

Addendums for
2024 Application Manual Practice Transition
Accreditation Program® (PTAP)

Updated: January 8, 2025

The following pages contain the addendums issued by the ANCC Commission on Accreditation in Practice Transition Program (COA-PTP) in 2024. These addendums **are not integrated** into the website's version (Ver 3).

Date Issued	Change	Effective Date
January 23, 2024	Update to Practice Setting Coordinator requirements	August 7, 2024
May 9, 2024	Monitoring for Compliance	May 9, 2024
October 23, 2024	Accreditation with Distinction - PC 5	May 1, 2025
December 5, 2024	Clarification on Demonstrations (PBL and AWD)	August 1, 2025
January 8, 2025	Monitoring for Compliance, Notification of Changes, & Probation, Suspension and Revocation	July 8, 2025

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Director, ANCC PTAP & APPFA

Re: January 2024 Addendums

Date: January 23, 2024

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Current Language	New Approved Language
<ul style="list-style-type: none"> In a <i>multisite, multi-practice setting program</i>, each eligible practice setting must have a centralized person, called the Practice Setting Coordinator (PSC), coordinating the practice setting curriculums across all sites within the program. The Practice Setting Coordinator (PSC) must have a dotted or direct line of authority to the Program Director. In a single site multi-practice setting program, Practice Setting Coordinators (PSC) may be utilized to ensure program consistency. 	<ul style="list-style-type: none"> In a <i>multisite, multi-practice setting program</i>, each eligible practice setting functioning in multiple sites must have a centralized person, called the Practice Setting Coordinator (PSC), coordinating the practice setting curriculums across all sites within the program. The Practice Setting Coordinator (PSC) must have a dotted or direct line of authority to the Program Director. In a single site multi-practice setting program, Practice Setting Coordinators (PSC) may be utilized to ensure program consistency.

Effective date: August 7, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Sr. Director, ANCC PTAP & APPFA

Re: May 9 Addendums

Date: May 9, 2024

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Current Language (page 44)	New Approved Language
<p>Monitoring Compliance with Program Requirements</p> <p>Program Directors are expected to notify the ANCC PTAP/APPFA team of changes or events that might affect their ability to meet or continue to meet ANCC PTAP requirements. Changes must be reported throughout all phases of the appraisal process or at any point during the 4-year accreditation period.</p>	<p>Program Directors are expected to notify the ANCC PTAP/APPFA team of significant changes to an accredited program that include but are not limited to:</p> <ul style="list-style-type: none"> • How the program changes continue to meet all standards • Additions or changes to sites, settings, specialties, or service lines • Changes in curriculum (i.e. going from a vendor to non-vendor or vice versa) <p>The Program Director must contact the PTAP/APPFA Director and/or Assistant Director at practicetransition@ana.org for further information.</p> <p>The Program Director must disclose significant changes to the program to the ANCC PTAP/APPFA team. The Program Director may be required to submit additional documentation to the commission if the change is deemed significant by the ANCC PTAP/APPFA director and/or assistant director.</p>



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Effective date: May 9, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Sr. Director, ANCC PTAP & APPFA

Re: Accreditation with Distinction - PC 5 Addendum

Date: October 23, 2024

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Current Language (page 40)	New Approved Language
<p>PC 5. Describe and demonstrate how learners engage in evidence-based practice, quality improvement, or research projects with interprofessional teams that result in practice change.</p> <p>a. Submit evidence demonstrating how a learner impacted the organization through the practice change using pre-data, intervention date, and post-data.</p>	<p>PC 5. Describe and demonstrate how learners engage in evidence-based practice, quality improvement, or research projects with interprofessional teams that result in practice change.</p> <p>a. Submit evidence demonstrating how a learner impacted the organization through the practice change using pre- and post-intervention data. The learner's project implementation date must occur during the program.</p>

Effective date: May 1, 2025

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Sr. Director, ANCC PTAP & APPFA

Re: Clarification on Demonstrations (PBL and AWD)

