2023 Accreditation Manual For Nursing Education Programs

A publication of:

Accreditation Commission for Education in Nursing
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Table of Contents

SECTION 1:
GENERAL INFORMATION

INTRODUCTION

MISSION

The Accreditation Commission for Education in Nursing (ACEN) supports the interests of nursing education, nursing practice, and the public by the functions of accreditation. Accreditation is a voluntary, peer-review, self-regulatory process by which non-governmental associations recognize educational institutions or programs that have been found to meet or exceed standards and criteria for educational quality. Accreditation also assists in the further improvement of the institutions or programs as related to resources invested, processes followed, and results achieved. The monitoring of certificate, diploma, and degree offerings is tied closely to state examination and licensing rules and to the oversight of preparation for work in the profession.

PURPOSE

The purpose of the ACEN is to provide specialized accreditation for all levels of nursing education in the United States and its territories and international programs and transition-to-practice programs.

Nursing Education Accreditation:

> The ACEN accredits all types of nursing programs, including practical, diploma, associate, baccalaureate, master's, and clinical doctorate.
>
> The ACEN accredits nursing programs in a variety of postsecondary and higher education settings, including vocational-technical schools, hospitals, professional schools, community/technical colleges, and colleges/universities.
>
> The ACEN serves as a Title IV-HEA Gatekeeper for some practical nursing programs and hospital-based programs eligible to participate in financial aid programs administered by the USDE or other federal agencies.

GOALS

As the leading authority in nursing accreditation, the goal of the ACEN is to be a supportive partner in strengthening the quality of nursing education and transition-to-practice programs through:

- Supporting nursing education and transition-to-practice programs in obtaining and maintaining accreditation
- Promoting peer review
- Advocating for self-regulation
- Fostering quality, equity, access, opportunity, mobility, and preparation for practice, or transition-to-practice, at all levels of nursing preparation
- Developing standards and criteria for accreditation

RECOGNITION

The ACEN is recognized by the United States Department of Education (USDE) as a specialized accrediting agency for nursing education programs located in the United States and its territories.

National, regional, and specialized accreditors that oversee federal funding eligibility must be reviewed by the USDE to ensure that the accrediting body meets specific standards established by Congress. The Secretary of Education for the USDE is charged with review of accrediting bodies and providing recognition to those accrediting agencies that meet the Secretary of Education's criteria. Students in institutions or programs accredited by a USDE-recognized agency may be eligible for federal financial aid assistance and other needed resources.

The ACEN is recognized by the Council for Higher Education Accreditation (CHEA) for nursing education programs in the United States and its territories as well as for international nursing education programs.

CHEA is a national and international advocate for academic quality through accreditation. The ACEN is recognized by CHEA as a programmatic accreditor for all levels of nursing education in the United States and its territories, as well as internationally, and inclusive of those programs delivered via distance education.

PHILOSOPHY OF ACCREDITATION

The ACEN accreditation program is founded on the belief that specialized accreditation contributes to the centrality of nursing for the public good and provides for the maintenance and enhancement of educational quality through continuous self-assessment, planning, and improvement. Accreditation indicates to the public and to the educational community that a nursing program has clear and appropriate educational objectives and is working to achieve these objectives. Emphasis is placed upon the entire nursing program and its compliance with established standards and criteria in the context of its mission/philosophy as well as current and future nursing practice.

Accrediting agencies share responsibility with their communities of interest for the development of accreditation standards and criteria, policies, and procedures for participation in accreditation and review of accreditation processes. The ACEN supports the continuation and strengthening of voluntary specialized accreditation by peers as a principal means of public accountability and ongoing improvement. Specialized accreditation sets standards for programs and ensures, through the self-study process and accreditation review process, the promotion of effective education and program improvement.

Standards and criteria for accreditation, materials that document compliance, policies, and procedures are based on principles widely accepted and tested in general and professional education. All those involved in the process must be aware of current developments in education and nursing. They must also be aware of the effectiveness of the current standards, criteria, policies, procedures, and the evidence of need for change. A systematic ongoing review of all components of the accreditation process is essential to ensure an up-to-date, reliable, and valid accrediting process.

THE ACEN AND THE HISTORY OF NURSING ACCREDITATION

The ACEN has a long-standing history with nursing accreditation in the United States. It was the first nursing accrediting agency. Please see the ACEN website for additional information about the **history of the ACEN**.

THE COMMISSION

OVERALL STRUCTURE OF THE COMMISSION

The ACEN is governed by a 17-member Board of Commissioners **(BOC)**. The Commissioners are elected by the representatives of ACEN-accredited nursing programs. The legal basis for the foundation and structure of the Commission is outlined in the Bylaws and the Articles of Incorporation. The ACEN is incorporated under the laws of the state of New York.

BOARD OF COMMISSIONERS

- Eleven Commissioners are nurse educators representing ACEN-accredited programs, three Commissioners represent the public, and three Commissioners represent nursing service.
- Commissioners are diversified and ensure balanced representation from across identified constituencies insofar as possible.
- The BOC sets accreditation policy and makes accreditation, administrative, budget, and policy decisions.
- Decision of accreditation status is made by the Commissioners based on review of program materials including, but not limited to, the Self-Study Report/Focused Visit Report/Follow-Up Report, the Site Visit Report/Focused Site Visit Report/Follow-Up Visit Report from peer reviewers, the program's response to the site visit report, and the recommendation of the ERP.
- No current governor, current officer, or current or former employee of the NLN or its subsidiaries, or current employee of the ACEN, may serve as a Commissioner.

Names, credentials, and affiliations of Commissioners are **available online**.

ACEN STAFF

- The ACEN staff maintain operational functions of the office and support the Chief Executive Officer (CEO), the Board of Commissioners, and nursing programs.
- Names and credentials of staff are available online.

ACCREDITATION STANDARDS AND CRITERIA FOR ACADEMIC QUALITY OF POSTSECONDARY AND HIGHER DEGREE PROGRAMS IN NURSING

CORE VALUES

The core values of accreditation emphasize learning, community, responsibility, integrity, value, quality, and continuous improvement through reflection and analysis.

Peer review is a long-established and effective process that promotes institutions and academic programs embracing quality assurance and quality improvement to become stronger. The process also betters institutions and programs by setting standards of educational quality. It is used by the ACEN to help determine which programs meet or exceed established standards and criteria for educational quality in nursing education. The ACEN peer evaluators are familiar with contemporary practices in various program types and receive training from the ACEN to make informed professional judgment about a program's compliance with the ACEN Standards and Criteria.

Quality in nursing education ensures high levels of opportunity for student learning and achievement. Accreditation is an affirmation of values central to postsecondary and higher education; this includes appropriate mission, organizational structures, processes, functions, resources aligned with core values, collegiality, and continuous improvement.

Return to Table of Contents

Each certificate, diploma, or degree has an identifiable, discrete set of specific end-of-program student learning outcomes and program outcomes. Postsecondary and higher education provide for the development of the learners' ability to think for themselves, master analytical problem-solving, apply scientific knowledge, and make value judgments within the context of the specific program type. Thus, education requires a broad academic orientation, depth and breadth of intellectual knowledge, and skills translated into competencies to fulfill the nursing's functions in all types of practice settings.

UNDERSTANDING ACEN STANDARDS AND CRITERIA IN THE EVALUATION OF NURSING EDUCATION UNITS

Standard – Agreed-upon expectations to measure quantity, extent, value, and educational quality.

Criteria – Statements that identify the elements that need to be examined in evaluation of a Standard.

The current version of the ACEN Standards and Criteria become effective on the date specified by the Board of Commissioners.

ACCREDITATION PROCESSES AND PROCEDURES

ACCREDITATION CYCLES

The ACEN has two accreditation cycles annually: the Fall Cycle: July 1 to December 31 and the Spring Cycle: January 1 to June 30. During each of the cycles there is a two-month period during which accreditation site visits are scheduled.

OVERVIEW OF THE INITIAL OR CONTINUING ACCREDITATION PROCESS

The ACEN accreditation process includes the following primary steps:

Programs seeking initial accreditation with the ACEN must start with the Candidacy process. The ACEN process for nursing programs seeking initial accreditation, after achieving Candidacy or continuing accreditation, is a comprehensive four-step process:

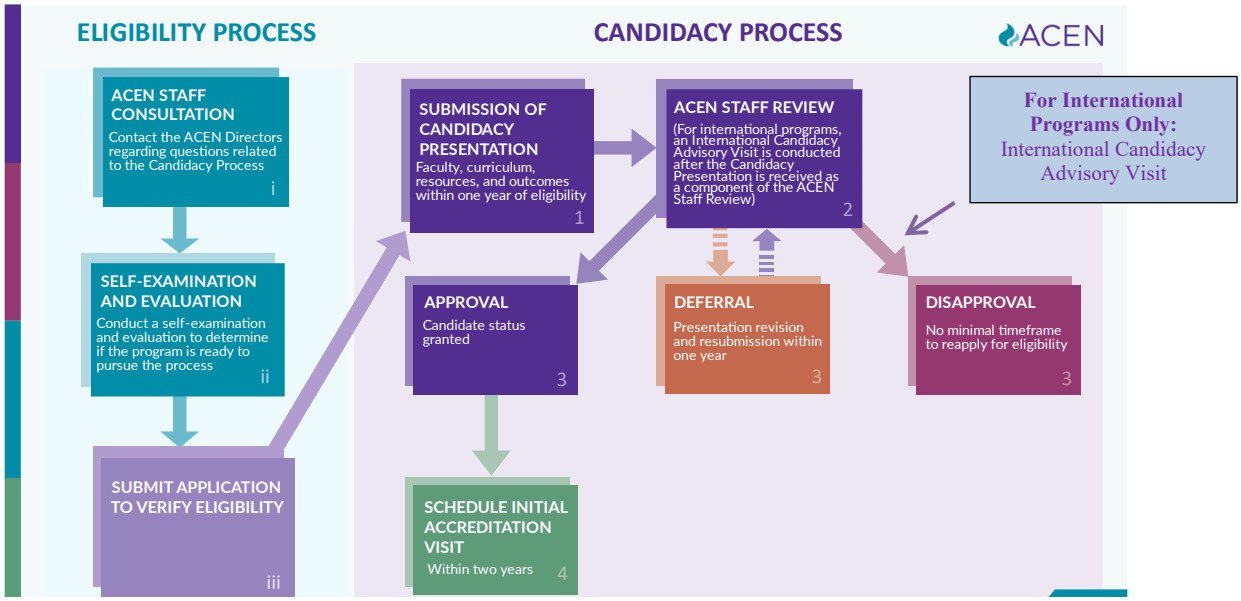
1. The program's self-reflection regarding its compliance with the ACEN Standards and Criteria as presented in its Self-Study Report.
2. The site visit results in the peer evaluators documenting their assessment and accreditation determination regarding the program's compliance with the ACEN Standards and Criteria in the Site Visit Report. The program will also have the opportunity to respond to the team's findings in a Program Response.
3. The Evaluation Review Panel (ERP) examines the reports written by, and about, the program (Self-Study Report and Site Visit Report) and the program's response to the Site Visit Report. The panel then reaches their own independent judgement regarding the program's compliance with the ACEN Standards and Criteria and it makes a recommendation for accreditation.
4. The final step of the process is a review by the ACEN Board of Commissioners. While considering the program's Self-Study Report, peer evaluators' determination of compliance, the program's response to the Site Visit Report, and the recommendation of the ERP, the Commissioners also reach their own independent professional judgement regarding the program's compliance with the ACEN Standards and Criteria and make an accreditation decision.

*An Appeal Committee may be convened only when initial or continuing accreditation is denied by the Board of Commissioners

PLANNING FOR INITIAL ACCREDITATION – CANDIDACY PROCESS

Nursing programs currently not accredited with the ACEN should contact the ACEN. Under the guidance of an ACEN Director, the nurse administrator, the program faculty, and administrative officers of the governing organization determine when the program is ready to apply for candidacy and the initial accreditation site visit. The decision should be based on an in-depth self-study of the program in relation to the ACEN Standards and Criteria, ACEN policies, and required ACEN processes and timelines. See **Policy #3 Eligibility for Initial and Continuing Accreditation** and **Policy #34 Candidacy for Governing Organization/Nursing Program Seeking Initial Accreditation**.

An overview of the **Candidacy process**:



Programs that achieve Candidacy must publicly disclose its Candidacy. See **Policy #34 Candidacy for Governing Organization/Nursing Program Seeking Initial Accreditation**.

If a program's Candidacy expires prior to scheduling an initial accreditation site visit, then the program must restart the candidacy process to renew its Candidacy. The Candidacy process can be restarted at any time after either being disapproved, withdrawn, or when the program's Candidacy has expired.

Each governing organization/nursing program making a Candidacy Presentation to the ACEN or having already been granted Candidacy agrees to certain requirements concerning financial obligation, choice of law, jurisdiction, and venue. See **Policy #28 Litigation** and **Policy #38 Arbitration**.

Programs approved for Candidacy by the ACEN must notify the ACEN of changes that occur in the program during the entire Candidacy process; eligibility for both the Candidacy process and Candidacy are based upon the information provided in the Candidacy Eligibility Application or the Candidacy Presentation. Changes that occur can affect the program's eligibility to pursue and/or achieve initial accreditation. See ACEN **Policy #34 Candidacy for Governing Organization/Nursing Program Seeking Initial Accreditation** and **Policy #3 Eligibility for Initial or Continuing Accreditation.**

Return to Table of Contents

INITIAL ACCREDITATION

Once Candidacy has been achieved, the chief executive officer of the governing organization and the nurse administrator must authorize the scheduling/hosting of the initial accreditation site visit using the online **Site Visit Request Form**.

A nursing program may discontinue the initial accreditation process at any time. A program seeking initial accreditation can also withdraw from the process at any point prior to being reviewed by the Board of Commissioners.

NOTE: Upon granting of initial accreditation by the ACEN Board of Commissioners, the effective date of initial accreditation is the date on which the nursing program was approved by the ACEN as a Candidate program that concluded in the Board of Commissioners granting initial accreditation. **Accreditation is not retroactive for students who graduated prior to the program achieving a Candidacy with the ACEN. See ACEN Policy #34.**

In order for the ACEN to properly discharge its responsibilities to the U.S. Department of Education pursuant to 34 CFR Section 602.28 and per **Policy #3 Eligibility for Initial or Continuing Accreditation**, an applicant for candidacy must disclose and certify that neither the governing organization nor the nursing program is the subject of certain circumstances.

The program will be required to disclose and certify this information at the time that the Official Authorization for Candidacy Process Form is signed and again when the program applies for the initial accreditation site visit. Information submitted by the program will be kept confidential and will only be utilized by the ACEN in its report to the USDE as required. The information provided by the governing organization/nursing program will not be utilized in determining the program's candidacy or its initial accreditation with the ACEN. The achievement of Candidacy as well as achieving initial accreditation will be based upon the program's ability to demonstrate compliance with the current ACEN Standards and Criteria.

CONTINUING ACCREDITATION

Planning for continuing accreditation is an ongoing process. A program must be visited and re-evaluated at specified intervals to ensure continuing compliance with the ACEN Standards and Criteria. The ACEN staff will notify the program of a pending visit in advance and when dates for the continuing accreditation site visit are scheduled in consultation with the nurse administrator, as the program must be in full operation during the visit.

Official authorization to conduct the ACEN accreditation process is submitted by the nurse administrator for the nursing program. The Site Visit Request Form is available on the ACEN website for the program to complete approximately 12-18 months before the visit is to take place. Dates for the scheduled site visit will be provided one year prior to the start of the scheduled accreditation cycle during which the visit is taking place.

If an ACEN-accredited program seeks to delay, advance, or reschedule a visit, refer to **Policy #6 Delay/Advancement of Continuing Accreditation Visit**. If an ACEN-accredited program seeks to

voluntarily withdraw from ACEN accreditation, refer to **Policy #7 Voluntary Withdrawal from ACEN Accreditation**.

ACEN-accredited programs are required to submit information to the ACEN regarding Substantive Changes in accordance with **Policy #14 Reporting Substantive Changes**. Note: The requirements regarding substantive change reporting cany vary slightly for the nursing programs that the ACEN serves as the Title IV gatekeeper. All programs should reference the policy to know when a Substantive Change Report is needed. **Templates** for submitting the various types of substantive changes are accessible on the ACEN website which is also where programs will submit the report in the **Substantive Change Portal**.

ASSISTANCE FOR INITIAL OR CONTINUING EDUCATION

The ACEN Directors are available to assist programs preparing for an initial or continuing accreditation site visit. The ACEN website also provides a wide variety of online resources for programs, including, but not limited to, the **ACEN Glossary**; the **Site Visit Request** form, and the ACEN 2023 Guidelines. These guidelines provide details regarding preparation of the Self-Study Report and for the site visit. Additionally, if applicable, the guidelines also include details regarding preparation of a Follow-Up Report and a Follow-Up Visit. The guidelines will also include details on reporting Substantive Changes and, if applicable, preparation of the Focused Visit Report.

Continuing education is offered to provide program faculty and leaders information about the accreditation processes and details regarding the preparation of the Self-Study Report. All programs seeking initial and continuing accreditation are encouraged to participate in these offerings. See the ACEN website for additional information.

Advisory Review is an opportunity for an ACEN-accredited program to receive feedback from an assigned ACEN Director regarding ACEN Accreditation. Reviews may include. but are not limited to. a review of the accreditation process, assistance with curriculum, assistance with assessment processes, and a review of draft program documents in preparation for a continuing accreditation site visit. Examples of documents that a Director could provide feedback include a portion(s) of the Self-Study Report, faculty profile table, or systematic plan of evaluation. This is an optional resource for currently accredited programs and is not a requirement for continuing accreditation. Director feedback indicates the staff member's best judgment but does not guarantee that the Board of Commissioners will determine that the program complies with the ACEN Standards and Criteria. An Advisory Review may be conducted by videoconference or in-person review. Additional information about an Advisory Review is accessible on the ACEN website, including the fee for this optional service.

Observer Experience provides a nursing program with the opportunity to send a program representative on an accreditation site visit as an observer. This typically occurs 12 months to 18 months prior to the program's upcoming accreditation site visit. The Observer Experience enables the program representative to observe every component of the site visit process, including orientation as a peer evaluator and team preparation prior to the site visit. A nursing program submits a request to have an observer on an upcoming visit to a nursing program who has consented to have an observer. The governing organization for the observer is responsible for all costs of the observer in this experience. See ACEN **Policy #32 Observer on Site Visit** Team as well as the website for additional information regarding being an observer on a site visit team.

SELF-REVIEW AND SELF-STUDY REPORT

Any program preparing for initial or continuing accreditation must submit a Self-Study Report to demonstrate the extent to which the program meets the ACEN Standards and Criteria. The Self-Study Report and supporting evidence must be uploaded into the **ACEN Repository** no later than six weeks prior to the date of the initial or continuing accreditation site visit.

The process of self-study represents the combined efforts of the governing organization administrators, nursing program administrators, faculty, staff, students, and other individuals concerned with the nursing program(s). All those associated with the program(s) should participate in the self-study process. Broad participation leads to an understanding of the total program.

The Self-Study Report is a primary document used by the peer evaluators visiting the program, the peer evaluators on the Evaluation Review Panel, and the Board of Commissioners to understand the nursing program.

- The report must be based on the ACEN Standards and Criteria in effect at the time of review.
- Faculty and administrators are responsible for presenting narrative and evidence that clearly demonstrate the extent to which the program meets the ACEN Standards and Criteria. Peer evaluators visiting the program will use the Self-Study Report in preparation for their visit to the program.

The **2023 ACEN Guidelines** are available to assist programs in preparing for an upcoming initial or continuing accreditation site visit.

THE INITIAL OR CONTINUING ACCREDITATION SITE VISIT

The purpose of the initial or continuing accreditation site visit is to determine the extent to which the program meets the ACEN Standards and Criteria by clarifying, verifying, and amplifying the information (narrative/evidence) presented in the Self-Study Report. Based on findings, the peer evaluators visiting the program will make a determination regarding whether they were able to verify compliance with all Standards and Criteria reviewed.

Onsite review of the program by peer evaluators is an essential part of the accreditation process. It provides the program an opportunity to demonstrate and highlight information presented in its Self-Study Report and provides for interaction among peer evaluators and stakeholders: administrators, faculty, students, staff, and the public. In addition, the initial or continuing accreditation site visit provides peer evaluators an opportunity to see the nursing program first-hand. The peer evaluators conduct an independent analysis and make professional judgments on the extent to which the program meets the ACEN Standards and Criteria; their judgments are documented in the Site Visit Report. These peer evaluators verify congruence between the Self-Study Report and the actual practices of the program so that the peer evaluators on the Evaluation Review Panel and Board of Commissioners have a clear and complete understanding of the program.

Multiple Nursing Programs Within a Nursing Education Unit

The ACEN encourages single nursing education units offering more than one type of nursing program (practical, diploma, associate, baccalaureate, master's, and clinical doctorate) to request that all programs be reviewed for continuing or initial accreditation at the same time. The nursing education unit will prepare one Self-Study Report for all the programs and host one site visit for all the programs.

Coordinated and Combined Site Visits

Coordinated Visit

Coordinated visits typically occur in conjunction with an initial or continuing accreditation visit or sometimes with a follow-up visit to cooperate with other accreditation and/or approval granting agencies. For example, an initial accreditation visit may be coordinated with a state board of nursing. The ACEN welcomes the opportunity to cooperate with other accreditation and approval-granting agencies (e.g., state regulatory agency for nursing). The goal is to increase efficiency and decrease faculty workload while maximizing outcomes. To arrange a coordinated visit, the nurse administrator initiates the process by submitting a request to the ACEN. The ACEN staff then work with the institutional/program administrators and faculty members to achieve their goal.

For a coordinated site visit, the program prepares materials separately for each agency team. The two teams share an agenda and conduct a site visit that meets each agency's requirements. However, the representative from another agency is not a member of the ACEN site visit team. The ACEN peer evaluators and the other representative may participate jointly in activities such as conferences with faculty, students, and other groups. Many of the activities of the ACEN peer evaluators and the representative will be carried out separately as the purposes of ACEN accreditation may differ from those of other accrediting/approval-granting bodies. At the conclusion of the site visit, each agency writes a report that documents the extent to which the program meets the agency's respective standards and criteria or regulations.

Combined Visit

Follow-Up and focused visits typically occur independently; however, it is possible that a follow-up or focused visit could be combined with a regular continuing site visit. For example:

- A continuing accreditation visit is combined with a follow-up visit
- A continuing accreditation visit is combined with a focused visit

The goal of combining visits is to increase efficiency and decrease faculty workload. The faculty will prepare a Self-Study Report that addresses all Standards and Criteria for the continuing accreditation visit with an additional emphasis on the non-compliant Standard(s) for the follow-up or the type of substantive change necessitating the focused visit.

Length of the Initial or Continuing Accreditation Site Visit

The initial or continuing accreditation site visit is typically scheduled for a minimum of three days. However, the length depends on several factors, including size and complexity of the nursing program, the number of nursing program types involved, and the locations of the program(s). Correspondence from the ACEN will indicate the inclusive dates of the visit.

Assignment of Peer Evaluators on a Site Visit Team

Each initial or continuing accreditation site visit is conducted by a team of peers representing nurse educators, nurse clinicians and/or administrators with program-specific expertise. The site visit team reviewing a single program typically has three peer evaluators as the team members. Graduate programs offering advanced practice nursing options will have at least one team member with a current advanced practice registered nurse (APRN) background.

The ACEN staff will appoint the team of peer evaluators and notify the nurse administrator in advance of the visit. The nurse administrator should contact the ACEN staff in writing if a possible conflict of interest is identified with a peer evaluator. If a peer evaluator becomes ineligible or is unable to serve, another peer evaluator with comparable qualifications will be appointed.

When creating site visit teams, the ACEN staff takes into consideration assigning peer evaluators with backgrounds that are as similar as reasonably possible to the program being visited, including, but not limited to:

- Program type(s)
- Size of program(s) and governing organization
- State/Country
- Characteristics of the governing organization (public, private, religious affiliation, etc.)

Responsibilities of the Team Chairperson

A peer evaluator is eligible to be a team chairperson after serving on a minimum of three teams as a peer evaluator. Eligible peer evaluators are required to complete additional training prior to chairing a visit. Team chairs assume the usual responsibilities of a team member; however, additional responsibilities include being the team spokesperson, coordinating/planning of the visit in collaboration with the nurse administrator and team members, facilitating meetings and interviews during the visit, and requesting of additional information as appropriate. The team chair is also responsible for the collating and final editing of the team's site visit report to ensure completeness and clarity, and submission of the report within one week following the site visit. The team chair must also provide any report clarifications identified by the ACEN staff after submission and may receive requests for further clarifications prior to the ERP meetings.

Responsibilities of the Team Members

Eligible peer evaluators are required to complete site visitor training prior to participating on a site visit. Team member responsibilities include reviewing program materials in the ACEN Repository, preparing a draft copy of the Site Visit Report findings for assigned areas, submitting the draft to the team chair one week prior to the site visit, and making a list of findings that require additional verification, clarification, and/or amplification at the time of the site visit. Team members also collaborate with the team chair and other team members in completing the meetings, interviews, and observations identified on the site visit agenda, and revises the final version of the draft report to submit to the team chair. Team members must also provide any report clarifications identified by the ACEN staff after submission and may receive requests for further clarifications prior to the ERP meetings.

Responsibilities of the Nursing Program

Programs have specific responsibilities before, during, and after the site visit including, but not limited to, providing laptop computers for the team members, if requested by the team, to use throughout the site visit. Also, if needed, access to printing minimally at the campus. The program will need to identify a workroom where the team members can work during the site visit. The program must prepare to upload the report and supporting evidence into the ACEN repository by the due date (six weeks prior to the visit), and any additional evidence requested by peer evaluators. Programs must also ensure that peer evaluators have access to confidential materials and obtaining any necessary written permissions required prior to the site visit (e.g., review of records, access to the LMS). Programs for which all, or part, of the curriculum is delivered in a language other than English should make provisions for an interpreter to be present throughout the initial or continuing accreditation site visit and to make certain that **all program documents are available in English** for review by the peer evaluators. Additional specifics about preparing for the site visit will be communicated to the nurse administrator prior to the visit by the ACEN staff and resources will also be available in the ACEN Repository.

Travel Arrangements

See Travel Policy for site visit arrangements for domestic programs and the Supplement for International Programs for site visit arrangements specific to international programs.

Agenda for the Site Visit

At least six weeks prior to the scheduled site visit, a tentative agenda for the site visit is prepared by the nurse administrator and sent to the team chair. See the **ACEN 2023 Guidelines** for a list of required agenda items and a sample agenda for a site visit. The ACEN 2023 Guidelines also include information such as visiting Off-Campus Instructional Sites and the use of Distance Education. The site visit team must visit a majority of locations were the program is offered. For programs that use Distance Education, access to the courses should be provided with the Self-Study Report at least six weeks prior to the and throughout the visit.

THE SITE VISIT REPORT

The site visit team chair is responsible for presenting an accurate, complete, and well-organized Site Visit Report to the ACEN within one week after the conclusion of the site visit. Team members review the final report prior to submission to the ACEN. All Site Visit Reports are reviewed by the ACEN staff. If questions arise, the site visit team is contacted for clarification.

A draft copy of the Site Visit Report is emailed to the nurse administrator of the nursing program(s) approximately 6-8 weeks after the conclusion of the visit. The program faculty will have an opportunity to submit a response to the findings including any errors of fact, additional information, or changes since the time of the site visit.

EVALUATION REVIEW PANEL

Peer evaluators who have completed three visits as a team member are eligible to serve as an Evaluation Review Panel (ERP) member. Eligible peer evaluators are required to complete training prior to participating in ERP. The ERP panels are composed of nurse educators, clinicians, and administrators. The role of the ERP is to continue the peer review process, conduct its own independent analysis on the extent to which the program meets the ACEN Standards, and ensure the consistent application of the ACEN Standards and Criteria.

The Panel reviews the findings as presented in the Site Visit Report compared to the program's report and response to the Site Visit Report. The Evaluation Review Panel also validates the work of the peer evaluators that visited the program and extends it by noting points of agreement and raising any questions where there is disagreement or a lack of clarity exists. The aim is to provide consistency in the findings for the program type. The Evaluation Review Panel member may request additional information/clarification during their review of the materials. The Panel then makes its recommendation for accreditation status to the Board of Commissioners. The dates for the Evaluation Review Panel meetings are available on the ACEN website.

BOARD OF COMMISSIONERS

The Board of Commissioners has the sole authority to determine the accreditation status of programs. Composed of nurse educators, nursing clinicians/practitioners, administrators, and public members,

the Board of Commissioners bases its decisions on its own independent analysis and professional judgment on the extent to which the program meets the ACEN Standards and Criteria. The Board of Commissioners also considers the previous peer evaluators' judgement and recommendations, as well as the consistent application of the ACEN Standards and Criteria within and across all program types.

The decision is based on the program's report, the Site Visit Report, the program's response, and the ERP findings and recommendation. The dates for the Board of Commissioners meetings are available on the ACEN website. To assist the nursing program in future planning, the nurse administrator receives a copy of the Board of Commissioners' decision letter.

In cases where accreditation is denied, programs have the opportunity to present their case in an impartial hearing before an independent **Appeal Committee** per **Policy #10 Appeal Process and Submission and Review of New Financial Information Subsequent to Adverse Action**.

QUALIFCIATIONS FOR SERVING AS A PEER EVALUATOR

Peer evaluators are knowledgeable about common, contemporary, and best practices within the various program types, appropriate curricula, and conventions as well as current trends in healthcare, nursing education, and/or nursing practice.

Eligibility to serve as an ACEN peer evaluator is dependent on requirements located in ACEN **Policy #1 Code of Conduct and Conflict of Interest** and **ACEN Policy #2 Representation on the Site Visit Teams, Evaluation Review Panels, and Board of Commissioners.** Additionally, educational and experiential requirements for becoming a Peer Evaluator are located on the ACEN website.

Board of Commissioners

Board of Commissioners are elected by the ACEN-accredited nursing programs. The nurse administrator for each nursing program votes on individuals on the ballot for the open board positions. Additional information regarding the Board election process, terms of office, and the various roles of the Board of Commissioners is available in the **Bylaws – Part B**.

Appeal Committee Members

Selection

Members of the Appeal Committee must have knowledge of and experience with the peer-review process.

Appointment

The Appeal Committee consists of individuals selected from a Board of Commissioners-approved list of the individuals qualified to serve as members of the Appeal Committee. See **Policy #10 Appeal Process and Submission and Review of New Financial Information Subsequent to Adverse Action**. A list of the individuals who have been appointed to the Appeal Committee is accessible on the ACEN website.

Arbitrators

Selection

The ACEN shall maintain a roster of arbitrators.

Appointment and Preparation

A list of the individuals who are Arbitrators is accessible on the ACEN website. See **Policy #38 Arbitration**.

SECTION 2:
ACEN POLICIES

POLICY #1 CODE OF CONDUCT AND CONFLICTS OF INTEREST

To ensure that all matters dealing with the accreditation of programs by the Accreditation Commission for Education in Nursing (ACEN) are conducted with integrity, fairness, impartiality, and objectivity, the ACEN has adopted this policy addressing conflict of interest, conduct, and confidentiality.

CONFLICT OF INTEREST FOR PEER EVALUATORS

In all circumstances, conflicts of interest as well as the appearance of conflicts of interest must be avoided. All peer evaluators (site visitors, Evaluation Review Panel members, Commissioners, and Appeal Panel members) and any other individuals who act on behalf of the ACEN shall not have direct involvement with and/or participate in any decision-making capacity for a nursing program if they have an actual or potential conflict of interest with the program. Peer evaluators have a duty to disclose any actual or potential conflicts of interest. Actual or potential conflicts of interest may include (but are not limited to) the following:

1. Being a current or former employee of the governing organization that is under review.
2. Being a current student, former student, or graduate of the governing organization that is under review.
3. Maintaining employment in the same state (U.S. and U.S. Territories) or in the same non-U.S. country as the nursing education unit that is under review.
4. Maintaining a primary residence in the same state (U.S. and U.S. Territories) or in the same non-U.S. country as the nursing education unit that is under review.
5. Having served as a peer evaluator in the past eight years on any ACEN accreditation matter involving the nursing education unit that is under review.
6. Having served as a consultant in the past eight years on any accreditation matter involving the governing organization or nursing education unit that is under review.
7. Having served in an evaluation role in the past eight years for an agency other than the ACEN regarding the same governing organization or nursing education unit that is under review, including (but not limited to) membership on the state regulatory agency for nursing site visit teams, institutional accreditation teams, or evaluation committees for boards of trustees, regents, or a similar entity.
8. Having been paid or otherwise profited (or appeared to have profited) from service from the governing organization or nursing education unit under review.
9. Having affiliations or close personal or professional relationships in the past eight years with key personnel in the governing organization or nursing education unit that is under review.
10. Having immediate family members who are current employees, board members, or students enrolled at the governing organization that is under review.
11. Having a current financial interest in the governing organization that is under review, including (but not limited to) ownership of shares of stock in the governing organization or any parent of the governing organization, excepting shares or interests held indirectly (such as but not limited to in mutual funds, insurance policies, or blind trusts); in addition, having any immediate family members with any of the above financial interests.
12. Having any other relationship or reason that could serve as an impediment to

rendering an impartial, objective, and professional judgment regarding the nursing program that is under review.

CONDUCT AND ETHICAL GUIDELINES FOR NURSING PROGRAMS

1. It is the responsibility of each nursing program to facilitate a thorough and objective appraisal of its nursing program.
2. Nursing programs may veto a peer evaluator if it can be demonstrated in writing to the ACEN Chief Executive Officer or designee that an actual or a potential conflict of interest exists.
3. Any perceived inadequacies of the ACEN procedures or processes should be reported by the program's nurse administrator to the ACEN Chief Executive Officer or designee at the time of the occurrence rather than withheld until after the ACEN Board of Commissioners makes an accreditation decision.

CONDUCT AND ETHICAL GUIDELINES FOR PEER EVALUATORS

1. Any commissioner or member of the Evaluation Review Panel, who was a member of a site visit or has a primary residence or is currently employed in the same state as the nursing education unit under consideration, must recuse her/himself from the Evaluation Review Panel or commission discussion about the program and must abstain from voting.
2. When the governing organization or nursing education unit with which a commissioner is employed is being considered for accreditation or appeal, the commissioner will recuse her/himself from the portion of the ACEN Board of Commissioners' meeting agenda concerned with the evaluation of that program and will abstain from voting.
3. Peer evaluators are required to refrain from accepting membership on a team and are to recuse themselves from the discussion during the review of any program if their presence would constitute or appear to constitute a conflict of interest, abstaining from voting if a conflict of interest is identified.
4. Peer evaluators have a duty to disclose their actual or potential conflicts of interest.
5. Individuals shall not advertise their status as an ACEN peer evaluator for the purpose of consulting.
6. Individuals shall not solicit consultation arrangements with programs preparing for accreditation review.
7. Individuals shall not give advice or consult for a nursing education unit for a period of eight years after serving as a peer evaluator on any ACEN accreditation matter related to that nursing program.
8. Individuals shall not offer definitive answers related to ACEN policies and procedures or the ACEN Standards and Criteria.

CONFLICT OF INTEREST, CONDUCT, AND ETHICAL GUIDELINES FOR ACEN STAFF

In all circumstances, conflicts of interest and the appearance of conflicts of interest must be avoided. No staff member shall have direct involvement with a nursing education unit if they have an actual or potential conflict of interest with the program.

Staff should inform the ACEN Chief Executive Officer where an actual or potential conflict of interest exists. While not intended to be a comprehensive list, examples of when a staff

member may have a conflict of interest include the following:

1. Was a compensated consultant, appointee, employee of, or candidate for employment at the governing organization or nursing education unit.
2. Is a graduate of the governing organization.
3. Has a close personal or familial relationship with persons at the governing organization.
4. Has a strong bias regarding the governing organization or nursing education unit.
5. Has any other relationship or reason that could serve as an impediment to acting in an impartial, objective professional manner toward the governing organization or nursing education unit.
6. Has a current financial interest in the governing organization under review, including (but not limited to) ownership of shares of stock in the governing organization or any parent of the governing organization, excepting shares or interests held indirectly (such as but not limited to mutual funds, insurance policies, or blind trusts), or has any immediate family members with any of the aforementioned financial interests.

In addition, staff are prohibited from accepting fees, awards, or honorary degrees from a governing organization with a nursing program that is accredited by the ACEN.

CONFIDENTIALITY AND COMMUNICATIONS FOR PEER EVALUATORS AND ACEN STAFF

To ensure that all matters dealing with the accreditation of nursing programs are conducted with integrity, fairness, impartiality, and objectivity, individuals who participate in ACEN activities, including (but not limited to) peer evaluators and ACEN staff, must maintain confidentiality with regards to all non-public information related to the accreditation review and consideration of a nursing program by the ACEN. Accordingly, peer evaluators and ACEN staff shall conduct themselves as follows:

1. Documents, reports, and other materials prepared by the program for the ACEN must be treated as confidential materials in the absence of specific policies making clear the degree and extent of their permissible exposure. The ACEN will release materials only in response to a valid court order or otherwise as may be required by law.
2. All materials pertinent to the nursing program under review are considered confidential materials prepared for use by the ACEN and should not be shown to or discussed with anyone other than peer evaluators and ACEN staff as appropriate and when necessary.
3. Peer evaluators and ACEN Staff may not use open-source artificial intelligence (AI) for any program-related materials during a review process or formulating a report.
4. Accreditation decisions issued by the ACEN Board of Commissioners must be kept confidential. Accreditation decisions will be communicated to the program in writing only by the ACEN Chief Executive Officer or designee.
5. A peer evaluator or an ACEN staff member shall not share with a governing organization or nursing education unit employee or any other person any information regarding the review proceedings.
6. Any request by a peer evaluator for additional information from the governing

organization/nursing program following a site visit or related to an Evaluation Review Panel must be directed to the ACEN staff. Direct communication between a peer evaluator and the governing organization and/or the nursing program under review only occurs when preparing for an upcoming site visit.

7. ACEN Staff shall not use open-source AI for any non-public ACEN materials.
8.

DISCLOSURE AND COMMITMENT TO COMPLY WITH POLICY #1

Prior to each site visit, Evaluation Review Panel meeting, or Board of Commissioners meeting, each peer evaluator will sign electronically or by hand an attestation that they agree to comply with all aspects of the Policy #1 ACEN Code of Conduct and Conflict of Interest. Annually, each ACEN staff member will sign electronically or by hand an attestation that they agree to comply with all aspects of the Policy #1 ACEN Code of Conduct and Conflict of Interest Policy.

Policy #1 History

Revised November 2015
Edited October 2016
Edited March 2019
Revised July 2020
Edited June 2023
Revised 2025

POLICY #2 REPRESENTATION ON SITE VISIT TEAMS, EVALUATION REVIEW PANELS, AND THE BOARD OF COMMISSIONERS

Site visit teams and the Evaluation Review Panels are composed of nurse educators/clinicians, nurse clinicians/practitioners, and/or administrators. The ACEN Board of Commissioners is composed of nurse educators/clinicians, nurse clinicians/practitioners, administrators, and public members.

NURSE EDUCATOR/CLINICIAN

A nurse educator/clinician is an experienced, licensed nurse clinician/practitioner with academic expertise in evidence-based teaching of practical, diploma, associate, baccalaureate, master's, and/or clinical doctorate, nursing education programs. The nurse educator/clinician teaches, guides, and instructs the next generation of nurse clinicians/practitioners in classroom, laboratory, simulation, and/or nursing practice settings. The nurse educator/clinician also has expertise and accountability for academic control of the program through participation in designing, revising, implementing, and evaluating nursing curricula to educate nursing students in preparation for contemporary clinical nursing practice.

Nurse educators/clinicians are individuals who:

1. Currently hold primary employment as a full- or part-time faculty or administrative position in an ACEN-accredited program or nursing education unit.

2. Previously held primary employment as a full- or part-time faculty or administrative position in an ACEN-accredited program or nursing education unit and has been retired for no more than two years from this position.

Nurse educators/clinicians are eligible to serve on a site visit team as a team member or team chair, on the Evaluation Review Panel as a member, and on the ACEN Board of Commissioners.

NURSE CLINICIAN/PRACTITIONER

A nurse clinician/practitioner is a licensed nurse employed in a nursing practice position. Nursing practice is broad and encompasses a range of employment settings and role responsibilities. Examples include (but are not limited to) bedside nursing in acute, chronic, and community settings, advanced practice nursing in any specialty, nursing education at any level of a nursing education program, and administrative nursing positions.

Nurse clinicians/practitioners are individuals who:

1. Currently hold full- or part-time employment in a nursing practice position.

2. Previously held full- or part-time employment in a nursing practice position and has been retired for no more than two years from this position.

