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November 27, 2019

Deborah T. MacMillan, PhD, APRN-BC, CNM
Director
School of Nursing
Georgia College & State University
231 West Hancock Street
CBX 063
Milledgeville, GA 31061

Dear Dr. MacMillan:

On behalf of the Commission on Collegiate Nursing Education (CCNE), I am writing to inform you that the CCNE Report Review Committee (RRC) reviewed the continuous improvement progress report (CIPR) submitted on December 19, 2018 by the baccalaureate degree program in nursing and the master's degree program in nursing at Georgia College & State University and as a result of its review determined that additional reporting is required.

The RRC determined that the master's program has demonstrated that Standards I, II, and IV are met, but that Standard III is not met, and that there is a compliance concern relative to Key Element III-E. These programs were assessed using the 2013 *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs (Standards)*, which were in effect through December 31, 2018.

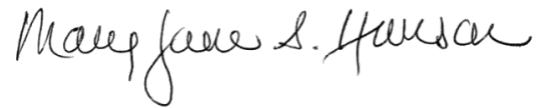
As the 2018 *Standards* went into effect on January 1, 2019, the RRC directs the master's program to submit a follow-up report to demonstrate compliance with Key Element III-H, as follows:

Demonstrate that the curriculum includes planned clinical practice experiences that enable students to integrate new knowledge and demonstrate attainment of program outcomes; and are evaluated by faculty (2018 Key Element III-H; 2013 Key Element III-E). Specifically, the program must demonstrate that students in the nurse educator track complete clinical practice experiences consistent with AACN's *Master's Essentials* definition of the direct-care role, including "sustained clinical experiences designed to strengthen patient care delivery skills" at the master's level (*Master's Essentials*, AACN, 2011, pp. 8-9). In its Glossary, the *Master's Essentials* defines direct care as "nursing care provided to individuals or families that is intended to achieve specific health goals or achieve selected health outcomes. Direct care may be provided in a wide range of settings, including acute and critical care, long term care, home health, community-based settings, and educational settings" (*Master's Essentials*, AACN, 2011, p. 33). Direct care experiences are not designed to prepare students for the nurse educator role, but rather to prepare them for advanced nursing practice care. The program did not demonstrate how students in the nurse educator track are provided direct care experiences designed to advance the knowledge and expertise of students in a clinical area of practice.

The follow-up report must be received in the CCNE office on or before May 31, 2020. Please email the follow-up report, along with appendices, if any, as PDF attachments to cnereports@ccneaccreditation.org. The report will be reviewed by the RRC and then by the CCNE Board of Commissioners at their next scheduled meetings.

Please contact Lina Nandy Trullinger, CCNE Associate Director, for guidance or clarification, if needed. She can be reached by telephone at 202-887-6791 x245 or by email at LNandyTrullinger@ccneaccreditation.org.

Sincerely,

A handwritten signature in black ink that reads "Mary Jane S. Hanson". The signature is written in a cursive, flowing style.

Mary Jane S. Hanson, PhD, CRNP, CNS, FNP-BC, ACNS-BC, FAANP
Chair, Board of Commissioners