Date: December 5, 2024

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Current Language (page 19)	New Approved Language
<p>A narrative response that verifies how the described structure and processes were operationalized in the program through a specific event or lived experience.</p> <ul style="list-style-type: none"> • Only one narrative demonstration is allowed per criterion—all participating sites and practice settings must be represented in a minimum of one demonstration within the entirety of the ANCC PTAP self-study. • Demonstrations must include names, roles, and credentials (if applicable) for any individual program stakeholder or learner. • Narrative demonstrations cannot be anonymous. • The narrative demonstration should be congruent with the processes included in the description. <p>DEMONSTRATION TIME FRAME</p> <p>For new programs seeking accreditation, the demonstration must have occurred within the 24-month time frame prior to self-study submission. For reaccrediting</p>	<p>A narrative response that verifies how the described structure and processes were operationalized in the program through a specific event or lived experience.</p> <ul style="list-style-type: none"> • Only one narrative demonstration is allowed per criterion—all participating sites and practice settings must be represented in a minimum of one demonstration within the entirety of the ANCC PTAP self-study. • Demonstrations must include names, roles, and credentials (if applicable) for any individual program stakeholder or learner. • All demonstrations within the Practice-Based Learning domain and Accreditation with Distinction standards PC 2, 3, and 4 must include the following elements: learner name, practice setting, program start date, and program completion date. • The knowledge learned during the program must be applied in the practice setting <u>during</u> the program for all the

<p>programs, the demonstration must have occurred within the 48-month time frame prior to self-study submission.</p>	<p>demonstrations for the Practice-Based Learning domain.</p> <ul style="list-style-type: none"> • The knowledge learned during the program must be applied in the practice setting <u>during the program or within 6 months post completion</u> for all the demonstrations for the Accreditation with Distinction standards PC 2, 3, and 4. • Narrative demonstrations cannot be anonymous. • The narrative demonstration should be congruent with the processes included in the description. <p>DEMONSTRATION TIME FRAME</p> <p>For new programs seeking accreditation, the demonstration must have occurred within the 24-month time frame prior to self-study submission. For reaccrediting programs, the demonstration must have occurred within the 48-month time frame prior to self-study submission.</p>
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Effective date: August 1, 2025

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Sr. Director, ANCC PTAP & APPFA

Re: Monitoring for Compliance, Notification of Changes, & Probation, Suspension and Revocation

Date: January 8, 2025

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Monitoring for Compliance

May 9, 2024 Addendum	New Approved Language
<p>Program Directors are expected to notify the ANCC PTAP/APPFA team of significant changes to an accredited program that include but are not limited to:</p> <ul style="list-style-type: none"> • How the program changes continue to meet all standards • Additions or changes to sites, settings, specialties, or service lines • Changes in curriculum (i.e. going from a vendor to non-vendor or vice versa) <p>The Program Director must contact the PTAP/APPFA Director and/or Assistant Director at practicetransition@ana.org for further information.</p> <p>The Program Director must disclose significant changes to the program to the ANCC PTAP/APPFA team. The Program Director may be required to submit additional documentation to the commission if the change is deemed significant by the ANCC PTAP/APPFA director and/or assistant director.</p>	<p>Program Directors are expected to notify the ANCC PTAP/APPFA team of significant changes to an accredited program that might impact their ability to meet or continue to meet ANCC PTAP requirements. include but are not limited to:</p> <ul style="list-style-type: none"> • How the program changes continue to meet the standards • Additions or changes to sites, settings, specialties, or service lines • Changes in the curriculum (i.e., going from a vendor to a non-vendor or vice versa) <p>The Program Director must contact the PTAP/APPFA Director and/or Assistant Director at practicetransition@ana.org for further information. If the change is deemed significant by the ANCC PTAP/APPFA director and/or assistant director, the program director may be required to submit additional documentation to the Commission on Accreditation in Practice Transition Programs.</p>

