

Mary Ellen Levine, DNP, MSN, RN
President

Judith E. Schmidt, DHA, MSN, RN Chief
Executive Officer

Date:

To: Approved Providers _____
Name

From: Judith Schmidt, DHA, MSN, RN

Re: Adoption of Approved Providers _____
Name

The New Jersey State Nurses Association (NJSNA) Approver Unit welcomes Approved Providers seeking adoption for their provider units. In order to begin the adoption process, Approved Providers, _____, are asked to prepare the following
Name

adoption packet:

Prepare the following documents to be submitted to the NJSNA Accredited Approver Unit:

1. NJSNA Adoption Form, which asks for the following information:
 - a. Name of current Approved Provider Unit
 - b. Name, credentials and contact information for the Primary Nurse Planner of the Approved Provider Unit
 - a. Names and credentials of other Nurse Planners (if any) in the Approved Provider Unit
2. Organizational chart of the Approved Provider Unit
3. Copy of last approval letter from previous Approver Unit
4. Sample certificate of completion that will be used after adoption demonstrating correct use of new Accredited Approver approval statement (below)

(Name of approved provider) is approved as a provider of nursing continuing professional development by New Jersey State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

5. Sample of marketing materials from one educational activity already provided.
6. Identification, Mitigation, and Disclosure of Relevant Financial Relationships from Planners, Faculty and Others form from an individual who had an actual or potential relevant relationship for an educational activity and the process used to resolve the relationship.
7. Sample of joint provider agreement (if the organization jointly provides activities).

Following adoption, the Approved Provider Unit, _____, will be asked to submit one full activity program planned using the new Accredited Approver planning documents.

Submission

Please send the completed adoption packet by US Postal Service to:

Attention: Education Department
New Jersey State Nurses Association
1479 Pennington Road
Trenton, New Jersey 08618

Or by email to: KJackson@njsna.org in care of Kortnei Jackson, Education Department, Administrative Assistant

Fees

The \$300 fee includes adoption packet review, NJSNA Nursing Continuing Professional Development Approver Manual and electronic forms.

Review

Approved Providers should expect to receive notice of review results within 14 business days of submission of completed adoption packet and payment.

The NJSNA Approver Unit may ask for additional information prior to making final decision regarding adoption.

NJSNA Education Department contacts

Kortnei Jackson, Administrative Assistant

KJackson@njsna.org

609-883-5335 x120

On behalf of the New Jersey State Nurses Association Accredited Approver Unit, we welcome you to our provider community. We look forward to collaborating with you on high quality nursing continuing professional development education in the years to come. Please feel free to contact us with any questions.

Sincerely,



Judith Schmidt, DHA, MSN, RN
Accredited Approver Program Director