Appendix A:
Criteria for Evaluation of Nurse Practitioner Programs
Evidence Checklist

The checklist provides a mechanism for documenting that criteria have been met and the required documentation provided. This form is provided as one example of a tool for tracking. Additional materials and narrative should accompany the form if used in order to provide full documentation for accreditation.

I. Mission and Governance

**Standard:** The institution’s mission/philosophy/values and governance achieve educational excellence through a structure that addresses quality assurance, quality improvement, and diversity, equity, and inclusion (DEI). Effective, ongoing formal processes are in place for self-assessment and planning for the purpose of program improvement. Through faculty governance, institutional policies commit to supporting quality within the NP program.

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<td><strong>Criterion I.A.</strong> The mission/philosophy/values of the institution promote academic excellence and support NP education at the graduate level.</td>
<td><strong>Required Evidence:</strong> • The mission/philosophy/values statements of the governing institution and nursing education unit. • The mission/philosophy/values statements of the institution and nursing education unit are reflected across the NP curriculum, delivery modality, and program outcomes. • The mission/philosophy/values statements of the institution are accessible to the public.</td>
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<td><strong>Criterion I.B.</strong> The governance structure within the institution facilitates ongoing quality improvement through participation in the development, implementation, maintenance, and evaluation of the NP program by a community of interest, including administrators, faculty, students, and practice partners.</td>
<td><strong>Required Evidence:</strong> • NP program defines the community of interest and shows a clear pathway of inclusion and opportunity to provide input, virtually or in person, regarding the governance of the NP program. • Minutes of meetings held with the community of interest. • Minutes of meetings documenting development, implementation, maintenance, and evaluation of the NP program, which depict how input from the community of interest has been utilized. • Minutes reflecting ongoing input and documentation of actions based on data collected from the community of interest.</td>
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| **Criterion I.C.** The NP program maintains accessible, updated written policies and procedures that reflect equitable and non-discriminatory practices. | **Required Evidence:**  
- Processes for review of policies and procedures to ensure policies and implementation are equitable and non-discriminatory.  
- Policies and procedures, including date reviewed, that establish:  
  - Published materials for student recruitment, including program length, tuition, and fees.  
  - Admission, progression, and graduation requirements.  
  - Selection of clinical sites and minimum preceptor qualifications.  
  - Selection and use of simulation for learning in alignment with the national best practices and/or standards identified by the NP program.  
  - Ongoing faculty input into curriculum development and revision.  
  - Faculty, preceptor, clinical site, and student evaluation.  
  - Timelines for review of policies, procedures, and handbooks.  
- Relevant handbooks or program materials that inform and support faculty, students and preceptors. | - |
| **Criterion I.D.** The NP Program has policies and/or initiatives or follows institutional policies and/or initiatives that support a diverse, equitable, and inclusive working and learning environment. | **Required Evidence:**  
- Published DEI policy or written statement.  
- Strategies, activities, and resources to address DEI.  
- Institutional or program human resource policies supporting inclusive and diverse faculty and staff recruitment and hiring processes. | - |
| **Criterion I.E.** The institution engages in ongoing, systematic, and focused recruitment and retention activities to achieve mission-appropriate diversity among its students, faculty, administrative staff, and other relevant members of the academic and clinical community. | **Required Evidence:**  
- Policy goals and outcomes for achieving mission-appropriate DEI.  
- Policies, processes, and actions for recruitment and retention of diverse faculty, administrative staff, students, preceptors, and other relevant members of the academic and clinical community.  
- Retention plan with measurable DEI outcomes. | - |
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| **Criterion I.F.** For each NP population focused track, the institution employs an NP faculty member who holds an institutional appointment to provide direct oversight of the track. This individual is doctorally prepared, currently licensed or authorized to practice, and nationally board certified as an NP in the population focus including either primary or acute care. | **Required Evidence:**  
- The population focused faculty member with track oversight has clear role and duty guidelines as evidenced with the following documentation:  
  - Work assignment with dedicated time to provide administrative, resources, curriculum and evaluation oversight for the population focused track.  