Notification of Changes

Page 16 and 44	New Approved Language
<p>Accredited Program Directors must notify the ANCC PTAP/APPFA team within 10 business days of the occurrence or discovery of:</p> <ul style="list-style-type: none"> • Changes that alter the information provided in the current accreditation, including: <ul style="list-style-type: none"> • Site(s) address • Organization name • Program name; • Change in CNO, Program Director, or SC/PSC (as applicable to practice setting); <ul style="list-style-type: none"> • <i>Note:</i> The new Program Director or SC/PSC must comply with the requirements of PTAP eligibility. • Loss of nursing license or other disciplinary action for the CNO, Program Director, or SCs (as applicable to practice setting); • Change in ownership; • Changes or events that impair the ability to meet or continue to meet PTAP requirements or that make the program ineligible for accreditation or reaccreditation; • Indication of potential instability (e.g., labor strike, reduction in workforce, bankruptcy); • Change in an organization’s status within a system; • Adverse media coverage related to the program; • Any finally and fully adjudicated unfair labor-practice charges or adverse decisions related to discrimination or other legal 	<p>Notification of Changes</p> <p>Accredited Program Directors must notify the ANCC PTAP/APPFA team within 10 business days of the occurrence or discovery of:</p> <ul style="list-style-type: none"> • Changes that alter the information provided in the current accreditation, including: <ul style="list-style-type: none"> ○ Site(s) address ○ Organization name ○ Program name • Change in CNO, Program Director, or SC/PSC (as applicable to practice setting); <ul style="list-style-type: none"> ○ <i>Note:</i> The new Program Director or SC/PSC must comply with the requirements of PTAP eligibility. • Loss of nursing license or other disciplinary action for the CNO, Program Director, SCs, and PSCs (as applicable to practice setting); • Change in ownership; • Significant changes to the accredited program that include but are not limited to: <ul style="list-style-type: none"> ○ How the program changes continue to meet the standards ○ Additions or changes to sites, settings, specialties, or service lines ○ Changes in the curriculum (i.e., going from a vendor to non-vendor or vice versa)

<p>violations involving registered nurses, practitioners, or physicians in the workplace; and</p> <ul style="list-style-type: none"> • Suspension or exclusion from federal or state health care programs. <p>Written notification of such changes and events must be documented on the required change notification form and submitted within 10 business days.</p>	<ul style="list-style-type: none"> • Changes or events that impair the ability to meet or continue to meet PTAP requirements or that make the program ineligible for accreditation or reaccreditation; • Indication of potential instability (e.g., labor strike, reduction in workforce, bankruptcy); • Change in an organization's status within a system; • Adverse media coverage related to the program; • Any finally and fully adjudicated unfair labor-practice charges or adverse decisions related to discrimination or other legal violations involving registered nurses, practitioners, or physicians in the workplace; and • Suspension or exclusion from federal or state health care programs. <p>Failure to provide timely written notification under this section could result in fines, denial of an application for accreditation or reaccreditation, probation, suspension, and/or revocation of accreditation.</p> <p>Written notification of such changes and events must be documented on the required change notification form and submitted by email, to practicetransition@ana.org, within 10 business days.</p>
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Probation, Suspension, Revocation

Page 46	New Approved Language
<p>The COA-PTP, at its discretion, may decide to place an accredited program on probation for a defined period of time when it deems a violation or misconduct to be curable. An accredited program that is placed on probation will still be able to state that it is accredited during the probationary period; however, during the probationary period, the accredited program is expected to take steps to correct the issues giving rise to the decision to place the accredited program on probation. A program placed on probation will be notified in writing by the PTAP/APPFA Director of the cause for probation, the duration of the probation, and the required corrective action. If, at the conclusion of the probationary period, the accredited program cannot demonstrate that sufficient corrective action has taken place, the COA-PTP reserves the right to suspend or revoke accreditation.</p> <p>Suspended or revoked programs must immediately cease:</p> <ul style="list-style-type: none"> • Referring to themselves in any way as ANCC accredited; • Using the ANCC accreditation statement; and • Using ANCC intellectual property, including but not limited to trademarks, trade names, and logos. <p>Suspended or revoked programs will be considered “not in good standing with the ANCC.”</p> <p>The PTAP/APPFA Director will notify the accredited program in writing of probation,</p>	<p>An accredited program may be placed on probation, or its accreditation may be suspended and/or revoked as a result of any of these actions:</p> <ul style="list-style-type: none"> • Failure to provide notification as provided in this manual • Significant changes to the program that impact the ability to maintain accreditation criteria. Examples include but are not limited to the following: <ul style="list-style-type: none"> ○ How the program changes do not continue to meet the standards ○ Changes in the curriculum (i.e., going from a vendor to a non-vendor or vice versa) • Violation of any federal, state, or local laws (or international equivalents) or regulations that affect the program’s ability to adhere to ANCC accreditation criteria; • Failure to pay outstanding investment fees; • Failure to submit the annual report; • COA-PTP investigation and verification of written complaints or charges by consumers or others; • Refusal to comply with a COA-PTP investigation; • Misrepresentation; • Misuse of the ANCC accreditation statement; or • Misuse of ANCC intellectual property, including but not limited