Nurse clinicians/practitioners are eligible to serve on a site visit team as a team member or team chair, on the Evaluation Review Panel as a member, and on the ACEN Board of Commissioners.

ADMINISTRATOR

An administrator is an individual with administrative oversight of an ACEN-accredited nursing education program (e.g., nurse administrator, coordinator, or an individual with documented administrative responsibilities within a governing organization and has direct involvement in curricular and assessment activities of the nursing program). Administrators are individuals who:

1. Currently hold primary full- or part-time employment providing administrative oversight for an ACEN-accredited nursing education program.

2. Previously held primary full- or part-time employment providing administrative oversight for an ACEN-accredited nursing education program and has been retired for no more than two years from this position.

Administrators are eligible to serve on a site visit team as a team member or team chair, on the Evaluation Review Panel as a member, and on the ACEN Board of Commissioners.

PUBLIC MEMBERS

Public members are individuals with no connection to the discipline of nursing. An individual representing the public may not be:

1. An employee, owner, or shareholder of a governing organization with any accredited or non-accredited nursing program or candidate /applicant nursing program.

2. A member of the governing board for a governing organization with any accredited or non-accredited nursing program or candidate /applicant nursing program.

3. A consultant to any accredited or non-accredited nursing program or candidate/applicant nursing program.

4. Affiliated or associated with any nursing accreditation agency or nursing organization, such as the American Association of Colleges of Nursing, the American Nurses Association, or the National League for Nursing.

5. A spouse, parent, child, or sibling of an individual identified in the above statements.

Public members are eligible to serve on the ACEN Board of Commissioners.

EMERITI PEER EVALUATOR

Emeritus appointment is recognition of the ongoing engagement and maintenance of expertise in the ACEN peer review process.

Emeriti peer evaluators have had consistent service as an ACEN peer evaluator in the nurse educator/clinician, nurse clinician/practitioner, administrator role, or is a current or former ACEN employee. A nurse educator/clinician, nurse clinician/practitioner, or administrator peer evaluator is eligible for this status if they have had consistent positive feedback from ACEN staff, other peer evaluators, and/or nurse administrators.

Emeriti peer evaluators whose service was as an ACEN peer evaluator in the nurse educator/clinician, nurse clinician/practitioner, or administrator role are eligible to serve on a site visit team as a team member or team chair or Evaluation Review Panel as a member.

Emeritus status can be granted:

1. within two years after retirement from full- or part-time employment in an educator/clinician or administrator role in an ACEN-accredited program.

2. within two years after retirement from full- or part-time employment in a clinician/practitioner role.

3. throughout employment as an ACEN employee or upon leaving the ACEN as an employee.

CHIEF EXECUTIVE OFFICER ACTIONS

1. The ACEN Chief Executive Officer or designee reserves the right to appoint one or more special members, who may not be a nurse educator/clinician, clinician/practitioner, or administrator, to (1) a site visit team or (2) to an Evaluation Review Panel. The special member(s) may have expertise in an area that a nurse educator/clinician, clinician/practitioner, or administrator typically would not have. The governing organization/nursing program is responsible for all costs of the special members serving on the site visit team.

2. The ACEN Chief Executive Officer or designee reserves the right to have an ACEN staff member accompany a site visit team as an advisor. If an ACEN staff member accompanies a site visit team in this capacity, the staff member would offer guidance to the peer evaluators. The governing organization/nursing program is responsible for all costs of the staff member accompanying the site visit team.

3. The ACEN Chief Executive Officer or designee reserves the right to have an ACEN staff member serve on a site visit team as a team chair and/or team member. If an ACEN staff member serves on a site visit team, the staff member would serve as an emeriti peer evaluator. The governing organization/nursing program is responsible for all costs of the staff member serving on the site visit team.

Policy #2 History

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Revised October 2016
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POLICY #3 ELIGIBILITY FOR INITIAL AND CONTINUING ACCREDITATION

To be eligible for initial or continuing accreditation, the governing organization and nursing program must demonstrate that they meet or continue to meet all the eligibility and continuing eligibility requirements of the ACEN.

GOVERNING ORGANIZATION/INSTITUTION SEEKING INITIAL ACCREDITATION ELIGIBILITY REQUIREMENTS

1. The governing organization/institution is legally authorized to provide a postsecondary education program in the state or country in which the governing organization/institution and nursing program is physically located.

2. The governing organization/institution is legally authorized to grant the credential (degree, diploma, or certificate) for the nursing program seeking accreditation.

3. The governing organization/institution is accredited or approved to pursue accreditation by a governing organization/institutional accrediting agency recognized by the ACEN; however, this does not apply to programs outside the U.S. or its territories.

4. For governing organizations/institutions included in "The ACEN Will Accredit A Nursing Program When…" section below that do not hold governing organization/institutional accreditation by a governing organization/institutional accrediting agency recognized by the ACEN:
   a. The governing organization/institution must be approved to pursue accreditation by a governing organization/institutional accrediting agency recognized by the ACEN.
   b. The governing organization/institution must be accredited with a governing organization/institutional accrediting agency recognized by the ACEN before the ACEN Board of Commissioners makes its initial accreditation decision for the nursing program(s) seeking initial accreditation with the ACEN.

5. For governing organizations/institutions included in point 2 of "The ACEN Will Accredit A Nursing Program When…" section below that do not hold or are ineligible to hold governing organization/institutional accreditation by a governing organization/institutional accrediting agency recognized by the ACEN, the governing organization/institution must be approved by a supervisory state education department, public school system, or district before the ACEN Board of Commissioners makes its initial accreditation decision for the nursing program(s) seeking initial accreditation with the ACEN.

6. The program's nurse administrator is responsible for immediately informing the ACEN Chief Executive Officer or designee in writing of any change of status with any agency that accredits and/or approves the governing organization/institution. The notification must occur before the ACEN Board of Commissioners makes its initial accreditation decision.

GOVERNING ORGANIZATION/INSTITUTION SEEKING CONTINUING ACCREDITATION

1. The governing organization/institution must continuously hold legal authorization to provide a postsecondary education program in the state or country in which the governing organization/institution and nursing program are physically located.

2. The governing organization/institution must continuously hold legal authorization to grant the credential (degree, diploma, or certificate) for the nursing program seeking accreditation.

3. For governing organizations/institutions included in the section below, the governing organization/institution must continuously hold an accredited status with an ACEN-recognized governing organization/institutional accrediting agency; however, this does not apply to programs outside the U.S. or its territories.

4. For governing organizations/institutions included in point 2 of the section below, the governing organization/institution must continuously hold approval by a supervisory state education department, public school system, or district.

5. The program's nurse administrator is responsible for immediately informing the ACEN Chief Executive Officer or designee in writing of any change of status with any agency that accredits and/or approves the governing organization/institution. The notification must occur before the ACEN Board of Commissioners makes its continuing accreditation decision.

THE ACEN WILL ACCREDIT A NURSING PROGRAM WHEN…

1. It is administered by a college, university, or technical/vocational governing organization/institution that is part of the system of higher education, grants a diploma, certificate, associate degree, baccalaureate degree, master's degree, post-master's certificate, clinical doctorate degree in nursing, or DNP specialist certificate, and the college, university, or technical/vocational governing organization/institution holds governing organization/institutional accreditation through an **ACEN-recognized governing organization/institutional accrediting agency**.

2. It is administered by a vocational, technical, or career school, public school system, or district, grants a postsecondary certificate, and the vocational, technical, or career school, public school system, or district holds governing organization/institutional accreditation through an **ACEN-recognized governing organization/institutional accrediting agency** or the governing organization is supervised by a state education department, public school system, or district.

3. It is administered by a hospital, grants a diploma, certificate, associate degree, baccalaureate degree, master's degree, post-master's certificate, clinical doctorate in nursing degree, or DNP specialist certificate, and the hospital holds governing organization/institutional accreditation through an **ACEN-recognized governing**

organization/institutional accrediting agency. Programs outside the U.S. or its territories must be administered by a college, university, or a technical or vocational governing organization/institution that is a part of a system of higher education as well as grant a diploma, certificate, associate degree, baccalaureate degree, master's degree, post-master' s certificate, clinical doctorate degree in nursing, or DNP specialist certificate.

4. It is administered by an independent college, university, or a technical or vocational governing organization/institution, grants a diploma, certificate, associate degree, baccalaureate degree, master's degree, post-master's certificate, clinical doctorate in nursing degree, or DNP specialist certificate, and the college, university, or technical or vocational governing organization/institution holds governing organization/institutional accreditation through an **ACEN-recognized governing organization/institutional accrediting agency**.

Programs outside the U.S. or its territories must be administered by a college, university, or technical or vocational governing organization/institution that is a part of a system of higher education and grant a diploma, certificate, associate degree, baccalaureate degree, master's degree, post-master's certificate, clinical doctorate degree in nursing, or DNP specialist certificate. The institution must be approved/accredited by the national agency/agencies overseeing higher education in the respective country.

If the nursing program is administered by a vocational, technical, or career school or public school system or district and grants a postsecondary certificate, the governing organization/institution and nursing program may use ACEN accreditation to establish eligibility to participate in Title IV programs of the Higher Education Act of 1965, as amended. If the governing organization's/institution's accrediting agency is recognized by the U.S. Department of Education to establish Title IV eligibility, the ACEN may not be used to establish Title IV eligibility.

If the nursing program is administered by a hospital and grants a diploma, certificate, associate degree, baccalaureate degree, master's degree, post-master's certificate, clinical doctorate in nursing, or DNP specialist certificate, the governing organization/institution and nursing program may use ACEN accreditation to establish eligibility to participate in Title IV programs of the Higher Education Act of 1965 as amended. If the governing organization's/institution's accrediting agency is recognized by the U.S. Department of Education to establish Title IV eligibility, the ACEN may not be used to establish Title IV eligibility. Title IV does not apply to programs outside the U.S. or its territories.

NURSING PROGRAM INITIAL ACCREDITATION REQUIREMENTS

1. The nursing program must be approved without qualification, except new programs that may have a provisional status related to having no graduates, by the state or country agency(ies) that has/have legal authority for education programs in nursing. This is not applicable to those programs in nursing over which a state or country regulatory agency that has legal authority for education programs in nursing has no jurisdiction (e.g., selected master's degree programs or programs admitting previously licensed registered nurses).

2. The program's nurse administrator is responsible for immediately informing the ACEN

Chief Executive Officer or designee in writing of any change of status with any state or country agency that has legal authority for education programs in nursing. The notification must occur before the ACEN Board of Commissioners makes its initial accreditation decision.

NURSING PROGRAM CONTINUING ACCREDITATION REQUIREMENTS

1. The nursing program must be approved with or without qualification by the state or country agency(ies) that has/have legal authority for education programs in nursing. This is not applicable to those programs in nursing over which a state or country regulatory agency that has legal authority for education programs in nursing has no jurisdiction (e.g., selected master's degree programs or programs admitting previously licensed registered nurses).

2. The program's nurse administrator is responsible for immediately informing the ACEN Chief Executive Officer or designee in writing of any change of status with any state or country agency that has legal authority for education programs in nursing. The notification must occur before the ACEN Board of Commissioners makes its continuing accreditation decision.

RECOMMENDATIONS FOR GOVERNING ORGANIZATIONS, INSTITUTIONS, AND NURSING PROGRAMS SEEKING INITIAL ACCREDITATION

1. For nursing programs without previous graduates, the program should seek approval to pursue ACEN accreditation and host the initial accreditation site visit within a timeframe that would facilitate that all students are graduates of an accredited program.

2. For nursing programs with previous graduates, the program should seek approval to pursue ACEN accreditation and host the initial accreditation site visit as soon as possible to facilitate students graduating from an accredited program.

RECOMMENDATIONS FOR GOVERNING ORGANIZATIONS, INSTITUTIONS, AND NURSING PROGRAMS SEEKING INITIAL OR CONTINUING ACCREDITATION

1. If a governing organization offers the same certificate or degree nursing program with more than one option, that nursing program (and all its options) must be reviewed in its entirety for initial or continuing accreditation by the ACEN. All nursing program options that lead to the same degree or certificate within a governing organization/institution must be accredited by the ACEN for any one of the options to be accredited. The nursing program may not select individual options within the same certificate or degree to be reviewed for accreditation.

EXAMPLE 1:
The accreditation of a master's degree program that includes several options, such as Family Nurse Practitioner (FNP), Adult Gerontology Acute Care Nurse Practitioner (AGACNP), Nurse Education, and Nurse Leader, must be inclusive of all options. The nursing program may not select only the FNP and AGACNP options to be reviewed for accreditation.

Rationale: Students graduate from a master's degree program, not the program option; therefore, the accreditation applies to the entire nursing program.

EXAMPLE 2:
The accreditation of an associate degree program that includes two options, such as prelicensure and LPN-to-RN, must be inclusive of all options. The nursing program may not select only the prelicensure option to be reviewed for accreditation.

Rationale: Students graduate from an associate degree program, not the program option; therefore, the accreditation applies to the entire nursing program.

2. If a governing organization/program offers a graduate-level certificate(s) composed of only the specialty courses for an option(s), the ACEN will automatically include the graduate-level certificate program option(s) in its review of the graduate-level degree program in the accreditation process.

EXAMPLE 3:
A governing organization offers a seeks accreditation of a master's program that includes several options, such as Family Nurse Practitioner (FNP), Adult Gerontology Acute Care Nurse Practitioner, Nurse Educator, and Nurse Leader, and the governing organization/program offers a certificate(s) composed of only the specialty courses from an option(s) such as FNP, then the ACEN will automatically include the certificate program option(s) in its review of the degree program in the accreditation process.
Rationale: The options that compose the certificate(s) are a subset of the degree program, and the accreditation applies to the entire nursing program, including the certificate(s).

3. The ACEN supports models whereby one nursing program is "nested" within another nursing program, which facilitates graduates being able to progress seamlessly from one level of licensure to another level of licensure, such as practical nursing to registered nursing. A "nested" practical nursing program is an educational program leading to a specific level of licensure and must have its own program-specific end-of-program student learning outcomes. Graduates from a practical nursing program embedded within an ACEN-accredited registered nursing program are not graduates of an ACEN-accredited practical nursing program unless the practical nursing program holds ACEN accreditation specifically for the practical nursing program.

4. If a governing organization offers the same certificate or degree nursing program at more than one location within the same nursing education unit, then that nursing program (and all locations) must be reviewed in its entirety for initial or continuing accreditation by the ACEN. The nursing program may not select individual locations within the same certificate or degree nursing program to be included in the ACEN accreditation.

5. In accordance with federal regulation 34 CFR §602.28 and consistent with ACEN policy:

    a. The ACEN may not grant initial accreditation or continuing accreditation to a governing organization/institution or a nursing program offered by a governing organization/institution if the ACEN knows or has reasonable cause to know that

a governing organization/institution or a nursing program is the subject of:

i. A pending or final action brought by a state agency to suspend, revoke, withdraw, or terminate a governing organization's/institution' s legal authority to provide postsecondary education in the state.
ii. A decision by a recognized agency to deny accreditation or pre-accreditation.
iii. A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate a governing organization's/institution's accreditation or pre-accreditation.
iv. A probation or an equivalent status imposed by a recognized agency.

b. The ACEN may grant initial accreditation or continuing accreditation to a governing organization/institution or nursing program only if ACEN provides to the Secretary of the U.S. Department of Education within 30 calendar days of its action a thorough and reasonable explanation consistent with the Standards and Criteria why the action of the other body does not preclude the granting of initial accreditation or continuing accreditation by the ACEN.

c. If the ACEN learns that a governing organization/institution or nursing program it accredits is the subject of an adverse action by another recognized accrediting agency or has been placed on probation or an equivalent status by another recognized agency, the ACEN must promptly review its accreditation of the governing organization/institution or nursing program to determine if it should also take adverse action or place the governing organization/institution or nursing program on conditions or warning.

i. See **Policy #14 Reporting Substantive Changes** and Policy #18 Accreditation Status of the Governing Organization for details regarding a negative or adverse action by an appropriate governing organization/institutional accrediting agency.

Policy #3 History

Revised July 2015
Revised October 2016
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Edited June 2023
Edited June 2025

POLICY #4 TYPES OF COMMISSION ACTIONS FOR INITIAL AND CONTINUING ACCREDITATION

INITIAL ACCREDITATION

The ACEN Board of Commissioners may grant initial accreditation or deny initial accreditation.

1. **Initial accreditation of a nursing program is granted** when the ACEN Board of Commissioners determines that a program demonstrates compliance with all Accreditation Standards. The next review process shall be in five years from the accreditation cycle that resulted in the ACEN Board of Commissioners granting initial accreditation.

2. **Initial accreditation of a nursing program is denied** when the ACEN Board of Commissioners determines a program does not demonstrate compliance with all Accreditation Standards. Denial of initial accreditation is an appealable action.
    a. The nursing program may restart the candidacy process after the denial of initial accreditation.
        i. If a governing organization/nursing program appeals the denial of initial accreditation, the governing organization/nursing program may restart the candidacy process only after the conclusion of the appeal process.
        ii. If a governing organization/nursing program pursues arbitration, the governing organization/nursing program may restart the candidacy process only after the conclusion of the arbitration process.
        iii. If a governing organization/nursing program pursues legal proceedings, the governing organization/nursing program may restart the candidacy process only after the conclusion of the legal proceedings.

CONTINUING ACCREDITATION

The ACEN Board of Commissioners may grant continuing accreditation or deny continuing accreditation.

1. **Continuing accreditation is granted** when the ACEN Board of Commissioners determines that a nursing program is in compliance with all Accreditation Standards.
    a. The maximum amount of time between continuing accreditation cycles shall be eight years.

2. **Continuing accreditation with conditions** is granted when the ACEN Board of Commissioners determines that a nursing program is in non-compliance with one or two Accreditation Standards. The next review and follow-up action(s) are determined by the ACEN Board of Commissioners.

3. **Continuing accreditation with warning** is granted when the ACEN Board of Commissioners determines that a nursing program is in non- compliance with three or more Accreditation Standards. The next review and follow-up action(s) are determined by the ACEN Board of Commissioners.

4. **Continuing accreditation with a removal of conditions** is granted when the ACEN Board of Commissioners determines that a nursing program is in compliance with the Accreditation Standards.

5. **Continuing accreditation with a removal of warning** is granted when the ACEN Board of Commissioners determines that a nursing program is in compliance with the Accreditation Standards.

6. **Continuing accreditation with a removal of good cause** is granted when the ACEN Board of Commissioners determines that a nursing program is in compliance with the Accreditation Standards.

7. **Continuing accreditation for good cause**—see below.

8. A nursing program seeking continuing accreditation may be **denied continuing accreditation**. A nursing program denied continuing accreditation will be removed from the list of accredited programs. Denial of continuing accreditation is an appealable action.
    a. The nursing program may start the candidacy process after the denial of continuing accreditation and removal from the list of accredited programs.
        i. If a governing organization/nursing program appeals the denial of continuing accreditation, the governing organization/nursing program may restart the candidacy process only after the conclusion of the appeal process.
        ii. If a governing organization/nursing program pursues arbitration, the governing organization/nursing program may restart the candidacy process only after the conclusion of the arbitration process.
        iii. If a governing organization/nursing program pursues legal proceedings, the governing organization/nursing program may restart the candidacy process only after the conclusion of the legal proceedings.

EFFECTIVE DATE

1. Initial Accreditation
    a. Upon granting initial accreditation by the ACEN Board of Commissioners, the effective date of initial accreditation is the date on which the nursing program was approved by the ACEN as a candidate program, which results in the ACEN Board of Commissioners granting initial accreditation.
    b. Upon denying initial accreditation by the ACEN Board of Commissioners, the effective date of denying initial accreditation will be the date of the Board of Commissioners' decision letter.

2. Continuing Accreditation
    a. Upon granting continuing accreditation by the ACEN Board of Commissioners, the effective date of granting continuing accreditation will be the date of the Board of Commissioners' decision letter.
    b. Upon denying continuing accreditation by the ACEN Board of Commissioners, the

effective date of denying continuing accreditation will be the date of the Board of Commissioners' decision letter.

CONTINUING ACCREDITATION WITH WARNING STATUS

When the ACEN Board of Commissioners determines that a nursing program is non-compliant with three or more Accreditation Standards, the ACEN Board of Commissioners may grant a nursing program continuing accreditation with warning for up to the maximum monitoring period for the program type.

1. When a nursing program has been granted continuing accreditation with warning, the program must submit a Follow-Up Report addressing the Standard(s) with which the nursing program was found to be in non-compliance, and a follow-up visit is required within a specified period of time. The Follow-Up Report, Follow-Up Site Visit Report, and Evaluation Review Panel Summary constitute a basis for the ACEN Board of Commissioners' decision.

2. The length of the monitoring period defines the ACEN Board of Commissioners' action the next time a nursing program is reviewed. At the next review,
    a. If the ACEN Board of Commissioners determines that a nursing program is in compliance with the identified Accreditation Standards, the ACEN Board of Commissioners may grant continuing accreditation with a removal of warning.
    b. If the ACEN Board of Commissioners determines that a nursing program is non-compliant in any of the following ways:
        i. with one or two Accreditation Standards, the ACEN Board of Commissioners may grant continuing accreditation with conditions if the maximum monitoring period for continuing accreditation has not concluded.
        ii. with three or more Accreditation Standards, the ACEN Board of Commissioners may grant continuing accreditation with warning if the maximum monitoring period for continuing accreditation has not concluded.
        iii. with any Accreditation Standard, the ACEN Board of Commissioners may grant continuing accreditation for good cause if the maximum monitoring period for continuing accreditation has concluded and the program meets the requirements for good cause.
        iv. with any Accreditation Standard, the ACEN Board of Commissioners may deny continuing accreditation and remove the program from the list of accredited programs, whether the maximum monitoring period for continuing accreditation has or has not concluded.

MAXIMUM MONITORING PERIOD – CONDITIONS AND WARNING

1. The maximum monitoring period for continuing accreditation with conditions or continuing accreditation with warning for clinical doctorate, master's, baccalaureate, associate, and diploma programs is two years from the ACEN Board of Commissioners' determination of this accreditation status.

2. The maximum monitoring period for continuing accreditation with conditions or continuing accreditation with warning for practical nursing programs is 18 months from the ACEN Board of Commissioners' determination of this accreditation status.

3. The maximum monitoring period for continuing accreditation with conditions or continuing accreditation with warning for standalone certificate nursing programs that are not a practical nursing program is determined by the length of the certificate nursing program.
    a. If the shortest period of time in which a student could complete a standalone certificate nursing program is less than 12 months, the maximum monitoring period for continuing accreditation with conditions or continuing accreditation with warning is 12 months from the ACEN Board of Commissioners' determination of this accreditation status.
    b. If the shortest period of time in which a student could complete a standalone certificate nursing program is at least one year but less than two years, the maximum monitoring period for continuing accreditation with conditions or continuing accreditation with warning is 18 months from the ACEN Board of Commissioners' determination of this accreditation status.
    c. If the shortest period of time in which a student could complete a standalone certificate nursing program is at least two years, the maximum monitoring period for continuing accreditation with conditions or continuing accreditation with warning is two years from the ACEN Board of Commissioners' determination of this accreditation status.

MAXIMUM MONITORING PERIOD – GOOD CAUSE

1. If the ACEN Board of Commissioners determines that a nursing program has not remedied deficiencies at the conclusion of its maximum monitoring period on continuing accreditation with conditions or continuing accreditation with warning, the ACEN Board of Commissioners must (1) deny continuing accreditation and remove the nursing program from the list of accredited programs or (2) grant continuing accreditation for good cause.
    a. The maximum monitoring period for continuing accreditation for good cause for clinical doctorate, master's, baccalaureate, associate, and diploma programs is two years from the ACEN Board of Commissioners' determination of this accreditation status. If compliance with all the Accreditation Standards is not demonstrated within two years, the ACEN Board of Commissioners must deny continuing accreditation and remove the nursing program from the list of accredited programs.
    b. The maximum monitoring period for continuing accreditation for good cause for practical nursing programs is 30 months from the ACEN Board of Commissioners' determination of this accreditation status. If compliance with all the Accreditation Standards is not demonstrated within 30 months, the ACEN Board of Commissioners must deny continuing accreditation and remove the nursing program from the list of accredited programs.
    c. The maximum monitoring period for continuing accreditation for good cause for standalone certificate nursing programs that are not a practical nursing program

is determined by the length of the certificate nursing program.

i. If the shortest period of time in which a student could complete a standalone certificate nursing program is 12 months, the maximum monitoring period for continuing accreditation for good cause is 12 months from the ACEN Board of Commissioners' determination of this accreditation status. If compliance with the Accreditation Standards is not demonstrated within 12 months, the ACEN Board of Commissioners must deny continuing accreditation and remove the nursing program from the list of accredited programs.
ii. If the shortest period of time in which a student could complete a standalone certificate nursing program is at least one year but less than two years, the maximum monitoring period for continuing accreditation for good cause is 18 months from the ACEN Board of Commissioners' determination of this accreditation status. If compliance with all the Accreditation Standards is not demonstrated within 18 months, the ACEN Board of Commissioners must deny continuing accreditation and remove the nursing program from the list of accredited programs.
iii. If the shortest period of time in which a student could complete a standalone certificate nursing program is at least two years, the maximum monitoring period for continuing accreditation for good cause is two years from the ACEN Board of Commissioners' determination of this accreditation status. If compliance with all the Accreditation Standards is not demonstrated within two years, the ACEN Board of Commissioners must deny continuing accreditation and remove the nursing program from the list of accredited programs.

GOOD CAUSE

1. The ACEN Board of Commissioners can extend a nursing program's continuing accreditation for good cause if the ACEN Board of Commissioners determines the program satisfies all the following principles:
    a. The nursing program has demonstrated significant recent accomplishments in addressing non-compliance.
    b. The nursing program has documented that it has the potential to remedy all deficiencies within the extended period as defined by the commission, meaning that the program provides evidence which makes it reasonable for the ACEN Board of Commissioners to determine it will remedy all deficiencies within the extended time defined by the commission.
    c. The nursing program provides assurance to the ACEN Board of Commissioners that it is not aware of any other reasons, other than those identified by the commission, why the accreditation of the nursing program could not be continued for good cause.

2. The nursing program has the responsibility for making its case for good cause. To demonstrate good cause, the Chief Executive Officer of the governing organization and the program's nurse administrator must attest that the program satisfies all three principles for good cause. The request must be received by the ACEN Chief Executive Officer or designee before the next ACEN Board of Commissioners' meeting.

FINAL ACCREDITATION DECISION

1. The ACEN Board of Commissioners' decision is the final accreditation decision if the governing organization/nursing program does not appeal the denial of initial or continuing accreditation. The effective end date of the nursing program's accreditation is the end date in the Board of Commissioners' decision letter.
2. If the governing organization/nursing program does appeal, the Board of Commissioners' decision is the final accreditation decision if the governing organization/nursing program withdraws its appeal before the Appeal Committee renders its decision. The effective end date of the nursing program's accreditation is the original effective end date in the Board of Commissioners' decision letter.

3. If the governing organization/nursing program does appeal, the decision of the Appeal Committee is the final accreditation decision if that decision is to affirm or amend the Board of Commissioners' decision. If the result of an appeal is to affirm the Board of Commissioners' decision, the original effective end date of the nursing program's accreditation is also affirmed, which is the original effective end date in the Board of Commissioners' decision letter.

4. If the governing organization/nursing program does appeal and the Appeal Committee's decision is to remand, then acting in a manner consistent with the Appeal Committee's decision to remand or instructions, the Board of Commissioners will make a second accreditation decision. The second accreditation decision is final. If the second accreditation decision is denial of continuing accreditation, then the original effective end date of the nursing program's accreditation is the original effective end date in the Board of Commissioners' decision letter.

5. If the governing organization/nursing program pursues arbitration, the Appeal Committee's decision is the final accreditation decision if the governing organization/nursing program withdraws from arbitration before the arbitrators render their recommendation or if either party to the arbitration notifies the other in writing by 5:00 p.m. Eastern Standard Time (10 calendar days from delivery of the recommendation) that they reject it. The effective end date of the nursing program's accreditation is the original effective end date in the Board of Commissioners' decision letter.

6. The Board of Commissioners' decision is the final accreditation decision if the governing organization/nursing program fails to meet any deadline in the appeal process or arbitration process. The effective end date of the nursing program's accreditation is the original effective end date in the Board of Commissioners' decision letter.

Within one business day of sending written notification, the final accreditation decision will be posted on the ACEN website.

Within 60 calendar days of a final accreditation decision to deny initial accreditation or deny continuing accreditation, the ACEN will make available to the Secretary of Education, U.S. Department of Education, the program's nurse administrator, the Chief Executive Officer of the governing organization, the appropriate state regulatory agency for nursing, the governing

organization's accrediting agency, and the public a brief statement summarizing the reasons for the decision as well as the official comments that the affected governing organization/nursing program may wish to make with regard to the decision (if any), or the ACEN will provide evidence that the affected institution was offered the opportunity to provide official comment.

Policy #4 History

Revised July 2015
Revised July 2017
Revised October 2017
Revised July 2018
Revised November 2018
Edited June 2020
Revised July 2022
Edited June 2023
Reviewed June 2025

POLICY #5 NOTIFICATION OF COMMISSION DECISIONS

A nursing program seeking ACEN initial or continuing accreditation explicitly agrees that information pertaining to the program shall be made available within 30 calendar days of the accreditation decisions made by the Board of Commissioners. In accordance with the table below, the ACEN will provide written notification to:

1. The program's nurse administrator[1,5].
2. The Chief Executive Officer of the governing organization[1,5].
3. U.S. Department of Education Secretary [1,2,4,5].
4. U.S. Department of Education Case Management Teams [1,2,5].
5. State regulatory agencies for nursing [1,2,5].
6. State Departments/Ministries of Education (as applicable) [1,2,5].
7. Council for Higher Education Accreditation [1,2,5].
8. Institutional accrediting agencies recognized by the ACEN for governing organizations [1,2,5].
9. Peer evaluators who reviewed the program [1].
10. Higher Education Publications, Inc. [1,2,5].
11. The public (through posting on the ACEN website) [1,2,3,4,5].

Superscripts are identified in the Report Category column below. The reporting of the following information applies to all governing organizations/nursing programs seeking initial or continuing accreditation:

ACEN Dispersal of Accreditation Information
As Necessary
Proposed changes within the ACEN that alter the scope of recognition or compliance with requirements[3,4] such as policy, procedures, and the ACEN Standards and Criteria.
Within 10 Business Days
Voluntary withdrawal of a governing organization/nursing program from ACEN accreditation[2].
Within 10 business days of receiving voluntary withdrawal letter, it will be posted on ACEN website within 1 business day of sending written notification to governing organization/nursing program.
Within 30 Calendar Days
ACEN Board of Commissioners' accreditation decision[1].
Within 30 calendar days of the decision, it will be posted on the ACEN website within 1 business day of sending written notification to the governing organization/nursing program.
Outcome of appeal process and reason(s) following outcome of appeal[5].

Within 30 calendar days of the Appeal Committee decision, it will be posted on the ACEN website within 1 business day of sending written notification to the governing organization/nursing program.
Outcome of arbitration process and reason(s) following outcome of arbitration[5].
Within 30 calendar days of the Arbitration Panel award, it will be posted on the ACEN website within 1 business day of sending written notification to the governing organization/nursing program.
Annually in the June Publication of the ACEN Report to Constituents
ACEN Board of Commissioners' accreditation decision[1].
Outcome of appeal process and reason(s) following outcome of appeal[5].
Outcome of arbitration process and reason(s) following outcome of arbitration.
Summary of major accreditation activities[3,4].
Available Online
Directory of accredited programs[3,4].
Directory of candidate programs[3].
Voluntary withdrawal of a governing organization/nursing program from ACEN accreditation[2].

The ACEN will submit to the U.S. Department of Education Secretary information regarding a program's compliance with federal student aid program requirements if the Secretary requests such information, or if the ACEN believes that the program is failing to meet its Title IV responsibilities, or is involved in fraud and abuse with respect to its Title IV activities. If circumstances permit and to the extent feasible, prior to submission of information, the program will be provided an opportunity to comment on findings.

Policy #5 History

Revised July 2015
Revised March 2019
Revised July 2020
Edited June 2023
Reviewed June 2025

POLICY #6 DELAY/ADVANCEMENT OF CONTINUING ACCREDITATION VISIT

The nurse administrator may formally request a delay or advancement of a site visit for continuing accreditation. The ACEN Chief Executive Officer or designee makes the decision to grant or deny the request based on the reasons provided. Denial of a delay or advancement of a site visit for continuing accreditation is not appealable.

The ACEN Chief Executive Officer or designee may also initiate the delay or advancement of a site visit for continuing accreditation.

DELAY OF A SITE VISIT FOR CONTINUING ACCREDITATION

Delays are granted only when circumstances beyond the control of the nursing program occur; typically, these involve a major disruption (e.g., natural disaster, catastrophic fire) that interrupts the education of currently enrolled students. The timeframe considered for a visit delay is six months (one accreditation cycle). A change in the nurse administrator or implementation of a substantive change is not considered beyond the control of the nursing program.

Delays are not granted to nursing programs:

1. That were granted a delay in the most recent accreditation cycle.
2. That have a current status of continuing accreditation with warning or continuing accreditation for good cause.
3. That have an outstanding Follow-Up Report as requested by the commission[1].
4. That are on stipulation (including but not limited to conditional, provisional, and probationary status) by the program's state regulatory agency for nursing.
5. That have a review following the granting of initial accreditation by the commission[1].

If a nursing program does not submit the Follow-Up Report by the date requested, the program will be presented for action to the ACEN Board of Commissioners at the next Board of Commissioners meeting. The ACEN will deem it as a voluntary withdrawal from accreditation/refusal or failure of an accredited program to submit to a required Follow-Up Report. See ACEN Policy #7 Voluntary Withdrawal from ACEN Accreditation.

If the request for a delay is made six weeks or less prior to the site visit, the reprocessing/rescheduling site visit fee is applicable.

A nursing program that is granted a delay of a comprehensive continuing accreditation visit will not be returned to its original comprehensive continuing accreditation site visit cycle; instead, the comprehensive continuing accreditation cycle for the nursing program will be reset in accordance with ACEN **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation**.

ADVANCEMENT OF A SITE VISIT FOR CONTINUING ACCREDITATION

Advancements are granted when circumstances facilitate the review of two or more nursing programs offered by a governing organization nursing education unit. For the nursing program(s) seeking advancement, the request for an advancement must be made no later than 18 months prior to the next comprehensive continuing accreditation site visit for the nursing program(s) that

the nursing program(s) seeking advancement desires to synchronize with. A nursing program that is granted an advancement of a comprehensive continuing accreditation site visit will not be returned to its original comprehensive continuing accreditation site visit cycle; instead, the comprehensive continuing accreditation site visit cycle for the advanced nursing program will be reset in accordance with ACEN **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation**.

Policy #6 History

Revised July 2015
Edited March 2019
Revised July 2020
Edited June 2023
Edited June 2025

POLICY #7 VOLUNTARY WITHDRAWAL FROM ACEN ACCREDITATION

Accredited programs voluntarily withdrawing from ACEN accreditation must submit written notification of their decision signed by the Chief Executive Officer of the governing organization and the program's nurse administrator to the attention of the ACEN Chief Executive Officer or designee. When a nursing program voluntarily withdraws from the ACEN, the program's accreditation will continue through (1) the end of the nursing program's current initial or continuing accreditation period, (2) the end of the current ACEN fall or spring accreditation cycle*, or (3) a date specified by the program prior to the end of the current ACEN fall or spring accreditation cycle*. The program must specify the intended accreditation withdrawal date in its written notification to the ACEN. At the selected date of withdrawal, the nursing program will be removed from the ACEN's listings of accredited programs. The nursing program must remove all references to ACEN accreditation intended to inform the public including all print and electronic documents.

The ACEN will deem as a voluntary withdrawal from accreditation any refusal or failure of an accredited program to submit to a required (1) Site Visit, Follow-Up Visit, or Focused Site Visit, (2) Self-Study Report, Follow-Up Report, or Focused Site Visit Report, or (3) other requested information. The effective date of the withdrawal will be the last day of the current ACEN accreditation cycle*. The program will be notified in writing by the ACEN Chief Executive Officer or designee within 30 calendar days of an accredited program refusing or failing to submit to a required (1) Site Visit, Follow-Up Visit, or Focused Site Visit, (2) Self-Study Report, Follow-Up Report, or Focused Visit Report, or (3) other requested information.

The ACEN will deem as a voluntary withdrawal from accreditation any refusal or failure of an accredited program to pay its fees and expenses when due. The effective date of the withdrawal will be the last day of the current ACEN accreditation cycle*. The program will be notified in writing by the ACEN Chief Executive Officer or designee within 30 calendar days of an accredited program refusing or failing to pay its fees and expenses on a timely basis.

A nursing program may initiate the candidacy process for initial accreditation at any time after voluntarily withdrawing from accreditation and being removed from the list of accredited programs.

A nursing program may reinitiate the candidacy process for initial accreditation at any time after voluntarily withdrawing from its initial accreditation process. A nursing program must voluntarily withdraw from the candidacy process for initial accreditation before reinitiating the candidacy process.

*Fall Cycle: July 1 to December 31
*Spring Cycle: January 1 to June 30

Policy #7 History

Revised July 2015
Revised March 2016
Revised July 2017
Edited June 2025

POLICY #8 OPPORTUNITIES FOR THIRD-PARTY COMMENTS ON NURSING PROGRAMS SCHEDULED FOR INITIAL OR CONTINUING ACCREDITATION

As part of ongoing efforts to make the accreditation process responsive to a broad range of constituents, the ACEN invites written and oral third-party comments on nursing programs being reviewed for initial or continuing accreditation. The ACEN welcomes comments from interested individuals from the nursing community, students, graduates, and the public.

All nursing programs seeking initial or continuing accreditation must provide an opportunity for written and oral third-party comments from the public. This applies only during a program's comprehensive review or required follow-up visit review and does not apply during a focused visit review.

The ACEN expects a sincere and thoughtful attempt by nursing programs seeking initial or continuing accreditation to identify their constituents and invite written and oral third-party comments regarding the program. The ACEN requires nursing programs to publish information about the visit in appropriate outlets (e.g., nursing program newsletter, governing organization publications, governing organization/nursing program website, email, social media, postings at clinical agencies used by the program).

During the accreditation site visit, a time is to be set aside for the peer evaluators on the site visit team to meet with and receive oral comments from interested members of the public.

Constituents must submit written third-party comments directly to the ACEN. The ACEN will share written third-party comments with the peer evaluators on the site visit team. Written third-party comments may not be given to the peer evaluators during the site visit. An individual interested in submitting information regarding a nursing program to be considered during an upcoming initial or continuing accreditation review should follow ACEN **Policy #8 Opportunities for Third-Party Comments on Programs Scheduled for Evaluation**. The ACEN reserves the right to review and act upon incoming complaints or third-party comments under either ACEN **Policy #8** or ACEN **Policy #20 Complaints Against An Accredited Program** as appropriate to the circumstance.

Policy #8 History

Revised November 2015
Edited March 2019
Revised July 2020
Edited January 2022
Edited June 2023
Edited June 2025

POLICY #9 DISCLOSURE OF INFORMATION ABOUT AN ACCREDITED PROGRAM

When a governing organization and/or nursing education unit makes a disclosure regarding the ACEN accreditation status of a nursing program, it must (1) accurately cite each program accredited (e.g., practical, diploma, associate, baccalaureate, master's, clinical doctorate), including the locations where each program is offered and (2) accurately identify each nursing program's accreditation status with ACEN.

The governing organization/nursing program must disclose the following information as a single disclosure to all current and prospective students within seven business days of receipt of the decision letter from the ACEN:

1. The name, address, telephone number, and web address of the ACEN.

2. In accordance with U.S. Department of Education regulation, the most recent Board of Commissioners accreditation decision, which will be one of the following:
    a. Initial Accreditation
    b. Continuing Accreditation
    c. Continuing Accreditation with Conditions
    d. Continuing Accreditation with Warning
    e. Continuing Accreditation for Good Cause
    f. Denial of Continuing Accreditation

3. If the Board of Commissioners grants a nursing program initial accreditation or continuing accreditation, the governing organization/nursing program shall not use "fully accredited" as partial accreditation is not possible. The single disclosure must be exactly as illustrated below:

> The [insert type of program*] nursing program at [insert name of governing organization that is in accordance with ACEN records] at the [insert name of campus(es) that is/are in accordance with ACEN records, if applicable] is accredited by the: Accreditation Commission for Education in Nursing (ACEN).
>
> 3390 Peachtree Road NE, Suite 1400 Atlanta, GA, 30326
>
> The most recent accreditation decision made by the ACEN Board of Commissioners for the [insert type of program*] nursing program is [insert one of the following here**].
>
> View the public information disclosed by the ACEN regarding this program on the **ACEN website**.