  - Track-specific position responsibilities of the faculty member who provides direct oversight to the NP population focused track, including expectations for input and decision-making related to curriculum and program outcomes.  
- Curriculum vitae of the NP faculty member who provides oversight for the population focused track.  
- Current unencumbered license or other authorization to practice as an NP as required by the state or territory.  
- Doctoral degree from an institution of higher education that is accredited by an agency officially recognized by the U.S. Secretary of Education at the time the degree was conferred.  
  - Exception: If not doctorally prepared, documentation of:  
    - Enrollment in a doctoral education program, with anticipated completion date specified, and;  
    - Letter of appointment prior to date of implementation of these criteria.  
- National board certification(s) as an NP in the population focused area of the track, specifying primary and/or acute care if certified in adult-gerontology or pediatrics.  
  - If the faculty member is an NP but is not nationally board certified as an NP in the population focus of the NP track, to include primary or acute care distinctions, documentation must be provided of the qualifications and experiences of the individual overseeing the track. This documentation should demonstrate that the other NP faculty members teaching in the track have expertise to cover the full scope of the population focus.  
  - A Clinical Nurse Specialist (CNS) may provide oversight of a Psychiatric Mental Health (PMH) NP program with documentation of degree(s) and national certification(s) as a PMH CNS. |
| **Criterion I.G.** The institution’s policies and expectations for NP faculty are consistent with other faculty in the institution with the same academic rank and role regarding allocated time for teaching, service, scholarship, and faculty development within the context of the institution’s mission. | **Required Evidence:**  
- Clearly articulated institutional policies or guidelines for academic rank and role of NP faculty.  
- Institutional policies or guidelines supportive of the NP faculty workload for successful teaching, scholarship, service, and faculty development.  
- Delineated faculty workload formulas to determine assignments for the academic unit. |
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| **Criterion I.H.** The institutional policies support NP faculty teaching didactic courses with a clinical component and/or clinical courses by supporting faculty practice to maintain clinical expertise. | **Required Evidence:**  
- Institutional guidelines and/or policies that support clinical practice for those teaching in didactic courses with a clinical component or clinical courses that focus on diagnostic management. |
| **Criterion I.I.** The NP Program has a policy that supports the completion of an NP workforce needs assessment and enrollment capacity assessment prior to initiating a new NP program or new population focus. | **Required Evidence:**  
- Policy or statement detailing the process for conducting a needs assessment for new NP programs or a new population focus.  
- Needs assessment completed prior to starting a new program or a new population focus with input from community of interest.  
- Capacity assessment to implement new program or population focus based on the NTFS. |
| **Criterion I.J.** The NP Program has a comprehensive written policy/plan to address current and anticipated needs for clinical placement sites for all matriculated students to meet the learning, progression, and graduation expectations of the program. | **Required Evidence:**  
- Policy and plan on record for attainment of clinical sites, including identification of individuals responsible for identifying, evaluating, and contracting with site management.  
- Program policies that delineate processes for selection and evaluation of NP clinical sites.  
- Program policies that delineate processes for NP student clinical placements to provide student experiences that meet role and population focused learning objectives.  
- Delineation of faculty responsibilities for clinical placements if not described in the plan provided for bullet #1 above.  
- Plan for identifying new clinical sites for students in a new or growing population focused track or for students whose current site is no longer available due to unanticipated events. |
| **Criterion I.K.** The NP program has policies for recruiting, selecting, orienting, and evaluating preceptors to enable students to meet learning outcomes and progress on a timely basis toward program completion. | **Required Evidence:**  
- Program policies or other written documentation that delineate processes for selecting, orienting, and evaluating preceptors.  
- Preceptor orientation materials/program.  
- Policies for assigning clinical placements that meet learning outcomes and support progress toward program completion. |
# II. Resources

**Standard:** Institutional resources are sufficient for the NP program’s matriculated students, and they reflect ongoing commitment to quality education leading to progression and graduation as competent nurse practitioners ready for population focused health care. Resources necessary to sustain a quality NP program are inclusive of fiscal, human, student support services, learning, and physical/technology resources, regardless of delivery modality.