<p>suspension, or revocation of accreditation. Neither probation nor suspension is a prerequisite to revocation. At its sole discretion, the COA-PTP may revoke accreditation without first suspending accreditation.</p> <p>Suspended programs may apply for reinstatement within 120 days of the suspension date. To apply for reinstatement of accreditation, the accredited program must submit the applicable reinstatement fee and documentation demonstrating violation correction. Reinstatement may be granted if the suspended program adequately demonstrates that it will fully adhere to the ANCC PTAP criteria and requisites upon reinstatement. Accredited programs that have been reinstated may be required to submit progress reports to the COA-PTP. Suspended programs that fail to apply for reinstatement within 120 days shall have their accreditation revoked.</p> <p>Accredited programs that have had their accreditation status revoked may not apply for ANCC accreditation for 2 years from the date of revocation. Programs seeking accreditation after revocation are considered new applicants.</p> <p>Programs that have had their accreditation status suspended or revoked will be removed from the ANCC/APPFA Directory of Accredited Practice Transition Programs. If an accredited program believes that its suspension or revocation is improper, the program (appellant) may submit an appeal in writing and pay the associated fee. Please contact the ANCC PTAP/APPFA team for further information regarding the appeal process. The appellant will retain the accreditation</p>	<p>to trademarks, trade names, and logos.</p> <p>Probation</p> <p>The COA-PTP, at its discretion, may decide to place an accredited program on probation for a defined period of time when it deems a violation or misconduct to be curable. An accredited program that is placed on probation will still be able to state that it is accredited during the probationary period; however, during the probationary period, the accredited program is expected to take steps to correct the issue(s) giving rise to the decision to place the accredited program on probation. A program placed on probation will be notified in writing by the PTAP/APPFA Director of the cause(s) for probation, the duration of the probation, and the required corrective action. If, at the conclusion of the probationary period, the accredited program cannot demonstrate that sufficient corrective action has taken place, the COA-PTP reserves the right to suspend or revoke accreditation.</p> <p>Suspended or revoked programs must immediately cease:</p> <ul style="list-style-type: none"> • Referring to themselves as ANCC accredited; • Using the ANCC accreditation statement; and • Using ANCC intellectual property, including but not limited to trademarks, trade names, and logos. <p>Suspended or revoked programs will be considered “not in good standing with the ANCC.” The PTAP/APPFA Director will notify the accredited program in writing of probation, suspension, or revocation of accreditation. Neither probation nor</p>
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status held prior to the COA-PTP decision that it appeals.

suspension is a prerequisite to revocation. At its sole discretion, the COA-PTP may revoke accreditation without first suspending accreditation.

Suspended programs may apply for reinstatement within 120 days of the suspension date. To apply for reinstatement of accreditation, the accredited program must submit the applicable reinstatement fee and documentation demonstrating violation correction.

Reinstatement may be granted if the suspended program adequately demonstrates that it will fully adhere to the ANCC PTAP criteria and requisites upon reinstatement. Accredited programs that have been reinstated may be required to submit progress reports to the COA-PTP. Suspended programs that fail to apply for reinstatement within 120 days shall have their accreditation revoked.

Accredited programs that have had their accreditation status revoked may not apply for ANCC accreditation for 2 years from the date of revocation. Programs seeking accreditation after revocation are considered new applicants.

Programs that have had their accreditation status suspended or revoked will be removed from the ANCC/APPFA Directory of Accredited Practice Transition Programs. If an accredited program believes that its suspension or revocation is improper, the program (appellant) may submit an appeal in writing and pay the associated fee. Please contact the ANCC PTAP/APPFA team for further information regarding the appeal process. The appellant will retain



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	the accreditation status held prior to the COA-PTP decision that it appeals.
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Effective date: July 8, 2025

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

The following pages are the addendums issued by the ANCC Commission on Accreditation in Practice Transition Program (COA-PTP) in 2023. The addendums below **are integrated** into our website's current manual (Ver 3). The current version of the 2024 Application Manual Practice Transition Accreditation Program® (PTAP) can be found [here](#).