**Type of program: practical, diploma, associate, baccalaureate, master's, master's/post-master's certificate, post-master's certificate, clinical doctorate, clinical doctorate/DNP clinical doctorate specialist certificate, or DNP clinical doctorate specialist certificate.*

***initial accreditation, continuing accreditation, continuing accreditation with conditions, continuing accreditation with warning, or continuing accreditation for good cause*

4. If a nursing program is denied continuing accreditation, and the program appeals the Board of Commissioners' decision; the governing organization/nursing program must disclose the following information as a single disclosure to all current and prospective students within one business day of initiating the appeal in accordance with Policy #10 Appeal Process and Submission of New Financial Information Subsequent to Adverse Action. The single disclosure must be exactly as illustrated below:

> The most recent accreditation decision made by the ACEN Board of Commissioners for the [insert type of program*] nursing program is denial of continuing accreditation, which [insert name of governing organization] is appealing in accordance with ACEN Policy #10 Appeal Process and Submission and Review of New Financial Information Subsequent to Adverse Action. The [insert type of program*] at the [insert name of campus(es) that is/are in accordance with ACEN records, if applicable] will remain accredited with the status of [insert the accreditation status immediately prior to denial decision**] in accordance with Policy #10 pending the outcome of the appeal process.
>
> Accreditation Commission for Education in Nursing (ACEN)
> 3390 Peachtree Road NE, Suite 1400 Atlanta, GA, 30326
> (404) 975-5000
>
> View the public information disclosed by the ACEN regarding this program on the ACEN website.

**Type of program: practical, diploma, associate, baccalaureate, master's, master's/post-master's certificate, post-master's certificate, clinical doctorate, clinical doctorate/DNP clinical doctorate specialist certificate, or DNP clinical doctorate specialist certificate.*

***initial accreditation, continuing accreditation, continuing accreditation with conditions, continuing accreditation with warning, or continuing accreditation for good cause*

Based on the outcome of the appeal process, the disclosure of accreditation status information must be updated within one business day of the effective date of the accreditation decision becoming final.

5. If a nursing program is denied continuing accreditation, and the program pursues arbitration in accordance with **Policy #38 Arbitration** related to the Board of Commissioners' decision; the governing organization/nursing program must disclose the following information as a single disclosure to all current and prospective students within one business day of initiating the arbitration process. The single disclosure must be exactly as illustrated below:

> The most recent accreditation decision made by the ACEN Board of Commissioners for the [insert type of program*] nursing program is denial of continuing accreditation, which [insert name of governing organization] is pursuing arbitration in accordance with Policy #38 Arbitration. The [insert type of program*] at the [insert name of campus(es) that is/are in accordance with ACEN records, if applicable] will remain accredited with the status of [insert the accreditation status immediately prior to denial decision*] in accordance with Policy #10 pending the outcome of the arbitration process.
>
> Accreditation Commission for Education in Nursing (ACEN)
> 3390 Peachtree Road NE, Suite 1400 Atlanta, GA, 30326
>
> View the public information disclosed by the ACEN regarding this program on the ACEN website.

**Type of program: practical, diploma, associate, baccalaureate, master's, master's/post-master's certificate, post-master's certificate, clinical doctorate, clinical doctorate/DNP clinical doctorate specialist certificate, or DNP clinical doctorate specialist certificate.*

***initial accreditation, continuing accreditation, continuing accreditation with conditions, continuing accreditation with warning, or continuing accreditation for good cause*

Based on the outcome of the arbitration process, the disclosure of accreditation status information must be updated within one business day of the effective date of the accreditation decision becoming final.

6. If the nursing program is denied continuing accreditation and does not appeal the Board of Commissioners' decision, the governing organization/nursing program must disclose the denial to all current and prospective students within seven business days of receipt of the decision letter from the ACEN that the Board of Commissioners denied the nursing program continuing accreditation.

7. If a nursing program voluntarily withdraws from ACEN accreditation, the disclosure of accreditation status information must be deleted within one business day of the effective date of the voluntary withdrawal.

If the governing organization and/or nursing education unit publishes incorrect or misleading information about the accreditation status of a nursing program or any action by the ACEN relative to the accreditation status of a nursing program, the governing organization and/or nursing education unit must immediately provide public correction via a news release or through other media.

If a governing organization and/or nursing education unit makes public the contents from a Site Visit Report, Follow-Up Site Visit Report, Focused Site Visit Report, or Board of Commissioners' decision letter, it must provide full sentences and context. Characterizing, quoting, and/or providing excerpts from a Site Visit Report, Follow-Up Site Visit Report, Focused Site Visit Report, or Board of Commissioners' decision letter must also be accompanied by a note stating that a copy of the complete document(s) can be obtained from the nursing education unit. Should the statements be misinterpreted, the program must correct this misinterpretation through a clarifying release to the same audience that received the information.

If it is determined that a governing organization and/or nursing education unit is in violation of this policy, the ACEN Chief Executive Officer or designee will inform the governing organization and/or nursing education unit through a formal letter. If the violation is not corrected immediately, the Chief Executive Officer or Designee shall report the matter to the ACEN Board of Commissioners for appropriate action.

Policy #9 History

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Revised November 2020
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POLICY #10 APPEAL PROCESS AND SUBMISSION AND REVIEW OF NEW FINANCIAL INFORMATION SUBSEQUENT TO ADVERSE ACTION

PURPOSE

The purpose of this policy is to provide the opportunity for review of an adverse action. The appeal process allows a program to appeal an adverse action taken by the ACEN Board of Commissioners.

DECISIONS ELIGIBLE FOR APPEAL

A program may only appeal an adverse action taken by the ACEN Board of Commissioners. An adverse action is defined as a denial of initial accreditation or a denial of continuing accreditation.

GROUNDS FOR APPEAL

1. There are two grounds for appeal:
    a. The ACEN Board of Commissioners' decision was arbitrary; that is, it was unreasonable and not based on or consistent with the published Standards and Criteria or the ACEN published policies and/or procedures.
    b. The ACEN Board of Commissioners failed to follow its published policies and/or procedures, and this failure was significant in leading to the Board of Commissioners' decision.

SUBMISSION AND REVIEW OF NEW FINANCIAL INFORMATION SUBSEQUENT TO ADVERSE ACTION

If an adverse action is taken by the ACEN Board of Commissioners based solely on financial grounds, including commissioners' action to deny initial accreditation or to deny continuing accreditation, a nursing program may submit and seek review of new financial information prior to the action becoming final if the following conditions are met:

1. The financial information was unavailable to the program until after the adverse action was taken.
2. The financial information is significant and bears materially to the financial deficiencies identified in support of the adverse action.

A nursing program shall seek the review of new financial information only once. A nursing program may seek review of new financial information prior to appealing the adverse action. In such case, any determination by the ACEN Board of Commissioners made with respect to the review of new financial information shall not provide a basis for an appeal. Alternatively, a nursing program may submit and seek review of new financial information as part of the appeal of the adverse action consistent with this policy and the procedures set forth below.

NOTICE OF APPEAL

An adverse action taken regarding the accreditation status of a nursing program may be appealed within 30 calendar days of the program's receipt of notice of such adverse action. A program shall initiate an appeal by filing a written notice of intent to appeal via hand delivery, certified /registered mail, or another means that provides written evidence of the delivery. The notice of appeal shall be sent by the Chief Executive Officer of the appellant program's governing organization to the ACEN Chief Executive Officer or designee. Upon receipt of the notice, the

ACEN shall maintain the prior accreditation status of the nursing program until the disposition of the appeal.

The request of a program for an appeal process must identify the specific alleged procedural failures or the specific manner in which the decision was arbitrary, meaning that it was unreasonable and not based on/consistent with the published ACEN Standards and Criteria or ACEN published policies and/or procedures.

The appeal process will be completed within a reasonable amount of time following the date of receipt of the notice of intent to appeal. The date for the Appeal Hearing will be determined by the availability of Appeal Committee members to hear the case and by the establishment of a quorum.

The final determination of the date will be made by the ACEN Chief Executive Officer or designee after consultation with the Appeal Committee members and the appellant program. The ACEN will make every effort to honor the preference of the appellant program but cannot guarantee the date.

The fee for the notice of intent to appeal must be submitted with the written notice of intent to appeal. The appeal process fee is due within 45 calendar days of the submission of the notice of intent to appeal. The appeal will be considered withdrawn if the program fails to submit the appeal process fee within 45 calendar days of submission of the notice of intent to appeal.

The Appeal Hearing will not be scheduled until the appeal process fee has been paid in full. Additionally, the appellant program will be charged a non-refundable administrative appeal fee, which must be submitted with the written notice of intent to appeal. Credit cards are not an acceptable form of payment for the notice of intent to appeal fee, the appeal process fee, or the non-refundable administrative appeal fee.

If the travel, lodging, meal, legal, and other expenses directly related to the appeal process incurred by the ACEN exceed the cumulative total of the notice of intent to appeal fee and appeal process fee, the program will be responsible for the difference and will receive a subsequent invoice for the additional expenses not covered by the fees. Credit cards are not an acceptable form of payment for invoices for appeal-related expenses. If the travel, lodging, meal, legal, and other expenses directly related to the appeal process incurred by the ACEN are less than the cumulative total of the notice of intent to appeal fee and the appeal process fee, the program will be refunded the difference. The appellant program is responsible for all the travel, lodging, meal, legal, and other expenses directly related to the appeal process incurred by the ACEN regardless of the outcome, disposition, and/or cancellation of the Appeal Hearing.

APPOINTMENT OF AN APPEAL COMMITTEE

Seven members from the Appeal Committee Membership shall be appointed to the Appeal Committee to examine a specific appeal.

1. For governing organizations/nursing programs that the ACEN serves only as the programmatic accreditor, five members of the Appeal Committee shall represent nursing education (nurse educator/clinician) of the same program type as the appellant program; one member of the Appeal Committee shall represent nursing service (nurse

clinician/practitioner), and one member of the Appeal Committee shall represent the public as described in **Policy #2 Representation on Site Visit Teams, Evaluation Review Panels, and the Board of Commissioners.**

2. For governing organizations/nursing programs that the ACEN serves as the institutional accreditor (Title IV gatekeeper), four members of the Appeal Committee shall represent nursing education (nurse educator/clinician) of the same program type as the appellant program; one member of the Appeal Committee shall represent administrators; one member of the Appeal Committee shall represent nursing service (nurse clinician/practitioner), and one member of the Appeal Committee shall represent the public as described in **Policy #2 Representation on Site Visit Teams, Evaluation Review Panels, and the Board of Commissioners**.

The ACEN Chief Executive Officer or designee shall appoint the Appeal Committee. A member of the Appeal Committee shall recuse him/herself from the Appeal Committee if there is a conflict of interest or an appearance of a conflict of interest. Appeal Committee members are subject to the requirements of Policy #1 Code of Conduct and Conflict of Interest.

The ACEN Chief Executive Officer or designee shall provide notice of the Appeal Committee membership to the appellant program. The appellant program will have the opportunity to review the proposed Appeal Committee members for any conflicts of interest. Within three business days of appellant program's receipt of the names of the proposed Appeal Committee membership, the appellant program shall provide written notice of any assertions that a proposed Appeal Committee member has a conflict of interest to the ACEN Chief Executive Officer or designee. If the ACEN Chief Executive Officer or designee determines a conflict of interest exists, another Appeal Committee member shall be appointed within three business days with notification to appellant program. The appellant program shall have an opportunity to review the appointed Appeal Committee member for any conflict of interest. Within three business days of the appellant program's receipt of the name of the appointed panel member, the appellant program shall provide written notice of any assertion that the substituted Appeal Committee member has a conflict of interest to the ACEN Chief Executive Officer or designee. If the ACEN Chief Executive Officer or designee determines that the panel member has a conflict of interest, the procedures of this paragraph shall be repeated until an Appeal Committee member is secured and the Appeal Committee is determined. The ACEN Chief Executive Officer's or desginee's determination of a conflict of interest shall be final.

Where necessary to avoid a conflict of interest or in other exceptional circumstances, the ACEN Chief Executive Officer or designee may (in consultation with the appellant program) select individuals outside of the approved list maintained by the ACEN of individuals qualified to serve as Appeal Committee members as long as panel members otherwise meet the qualifications to be a panel member.

PROCEDURES GOVERNING THE APPEAL PROCESS AND APPEAL HEARING

The Appeal Process and Appeal Hearing are collegial, and they shall not be bound by technical or formal rules of evidence or pleading. The Appeal Hearing is an administrative process, not judicial hearing, where each party to the appeal advocates its position. Therefore, legal Rules of Evidence

and legal procedures such as the examination of the competency of members of the Appeal Committee, the use of sidebars, or cross-examining those present are prohibited.

Throughout the Appeal Process and Appeal Hearing, the appellant program will bear the burden of proof.

The ACEN is responsible for sending all material concerning the appeal to members of the Appeal Committee for providing support services (including lodging, transportation, and meeting space for the Appeal Committee members), for confirming the date of the Appeal Hearing, and for securing the services of a court reporter.

The following procedures must be adhered to in an appeal.

DOCUMENTS FOR THE HEARING

1. At least 30 calendar days before the date of the Appeal Hearing, the ACEN must submit to the appellant program and the Appeal Committee documents (administrative record) used by the ACEN Board of Commissioners leading to and arriving at the decision regarding the program. The administrative record includes the following:
    a. Materials pertaining exclusively to the appellant program case that were used by the Board of Commissioners as the basis for its decision.
    b. Meeting minutes of the ACEN Board of Commissioners pertaining exclusively to the appellant program case.
    c. A historical summary of the actions taken by the ACEN involving the appellant program.
    d. The official ACEN correspondence leading to the adverse action and to the appeal.
    e. Materials pertaining exclusively to the appellant program case used by the Evaluation Review Panel as the basis for its recommendation.
    f. Other documents bearing upon the substance of the appeal.

2. At least 14 calendar days before the date of the Appeal Hearing, the appellant program must submit to the ACEN Chief Executive Officer or designee the brief it intends to present at the Appeal Hearing. The brief must specifically direct Appeal Committee members to citations in the administrative record that justify the appellant program's grounds for appeal. The appellant program must cite page numbers of the text supporting its position. The appellant program must submit 10 copies of its brief. Failure of the appellant program to provide a brief within the specified period time shall be cause for case dismissal by the Appeal Committee.

3. At least 10 calendar days before the date of the Appeal Hearing, the ACEN must submit the appellant program's brief to the Appeal Committee.

4. At least seven calendar days before the date of the Appeal Hearing, the ACEN must submit to the appellant program and Appeal Committee its response to the appellant program's brief.

5. Neither the appellant program nor the ACEN may submit additional briefs or any other materials during or following the Appeal Hearing.

THE HEARING

1. The Appeal Hearing shall be held in the Atlanta, Georgia, Metropolitan Area or some/all proceedings may take place remotely by telephonic or other electronic means, so long as both parties and all Appeal Committee members can participate equally. The ACEN Chief Executive Officer or designee shall decide the specific location or format of the appeal hearing; hearing location or format shall not be disputable by the governing organization/nursing program.

2. The Appeal Committee will select a Chair who will be responsible for ensuring effective implementation of the Appeal Process and for filing the Appeal Committee's decision with the ACEN Chief Executive Officer or designee.

3. The Chair of the Appeal Committee may have a preliminary conference in person or by telephone either at the Chair's request or at the request of a party to discuss the procedures for the appeal. The conference will be conducted by the Chair with representatives from both parties in attendance.

4. At least 14 calendar days before the date of the Appeal Hearing, the appellant program and the ACEN must submit to each other the names and titles of those individuals selected to appear as witnesses, representatives, and counsel, one of whom must be the nurse administrator. Once the names are submitted to each other, there may be no substitutions, except as may be approved by the Chair.

5. The ACEN Board of Commissioners bases its adverse action on reports, institutional responses, documentation, and evidence presented by the institution at the time of its review. The Appeal Committee bases its decision on the published Standards and Criteria and/or the ACEN's published policies and/or procedures in effect at the time of the ACEN Board of Commissioners' review.
6. If the appellant program failed to present documentation and evidence available at the time the ACEN Board of Commissioners took adverse action, it cannot make that information available for consideration by the Appeal Committee under any circumstances. In addition, neither the ACEN nor the appellant program may include new information or materials as part of their briefs presented to the Appeal Committee nor may they introduce new evidence during the Appeal Hearing except for the case of an institution being removed from accreditation based solely on finances, in which case the appellant program may make available new, verifiable financial information that became available since adverse action was taken and that is material to the reason for the ACEN Board of Commissioners' adverse action. It is incumbent upon all parties to ensure that all evidence to be presented at the Appeal Hearing is submitted as required by **Policy #10 Appeal Process and Submission of New Financial Information Subsequent to Adverse Action**.

7. The Appeal Hearing is closed to the public and shall include only those individuals who can speak to the grounds for appeal.

8. Both parties are present during the Appeal Hearing. If the governing organization/nursing program or the ACEN does not attend the Appeal Hearing after receiving proper notice of the date, time, and location, the Appeal Committee shall proceed with the Appeal Hearing in the absence of all or some representatives of the party. The Appeal Committee will consider an emergency or other unforeseen relevant circumstance (e.g., natural disaster) that prevents a

representative(s) from a party from attending the Appeal Hearing face-to-face as scheduled; only in these cases may technology be used to allow a party to present its case. If a party fails to present its case, the Appeal Committee shall make a decision without the party's presentation of its case.

9. No more than five individuals and one counsel shall appear for each of the parties. The nurse administrator of the appellant program shall appear before the Appeal Committee.

10. Attendees will be seated with counsel and may testify from where they sit. There will be no sequestration of witnesses.

11. The Appeal Committee may ask questions of the attendees, and their questions shall not count against the time allowed either side.

12. Counsel may not cross-examine witnesses for the other party and may not voice objections.

13. The presentation of the parties, including any questions of the Appeal Committee, shall be transcribed by a court reporter provided by the ACEN.

14. Since the appellant program bears the burden of proof, the appellant program will be the first party to present its case during the Appeal Hearing.

15. The Chair of the Appeal Committee will limit the presentation of the appellant program and the ACEN to one hour each and shall notify both before the Appeal Hearing of such time limit. The one hour does not include the time period for questioning from the members of the Appeal Committee. At the request of the appellant program or the ACEN, the Chair may allow time for final response by either party, not to exceed one-half hour. These time limits can be extended only by the Chair. Since the institution bears the burden of proof, the institution will be the first party to present a final response and may reserve some time to conclude.

16. Within seven calendar days of the conclusion of the Appeal Hearing, the Chair of the Appeal Committee shall inform the ACEN Chief Executive Officer or designee and the Chair of the ACEN Board of Commissioners in writing of the Appeal Committee's decision. This notification must include specific reasons for the decision, must address each of the grounds for appeal identified by the appellant program, and must address the findings with regard to which ACEN Standards that the ACEN Board of Commissioners' decision was based. A pdf version of the notification letter will be emailed and will be deemed acceptable by transmission. The original letter will be next-day-express-mailed to the chief executive officer of the appellant program's governing organization and to the ACEN Chief Executive Officer or designee.

17. Within 30 calendar days of receiving the decision from the Chair of the Appeal Committee, the ACEN will notify the U.S. Department of Education of the final decision.

18. Within 30 business days of receiving the decision from the Chair of the Appeal Committee, the ACEN will notify the governing organization/nursing program of the final decision.

CONDITIONS

a. The appellant program bears the burden of proof. To gain an AMENDMENT of the ACEN Board of Commissioners' decision, the appellant program must present evidence, which in the judgment of the Appeal Committee demonstrates that the ACEN Board of

Commissioners' decision was arbitrary; that is, it was unreasonable and not based on or consistent with the published Standards and Criteria or ACEN published policies and/or procedures.

b. In order to gain a REMAND, the appellant program must present evidence, which in the judgment of the Appeal Committee demonstrates that the ACEN Board of Commissioners failed to follow its published policies and/or procedures and that this failure was significant in leading to its decision. An appellant program removed from accreditation based solely on finances may also gain a remand if it presents new, verifiable financial information that has become available since the adverse action was taken and that is material to the reason for the ACEN Board of Commissioners' decision.
c. If the appellant program fails to provide adequate evidence to gain an AMENDMENT or a REMAND, the initial decision of the ACEN Board of Commissioners must be AFFIRMED.

The accreditation status of an appellant program for which an appealable action has been taken shall remain as it was before such action until the 30-calendar-day period for filing an appeal has expired. Receipt of a notification of an appeal from an appellant program by the ACEN Chief Executive Officer or designee during this 30-calendar-day period will cause that previous status to be continued until a final decision is made on the appeal. See the Final Accreditation Decision section in Policy #4 Types of Commission Actions for Initial and Continuing Accreditation.

RIGHTS AND LIMITATIONS

1. The appellant program and the ACEN have the following rights in an appeal:
   a. To have available counsel or a representative of their choice to advise them at the Appeal Hearing. Counsel representing each of the parties will be permitted to present or assist in the presentation of the case during the Appeal Hearing. Counsel will not be permitted to conduct a cross-examination of representatives from the opposing party.
   b. If the Chair of the Appeal Committee, the appellant program, or the ACEN requests a pre-hearing conference, the conference will be conducted by the Chair with representatives from both parties in attendance.
   c. To present written or oral testimony and/or evidence pertinent to the grounds for the appeal consistent with this policy. Only the Appeal Committee has the right to question individuals present at the Appeal Hearing. All individuals who testify will testify under oath as administered by the court reporter.
   d. To receive a transcript and any other related records of the Appeal Process and Appeal Hearing, upon payment of the costs of reproduction.
   e. The Appeal Committee's discussions and deliberations, all votes taken, and the discussion on the final decision itself are not conducted on the record.
   f. Presentations by the appellant program and the ACEN, questions asked of these representatives by the Appeal Committee, and responses to such questions are to be recorded and transcribed. Transcripts are a matter of record of the proceedings.

2. The decision of the ACEN Board of Commissioners shall be reviewed based exclusively upon

the conditions existing at the time of that decision, except in the case of an appellant program removed from accreditation based solely on finances that have available new, verifiable financial information that is material to the ACEN Board of Commissioners' adverse action and shall be subject to the following limitations:

a. No evidence concerning the remedying of deficiencies since the time of the ACEN Board of Commissioners' adverse action shall be presented at or before the Appeal Hearing under any circumstances. The Appeal Committee is prohibited from considering such evidence in reaching its decision. No new evidence made available since the time of the ACEN Board of Commissioners' adverse action shall be presented at or before the Appeal Hearing. The Appeal Committee is prohibited from considering such evidence in reaching its decision. The only exception is that of the case of an appellant program removed from accreditation based solely on finances that has available new, verifiable financial information that is material to the ACEN Board of Commissioners' adverse action, in which case the matter shall be remanded for further review.
b. The Appeal Committee shall not in its decision or otherwise instruct the ACEN staff, the Evaluation Review Committee, or the ACEN Board of Commissioners to consider evidence concerning the remedying of deficiencies since the date of the ACEN Board of Commissioners' original decision, except in the case of an appellant program being removed from accreditation based solely on finances for which the matter is remanded.

3. The Chair of the Appeal Committee must disallow evidence presented by the appellant program or the ACEN:
   a. Which is not pertinent to the grounds for appeal.
   b. Which concerns the remedying of deficiencies since the time of the ACEN Board of Commissioners' decision.
   c. Which was not available to the Board of Commissioners at the time of its decision, except in the case of an appellant program removed from accreditation based solely on finances that has available new and verifiable financial information that is material to the ACEN Board of Commissioners' decision.

4. The Appeal Committee members may not disclose the content of confidential discussions or deliberations leading to its decision.

5. The Appeal Committee members may not disclose its decision prior to the Chair's notification to the ACEN Chief Executive Officer or designee and the Chair of the ACEN Board of Commissioners.

ACTIONS

1. The Appeal Committee, after the presentation of oral and/or written testimony, must determine whether the appellant program has demonstrated either of the following:

   a. That the ACEN Board of Commissioners failed to follow its published policies and/or procedures and that this failure was significant in leading to the Board of Commissioners' decision.

b. That the ACEN Board of Commissioners' decision was arbitrary, that is, was unreasonable and not based on or consistent with the published Standards and Criteria or ACEN published policies and/or procedures.

2. The Appeal Committee shall act within the following limitations:

a. **AFFIRM** the ACEN Board of Commissioners' decision.

i. The Appeal Committee shall AFFIRM the commission's decision unless it finds that the appellant program:

a. Demonstrated that the ACEN Board of Commissioners failed to follow its published policies and/or procedures and that this failure was significant in leading to the Board of Commissioners' decision.

b. Demonstrated that the ACEN Board of Commissioners' decision was arbitrary, that is, was unreasonable and not based on or consistent with the published Standards and Criteria or ACEN published policies and/or procedures.

c. Removed from accreditation based solely on finances, produced evidence that it has available new, verifiable financial information, and the financial information is material to the ACEN Board of Commissioners' decision.

ii. The decision by the Appeal Committee to AFFIRM the ACEN Board of Commissioners' decision is final and is not subject to further appeal.

b. **AMEND** the ACEN Board of Commissioners' decision.

i. The Appeal Committee shall AMEND the decision of the ACEN Board of Commissioners if it finds that the appellant program has demonstrated that:

a. The ACEN Board of Commissioners' decision was arbitrary, that is, was unreasonable and not based on or consistent with the published Standards and Criteria or ACEN published policies and/or procedures.

ii. The decision by the Appeal Committee to AMEND the ACEN Board of Commissioners' decision is final and is not subject to further appeal.

c. **REMAND** the ACEN Board of Commissioners' decision.

i. The Appeal Committee shall REMAND the decision of the ACEN Board of Commissioners if it finds that the appellant program demonstrated that the ACEN failed to follow its published policies and/or procedures, that the failure was significant in leading to the ACEN Board of Commissioners' decision, and that the failure was significant in leading to the adverse action.

ii. The Appeal Committee must explain the basis for its decision or instructions to REMAND the Board of Commissioners.

iii. If the Appeal Committee REMANDS the case, the reconsideration shall occur at the next regularly scheduled Board of Commissioners meeting following the decision of the Appeal Committee.

iv. Acting in a manner consistent with the Appeal Committee's decision to REMAND or instructions, the Board of Commissioners will reconsider the case and make a second accreditation decision, which may or may not be the same as the first accreditation decision.

v. The second accreditation decision cannot be appealed.

Policy #10 History

Revised July 2015
Revised July 2020
Revised July 2022
Edited June 2023
Edited June 2025

POLICY #11 PUBLIC NOTICE OF PROPOSED POLICY CHANGES

The ACEN provides notice of proposed new or substantive revisions to existing policies. Interested parties have an opportunity to comment on substantive revisions prior to implementation.

ACEN staff may edit existing policies for non-substantive revisions without notice or seeking comments on non-substantive revisions prior to implementation.

Policy #11 History

Revised April 2014
Revised May 2021
Reviewed June 2025

POLICY #12 NURSING PROGRAM RECORDS ON FILE

The Accreditation Commission for Education in Nursing (ACEN) will retain and destroy governing organization/nursing program accreditation records, non-accreditation records, and official correspondence as required by law, applicable regulations, and ACEN policies.

This policy does not seek to provide obligations that may conflict with federal law or regulations, State Sunshine laws, Open Records, or other record retention laws, and shall be construed wherever possible consistent with such laws; should an apparent conflict arise between this policy and federal or state law, in all instances such law shall prevail.

ACCREDITATION RECORDS

Accreditation records mean those documents (paper or digital) created by the governing organization/nursing program or created by the ACEN and are in the possession of the ACEN that relate to the review of a governing organization's/nursing program's seeking initial accreditation, continuing accreditation, or approval of a substantive change.

1. **Initial or continuing accreditation records** shall be retained for one accreditation cycle; five years for initial accreditation or eight years for continuing accreditation and then destroyed. In the case of appeal or arbitration, required records shall be retained until the conclusion of the respective process, then destroyed in five years for initial accreditation or eight years for continuing accreditation, whichever is later. These records include the following:
   a. Nursing program's written report (i.e., Self-Study Report, Follow-Up Report, or Focused Visit Report) excluding supporting evidence.
   b. Site visit team report, if applicable (i.e., Site Visit Report, Follow-Up Site Visit Report, Focused Site Visit Report).
   c. Nurse Administrator Response Form, if applicable.
   d. Evaluation Review Panel Summary.

2. **Substantive change records** shall be retained for three years and then destroyed. These records include the following:
   a. Written documents (paper or digital) created by the governing organization/nursing program as required at the time of submission for Procedure 1, 2, 3, or 4 in accordance with **ACEN Policy #14 Reporting Substantive Changes.**

3. **Candidacy records** shall be retained for three years or until initial accreditation is earned, whichever occurs first, then destroyed. These records include the following:
   a. Written documents (paper or digital) created by the ACEN or created by the governing organization/nursing program as required at the time of submission in accordance with ACEN **Policy #34 Candidacy for a Governing Organization/Nursing Program Seeking Initial Accreditation and candidacy process.**

4. **Annual Report records** shall be retained for eight years. These records include the following:
   a. Written documents (paper or digital) created by the governing organization/nursing program as required at the time of submission for the ACEN Annual Report.

NON-ACCREDITATION RECORDS

Complaint records shall be retained for eight years. These records include the following:

1. Written documents (paper or digital) created by the complainant or created by the governing organization/nursing program at the time of submission as required in accordance with ACEN **Policy #20 Complaints Against an Accredited Program**.

OFFICIAL CORRESPONDENCE RECORDS

Official correspondence includes correspondence on ACEN letterhead signed by the ACEN Chief Executive Officer or designee and addressed to the governing organization's chief executive officer and/or nurse administrator.

1. Initial or continuing accreditation official correspondence shall be retained permanently. These include the following:
   a. Accreditation decision letter to the governing organization's chief executive officer and nursing program's nurse administrator
   b. Letter of voluntary withdrawal from initial or continuing accreditation process if the governing organization/nursing program withdraws before Board of Commissioners' decision; see ACEN **Policy #7 Voluntary Withdrawal from ACEN Accreditation**. In this case, only the governing organization's/nursing program's withdrawal letter and ACEN acknowledgement letter are retained permanently, and all other documents (paper or digital) created by the governing organization/nursing program or created by the ACEN are destroyed.
   c. Letter of voluntary withdrawal from candidacy process. In this case, only the governing organization's/nursing program's withdrawal letter and ACEN acknowledgement letter are retained permanently, and all other documents (paper or digital) created by the governing organization/nursing program or created by the ACEN are destroyed.

2. Substantive change official correspondence shall be retained permanently. This includes the following:
   a. Board of Commissioners' or Chief Executive Officer's or designee decision letter.

3. Other official correspondence shall be retained permanently as determined by the Chief Executive Officer or designee.
   a. Correspondence deemed critical to the accreditation functions of the ACEN.

APPLICABILITY

1. This policy applies to paper or digital accreditation records, non- accreditation records, and official correspondence wherever and however they are retained. Accreditation records, non-accreditation records, and official correspondence do not include any other type of records (e.g., administrative, business, corporate) created by the governing organization/nursing program or created by the ACEN and are in the possession of the ACEN.

Policy #12 History

Revised November 2015
Revised July 2020
Edited June 2023
Edited June 2025

POLICY #13 INTERIM REPORT (not in effect)

Policy #13 History
Retired April 2014

POLICY #14 REPORTING SUBSTANTIVE CHANGES

SUBSTANTIVE CHANGE POLICY AND PROCEDURE

1. ACEN policies and the Standards and Criteria apply to all ACEN-accredited nursing programs wherever the nursing program is located or however the nursing program is delivered. Failure to comply with the Standards and Criteria or with the procedures referred to in this policy could result in the imposition of a stipulation (e.g., conditions, warning, good cause) or the nursing program being removed from the list of ACEN-accredited nursing programs.

2. **Policy #14 Reporting Substantive Changes** is partially based on federal regulations and reflects best practices to ensure that a nursing education program remains in compliance with the ACEN Standards and Criteria and that academic quality is maintained.

3. The ACEN substantive change policy applies only to accredited nursing programs. Programs that have achieved candidacy status should refer to Policy #34 for information about substantive changes that must be reported to the ACEN prior to initial accreditation. All substantive change submissions are reviewed using one of the four identified procedures:
   a. **Procedure 1**: Review of a substantive change requiring the approval of the Board of Commissioners or Chief Executive Officer or designee prior to implementation. ACEN staff will conduct a preliminary review of all Procedure 1 changes to verify that review and a decision by the ACEN Board of Commissioners or ACEN Chief Executive Officer or designee is required. The Chief Executive Officer or designee may approve or deny the Procedure 1 substantive changes as delegated by the Board of Commissioners to the Chief Executive Officer or designee in accordance with 34 CFR 602.22(a)(2)(i). Verified Procedure 1 substantive changes not delegated by the Board of Commissioners to the Chief Executive Officer or designee in accordance with 34 CFR 602.22(a)(2)(i) are referred to the Board of Commissioners for approval or denial. Additionally, the following are referred to the Board of Commissioners for approval or denial:
      i. Any proposed substantive change submitted by a nursing program currently on continuing accreditation with warning or continuing accreditation for good cause.
      ii. A proposed substantive change submitted by an institution placed on advanced payment method, reimbursement payment method, or heighted cash management payment method in accordance with 34 CFR 668.162 by the U.S. Department of Education for Title IV federal funding when the ACEN is the institutional accrediting agency/Title IV gatekeeper.
   b. **Procedure 2**: Review of a substantive change in accordance with 34 CFR 602.22(a)(1)(ii)(c); notification prior to implementation is required.
   c. **Procedure 3**: Review of the closing of a governing organization and/or nursing program. Review of the closing of the closing of an off-campus instructional site or branch campus where a nursing program is offered.
   d. **Procedure 4**: Review of events as determined by the ACEN.

4. ACEN staff review all substantive change submissions. All procedure 2, 3, and 4 substantive changes may be approved or denied by the Chief Executive Officer or designee or referred to the Board of Commissioners for further action.

5. Denial of a substantive change is not appealable. A nursing program that fails to gain approval of a substantive change may resubmit a revised or updated submission following the guidelines and timeframes described in this policy.

6. A governing organization/nursing program in an appeals process, an arbitration process, or a litigation process with the ACEN is not eligible for consideration of any substantive change.

7. Nursing programs with a status of continuing accreditation with warning or continuing accreditation for good cause may not implement a substantive change until the continuing accreditation with warning or continuing accreditation for good cause status has been resolved.
   a. Exceptions may be made for substantive changes deemed necessary to ensure the nursing program's compliance with the Standards and Criteria with which the program was found to be in non-compliance. For example, a nursing program may implement a curriculum change to address non-compliance with Standard 4 Curriculum. However, a nursing program may not increase student enrollment, add new nursing program options, add new teaching locations, implement distance education, or a nursing education unit cannot add new nursing program types until the continuing accreditation with warning or the continuing accreditation for good cause status has been resolved.

8. A nursing program may withdraw or discontinue a substantive change at any time prior to the decision by the Board of Commissioners or the Chief Executive Officer or designee by submitting a formal letter to the Chief Executive Officer or designee withdrawing the substantive change.

9. Once a nursing program submits a substantive change, and the document is reviewed by either the ACEN staff or the decision by the Board of Commissioners or the Chief Executive Officer or designee is made; any information included therein indicating possible non-compliance with any of the ACEN Standards and Criteria may lead the ACEN to further review the nursing program, even if the submission is withdrawn or if approval of the substantive change is denied.

10. The substantive change decision (from the Board of Commissioners or Chief Executive Officer) is effective as of the date of the board's or Chief Executive Officer's decision; this date will be noted in the decision letter sent to the governing organization/nursing program.
    a. The effective date may not pre-date either an earlier denial of the substantive change or the current review and subsequent approval/denial of the substantive change.
    b. Approval or denial of a substantive change is based on a review of written documentation submitted by the nursing program and the understanding and application of the current ACEN policies and the Standards and Criteria. The approval of a substantive change at the time of submission does not guarantee

that after a future review of the program by peer evaluators (e.g., focused visit or continuing accreditation visit), the Board of Commissioners will determine that the program is in compliance with all related Standards and Criteria affected by the substantive change.

c. The effective date of a change of ownership is the date the Board of Commissioners approves the change of ownership; the effective date of a change of ownership may not be more than 30 calendar days prior to the change of ownership.

11. Extensive substantive changes by a nursing program may accelerate the date for the nursing program's next comprehensive continuing accreditation visit. Examples of triggers for an accelerated reaccreditation include the following changes: proliferation of branch campuses or off-campus instructional sites where the nursing program is offered, frequent change of ownership, merger or consolidation with other nursing programs, significant increase in enrollment in the nursing program, or rapid proliferation of new nursing program options.

12. This policy may not address all substantive changes made by the program. Programs implementing significant modifications or expansions to the nature and scope of the ACEN-accredited nursing program should contact the ACEN to discuss the program's plans. The ACEN reserves the right to classify significant changes other than those described below as substantive in nature and to follow up accordingly. The follow-up procedure may include a focused visit.

13. If the ACEN is the institutional accrediting agency/Title IV gatekeeper for the governing organization/nursing program, and the governing organization/nursing program fails to follow the ACEN substantive change policy and procedures; the nursing program may lose its Title IV funding or be required (as determined by the U.S. Department of Education) to reimburse money received related to the unreported substantive change. In addition, the nursing program may be referred to the Board of Commissioners for the imposition of a stipulation (e.g., conditions, warning, good cause) or removal from the list of ACEN-accredited nursing programs.

14. It is the responsibility of each nursing program to notify the ACEN of major changes in a nursing program to ensure maintenance of accreditation status and protection of students in accordance with Policy #14 Reporting Substantive Changes and when required to seek approval prior to the initiation of the substantive change. Failure to report a substantive change places the accreditation status of a nursing program in jeopardy and may have consequences related to Title IV eligibility, as determined by the U.S. Department of Education. If a nurse administrator is unclear as to whether a change is substantive in nature, she/he should contact the ACEN staff for consultation.

15. The ACEN Board of Commissioners reserves the right to reconsider the accreditation status of a nursing program at any time. The Board of Commissioners may also take action to require monitoring of a nursing program due to non-compliance with any Accreditation Standard.

REPORTING THE VARIOUS TYPES OF SUBSTANTIVE CHANGE

The following tables provide an overview of the different types of substantive change, the specific procedure to be used for each, the respective approval and/or notification requirement, the reporting timeline, and submission procedures. Please read the full text of the listed substantive change from the appropriate table:

1. **Table 1:** When **ACEN is not the institutional accreditor/Title IV gatekeeper** for the governing organization/nursing program.
2. **Table 2:** When **ACEN is the institutional accreditor/Title IV gatekeeper** for the governing organization/nursing program.

NOTE: For definitions of bolded terms in the tables below, visit the ACEN Accreditation Glossary Page.