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| **Criterion II.A.** The institution has sufficient fiscal resources to support the NP program. | **Required Evidence:**  
- Budget allocations/expenditures for the NP program inclusive of human, student support, physical, technological, and learning resources.  
- Process for NP program faculty to provide input regarding the budgetary and other resource needs. | |
| **Criterion II.B.** The institution has sufficient resources to provide ongoing support for NP program students, staff, faculty, and preceptors to address DEI. | **Required Evidence:**  
- Strategies, activities, and resources provided on a consistent basis for students, staff, faculty, and preceptors.  
- A mechanism to promote and coordinate DEI initiatives. | |
| **Criterion II.C.** The NP program has sufficient human capital, including appropriately qualified faculty, preceptors, and staff, to provide quality NP education. This is to include:  
- One full-time equivalent (FTE) faculty teaching in the NP Program, not to exceed 24 matriculated NP students.  
- NP faculty-to-student ratio for oversight of clinical learning not to exceed a ratio of 1:8 within the NP program’s faculty workload formula. | **Required Evidence for Faculty Resources:**  
- Overall faculty workload and method for determining faculty workload for all clinical and non-clinical education. Examples of formulas for determining faculty workload, faculty-to-student ratio for overall NP program, and faculty-to-student ratio for clinical oversight are shown in Appendix F.  
- Method used for NP program faculty-to-student ratio document of one FTE faculty teaching in the NP program not to exceed 24 matriculated NP students. NP program faculty to include all faculty, who may or may not be NPs, who teach didactic or clinical courses.  
- The methods used to determine sufficiency of NP faculty-to-student ratio for clinical oversight not to exceed a ratio of 1:8 within the NP program’s faculty workload formula.  
- Methods to determine adequate clinical oversight, supervision, and evaluation of students, preceptors, and clinical learning experiences.  
- Description of the specific responsibilities of the faculty members who teach in the NP program.  
- Documentation demonstrating that all NP faculty teaching in the NP program have the preparation, credentialing, and current expertise to support the NP program curriculum.  
  - Curriculum vitae of faculty.  
  - Degree(s), national certification(s), and licenses or other authorization to practice as an NP in the state or territory of practice.  
- Documentation of clinical practice for faculty teaching in diagnosis and management or clinical courses. | |
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| **Criterion II.C.** The NP program has sufficient human capital, including appropriately qualified faculty, preceptors, and staff, to provide quality NP education. This is to include:  
  - One full-time equivalent (FTE) faculty teaching in the NP Program, not to exceed 24 matriculated NP students.  
  - NP faculty-to-student ratio for oversight of clinical learning not to exceed a ratio of 1:8 within the NP program’s faculty workload formula. | • Documentation that all non-NP faculty teaching in the NP program have the preparation, credentialing, and current expertise to support the NP program.  
  - Curricula vitae of faculty who teach in the NP program.  
  - Degree(s), authorization to practice by the state, and national certification(s) as applicable.  
  • Development opportunities to support faculty in the role, such as student assessment, evaluation, learning, teaching modalities, and advances in health care.  
  • Formal orientation and mentoring of all newly hired NP faculty and those individuals new to teaching. | |
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| **Criterion II.D.** The NP program provides access to comprehensive academic support services that facilitate quality education by addressing student needs and challenges to timely progression and graduation from the NP program, regardless of delivery modality. | **Required Evidence:**  
- Documentation of services available to NP students, including:  
  - Financial aid  
  - Counseling  
  - Writing instruction and support  
  - Health and wellness  
  - Academic advisement  
  - Technology use  
- Mechanisms to allow for safe reporting on such topics as bias, hostility, and discrimination. |
| **Criterion II.E.** The NP program has sufficient learning resources to facilitate quality didactic and clinical experiences for NP students to achieve program outcomes, attain national NP competencies for the role and population, and ensure timely completion of the NP program, regardless of delivery modality. | **Required Evidence:**  
- Library and/or resources to support students and faculty to achieve the program outcomes.  
- Documentation that simulation resources used are in alignment with national best practices or standards identified by the NP program including:  
  - Preparation of faculty/staff to facilitate simulation.  
  - Physical and fiscal resources to support the use of simulation, such as standardized patients, supporting technology, and equipment.  
- Documentation of learning resource technology and support for its use, including electronic clinical logs/encounters and e-portfolios. |
| **Criterion II. F.** The NP program has access to sufficient institutional physical resources that support quality educational experiences for NP students to achieve program outcomes and timely completion of the NP program regardless of delivery modality. | **Required Evidence:**  
- Facilities, equipment, and supplies available and accessible to faculty, students, and staff to support quality education experiences, regardless of program delivery modality. |
| **Criterion II. G.** The program secures clinical sites and preceptors to ensure students enrolled in clinical courses have experiences to meet learning objectives and demonstrate expected course competencies with timely completion of the NP program. The NP students’ clinical placements are aligned with the program role and population focus. Faculty assess and approve all clinical placements for appropriateness for meeting course objectives, including those sites and preceptors identified by the students or others. | **Required Evidence:**  
- Sufficient number of appropriate clinical placement sites to support enrolled students' direct care clinical experiences and learning outcomes for the population foci and timely completion of the NP program.  
- Documentation of the faculty role in ensuring clinical placement of students and oversight to ensure appropriateness of clinical sites, preceptors, and experiences.  
- Documentation of the faculty communications/meetings with preceptor(s) regarding the expectations for the student experience and assessment of student progression. |
## III. Curriculum