Date Issued	Change	Effective Date
June 1, 2023	Accreditation with Distinction Standards: CR2b Language update	January 1, 2024
June 1, 2023	Accreditation with Distinction Standards: PC1 & 1a language update	January 1, 2024
June 1, 2023	ANCC PTAP Standards: PG/OM 1 SDa language update	January 1, 2024
June 27, 2023	ANCC PTAP Standards: PL 1 language update	January 1, 2024
June 27, 2023	Accreditation with Distinction Standards: CR2a. language update	January 1, 2024
August 8, 2023	ANCC PTAP Standards <ol style="list-style-type: none"> 1. Sites from same healthcare system and healthcare system definition 2. Maximum size of a program 3. New standard: PL 8 4. Updated Site Coordinator definition 5. Updated Practice Setting Coordinator 6. PL 1 language update and quality assurance definition 	January 1, 2024
September 11, 2023	ANCC PTAP Standards <ol style="list-style-type: none"> 1. Glossary term – Dotted Line of Authority 2. Glossary term – Direct Line of Authority 3. Site Coordinator clarification 4. Glossary term – Site Coordinator 	January 1, 2024



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	5. Glossary term – Practice Setting Coordinator	
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To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Director, ANCC PTAP & APPFA

Re: Accreditation with Distinction Standards – CR 2b

Date: June 2, 2023

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Old Language	New Language
<p>CR 2b. Describe how the Program Director publishes or presents about transition to practice.</p> <p>a. Submit evidence of one publication or presentation (state, national, or international level) within the last 24 months (new applicant) or 48 months (reaccrediting applicant).</p>	<p>CR 2b. Describe how the Program Director facilitates publications and/or presentations about transition to practice.</p> <p>A. Submit evidence of one publication or presentation (state, national, or international level) from the program within the last 24 months (new applicant) or 48 months (reaccrediting applicant).</p>

Effective date: January 1, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Director, ANCC PTAP & APPFA

Re: Accreditation with Distinction Standards – Program Choice 1 and 1a (PC 1 & 1a)

Date: June 2, 2023

Old Language	New Language
<p>PC 1. Describe and demonstrate how the program utilizes an advisory board and/or academic partnership to achieve program goals.</p> <p>a. Submit a list of members (advisory board or academic partner and their current roles, as applicable).</p>	<p>PC 1. Describe and demonstrate how the program utilizes an advisory board and/or academic partnership to achieve program goals.</p> <p>a. Submit PG/OM 1 SD a. from PTAP self-study</p> <p>b. Submit evidence of your advisory board or academic partnership influencing at least one of the programmatic goals (e.g., meeting minutes).</p>

Effective date: January 1, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Director, ANCC PTAP & APPFA

Re: PTAP Standards – PG/OM 1 SDa

Date: June 2, 2023

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Old Language	New Language
<p>PG/OM 1 Supporting Documentation (PG/OM 1 SD)</p> <p>a. Submit five program goals in SMART format with associated outcome measures and data for each of the following categories:</p> <p>For each goal, include:</p> <ul style="list-style-type: none"> • <i>A brief description of the outcome measure,</i> • <i>A target benchmark, and</i> • <i>Aggregate outcome measure data representing 24 months of data prior to self-study submission or from initiation of program to self-study submission for new programs operating less than 24 months.</i> <p>Required categories:</p> <ol style="list-style-type: none"> 1. Nursing Professional Development 2. Learner Competency 3. Self-Reported Measure (learner-focused; RN Residency ONLY: using a valid and reliable instrument) 	<p>PG/OM 1 Supporting Documentation (PG/OM 1 SDa)</p> <ul style="list-style-type: none"> ▪ a. Submit one program goal in SMART format with associated outcomes measures and data for each of the following required categories: <p>Required categories:</p> <ol style="list-style-type: none"> 1. Nursing Professional Development 2. Learner Competency 3. Self-Reported Measure (learner-focused) 4. Stakeholder Evaluation 5. Financial <p>Optional Category:</p> <ol style="list-style-type: none"> 6. Patient Outcomes <p>For each goal, include:</p> <ul style="list-style-type: none"> • A brief description of the outcome measure, • A target benchmark, and