Table 1: Programs that Do Not Utilize the ACEN as the Title IV Gatekeeper

Type of Substantive Change	ACEN Prior Approval Required	Review Procedure[1]	Focused Visit	Submission Timeframe to the ACEN
CURRICULUM				
An increase, decrease, or substitution of 50% or greater of the nursing credit/quarter/clock hours that represent a significant departure in the nursing content from the currently approved nursing courses required for completion of a nursing program.[2]	Yes	Procedure 1	Possible	Four months prior to implementation
Curriculum revisions involving an increase or decrease of 20% or greater of the total credit/quarter/clock hours for the nursing program of study from the currently approved program of study.[2]	Yes	Procedure 1	Possible	Four months prior to implementation of the change
PROGRAM OUTCOMES				
The program's overall (aggregated for the program as a whole) annual program completion rate over two consecutive academic years falling 25% or more below the program's established ELA[5]; or the annual program completion rate in a single year falling 40% or more below the program's established ELA.	No	Procedure 4	Possible	Within 60 calendar days of the program knowing completion rate does not meet benchmark

The program's overall (aggregated for the program as a whole) licensure examination/certification pass rates for the most recent year do not meet any of the ACEN-established benchmarks (Criterion 5.3).	No	Procedure 4	Possible	Within 60 calendar days of the program knowing pass rate does not meet benchmark
The program's overall (aggregated for the program as a whole) annual job placement rate over two consecutive academic years falling 30% or more below the program's established ELA[5]; or the annual job placement rate in a single year falling 45% or more below the program's established ELA.	No	No	Procedure 4	Within 60 calendar days of the program knowing job placement rate does not meet benchmark
DISTANCE EDUCATION				
Offering 50-100% of the number of nursing credit/quarter /clock hours via distance education.**2** Once approved to offer any nursing program within in a single NEU[6] via distance education, approval is not required to offer subsequent nursing program(s) via distance education. NOTE: The ACEN must be notified of any additional programs via non-substantive change.	Yes	Procedure 2	Possible	Four months prior to implementation of the change
PROGRAMS/PROGRAM OPTIONS				
Adding a nursing program option within a nursing program by deleting and/or substituting 50% or more of the existing nursing courses to form the new nursing program option.**2** Note: All new program options that prepare graduates for licensure/certification not currently offered by the program must be reported to the ACEN, regardless of the percentage of change in nursing courses (substantive or non-substantive change reporting). For example, a BSN program that had previously offered only a post-licensure program option and will now offer a pre-licensure program option; or a graduate program that is adding a new APRN population/specialty to their program options.	Yes	Procedure 1	Possible	Four months prior to implementation of the change

Adding a new nursing program type to the nursing education unit.	Yes	Procedure 2	No	Four months prior to the implementation of the change
Inactivation of a nursing program.	No	Procedure 2	No	Four months prior to implementation of the change
Reactivation of a nursing program.	No	Procedure 2	Possible	Four months prior to implementation of the change
Closing a nursing program.	Yes	Procedure 3	Possible	Four months prior to implementation of the change
Acquiring an accredited or non-accredited nursing program from another governing organization.	Yes	Procedure 1	Possible	Four months prior to implementation of the change
CHANGE IN STATUS: NURSING REGULATORY AGENCY/INSTITUTIONAL ACCREDITING AGENCY/TITLE IV				
A change in approval status with the state regulatory agency for nursing. See ACEN Policy #17.	N/A	Procedure 4	Possible	Within 60 calendar days of the program receiving notification
A negative or adverse action by the institutional accrediting agency. See ACEN Policy #18.	N/A	Procedure 4	Possible	Within 60 calendar days of the program receiving notification
INSTRUCTIONAL SITES/BRANCH CAMPUSES/RELOCATIONS				
Establishing a **branch campus** at which an ACEN-accredited nursing program is offered. Once approved to offer any nursing program type at a **branch campus** within a single NEU[6] in accordance with ACEN records, approval is not required to offer any subsequent nursing program(s) within a single NEU at the **branch campus**.[4] NOTE: The ACEN must be notified of any additional branch campus via non-substantive change.	Yes	Procedure 2	Possible[4] Note: All new branch campuses must be reported	Four months prior to implementation of the change

Establishing a new **off-campus instructional site** at which students can obtain 50% or more of the number of nursing credit/quarter/clock hours required for completion of an ACEN-accredited nursing program. Once approved to offer any nursing program type at an **off-campus instructional site** within a single NEU[6] in accordance with ACEN records, approval is not required to offer any subsequent nursing program type(s) within a single NEU at the **off-campus instructional site**.[4] NOTE: The ACEN must be notified of any additional off-campus instructional site via non-substantive change.	Yes	Procedure 1	Possible[3,4] Note: All new off-campus instructional sites must be reported	Four months prior to implementation of the change
Relocating a currently approved branch campus or **off-campus instructional site** serving the same geographic region where the nursing program is offered.	No	Procedure 2	Possible[4]	Prior to implementation
Relocating a nursing program or nursing education unit.	Yes	Procedure 2	Possible	Four months prior to implementation of the change
Adding a **permanent branch campus** or **off-campus instructional site** at which the governing organization is conducting a teach-out for students of another governing organization that has ceased operating before all students enrolled in an accredited or non-accredited nursing program have completed the nursing program of study. Once approved to offer any nursing program type at a **branch campus** within a single NEU[6] in accordance with ACEN records, approval is not required to offer any subsequent nursing program type(s) within a single NEU at the branch campus.[4] NOTE: The ACEN must be notified of any additional locations via the non-substantive change.	Yes	Procedure 1	Possible for each branch campus[4] Note: All new branch campuses and all new off- campus instructional sites must be reported	Four months prior to implementation of the change
Inactivation of a **branch campus** or **off-campus instructional site** where 50% or more of a nursing program or	No	Procedure 2	No	Four months prior to implementation

nursing program option (nursing courses) is offered.				of the change
Closing an approved **branch campus** or **off-campus instructional site** where 50% or more of a nursing program or nursing program options (nursing courses) is offered.	No	Procedure 3 See ACEN Policy #16.	No	Four months prior to implementation of the change
Reactivating a branch campus **or off-campus instructional site** where 50% or more of a nursing program or nursing program option (nursing courses) is offered.	No	Procedure 2	Possible	Four months prior to implementation of the change
ENROLLMENT				
An increase in total enrollment of 50% or greater by headcount in one institutional fiscal year for any ACEN-accredited nursing program type.	No	Procedure 2	Possible	Four months prior to implementation of the change
MISSION/GOVERNANCE				
Changing the ownership, legal status, or form of control of the governing organization.	Yes	Procedure 1	Possible	Four months prior to implementation
Merging/consolidating two or more governing organizations /nursing programs.	Yes	Procedure 1	Possible	Four months prior to implementation
A change in the nurse administrator.	No	Procedure 4	No if compliant with Standard 1 Possible if noncompliant with Standard 1	Within 30 calendar days after permanent or interim nurse administrator assumes duties /responsibilities
Significant change in the organizational structure of the nursing program or NEU[6] that would place a program in non-compliance with the ACEN Standards and Criteria.	Yes	Procedure 1	Possible	Four months prior to implementation of the change
Institutional accrediting agency has required a Teach-Out Plan or Teach-Out Agreement. Nursing program to submit a copy of the institutional **Teach-Out Plan** or **Teach-Out Agreement**.	N/A	Procedure 4	Possible	Within 60 calendar days of the program receiving notification
CONSORTIA/CONTRACTUAL AGREEMENTS				
Entering into a contractual or consortium relationship with an entity to jointly offer all or part of a nursing program.	Yes	Procedure 1	Possible	Four months prior to implementation of the change

1 Required template forms, additional information, and guidelines for submission are located on the ACEN Resource Center page entitled **Substantive Change Resources**.

2 The Board of Commissioners has delegated to the Chief Executive Officer the responsibility and authority to approve or deny this type of request.

3 The governing organization/nursing program must report these changes to the ACEN within 30 calendar days of implementation all off-campus instructional sites.

4 The ACEN may, at its discretion, conduct a focused visit to any branch campus or off-campus instructional site at the time the governing organization/nursing program reported the implementation of the branch campus or off-campus instructional site for any nursing program or if the ACEN becomes aware of the use of a location for any nursing program. Consideration will be given to whether the governing organization/nursing program has previously demonstrated a record of effective oversight of any nursing program at a branch campus and/or off-campus instructional site. All new branch campuses and off-campus instructional sites must be reported whether or not a focused visit is required.

5 ELA stands for expected level of achievement.

6 NEU stands for nursing education unit.

Table 2: Programs that Do Utilize the ACEN as the Title IV Gatekeeper

Type of Substantive Change	ACEN Prior Approval Required	Review Procedure[1]	Focused Visit	Submission Timeframe to the ACEN
CURRICULUM				
Changing the way in which a governing organization or nursing program measures academic progress toward program completion in clock hours, credit hours, semesters, trimesters, or quarters; or uses time-based or non-time-based methods.[2]	Yes	Procedure 1	Possible	Four months prior to implementation of the change
An increase, decrease, or substitution of 50% or greater of the nursing credit/quarter/clock hours that represents a significant departure in the nursing content from the currently accepted/approved nursing courses required for completion of a nursing program.[2]	Yes	Procedure 1	Possible	Four months prior to implementation
Curriculum revisions involving an increase or decrease of 20% or greater of the total credit/quarter /clock hours for the nursing program of study from the currently accredited program of study.[2]	Yes	Procedure 1	Possible	Four months prior to implementation of the change

Implementing a Competency-based education or direct assessment program model (See Glossary).	Yes	Procedure 1	Possible	Four months prior to implementation of the change
PROGRAM OUTCOMES				
The program's overall (aggregated for the program as a whole) annual program completion rate over two consecutive academic years falling 25% or more below the program's established ELA[5]; or the annual program completion rate in a single year falling 40% or more below the program's established ELA.	No	Procedure 4	Possible	Within 60 calendar days of the program knowing completion rate does not meet benchmark
The program's overall (aggregated for the program as a whole) licensure examination/certification pass rates for the most recent year do not meet any of the ACEN-established benchmarks (Criterion 5.3).	No	Procedure 4	Possible	Within 60 calendar days of the program knowing pass rate does not meet benchmark
The program's overall (aggregated for the program as a whole) annual job placement rate over two consecutive academic years falling 30% or more below the program's established ELA[5]; or the annual job placement rate in a single year falling 45% or more below the program's established ELA.	No	Procedure 4	Possible	Within 60 calendar days of the program knowing job placement rate does not meet benchmark
DISTANCE EDUCATION				
Offering 50-100% of the number of nursing credit /quarter/clock hours via distance education.**2** Once approved to offer any nursing program within a single NEU[6] via distance education, approval is not required to offer subsequent nursing program(s) via distance education. NOTE: the ACEN must be notified of any additional programs using distance education via non-substantive change.	Yes	Procedure 1	Possible	Four months prior to implementation of the change
PROGRAMS/PROGRAM OPTIONS				

Adding a nursing program option within a nursing program by deleting and/or substituting 50% or more of the existing nursing courses to form the new nursing program option.[2] Note: All new program options that prepare graduates for licensure/certification must be reported to the ACEN, regardless of the percentage of change in nursing courses (substantive or non-substantive change reporting).	Yes	Procedure 1	Possible	Four months prior to implementation of the change
Adding a new nursing program type to the nursing education unit.	No	Procedure 1	Possible	Four months prior to the implementation of the change
Inactivation of a nursing program.	No	Procedure 2	No	Four months prior to implementation of the change
Reactivation of a nursing program.	No	Procedure 2	Possible	Four months prior to implementation of the change
Closing a nursing program.	Yes	Procedure 3	Possible	Four months prior to implementation of the change
Acquiring another governing organization.	Yes	Procedure 1	Possible	Four months prior to implementation of the change
Acquiring from another off-campus instructional site from an accredited or non-accredited nursing program.	Yes	Procedure 1	Possible	
				Four months prior to implementation of the change
Acquiring from another governing organization an off-campus instructional site where an accredited or non-accredited nursing program is offered.	Yes	Procedure 1	Possible	Four months prior to implementation of the change

CHANGE IN STATUS: NURSING REGULATORY AGENCY/INSTITUTIONAL ACCREDITING AGENCY/TITLE IV				
A change in approval status with the state regulatory agency for nursing. See ACEN Policy #17.	N/A	Procedure 4	Possible	Within 60 calendar days of the program receiving notification
A negative or adverse action by the institutional accrediting agency. See ACEN Policy #18.	N/A	Procedure 4	Possible	Within 60 calendar days of the program receiving notification
A change in Title IV status.	N/A	Procedure 4	Possible	Within 60 calendar days of the program receiving notification
INSTRUCTIONAL SITES/BRANCH CAMPUSES/RELOCATIONS				
Establishing a **branch campus** at which an ACEN-accredited nursing program is offered. Once approved to offer any nursing program at a **branch campus** within a NEU[6] in accordance with ACEN records, approval is not required to offer any subsequent nursing program(s) within a single NEU at the branch campus.[4] NOTE: The ACEN must be notified of any additional locations via non-substantive change.	Yes	Procedure 1	Required	Four months prior to implementation of the change
Establishing a new **off-campus instructional site** at which students can obtain 50% or more of the number of nursing credit/quarter/clock hours required for completion of an ACEN-accredited nursing program. Once approved to offer any nursing program at an **off-campus instructional site** within a single NEU[6] in accordance with ACEN records, approval is not required to offer any subsequent nursing program(s) within a single NEU at the off-campus instructional site.[4] NOTE: The ACEN must be notified of any additional locations via non-substantive change.	Yes	Procedure 1	Required for first two off- campus instructional sites[3,4] Note: All new off-campus instructional sites must be reported	Four months prior to implementation of the change
Relocating a currently approved **branch campus** or **off-campus instructional site** serving the same geographic region where nursing program is offered.	No	Procedure 2	Possible[4]	Prior to implementation

Relocating a nursing program or a single nursing education unit.	Yes	Procedure 2	Possible	Four months prior to implementation of the change
Adding a **permanent branch campus or off-campus instructional site** at which the governing organization is conducting a teach-out for students of another governing organization that has ceased operating before all students enrolled in an accredited or non-accredited nursing program have completed the nursing program of study. Once approved to offer any nursing program at a **branch campus** within a single NEU[6] in accordance with ACEN records, approval is not required to offer any subsequent nursing program(s) within a single NEU at the branch campus.[4] NOTE: The ACEN must be notified of any additional locations via non-substantive change.	Yes	Procedure 1	Required, for each branch campus Required, for first two off-campus instructional sites[3,4]	Four months prior to implementation of the change
Inactivation of a **branch campus** or **off-campus instructional site** where 50% or more of a nursing program or nursing program option (nursing courses) is offered.	No	Procedure 2	No	Four months prior to implementation of the change
Closing an approved **branch campus** or **off-campus instructional site** where 50% or more of a nursing program or nursing program options (nursing courses) is offered.	No	Procedure 3 See ACEN Policy #16.	No	Four months prior to implementation of the change
Reactivating a **branch campus** or **off-campus instructional site** where 50% or more of a nursing program or nursing program option (nursing courses) is offered.	No	Procedure 2	Possible	Four months prior to implementation of the change
ENROLLMENT				
An increase in total enrollment of 50% or greater by headcount in one institutional fiscal year for any ACEN-accredited nursing program.	Yes	Procedure 1	Possible	Four months prior to implementation of the change
An increase in total enrollment of 50% or greater by headcount in one academic year for the governing organization.	Yes	Procedure 1	Possible	Four months prior to implementation of the change

MISSION/GOVERNANCE				
Changing the ownership, legal status, or form of control of the governing organization.	Yes	Procedure 1	Required	Four months prior to implementation
Merging/consolidating two or more governing organizations/nursing programs.	Yes	Procedure 1	Required	Four months prior to implementation
Substantial change in the established mission or objectives of the governing organization or its programs (this does not include a revision/update in the mission statement).	Yes	Procedure 1	Required	Four months prior to implementation
A change in the nurse administrator.	No	Procedure 4	No if compliant with Standard 1 Possible if noncompliant with Standard 1	Within 30 calendar days after permanent or interim nurse administrator assumes duties/ responsibilities
Significant change in the organizational structure of the nursing program or nursing education unit that would place a program in non-compliance with the ACEN Standards and Criteria.	Yes	Procedure 1	Possible	Four months prior to implementation of the change
For governing organizations that are proprietary or private nonprofit, the governing organization's most recently published Financial Responsibility Composite Score being 1.0 or less.[2]	No	Procedure 4	Possible	Within 60 calendar days of the governing organization knowing composite score 1.0 or less
Teach-Out Plan or Teach-Out Agreement. See Policy #36.	N/A	Procedure 4	Possible	Within 60 calendar days of the program receiving notification
CONSORTIA/CONTRACTUAL AGREEMENTS				
Entering into a contractual or consortium relationship with an entity to jointly offer all or part of a nursing program.	Yes	Procedure 1	Possible	Four months prior to implementation of the change
Entering into a relationship under 34 CFR 668.5 with an entity not certified to participate in Title IV, HEA offers more than 25% and up to 50% of the clock hours or credit hours required for completion of a nursing program.[2]	Yes	Procedure 1	Possible	Four months prior to implementation of the change

1 Required template forms, additional information, and guidelines for submission are located on the ACEN Resource Center page entitled **Substantive Change Resources**.

2 The Board of Commissioners has delegated to the Chief Executive Officer the responsibility and authority to approve or deny this type of request.

3 When a governing organization/nursing program initiates its third, fourth, fifth, sixth, etc. off-campus instructional site; has successfully completed at least one cycle of continuing accreditation; currently is not on continuing accreditation with warning or continuing accreditation for good cause or has not been placed on continuing accreditation with warning or continuing accreditation for good cause over the prior three academic years; and is under a provisional certification as provided in 34 CRF 668.1, then the governing organization/nursing program does not need to apply to the ACEN for approval of these subsequent off-campus instructional sites prior to implementation. However, the governing organization/nursing program must report these changes to the ACEN within 30 calendar days of implementation of all off-campus instructional sites.

4 The ACEN may, at its discretion, conduct a focused visit to any branch campus or off-campus instructional site at the time the governing organization/nursing program reported the implementation of the branch campus or off-campus instructional site for any nursing program or if the ACEN becomes aware of the use of a location for any nursing program. Consideration will be given to whether the governing organization
/nursing program has previously demonstrated a record of effective oversight of any nursing program at a branch campus and/or off-campus instructional site. All new branch campuses and off-campus instructional sites must be reported whether or not a focused visit is required.

5 ELA stands for expected level of achievement.

6 NEU stands for nursing education unit.

TYPES OF COMMISSION ACTIONS

For verified Procedure 1 substantive changes that are approved by the Board of Commissioners or Chief Executive Officer as delegated by the Board of Commissioners (or when the ACEN staff refer a substantive change for additional consideration), the Board of Commissioners or Chief Executive Officer may take the following actions.

BOARD OF COMMISSIONERS ACTIONS

1. Approve the substantive change; no focused visit required.
2. Approve the substantive change and authorize a focused visit for review of compliance with specified Standards and Criteria, and the Focused Site Visit Report will be reviewed by the Board of Commissioners in accordance with **Policy #19 Focused Site Visit**.
   a. If the ACEN is the governing organization's institutional accrediting agency/Title IV gatekeeper, and the nursing program is adding its first or second branch campus or new off-campus location where more than 50% of the of the nursing program is offered or when there is a change in legal status, form of control, or ownership; the focused visit must occur within six calendar months after the implementation of the substantive change.
3. Approve the substantive change and require a written report about the status of the implementation of the substantive change within a specified timeframe.
4. Request additional information regarding areas of concern with specified criteria;

the due date for the additional information may not exceed one calendar year from the date of the request, and one of the following:

a. Accept the additional information and approve the substantive change; no further information is required.
b. Accept the additional information and approve the substantive change; authorize a focused visit for review of compliance with specified Standards and Criteria; the focused visit must occur within six calendar months. The Focused Site Visit Report will be reviewed by the Board of Commissioners in accordance with .
c. Deny the substantive change. This is not an appealable action.
d. Deny the substantive change and authorize a focused visit for review of compliance with specified Standards and Criteria. This is not an appealable action. The Focused Site Visit Report will be reviewed by the Board of Commissioners in accordance with .

CHIEF EXECUTIVE OFFICER OR DESIGNEE ACTIONS

For substantive changes categorized as Procedures 2, 3, and 4, the ACEN Chief Executive Officer or designee may take the following actions:

1. Approve or deny the substantive change; no further information is required.
2. Request additional information; the due date for the additional information may not exceed one calendar year from the date of the request; and upon receipt may perform one of the following:
   a. Accept the additional information and approve or deny the substantive change after review of the additional information.
   b. Refer the substantive change submission and additional information to the Board of Commissioners for consideration and possible further action.
3. Refer the substantive change request to the Board of Commissioners for consideration and possible further action.

Policy #14 History

Revised July 2015
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POLICY #15 DISTANCE EDUCATION

While the definitions provided in Policy #15 may differ from those used by the governing organization of a nursing program, nursing programs seeking initial or continuing accreditation with the ACEN must use the following definitions for ACEN-related matters.

See **ACEN Policy #14 Reporting Substantive Changes** and **Policy #34 Candidacy for a Governing Organization/Nursing Program Seeking Initial Accreditation** for requirements related to reporting the implementation of distance education.

DISTANCE EDUCATION CRITICAL ELEMENTS

1. Congruence with the mission of the governing organization.
2. Instructional design and delivery method of the course(s).
3. Preparation and competence of the faculty members teaching each course.
4. Quality and accessibility of the support services for students enrolled in each course.
5. Quality and accessibility of the support services for the faculty members teaching each course.
6. Accessibility, currency, and relevancy of learning resources available for the students enrolled in each course.
7. Currency and appropriateness of each course relative to the method of delivery.
8. Provision for regular and substantive faculty/student and student/student interaction in each course.
9. Ongoing evaluation of student learning in each course.
10. Provision for verification of student identity in each course.

VERIFICATION OF STUDENT IDENTITY

Nursing programs offering any course via distance education must demonstrate that the governing organization:

1. Has processes in place to establish that the student who registers in each distance education course is the same student who academically engages in the course or program. The governing organization may verify student identify through methods such as but not limited to:
   a. assignment of a secure login and pass code,
   b. proctored examinations, and/or
   c. utilization of technologies and practices that are effective in verifying student identity.
2. Uses processes that protect the privacy of the students enrolled in a distance education course; and
3. Notifies students of any projected additional fees associated with verification of student identity at the time of registration for or enrollment in a distance education course.

The following guidelines contain elements of the Standards and Criteria that nursing program faculty and leaders must consider in evaluating the use of distance education within each nursing course, nursing program option, or a nursing program.

The students enrolled in each nursing course, a nursing program option, or a nursing program must have:

1. Access to the range of appropriate student services to support their learning and academic success, such as (but not limited to) admissions, financial aid, academic advising, delivery of course materials, placement, and counseling comparable to those support services available to the students enrolled in non-distance education courses/programs.
2. Knowledge and equipment necessary to use the technology employed and assistance when experiencing difficulty using the required technology.
3. A means for resolving complaints.
4. Information related to advertising, recruiting, and admissions that adequately and accurately represents the course(s)/program(s), admission and completion requirements, and services available.
5. Access to learning resources and guidance in effectively using the learning resources.
6. Their use of learning resources monitored.
7. Access to laboratory facilities, equipment, and other types of technology as appropriate to the courses or program(s).

Each nursing course, nursing program option, or nursing program provides:

1. Direct instruction by faculty that meet the qualifications per the ACEN Standards and Criteria.
2. Faculty responsibility for oversight, ensuring the rigor and the quality of instruction.
3. Technology that is appropriate and supports the achievement of the end-of-program student learning outcomes, role-specific graduate competencies, program outcomes, and course objectives.
4. Current and rigorous materials.
5. Clear policies concerning the ownership of materials, faculty compensation, copyright issues, and the utilization of revenue derived from the creation of intellectual property;
6. Faculty support services specifically related to distance education.
7. Faculty development for faculty who teach in distance education modes of delivery.
8. Regular and substantive interaction between students and faculty and among the students. A governing organization ensures regular interaction between students and faculty members prior to the student's completion of a nursing course by:
    a. Providing the opportunity for substantive interactions with the students on a predictable and regular basis commensurate with the length of time and the amount of content in the course.
    b. Monitoring the students' academic engagement and success and ensuring that faculty members are responsible for promptly and proactively engaging in substantive interaction with students when needed, on the basis of such monitoring, or upon request by a student.

Fiscal and physical provisions are made for long-range planning, budgeting, and policy development processes that reflect the facilities, staffing, equipment, and other resources essential to the viability and effectiveness of each nursing course, nursing program option, or nursing program.

Ongoing systematic evaluation is conducted to assess:

1. Students' capability to succeed in each nursing course, a nursing program option, or a nursing program, and used in the review and revision of policies and procedures.
2. Achievement of end-of-program student learning outcomes, role-specific nursing competencies, and program outcomes, with a comparison made to programs using traditional education.
3. The integrity of student work and credibility of the degree and credits awarded.

Policy #15 History

Revised November 2015
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Reviewed 2025

POLICY #16 CLOSINGS

CLOSING AN INSTITUTION, A NURSING PROGRAM, AN OFF-CAMPUS INSTRUCTIONAL SITE, OR A BRANCH CAMPUS WHERE A NURSING PROGRAM IS OFFERED

When a governing organization makes the decision to close the institution, a nursing program, an off-campus instructional site, or a branch campus where 100% of a nursing program is offered, the governing organization/nursing program must make a good faith effort to assist affected students, so they experience minimal disruption in the pursuit of their nursing program of study. In all cases, nursing students should be notified of the decision as soon as possible, so they can make appropriate plans. Nursing students, who have not completed their nursing program of study, should be advised by faculty or professional counselors regarding suitable options, including transfer to comparable programs.

When an institution, a nursing program, an off-campus instructional site, or a branch campus where 100% of a nursing program is offered, a Closing Report that fully describes the plan for closing the nursing program must be submitted to the ACEN. The Closing Report must include a teach-out agreement and/or a teach-out plan.

The governing organization closing the institution, a nursing program, an off-campus instructional site, or a branch campus where 100% of a nursing program is offered may fulfill its educational commitment to currently enrolled nursing students through either of the following:

1. A teach-out agreement with one or more governing organization(s).
2. A teach-out plan whereby the governing organization educates its currently enrolled students until all nursing students graduate from the nursing program, off-campus instructional site, or branch campus that is closing.

For governing organizations/nursing programs for which the ACEN serves as the institutional accreditor/Title IV gatekeeper, arrangements for the teach-out agreement or teach-out plan must be consistent with the requirements of Policy #14 Reporting Substantive Changes and Policy #36 Teach-out Plan and Teach-out Agreement(s).

The ACEN reserves the right to request a teach-out agreement and/or a teach-out plan for all governing organizations/nursing programs for which the ACEN serves as the programmatic accrediting agency. If requested, the teach-out agreement or teach-out plan must be consistent with the requirements of Policy #14 Reporting Substantive Changes and Policy #36 Teach-out.

Based on the information provided in the Closing Report, the teach-out plan and/or all teach-out agreements, the accreditation status of the nursing program, and the date of the next scheduled accreditation visit, one of the following actions will be taken:

1. When the current status of the nursing program is continuing accreditation, and there is no stipulation (i.e., conditions, warning, good cause), the ACEN Chief Executive Officer ordesignee may:
   a. Cancel the next visit and extend continuing accreditation if the nursing program is scheduled to close within 18 months after the last day of the spring or fall review cycle

that the Board of Commissioners would make the next decision. The last date of the spring review cycle is June 30th, and the last date of the fall review cycle is December 31st.
   b. Reaffirm the originally scheduled visit.
   c. Refer the nursing program to the ACEN Board of Commissioners for a determination of the action(s) that should be taken.

2. When the current status of the nursing program is continuing accreditation with conditions, the ACEN Chief Executive Officer ordesignee may:
   a. Extend the conditions status and waive the requirement to submit a follow-up report if the nursing program is scheduled to close within 12 months after the last day of the spring or fall review cycle that the Board of Commissioners would make the next decision. The last date of the spring review cycle is June 30th, and the last date of the fall review cycle is December 31st.
   b. Reaffirm the originally scheduled submission of the Follow-Up Report.
   c. Determine the date of a next Follow-Up Report if the nursing program is scheduled to close beyond 12 months after the next scheduled review by the Board of Commissioners.
   d. Refer the nursing program to the ACEN Board of Commissioners for a determination of the action(s) that should be taken.

3. When the current status of the nursing program is continuing accreditation with warning, the ACEN Chief Executive Officer or designee may:
   a. Extend the warning status if the nursing program is scheduled to close within six months after the last day of the spring or fall review cycle that the Board of Commissioners would make the next decision. The last date of the spring review cycle is June 30th, and the last date of the fall review cycle is December 31st.
   b. Reaffirm the originally scheduled follow-up visit.
   c. Determine the date of a next follow-up visit if the nursing program is scheduled to close beyond six months after the next scheduled review by the Board of Commissioners.
   d. Refer the nursing program to the ACEN Board of Commissioners for a determination of the action(s) that should be taken.

4. When the current status of the nursing program is continuing accreditation for good cause, the ACEN Chief Executive Officer or designee will refer the nursing program to the ACEN Board of Commissioners for a determination of the action(s) that should be taken.

5. If a nursing program planning to close fails to submit a Closing Report to the ACEN or comply with any request(s), such action will constitute a declaration to the ACEN that the program is voluntarily withdrawing the nursing program from ACEN accreditation.

6. If a nursing program previously scheduled to close extends its operation beyond the original closing date, a site visit may be scheduled. The procedure to be followed will depend on the nursing program's status at the time the announcements about the closing and the change of plans were made.

7. If a nursing program closes in the interim between ACEN Board of Commissioners meetings and without prior notice to the ACEN, the closing automatically terminates ACEN accreditation.

8. If a governing organization/nursing program closes without a teach-out agreement or teach-out plan, the ACEN will work with the U.S. Department of Education and the appropriate state agency, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charges.

SUBMITTING THE CLOSING REPORT

1. Templates for Closing Reports and guidelines for submission are available on the ACEN Resource Center page entitled **Substantive Change Resources**.
2. The appendix has no page limit; however, information must be directly related to the closing.
3. Confidential records (e.g., faculty transcripts, student records) should not be included.

REQUIRED INFORMATION IN THE CLOSING REPORT

1. Type of Closing
   a. Closing a governing organization and/or closing a nursing program
   b. Closing an off-campus instructional site or branch campus

Refer to **Policy #14 Reporting Substantive Changes, the Closings and Inactivations** webpage, and the **Closing Report Templates**.

Policy #16 History

Revised July 2015
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Edited May 2018
Edited November 2018
Revised March 2019
Revised July 2020
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Edited June 2023
Edited June 2025

POLICY #17 STATE REGULATORY AGENCY FOR NURSING APPROVAL

ACEN SUBMISSION REQUIREMENTS REGARDING STATE REGULATORY AGENCY APPROVAL

If a nursing program has a change in its approval status with the state regulatory agency for nursing, the nurse administrator shall immediately submit to the ACEN a report explaining the reasons for the decision, a copy of the letter received from the state regulatory agency for nursing, and a report detailing the plans to correct the situation. The ACEN Board of Commissioners will determine appropriate follow-up actions after reviewing the submitted materials. The accreditation status of the nursing program may be changed.

See ACEN **Policy #19 Focused Site Visit.** Refer to ACEN **Policy #14 Reporting Substantive Changes** and the **Closing Report Templates**. See ACEN **Policy #16 Closings**.

Policy #17 History

Revised July 2015
Edited July 2020
Edited June 2023
Edited June 2025

POLICY #18 ACCREDITATION STATUS OF THE GOVERNING ORGANIZATION

The governing organization offering an ACEN-accredited nursing program must be accredited by an agency recognized by the ACEN. See **ACEN Policy #3 Eligibility for Initial and Continuing Accreditation**. If the institutional accrediting agency revokes its accreditation of the governing organization, the nurse administrator shall submit to the ACEN Chief Executive Officer within 24 hours of the notification of the action taken by the institutional accrediting agency, a report explaining the reason(s) for the decision and the effect of the decision on the program. The ACEN Board of Commissioners will determine appropriate follow-up action(s) following a review of the submitted report.

Policy #18 History

Revised July 2015
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POLICY #19 FOCUSED SITE VISIT

The ACEN Board of Commissioners or ACEN Chief Executive Officer or designee may determine a focused site visit is warranted in order to review significant accreditation-related information disclosed about a program as a result of one or more of the following:

1. A substantive change submission.
2. Information revealed about a nursing program between periods of scheduled review.
3. Information received from the governing organization's accrediting body related to an adverse action.
4. Information received from the nursing program's state regulatory agency for nursing related to a change in its status.
5. Information revealed about a nursing program during the Evaluation Review Panel process.
6. Information received from the U.S. Department of Education regarding a governing organization's/nursing program's compliance responsibilities under Title IV of the Higher Education Act such as information related to a governing organization's/nursing program's most recent student loan default rates, the results of financial or compliance audits, program reviews, and any other information that may be provided by the U.S. Department of Education, when the ACEN is the institutional accreditor/Title IV gatekeeper.

A focused site visit review includes only the Standards and Criteria pertinent to the reason for the focused site visit. ACEN staff will determine the Standards and Criteria to be reviewed, peer evaluator(s) for the visit will be identified, and a date for the focused site visit will be determined. The nursing program must prepare a Focused Visit Report based on the Standards and Criteria identified and upload the Report to the ACEN Document Repository six weeks before the scheduled focused site visit. Peer evaluator(s)will use the Focused Visit Report as the foundation for review of the program's compliance with the identified Standards and Criteria. The focused site visit is typically 1–2 days in length. For more information see the **Schedule of Fees** and **Site Visit Preparation** resources available on the ACEN website.

The ACEN Chief Executive Officer designee reserves the right to:

1. Have an ACEN staff member accompany a focused site visit team. If an ACEN staff member accompanies a focused site visit team, the staff member would offer guidance to the peer evaluators. The governing organization/nursing program is responsible for all costs of the staff member accompanying the focused site visit team.
2. Have an ACEN staff member serve on a focused site visit team as team chair, team member, or solely conduct the visit. If an ACEN staff member serves on a focused site visit team, the staff member would serve as an emeriti peer evaluator. The governing organization/nursing program is responsible for all costs of the staff member serving on the focused site visit team.

Following the focused site visit, the Board of Commissioners will take one of the following actions:

1. Affirm the program's accreditation status and date of the next scheduled visit.
2. Change the date of the program's next scheduled visit to a date earlier than previously scheduled. This is not an appealable action.

3. Change the program's accreditation status to one of the following:
    a. Continuing accreditation with conditions.
    b. Continuing accreditation with warning.
    c. Continuing accreditation for good cause.
4. Deny continuing accreditation and remove the program from the list of accredited programs. This is an appealable action. See **Policy #10 Appeal Process and Submission of New Financial Information Subsequent to Adverse Action**.

See **Policy #4 Types of Commission Actions for Continuing and Initial Accreditation** for potential decisions and maximum monitoring period – conditions, warning, and good cause.

FOCUSED SITE VISIT

All focused site visits are scheduled visits; the ACEN does not conduct unannounced focused site visits. The ACEN may schedule an in-person or virtual focused site visit. The ACEN Chief Executive Officer or designee reserves the right and has the authority to determine when to conduct an in-person focused site visit and when to conduct a virtual focused site visit. While the ACEN staff will seek input from the governing organization/nursing program representatives, the Chief Executive Officer's or designee's determination regarding the format of the focused site visit is not appealable.

A virtual focused site visit shall use an engaged, interactive format; it shall not rely solely on a review of documents or exchanges of emails. The rigor, quality, and process of the virtual focused site visit as well as the opportunity for the governing organization/nursing program to provide evidence as well as verify, clarify, and/or amplify evidence must be comparable to an in-person focused site visit. Therefore, a virtual focused site visit requires the use of video or web conferencing tools that allow synchronous communication among participants and visual display of individuals, groups, documents, and/or physical spaces.

When a virtual focused site visit is conducted by the ACEN, all or some of the peer evaluators are not physically present at the governing organization/nursing program location. A virtual focused site visit will be scheduled to accommodate time zones of all ACEN peer evaluators conducting the virtual visit and the time zone of the nursing program hosting the visit; this is done with the understanding that adjustments to schedules will be needed of all participants involved in the visit.

FULL OR HYBRID VIRTUAL FOCUSED SITE VISITS

In a 100% virtual focused site visit, all ACEN peer evaluators conduct their review of the governing organization/nursing program using synchronous video or web conferencing tools, which can be supplemented by telephonic conferencing tools.

In a hybrid virtual focused site visit, one or more ACEN peer evaluators conduct their review of the governing organization/nursing program using synchronous video or web conferencing tools, which can be supplemented by telephonic conferencing tools, while one or more other ACEN peer evaluators conduct their review of the governing organization/nursing program onsite.

ELIGIBILITY FOR A VIRTUAL FOCUSED SITE VISIT

1. The ACEN Chief Executive Officer or designee may determine when a program is eligible for a virtual focused visit.

2. Under the direction of the Chief Executive Officer designee, ACEN staff will review a governing organization's/nursing program's accreditation history, annual reports, and the reason for considering a virtual focused site visit to determine whether a governing organization/nursing program is eligible for a virtual focused site visit.
3. For substantive changes where selected criteria related to students and physical facilities were reviewed, and 100% of the peer evaluators conducted their review virtually, the ACEN may conduct a verification visit to the governing organizations/nursing programs within a reasonable period of time following the virtual focused site visit.

EVIDENCE, TECHNOLOGY INFRASTRUCTURE, FACILITIES, AND SUPPORT SERVICES

1. All virtual focused site visit activities shall be scheduled using the governing organization's synchronous virtual meeting system or the ACEN's virtual meeting system.
2. Regardless of which synchronous virtual meeting system is used, the governing organization/nursing program is responsible for ensuring that its technology infrastructure, facilities, and support services can accommodate a fully engaged, synchronous interactive virtual focused site visit.
3. The ACEN may require a governing organization/nursing program to conduct a technology test prior to the virtual focused site visit to demonstrate to the ACEN's satisfaction that it has adequate technology infrastructure and support services to conduct a virtual focused site visit that meets the ACEN's requirements.
4. Whether a full or hybrid virtual focused site visit, the governing organization/nursing program must ensure that there are adequate meeting spaces (facilities) for governing organization/nursing program representatives to meet with the ACEN peer evaluators, including simultaneous meetings as needed with individuals and groups.
5. Whether a full or hybrid virtual focused site visit, the governing organization/nursing program must use the ACEN Document Repository to upload:
   a. the program's Focused Visit Report and supporting evidence.
   b. any additional information the peer evaluators request before the visit.
   c. any additional information the peer evaluators request during the visit.
6. Whether a full or hybrid virtual focused site visit, the governing organization/nursing program must provide virtual access to all interviewees (simultaneously as needed with individuals and groups) that is comparable and sufficient to the access normally found during an onsite focused site visit.

ACEN RESERVE RIGHTS AND APPLICABILITY TO CURRENT POLICIES

1. Unless specifically stated in this document, all ACEN policies, processes, procedures, practices, and protocols apply and remain in force.

2. All applicable focused site visit accreditation fees, policies, processes, procedures, practices, and protocols shall be the same as for an onsite focused site visit, a fully virtual focused site visit, and a hybrid virtual focused site visit.

3. The ACEN reserves the right to cancel a full or hybrid virtual focused site visit at any time prior to or during the scheduled visit and schedule a full, onsite site visit instead. A

full, onsite site visit will be scheduled within a reasonable period of time following the canceled virtual focused site visit.

4. Whether a full or hybrid virtual focused site visit, if there is a technology failure that significantly impairs the peer evaluators' ability to have an engaged, synchronous interactive review, the team chair (in consultation with ACEN staff) shall terminate the virtual focused site visit immediately, and the governing organization/nursing program cannot be visited or accredited using the virtual focused site visit format. An onsite site visit will be scheduled within a reasonable timeframe following the terminated virtual focused site visit.

5. Whether a full or hybrid virtual focused site visit takes place, if the team chair and team members determine that the program's report and supporting evidence provided in the ACEN Document Repository are inadequate, and the inadequacy significantly impairs the team's ability to conduct a review comparable to a full, onsite focused site visit, the team chair (in consultation with ACEN staff before or during the virtual focused site visit) shall terminate the virtual focused site visit, and the governing organization/nursing program cannot be visited or accredited using the virtual focused site visit format. An onsite focused site visit will be scheduled within a reasonable period of time following the terminated virtual focused site visit.

6. The governing organization/nursing program shall not record (audio or video) any portion of the virtual focused site visit. Based on **Policy #31 Integrity**, if evidence of recording is discovered, the team chair shall terminate the virtual focused site visit immediately, and the governing organization/nursing program cannot be visited or accredited using the virtual focused site visit format. In accordance with Policy #31, if evidence of recording is discovered, it may adversely affect the governing organization's/nursing program's accreditation status with the ACEN.

Policy #19 History

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Edited June 2023
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POLICY #20 COMPLAINTS AGAINST AN ACCREDITED PROGRAM

The ACEN will only act upon substantiated complaints against an accredited program that indicate one or more of the following:

1. A governing organization's and/or nursing program's non-compliance with the Standards and Criteria.
2. A governing organization's and/or nursing program's non-compliance with ACEN policy.
3. A governing organization's and/or nursing program's non-compliance with its own published policy as said policy relates to the Standards and Criteria.

The ACEN may act upon concerns from a recognized state or federal agency. However, the ACEN will not interpose itself as a reviewing authority in individual matters such as (but not limited to):

1. Admission.
2. Grades.
3. Granting or transferability of credits.
4. Application of academic policies.
5. Fees or other financial matters.
6. Disciplinary matters.
7. Contractual rights and obligations.
8. Personnel decisions.
9. Similar matters.

The ACEN will also not:

1. Seek any type of compensation, damages, readmission, or other redress on an individual's behalf.
2. Respond to or take action upon any complaint that is defamatory, hostile, or profane.
3. Involve itself in collective bargaining disputes.
4. Accept complaints about individuals.

An individual interested in submitting information regarding a nursing program to be considered during an upcoming initial or continuing accreditation review should follow **Policy #8 Opportunities for Third-Party Comments on Programs Scheduled for Evaluation**. The ACEN reserves the right to review and act upon incoming complaints or third-party comments under **Policy #8** or **Policy #20** as appropriate to the circumstance.

The ACEN expects an individual to attempt to resolve an issue through the governing organization's and/or nursing program's own published grievance policy/procedures (if applicable) before submitting a complaint to the ACEN. Each governing organization and nursing education unit is required to have in place written student complaint policies and procedures that are reasonable, fairly administered, and well-publicized. All written student complaints must be resolved in a timely manner. In accordance with federal regulations, each governing organization and nursing education unit must maintain a record of complaints received since the last ACEN accreditation visit (or from the time candidacy was achieved for programs seeking initial accreditation). This record must be available to the ACEN upon request. The record(s) of the nursing program will be examined by the ACEN as part of

the program's initial or continuing accreditation review. The ACEN will not review or act upon a complaint formally filed with the ACEN more than one year after the completion of the governing organization's and/or nursing program's grievance procedures.

