The following pages are the addendums issued by the ANCC Commission on Accreditation in Practice Transition Program (COA-PTP) in 2023:

<table>
<thead>
<tr>
<th>Date Issued</th>
<th>Change</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 1, 2023</td>
<td>Accreditation with Distinction Standards: CR2b Language update</td>
<td>January 1, 2024</td>
</tr>
<tr>
<td>June 1, 2023</td>
<td>Accreditation with Distinction Standards: PC1 &amp; 1a language update</td>
<td>January 1, 2024</td>
</tr>
<tr>
<td>June 1, 2023</td>
<td>ANCC PTAP Standards: PG/OM 1 SDa language update</td>
<td>January 1, 2024</td>
</tr>
<tr>
<td>June 27, 2023</td>
<td>ANCC PTAP Standards: PL 1 language update</td>
<td>January 1, 2024</td>
</tr>
<tr>
<td>June 27, 2023</td>
<td>Accreditation with Distinction Standards: CR2a. language update</td>
<td>January 1, 2024</td>
</tr>
<tr>
<td>August 8, 2023</td>
<td>ANCC PTAP Standards</td>
<td>January 1, 2024</td>
</tr>
<tr>
<td></td>
<td>1. Sites from same healthcare system and healthcare system definition</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Maximum size of a program</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. New standard: PL 8</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Updated Site Coordinator definition</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5. Updated Practice Setting Coordinator</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6. PL 1 language update and quality assurance definition</td>
<td></td>
</tr>
</tbody>
</table>
All addendums issued in 2023 are not included in the current version of the 2024 Application Manual Practice Transition Accreditation Program® (PTAP)

The current version of the 2024 Application Manual Practice Transition Accreditation Program® (PTAP) can be found here.
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.

<table>
<thead>
<tr>
<th>Old Language</th>
<th>New Language</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CR 2b.</strong> Describe how the Program Director publishes or presents about transition to practice.</td>
<td><strong>CR 2b.</strong> Describe how the Program Director facilitates publications and/or presentations about transition to practice.</td>
</tr>
<tr>
<td>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).</td>
<td>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).</td>
</tr>
</tbody>
</table>

**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

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

**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.

<table>
<thead>
<tr>
<th>Old Language</th>
<th>New Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>PG/OM 1 Supporting Documentation (PG/OM 1 SD)</td>
<td>PG/OM 1 Supporting Documentation (PG/OM 1 SDa)</td>
</tr>
</tbody>
</table>
| a. Submit five program goals in SMART format with associated outcome measures and data for each of the following categories:  
For each goal, include:  
• A brief description of the outcome measure,  
• A target benchmark, and  
• 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.  
Required categories:  
1. Nursing Professional Development  
2. Learner Competency  
3. Self-Reported Measure (learner-focused; RN Residency ONLY: using a valid and reliable instrument) | a. Submit one program goal in SMART format with associated outcomes measures and data for each of the following required categories:  
**Required categories:**  
1. Nursing Professional Development  
2. Learner Competency  
3. Self-Reported Measure (learner-focused)  
4. Stakeholder Evaluation  
5. Financial  
**Optional Category:**  
6. Patient Outcomes  
For each goal, include:  
• A brief description of the outcome measure,  
• A target benchmark, and |
| 4. Stakeholder Evaluation  | • 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.  
| 5. Financial | • For at least one of the five required categories, include a reference to the use of a valid and reliable tool.  
| Optional category:  |  
| 6. Patient Outcomes |  

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.

**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.

<table>
<thead>
<tr>
<th>Old Language</th>
<th>New Language</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CR2a.</strong> 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).</td>
<td><strong>CR2a.</strong> 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.</td>
</tr>
<tr>
<td>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).</td>
<td>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).</td>
</tr>
</tbody>
</table>

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 – 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.

<table>
<thead>
<tr>
<th>Old Language</th>
<th>New Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>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).</td>
<td>PL 1. (multi-site/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/or site(s).</td>
</tr>
</tbody>
</table>

**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.

o 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.
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.