<p>4. Stakeholder Evaluation 5. Financial <i>Optional category:</i> 6. Patient Outcomes</p> <p>To meet the requirements of PG/OM 1 SD, programs utilizing published research tools for SMART goals must follow author requirements for tool use and data reporting. Author requirements for tool use must be followed to maintain its psychometric properties (validity and reliability) and the integrity of its measures. All research tools used in PG/OM 1 SD must be referenced.</p>	<ul style="list-style-type: none"> Aggregate outcome measure data representing 24 months of data prior to self-study submission or from initiation of program to self-study submission for new programs operating less than 24 months. For at least one of the five required categories, include a reference to the use of a valid and reliable tool. <p>To meet the requirements of PG/OM 1 SD, programs utilizing published research tools for SMART goals must follow author requirements for tool use and data reporting. Author requirements for tool use must be followed to maintain its psychometric properties (validity and reliability) and the integrity of its measures. All research tools used in PG/OM 1 SD must be referenced.</p>
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Effective date: January 1, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Director, ANCC PTAP & APPFA

Re: Accreditation with Distinction Standards – CR 2a

Date: June 27, 2023

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Old Language	New Language
<p>CR2a. Describe and demonstrate how the Program Director is required to be certified in Nursing Professional Development or Nurse Educator and/or has advanced education (e.g., PhD, EdD, or DNP).</p> <p>a. Submit evidence of current Program Directors certification in Nursing Professional Development or Nurse Educator and/or advanced education (e.g., PhD, EdD, or DNP).</p>	<p>CR2a. Describe and demonstrate how the Program Director is required to participate in accredited continuing professional development (or international equivalent) related to adult learning principles or program development.</p> <p>a. Submit evidence of the current Program Director 8 hours (new applicant) or 16 hours (reaccrediting applicant) accredited professional development (or international equivalent) related to adult learning principles or program development within the last 24 months (new applicant) or 48 months (reaccrediting applicant).</p>

Effective date: January 1, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.



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To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Director, ANCC PTAP & APPFA

Re: PTAP Standards – PL 1

Date: June 27, 2023

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Old Language	New Language
PL 1. Describe and demonstrate how the Program Director is accountable for ensuring that the program is consistently operationalized throughout all participating practice setting(s) and/or site(s).	PL 1. <i>(multisite/multi-practice setting only)</i> Describe and demonstrate how the Program Director is accountable for ensuring that the program is consistently operationalized throughout all participating practice setting(s) and/or site(s).

Effective date: January 1, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Director, ANCC PTAP & APPFA

Re: August 2023 Addendums

Date: August 8, 2023

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

Addendum 1- Sites from Healthcare System

Each site within a program must be from the same **healthcare system**.

Definition - Healthcare System

“A multi-hospital system is two or more hospitals owned, leased, sponsored, or contract managed by a central organization” (American Hospital Association, 2021).

Addendum 2 - Maximum size of a program

The maximum size of an accreditable program to up to 30 sites.

Addendum 3 - New standard under Program Leadership

PL 8. (*multisite program only*) Describe and demonstrate how the Program Director meets regularly with the system's highest-ranking nursing leader(s) (e.g., CNE, CNO, Nursing Leadership Council) to report on the program.

Addendum 4 - Site Coordinator definition revision

- In a *multisite multi-practice setting program*, each site **must** have a Site Coordinator (SC). The Site Coordinator (SC) must have a direct or dotted line of authority to the Program Director.

- In a *multisite single practice setting program*, each site **may** utilize Site Coordinators (SC) to ensure program consistency.

SCs must maintain a current, valid license as an RN, hold a baccalaureate degree or higher in nursing, and have education and/or experience in adult learning principles.

Addendum 5 – Practice Setting Coordinator definition revision

- In a *multisite, multi-practice setting program*, each eligible practice setting **must** have a centralized person, called the Practice Setting Coordinator (PSC), coordinating the practice setting curriculums across all sites within the program. The Practice Setting Coordinator (PSC) must have a dotted or direct line of authority to the Program Director.
- In a single site multi-practice setting program, Practice Setting Coordinators (PSC) **may** be utilized to ensure program consistency

Addendum 6 – Updated PL 1 – Quality Assurance

PL 1. (*multi-site and multi-practice setting only*) Describe and demonstrate how the Program Director is accountable for ensuring that the program is consistently operationalized throughout all participating practice setting(s) and site(s) without deviation or variability* through the **quality assurance process**.