The ACEN will not consider a complaint while litigation appertaining thereto is ongoing. However, if the ACEN determines that the complainant raises issues so immediate that a delay may jeopardize the nursing program's accreditation status or cause harm to any individuals, including nursing students, the ACEN may at its discretion choose to proceed with its review.

Records of single complaints will be maintained by the ACEN in accordance with **Policy #12**. If a number of single complaints suggest a pattern of concern not evident from any single complaint, the ACEN may renew its consideration of a matter for whatever action may be appropriate.

SUBMITTING A COMPLAINT

1. Complaints must be submitted using one of the following two methods:
   a. Complete the online form and include supporting documentation located here: **https://acenursing.atlassian.net/servicedesk/customer/portal/30**, **OR**
   b. Email a copy of the completed Complaint Form and supporting documentation to: **complaints@acenursing.org**
2. The ACEN will not accept complaints via telephone.
3. The ACEN will not review or act upon unsubstantiated anonymous complaints.
4. The ACEN will not review or act upon complaints submitted by an individual or agency on behalf of another individual. For example, the ACEN will not review or act upon a complaint from a parent, spouse, child, sibling, coworker, friend, or attorney of a complainant.
5. The ACEN must be the original intended recipient of the complaint. The ACEN will not review or act upon complaints that are forwarded to the ACEN.
6. All complaints must be submitted in English.

ACEN PROCEDURE FOR PROCESSING COMPLAINTS

1. The ACEN will acknowledge a complaint within 15 business days of its receipt.
2. Within 60 business days after acknowledging receipt of the complaint, the ACEN staff will review the complaint and determine whether:
   a. it is related to the program's accreditation status.
   b. it is within the scope of ACEN policy.
   c. it demonstrates the governing organization's and/or nursing program's noncompliance with one or more of the following:
      i. The Standards and Criteria.
      ii. An ACEN policy.
      iii. The governing organization's and/or nursing program's own published policy as said policy relates to the Standards and Criteria.
      iv. There is adequate evidence in support of the allegations made in the complaint.
3. If the complaint does not have sufficient substance to warrant further review, the ACEN will communicate this to the complainant in writing within 15 business days of reaching this conclusion.
4. If the complaint has sufficient substance to warrant further review, the ACEN will communicate this to the complainant within 15 business days of reaching this conclusion.

The ACEN will make every effort to expedite its review; however, the time required to conduct its review may vary considerably depending on the circumstances and nature of the complaint.

5. When a complaint is reviewed further, a copy of the complaint will be forwarded to the nurse administrator of the nursing program, who will be asked to respond to the ACEN within 20 business days. Upon receipt of a response from the nurse administrator, the ACEN reserves the right to request additional materials as needed from the complainant and/or nurse administrator.
6. If there is insufficient evidence of non-compliance, the complaint will not be processed further. The decision of the ACEN staff is final, and the complainant and nurse administrator will be notified of this outcome.
7. If there appears to be sufficient evidence of non-compliance or if the ACEN staff are unable to determine compliance, the following actions may be taken by the ACEN Chief Executive Officer (the complainant and nurse administrator will be notified of this outcome):
   a. The complaint may be forwarded directly to the ACEN Board of Commissioners for review and action.
   b. The ACEN Chief Executive Officer may authorize a Focused Visit (in accordance with **Policy #19** to evaluate the governing organization/nursing program and the complainant and the nurse administrator will be notified of the Board's decision.
   c. The complaint allegations may be reviewed as part of an upcoming scheduled visit to the nursing program in accordance with **Policy #4** and the complainant and the nurse administrator will be notified of the board's decision.

For items 7a, 7b, or 7c above, the decision of the ACEN Board of Commissioners is final unless appealable as delineated in **Policy #10 Appeal Process and Submission of New Financial Information Subsequent to Adverse Action**.

Policy #20 History

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POLICY #21 COMPLAINTS AGAINST THE ACCREDITATION COMMISSION FOR EDUCATION IN NURSING

The Board of Commissioners Executive Committee of the Accreditation Commission for Education in Nursing (ACEN) receives complaints made against the ACEN.

When a written, signed, and dated complaint is received, the Chief Executive Officer, Chief Accreditation Officer, or Chief Financial Officer will refer the complaint to the Executive Committee of the Board of Commissioners for review.

ACEN Complaint Process	
Procedure	**Timeline**
The complaint is presented to the ACEN CEO, CAO, or CFO as a written, signed, and dated statement.	
The CEO, CAO, or CFO will review the complaint and may request as necessary additional information from the complainant or the ACEN staff.	Within 10 business days of receipt of complaint.
The CEO, CAO, or CFO will refer the complaint to the Executive Committee for review.	Within 10 business days of receipt of all necessary complaint information/materials.
If the Executive Committee determines that the complainant raises significant issues, the Executive Committee will direct the CEO, CAO, or CFO to appoint a special committee to investigate the complaint in a timely, fair, and equitable manner. Conflicts of interests will be considered in the appointment of the special committee members. Commissioners shall not participate in any capacity on the special committee.	Within 10 business days of the Executive Committee's receipt of complaint information/materials.
The CEO will appoint a Special Committee of three persons composed of: One representative from nursing education (nurse educator/clinician). One representative from nursing service (practitioner/clinician). One public member.	Within 15 business days of the Executive Committee's referral.
The Special Committee will meet to consider the complaint.	Within 30 business days of appointment to the Special Committee.
The Special Committee presents its findings and recommendation to the CEO, CAO, or CFO for consideration.	Within 7 business days of meeting.
The CEO, CAO, or CFO will present the Special Committee's finding(s)/recommendation(s) to the Board of Commissioners.	At the next regularly scheduled meeting.
The complainant will be notified of the outcome of the	Within 30 business days of the Board of Commissioners

complaint.	meeting.

Policy #21 History

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Revised July 2020
Edited July 2022
Edited June 2023
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POLICY #22 PROGRAM ACCREDITATION STATUS IN RELATION TO STATE AND OTHER ACCREDITING AGENCY ACTIONS

1. If the ACEN is notified that the accreditation status of the governing organization of an ACEN-accredited nursing program was changed by its institutional accrediting agency, the ACEN will promptly review the program to determine what action should be taken. See **ACEN Policy #19 Focused Site Visit.**

2. If the ACEN is notified that the approval status of the governing organization of an ACEN-accredited nursing program was changed by a state agency, the ACEN will promptly review the program to determine what action should be taken. See **ACEN Policy #19 Focused Site Visit.**

3. If the ACEN is notified that the status of an ACEN-accredited nursing program was changed by a state agency, the ACEN will promptly review the program to determine what action should be taken. See **ACEN Policy #19 Focused Site Visit.**

Policy #22 History

Revised July 2015
Revised March 2019
Edited June 2025

POLICY #23 PUBLIC NOTICE OF PROPOSED NEW OR REVISED STANDARDS AND CRITERIA

The ACEN Accreditation Standards and Criteria are developed, reviewed, and revised periodically by means of procedures that involve continuous input from ACEN-accredited governing organizations/nursing programs and identified communities of interest. The ACEN ensures the circulation of proposed revisions to the Standards and Criteria and the opportunity for comment from interested parties.

Policy #23 History

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Reviewed June 2025

POLICY #24 ASSESSMENT OF THE ADEQUACY OF STANDARDS AND CRITERIA, ACEN PROCESS, AND PRACTICES

The ACEN maintains an ongoing, systematic review designed to ensure that:

(1) the Standards and Criteria are valid and reliable indicators of the educational quality provided by accredited programs and are relevant to the educational needs of students;

(2) ACEN processes are reliable and assess knowledge and consistency of observations, applications, decisions, and perceptions, and

(3) there are broad communications and consultations across constituencies.

The findings from the ongoing review are used for development, maintenance, and revision of the Standards and Criteria, processes, and practices. Evidence to support ongoing systematic review appears in commission meeting minutes, annual reports, the ACEN Report to Constituents, on the ACEN website, and at ACEN events.

THE PROCESS OF REVIEW OF THE STANDARDS AND CRITERIA

The process of review:

1. Is comprehensive.
2. Occurs at regular intervals, which is every five years unless it is determined at any point during the systematic review/analysis of data that changes are needed to the Standards and Criteria. If the review/analysis shows that changes are needed, the ACEN will initiate a review of the Standards and Criteria within 12 months of this determination, and the ACEN will complete the review within a reasonable period.
3. Examines each Standard and its accompanying Criteria as a whole.
4. Involves relevant constituencies such as nursing students, representatives from nursing education (nurse educator/clinician), nursing service (nurse clinician/practitioner), and other constituents in the review.
5. Affords relevant constituencies a meaningful opportunity to provide input into the review.
6. Requires that necessary changes be made promptly to improve the ACEN's effectiveness and efficiency as well as the consumer friendliness of ACEN products and services.

ASPECTS OF THE REVIEW OF THE STANDARDS AND CRITERIA

A comprehensive review of the Standards and Criteria consists of:

1. Review of ACEN program data and trends.
2. Review of literature for trends in nursing practice and nursing education.
3. Review of U.S. Department of Education Regulations.
4. Review of the Council for Higher Education Accreditation Recognition Policy and Procedures.
5. Notice to constituencies of proposed changes to the Standards and Criteria with the opportunity for constituencies to make comment on the proposed changes. There will be two public comment periods; each public comment period will be at least 30 calendar days.
6. Review of comments from the public comment periods and revision of proposed changes to the Standards and Criteria as applicable.

7. Board of Commissioners adoption of revised Standards and Criteria.

RELIABILITY OF ACEN PROCESSES

Reliability is ensured by:

1. Analysis of internal consistency of the accreditation status recommendations/decisions across the three levels of review by and among all program types per accreditation review cycle and trended over time.
2. Identification of non-compliance by criterion among all program types per accreditation review cycle and trended over time.
3. Analysis of the perceived effectiveness of the planning and conduct of the accreditation site visit by the nursing program and the site visit teams by program type per accreditation review cycle and trended over time.

COMMUNICATION AND BROAD CONSULTATION PRACTICES

Communication is ensured by:

1. Solicitation of comments on proposed new or revised policies from interested parties.
2. Distribution of the Annual Report findings in the Report to Constituents and on the ACEN website as aggregated data trended over time.
3. Broad consultation across constituencies.

PLANNED USE OF DATA ANALYSIS

Data analysis is used to:

1. Maintain validity and relevance of the Standards and Criteria.
2. Maintain reliability of the ACEN accreditation processes and practices.
3. Continue to identify and disseminate information in appropriate arenas related to specific education needs for nursing programs and peer evaluators.
4. Continue to identify and disseminate information in appropriate arenas regarding specific developmental needs of nursing programs and peer evaluators.
5. Continue to identify and disseminate information through appropriate means regarding areas in which change(s) needs to be facilitated.

EVALUATION OF THE SITE VISIT

For each site visit, the nurse administrator of the nursing program, team chair, and team members have an evaluation form to complete. The information is used to:

1. Improve the quality of the accreditation process.
2. Identify potential team chairs.

ANNUAL REPORT

All accredited nursing programs are required to submit an Annual Report. The Annual Report will request at minimum the following program outcome information:

1. Program completion rates.

2. Job placement rates.
3. Licensure and/or certification examination pass rates.
4. The URL where outcomes data are available to communities of interest.

The ACEN staff will review the information to ensure that nursing programs continue to comply with policies and reporting requirements. Significant changes will be referred to the ACEN Board of Commissioners, and action may be taken as appropriate. Failure to submit the Annual Report could result in the ACEN Board of Commissioners taking appropriate action, including potentially altering the program's accreditation status.

Data related to individual programs will be used for monitoring purposes. Data related to all programs will be reported publicly in aggregate form only and trended over time.

Programs with **Title IV-HEA** responsibilities must also submit information regarding compliance with their Title IV responsibilities and the result of financial or compliance audits in accordance with Policy #33 Financial Responsibility.

Policy #24 History

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POLICY #25 TRANSFER OF CREDIT (ACEN TITLE IV GATEKEEPER PROGRAMS ONLY)

THIS POLICY Applies only to governing organizations/nursing programs for which the ACEN serves in a Title IV gatekeeper capacity.

At its discretion, a governing organization and/or nursing program may accept transfer credit for a course or courses completed in other postsecondary governing organizations when comparable in scope and content to the governing organization and/or nursing program's own coursework. The acceptance of credit for transfer is primarily based on the competencies achieved by the student in previously completed coursework and whether the competencies reasonably align with the coursework and the nursing program into which the credit is to be transferred.

Accreditation for the governing organization and/or nursing program from which the student is seeking to transfer credits may be a consideration for credit transfer decisions; however, accreditation of the governing organization and/or nursing program from which the student is seeking to transfer credits may not be the sole basis for accepting or denying credit for transfer, nor should it be represented as a requirement of the ACEN.

In evaluating credit earned by students for transfer, a governing organization and/or nursing program must:

1. Establish appropriate criteria for acceptance of transfer of credits from another governing organization (institution), including any types of institutions or sources from which the institution will not accept credits.
2. Establish appropriate criteria for the acceptance of transfer credits, including at a minimum the currency, comparability, relevancy to degree and/or nursing program of study, calculation of credit (e.g., clock hours to semester or quarter hours), and grade earned for the course(s) to be transferred.
3. Apply a systematic, consistent process for determining whether to accept credit earned at other governing organizations.
4. Document in the permanent student record the basis on which the transfer credit was accepted and identification of the governing organization from which the credit was transferred. This should include at minimum (as applicable):
   a. Written criteria used to evaluate and award credit for prior learning experience such as service in the armed forces, paid or unpaid employment, or other demonstrated competency or learning (e.g., DANTES, CLEP, ACE, AP or IB examinations, military education/experience). Note: credit for prior learning experience information may be a standalone policy or may be part of another policy such as a transfer of credit policy.
   b. A list of institutions with which the institution has established an articulation agreement.

The governing organization and/or nursing program must publish its transfer-of-credit policy, including clear communication of the criteria and process for evaluating and accepting credit for transfer earned at other governing organizations in all documents (paper and electronic) that serve to inform the public.

Policy #25 History

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POLICY #26 PROFESSIONAL STAFF RELATIONSHIP TO THE BOARD OF COMMISSIONERS AND EVALUATION REVIEW PANEL

Accreditation Commission for Education in Nursing (ACEN) staff are expected to advise and inform the Evaluation Review Panel and the Board of Commissioners on matters regarding a nursing program. They may offer advice or provide information on their own initiative or at the request of the Evaluation Review Panel and Board of Commissioners. Such advice and information do not supplant the peer review process but rather provide additional insight in reaching an informed judgment.

PROCEDURAL GUIDELINES

1. In order to maintain the strength and consistency of the process, ACEN staff provide information and advice (as appropriate) when assisting the Evaluation Review Panel in making a recommendation related to the accreditation status of a nursing program as well as the Board of Commissioners in making a decision regarding the accreditation status of a program. Particularly germane is historical information on similarly situated nursing programs as well as procedural and substantive advice on how the ACEN policies and Standards and Criteria have been interpreted and could be applied to a program's case, including possible action and follow-up. This information is presented orally during the Evaluation Review Panel and the Board of Commissioner's deliberations.
2. The ACEN staff role in the deliberations is an active role. The ACEN Chief Accreditation Officer and/or Directors provide information and advice, which may include evidence and evidence-based professional opinions on a nursing program's patterns, progress, and suggested action.
3. The ACEN staff's role in the process may not supplant the peer review and decision-making process.

Policy #26 History

Developed July 2015
Edited June 2023
Edited June 2025

POLICY #27 FEES AND EXPENSES

It is the obligation of every nursing program to pay all ACEN fees and expenses when due. Failure to pay ACEN fees and expenses when due shall be deemed a voluntary withdrawal from accreditation pursuant to **ACEN Policy #7 Voluntary Withdrawal from ACEN Accreditation**.

A billing statement for annual ACEN accreditation fees shall be issued annually to every nursing program, and fees are payable upon receipt.

A billing statement of fees and expenses incurred by ACEN in carrying out its accreditation functions shall be issued; fees are payable upon receipt.

A schedule of current fees and expenses is available at **https://www.acenursing.org/accreditation/schedule-of-fees** .

Policy #27 History

Developed March 2016
Edited June 2025

POLICY #28 LITIGATION

INSTITUTIONAL FINANCIAL OBLIGATIONS FOLLOWING LITIGATION

Any governing organization/nursing program that takes legal action against ACEN and withdraws its case or loses its case is responsible for assuming all costs incurred by ACEN while defending itself, including attorney's fees. These costs must be paid in full within 45 calendar days following the governing organization/nursing program's receipt of the ACEN invoice, unless other arrangements are approved by the Executive Committee acting on behalf of the Board of Commissioners.

CHOICE OF LAW, JURISDICTION, AND VENUE

Each governing organization/nursing program acknowledges that all agreements created by the ACEN granting eligibility for candidacy or granting any accreditation status shall be deemed to have been entered into in Fulton County, Georgia, and shall be interpreted in accordance with the laws of the State of Georgia. Further, each governing organization/nursing program agrees that jurisdiction and venue for any action which might arise from any agreement between the governing organization/nursing program and ACEN, regardless of which party shall initiate the action, shall be exclusively in the United States District Court for the Northern District of Georgia or the state courts of Fulton County, Georgia, whichever of these courts shall have proper subject matter jurisdiction.

Policy #28 History
Developed March 2016
Revised July 2020
Reviewed June 2025

POLICY #29 ADVERTISING AND RECRUITMENT OF STUDENTS

ADVERTISING, PUBLICATIONS, AND PROMOTIONAL LITERATURE

The governing organization/nursing program ensures in institutional and programmatic publications that:

1. The nursing program and institutional/programmatic services offered to facilitate student success are the primary emphasis of all advertisements, publications, promotional literature, and recruitment activities.
2. All statements and representations are clear, factually accurate, and current. Supporting information is kept on file and readily available for review.
3. The publications are easily accessible on the college and/or program website. Publications may be freely accessible in other formats (e.g., physical copies). All publications should accurately depict the current:
    a. Governing organization and nursing program purpose and goals.
    b. Admission requirements and procedures for all nursing students.
    c. Transfer of credit policies.
    d. Academic calendars.
    e. Tuition, fees, and other nursing program costs, including any fees associated with verification of student identity related to distance education.
    f. Refund of costs policy and procedures.
    g. Financial aid opportunities and requirements.
    h. Grading system and related policies.
    i. Curriculum for the nursing program, including all program options with required course sequence, the normal length of time required to complete the curriculum, and the frequency of which each course is offered.
    j. General education requirements.
    k. Completion requirements for the nursing program, including all program options.
    l. End-of-program student learning outcomes and program outcomes.
    m. Student conduct rules.
    n. Student grievance policy and procedures.
    o. Institutional/programmatic facilities and services readily available for educational use, including methods of delivery.
    p. Career opportunities.
    q. National and/or state legal requirements for eligibility for licensure or entry into the nursing profession.
    r. States in which the program meets initial licensure requirements. Clearly specify the states where the program's curriculum satisfies the educational requirements for licensure and/or certification.
    s. Student achievement data.
        i. The following student achievement data **must be published on the college and/or program website** and must be consistent with ACEN Accreditation Standard 5 Outcomes:
            1. Most recent first-time pass rate for the licensure and/or certification examination.
            2. Most recent on-time program completion rate of the nursing program.

ii. The following student achievement data **may be published on the college and/or program website** and if published, must be consistent with ACEN Accreditation Standard 5 Outcomes:

1. Ultimate licensure and/or certification pass rate.
2. Pass rate and/or program completion data from prior years.
3. Job placement rates indicating the percentage of graduates obtaining a job in a role for which they were prepared.
4. Additional student achievement data as the governing organization/nursing program considers appropriate.

All student achievement data reported/published for any purpose are expected to reflect an accurate, verifiable portrayal of a nursing program's performance, which is subject to review for integrity, accuracy, and completeness. The ACEN reserves the right to request that a governing organization/nursing program provide verification by an external source of a nursing program's student achievement data upon which the ACEN relies (in part) when making an accreditation decision. The governing organization/nursing program is responsible for any cost related to verification by external sources of a nursing program's student achievement data.

STUDENT RECRUITMENT FOR ADMISSIONS

1. Student recruitment is conducted by well-qualified admissions officers and trained volunteers whose credentials, purpose, and position or affiliation with the governing organization are clearly specified.
2. Independent contractors or agents used by the governing organization for recruiting purposes are governed by the same principles as employees of the governing organization.
3. Governing organizations follow federal guidelines regarding compensation for student recruitment and admission activities.
4. Governing organizations do not engage in the following practices:
   a. Assuring employment unless employment arrangements have been made and can be verified.
   b. Misrepresenting job placement and employment opportunities for graduates.
   c. Misrepresenting program costs.
   d. Disparaging comparisons of secondary or postsecondary institutions.
   e. Misrepresenting abilities required to complete intended program.
   f. Offering money or inducements other than educational services of the governing organization in exchange for student enrollment (except for awards of privately endowed restricted funds, grants or scholarships are to be offered only on the basis of specific criteria related to merit or financial need).

Policy #29 History

Developed March 2016
Revised October 2016
Edited March 2018
Edited December 2020
Edited June 2023
Revised June 2025

POLICY #30 AGREEMENT FOR EDUCATION-RELATED COMPONENT FROM AN EXTERNAL SOURCE

As governing organizations/nursing programs seek ways to provide a quality education to nursing students, the governing organization/nursing program may find that it is practical or efficient to engage an external source to develop and/or deliver a component(s) of a nursing program. The component(s) of the nursing program developed and/or delivered from an external source include(s) traditional, hybrid, and distance education instructional delivery methods.

An education-related component from an external source includes (but is not limited to):

1. Engaging another college/university to teach that institution's nursing and/or non-nursing component to the governing organization's students enrolled in its nursing program.

Example 1 College Z contracts College X to teach College X's general education courses to students enrolled in College Z's nursing program.
Example 2 College Z contracts College Y to teach College Y's laboratory component to students enrolled in College Z's nursing program.

2. Participating in a consortium to teach any nursing and/or non-nursing component that is required for the governing organization's nursing program.

Example 1 Multiple nursing programs share courses.
Example 2 Multiple nursing programs share faculty to teach nursing and/or non-nursing courses to students enrolled in their nursing programs.

3. Engaging another college/university to provide any nursing and/or non-nursing faculty to teach any nursing and/or non-nursing component for the governing organization's nursing program.

Example 1 College Z contracts College X for College X's faculty to teach College Z's general education courses to students enrolled in College Z's nursing program.
Example 2 College Z contracting with College Y for College Y's faculty to teach College Z's laboratory component to students enrolled in College Z's nursing program.

A governing organization/nursing program accredited by the ACEN is responsible for all activities carried out under its name. All Standards and Criteria, policies, and procedures apply to any agreement with an external source for an education-related component(s). The governing organization/nursing program should be especially mindful of **Policy #14 Reporting Substantive Changes** , **Policy #15 Distance Education**, **Policy #20 Complaints Against an Accredited Program**, and **Policy #25 Transfer of Credit**.

The following are required for a governing organization/nursing program entering into an agreement with an external source to provide an education-related component(s), whether the external source holds or does not hold institutional and/or programmatic accreditation:

1. The primary purpose of the component(s) is educational.
2. The governing organization/nursing program is responsible for the accuracy of all advertising, recruiting, and promotional materials.
3. The governing organization is responsible for ensuring that all legal requirements for federal and state student financial aid programs used by students are met.
4. The governing organization/nursing program is responsible for informing the external source that the agreement does not imply or extend ACEN accreditation to the external source.
5. Every component must be consistent with the governing organization's/nursing program's mission and objectives as they were at the time of the last evaluation conducted by ACEN.
6. Every education-related component must be consistent with the nursing program's published curriculum/program options, end-of-program student learning outcomes, and program outcomes.
7. If the education-related component involves a credit-bearing course(s)/content offered by the external source, then the value and level of credit must be determined by the governing organization/nursing program to be in accordance with the governing organization's/nursing program's established procedures and under the usual mechanism of review. Evidence that the established governing organization's policies and procedures were followed must be available.
8. The governing organization/nursing program follows all established shared governance policies and procedures for approval of education-related components. Evidence that the established governing organization's policies and procedures were followed must be available.

9. The governing organization/nursing program follows all ACEN policies and procedures for approval of education-related components. Evidence that the ACEN policies and procedures were followed must be available.
10. While the governing organization's personnel may or may not teach the education-related component(s), the nursing faculty and appropriate governing organization representatives must retain overall accountability and control of the integrity, rigor, and currency of the nursing and non-nursing education-related component(s).
11. The governing organization/nursing program must ensure ongoing collaboration between the nursing faculty, appropriate governing organization representatives, and the external source to safeguard the integrity, rigor, and currency of the nursing curriculum. Evidence of collaboration, including periodic and adequate review of work performed by the external source, must be available.
12. The governing organization/nursing program is ultimately responsible for all aspects of its nursing program, including (but not limited to):
    a. Students' successful achievement of end-of-program student learning outcomes and program outcomes.
    b. Admissions to the nursing program.
    c. Review and approval of all nursing and non-nursing education-related component(s).
    d. Review and approval of the appointment and/or selection of all nursing and non-nursing faculty, whether or not the faculty member is employed by the governing organization of the nursing program.
    e. Quality of resources and services (e.g., library/information, technical support, student support, IT infrastructure, etc.).
    f. Student and faculty access to resources and services (e.g., library/information, technical support, student support, IT infrastructure, etc.).
    g. All credits that appear on the governing organization's transcript.
    h. Ensuring the privacy of students and the security of students' records.

There must be a written agreement between the governing organization/nursing program and external source that is executed by duly designated officer(s) of the governing organization/nursing program and appropriate counterparts from the external source.

The agreement clearly establishes and defines:

1. The scope and nature of the work to be performed by each party.
2. A mechanism to account for the scope and nature of the work provided by each party.
3. The period of the agreement and the conditions under which any possible renewal, renegotiation, or termination could take place.
4. Protection for enrolled nursing students in the event that the agreement is terminated or renegotiated.
5. Appropriate avenue(s) for addressing perceived breaches of the agreement.
6. How appropriate representatives from both parties will periodically review the success of the agreement.
7. The compensation and other considerations for the education-related component

provided by both parties.

8. How nursing student and faculty support services and resources will be assured.
9. How nursing student and faculty access to support services and resources will be assured.
10. The procedure for a nursing student grievance regarding any aspect of the education-related component.
11. The governing organization's awarding of credit for the education-related component(s), if appropriate.
12. How outcomes assessment will be conducted on the education-related component(s), if appropriate. The agreement is:
    1. Submitted to federal and/or state agencies for approval when required.
    2. Submitted to the ACEN for approval when required as specified in **Policy #14 Reporting Substantive Changes**.
    3. Available on request to the ACEN and peer evaluators acting on its behalf.

Policy #30 History

Developed March 2016
Edited June 2025

POLICY #31 INTEGRITY

A governing organization and/or nursing program shall demonstrate honesty and integrity in all disclosures to the ACEN and its representatives, students, and the public. A governing organization/nursing program disclosing any information to the ACEN and its representatives, students, and the public shall:

1. Disclose all voluntary, required, or requested information in a timely manner.
2. Fully, accurately, and straightforwardly disclose all voluntary, required, or requested information, including outcomes data (whether complementary or otherwise).
3. Comply with all ACEN requirements, policies, guidelines, decisions, and requests.

The ACEN accredits selected types of governing organizations and all types of nursing programs, not individuals (see **Policy #3 Eligibility for Initial and Continuing Accreditation**). Therefore, any individual who reports to the ACEN on behalf of a governing organization/nursing program, either by virtue of her/his office or as delegated by the chief executive officer of the governing organization, obligates the governing organization and nursing program in all matters regarding integrity. Additionally, in order to comply with the requirements for honesty and integrity, appropriate representatives (e.g., nurse administrator, chief executive officer) of the governing organization are obligated to review and ensure the honesty and integrity of information disclosed.

With due regard for confidentiality, a governing organization/nursing program applying for candidacy or seeking initial accreditation or continuing accreditation shall provide the ACEN and its representatives with unrestricted access to all aspects of its operations, including (but not limited to) information regarding the governing organization's/nursing program's affairs and reports of other accrediting, licensing, and auditing agencies.

If the ACEN has reason to believe that a governing organization/nursing program has breached this policy, the ACEN will conduct an investigation and issue a report of its findings. The investigation will utilize an appropriate process. The governing organization/nursing program will have the opportunity to respond to any alleged breach prior to the ACEN imposing a sanction.

Presenting false, distorted, or incomplete information of any type, either through intent or through failure to exercise care and diligence, is considered a breach of this policy. Failure to respond appropriately to the ACEN decisions and requests in a timely manner or to make complete, accurate, and honest disclosure is sufficient reason in and of itself for the ACEN to impose a sanction.

Verified breaches of this policy may adversely affect the governing organization's/nursing program's accreditation status with the ACEN. Depending on the seriousness of the breach, sanctions by the ACEN Board of Commissioners may result in:

- a letter of censure,
- accreditation status change to conditions or warning,
- denial of continuing accreditation and removal from the listing of accredited nursing programs, or

- denial of initial accreditation.

Only decisions made by the ACEN Board of Commissioners to deny continuing accreditation and remove a governing organization/nursing program from the listing of accredited programs or to deny initial accreditation are appealable actions.

Policy #31 History

Developed October 2016
Edited June 2022
Edited June 2025

POLICY #32 OBSERVER ON SITE VISIT TEAM

A nursing program beginning its initial or continuing accreditation review process may designate one person who is allowed to accompany a site visit team to observe and learn from site visit team activities and from the review process experience of persons at the host nursing program.

1. A site visit team may have only one observer, and that observer may not have any conflict of interest as defined by ACEN **Policy #1 Code of Conduct and Conflict of Interest**.
2. All host nursing programs must agree to have an observer accompany the site visit team.
3. The ACEN cannot guarantee that all requests can be honored due to the variability in the number of scheduled site visits.
4. Requests to have an observer accompany the site visit team will be filled on a first-come, first-served basis.
5. Requests to be an Observer on a Site Visit Team can be made through the ACEN website.

CONDITIONS AND POLICIES

1. All observers are under the same obligation as site visit team members regarding the maintaining confidentiality of the governing organization/nursing program information, materials, and committee discussions and proceedings.
    a. See **Policy #1 Code of Conduct and Conflict of Interest**.
2. Neither the ACEN nor the host nursing program is responsible for any expenses (e.g., travel, lodging, meal, etc.) incurred by the observer in connection with observing the site visit team process. All expenses must be borne by the observer and/or the observer's governing organization/nursing program.
3. The Observer will receive access to the ACEN Repository to review program materials in preparation for the visit.
4. The Observer will be invited to participate with the team in all pre-site visit meetings.
5. The Observer is expected to make her/his own travel arrangements and inform the host nursing program and site visit team chair regarding those arrangements. It is customary for the host nursing program to arrange to meet committee members at the pre-arranged airport, train station, or bus station, and transport site visit team members to the place of lodging. It will normally be possible to include observers in these arrangements.
6. Reservations for hotel rooms are customarily made by the host nursing program. The ACEN staff in communication with the host nursing program about the Observer will request that the host nursing program make a reservation for the observer as well; however, all costs are the responsibility of the Observer. If the Observer elects to make other arrangements for housing, the ACEN and the host nursing program must be informed of that fact. It is recommended that the Observer stay at the same place of lodging as the site visit team to facilitate prompt attendance at all committee meetings, make most effective use of local travel arrangements, and maximize interaction with the site visit team members.
7. The Observer is expected to arrive in time for the organizational meeting on the first day of the site visit and remain for the duration of the visit as well as be punctual for all committee activities scheduled by the site visit team chair.
8. Observers are not assigned any responsibility for data gathering, evaluation, or writing of the Site Visit Report. The extent of verbal participation by the Observer in executive sessions of the site visit team is at the discretion of the site visit team chair.
9. Site visit team members have a full agenda and limited time in which to carry out their responsibilities. It is anticipated that there will be numerous opportunities for the Observer to

interact with site visit team members as they fulfill their responsibilities; however, the Observer must be flexible.

10. If the Observer arranges to accompany a site visit team member on an interview, the Observer should behave in a discreet manner so as not to interfere in any way with the site visit team member's ability to meet his/her responsibilities as a peer evaluator.

Policy #32 History

Developed October 2016
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Edited April 2025

POLICY #33 FINANCIAL RESPONSIBILITY (Programs Seeking Initial Accreditation and ACEN TITLE IV PROGRAMS ONLY)

THIS POLICY APPLIES ONLY TO GOVERNING ORGANIZATIONS/NURSING PROGRAMS SEEKING INITIAL ACCREDITATION AND/OR FOR WHICH THE ACEN SERVES IN A TITLE IV FINANCIAL AID GATEKEEPER CAPACITY.

FINANCIAL RESOURCES

The governing organization/nursing program is responsible for ensuring that it has and maintains the fiscal resources and financial stability necessary to provide a quality education to its students. This responsibility includes the appropriate management of Federal funds such as but not limited to Title IV programs, Health Resources and Services Administration programs, and Perkins programs. The governing organization /nursing program shall provide evidence of compliance with the ACEN guidelines as outlined below. Where a governing organization/nursing program is a component of a larger system, information and evidence shall be for the organizational unit having direct responsibility and control over the nursing program and not the larger system.

INITIAL ACCREDITATION ADMINISTRATIVE CAPACITY REQUIREMENTS (ALL PROGRAMS)

Properly credentialed and qualified administrative leadership and managerial personnel contribute to maintaining the fiscal resources and financial stability that are essential to the achievement of the current end-of-program student learning and program outcomes of the nursing program. The governing organization/nursing program shall provide current evidence that personnel holding key leadership positions responsible for financial management, including financial aid, are qualified to carry out their responsibilities.

The governing organization/nursing program shall provide the following for the individuals directly employed by the governing organization/nursing program and/or third-party service provider contracted by the governing organization/nursing program to conduct financial aid services:

1. Current organizational charts of the financial management and financial aid units for the governing organization/nursing program and/or third-party service provider that identify the individuals appointed to administrative and managerial leadership positions.
2. Current résumés and years of service with the governing organization/nursing program and/or third-party service provider for each of these individuals.
3. Explanation of any non-traditional qualifications used by the governing organization/nursing program and/or third-party service provider to select and appoint these individuals, if relevant.
4. Overview of the current responsibilities and services provided by third-party service providers, if relevant (provide a copy of third-party service contract[s]).

PLANNING AND BUDGET DEVELOPMENT REQUIREMENTS FOR INITIAL ACCREDITATION (ALL PROGRAMS)

The effective allocation and use of resources (both financial and human) must be based on a sound nursing program planning process to accomplish the mission of a quality nursing program. The governing organization's/nursing program's planning process as well as the budget development process should be inclusive.

The governing organization/nursing program shall provide current evidence that its operational and capital budget development process is based on sound nursing program planning, and that the budget is properly approved. The required evidence from the governing organization/nursing program shall include but not be limited to the following:

1. Overview of the governing organization's/nursing program's current planning process, including evidence of objectives, tasks, intended outcomes, and use of results.
2. Explanation of how planning for the nursing program currently integrates with the governing organization's/nursing program's budget development process.
3. Overview of the governing organization's/nursing program's current budget development process.
4. Explanation of the governing organization's/nursing program's current process for prioritizing budget requests in the context of the plans for the nursing program and available funds.
5. A copy of the governing organization's/nursing program's current budget and documentation of its approval.

FUNDING SOURCES AND FINANCIAL STABILITY REQUIREMENTS FOR INITIAL ACCREDITATION (ALL PROGRAMS)

Financial stability is predicated on a steady stream of revenue that is properly managed with a focus on sustaining the governing organization/nursing program's long-term ability to accomplish its current mission.

The governing organization/nursing program shall provide evidence of sufficient resources and financial stability to include (but not be limited to) the following:

1. Identification of all sources of operating revenues for the three most recent fiscal years and a corresponding three-year history of the amount of funding these sources generated for the governing organization/nursing program.
2. Explanation of any fluctuations in past revenues and expected future revenues for the governing organization/nursing program.
3. Three-year budget history, including end-of-year results (budgeted vs. actual) for the governing organization/nursing program.
4. Identification of any condition or event specific to the governing organization/nursing program that could affect the current or future ability to continue ongoing nursing program operations.
5. Specific measures implemented and/or being implemented to ensure long-term financial stability of the governing organization/nursing program.

FINANCIAL MANAGEMENT PROCEDURES AND INTERNAL CONTROLS REQUIREMENTS FOR INITIAL ACCREDITATION (ALL PROGRAMS)

Long-term financial stability and fulfillment of fiduciary responsibilities require that an organization have the proper financial management and reporting systems in place. Financial management includes having sufficient staff to ensure the separation of duties to achieve a proper level of internal controls, a system of record keeping and reporting supported by policies and procedures, and a process of regular review by senior management and the governing board.

The governing organization/nursing program shall provide evidence of a system of financial management and internal controls to include but not be limited to the following:

1. Description of the governing organization/nursing program's current system of internal controls, including the separation of duties related to the awarding and disbursement of financial aid funds.
2. Copies of current relevant policies and procedures.
3. Description of the governing organization's/nursing program's current Enterprise Resource Planning system for recording and reporting financial activity.
4. Current examples and evidence of management reporting, analysis, and review.

AUDITS AND FINANCIAL STATEMENT REQUIREMENTS FOR INITIAL ACCREDITATION (ALL PROGRAMS)

Audits performed in accordance with Generally Accepted Auditing Standards/Generally Accepted Government Auditing Standards provide for the assessment of financial stability and a review of internal controls. Regular external audits conducted by an independent certified public accountant or appropriate governmental auditing agency are an essential component of financial management.

The governing organization/nursing program shall provide the following:

1. Audited financial statements for the **governing organization**, including management letters for the three most recent fiscal years available prepared in accordance with Generally Accepted Accounting Principles by an independent certified public accountant or appropriate governmental auditing agency. If the governing organization/nursing program operates **branch campuses**, audited financial statements shall be submitted for each branch campus seeking initial accreditation.
2. The governing organization's/nursing program's response to and resolution of audit findings in the audits provided, if relevant.

FEDERAL REQUIREMENTS FOR INITIAL ACCREDITATION (ACEN TITLE IV PROGRAMS ONLY)

A governing organization/nursing program offering **Title IV** financial aid for which the ACEN serves in a gatekeeper capacity shall provide evidence of authorization and compliance with program responsibilities; including when a third-party service provider is used, evidence of authorization and compliance with program responsibilities for the third-party service provider. The ACEN requires that the governing organization /nursing program submit current evidence of its current Program Participation Agreement (PPA) and all relevant correspondence from and to the

U.S. Department of Education; including when a third-party service provider is used, all relevant correspondence from and to the U.S. Department of Education and a third-party service provider related to the governing organization/nursing program. Additionally, the governing organization/nursing program and/or third-party service provider shall produce the following:

1. Federal award audits in conformance with Title 2 U.S. Code of Federal Regulations, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards for the past three fiscal years, including management letters prepared by an independent certified public accountant or appropriate governmental auditing agency for the governing organization/nursing program and
   /or a third-party service provider, as it relates to those services provided to the governing organization/nursing program.
2. Governing organization's/nursing program's and/or third-party service provider's response to and resolution of audit findings in the audits provided, if relevant.
3. Non-public governing organizations: Current composite score calculation based on the prior fiscal year's audited financial statements in accordance with the **U.S. Department of Education Federal Student Aid Handbook**, using the financial ratios worksheet available from the Information for Financial Aid Professionals (IFAP) Quality Assurance Program.
   a. Where the composite score is less than 1.5, provide:
      i. Evidence of compliance with any cash monitoring requirements that have been placed on the governing organization/nursing program.
      ii. Evidence of a posted letter of credit, if applicable and so required.
      iii. Copies of all correspondence between the governing organization/nursing program and the U.S. Department of Education since the nursing program's last submitted Annual Report to the ACEN when the program is already accredited by the ACEN.
      iv. See **Policy #14 Reporting Substantive Changes**.
4. Attestation by the governing organization/nursing program that no financial actions have been taken to manipulate the composite score formula results.
5. Final loan default rates for the past three years for the governing organization/nursing program. If the final rate for the third year has not been issued, it is acceptable to provide the preliminary default rate.
6. Current evidence of default management plans and procedures for the governing organization/nursing program and/or third-party service provider.
7. Current evidence of cash monitoring and other participation requirements, if applicable, for the governing organization/nursing program and/or the third-party service provider.