**Standard:** The NP program curriculum contains all educational experiences that facilitate expected outcomes of NP graduates. The NP faculty designs, reviews, revises, and evaluates the curriculum to maintain current relevancy and meet national standards. The curriculum addresses competencies, as delineated by specialty nursing organizations, NP organizations, and nursing education organizations, to promote student achievement of learning and program outcomes. The curriculum establishes the depth and breadth of requisite knowledge and skills for student success in the NP program as demonstrated through NP student learning experiences, testing, and overall evaluation.

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| **Criterion III. A.** The NP program prepares graduates to meet education eligibility requirements for authorization to practice in one (or more) states and for one (or more) national NP certification examinations that correspond with the role and population focus of the NP program. | **Required Evidence:**  
- Written statement listing specific NP role and population focused certifications for which graduates are eligible to apply is published, at a minimum, in the university or college catalog and NP program website. |
| **Criterion III.B.** The NP faculty have input into admission criteria for each NP population focused track and degree/certificate program. | **Required Evidence:**  
- Documentation that NP faculty are providing input into admission criteria for the NP program and/or tracks.  
- Admission criteria for the NP program and/or individual population focused tracks that differ from the overall school of nursing graduate degree program are clearly defined, explained, and accessible to the public. |
| **Criterion III.C.** The NP faculty provide input for any progression and completion criteria specific to the NP population focused track. | **Required Evidence:**  
- Documents affirming that NP faculty provide input into progression and completion criteria specific to the NP program and/or tracks.  
- Student progression and completion criteria, including the overall graduate degree program and programmatic differences unique to the NP program or the population focused tracks.  
- Criteria for full-time, part-time, and postgraduate study as pertinent.  
- Faculty-designed plans for students to address content mastery deficiencies that adversely affect student progression. |
| **Criterion III.D** NP faculty provide input to the development, implementation, evaluation, and revision of the entire curriculum, including the graduate nursing core courses, APRN core courses, and NP population focused courses. | **Required Evidence:**  
- Formal committee minutes documenting that NP faculty are developing, evaluating, and revising the curriculum.  
- Lists of resources used, including professional standards, competencies, and guidelines. |
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| **Criterion III.E.** The NP curriculum provides the student broad-based, comprehensive graduate educational preparation for the role and at least one population focused area of study. The curriculum is consistent with and meets national standards/competencies for graduate-level nursing education, APRN education, NP specific role, and population focused education (See Appendix B). | **Required Evidence:**
- Description of NP curriculum that provides the student broad educational preparation and follows current nationally recognized standards and competencies for advanced-level nursing education, NP role preparation, and population focus preparation.
- Nationally recognized NP education standards and competency documents used for the development of the curriculum components, which should include:
  - Advanced-level nursing competencies.
  - Separate APRN graduate core courses in advanced health assessment, advanced physiology/pathophysiology, and advanced pharmacology.
  - NP core role competencies.
  - NP population focused competencies. |
| **Criterion III.F.** The NP curriculum includes interprofessional educational experiences (IPE). | **Required Evidence:**
- Curriculum plan that demonstrates how the program prepares graduates with nationally recognized interprofessional (IP) education competencies.
- Curriculum plan that includes NP students’ didactic and/or clinical experiences with other health professions students.
- Student logs, reflections, and evaluation of learning experiences that demonstrate integration of IP experiences or documentation of IP scholarly work. |
| **Criterion III.G.** The NP program prepares students with nationally recognized patient care competencies, at the beginning advanced-practice level, through faculty-guided learning experiences prior to beginning the direct patient care hours defined in III.H. | **Required Evidence:**
- Documentation that illustrates how the curriculum prepares students with the expected Domain 1, Patient Care for Time 1, Common Advanced Practice Registered Nurse Doctoral-Level Competencies (AACN, 2017; See Appendix C). |
Criterion III.H. The NP population focused track has a minimum of 750 direct patient care clinical hours to prepare the graduate with competencies for full scope of NP population focused practice.