Site/practice setting variations in workflow, equipment, documentation, or local/state requirements are all allowed but must be documented during the **quality assurance process.*

- **PL 1 Supporting Documentation a.** Submit evidence from each site that the quality assurance process has been conducted at a minimum annually within the program.

Definition - Quality Assurance Process – The Program Director ensures the program is effectively and consistently conducted at all sites. The Program Directors must meet regularly with all sites to review congruence with the standardized program.

The **Quality Assurance Process** must include a review of the following:

1. Curriculum review of each practice setting
 - a. **Site/practice setting variations in workflow, equipment, documentation, or local/state requirements are all allowed but must be documented during the quality assurance process.*



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2. Competency evaluation requirement of each practice setting
3. Program orientation
4. Preceptor selection, education, and evaluation
5. Mentorship process
6. Monitoring plan for recognition of deviation (review of PG/OM 1 SD a. data at each site)
7. Process improvement plan for the deviation (if a deviation is found during the quality assurance process)

Effective date: January 1, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.

To: Accredited PTAP Programs, Applicant PTAP Programs, and Interested Programs

From: Sheryl Cosme DNP, RN, NPD-BC
Director, ANCC PTAP & APPFA

Re: September 2023 Addendums

Date: September 11, 2023

The Commission on Accreditation in Practice Transition Programs (COA-PTP) has voted to clarify the below areas in the 2024 Practice Transitions Accreditation Program® Application Manual.

These addendums further clarify what was posted on August 8, 2023, by the COA-PTP.

Addendum 1- Glossary Term – Dotted Line of Authority

An indirect or secondary reporting structure of a position(s) that defines accountability and responsibility for the program. However, the overall supervision, management, and evaluation of the position rests with the position's permanent, immediate supervisor, which is reflected by a direct line of authority.

Addendum 2 – Glossary Term – Direct Line of Authority

A direct reporting structure of a position(s) that defines accountability and responsibility for the program, including the supervision, management, and evaluation of the position.

Addendum 3 - Site Coordinator (SC) Clarification

- In a *multisite multi-practice setting program of 11 sites or larger*, each site **must** have a Site Coordinator. The Site Coordinator must have a direct or dotted line of authority to the Program Director. The Program Director **may not** be a Site Coordinator.
- In a *multisite multi-practice setting program of 2-10 sites*, each site **may** have a Site Coordinator. The Site Coordinator must have a direct or dotted line of authority to the Program Director. The Program Director **may** be a Site Coordinator.

- In a *multisite single practice setting program*, each site **may** utilize Site Coordinators to ensure program consistency. **The Program Director may be a Site Coordinator.**
- The Site Coordinator(s) must maintain a current, valid license as an RN, hold a baccalaureate degree or higher in nursing, and have education and/or experience in adult learning principles.

Addendum 4 – Glossary Term – Site Coordinator (SC)

*A registered nurse with a current, valid license as an RN, a baccalaureate degree or higher in nursing, and education or experience in adult learning who acts as the site representative for a multi-site program, and who has responsibility for ensuring that all components of the program are consistently operationalized within their assigned site. **The Site Coordinator can have a dual role as a Practice Setting Coordinator if they are an expert in that setting.***

Addendum 5 – Glossary Term - Practice Setting Coordinator

A registered nurse with a current, valid license as an RN, a baccalaureate degree or higher in nursing, and education or experience in adult learning who acts as the practice setting representative for either a single or multi-site program, and who has responsibility for ensuring that all components of the program are consistently operationalized within his or her assigned practice setting. **The individual must have expertise in the specialty they represent. The Practice Setting Coordinator can be the Program Director, but the practice setting they cover must be their area of expertise. The Practice Setting Coordinator may have a dual role as a Site Coordinator and Practice Setting Coordinator or Program Director and Practice Setting Coordinator.**

Effective date: January 1, 2024

Please contact Sheri Cosme with any questions at sheryl.cosme@ana.org.