REQUIRED INFORMATION AT THE TIME OF SUBMITTING THE ACEN ANNUAL REPORT (TITLE IV PROGRAMS ONLY)

The governing organization and/or nursing program shall report at the time of the ACEN Annual Report the sufficiency of its financial resources and its compliance with **Title IV** requirements in accordance with **Policy #24 Assessment of Adequacy of Standards and Criteria, ACEN Process, and Practices**.

The governing organization and/or nursing program may be asked to provide any or all of the following information annually at the time the nursing program submits its Annual Report to the ACEN (required annual documents noted below):

1. REQUIRED: Identification of all the governing organization's and/or nursing program's operating revenue sources for the most recent fiscal year and an explanation for any changes from the previous year (e.g., changes in external funding, tuition increases, changes in enrollments).
2. REQUIRED: A copy of the governing organization's and/or nursing program's approved operating budget for the most recent fiscal year and an explanation of any substantive variances between end-of-year budget and actual expenditures.
3. A copy of the governing organization's and/or nursing program's audited financial statements for the reporting year or most recent audited financial statements available and an explanation of actions taken to resolve audit findings in the audit provided, if relevant.
4. A copy of the governing organization's and/or nursing program's and/or third-party service provider's federal award audit for the most recent fiscal year and an explanation of actions taken to resolve audit findings, if relevant.
5. A copy of the U.S. Department of Education's calculated preliminary default rate (final if available) for the governing organization/nursing program received during the most recent fiscal year.
6. REQUIRED: A copy of the most recent Department of Education's action letter.
7. REQUIRED: A copy of the current Program Participation Agreement (PPA).
8. REQUIRED: A description of any policy changes in budgetary processes or control during the most recent fiscal year.
9. Non-public governing organizations: Current composite score calculation based on the reporting fiscal year's audited financial statements in accordance with **U.S. Department of Education Federal Student Aid Handbook**, using the financial ratios worksheet available from the Information for Financial Aid Professionals (IFAP) Quality Assurance Program.
    a. Where the composite score is less than 1.5, provide:
        i. Evidence of compliance with any cash monitoring requirements that have been placed on the governing organization/nursing program.
        ii. Evidence of a posted letter of credit if applicable and so required.
        iii. Copies of all correspondence between the governing organization/nursing program and the U.S. Department of Education since the nursing program's last submitted the Annual Report to the ACEN.
        See **Policy #14 Reporting Substantive Changes.**
10. Attestation by the governing organization and/or nursing program that no financial actions have been taken to manipulate the composite score formula results.

INTERMITTENT REPORTING: ACTIONS AFFECTING THE GOVERNING ORGANIZATION/NURSING PROGRAM (ALL PROGRAMS)

The governing organization/nursing program shall immediately disclose to the ACEN any actions or recommendations of other accrediting agencies related to or involving administrative capacity, planning and budgeting, funding resources or financial stability, financial management or internal controls, audits, or federal requirements. The nurse

administrator shall provide a copy of the other accrediting agency's report and an explanation for any recommendations and plans to correct the situation. The accreditation status of the nursing program may be changed. See **Policy #14 Reporting Substantive Changes**, **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation**, and **Policy #19 Focused Site Visit**.

If a governing organization/nursing program has a change in its financial status impacting its financial stability, the nurse administrator of the nursing program shall immediately submit to the ACEN a report explaining the reasons for the change and plans to correct the situation. The report shall identify all the governing organization's/nursing program's current revenue sources, including those that have changed with an explanation for the changes (e.g., changes in external funding, tuition increases, changes in enrollments, etc.). The ACEN Board of Commissioners will determine appropriate follow-up actions after review of the submitted materials. The accreditation status of the nursing program may be changed. See **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation** and **Policy #19 Focused Site Visit**.

If a governing organization's/nursing program's and/or third-party service provider's status as a grantor and/or administrator of **Title IV** financial aid programs changes at any point, the nurse administrator of the nursing program shall immediately submit to the ACEN a report explaining the reasons for the change and plans to correct the situation. The report shall include copies of all communications from and to the U.S. Department of Education that relate to the change in status. The ACEN Board of Commissioners will determine appropriate follow-up actions after review of the submitted materials. The accreditation status of the nursing program may be changed. See **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation** and **Policy #19 Focused Site Visit**.

The governing organization/nursing program shall immediately disclose to the ACEN any other actions or events related to financial resources not previously addressed in this policy that have (or will) impact the ability of the governing organization/nursing program to accomplish its mission of a quality nursing program. The ACEN Board of Commissioners will determine appropriate follow-up actions after review of the submitted materials. The accreditation status of the nursing program may be changed. See **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation** and **Policy #19 Focused Site Visit**.

Policy #33 History

Developed October 2017
Edited June 2023
Revised June 2025

POLICY #34 CANDIDACY FOR A GOVERNING ORGANIZATION/NURSING PROGRAM SEEKING INITIAL ACCREDITATION

A governing organization/nursing program seeking initial accreditation with the ACEN must apply for candidacy. The governing organization/nursing program seeking initial accreditation must:

1. Demonstrate that the governing organization and nursing program are eligible for ACEN accreditation.
   a. See **Policy #3 Eligibility for Initial and Continuing Accreditation**.
2. After the eligibility of the governing organization and nursing program have been established by ACEN staff, pay the required candidacy fee(s).
   a. International nursing programs are required to pay the fee as a component of the international application process. See **ACEN Accreditation Manual Supplement for International Programs**.
3. Demonstrate that the nursing program has the potential to achieve initial accreditation based on requirements for the Candidacy Presentation and within the timeframe established by the ACEN.
4. A governing organization/nursing program in the appeals process or arbitration process with the ACEN is not eligible for consideration for candidacy.

APPROVAL, DEFERRAL, OR DISAPPROVAL OF CANDIDACY

Based on the requirements established, the ACEN may approve a nursing program for candidacy, defer a nursing program for candidacy, or disapprove a nursing program for candidacy.

A program may be approved for candidacy to pursue initial accreditation for a maximum of four site visit cycles or two calendar years, whichever is longer. Once approved for candidacy, a nursing program must host an initial accreditation site visit prior to the expiration of candidacy.

Approval of Candidacy

Approval of candidacy is granted when in the professional judgment of the ACEN staff, the nursing program either:

1. Makes a Candidacy Presentation demonstrating that the nursing program is currently compliant with the presentation's requirements and based on this merit, the nursing program has the potential to achieve initial accreditation.
2. Makes a Candidacy Presentation demonstrating that the nursing program has the potential to be compliant with the presentation's requirements within two calendar years of the date of notification and based this merit, has the potential to achieve initial accreditation.

Being approved for candidacy informs the governing organization/nursing program and the public that the nursing program demonstrated the potential to achieve initial accreditation

based upon the ACEN staff's professional judgement regarding requirements for the Candidacy Presentation at the time the nursing program was approved for candidacy. Being approved for candidacy does not guarantee that the ACEN Board of Commissioners will determine that the nursing program is compliant with all Standards and Criteria at the time the ACEN Board of Commissioners will review the nursing program for initial accreditation. See **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation**.

Deferral of Candidacy

Deferral of candidacy is granted when in the professional judgment of the ACEN staff, the nursing program submits an inconsistent Candidacy Presentation failing to demonstrate that the nursing program is currently compliant or has the potential to be compliant with the presentation's requirements. Deferral results in the opportunity to resubmit a Candidacy presentation to determine whether the nursing program may have the potential to demonstrate compliance with the requirements for the Candidacy Presentation.

Being deferred for candidacy does not guarantee that the nursing program will be approved for candidacy if the program resubmits the Candidacy Presentation.

Deferral of candidacy is not an appealable action.

If deferred, the nursing program has up to one calendar year from the date of notification to resubmit the Candidacy Presentation for reconsideration without restarting the entire candidacy process and paying related fee(s) again. Upon resubmission of the Candidacy Presentation, the nursing program must be approved for candidacy or disapproved for candidacy.

Disapproval of Candidacy

Disapproval of candidacy is rendered when in the professional judgment of the ACEN staff, the nursing program either:

1. Does not make a Candidacy Presentation demonstrating that the nursing program is currently compliant with the presentation's requirements and based upon the submitted presentation, does not have the potential to achieve initial accreditation.
2. Does not make a Candidacy Presentation demonstrating that the nursing program has the potential to be compliant with the presentation's requirements within four site visit cycles or two calendar years of the date of notification and based upon the presentation, does not have the potential to achieve initial accreditation.

Disapproval of candidacy is not an appealable action.

If disapproved, to seek initial accreditation with ACEN, the nursing program is required to restart the candidacy process and pay related fee(s) again. The nursing program may restart the entire candidacy process at any time after being disapproved for candidacy.

Failure of an Approved Nursing Program to Meet Any Timeline

Failure of an approved nursing program to meet any timeline established by the ACEN will result in a program losing its approval for candidacy. If a nursing program fails to meet any required timeline prior to hosting an initial accreditation site visit, the nursing program must restart the entire candidacy process, pay related fee(s) again, and submit a new Candidacy Presentation, which may result in approval, deferral, or disapproval. Submission of a new

Candidacy Eligibility Application and Candidacy Presentation reinitiates the candidacy process for the program, and the effective date of initial accreditation (if achieved) will be based on the new date that the program is approved to pursue initial accreditation.

The candidacy process can be restarted at any time after a nursing program loses its approval for candidacy status or voluntarily withdraws from the candidacy process.

Obligations of a Governing Organization and Nursing Program Approved for Candidacy

Each governing organization/nursing program making a Candidacy Presentation or approved for candidacy agrees to certain requirements concerning financial obligation, choice of law, jurisdiction, and venue, and disclosure of information. As a condition of reviewing any Candidacy Presentation or of being approved for candidacy, each governing organization/nursing program agrees to the following:

The governing organization/nursing program agrees to abide by **Policy #28 Litigation, Policy #31 Integrity**, **Policy #37 Third-Party Discovery Request**, and **Policy #38 Arbitration**.

1. The governing organization/nursing program agrees to abide by **Policy #33 Financial Responsibility** when requesting that the ACEN is the Title IV gatekeeper for the governing organization.
2. It is the obligation of every governing organization/nursing program seeking candidacy to pay all fees and expenses when due. Failure to pay all fees and expenses when due shall be deemed a voluntary withdrawal from the candidacy. A schedule of current fees and expenses is available on the **ACEN Accreditation Fees** webpage.
3. The governing organization/nursing program must notify the ACEN in writing of all unexpected changes that occur within 30 calendar days of the change or all expected changes that are planned to occur no less than 120 calendar days prior to the change occurring. Failure to report an unexpected or expected change may delay or jeopardize a nursing program from being approved for candidacy, hosting an initial accreditation site visit, or being granted initial accreditation by the ACEN Board of Commissioners.

    a. Changes requiring notification include but are not limited to:
        i. Change in the nurse administrator.
        ii. Relocation of the nursing program.
        iii. Change in the governing organization's and/or nursing program's status with a state regulatory agency (e.g., the state education department or board of nursing) or for international programs a change in the approval status with any regulatory agency that oversees nursing in the country.
        iv. Change in the status with the governing organization's institutional accrediting agency.
        v. Change in the governing organization's institutional accrediting agency.
        vi. Change in the nursing program's curriculum affecting more than 25% of the nursing courses or credits.
        vii. Addition and/or deletion of a nursing program option (e.g., adding a prelicensure program option).
        viii. Addition and/or deletion of an off-campus instructional site or branch campus where any portion of the nursing courses is offered.
        ix. Implementation of 50% or more distance education for the nursing program.

b. The written notification must address the requirements for the Candidacy Presentation related to the change (e.g., for a change in the curriculum and/or new program option, all the required criteria in the Candidacy Presentation for Standard 4 Curriculum). Written notification is submitted through the Substantive Change Portal using the applicable Candidacy Substantive Change template,
c. If the ACEN Board of Commissioners grants initial accreditation but determines that there is an unreported change, the ACEN Board of Commissioners may decide to exclude the unreported change in its initial accreditation decision of the nursing program. If the ACEN Board of Commissioners excluded the unreported change in its initial accreditation decision, then the nursing program is required to submit the unreported change through the ACEN substantive change policy, undergo the subsequent review process, and is obligated for any related expense(s) that results from the substantive change process.

See **Policy #14 Reporting Substantive Changes**.

4. When a governing organization and/or nursing education unit makes a disclosure regarding the ACEN candidacy status of a nursing program approved for candidacy, it must accurately execute 5a and 5b below:
   a. list each program (e.g., clinical doctorate, DNP specialist certificate, master's, post-master's certificate, baccalaureate, associate, diploma, and/or practical).
   b. identify each nursing program's candidacy status with ACEN.
   c. The governing organization/nursing program must disclose the following information as a single disclosure to all current and prospective students within seven business days of receipt of the candidacy approval letter from the ACEN. The single disclosure must be exactly as illustrated below:

> *Effective [insert date of ACEN notification letter], the [program type*] nursing program at [insert name of governing organization this is in accordance with ACEN records] [at the [insert name of campus/location(s) that is in accordance with ACEN records, if applicable] located in [city, state that is in accordance with ACEN records] is a candidate for initial accreditation by the Accreditation Commission for Education in Nursing. This candidacy status expires on [insert expiration date in ACEN notification letter].*
>
> *Accreditation Commission for Education in Nursing (ACEN)*
> *3390 Peachtree Road NE, Suite 1400 Atlanta, GA 30326*
> *(404) 975-5000*

View the public information disclosed by the ACEN regarding this candidate program **on the ACEN's website.**

*Type of program: practical, diploma, associate, baccalaureate, master's, master's/post-master's certificate, post-master's certificate, clinical doctorate, clinical doctorate/DNP clinical doctorate specialist certificate, or DNP clinical doctorate specialist certificate.

   d. Upon granting initial accreditation by the ACEN Board of Commissioners, the effective date of initial accreditation is the date on which the nursing program was

approved by the ACEN as a candidate program that concluded in the ACEN Board of Commissioners granting initial accreditation.

5. If a candidate nursing program voluntarily withdraws from candidacy, the disclosure of candidate status information must be deleted within one calendar day of notifying the ACEN of the withdrawal.
6. If the candidate nursing program is granted initial accreditation, the governing organization/nursing program must follow **Policy #9 Disclosure of Information About an Accredited Program**.
7. If a candidate nursing program is denied initial accreditation and the program appeals the Board of Commissioners' decision, the governing organization/nursing program must disclose the following information as a single disclosure to all current and prospective students within one business day of initiating the appeal in accordance with **Policy #10 Appeal Process and Submission of New Financial Information Subsequent to Adverse Action**. The single disclosure must be exactly as illustrated below:

> *The most recent accreditation decision made by the ACEN Board of Commissioners for the [insert type of program*] nursing program is denial of initial accreditation, which [insert name of governing organization] is appealing in accordance with* **ACEN Policy #10 Appeal Process and Submission and Review of New Financial Information Subsequent to Adverse Action**. *The [insert type of program*] nursing program [at the [insert name of campus/location(s) that is in accordance with ACEN records, if applicable] will remain a candidate program pending the outcome of the appeal process.*
>
> *Accreditation Commission*
> *for Education in Nursing*
> *(ACEN) 3390 Peachtree*
> *Road NE, Suite 1400*
> *Atlanta, GA 30326*
>
> *(404) 975-5000*

View the public information disclosed by the ACEN regarding this program on the **ACEN website.**

*Type of program: practical, diploma, associate, baccalaureate, master's, master's/post-master's certificate, post-master's certificate, clinical doctorate, clinical doctorate/DNP clinical doctorate specialist certificate, or DNP clinical doctorate specialist certificate.

a. Based on the outcome of the appeal process, the disclosure of candidacy/accreditation status information must be updated within one business day of the effective date of the accreditation decision becoming final. See the *Final Accreditation Decision* section in **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation**.

8. If a candidate nursing program is denied initial accreditation and the program pursues arbitration in accordance with related to the Board of Commissioners' decision, the governing organization/nursing program must disclose the following information as a

single disclosure to all current and prospective students within one business day of initiating the arbitration process. The single disclosure must be exactly as illustrated below:

> *The most recent accreditation decision made by the ACEN Board of Commissioners for the [insert type of program*] nursing program is denial of initial accreditation, for which [insert name of governing organization] is pursuing arbitration in accordance with ACEN* **Policy #38 Arbitration***. The [insert type of program*] nursing program [at the [insert name of campus/location(s) that is in accordance with ACEN records, if applicable] will remain a candidate program pending the outcome of the arbitration process.*
>
> *Accreditation Commission*
> *for Education in Nursing*
> *(ACEN) 3390 Peachtree*
> *Road NE, Suite 1400*
> *Atlanta, GA 30326*
> *(404) 975-5000*

View the public information disclosed by the ACEN regarding this program **on the ACEN website.**

*Type of program: practical, diploma, associate, baccalaureate, master's, master's/post-master's certificate, post-master's certificate, clinical doctorate, clinical doctorate/DNP clinical doctorate specialist certificate, or DNP clinical doctorate specialist certificate.

a. Based on the outcome of the arbitration process, the disclosure of candidacy/accreditation status information must be updated within one business day of the effective date of the accreditation decision becoming final. See the *Final Accreditation Decision* section in **Policy #4 Types of Commission Actions for Initial and Continuing Accreditation**.

9. If the nursing program is denied initial accreditation and does not appeal the Board of Commissioners' decision, the governing organization /nursing program must disclose to all current and prospective students within seven business days of receipt of the decision letter from the ACEN that the Board of Commissioners denied the nursing program initial accreditation.
10. If the governing organization and/or nursing education unit publishes incorrect or misleading information about the candidacy status of a nursing program or any action by the ACEN relative to initial accreditation of a nursing program, the governing organization and/or nursing education unit must immediately provide public correction via a news release or through other media. If a governing organization and/or nursing education unit makes public the contents from a Candidacy Review, Site Visit Report, Summary of Deliberations of the Evaluation Review Panel, or Board of Commissioners decision letter, it must provide full sentences and context. Characterizing, quoting, and/or providing excerpts from a Candidacy Review, Site Visit Report, Summary of Deliberations of the Evaluation Review Panel, or Board of Commissioner decision letters must also be accompanied by a note stating that a copy of the complete document(s) can be obtained from the nursing education unit. Should

the statements be misinterpreted, the program must correct this misinterpretation through a clarifying release to the same audience that received the information.

If it is determined that a governing organization and/or nursing education unit is in violation of this policy, the ACEN Chief Executive Officer will inform the governing organization and/or nursing education unit through a formal letter. If the violation is not corrected immediately, the Chief Executive Officer shall report the matter to the ACEN Board of Commissioners for appropriate action.

Policy #34 History

Approved November 2018
Revised July 2020
Revised May 2021
Edited September 2022
Edited June 2023
Revised June 2025

POLICY #35 TRADEMARKS

Purpose

The Accreditation Commission for Education in Nursing (ACEN) supports the use of its trademarks, service marks, and the ACEN name when used in an appropriate manner. This policy describes the appropriate and permissible use of the ACEN Trademarks by ACEN-accredited program. Candidate programs are not allowed to use the ACEN Trademarks.

ACEN Trademarks and Service Marks

The ACEN requires that all trademarks, service marks, and the ACEN name are used properly. The ACEN maintains a portfolio of trademarks and service marks, which take various forms and include (but are not limited to): trade dress, type style, letters, words, logos, designs, images, slogans, colors, product shapes, product packaging, sound, look, design, and overall commercial impression. The ACEN trademarks and service marks that may be used by an entity are accessible through this **link**. This list may be updated as other trademarks and service marks are created or registered. All other ACEN trademarks and service marks not available at this link may not be used by any entity other than the ACEN.

The ACEN acknowledges that the use of a trademark or service mark or the ACEN name may be necessary and encourages the appropriate use of an ACEN trademark, service mark, or the ACEN name. All use must be accurate and descriptive in nature and comply with this policy. Any use of an ACEN trademark, service mark, or the ACEN name must comply with the following:

1. A reference to any ACEN trademark, service mark, or the ACEN name must be clearly identified, truthful, accurate, not misleading, and used for which the ACEN trademark, service mark, or the ACEN name was originally intended by the ACEN.
2. The use of any ACEN trademark, service mark, or the ACEN name must maintain the integrity of the ACEN trademark, service mark, or the ACEN name.
   a. Any trademark, service mark, or the ACEN name must be used as an adjective with a noun or as a noun that properly and accurately identifies the ACEN product, service, program, material, or technology to which a user is referencing.
   b. Always use the proper spelling for any ACEN trademark, service mark, or the ACEN name.
   c. Always use any ACEN trademark, service mark, or the ACEN name in the singular form; do not use in the plural or possessive form.
3. The use of any ACEN trademark, service mark, or the ACEN name must be applied correctly.
   a. Always use the registered trademark and service mark symbol "®" when referring to an ACEN registered trademark and a service mark (e.g., _®).
   b. Always use the unregistered trademark and service mark symbol "™" when referring to an ACEN unregistered trademark and service mark.
   c. Use the proper symbol ("®" or "™") with each ACEN trademark, service mark, and apply the proper symbol consistently in every copy of communication, document, packaging, or other material in which an ACEN trademark, a service mark, or the ACEN name appears, regardless of the medium.
4. While another entity's mark can be used in context with an ACEN trademark, a service mark, or the ACEN name to indicate a relationship between the ACEN and the other entity, the ACEN trademark, service mark, or the ACEN name must remain distinct. A reference to an ACEN trademark, service mark, or the ACEN name must be clearly, visually distinguishable and separate from any product, service, program, material, or technology, as well as any other logos, trademarks, or service trademarks.

Certain activities may constitute infringement or dilution of an ACEN trademark, a service mark, or the ACEN name and are not permitted. Prohibited and unauthorized use of an ACEN trademark, a service mark, or the ACEN name include but are not limited to the following:

1. Do not use an ACEN trademark, a service mark, or the ACEN name in a manner that is likely to dilute, defame, disparage, or harm the reputation of the ACEN.
2. Do not use an ACEN trademark, a service mark, or the ACEN name in a manner that is likely to cause confusion about the ACEN, the ACEN mission, purpose, or goals, or ACEN accreditation.
3. Do not use any designation that is confusingly similar to the ACEN, an ACEN trademark, a service mark, or the ACEN name.
4. Do not use an ACEN trademark, a service mark, or the ACEN name in any way not intended by the ACEN.
5. Do not use an ACEN trademark, a service mark, or the ACEN name in a manner that is likely to give the impression or otherwise imply an affiliation or association with another entity or the entity's product, service, program, material, or technology.
6. Do not alter, adapt, modify, animate, or morph an ACEN trademark, a service mark, or the ACEN name. Examples include but are not limited to the following:
   a. abbreviating or shortening any ACEN trademark or service mark.
   b. combining or hyphenating any ACEN trademark or service mark with another prefix or word.
   c. using a slash mark with any ACEN trademark or service mark.
7. Do not copy or imitate an ACEN trade dress, type style, letters, words, logos, designs, images, slogans, colors, product shapes, product packaging, sound, product packaging or the look, design, or overall commercial impression of an ACEN website, blog, or other materials.
8. Do not register or use any domain name that incorporates an ACEN trademark, a service mark, or the ACEN name.
9. Do not register or seek to register an ACEN trademark, a service mark, or the ACEN name or any restricted trademark, service mark, or name that is confusingly similar to an ACEN trademark, a service mark, or the ACEN name.

How to Report Any Misuse or Abuse of this Policy

Please report any misuse or abuse of this policy at through the **Contact the ACEN** webpage and provide as much information as possible about the use that might be an infringement. The ACEN will investigate the use and take appropriate action, if warranted.

Policy #35 History

Approved March 2019
Edited June 2023
Reviewed June 2025

POLICY #36 TEACH-OUT (ACEN TITLE IV GATEKEEPER PROGRAMS ONLY)

THIS POLICY APPLIES ONLY TO GOVERNING ORGANIZATIONS/NURSING PROGRAMS FOR WHICH THE ACEN SERVES IN A TITLE IV GATEKEEPER CAPACITY.

1. The ACEN requires a **teach-out agreement** or a teach-out plan from a governing organization/nursing program it accredits when:
   a. The **U.S. Department of Education** or the ACEN requests the teach-out agreement or a teach-out plan as a way for a governing organization/nursing program to demonstrate its obligation to fulfill its educational commitment to currently enrolled nursing students.
   b. A governing organization decides to close the institution, a nursing program, or an off-campus instructional site or branch campus where 100% of a nursing program is offered.
      i. See **Policy #16 Closings**.
   c. The ACEN Board of Commissioners places the governing organization/nursing program on continuing accreditation for good cause (under CFR 602.24(c)(1)(ii), good cause is an equivalent status to probation).
   d. The ACEN Board of Commissioners denies the governing organization/nursing program continuing accreditation.
      i. If the governing organization/nursing program does not appeal the denial of continuing accreditation decision, the ACEN Board of Commissioners may extend the governing organization's/nursing program's accreditation until the governing organization/nursing program has had reasonable time to complete the activities in its ACEN-approved teach-out plan or to fulfill the obligations of any ACEN-approved teach-out agreement developed to assist students in transferring or completing their program of study. Even if a governing organization/nursing program does appeal the denial decision, an extension is not guaranteed, and extending the governing organization's/nursing program's accreditation is the sole authority of and subject to the approval by the ACEN Board of Commissioners.
      ii. If the program's accreditation status is extended, the status during the extension period will be continuing accreditation for good cause regardless of what the status was at the time of the Board of Commissioners' decision.
      iii. The ACEN Chief Executive Officer/Designee shall determine what is a reasonable amount of time to complete the activities in the teach-out agreement; however, the amount of time shall not exceed 120 calendar days from the effective date of the Board of Commissioners' decision.
   e. The ACEN has reasonable cause for concern regarding the financial stability and/or continuing operations of a governing organization/nursing program it accredits. Reasonable cause includes but is not limited to the:
      i. governing organization being placed on heightened cash management 1 (HCM1) or heightened cash management 2 (HCM2) status by the U.S. Department of Education.
      ii. governing organization's independent auditor(s) has(ve) expressed doubt with the governing organization's ability to operate as an ongoing concern, indicating an adverse opinion, or finding a material weakness related to financial stability.
      iii. governing organization asserts financial exigency.
      iv. governing organization files bankruptcy.

f. The U.S. Department of Education notifies the ACEN of its determination that the governing organization's independent auditor expressed doubt with the non-profit or proprietary governing organization's ability to operate as an ongoing concern, indicating an adverse opinion, or finding a material weakness related to financial stability.
g. The U.S. Department of Education notifies the ACEN that the governing organization is participating in Title IV, HEA programs under a provisional program participation agreement, and the department has required a teach-out plan as a condition of participation.
h. The U.S. Department of Education notifies the ACEN that it has placed the institution on the reimbursement payment method under 34 CFR 668.162(c) or the heightened cash monitoring payment method requiring the Secretary's review of the governing organization's supporting documentation under 34 CFR 668.162(d)(2).
i. The U.S. Department of Education notifies the ACEN that the Secretary has initiated an emergency action against a governing organization in accordance with section HEA 487(c)(1)(G) or an action to limit, suspend, or terminate a governing organization participating in any title IV, HEA program in accordance with section HEA 487(c)(1)(F).
j. The governing organization notifies the ACEN that it intends to cease operations entirely or close a location that provides 100% of at least one ACEN-accredited nursing program, including if the location is being moved and is considered by the U.S. Department of Education to be a closed school.
k. A state licensing or authorizing agency notifies the ACEN that a governing organization's license or legal authorization to provide an educational program has been or will be revoked.

2. Arrangements in any teach-out agreement and teach-out plan must be consistent with the ACEN Standards and Criteria and requirements from **Policy #14 Reporting Substantive Changes** and **Policy #16 Closings**.
3. The ACEN requires a governing organization/nursing program that enters into a teach-out agreement or teach-out plan (either on its own or at the request of the ACEN) to submit every agreement and teach-out plan for review. The ACEN may approve or disapprove of a teach-out agreement or teach-out plan.
   a. Every teach-out agreement or teach-out plan must include at minimum the following information and evidence:
      i. The names of other governing organizations that offer similar nursing programs and could potentially enter into a teach-out agreement with the governing organization.
      ii. Assurance of the equitable treatment of nursing students.
      iii. A reasonable opportunity for nursing students to complete their nursing program of study.
      iv. A complete list of currently enrolled nursing students and the program requirements each nursing student has completed.
      v. A plan to provide all potentially eligible nursing students with information about how to obtain a closed school discharge and if applicable, information on state refund policies.
      vi. A record retention plan to be provided to all enrolled nursing students that delineates the final disposition of teach-out records (e.g., student transcripts, billing, financial aid records).
      vii. A clear statement to nursing students of the tuition and fees of the educational program and the number and types of credits that will be accepted by the teach-out governing organization. Information on the number and types of credits the teach-out governing organization is willing to accept prior to the nursing student' s enrollment.
   b. If the ACEN approves a teach-out agreement or teach-out plan that includes a governing organization or nursing program that is accredited by another accrediting agency

recognized by the U.S. Department of Education, the ACEN must notify that accrediting agency of its approval.

c. The ACEN requires copies of all notifications to constituents from the governing organization/nursing program related to the information in this section. The ACEN may require corrections to such information.

4. The ACEN may approve a teach-out agreement only if the agreement:
   a. Is between governing organizations that are accredited by an institutional accrediting agency recognized by the U.S. Department of Education.
   b. Is consistent with the applicable ACEN Standards and Criteria, ACEN policies, and U.S. Department of Education regulations.
   c. Provides for the equitable treatment of nursing students being served by ensuring that the teach-out governing organization has the necessary experience, resources (human, fiscal, physical), and support services to:
      i. Provide an educational program that is of acceptable quality and reasonably similar in content, structure, delivery modality, and scheduling to that provided by the governing organization/nursing program subject to the teach-out agreement either entirely or at one of its locations.
      ii. While an option via an alternate delivery modality may be made available to nursing students, such an option is insufficient unless an option via the same delivery modality as the original educational program is also provided.
      iii. Demonstrate it has a record of stability and the capacity to carry out its mission and meet all obligations to nursing students.
      iv. Provide nursing students with access to the program and services without requiring them to move or travel for substantial distances or durations.
      v. Provide nursing students with information about additional charges, if any.

5. The ACEN shall not permit a governing organization/nursing program to serve as a teach-out governing organization/nursing program under the following conditions:
   a. The U.S. Department of Education notifies the ACEN that it has placed the teach-out governing organization on the reimbursement payment method under 34 CFR 668.162(c) or the heightened cash monitoring payment method requiring the U.S. Department of Education's review of the governing organization's supporting documentation under 34 CFR 668.162(d)(2).
   b. The U.S. Department of Education notifies the ACEN that it has initiated an emergency action against the teach-out governing organization in accordance with section HEA 487(c)(1)(G) or an action to limit, suspend, or terminate a governing organization participating in any Title IV, HEA program in accordance with section HEA 487(c)(1)(F).
   c. The U.S. Department of Education notifies the ACEN that the teach-out governing organization is participating in Title IV, HEA programs under a provisional program participation agreement, and the U.S. Department of Education has required a teach-out plan as a condition of participation.
   d. For a non-profit or proprietary governing organization, the U.S. Department of Education notifies the ACEN of a determination by the teach-out governing organization's independent auditor expressing doubt with the teach-out governing organization's ability to operate as an ongoing concern, indicating an adverse opinion, or finding a material weakness related to financial stability.
   e. For a proprietary governing organization, the U.S. Department of Education notifies the ACEN that the teach-out governing organization has a composite score of less than 1.0 as calculated under 34 CFR 668.172.

f. A state licensing or authorizing agency notifies the ACEN that the teach-out governing organization's license or legal authorization to provide a nursing program has been or will be revoked.
g. A state licensing or authorizing agency notifies the ACEN that the teach-out governing organization's/nursing program's approval to provide a nursing program has been or will be revoked.
h. A law enforcement agency notifies the ACEN that the teach-out governing organization is under investigation, action, or being prosecuted for an issue related to academic quality, misrepresentation, fraud, or other severe matters.
i. The teach-out governing organization/nursing program's accreditation status with the ACEN is continuing accreditation for good cause.
j. The teach-out governing organization/nursing program is currently under review by the ACEN that may result in the Board of Commissioners denying continuing accreditation of the teach-out governing organization/nursing program (e.g., fall cycle site visit completed with a Board of Commissioners' decision the following spring).
k. The teach-out governing organization/nursing program is in the appeals process or in the arbitration process with the ACEN.
l. The teach-out governing organization/nursing program notifies the ACEN that it intends to cease operations entirely.
m. The teach-out governing organization/nursing program notifies the ACEN that it intends to close the location that will be used as the teach-out location.

Policy #36 History

Developed and Approved July 2020
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POLICY #37 THIRD-PARTY DISCOVERY REQUEST

COSTS OF COMPLIANCE WITH THIRD-PARTY DISCOVERY REQUESTS

The costs of compliance with third-party discovery requests made to the ACEN regarding a governing organization/nursing program can be high and cannot be reasonably anticipated for budgeting purposes. To defray costs, where reimbursement for complying with a subpoena and/or third-party discovery request is not provided by the party serving the subpoena or document request, the ACEN may charge the governing organization/nursing program that is the subject of the subpoena/document request with all associated costs, including (but not limited to) the costs of production, copying, and delivering the documents as well as attorney's fees incurred.

Policy #37 History
Developed and Approved July 2020
Reviewed June 2025

POLICY #38 ARBITRATION

This Arbitration Policy of the Accreditation Commission for Education in Nursing (ACEN) shall apply only to an adverse action by the ACEN Board of Commissioners that has been fully and finally determined by a written decision of the Appeal Committee pursuant to **Policy #10 Appeal Process and Submission of New Financial Information Subsequent to Adverse Action**.

As a condition of seeking initial accreditation or continuing accreditation with the ACEN, each nursing program seeking initial accreditation or continuing accreditation consents to resolving disputes regarding a decision through the Appeal Committee in accordance with the arbitration procedures set forth in this policy as required by 20 U.S.C. §1099b(e) and 34 C.F.R. §602.20(e).

1. Arbitration
    a. Governing Law
        i. The arbitration process in this Policy shall be governed by the Federal Arbitration Act, 9 U.S.C. §1-16 (Act), which shall be deemed to pre-empt any State arbitration provisions that may otherwise be applicable.
    b. Jurisdiction of the Arbitrators
        i. The arbitrators shall have jurisdiction to determine whether the final decision of the Appeal Committee was rightly decided and to make all rulings necessary and incidental thereto. The arbitrators shall have no jurisdiction or authority to enter a recommendation for monetary damages. The recommendation of the arbitrators shall be limited to recommending affirmation or reversal of the decision of the Appeal Committee and the material reasons.
    c. Recommendation by the Arbitrators
        i. All recommendations by the arbitrators shall be by majority vote.

1. Arbitrators
    a. Roster of Arbitrators
        i. The ACEN shall maintain a roster of arbitrators. An arbitrator may be nominated by any governing organization/nursing program (whether accredited by the ACEN, an ACEN candidate for accreditation, or by self-nomination). There shall be no limit to the number of persons who may be nominated by any entity, and there shall be no limit to the number of arbitrators on the roster, though the ACEN will endeavor to have at least a total of 12 persons listed on the roster. Arbitrators will be composed of nurse educators/clinicians, nurse clinicians /practitioners, administrators, and the public, and may not include current ACEN Board of Commissioners members or current ACEN appeal committee members. The term an arbitrator may remain on the roster is five years unless otherwise removed or resigned. The term of an arbitrator may be renewed, and there is no limit to the number of terms an arbitrator may serve.
    b. Qualifications of Arbitrators
        i. An arbitrator must be a nurse educator/clinician, nurse clinician/practitioner, administrator, or a representative of the public.
            1. For an arbitrator serving as a nurse educator/clinician, the majority of the person's career experience must be as a nurse educator/clinician with a minimum of 10 years' experience in nursing education.
            2. For an arbitrator serving as a nurse clinician/practitioner, the majority of the

person's career experience must be as a nurse clinician/practitioner with a minimum of 10 years' experience in nursing service.

3. For an arbitrator serving as an administrator, the person must have five years' experience providing administrative oversight for a nursing education program.
4. For an arbitrator serving as a representative of the public the person may have experience from inside or outside higher education.
    a. If a representative is from inside higher education, then the representative may be currently working at a governing organization with a nursing program; however, the representative must be from outside the nursing profession and from outside the accreditation of nursing programs.
    b. If a representative is from outside higher education, then the representative may be currently working at a governing organization associated with nursing; however, the representative must be from outside the nursing profession and from outside the accreditation of nursing programs.
    c. An arbitrator need not be a lawyer or have legal training; however, both are considered desired qualifications.
    d. An arbitrator need not have any formal training in arbitration; however, such training is considered a desired qualification.
    e. No current or previous employee of the ACEN may serve as an arbitrator.
    f. No current or previous employee of any nursing education accrediting agency, the American Association of Colleges of Nursing, or the National League for Nursing may serve as an arbitrator.

c. Acceptance of Arbitrators
    i. Annually, there will be a public announcement seeking volunteers to serve as nurse educator/clinician arbitrators, nurse clinician /practitioner arbitrators, administrator arbitrators, and public arbitrators. All volunteers will be added to the list of arbitrators upon self- attestation that the volunteer meets the qualifications to serve as an arbitrator.

2. Commencement of an Arbitration Proceeding
    a. Notice of Arbitration, Deposit, and Payment of Expenses
        i. The governing organization of the nursing program shall submit a notice of arbitration in writing by its Chief Executive Officer to the ACEN Chief Executive Officer by email within 10 business days of the governing organization's/nursing program's receipt of the written final accreditation decision of the Appeal Committee. The original notice of arbitration shall be sent by overnight delivery with proof of receipt to the ACEN Chief Executive Officer at the same time it is sent by email. The original notice of arbitration shall be accompanied by a non-refundable check **in accordance with the fee schedule** as a deposit payable to the ACEN for expenses such as the travel, lodging, meals, and venue charges incurred by the arbitrators and the ACEN in convening and pursuing the arbitration; credit cards are not an acceptable form of payment. The governing organization/nursing program submitting the matter

        to arbitration is responsible for all expenses of the arbitration, including representation and counsel fees incurred by the ACEN. If the expenses incurred exceed the deposit, the governing organization/nursing program will be assessed the additional amount. The arbitrators shall submit expense vouchers to the ACEN

in the form and manner prescribed by the ACEN for the reimbursement of reasonable expenses incurred.

b. Contents of the Notice
   i. The notice of arbitration need not be in any particular form, but it must clearly identify the decision of the Appeal Committee and state that the governing organization/nursing program submits the decision of the Appeal Committee to arbitration in accordance with this policy. The notice need not specify the basis for the arbitration. The notice of arbitration is sufficient to challenge the decision of the Appeal Committee on all legal grounds.

c. Effect of the Notice
   i. A timely notice of arbitration in accordance with this policy shall have the immediate effect of continuing the nursing program in accreditation with the ACEN in the same status as it was prior to the Board of Commissioners' adverse action until the arbitration recommendation is rendered. The ACEN shall provide notice to any constituencies previously noticed of the result of the appeal that a timely notice of arbitration has been filed and the effect thereof.