Direct patient care clinical hours may include student provision of care delivered to the patient through telehealth and global health experiences. Simulation is not direct patient care, and these hours may not be included in the 750 direct patient care total. Time spent attaining the competencies addressed in Criterion III.G are not included in the 750 direct patient care clinical hours.

Required Evidence:
- Description of courses that show distribution of direct patient care clinical hours in each course and the area(s) of practice or population(s) being addressed in each course that prepare the graduate with the nationally recognized NP and population focused competencies.
- Faculty review of students’ clinical encounters for breadth, depth, and type to ensure students have experiences across the role and population focus.
- Description and expected outcomes of telehealth and global health experiences if those hours are included in the direct patient care total.

Criterion III.I. The NP curriculum reflects appropriate course sequencing and the integration of population focused didactic and clinical courses with continuous progression throughout the program. The NP curriculum requires that students successfully complete the three APRN core courses (advanced health assessment, advanced physiology/pathophysiology, and advanced pharmacology) prior to progressing to the NP population coursework that focuses on diagnosis and management of health problems.

Required Evidence:
- The full- and part-time program of study including didactic and clinical courses designed with a logical course sequencing and prerequisites to promote achievement of APRN, NP role, and population focus competencies across the curriculum (See Appendix B).
- Program of study with advanced-level nursing core courses preceding or simultaneous with the direct care NP and population focused courses and clinical experiences as evidenced in the program of study.
- Documentation that the three APRN core courses (advanced health assessment, advanced physiology/pathophysiology, and advanced pharmacology) precede NP population coursework that focuses on diagnosis and management of health problems (i.e., not concurrent with).
- Clinical placements aligned with the student’s program of study to provide learning opportunities for meeting course and program objectives.
- Curriculum map of overall NP program and individual tracks.
- Plan for student progression and timely completion following a break in the program of study.
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| **Criterion III.J.** The program of study includes a concentrated/immersive clinical practice experience near the end of the program that prepares graduates for the full scope of NP practice. The immersive experience focuses on all aspects of the NP role and demonstrates integration of program competencies into practice. Direct patient care hours included in the concentrated experience may be included in the 750 direct patient care clinical hours described in Criterion III.H. | Present - √ if yes | - Curriculum plan that demonstrates course sequencing that includes concentrated clinical practice experience near the end of the program.  
- Process for assigning, tracking, and evaluation of the concentrated clinical placements. |
| **Criterion III.K.** The NP program’s use of simulation, which follows national best practices and/or standards identified by the NP program, and supports student learning, competency development, and evaluation. Simulation is not included in the minimum direct patient care hours. | Required Evidence:  
- Examples of simulation activities to support competency development and evaluation.  
- Examples of methods used for briefing and debriefing student learning that meet national best practices.  
- Identification of national best practices and/or standards used to inform NP program simulation. |
