

APPLICATION PROCESS

COMPLETING THE APPLICATION

1. Retrieve the *WNA CEAP Approved Provider Intent to Apply – Eligibility Verification* and *Approved Provider Application Instructions* from the WNA CEAP website (Education, Continuing Education Approval Program, Approved Provider page).
2. Make note of your application submission deadline and when your *Approved Provider Intent to Apply – Eligibility Verification* is due. Current Providers will receive an email six months prior to their Provider expiration date as a reminder of:
 - ▲ when the organization's Approved Provider status will expire;
 - ▲ when the 'Intent to Apply' is due; and
 - ▲ the deadline for application submission.

Current and new applicants complete and submit the 'Intent to Apply' at least three months prior to the application submission deadline. The 'Intent' is reviewed by the WNA CEAP Nurse Peer Review Leader, and if eligible, the organization can begin the self-study.
3. Read the entire application to be sure you understand the questions and the process.
 - ▲ For questions on forms, fees, deadlines etc., please contact Megan at the WNA office at megan@wisconsinnurses.org or call 800.362.3959, ext. 203.
 - ▲ For questions related to eligibility and clarification of ANCC/WNA CEAP requirements and criteria, please contact WNA Nurse Peer Review Leader (NPRL) Mary Kay Scheller at WNA-NPRL@metastar.com.
4. Complete each section of the application. The Primary Nurse Planner (PNP) is accountable for this function, assisted by other Nurse Planners, key personnel in the provider unit, and other stakeholders.
Incomplete applications will not be processed.
5. Attach all additional materials requested, such as organizational chart(s) and position descriptions for the PNP and other members of the provider unit.
 - ▲ **For current Providers**, attach three sample activity files demonstrating adherence to all ANCC/WNA CEAP criteria. Submit all information listed on the WNA CEAP *Education Activity Record Form* in the order specified. The sample activities should be representative of the types of activities offered by the Approved Provider Unit; therefore,
 - if both live and enduring educational activities are offered by the organization, a sample activity of each type of offering should be submitted;
 - if the organization accepts commercial support for CNE activities, a sample activity that received commercial support should be submitted; and
 - if the Approved Provider unit jointly provides CNE activities (plans activities with another organization), a sample activity that was jointly provided should be submitted.The sample activities should have been planned and implemented within one year of application (or the previous calendar year) for Approved Provider renewal.
Do not submit handouts (PowerPoint presentations) or sign-in sheets. Submit only the required components of the Approved Provider Application.
 - ▲ **For first time Provider applicants**, submit approval letters for three activities approved by WNA CEAP or another ANCC-Accredited Approver, and submit a template of a certificate that will be given to participants upon completion of the provider unit's educational programs after Approved Provider status has been granted.

6. The entire application packet must be typed and organized in the following order:
 - a. Table of Contents
 - b. Completed Approved Provider Application
 - c. Required attachments
 - d. Three sample activity files (or [new applicants](#), see above)
 - e. **Number each page in order**, including the Table of Contents.
7. **Three (3) hard copies of the application packet** should be mailed to: *WNA CEAP Committee, Attn: Megan Leadholm, 2820 Walton Commons – Suite 136, Madison, WI 53718*. **Please mail the application in time to be received in the WNA office by the application submission deadline.**
8. The policies and procedures of the WNA CEAP Committee ensure confidentiality of all application materials and records. One copy of the application packet is kept on file at the WNA office. All other copies used by WNA CEAP Nurse Peer Reviewers during their review will be destroyed.

REVIEW PROCESS

- ▲ Upon submission of the application packet, applicants will receive an application confirmation email from the WNA office indicating the application and review fee were received and the projected decision date.
- ▲ Application packets will be sent to WNA CEAP Nurse Peer Reviewers. If members of the WNA CEAP Committee request revisions or ask for clarification regarding the application, it's important the additional materials are submitted by the date specified. The reviewers must have sufficient time to review the revisions before the Provider expiration date. If the materials are not received within the specified time frame, the application will be denied.
- ▲ **Retroactive approval is not authorized in the ANCC accreditation system.** For current Providers, contact hours may not be awarded for activities which take place after the Provider expiration date. [For first time Provider applicants](#), Approved Provider status must be granted before contact hours can be awarded for an educational activity.

APPLICATION SUBMISSION DEADLINE

Applications to WNA CEAP for Approved Provider status are accepted in March, June, September, and December. [For first time Provider applicants](#), three copies of the completed WNA CEAP *Approved Provider Application*, including all attachments, should be received in the WNA office (see #7, *Completing the Application*) according to the application submission schedule below. Contact Megan at the WNA office at megan@wisconsinnurses.org or 800.362.3959, ext. 203 with questions regarding the timeline.