3. Selection of the Arbitrators
   a. Number and Method of Selection
      i. An arbitration proceeding under this policy shall require three qualified arbitrators.
         1. When ACEN serves as the Title IV gatekeeper for the governing organization/nursing program then the selection of the arbitrators is from nurse educators/clinician arbitrators, administrator arbitrators, and public arbitrators.
         2. When ACEN does not serve as the Title IV gatekeeper for the governing organization/nursing program then the selection of the arbitrators if from nurse educators/clinician arbitrators, clinician/practitioner arbitrators, and public arbitrators.
      ii. No arbitrator who resides in the same state as the main campus of the nursing program or who has a conflict of interest with the governing organization/nursing program in accordance with ACEN **Policy #1 Code of Conduct and Conflict of Interest** may be eligible for selection as an arbitrator.
      iii. Upon receipt of the Notice of Arbitration, the ACEN Chief Executive Officer shall provide to the Chief Executive Officer of the nursing program's governing organization the names of eligible arbitrators from the current Roster of Arbitrators.
      iv. The Chief Executive Officer of the nursing program's governing organization shall select one arbitrator from any category on the current Roster of Arbitrators within five business days of receipt of the Roster and shall so notify the ACEN Chief Executive Officer in writing within one business day of making a selection.
      v. The ACEN Chief Executive Officer shall select one arbitrator from any category on the current Roster of Arbitrators and shall notify the chief executive officer of the nursing program's governing organization in writing within five business days of the nursing program's selection.
      vi. The ACEN Chief Executive Officer shall notify the selected arbitrators in writing with a copy of the selection letter to the Chief Executive Officer of the nursing program's governing organization. These two arbitrators shall confer and select one additional arbitrator from any category on the current Roster of Arbitrators within five business days and shall so notify the ACEN Chief Executive Officer in writing within one business day of making a selection. The ACEN Chief Executive

Officer shall notify the selected arbitrator within five business days in writing with a copy of the selection letter to the chief executive officer of the nursing program's governing organization.

b. Conflict of Interest and Recusal
    i. The selected arbitrators shall be governed by the conflict of interest provisions of ACEN **Policy #1 Code of Conduct and Conflict of Interest**. The ACEN Chief Executive Officer shall provide the selected arbitrators with a copy of Policy #1 and request that any selected arbitrator who has a conflict of interest recuse themselves and notify the ACEN Chief Executive Officer. If a selected arbitrator discovers a conflict after the convening of the arbitration, such an arbitrator shall recuse themselves from further proceedings.
    ii. In the instance of a selected arbitrator being unable to serve or continue serving for any reason, the entity originally selecting such arbitrator shall select a replacement in accordance with this policy.
c. Challenge of an Arbitrator
    i. Either the ACEN or the governing organization/nursing program may challenge the qualifications of any arbitrator, and unless the challenged arbitrator steps down, the remaining arbitrators must rule on the challenge.
d. Convening the Arbitration and Administrative Conference
    i. Once three qualified arbitrators without a conflict of interest have been selected, it is the responsibility of the arbitrators to convene within a reasonable period of time by conference call, videoconference, or in person to select a Chair, who shall preside at all further proceedings, ensure this policy is complied with, and establish the time and manner of the arbitration proceedings within the procedures set forth in this policy. All actionable dates under this policy thereafter are calculated from the date the Chair is selected. At the request of any party or upon the arbitrators' own initiative, the arbitrators may conduct an administrative conference with the parties to address timing and any other administrative matters that may coincide with the convening of the arbitration.
e. Communications with Arbitrators
    i. No party and no one acting on behalf of any party shall communicate ex parte with any arbitrator. All communications with the arbitrators shall be with all three and shall simultaneously be provided to the other party. It shall not be deemed an ex parte communication forbidden by this policy for staff of the ACEN to discuss logistical and procedural matters with arbitrators, including (but not limited to) planning the venue of proceedings, travel, lodging, meals, and expense reimbursement.
f. Confidentiality
    i. The arbitrators shall maintain as confidential all information provided to them by either party. After the conclusion of the arbitration, the arbitrators shall destroy and not retain any documents in whatever form provided to them during the arbitration.

4. Arbitration Procedures
a. Time for Completion of the Arbitration
    i. The arbitration proceedings shall be completed within 90 business days of the date of the convening of the arbitration. The completion of the proceedings shall be evidenced by the written recommendation of the arbitrators.
b. Record on Review

i. The review of the decision of the Appeal Committee by the arbitrators shall be on the record presented to the Appeal Committee, including the Administrative Record, the Briefs of the Parties, the Transcripts of the Appeal Hearing, any pre-hearing proceedings, any additional evidence submitted to the Appeal Committee, any rulings thereon, and the decision of the Appeal Committee. It shall be the duty of the ACEN Chief Executive Officer, assisted by the Chair of the Appeal Committee, to assemble the Record on Review and submit it to the arbitrators and to the representatives of the parties within 30 business days of the convening of the arbitration. The Record on Review shall be submitted electronically.

c. Discovery and the Submission of Additional Evidence
   i. There shall be no discovery in the arbitration proceeding. There shall not be any additional evidence submitted to the arbitrators beyond the Record on Review.
d. Standard of Review
   i. The governing organization/nursing program shall bear the burden of persuading the arbitrators that the decision of the Appeal Committee is clearly erroneous in accordance with the standards of **Policy #10** and in accordance with applicable law.
e. Location and Manner of the Proceedings
   i. The arbitration proceedings shall take place in the Atlanta, Georgia, Metropolitan Area at a venue arranged for by the ACEN in consultation with the arbitrators and the parties. With the unanimous consent of the parties and the arbitrators, the proceedings may take place at another venue within or outside the Atlanta, Georgia, Metropolitan Area; however, financial arrangements must be made and agreed to in advance. With the unanimous consent of the parties and the arbitrators, some or all of the proceedings may take place remotely by telephonic or other electronic means so long as all parties and all arbitrators can participate equally.
f. Representation
   i. Any party may participate pro se without representation or by counsel or any other representative of the party's choosing unless such choice is prohibited by applicable law. A party intending to be so represented shall notify the other party and the arbitrators of the name, telephone number, physical address, and email address of the representative at least seven business days prior to the date set for the hearing at which that person is first to appear. When such a representative responds for a party, notice is deemed to have been given.
g. Preliminary Hearing
   i. At the discretion of the arbitrators a preliminary hearing may be scheduled and if deemed necessary, it should be scheduled as soon as practicable. The parties should be invited to attend along with their representatives. The parties and the arbitrators should be prepared to discuss and establish a procedure for the conduct of the arbitration proceedings within the procedures set forth in this policy.
h. Briefs
   i. The governing organization/nursing program initiating the arbitration shall submit its principal brief within 14 business days of receipt of the Record on Review. The ACEN shall submit its response brief within 14 business days of receipt of the brief of the governing organization/nursing program. The arbitrators may request briefs from the parties on such other matters and at such times as they may determine. All briefs shall be submitted electronically as determined by the ACEN Chief

Executive Officer (e.g., email, flash drive, cloud access).

i. Hearing
    i. The hearing shall take place in accordance with the arrangements outlined in point 5e. The hearing on the issues raised by the parties to the arbitration shall be heard by the arbitrators at a date scheduled by the arbitrators. The arbitrators may request arguments from the parties on such other matters and at such times as they may determine.
j. Attendance at the Proceedings
    i. All arbitration proceedings are private and are not open to the public. Any person having a direct interest in the arbitration is entitled to attend the hearings. The arbitrators shall have the discretion to determine the propriety of the attendance of any person other than the parties and their representatives.
k. Stenographic and Other Recordings
    i. Any party desiring a stenographic record shall make arrangements directly with a stenographer and shall notify the other parties of these arrangements at least three business days in advance of the hearing. The requesting party(ies) shall pay the cost of the record. No other means of recording the proceedings are permitted absent the agreement of the parties or the direction of the arbitrators.
l. Waiver
    i. Any party, who proceeds with the arbitration after knowledge that any provision or requirement of this policy has not been complied with and fails to object in writing, shall be deemed to have waived the objection.
m. Form and Delivery of the Recommendation
    i. The recommendation shall be signed by a majority of the arbitrators and shall be executed in the form and manner required by the Federal Arbitration Act. The recommendation shall state the reasons for the recommendation and shall rule on the substantial claims of the parties. The recommendation of the arbitrators shall be limited to recommending affirmance or reversal of the decision of the Appeal Committee, stating the material reasons. The recommendation shall be delivered electronically to the email addresses of the parties and to their representatives.
n. Acceptance of the Recommendation
    i. The recommendation of the arbitrators shall be deemed accepted if neither party notifies the other in writing by 5:00 p.m. Eastern Time 10 calendar days from delivery of the recommendation as provided in point 5m above. If the recommendation is accepted by ACEN and the governing organization/nursing program, the ACEN Board of Commissioners shall make the recommendation of the arbitrators its final decision.

Policy #38 History

Developed and Approved July 2020
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SECTION 3:
STANDARDS & CRITERIA

STANDARD 1: Administrative Capacity and Resources

The mission and/or philosophy of the nursing program reflects the governing organization's mission, goals, and/or values. The governing organization and nursing program have administrative capacity and resources that support effective delivery of the program and facilitate the achievement of the end-of-program student learning outcomes and program outcomes for each nursing program type, and additionally for graduate programs the role-specific nursing competencies.

Criterion 1.1
The mission, goals and/or values of the governing organization are evident in the mission, goals, values, and/or philosophy of the nursing program.

Criterion 1.2

a. The nurse administrator and nursing faculty have formal representation in governing organization and nursing program governance activities.
b. Students have opportunities to participate in governance activities for the governing organization and the nursing program.

Criterion 1.3
Communities of interest have opportunities to provide input into nursing program processes and/or decision-making.

Criterion 1.4
The nurse administrator is a nurse who:

a. holds educational qualifications as required by the:
    - governing organization and
    - regulatory agencies;
b. holds nursing licensure, and certification as applicable, consistent with the assigned roles and responsibilities; and
c. is experientially qualified for the assigned roles and responsibilities.

Criterion 1.5
The nurse administrator:

a. is oriented and mentored in the assigned roles and responsibilities;
b. develops and maintains expertise in the assigned responsibilities, including administration and leadership of the nursing program; and
c. has sufficient time for the assigned roles and responsibilities.

Criterion 1.6
The nurse administrator has the authority to:

a. administer and lead the nursing program;
b. prepare the nursing program budget with faculty input; and
c. administer fiscal resources allocated to the nursing program.

Criterion 1.7

When present, faculty and/or staff who assist or support nursing program administration:

a. hold the educational qualifications as required by the:
    - governing organization and
    - regulatory agencies;
b. are experientially qualified for their assigned roles and responsibilities;
c. are sufficient in number; and
d. have sufficient time for their assigned roles and responsibilities.

Criterion 1.8

The nursing program has sufficient and sustainable fiscal resources to support the program at all locations and for all methods of delivery.

Criterion 1.9

The nursing program has sufficient and sustainable physical resources to support the program at all locations and for all methods of delivery.

STANDARD 2: Faculty

Faculty are educationally and experientially qualified for their assigned roles and responsibilities, maintain expertise, and are regularly evaluated to support the achievement of the end-of-program student learning outcomes and program outcomes for each nursing program type, and additionally for graduate programs the role-specific nursing competencies.

Full- and part-time faculty include those individuals teaching and/or evaluating students in didactic, clinical, and/or laboratory settings.

Criterion 2.1
Full-time faculty are nurses who:

a. hold the educational qualifications as required by the:
   - governing organization and
   - regulatory agencies;
b. hold nursing licensure, and certification as applicable, consistent with their assigned roles and responsibilities;
c. are experientially qualified for their assigned roles and responsibilities; and
d. are sufficient in number.

Criterion 2.2
Part-time faculty are nurses who:

a. hold the educational qualifications as required by the:
   - governing organization and
   - regulatory agencies;
b. hold nursing licensure, and certification as applicable, consistent with their assigned roles and responsibilities;
c. are experientially qualified for their assigned roles and responsibilities; and
d. are sufficient in number.

Criterion 2.3
Non-nurse faculty who teach nursing courses:

a. hold the educational qualifications as required by the:
   - governing organization and
   - regulatory agencies; and
b. are experientially qualified for their assigned roles and responsibilities.

Criterion 2.4
Policies for nursing faculty are comprehensive and consistent with those of the governing organization; justification is provided for any policy differences.

Criterion 2.5

a. Full-time faculty are oriented and mentored in their assigned responsibilities.
b. Part-time faculty are oriented and mentored in their assigned responsibilities.

Criterion 2.6
Full-time faculty develop and maintain current expertise in their teaching responsibilities, including (but not limited to):

a. evidence-based teaching/instructional strategies that are relevant for all methods of delivery;
b. standards of clinical practice;
c. assessment and evaluation methods; and
d. principles of diversity, equity, and/or inclusion.

Criterion 2.7
Part-time faculty develop and maintain current expertise in their teaching responsibilities, including (but not limited to):

a. evidence-based teaching/instructional strategies that are relevant for all methods of delivery;
b. standards of clinical practice;
c. assessment and evaluation methods; and
d. principles of diversity, equity, and/or inclusion.

Criterion 2.8

a. Full-time faculty performance is regularly evaluated for effectiveness in their assigned responsibilities.
b. Part-time faculty performance is regularly evaluated for effectiveness in their assigned responsibilities.

Criterion 2.9
Preceptors, when used:

a. hold the educational qualifications as required by the:
    - nursing program and
    - regulatory agencies;
b. hold licensure, and certification as applicable, consistent with their assigned roles and responsibilities;
c. are experientially qualified for their assigned roles and responsibilities,
d. are oriented, mentored, and monitored; and
e. have clearly documented responsibilities, which may include input into student evaluation.

STANDARD 3: Students

Student policies and services support the achievement of the end-of-program student learning outcomes and program outcomes for each nursing program type, and additionally for graduate programs the role-specific nursing competencies.

Criterion 3.1
The nursing program's current ACEN accreditation status and the ACEN contact information is accurate and readily accessible to the public.

Criterion 3.2
The following nursing program or governing organization policies are publicly accessible, current, non-discriminatory, and implemented as published; justification is provided when nursing policies differ from the governing organization:

a. admissions;
b. progression;
c. graduation;
d. formal complaints and grievances procedures; and
e. technology requirements.

Criterion 3.3
Governing organization or nursing program records for resolution of formal complaints or formal grievances include evidence of:

a. due process; and
b. timely resolution in accordance with the governing organization or nursing program polices or procedures.

Criterion 3.4
Student records maintained by the nursing program are kept secure and are in compliance with applicable policies/procedures of the governing organization and regulatory agencies.

Criterion 3.5
Changes in nursing program policies/procedures are clearly and consistently communicated to students in an effective and timely manner.

Criterion 3.6
Student support services are commensurate with the needs of nursing students, regardless of location, methods of delivery, or program option.

Criterion 3.7

a. Learning and technology resources for nursing students are selected by the faculty and relevant to the educational level at which students are being prepared.
b. Students are oriented to and receive support for learning and technology resources.
c. Learning and technology resources are current and accessible regardless of location, methods of delivery, or program option.

Criterion 3.8
Students are informed of their responsibilities regarding any financial assistance.

Criterion 3.9
Compliance with the Higher Education Reauthorization Act, Title IV eligibility and certification requirements is maintained, including having a:

a. plan to improve the federal loan default rate, as applicable; and
b. written, comprehensive federal student loan repayment program addressing student loan information, counseling, and monitoring.

Criterion 3.10
Federal financial aid record maintenance complies with federal guidelines.

STANDARD 4: Curriculum

The curriculum supports the achievement of the end-of-program student learning outcomes for each nursing program type, and additionally for graduate programs, the role-specific nursing competencies; and is consistent with safe practice in contemporary healthcare environments.

Criterion 4.1
The nursing curriculum has one set of end-of-program student learning outcomes that:

a. are based on contemporary professional nursing standards, guidelines, and/or competencies; and
b. apply to all program options and reflect the educational level at which students are being prepared.

Additionally, for Graduate Programs:

c. integrate role-specific nursing competencies applicable to each program option.

Criterion 4.2
Course student learning outcomes are organized to demonstrate progression to facilitate the students' achievement of:

a. the end-of-program student learning outcomes.

Additionally, for Graduate Programs:

b. the role-specific nursing competencies.

Criterion 4.3
Teaching/instructional strategies and learning activities in all learning environments are varied, appropriate for the method of delivery, and incorporate learning and technology resources to facilitate the students' achievement of course student learning outcomes.

Criterion 4.4
The nursing curriculum is:

a. developed by the faculty and regularly reviewed for currency; and
b. implemented as published.

Criterion 4.5
The nursing program of study includes:

Undergraduate Programs:

a. General education courses/concepts that enhance nursing knowledge and practice for the educational level at which students are being prepared.
b. Nursing courses that facilitate student achievement of course student learning outcomes and end-of-program student learning outcomes.

Graduate Programs:

a. Core/foundational courses that enhance nursing knowledge and practice for the educational level at which students are being prepared.
b. Nursing courses that facilitate student achievement of course student learning outcomes, end-of-program student learning outcomes, and role-specific nursing competencies.

Criterion 4.6
Course credits and/or clock hours for all nursing courses in the program of study, including ratios for contact hours, comply with requirements of the:

a. governing organization and
b. regulatory agencies.

Additionally for Graduate Programs:

c. certifying agencies, as applicable.

Criterion 4.7
Emphasizing the role of the nurse at the educational level for which students are being prepared, the curriculum incorporates contemporary concepts in all learning environments, including, but not limited to:

a. diversity, equity, inclusion, and/or social determinants of health;
b. evidence-based practice, research, and/or scholarship;
c. information literacy;
d. interprofessional collaboration and delegation; and
e. professional identity and scope of practice.

Criterion 4.8
If used, skills and/or simulation laboratory learning environments and experiences:

a. reflect evidence-based nursing practice;
b. include healthcare technology;
c. meet regulatory agencies requirements for skills laboratory and/or simulation, as applicable; and

For Undergraduate Programs:

d. reflect the educational level at which students are being prepared to facilitate the achievement of the course student learning outcomes and end-of-program student learning outcomes.

For Graduate Programs:

d. reflect the educational level at which students are being prepared to facilitate the achievement of the course student learning outcomes, end-of-program student learning outcomes, and role-specific nursing competencies.

Criterion 4.9

Clinical/practicum learning environments and experiences:

a. have current written agreements that specify expectations for all parties for the protection of the student;
b. reflect evidence-based nursing practice;
c. meet regulatory agencies' requirements for clinical/practicum learning environments, as applicable; and

For Undergraduate Programs:

d. reflect the educational level at which students are being prepared to facilitate the achievement of the course student learning outcomes and end-of-program student learning outcomes.

For Graduate Programs:

d. reflect the educational level at which students are being prepared to facilitate the achievement of the course student learning outcomes, end-of-program student learning outcomes, and role-specific nursing competencies.

Criterion 4.10

Formative and summative student evaluation methods:

a. are utilized throughout the curriculum in all learning environments;
b. are varied and appropriate for all methods of delivery; and
c. align with the progression of course student learning outcomes.

NOTE, DIPLOMA PRE-LICENSURE REGISTERED NURSING PROGRAMS ONLY:

In the absence of requirements by a governing organization's accrediting agency or regulatory agencies, the maximum number of credit hours is 90, including no more than 50 credit hours of nursing courses. The 90 credit hours must include all credit hours of general education courses or equivalent clock hours.

STANDARD 5: Outcomes

Nursing program assessment demonstrates the extent of student learning at or near the end of the program as well as program outcome achievement using a systematic plan for evaluation (SPE).

The faculty create and implement a written SPE* for each nursing program type to determine the extent of the achievement of each end-of-program student learning outcome and program outcome, and additionally for graduate programs the role-specific nursing competencies, to inform program decision-making to maintain or improve student and program performance.

Programs seeking* **initial accreditation *are required to have data from the time that the nursing program achieves* **candidacy** *with the ACEN.*

Criterion 5.1
The systematic plan for evaluation describes the process for regular summative nursing program-level assessment of student learning outcome achievement. The faculty will:

a. use a variety of appropriate direct outcome assessment methods to ensure comprehensive summative assessment for each end-of-program student learning outcome;
b. establish a specific, measurable expected level of achievement outcome statement for each summative assessment method;
c. collect aggregate assessment data at regular intervals (determined by the faculty) to ensure sufficiency of data to inform decision-making and disaggregate the data to promote meaningful analysis; provide justification for data that are not disaggregated;
d. analyze assessment data (aggregate and/or disaggregate) at regular intervals (determined by the faculty) and when necessary, implement actions based on the analysis to maintain and/or improve end-of-program student learning outcome achievement;
e. maintain documentation for the three most recent years of the assessment data (aggregate and/or disaggregate), the analysis of data, and the use of data analysis in program decision-making to maintain and/or improve students' end-of-program student learning outcome achievement; and
f. share the analysis of the end-of-program student learning outcome data with communities of interest.

Additionally for Graduate Programs:

g. The systematic plan for evaluation describes the process for regular summative nursing program-level assessment for role-specific nursing competencies for each program option, which may be aligned with the end-of-program student learning outcomes or assessed separately.

Criterion 5.2

The written systematic plan for evaluation describes the process for annual assessment of the nursing program completion rate. The faculty will:

a. calculate the on-time program completion rate for each program option from the first nursing course through completion of the courses required for conferral of a certificate, diploma, or degree;
b. establish a specific, measurable expected level of achievement outcome statement for on-time program completion for each program option and provide a rationale for each expected level of achievement;
c. collect aggregate program completion rate data annually and disaggregate the data to promote meaningful analysis; provide justification for data that are not disaggregated;
d. analyze program completion rate data (aggregate and/or disaggregate) annually and when necessary, implement actions based on the analysis to maintain and/or improve program completion rate;
e. maintain documentation for the three most recent years of the data (aggregate and/or disaggregate), the analysis of data, and the use of data analysis in program decision-making to maintain and/or improve students' success in completing the program; and
f. share the analysis of the program completion rate data with communities of interest.

Criterion 5.3

The written systematic plan for evaluation describes the process for annual assessment of the licensure and/or certification examination pass rate (when required for practice). The faculty will:

a. examine aggregate examination pass rate data (licensure and/or certification) secured from regulatory and/or certifying agencies. The most recent annual pass rate **OR** the mean pass rate for three most recent years must meet at least one of the following based on the total number of test-takers:
    - 80% or greater for all first-time test-takers; or
    - 80% or greater for all first-time test-takers and repeaters; or
    - at or above the national/territorial mean based on the nursing program type.
b. disaggregate the pass rate data to promote meaningful analysis; provide justification for data that are not disaggregated;
c. analyze program licensure and/or certification examination pass rate data (aggregate and/or disaggregate) annually and when necessary, implement actions based on the analysis to maintain and/or improve students' examination pass rate success;
d. maintain documentation for the three most recent years of the aggregated and/or disaggregated data, the analysis of data, and the use of data analysis in program decision-making to maintain and/or improve students' success in passing the licensure and/or certification examination; and
e. share the analysis of the licensure and/or certification examination pass rate data with communities of interest.

Criterion 5.4

The written systematic plan for evaluation describes the process for annual assessment of the job placement rate. The faculty will:

a. use appropriate assessment methods to request job placement data from all graduates based on the role for which graduates are prepared. For students who hold licensure/certification as a registered or advanced practice nurse upon admission to the nursing program, assessment may include, but is not limited to, professional/personal growth, career advancement, and/or a new role specialty with the degree/certificate achievement;
b. establish a specific, measurable expected level of achievement outcome statement for job placement in the role for which graduate are prepared and provide a rationale for the expected level of achievement;
c. collect sufficient aggregate post-graduation job placement rate data annually including the response rate and disaggregate the data to promote meaningful analysis; provide justification for data that are not disaggregated;
d. analyze sufficiency of job placement rate data annually and when necessary, implement actions to maintain and/or improve data sufficiency;
e. analyze aggregate job placement rate data (aggregate and/or disaggregate) annually and when necessary, implement actions based on the analysis to maintain and/or improve the job placement rate;
f. maintain documentation for the three most recent years of the data (aggregate and/or disaggregate), the analysis of data, and the use of data analysis in program decision-making to maintain and/or improve students' success in obtaining a job in a role for which the program prepared them; and
g. share the analysis of the job placement rate data with the communities of interest.

SECTION 4:
GLOSSARY

GLOSSARY

Academic Program Models – Models for the awarding of credits or hours for purposes of tracking program length, with implications for financial aid.

- **Competency-Based Education (CBE) Program** – A program structure where students are evaluated based on achievement of identified competencies and the program measures a student's progress using clock or credit hours.
- **Clock/Contact Hour Program** – A program structure where measurement of a student's progress is reported using the number of direct clock/contact hours of instruction completed. A clock/contact hour is a measure of scheduled instruction. A clock/contact hour is a period of time equivalent to 50 to 60 minutes of instruction, as required by the institution and/or regulatory agencies.
- **Credit Hour Program** – A program structure where measurement of a student's progress is reported using credit hours for each course completed. A credit hour quantifies the hours of learning (e.g., classroom, clinical, or direct faculty instruction) for each week of the academic term, as defined by the institution. For example, one credit hour in a semester-based program of study is equivalent to 15 total hours of instruction for the academic term.
  As defined by the institution, programs may establish a credit-to-contact hour ratio where students complete more than one hour to receive a credit hour. For example, clinical experiences may have a credit-to-contact hour ratio of 1:3, where students would complete 45 total hours to receive one credit hour in a semester-based program of study.
- **Direct Assessment Program** – A program structure where student's progress is measured only by the students' ability to demonstrate their command of the subject matter or skill. No credit, clock, or contact hours are awarded.

Academic Progression Models – Models for the delivery of nursing education programs that facilitate progression from one level of nursing education and/or practice to a higher level of nursing education and/or practice.

Accreditation – The voluntary, self-regulatory process by which non-governmental associations recognize educational institutions or programs that have been found to meet or exceed standards and criteria for educational quality. Accreditation also assists in the further improvement of the institutions or programs as related to resources invested, processes followed, and results achieved.

Advanced Practice Registered Nurse (APRN) – Licensure classification for nurses who have advanced education, knowledge, and skills in one of four advanced practice roles: clinical nurse specialist, nurse practitioner, certified registered nurse anesthetist, or certified nurse midwife.

Approval – The term generally referred to by most state regulatory agencies for nursing programs to describe authorization of nursing education programs meeting minimal standards as defined in the state nurse practice act and/or rules and regulations.

Assessment and Evaluation Methods

- **Direct Outcome Assessment Methods** – Student demonstrations and/or the actual products of student work used by faculty to determine achievement of course and/or end-of-program student learning outcomes (and for graduate programs, the role-specific nursing competencies). Examples include, but are not limited to, examinations (e.g., standardized or faculty-developed), portfolio, clinical performance tools, and assignment rubrics (e.g., papers, projects, presentations).
- **Formative and Summative Student Evaluation Methods** – The use of assessment methods to gauge students' comprehension and learning by comparing it against a standard or benchmark while learning is in progress (Formative) or at the completion of a learning experience, such as a unit or course (Summative).
    - **Formative** evaluation methods provide ongoing feedback to assist the students and faculty to identify the students' strengths/weaknesses regarding learning achievement and target areas that need work.
    - **Summative** evaluation usually involves students receiving a grade that indicates their level of performance on an assignment, examination, and/or course that reflects learning achievement.
- **Indirect Outcome Assessment Methods** – Perspectives (e.g., reflections, opinions, or thoughts) about student's learning achievement regarding course and/or end-of-program student learning outcomes (and for graduate programs, the role-specific nursing competencies). Examples include, but are not limited to surveys, self-assessments, focus groups, interviews, and student peer review.
- **Summative Nursing Program-Level Assessment** – The aggregation of student performance data used by faculty to identify the extent to which a group of students achieved the identified end-of-program student learning outcomes (and for graduate programs, the role-specific nursing competencies) upon completion of the program of study. Data for program-level assessment must include at least two direct assessment methods of each end-of-program student learning outcome and may include indirect assessment and evaluation methods in courses at or near the end of the program. The plan for summative nursing program-level assessment is documented in the program's systematic plan for evaluation (SPE). The analysis and evaluation of aggregate program-level summative assessment data, according to program-established benchmarks, forms the basis for making changes to the program of study for program improvement in support of student learning and achievement.

Branch Campus – A location of a governing organization that is geographically separate and independent from the main campus of the governing organization. A location is independent of the main campus if the location:

- is permanent in nature;
- offers courses in educational nursing programs leading to a degree, certificate, or other recognized educational credential;
- has its own faculty and administrative or supervisory organization; and
- has its own budgetary and hiring authority.

Candidacy – The beginning process for a nursing program seeking accreditation with the ACEN.

Candidate Status – Candidate status is granted after a review of the potential of a nursing program to achieve ACEN accreditation. See the ACEN Accreditation Manual – Section I General Information for additional information regarding the Candidacy process. **Pre-accreditation is not within the scope of recognition the ACEN has with the United States Department of Education (USDE). Any program/institution granted Candidacy may not use the ACEN Candidacy status to seek or gain Title IV eligibility or eligibility for any other federal funding.**

Certification – The process by which an organization, association, voluntary agency, or state regulatory agency grants recognition that an individual possesses predetermined knowledge and/or skills specified for practice in an area of specialization.

Chief Accreditation Officer (CAO) – The official at the ACEN who has the primary responsibility of ensuring that ACEN accreditation practices and processes are consistent with Department of Education (ED) requirements as well as the Council for Higher Education Accreditation (CHEA) and that accreditation processes are completed as described in ACEN policies.

Chief Executive Officer (CEO) – The official who has the primary responsibility of carrying out the mission and purpose of the governing organization. In some circumstances, there may be an overall governing organization CEO and a local or campus CEO (e.g., a chancellor of the overall governing organization and a president of a campus).

Communities of Interest – A group of people, identified by the nursing education unit who formally or informally influence nursing program processes, decision-making of a nursing education unit, the end-of-program student learning outcomes, and the program outcomes of a nursing program. Examples include, but are not limited to, students, graduates, healthcare employer representatives, governing organization representatives, regulatory agency representatives, and members of the public.

Compliance – When the nursing program meets the intent of the ACEN Standards and Criteria as determined by peer evaluators after a review of the program's supporting evidence and the application of professional judgement.

Consortia Relationship – When two or more governing organizations/nursing education units share the responsibility of developing and delivering nursing courses or a nursing program, in whole or part. This does not include clinical agreements for student learning experiences required by a nursing program. See *ACEN Policy #3 Eligibility for Initial and Continuing Accreditation* and *Policy #30 Agreement for Education-Related Component from an External Source* on the **ACEN Policy Page** for additional information and the procedures that must be followed.

Contractual Agreement – When a nursing program enters into an agreement for receipt of courses or portions of courses (e.g., general education courses) delivered by another college/university or service provider to educate the program's students.

Contemporary Professional Nursing Standards, Guidelines, and/or Competencies for Nursing Practice – A set of guidelines approved by a nationally recognized nursing organization for use in the development and evaluation of a nursing curriculum. The most recent version/edition of the standards/guidelines must be used. The standards/guidelines include, but are not limited to:

- Consensus Model for APRN Regulation (APRN Consensus Work Group & the National Council of State Boards of Nursing APRN Advisory Group)
- Core Competencies for Interprofessional Collaborative Practice© (Interprofessional Education Collaborative)
- Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Quality Nurse Practitioner Education)
- Essentials of Entry-Level and Advanced Level Nursing (American Association of Colleges of Nursing)
- Health Professions Education: A Bridge to Quality© (Institute of Medicine)
- Interprofessional Education Collaborative (IPEC) Core Competencies
- NLN Competencies for Graduates of Nursing Education Programs© (National League for Nursing)
- National/International Patient Health and Safety Goals
- Nurse Leader Core Competencies (American Organization for Nursing Leadership™)
- Nurse Practice Standards for the Licensed Practical/Vocational Nurse (National Federation of Licensed Practical Nurses)
- Nursing: Scope and Standards of Practice© (American Nurses Association)
- Standards of Practice and Educational Competencies of Graduates of Practical/Vocational Nursing Programs (National Association for Practical Nurse Education and Services)
- Statement on Clinical Nurse Specialist Practice and Education© (National Association of Clinical Nurse Specialists)
- Quality and Safety Education for Nurses (QSEN) Competencies

Course Student Learning Outcomes – Statements of learner-oriented expectations written in measurable terms that express the knowledge, skills, or behaviors that the students should be able to demonstrate upon completion of the course. Course student learning outcomes must be consistent with standards of contemporary nursing practice. Course student learning outcomes:

- must be aligned and linked to the end-of-program student learning outcomes;
- should have a single, measurable action;
- support students' achievement of the end-of-program student learning outcomes and program outcomes; and for graduate programs, role-specific nursing competencies;
- typically progress from "simple to complex" as students advance through the nursing program of study; and
- organize, guide, and direct course curricular matters such as, but not limited to, the inclusion of content, learning activities, selection of practice learning environments and learning experiences, and student performance assessment methods, etc.

Criteria – Statements that identify the elements that need to be examined in evaluation of an ACEN Accreditation Standard.

Default Rate – The percentage of student borrowers at each governing organization who fail to remain current with repayment of their federal financial aid student loans during the reporting period specified by the United States Department of Education.

Disaggregate Data – The separation of aggregated data into subcomponents for meaningful analysis of student learning and program outcomes. Nursing faculty are expected to determine if data should

be disaggregated; if data are not disaggregated a justification for not disaggregating should be developed. Faculty may consider disaggregation by program option, location, graduation cohort, or other student characteristic (e.g., gender, age) of significance or importance to the faculty to expose unseen trends and meaningfully compare student cohort performance.

Distance Education – See **Methods of Delivery**.

Diversity – The wide range of human characteristics that make one individual or a group of individuals different from another. Diversity characteristics include, but are not limited to, race, ethnicity, culture, gender identity and expression, age, national origin, religious beliefs, work sector, physical ability, sexual orientation, socioeconomic status, level of education, marital status, language, physical appearance, and neurocognitive differences.

DNP Specialist Certificate – A selected series of courses that are a subset of courses within a clinical doctorate program specific to one area of practice (e.g., certificates in nursing administration, certificates in nursing education, certificate as a family nurse practitioner), which are taken after an individual is already credentialed with a doctorate degree in nursing with a different specialty.

Due Process – A disciplined, analytical decision-making procedure in which relevant standards are applied by a properly constituted and authorized body, using a process that is based on published rules of procedure and is free of improper influence.

End-of-Program Student Learning Outcomes – Statements of learner-oriented, practice-ready expectations written in measurable terms that express the knowledge, skills, or behaviors that the students should be able to demonstrate upon completion of the nursing program, regardless of the nursing program option.

End-of-program student learning outcomes provide the framework for all curricular matters, represent the point of transition from being a student to being an entry-level practitioner for the chosen level of nursing education, and must be different for each program type (e.g., the end-of-program student learning outcomes for an associate degree and a baccalaureate degree offered by the same governing organization should be unique to each program).

Evidence-based Nursing Practice – Professional nursing knowledge, skills, and behaviors that are based on current research and professional standards.

Evidence-based Teaching/Instructional Strategies – Instructional methods that are based on current research and professional standards and are used by faculty to enhance and relay course content to students for attainment of educational outcomes.

Equity – The use of intentional actions and efforts to ensure fair treatment, access, opportunity, and advancement for all individuals.

Expected Level of Achievement (ELA) – A measurable index identified by the faculty that reflects a desired outcome for aggregate student or graduate performance (e.g., EPSLOs, program completion rate). An ELA should be high enough as to be genuine and encourage continuous improvement, but not so high as to be idealistic and, thus, unachievable.

Program leaders and faculty are encouraged to set a realistic “stretch ELA” for student achievement outcome without fear of penalty. Whether or not the ELA is met, the program is expected to analyze

all student achievement outcomes data (Criteria 5.1, 5.2, 5.4), to assist with making decisions related to student performance and program improvement. If the program does not meet its stated ELA for program completion (Criterion 5.2) or job placement (Criterion 5.4), OR the program's licensure/certification pass rate does not meet at least one of the six benchmarks identified in Criterion 5.3, then the nurse administrator and faculty should review *ACEN Policy #14 Reporting Substantive Changes* on the **ACEN Policy Page** to determine if a Substantive Change report is required.

Faculty Development – Activities that facilitate faculty maintenance or enhancement of expertise in clinical and teaching/instructional responsibilities. Examples include, but are not limited to, certification, continuing education, formal advanced education, informal development (e.g., journal club), clinical practice, research, publications, and other scholarly activities. **NOTE**: Refer to Criteria 2.6 and 2.7 to review ACEN expectations for ongoing faculty development.

Faculty, Non-Nursing – Non-nurses (e.g., dietician, pharmacologist, or physiologist) who **are assigned to teach a nursing course** and who teach and evaluate nursing students. Non-nursing faculty must be educationally and experientially qualified for their assigned teaching responsibilities. Non-nurse faculty are not faculty members who teach general education courses. Non-nurse faculty are not guest speakers/invited presenters who teach selected topics in a nursing course.

Faculty, Nursing – Nurses who teach and evaluate nursing students in didactic, clinical, and/or laboratory settings, and are educationally and experientially qualified for their assigned roles and responsibilities. **NOTE**: Governing organizations use a variety of terms to describe individuals who teach and evaluate nursing students in didactic, clinical, and/or laboratory settings. Such titles include, but are not limited to, full-time or part-time faculty, adjunct faculty, clinical faculty, a rank (e.g., professor, associate professor, assistant professor, instructor, lecturer), or staff.

- **Full-time Faculty** – Nurses who teach and/or evaluate nursing students and have a full-time employment status at the governing organization
- **Part-time Faculty** – Nurses who teach and/or evaluate nursing students and have an appointment that is less than a full-time status at the governing organization.

Formal Complaints and Grievances – An allegation against a nursing program consistent with the nursing program or governing organization's definition of formal complaints and/or grievances, typically expressed as a written, signed statement. The governing organization/accredited nursing education program is expected to maintain a record of all formal complaints or grievances against the program since the last ACEN accreditation visit, including evidence of documentation of due process and timely resolution. **NOTE:** Programs seeking initial accreditation should maintain records of formal student complaints and/or grievances from the time Candidate status is achieved.
Geographic Region – In reference to the Substantive Change process, it is an area serving the same/similar population of students and communities as the original/main location of a nursing program, an off-campus instructional site/location, or a branch campus. See *ACEN Policy #14 Reporting Substantive Changes* on the **ACEN Policy Page** for additional information and the procedures that must be followed.

Geographically Separate – An off-campus instructional site/location or branch campus that is located physically apart from the main campus of the governing organization.

Governance – The systems, policies, and processes by which the program operates and is controlled. May include but is not limited to allocation of resources, outcomes assessment and program evaluation, policy, and curriculum development.

Governing Organization – The institution with overall responsibility and authority for a nursing education unit and a nursing program (e.g., university, college, hospital/medical center, career center).

Governing Organization System – Multiple governing organizations operating jointly under the same corporation.

High-Stakes Testing – The use of a **single** test or examination (written, electronic, or demonstration) to determine an important outcome, such as a student passing a course or graduating. The use of high-stakes testing should be based on current evidence and best teaching/instructional practices; high-stakes testing is not a best educational practice and should not replace other faculty-developed evaluation methods specific to the program's curriculum (Refer to the **ACEN position on high-stakes testing** and **addendum**). **NOTE:** Third-party testing products should be used only for the purposes and within the guidelines recommended by the developer.

Implemented as Published – When policies, procedures, curricula, or other aspects of the nursing program or program of study are enacted and implemented as written (e.g., admission criteria, credit-to-contact hour requirements, or course requirements/sequencing).
Inactivation of a Nursing Program – A period of time during which no new students are admitted into a nursing program; therefore, there will be no graduates from the nursing program for an intervening period of time. A nursing education unit may inactivate a nursing program for a limited period of time See *Policy #14 Reporting Substantive Changes* on the **ACEN Policy Page**.

Inactivation of an Off-Campus Instructional Site – A period of time during which a nursing education unit does not offer **1)** a nursing program and the nursing courses for the nursing program or **2)** a nursing program option and the nursing courses for the nursing program option at an approved off-campus instructional site/location for five academic years. See *Policy #14 Reporting Substantive Changes* on the **ACEN Policy Page** for additional information and the procedures that must be followed.

Inclusion - The intentional and continuing efforts in which all individuals respect, support, and value others. An inclusive environment provides equitable access to opportunities and resources and offers respect in words and actions for all.

Information Literacy – The ability to identify appropriate sources of information, evaluate the quality and applicability of the information obtained, and use the information in nursing practice to enhance patient care and outcomes.

Initial Accreditation – The first time that a program is accredited with the ACEN; the period of accreditation is for five years. See ACEN Policy #4 on the **ACEN Policy Page**.
Interprofessional Collaboration – Sharing of information among two or more healthcare professionals from different disciplines who are working together with a common purpose and mutual respect to improve patient outcomes.

Job Placement Rate – Percentage of graduates, typically within one year of graduation who are employed in a position for which a nursing program prepared them. Faculty must demonstrate a good

faith effort to contact all program graduates to determine job placement rates, irrespective of licensure/certification examination completion or enrollment in another program of study.

Justification – Providing a reasonable explanation for actions, policies, and/or processes as determined by faculty and employed by the nursing education program. Considerations for a reasonable explanation or justification for actions include, but are not limited to student demographics and enrollment, and best educational practices (e.g., assessment, instruction).

Learning Activities – Goal-directed activities assigned to students that are required for course completion and are designed to enhance or facilitate learning in alignment with the course student learning outcomes. Major categories of learning activities include **1)** activities where learners are doing or observing something (e.g., clinical practice, presentations); **2)** activities where learners are reflecting on the meaning of their learning (e.g., self-reflection, peer review); or **3)** combined active and reflective learning (e.g., case study, research paper, small group discussion).

Learning Environments and Experiences, Clinical/Practicum – Direct, nursing care specific to the level of licensure and/or education, including engagement in planned learning activities required of nursing students in all degree or certificate granting nursing education programs, regardless of the student's licensure status at the time of admission. Settings include, but are not limited to, acute-care and specialty hospitals, long-term care facilities, ambulatory care centers, physician offices, communities, and home health care. Clinical/practicum learning experiences should engage nursing students in the cognitive, affective, and psychomotor work of nursing appropriate for the level at which students are being prepared. Pre-licensure clinical/practicum experiences focus on direct engagement with patients and healthcare team members to impact health outcomes. Post-licensure clinical/practicum experiences include direct engagement with others who supervise, provide, or are preparing to provide direct patient care (e.g., staff nurses, nursing students, nurse managers).

