP Essentials*) must be completed in a practice setting. Further, the hours should be part of a “supervised academic program” (p. 19). For post-master’s DNP programs, each institution is responsible for assessing how many relevant graduate clinical hours an enrollee enters with, and how many additional hours are required for the student to achieve the 1,000 clinical hour minimum upon degree completion. If desired, practice hours in nursing education settings may be offered in addition to the 1,000 hours. CCNE therefore encourages DNP programs that are preparing nurses for faculty roles to offer electives or a minor with focus on the education related content in addition to the DNP practice content.

As is the case for master’s degree programs, if a nurse anesthesia or nurse-midwifery DNP program is accredited by its respective accrediting agency, it would still be included in the review of the institution’s overall DNP program. It is expected that programs preparing nurse anesthetists and nurse-midwives will continue to also be accredited by their respective accrediting agencies.

2. When should an institution notify CCNE that a DNP program is under development?

Institutions should notify CCNE as soon as possible. When CCNE is notified that an institution is developing a DNP program, CCNE updates its database and other records and includes the institution in important correspondence. Such notification also allows CCNE to provide better services to its constituents and to project programming needs. To notify CCNE that a DNP program is under development, email Lori Schroeder,
3. When should an institution notify CCNE that a DNP program has been implemented?

Per the CCNE substantive change policy, an accredited program is required to notify CCNE of any new nursing program or track or any other significant change. The timeframe for notifying CCNE is no earlier than 90 days before the change but no later than 90 days after the change. With respect to implementation of a new DNP program, the notification must address how the new program affects, or is expected to affect, baccalaureate and/or master’s degree nursing programs already accredited by CCNE and the institution’s ability to continue to comply with the CCNE accreditation standards. The institution should specifically demonstrate that the faculty and other resources dedicated to the accredited baccalaureate and/or master’s programs continue to be sufficient in light of the implementation of the DNP program. The notification should also provide an overview of the DNP program, including information about its approval, timeline, point(s) of entry (post-baccalaureate, post-master’s), curriculum, and resources. Direct all substantive change inquiries and submissions to Crystal Pool, CCNE Assistant Director, at cpool@aacn.nche.edu.

4. What is the timeline for CCNE accreditation of DNP programs?

CCNE began evaluating and accrediting DNP programs during the 2008-2009 academic year. DNP programs must have had students enrolled for at least one year before hosting a CCNE on-site evaluation. The effective date of accreditation for a program is the first day of that program’s most recent on-site evaluation by CCNE. Programs wishing to host a DNP on-site evaluation should notify CCNE of the term (Spring or Fall) and year of interest so the staff can provide appropriate guidance on scheduling. Programs are required to schedule the on-site evaluation with CCNE one year in advance of the visit.

5. Which accreditation standards apply to DNP programs?

CCNE has one set of accreditation standards for all educational programs. This document addresses the requirements for each level of nursing degree program within CCNE’s scope of operation: baccalaureate degree nursing programs, master’s degree nursing programs, and the practice doctorate (DNP). The CCNE Standards for Accreditation of Baccalaureate and Graduate Degree Nursing Programs, amended April 2009, went into effect on January 1, 2010. Thus, any program hosting an evaluation or submitting a report to CCNE after January 1, 2010 must address the 2009 standards.

All DNP programs must be developed in accordance with The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006). In addition, DNP programs preparing nurse practitioners must be developed in accordance with the revised Criteria for Evaluation of Nurse Practitioner Programs (National Task Force, 2008). Note that the NTF Criteria document does not apply to post-master’s DNP programs unless they are preparing individuals as nurse practitioners or preparing individuals for certification and licensure in another population (e.g., the students enter the DNP program as nationally certified family nurse practitioners but are being prepared as pediatric nurse practitioners). Programs are required to use these documents in accordance with the CCNE accreditation standards.

6. What are CCNE’s expectations regarding practice hours in the DNP curriculum?

The 1,000 post-baccalaureate practice hour requirement (refer to the DNP Essentials) must be completed in a supervised academic program.

- For post-baccalaureate DNP programs, a minimum of 1,000 practice hours must be acquired in the DNP
• For post-master’s DNP programs, practice hours must be included in the DNP program, even if the master’s program required 1,000 or more hours. Further, for post-master’s DNP programs, each institution is responsible for assessing how many qualified graduate practice hours an enrollee has upon admission to the DNP program and how many additional hours are required for the student to achieve the 1,000 practice hour minimum upon degree completion.
• The 1,000 practice hours are part of a “supervised academic program” (DNP Essentials, p. 19).

7. For what term of accreditation will DNP programs be eligible?
Consistent with CCNE’s long-standing policy, any new program pursuing initial accreditation by CCNE is eligible for a term of accreditation of up to 5 years. Programs pursuing continuing accreditation by CCNE are eligible for an accreditation term of up to 10 years. All DNP programs are considered by CCNE to be new programs and, thus, will be eligible for a maximum initial accreditation term of 5 years.

8. How can an institution schedule all its nursing degree programs for the same CCNE accreditation review cycle?
CCNE is willing to work with programs, as appropriate, that wish to coordinate the accreditation reviews of multiple nursing degree programs. Programs may request an early accreditation review of an already CCNE-accredited program in order to schedule multiple degree programs on the same accreditation review cycle. However, CCNE is unable to postpone an accreditation term beyond that which was granted by the CCNE Board of Commissioners.

9. Will CCNE conduct joint accreditation visits with other entities?
CCNE has a history of strong collaboration with state boards of nursing, as well as with institutional and specialized accreditation bodies. If requested by the institution, CCNE is willing to collaborate with other regulatory or accrediting agencies to conduct a joint or concurrent on-site evaluation of the DNP program. The institution is responsible for determining the feasibility of such a review and coordinating the effort in accordance with each participating agency’s policies and procedures. If an institution would like to request a joint/concurrent review by CCNE and another agency, please notify Lori Schroeder, CCNE Associate Director, at lschroeder@aacn.nche.edu.

10. What are the CCNE fees related to accreditation of a DNP program?
If the institution has a CCNE-accredited program(s) already, the one-time fee to add a DNP program to the review schedule is $2,000 (FY 2012 and FY 2013). Programs are sent an invoice for this new program fee a few months before the CCNE on-site evaluation. If the institution has no program affiliated with CCNE, new applicant fees apply. New applicant fees depend on the number of degree levels seeking CCNE accreditation. Click here to view the current CCNE Fee Structure, including on-site evaluation fees and annual fees.

Amended January 24, 2012