MARCH REVIEW CYCLE	
'Intent to Apply' DUE:	December 1
Application DUE:	March 1

JUNE REVIEW CYCLE	
'Intent to Apply' DUE:	March 1
Application DUE:	June 1

SEPTEMBER REVIEW CYCLE	
'Intent to Apply' DUE:	June 1
Application DUE:	September 1

DECEMBER REVIEW CYCLE	
'Intent to Apply' DUE:	September 1
Application DUE:	December 1

For current Providers, three copies of the completed WNA CEAP *Approved Provider Application*, including all attachments, should be received in the WNA office by the application due date (March 1, June 1, September 1, or December 1). **Applications not received by the application submission deadline will be assessed a late fee of \$500 and may be 'bumped' to the next review cycle.**

Important: If your application is not received by the due date it's possible your organization's approval could lapse resulting in a gap in time during which your organization cannot award nursing contact hours for any educational activities. Organizations who lapse in maintaining Approved Provider status will receive a letter indicating the organization is no longer a WNA CEAP Approved Provider and it cannot offer contact hours for educational

activities provided by the organization. Remember that retroactive approval is not permitted in the ANCC accreditation system.

APPLICATION FEES

WNA CEAP Approved Provider Application Review Fee: \$1650

The application review fee (non-refundable) must accompany the application. Checks should be made payable to the Wisconsin Nurses Association; American Express, Visa, or Master Card are also accepted. Receipt for credit card charges will be forwarded via email with application confirmation.

For current Providers, applications not received by the required submission date will be assessed an additional late fee of \$500.00.

APPLICATION DECISIONS

APPROVAL/APPROVAL WITH DISTINCTION

Approval will be granted if there is documentation that criteria are being met (application receives score needed for approval), or being met at a high level (application receives score needed for approval with distinction). The Provider approval period is valid for three years from the date of approval but is subject to review prior to that time. In accordance with WNA CEAP criteria, changes in the structure of the organization and/or Approved Provider Unit must be reported to the WNA office within thirty days (i.e. a change in Nurse Planners, change in name, ownership, or structure of the organization, or change in the person identified as the contact person for the Approved Provider Unit). Major changes that would affect the Approved Provider Unit's ability to function as approved, including a change in Primary Nurse Planner, must be reported within seven days. The organization must also notify the WNA office within thirty days if the decision is made to terminate Approved Provider status.

Providers complete an Approved Provider annual report. The annual report form is sent to Approved Providers each December, and the report and annual fee of \$125.00 is due January 31st. **Once during the approval period, Providers will be asked to submit an activity file to be reviewed by the committee.** This file will be requested following submission of the annual report. Failure to submit an annual report, activity file, or requested supplementary documents by the designated due date will result in suspension of the organization's Approved Provider status. Approved Provider status will be reinstated when the annual report, activity file, and/or supplementary documents are received and meet WNA CEAP criteria.

PROVISIONAL APPROVAL

Provisional Provider approval will be granted for one year to applicants who do not receive the score needed for full approval. The WNA NPRL determines the remediation most appropriate for the Approved Provider unit based on the review results of the application. The purpose of remediation is to help the Approved Provider unit make the necessary improvements to fully meet the criteria (for example, submission of an additional Education Activity Record, submission of policies/procedures, etc.). Providers who receive provisional approval must complete the assigned remediation by the deadline determined by the WNA NPRL to be granted full approval. If remediation is completed and the criteria is met for approval, full approval will be awarded; if remediation is not completed by the deadline, Provisional Provider approval will be terminated.

DENIAL/NOT APPROVED

If the application does not receive the score needed for approval, the applicant may choose to resubmit or appeal the decision.

RE-SUBMISSION

If approval is not granted, the organization may reapply **within thirty (30) days** of notification of denial.

A \$500 re-submission review fee must accompany the revised application. Only one (1) re-submission is allowed per application.

APPEAL

When an application is not approved by the WNA CEAP Committee, the applicant has the right to appeal the decision. For current Providers, contact hours cannot be awarded after the organization's Approved Provider status has expired; therefore, any appeal process must be completed prior to the Provider expiration date.

[For first time Provider applicants](#), contact hours cannot be awarded by the organization until Approved Provider status has been granted. A copy of the appeal process is available upon request from the WNA office. Changes and/or revisions may not be made to the application (or resubmission, if applicable) during the appeal process. The decision of the WNA CEAP Committee is final.

REVOCACTION OF APPROVAL

Approved Provider status will be revoked if there is evidence that Provider activities are not being implemented according to the processes identified in the application. Notice of revocation of Provider approval is sent to the organization by the WNA office within two weeks of the revocation decision. The organization is responsible for notifying all participants of the revocation of contact hours as soon as possible, but not later than one month following notification of revocation.