Consistent with the level of academic study and the roles and responsibilities after graduation, clinical/practicum experiences should prepare graduates for practice in the care of patients/clients including a/an: individual, family, group, or populations, and should support students' attainment of the identified end-of-program student learning outcomes and/or role-specific nursing competencies. Clinical/practicum experiences are overseen by qualified nursing faculty and may include assistance from preceptors who provide feedback to students in support of their learning and professional development. **NOTE:** Refer to the **ACEN position statement on clinical/practicum**.

> **Clinical/practicum learning experiences are required for all nursing students enrolled in any undergraduate or graduate program, including all students enrolled in post-licensure undergraduate programs, graduate programs, all program options in any undergraduate and graduate programs, and/or certificate program options.**

Learning Environments and Experiences, Skills and/or Simulation Laboratory – Opportunities for students to learn about nursing care in settings designed to look, feel, and/or function as a real-world practice environment, offering real-world practice learning experiences, which may include the use of standardized patients, as well as low-fidelity, mid-fidelity, high-fidelity and/or virtual simulation equipment. These experiences facilitate students' application of knowledge, skills, and behaviors in the care of patients/clients including a/an: individual, family, group, or populations, and support the end-of-program student learning outcomes and and/or role-specific nursing competencies in a controlled and low-risk environment.

- **High-fidelity simulation**: Practice learning experiences that incorporate a full-body computerized patient simulator that mimics the patient's responses to the student's actions.
- **Mid-fidelity simulation**: Practice learning experiences that incorporate a computerized patient simulator with basic physiological functions, such as computer-based self-directed learning systems.
- **Low-fidelity simulation**: Practice learning experiences that utilize static mannequins or task-trainers for basic nursing skills.
- **Standardized patient**: Practice learning experiences where a person is trained to portray specific health conditions, and the student interacts with the standardized patient to demonstrate mastery of desired learning outcomes.
- **Virtual simulation**: Practice learning experiences that are computer-generated simulations with virtual (e.g., three-dimensional images) patients and/or care environments for the development of nursing knowledge and skills.

Licensure – The process by which a governmental agency gives affirmation to the public that the individuals engaged in an occupation or profession are legally authorized to practice in a specific jurisdiction.

Location – Sites where a nursing program is delivered, in whole or part, including the main location, off-campus instructional sites/locations, and branch campuses. **NOTE:** See *ACEN Policy #14 Reporting Substantive Changes* on the **ACEN Policy Page** or additional information and the procedures that must be followed when adding or closing an additional location. *See* **Branch Campus/Off-Campus Instructional Site**.

Methods of Delivery – The teaching/instructional modalities used by faculty to deliver instruction of a nursing course. **NOTE:** See *ACEN Policy #14 Reporting Substantive Change* on the **ACEN Policy Page** for additional information about the procedures that must be followed when a program changes its methods of delivery from the methods of delivery currently approved by the ACEN.

Traditional Education – A method for delivering nursing courses in which instruction occurs when a student and instructor are physically in the same place at the same time (e.g., face-to-face). This method of delivery may be web-enhanced/supported, where the instruction occurs through traditional face-to-face delivery, and students are expected to attend the in-person class. The learning management system (LMS), or other web-based system, is used to support the course such as posting syllabi and calendars for easy student access. In addition, students may also be expected to participate in web-based learning activities, such as discussion boards or learning activities posted online.

Distance Education – A method of delivery of nursing courses in which instruction occurs when a student and instructor are not physically in the same place. Instruction may be synchronous or asynchronous. Distance education uses one or more distance technology (e.g., one-way, or two-way transmissions, audio, video, the Internet) to support **regular and substantive** interactions between the instructor and the students.

Substantive Interaction – Engaging students in teaching, learning, and assessment, consistent with the content under discussion and includes at least two of the following:

1. Providing direct instruction;
2. Assessing or providing feedback on a student's coursework;

3. Providing information or responding to questions about the content of a course or competency;
4. Facilitating a group discussion regarding the content of a course or competency; or
5. Providing other teaching/instructional activities considered common practice and/or best practice.

Regular Interaction

1. Providing the opportunity for substantive interactions with the student on a predictable and scheduled basis commensurate with the length of time and the amount of content in the course.
2. Monitoring the student's academic engagement, success, and ensuring that an instructor is responsible for promptly and proactively engaging in substantive interaction with the student when needed based on such monitoring or upon request by the student.

Hybrid Education – A method of delivery for nursing courses in which instruction occurs using both distance and traditional education methods of delivery. Hybrid education, regardless of the percentage of the traditional education time it replaces, is considered a form of distance education by the ACEN.

Mentored – A formal or informal process through which a more experienced individual advises, guides, and/or coaches another individual who is less experienced or who is transitioning to a new position or employment setting.

Mission, Goals and /or Values – Description of the beliefs, philosophy, and underpinnings that describes the unique characteristics and/or purpose of a nursing program, nursing education unit, and/or governing organization.

Non-Compliance – When the nursing program does not adequately meet the intent of the ACEN Standards and Criteria as determined by peer evaluators after a review of the program's supporting evidence and the application of professional judgement.

Non-Discriminatory – Policies, processes, and practices that are fair and equitable for students regardless of personal or social identifiers including but not limited to gender, race, ethnicity, and/or religion.

Nurse Administrator – The nurse with responsibility and authority for the administrative and teaching/instructional activities of a nursing program or a nursing education unit within a single governing organization (e.g., dean, chairperson, director). An individual may serve as the nurse administrator for only one separately accredited nursing program or nursing education unit with ACEN-accredited programs. See **Single Nursing Program**.

Nursing Program Administration Support Faculty/Staff – Designated nursing faculty and/or staff who are assigned administrative support responsibilities and who report directly to the nurse administrator. Administrative support responsibilities for the program include assignments such as program coordination, budget management, process management such as clinical coordination or simulation, and management/oversight of human resources. This does not include student support personnel who also assist programs/students outside of the nursing program.

Nursing Program Option – The program of study designed for a subset of students within a nursing program type. Examples include, but are not limited to, prelicensure/traditional program option, LPN-to-RN program option, RN-to-BSN program option, evening/weekend program option, full- and part-time program options, face-to-face, or online program options. **NOTE:** See *ACEN Policy #14 Reporting Substantive Change* on the **ACEN Policy Page** for additional information and the procedures that must be followed when adding or closing a nursing program option.

Nursing Program Type – The educational level (practical, diploma, associate, baccalaureate, master's post-master's certificate, clinical doctorate, DNP specialist certificate program of study) offered by a governing organization that leads to the awarding of a certificate, diploma, or degree.

Off-Campus Instructional Site – Any location that is physically apart from the main campus of the governing organization where a nursing program is offered, in whole or part. See definition of Branch Campus, which is not an off-campus instructional site. **NOTE:** See *ACEN Policy #14 Reporting Substantive Change* on the **ACEN Policy Page** for additional information and the procedures that must be followed when adding or closing an off-campus instructional site/location.

Pass Rates, Examinations

- **Certification Examination Pass Rates** – The number of graduates, shown as a percent, who were successful on a particular certification examination when required for practice.
- **Licensure Examination Pass Rates** – The number of graduates, shown as a percent, who were successful on a licensure examination required for practice in a particular nation/territory and at the level for which the program prepared the graduates.

Philosophy – A description of the values, beliefs, and underpinnings of the nursing faculty's practice and patient care ethics for the nursing program.

Policies, Admission – Nursing program or governing organization policies that describe non-discriminatory requirements for admission to a nursing program. Admission requirements may include, but are not limited to, transfer of credit, program prerequisites, GPA, pre-entry examination results, health status (e.g., vaccinations), criminal background checks, licensure status, and gap analysis process.

Policies, Graduation – Nursing program and/or governing organization policies that describe non-discriminatory requirements for graduation from a nursing program. Graduation requirements may include, but are not limited to, course completion requirements (major and general education) and other nursing program or governing organization requirements. **NOTE:** High-stakes testing should not be used as a graduation requirement.

Policies, Progression – Nursing program and/or governing organization policies that describe non-discriminatory requirements for progression within a nursing program. Progression requirements may include, but are not limited to, GPA, minimum course grade requirements, minimum examination score or average requirements, academic honesty, and readmission processes. **NOTE**: High-stakes testing should not be used for program progression.

Policies, Technology Requirements – Nursing program and/or governing organization policies that describe non-discriminatory requirements for student access to technology while enrolled in a nursing program. Technology requirements may include, but are not limited to, internet access, hardware,

software or applications, browsers, virus protection, student identification verification technology and/or fees, and memory or storage capacity.

Policies, Transfer of Credit – Nursing program and/or governing organization policies that describe non-discriminatory specifications under which the governing organization/nursing program will accept courses/credits that were earned at another governing organization/nursing program. The credit(s) from the former governing organization/nursing program may or may not be accepted by the new governing organization/nursing program. Each governing organization/nursing program makes its own decisions about accepting transfer credit. **NOTE:** The ACEN does not have a policy about acceptance of transfer credits from non-accredited nursing education programs, this decision is up to the program as allowed by the governing organization.

Post-Master's Certificate (PMC) – A selected series of courses that are a subset of courses within a master's program specific to one area of practice (e.g., certificates in nursing administration, certificates in nursing education, certificate as a family nurse practitioner) that are taken after an individual is already credentialed with a master's degree in nursing in a different specialty.

Preceptor – An educationally and experientially qualified person who has received orientation to function as a clinical supervisor during a clinical/practicum experience in lieu of having a faculty member onsite with students. Preceptors serve over a specified period of time, and they are a resource and role model for nursing students; in addition, preceptors typically provide input into the evaluation of student performance. While a student can have input into identifying preceptors, it is the responsibility of the nursing program faculty/leaders to identify and arrange for preceptors and to ensure all students have preceptors. **NOTE:** Nursing programs use a variety of terms to describe individuals who act in a preceptor capacity. Such titles include, but are not limited to, mentors, coaches, and volunteers.

Prerequisite Course – A course that is required prior to enrolling in another course. **NOTE:** All credit courses that are required prerequisites and/or requirements for admission to a nursing program must be included in the total number of credit/quarter/clock hours required for completion of the nursing program.

Professional Identity – A sense of oneself, and in relationship with others, that's influenced by the characteristics, norms, and values of the nursing profession, resulting in an individual thinking, acting, and feeling like a nurse.[1]

[1]Godfrey N, Young E. Professional identity. In: Giddens JF, ed. *Concepts for Nursing Practice*. 3rd ed. New York, NY: Elsevier; 2020.

Program Completion Rate – Program completion rate is the calculation of the percentage of students who enter a program of study and complete the program of study in the advertised program length (i.e., on-time). Calculation of the program complete rate begins with a student's enrollment in the first nursing course and at the time when a student can no longer receive a 100% tuition refund for the first nursing course regardless of the source of funds used to pay the students' tuition. The moment in time may be referred to as the census date or something similar. The calculation ends with students' completion of all requirements for conferral of a certificate, diploma, or degree.

Program Outcomes – Measurable indicators that reflect the extent to which the purposes of the nursing program are achieved and by which nursing program effectiveness is documented. The ACEN specifies and requires the assessment of the following nursing program outcomes:

- **Undergraduate programs**:
    - licensure examination pass rate;

    - program completion rate; and
    - job placement rate.
- **Graduate programs**:
    - licensure examination pass rate and/or certification examination pass rate;
    - program completion rate; and
    - job placement rate.
    - Graduate programs with APRN options are also expected to adhere to any monitoring, such as alumni surveys, required by the current NTF Standards for Quality NP Education and other specialty organizations, as applicable.
- The assessment of additional program outcomes is the choice of the governing organization and nursing education unit. **NOTE:** See *ACEN Policy #29 Advertising and Recruitment of Students* on the **ACEN Policy Page**.

Program of Study – All nursing, general education, prerequisite, and/or core courses required for conferral of the certificate, diploma, or degree. Also includes the total number of credit/quarter/clock hours required to complete the defined certificate, diploma, or degree allocated over a specific number of academic terms (semester/trimester/quarter).

> **NOTE:** For undergraduate nursing programs, if first aid certification, cardiopulmonary resuscitation (CPR) certification, being a *certified nursing assistant* (CNA), or being a medical assistant (MA) is/are required prerequisites for admission, these requirements/courses do not count toward the total number of credit/quarter/clock hours for the defined nursing program of study, whether these requirements/courses are credit or non-credit. All other credit courses that are required prerequisites and/or requirements for admission (e.g., general biology, medical terminology) do count toward the total number of credit/quarter/clock hours.
>
> When first aid, CPR, and CNA certification are part of the defined nursing program of study or taken as elective courses that are part of the defined nursing program of study, these courses count toward the total number of credit/quarter/clock hours.

Public – Any individual or group with an interest in, but no direct responsibility for, the development or delivery of a nursing program (e.g., patients/clients, non-nursing students, non-nursing faculty, healthcare providers, and citizens).

Public Information – Information available to the public as required by ACEN policy or applicable regulatory agency. May include, but is not limited, to admission criteria, graduation criteria, program of study, and program outcomes data.

Published – All forms of information made available by a nursing program and/or governing organization, including easily accessible paper and/or electronic sources intended to inform the public about the program.

Qualified, Educationally – The required academic degree(s) that prepare individuals for their assigned roles and responsibilities as defined by the governing organization and state regulatory agencies.

Qualified, Experientially – Documented current or recent direct engagement in a significant manner in nursing experiences for those whose roles and responsibilities include teaching, administering, and/or precepting students. The experience-based activities and experiences that enhance one's knowledge, skills, and/or abilities to perform assigned roles and responsibilities.

Reactivation of a Nursing Program – After a period of inactivity, the process of admitting new students into a nursing program. If a nursing education unit does not reactivate a nursing program within the period of time specified by the ACEN, the nursing program is considered closed and is removed from the list of accredited nursing programs. For a deactivated nursing program to be reactivated, the nursing education unit must reapply for accreditation with the ACEN. **NOTE:** See *Policy #14 Reporting Substantive Change* on the **ACEN Policy Page** for additional information and the procedures that must be followed to reactivate a nursing program.

Reactivation of an Off-Campus Instructional Site – After a period of inactivity, the process of offering **1)** a nursing program and the nursing courses for the nursing program or **2)** a nursing program option and the nursing courses for the nursing program option at an approved off-campus instructional site/location. If a nursing education unit does not reactivate the off-campus instructional site/location within five academic years of no students being enrolled and no nursing courses being offered at the off-campus instructional site/location, then the nursing program must follow the substantive change process to reinstate the off-campus instructional site/location. **NOTE:** See *ACEN Policy #14 Reporting Substantive Change* on the **ACEN Policy Page** for additional information and the procedures that must be followed to reactivate an off-campus instructional site/location.

Regulatory Agencies – Governmental agencies that have jurisdictional/legal authority over a nursing program, such as a board of nursing or ministry of education. **NOTE**: The type of agency and/or the number of agencies may vary depending upon the state or regulatory agencies in another country.

Reports to the ACEN

Annual Report – An annual process where all ACEN-accredited programs are required to provide requested information to the ACEN. Examples of required information include program outcome performance and program enrollment. **NOTE:** See Policy #24 Assessment of the Adequacy of Standards and Criteria, ACEN process, and Practices on the **ACEN Policy Page**.

Closing Report – A written plan developed by a governing organization/nursing education unit that provides for the equitable treatment of students should a governing organization/nursing education unit, or a nursing program location that provides 50% or more of a nursing program, cease to operate before all students have completed their nursing program of study. The Closing Report may include, if required by the governing organization's accrediting agency, a teach-out agreement between governing organizations/nursing education units. This applies to the closure of a governing organization, an off-campus instructional site/location, a branch campus, or a nursing program. The Closing Report requires ACEN approval in advance of implementation. See *Policy #16 Program Closing* on the **ACEN Policy Page** for additional information and the procedures that must be followed.

Focused Site Visit Report – A report that must be written by the program faculty prior to a scheduled Focused Visit (in-person or virtual). The Focused Site Visit Report must address selected Standards and Criteria as determined by the ACEN. Programs required to write a Focused Site Visit Report will be provided additional information about the Standards and Criteria to be addressed.

Follow-Up Report – A report that must be written by the program faculty as a follow-up to an accreditation decision of continuing accreditation with conditions. A Follow-Up Report must include all Criteria of the Standard(s) that were found non-compliant and resulted in the

accreditation stipulations. Programs required to write a Follow-Up Report will be provided additional information about the timeline for submission and general expectations.

Follow-Up Visit Report – A report that must be written by the program faculty prior to a scheduled Follow-Up Visit required by the Board of Commissioners. All programs with a continuing accreditation status of warning or good cause will be required to have a Follow-Up Visit. Programs with a continuing accreditation status of conditions may be required to host a Follow-Up Visit.

Program Response – A report where the nursing program administrator and faculty provide to the ACEN a response about a Site Visit Report. The program response is the program's opportunity to identify errors of fact, clarify descriptions in the Site Visit Report, and/or provide additional information and/or supporting evidence that should be considered by the Board of Commissioners when an accreditation decision is made.

Self-Study Report – A report that must be written by the program faculty prior to an initial or continuing accreditation visit. All Criteria within all ACEN Standards must be included in a Self-Study Report.

Resources, Fiscal – The financial support required for securing and maintaining the human and physical resources (e.g., personnel, supplies, materials, equipment) and student support services necessary to ensure the achievement of the end-of-program student learning outcomes and program outcomes. Fiscal resources include, but are not limited to, tuition, fees, grants, governmental appropriations, donations, and investment earnings.

Resources, Learning and Technology –The equipment and/or materials needed to facilitate student learning and development of the necessary knowledge, skills, and behaviors to support achievement of the end-of-program student learning outcomes and program outcomes; additionally, the equipment needed by faculty and staff to fulfill their job responsibilities. Learning resources may include, but are not limited to, laboratory equipment and supplies, electronic or physical journals, databases, books, and physical or electronic media (e.g., videos). Technology resources include, but are not limited to, hardware (e.g., computers), general software or applications (e.g., word processing, presentation software), healthcare specific technology, software or applications (e.g., VSim, medication management, electronic health records), learning management systems, internet access, browsers, virus protection, and memory or electronic storage capacity.

Resources, Physical – The physical spaces needed to facilitate student learning and support student achievement of end-of-program student learning outcomes and program outcomes. Physical resources may include, but are not limited to, classrooms, laboratories, faculty and staff offices, and other common spaces used by nursing students and faculty and staff.

Role-Specific Nursing Competencies (Graduate Programs Only) – Expected, measurable levels of graduate level nursing performance that integrate knowledge, skills, and behaviors in the specialty area of study (e.g., nurse educator, nurse practitioner). Competencies may include, but are not limited to, specific knowledge areas, clinical judgments, and behaviors based upon the role and/or scope of practice consistent with the level of nursing education and applicable licensure/certification after graduation.

Single Nursing Education Unit – A unit within a governing organization that offers one or more nursing programs, where all nursing programs within the nursing education unit are administered by a single nurse administrator with the responsibility and authority for all nursing programs. If multiple programs within the nursing education unit are ACEN accredited, the overall fees for additional programs are decreased. (See the **ACEN Fee Schedule**). The ACEN will not recognize a single nursing education unit if the governing organization elects to have a different nurse administrator for one or more nursing programs. Each nursing program (with a different nurse administrator) is a separate nursing education unit for ACEN purposes. The ACEN retains the right to determine whether a nursing education unit is a single nursing education unit.

Single Nursing Program – A nursing program type that is administered within a single governing organization, regardless of the number of instructional sites used by the program. Determination of whether a nursing program is a single nursing program for ACEN purposes depends on several factors. The ACEN retains the right to determine whether a nursing program is a single nursing program. In order for students to graduate from an accredited program, each single nursing program must be individually accredited by the ACEN. Factors used by the ACEN to determine program status may include, but are not limited to:

Method of Delivery

When 51% or more of the nursing program is offered in a traditional method of delivery, the nursing program and all locations where the nursing program is offered must be in the same state and under the jurisdiction of the same state regulatory agency for nursing.

When 51% or more of the nursing program is offered through a distance education method of delivery, it is possible for the nursing program and all locations where the nursing program is offered to be in the same state or in different states, and under the same or different state regulatory agency. If two or more state regulatory agencies are involved, the nursing program must meet all the requirements set by each state regulatory agency for the nursing program.

- Academic Control – The nursing program is within a single governing organization that is accredited through an institutional accrediting agency recognized by the ACEN.
- The nursing program is located on a governing organization's main campus, off-campus instructional site(s)/location(s), and/or branch campus(es).
- A single certificate, diploma, or degree is awarded from the same governing organization to students who successfully complete the nursing program.
- The NCSBN program code or codes are specific to the accredited nursing program offered by the single governing organization.
- There is one nursing program of study for each nursing program option within the certificate, diploma, or degree conferred.
- There is one set of end-of program student learning outcomes and program outcomes utilized for by the nursing program.
- There is a systematic plan for evaluation that addresses the end-of program student learning outcomes and program outcomes for the nursing program.
- There is one nurse administrator for the nursing program. The nurse administrator must:
    - have continuous, active, responsibility and authority at all locations within the nursing program.
    - have, in conjunction with faculty, academic control of the nursing program.

    - have adequate time and resources to effectively administer the nursing program at all locations.
    - oversee the daily governing organization, nursing education unit (when applicable) and nursing program matters such as, but not limited to, personnel matters, student matters, curricular matters, and resources.
- All nursing program personnel at all locations must report to the nurse administrator.
- There is one group of faculty members for the nursing program who function as a faculty of the whole within a set of established faculty policies and decision-making processes and who have input into the curriculum development, delivery, and evaluation.
- There is a single set of policies governing all nursing students enrolled in the nursing program.

The ACEN retains the right to determine whether a nursing program is a single nursing program and whether a location at which a nursing program is offered must hold separate accreditation.

Staff – Non-faculty personnel who assist, support, and/or coordinate in nursing programs. Staff include, but are not limited to, clerical, laboratory, and administrative personnel (regardless of the individual's title or classification by the governing organization) that are part of the nursing program. **NOTE:** Governing organizations use a variety of terms to describe individuals who act in an assisting/supporting/coordinating capacity. Such titles include, but are not limited to, administrative assistants, advisors, program directors, clinical coordinator, skills laboratory coordinator, simulation coordinator, or associate nursing director, etc.

Standard – Agreed-upon expectations to measure quantity, extent, value, and educational quality.

Student Records – Student records, electronic or physical, that are maintained by the governing organization, nursing program, or third-party vendor on behalf of the nursing program, consistent with program and/or governing organization policies.

Any information alone or in combination that is linked or linkable to a specific student may be subject to state or federal privacy laws and, as applicable, measures must be taken to protect the student's privacy. Access to student records, electronic or physical, must be limited to authorized personnel to ensure the protection and confidentiality of students' records.

Student Support Services – Services available to nursing students designed to facilitate and support student success in the nursing program. May include, but is not limited to, advising, counseling, tutoring, library services, technology, and health services (mental and/or physical).

Sufficient – Enough or adequate for the purpose of achieving the end-of-program student learning outcomes and program outcomes.

Sufficient Faculty – Adequate number of full- and/or part-time faculty to support the values, mission, goals, and/or philosophy of the nursing program. Evidence of adequacy may include, but is not limited to:

- The ratio of faculty to the total number of nursing students enrolled in all the nursing courses required for a nursing program or programs;
- The faculty to student ratios for didactic, skills/simulation laboratories, and clinical/practicum experiences;

- The required workload for faculty; workload duties include, but are not limited to, teaching, advisement, administration, committee work, service, practice, research, and/or other scholarly activities.
- Required and voluntary non-teaching responsibilities required by the governing organization and/or nursing education unit;
- Adequate faculty time to implement a variety of teaching/instructional strategies and complete formative and summative student evaluation.
- Adequate faculty time to develop and review the curriculum, and assess and evaluate achievement of the end-of-program student learning outcomes and program outcomes;
- The number of faculty on required or voluntary overload and amount of required and voluntary overload for each faculty member; and
- Achievement of end-of-program student learning outcomes and program outcomes.

Sustainable Resources – The capacity of the governing organization to continuously replenish fiscal, physical, and/or human resources to meet current needs and the capacity of the governing organization to increase fiscal, physical, and/or human resources to meet future needs.

Systematic Plan for Evaluation (SPE) – A written document emphasizing the plan for ongoing, comprehensive assessment of the end-of-program student learning outcomes and program outcomes. The SPE must include assessment methods, frequency of data collection, and frequency of evaluation for each end-of-program student learning outcome and program outcome. May also include documentation of the plan's implementation (data, analysis, and actions) ***or*** indicate where that information is located.

Teaching/Instructional Strategies – Student-centered techniques and methods employed by faculty to deliver course content in support of student learning and knowledge development. Instructional strategies may be direct (e.g., mastery lecture, didactic questions, reading guides), indirect (e.g., problem-solving, concept mapping, case studies), experiential (e.g., simulations, clinical practice), interactive (e.g., role-playing, laboratory practice), and/or independent (e.g., research projects, learning modules**).**

Teach-Out Agreement – A written agreement between governing organizations/nursing education units that provides for the equitable treatment of students and a reasonable opportunity for students to complete their nursing program of study should a governing organization/nursing education unit, or a nursing program location that provides 50% or more of a nursing program offered, cease to operate before all enrolled students have completed their nursing program of study. This applies to the closure of a governing organization, an off-campus instructional site/location, a branch campus, or a nursing program. A teach-out agreement requires ACEN approval in advance of implementation. **NOTE:** See *ACEN Policy #16 Closings* on the **ACEN Policy Page** for additional information and the procedures that must be followed.

Title IV Gatekeeper – An accrediting agency recognized by the United States Department of Education as meeting the criteria established by law for that agency to fulfill one requirement for institutions and programs to participate in federal student aid programs (e.g., Direct Subsidized/Unsubsidized Loan, Direct Graduate PLUS Loan, Direct PLUS Loan, Federal Pell Grant, Federal Supplemental Educational Opportunity Grant, Federal Perkins Loan, and TEACH grants). The ACEN is a Title IV gatekeeper for a limited number of nursing programs (e.g., hospital-based diploma programs). For the majority of nursing programs, the institutional accreditor for the governing organization is the Title IV gatekeeper.

SECTION 5:
SUPPLEMENT FOR
INTERNATIONAL PROGRAMS

POSITION STATEMENT ON ACCREDITATION OF INTERNATIONAL NURSING EDUCATION PROGRAMS

The ACEN is committed to quality in all types of nursing education programs and encourages self-evaluation, peer review, and the promotion of educational equity, access, and mobility through the functions of accreditation. Recognizing that accreditation is one way of enhancing the quality of nursing education and is a way to facilitate the nursing profession being the best and strongest it can be worldwide, the ACEN welcomes nursing programs outside the United States and U.S. Territories to pursue international nursing accreditation.

The ACEN asserts that accreditation is a voluntary, self-regulatory process by which non-governmental entities recognize educational institutions or programs that have been found to meet or exceed standards and criteria for educational quality. The ACEN acknowledges that nursing education programs located outside of the United States and its Territories can benefit from adherence to best practices and generally accepted guidelines for nursing education incorporated in the ACEN Standards and Criteria. To fulfill its mission to support the interests of nursing education, nursing practice, and the public, the ACEN seeks to broaden the impact of accreditation to encompass nursing education programs across the globe.

Therefore, in a spirit of cooperation, openness, and mutual respect consistent with its organizational values, the ACEN extends accreditation and related services to international nursing education programs.

Original Statement: February 2010
Revised August 2018
Revised August 2022
Revised July 2025

INTERNATIONAL CANDIDACY PROCESSES AND PROCEDURES

Nursing programs located outside the U.S. considering accreditation by the ACEN should contact the ACEN to begin the process. The international candidacy process has three steps:

STEP 1: ESTABLISHING ELIGIBILITY

All nursing education programs accredited by the ACEN must meet the following eligibility requirements as listed below:

- Placement within a governing organization that is accredited by an approved accrediting agency or holds unconditional approval by the appropriate regulatory agency that has legal authority for education programs within the country.
- Placement within a governing organization that is authorized to grant the credential awarded at the completion of the program.

Nursing education programs located outside the United States and its Territories must meet the following additional eligibility requirements.

- Program faculty and students must speak and understand English. The program must produce all documents and written materials required for the accreditation processes in English.
- The region in which the program is located must be safe for travel as identified by the U.S. State Department at the time of the travel for the ACEN peer evaluators and/or staff.
- Program must agree to host a minimum of two onsite visits, including a mandatory onsite Advisory Visit for International Candidacy and the onsite initial accreditation visit. [**NOTE**: Nursing education units seeking accreditation for a second nursing program have the option of declining the Advisory Visit for International Candidacy as a component of the candidacy process.]
- The program has financial resources adequate to meet all fiscal responsibilities related to the ACEN accreditation processes including International Candidacy Eligibility Application, Candidacy, and two onsite visits.
- The nursing program must establish and provide documentation that it has obtained requisite governmental and regulatory approval to seek ACEN accreditation, if required.

To verify eligibility, the international program must complete and submit the International Candidacy Eligibility Application to determine their eligibility for International Candidacy. The International Candidacy Eligibility Application must be accompanied by an **International Candidacy Eligibility Application fee**. Once the ACEN has received the application fee, the application will be reviewed. This process takes approximately two business weeks.

ACEN determines a program's eligibility and suitability for ACEN accreditation by reviewing the **International Candidacy Eligibility Application.** Possible results of the review include the following:

a. The program is deemed eligible to pursue International Candidacy.
b. The program is asked to submit additional information/clarification.
c. The program is deemed ineligible to pursue International Candidacy and will be withdrawn from the process.

Step 2: Candidacy Presentation and International Candidacy Advisory Visit

International nursing education programs determined to be eligible for International Candidacy will be scheduled for a mandatory onsite International Candidacy Advisory Visit. In preparation for the onsite International Candidacy Advisory Visit, programs will submit an International Candidacy Presentation, which will be provided to reviewers a minimum of six weeks prior to the onsite visit.

The International Candidacy Presentation will address the same selected Criteria as other programs pursuing Candidacy with the ACEN. See the **Candidacy Presentation – Written Instructions.**

The onsite International Candidacy Advisory Visit will be conducted by one or two ACEN representatives. The purpose of the onsite International Candidacy Advisory Visit is to determine whether a program may proceed with the Candidacy process. Following the onsite International Candidacy Advisory Visit, an International Candidacy Advisory Visit for International Candidacy Report is submitted by the reviewers.

Based on the recommendations of the reviewers in the International Candidacy Advisory Visit Report, the ACEN will take one of the following actions:

1. Approval of International Candidacy: The nursing program **(a)** demonstrated it is currently compliant with the selected ACEN Standards and Criteria reviewed or demonstrated the potential to be compliant with the ACEN Standards and Criteria reviewed within the Candidacy timeframe, and **(b)** demonstrated the potential to achieve ACEN accreditation based upon the ACEN Standards and Criteria reviewed. Approval of International Candidacy does not guarantee that the program will achieve initial accreditation.

2. Extension of Time to Achieve Candidacy (Deferral): The nursing program **(a)** made an inconsistent presentation to demonstrate it is currently compliant with the selected ACEN Standards and Criteria reviewed or made an inconsistent presentation to demonstrate the potential to be compliant with the ACEN Standards and Criteria reviewed during the Candidacy timeframe, and **(b)** made an inconsistent presentation to demonstrate the potential to achieve ACEN accreditation based upon the ACEN Standards and Criteria reviewed. The program is advised to complete specified actions/implement specific changes or modifications; the program will need to

resubmit the Candidacy Presentation within one year of notification (deferral). To proceed, the program must submit an International Candidacy Presentation Addendum within one year of notification describing how the recommended actions/concerns have been addressed. If the Addendum is approved by the ACEN Directors, International Candidacy is approved with the onsite accreditation visit to be scheduled within the Candidacy timeframe as noted above. If the Addendum is not approved, then the program is disapproved, and the ACEN will withdraw the program from the International Candidacy process.

3. Disapproval of International Candidacy: The nursing program **(a)** did not demonstrate it is currently compliant with the selected ACEN Standards and Criteria reviewed or did not demonstrate the potential to be compliant with the ACEN Standards and Criteria the Candidacy timeframe, and **(b)** did not demonstrate the potential to achieve ACEN accreditation based upon the ACEN Standards and Criteria reviewed. ACEN withdraws the program from the candidacy process. No fees will be refunded if a program is withdrawn.

4. Program Ineligibility: ACEN withdraws the program from the International Candidacy process. No fees will be refunded if a program is withdrawn.

NOTE: If a program's Candidacy expires prior to scheduling an initial accreditation site visit, then the program must restart the candidacy process to renew its candidate status. The Candidacy process can be restarted at any time after either being disapproved, withdrawn, or when the program's Candidacy has expired.

Additional information about the International Candidacy Advisory Visit:

The section of the *ACEN Accreditation Manual* related to the Site Visit applies to all programs located outside the United States and its Territories.

Length of Visit

International Candidacy Advisory Visits for nursing programs located outside the United States and its Territories will be a minimum of five days for a single program. The onsite portion of the visit will be a minimum of three full days. A nursing education unit with more than a single nursing program or multiple locations may require additional days.

Assignment of Site Visit Team

Peer evaluators for international programs will be selected from a pool of peer evaluators. The number of peer evaluators will be determined by the ACEN and will be based on the program type(s), number of additional locations, and on-ground transportation logistics.

NOTE: The International Candidacy Advisory Visit will have one or two ACEN reviewers assigned as noted above.

Responsibilities

The responsibilities of the Team Chair, Team Members, and nursing program as listed in the ACEN Accreditation Manual apply to all nursing programs, including those located outside the United States and its Territories. The following additional responsibilities apply in reference to visit arrangements:

Please note that all international nursing programs must pay all fees associated with the International Candidacy Advisory Visit prior to any visit taking place. If any invoice received from the ACEN is not paid within an acceptable timeframe prior to any visit, the visit will be cancelled. The **schedule of fees** for international programs is used for the components of the visit.

Area	Responsibility	
	Nursing Education Unit	**Peer Evaluator/ACEN**
Travel	Responsible for all travel costs incurred for each peer evaluator; air travel will be at business class or higher for each evaluator; International Candidacy Advisory Visit fees and airline travel expenses will be submitted prior to the International Candidacy Advisory Visit; additional fees incurred during the International Candidacy Advisory Visit will be submitted upon receipt of the invoice. Responsible for arranging all local and on-ground transportation during the onsite visits subject to ACEN approval.	Responsible for working with the ACEN staff to book airfare in accordance with ACEN travel policy (ACEN books international travel for the peer evaluator but works with the peer evaluator to determine the itinerary).
Hotel Accommodations	Responsible for arranging hotel accommodations for reviewers/peer evaluators following confirmation of visit dates and providing confirmation information to the Team Chair. Responsible for directly paying the costs for hotel accommodations; accommodations are subject to ACEN approval. Accommodations must include a separate, private room for each reviewer/peer evaluator at a hotel pre-approved by ACEN.	
Food/Beverages	Provide customary food/beverages during the hours that reviewers/peer evaluators are on-campus or visiting clinical settings (e.g., lunch and bottled water); may make arrangements for restaurant(s) at hotel to be included in room arrangements (e.g., breakfast, dinner).	Food not provided by the program during the site visit will be invoiced to the program; reviewers/peer evaluators will be reimbursed for their expenses.
Interpreter and Translator Services	Responsible for providing and arranging professional interpreter services/devices during the visit as needed; interpreter and translator services are subject to ACEN approval.	

Cultural Sensitivity	Provide information in advance of each visit related to customs, traditions, and expectations related to but not limited to dress and food.	Familiarization with local customs and traditions; review cultural packet provided by the ACEN prior to the visit. Abide by customs and traditions to the fullest extent possible during the onsite visit.
Agenda for International Candidacy Advisory Visit	Proposed detailed agenda for each visit due to ACEN a minimum of eight weeks in advance of the visit. Responsible for arranging interviews between reviewer/peer evaluators and the nurse administrator, administrators of the governing organization, faculty, clinical agency representatives, current students, graduates, public, general education faculty, and student services personnel. Agenda should include time for reviewer/peer evaluators to take breaks, review program materials/documents as well as travel to/from hotel/college and all scheduled meetings on the agenda. See the **ACEN Program Guidelines** for additional information.	Team Chair drafts agenda in collaboration with the nurse administrator.
Security	Prior to reviewer/peer evaluators' travel, assessment will be made at the time of the visit to determine security needs for reviewers/peer evaluators. Arrangements and associated costs are the responsibility of the nursing program. All security arrangements are subject to ACEN approval.	

Substantive Change During Candidacy

Programs approved for Candidacy by the ACEN must notify the ACEN of changes that occur in the program during the entire Candidacy process; eligibility for both Candidacy and Candidate status are based upon the information provided in the Candidacy Eligibility Application or the Candidacy Presentation. Changes that occur can affect the program's eligibility to pursue and/or achieve initial accreditation. See ACEN *Policy #34 Candidacy for Governing Organization/Nursing Program Seeking Initial Accreditation* and *Policy #3 Eligibility for Initial or Continuing Accreditation*. Go to the **ACEN Accreditation Policies Website Page**.

INITIAL AND CONTINUING ACCREDITATION VISITS

SELF-REVIEW AND SELF-STUDY REPORT

The sections of the *ACEN Accreditation Manual* related to the self-review and Self-Study Report apply to all programs, including those located outside the United States and its Territories. All programs electing to participate in accreditation activities are required to abide by the policies (**Visit the ACEN Policies Page**) and procedures as outlined in the **ACEN Accreditation Manual.**

Length of Visit

International Accreditation visits for nursing programs located outside the United States and its Territories will be a minimum of five days for a single program. The onsite portion of the visit will be a minimum of three full days. A nursing education unit with more than a single nursing program or multiple locations may require additional days.

Assignment of Site Visit Team

Peer evaluators for international programs will be selected from a pool of peer evaluators. The number of peer evaluators will be determined by the ACEN and will be based on the program type(s), number of additional locations, and on-ground transportation logistics.

Responsibilities

The responsibilities of the Team Chair, Team Members, and nursing program as listed in the ACEN Accreditation Manual apply to all nursing programs, including those located outside the United States and its Territories. The following additional responsibilities apply in reference to visit arrangements:

Please note that all international nursing programs must pay all fees associated with the International Candidacy Advisory Visit and the accreditation site visit prior to any visit taking place. If any invoice received from the ACEN is not paid within an acceptable timeframe prior to any visit, the visit will be cancelled. The **schedule of fees** for international programs is available.

Area	Responsibility	
	Nursing Education Unit	Peer Evaluator/ACEN
Travel	Responsible for all travel costs incurred for each peer evaluator; air travel will be business class or higher for each evaluator; International Candidacy Advisory Visit fees and airline travel expenses will be submitted prior to the International Candidacy Advisory Visit; additional fees incurred during the International Candidacy Advisory Visit will be submitted upon receipt of the invoice.	Responsible for working with the ACEN staff to book airfare in accordance with ACEN travel policy (ACEN books international travel for the peer evaluator but works with the peer evaluator to determine the itinerary)

	Responsible for arranging all local and on-ground transportation during the onsite visits subject to ACEN approval.	
Hotel Accommodations	Responsible for arranging hotel accommodations for reviewers/peer evaluators following confirmation of visit dates and providing confirmation information to the Team Chair. Accommodations must include a separate, private room for each reviewer/peer evaluator at a hotel pre-approved by ACEN Responsible for directly paying the costs for hotel accommodations; accommodations are subject to ACEN approval	
Food/Beverages	Provide customary food/beverages during the hours that reviewers/peer evaluators are on-campus or visiting clinical settings (e.g., lunch and bottled water); may make arrangements for restaurant(s) at hotel to be included in room arrangements (e.g., breakfast, dinner)	Food not provided by the program during the site visit will be invoiced to the program; reviewers/peer evaluators will be reimbursed for their expenses.
Interpreter and Translator Services	Responsible for providing and arranging professional interpreter services/devices during the visit as needed; interpreter and translator services are subject to ACEN approval	
Cultural Sensitivity	Provide information in advance of each visit related to customs, traditions, and expectations related to but not limited to dress and food	Familiarization with local customs and traditions; review cultural packet provided by the ACEN prior to the visit. Abide by customs and traditions to the fullest extent possible during the onsite visit.
Agenda for International Candidacy Advisory Visit	Proposed detailed agenda for each visit due to ACEN a minimum of eight weeks in advance of the visit. Responsible for arranging interviews between reviewer/peer evaluators and the nurse administrator, administrators of the governing organization, faculty, clinical agency representatives, current students, graduates, public, general education faculty, and student services personnel. Agenda must include time for reviewer/peer evaluators to take breaks, review program materials/documents as well as travel to/from hotel/college and all scheduled meetings on the agenda. See the **ACEN Program Guidelines** for additional information.	Team Chair drafts agenda in collaboration with the nurse administrator.
Security	Prior to reviewer/peer evaluators' travel, assessment will be made at the time of the visit to determine security needs for reviewers/peer evaluators. Arrangements and associated costs are the responsibility of the nursing program. All security arrangements are subject to ACEN approval.	