| **Criterion III.L.** The NP program is supported by academic practice partnerships to provide a strong foundation for curriculum development and to inform clinical experiences. | Required Evidence:  
- Formal partnership agreements.  
- Description of the NP program’s and practice partners’ engagement in delivery of service, research, and/or education.  
- Minutes and/or reports of collaboration by academic and practice partners to design, implement, and evaluate the curriculum and student experiences. |
| **Criterion III.M.** Dual-track programs prepare the graduates to meet the required outcome criteria for two NP population foci and the educational requirements for two national NP certifications corresponding to the NP role (acute or primary care) and each population foci. | Required Evidence:  
- Formal institution-approved dual-track program of study.  
- Cross walk of both didactic and clinical courses to determine the common or overlapping content, course(s), competencies, and clinical experiences to meet the outcomes for each of the two NP population foci (See Appendix D). |
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| Criterion III.N. Post-graduate NP certificate program prepares graduates to meet the same end-of-program outcomes as the degree granting program including the education requirements for national NP certification examinations that correspond to the role and population focus of the post-graduate certificate. The post-graduate NP certificate program must:  
• Meet the institution’s requirements for granting a post-graduate certificate.  
• Include for each student a formal gap analysis of past graduate education (didactic and clinical hours and courses) to determine the additional didactic courses and faculty supervised clinical hours to meet the NP program outcomes. At a minimum, a total of 750 direct patient care clinical hours as defined in Criterion III. H. are to be included in the past APRN graduate education program and post-graduate certificate program specifically to meet the same end-of-program outcomes for the new NP role and/or new population. | **Required Evidence:**  
• A completed gap analysis for each postgraduate candidate (See Appendix E).  
• The policies or procedures used for student evaluation to demonstrate national competencies necessary to grant credit for prior academic didactic and faculty supervised clinical hours, as well as the process to determine additional academic didactic and clinical hours needed to meet expected outcomes.  
• Sample certificate of completion or a transcript for a post-graduate student showing educational preparation for the NP role and at least one population focus, to include primary or acute care or both for adult and pediatric programs and to include completion of the APRN core courses (advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology). |
| Criterion III.O. Official documentation of successful completion of the NP program clearly states the NP role and population focus of educational preparation. | **Required Evidence:**  
• A sample transcript for an NP graduate showing educational preparation for the NP role and at least one population focus to include a primary or acute care designation or both for adult-gerontology and pediatric programs OR  
• A sample official letter used to specify the educational preparation for the NP role and at least one population focus to include a primary or acute care designation or both for adult-gerontology and pediatric programs. |
### IV. Evaluation

**Standard:** The NP program has a formal comprehensive and systematic program evaluation plan that determines program quality and the ongoing quality improvement (QI) process. The QI process includes a plan for the overall assessment of the program, its policies and resources, including faculty and students, curriculum, and evaluation with indicated revisions.

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| **Criterion IV.A.** The NP program uses a systematic process to assess program outcomes. | **Required Evidence:**  
- Plan for evaluating program outcomes.  
  - Evaluation plan with methods, metrics, measures, and specified interval not to exceed five years.  
  - Aggregate program data, including first-time and repeat test takers’ certification pass rates; progression, attrition, and completion rates; employment data; and alumni surveys.  
- Actual program outcomes (i.e., the findings of the assessment of expected program outcomes).  
- Continuous QI plan and strategies for addressing opportunities in and challenges to program outcomes. |
| **Criterion IV.B.** The NP program regularly scheduled evaluation plan assesses whether resources are sufficient to achieve program outcomes. | **Required Evidence:**  
- Results of the regularly scheduled review of NP program resources, including evaluation of faculty, clinical sites, and preceptors to determine sufficient number and type of learning experiences to meet program outcomes.  
- Implementation of ongoing QI processes to address concerns, deficiencies, and gaps. |
| **Criterion IV.C.** The NP program evaluation plan assesses DEI among its students, graduates, faculty, staff, and others in the community of interest. | **Required Evidence:**  
- Documentation that shows how DEI is included in assessments of students, graduates, faculty, staff, clinical sites, preceptors, and work/learning environments.  
- DEI assessment results and trends in students, graduates, faculty, staff, clinical sites, preceptors, and work/learning environments.  
- Documentation that learning resources have been reviewed for biases, including unintended biases. |
| **Criterion IV.D.** The NP program, with input from the community of interest, evaluates the current relevancy and revises the NP curriculum every five years or sooner, to reflect current knowledge and practice. | **Required Evidence:**  
- Plan for curriculum review, including intervals for review.  
- Results of curriculum review of each track or population focused program.  
- Process of including review of curriculum to reflecting current NP practice and trends in health care.  
- Evidence of input from its community of interest. |
| **Criterion IV.E.** The NP program faculty who are responsible for course design and implementation evaluate the individual courses based on the overall program evaluation plan. | **Required Evidence:**  
- Documentation of course coordination and sequencing review.  
- Documentation of faculty review at the completion of teaching the course, including student success and current relevancy of course.  
- Course syllabi that reflect updates based on review. |
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<td><strong>Criterion IV.F.</strong> In accordance with institutional policy, annual individual NP program faculty evaluations include competence in areas of responsibility, including teaching, service, scholarship, and practice; faculty workload expectations; and plans for development.</td>
<td><strong>Required Evidence:</strong>&lt;br&gt;• The evaluation plan and schedule of individual NP program faculty competency in area of responsibility.&lt;br&gt;• Evaluation of faculty by students and others as appropriate to role expectations.&lt;br&gt;• Individual faculty development plans in alignment with the evaluation.&lt;br&gt;• Record of certification and area of practice, as applicable.</td>
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<td><strong>Criterion IV.G.</strong> The NP program faculty perform ongoing formative and summative evaluations of student progress inclusive of attainment of expected competencies in both didactic and clinical courses.</td>
<td><strong>Required Evidence:</strong>&lt;br&gt;• Documentation of faculty oversight of student progress using formative and summative methods in didactic and clinical courses.&lt;br&gt;• Faculty evaluation of student clinical competencies, including frequency and methods for observations used, as well as direct student clinical site observations, recorded encounters, simulation, and/or remote observation using communication technologies.&lt;br&gt;• Electronic logs and/or e-portfolios documenting clinical encounters to show student progress and competency attainment.&lt;br&gt;– Plan for each student to address identified deficiencies in progression and competency attainment.&lt;br&gt;– Communications sharing individual formative and summative evaluations with the student.</td>
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<td><strong>Criterion IV.H.</strong> The NP faculty evaluate student clinical experience(s) in each clinical course.</td>
<td><strong>Required Evidence:</strong>&lt;br&gt;• Methodology and outcomes for NP faculty evaluation of student clinical experiences, including preceptor feedback of the student; students’ completed evaluations of the preceptor and site; and the number, type, and quality of experiences.&lt;br&gt;• Documentation of joint faculty, preceptor, and student meeting(s) regarding student progress in clinical courses.&lt;br&gt;• Documentation of preceptor(s) and faculty interactions to determine needs, information, and support to improve experiences for preceptor and/or student.</td>
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<td><strong>Criterion IV.I.</strong> The NP faculty evaluate all clinical sites and preceptors new to the NP program prior to NP student placement, including preceptor qualifications and types of services/experiences available. All clinical sites and precepted experiences are evaluated collaboratively by faculty, students, and preceptors early in the placement/rotation.</td>
<td><strong>Required Evidence:</strong>&lt;br&gt;• Plan and process for clinical site evaluation with input from clinical NP faculty, preceptors, and students.&lt;br&gt;• Site evaluation documents.&lt;br&gt;• Plans for clinical site reevaluation and process for improving clinical site experiences for students and/or preceptors.</td>
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| **Criterion IV.J.** The NP program faculty evaluate the use of simulation across the program. | **Required Evidence:**  
  - Plan and methods for the evaluation of simulation use in the curriculum, including assessment of participants (teachers/learners/support team), delivery process/methods, and materials/equipment.  
  - Use of simulation for student evaluation and learning experiences.  
  - Metrics demonstrating how simulation use aligns with national guidelines or standards.  
  - Plan for ongoing improvement as indicated. |