ACEN®

GUIDELINES FOR THE PREPARATION OF WRITTEN REPORTS UTILIZING THE 2017 ACEN STANDARDS AND CRITERIA

PURPOSE

This guide provides a review of the Standards and Criteria and includes sample focused questions and examples of potential supporting evidence for each Criterion in all Standards. This guide can be used by programs to facilitate preparation of any type of written report for the ACEN (i.e., Candidacy Presentations, Self-Study Reports, Focused Visit Reports, and Follow-Up Reports).

Note: *Terms that are written in* [purple](#) *are defined in the **ACEN Glossary**. Documents that are written in* [blue](#) *are documents and information that are available on the **ACEN Website**. Faculty are encouraged to review and use the ACEN Glossary and templates available on the ACEN Website when writing a report for the ACEN.*

GENERAL INFORMATION

Written reports are submitted to the ACEN in the form of Candidacy Presentations, Self-Study Reports, Focused Visit Reports, and Follow-Up Reports. Only the Self-Study Report for initial or continuing accreditation requires the submission of a written report inclusive of all Standards and Criteria; all other written reports will include only selected Standards and Criteria specific to the type of report being submitted. This guide should be used as a reference to assist in preparing and writing a report for any ACEN purpose. All written reports should be based on intentional reflection and evaluation of a program's compliance with all, or selected, Standards and Criteria. Further, written reports should represent the combined efforts of the governing organization administrators, nursing education unit administrators, faculty, staff, students, and other individuals concerned with the nursing program. Broad participation in the writing of reports for the ACEN leads to an understanding of the total program. A written report should provide the reader with a clear understanding of the structure and function of the nursing education program as it relates to the Standards and Criteria and should include a concise description of the extent to which the program is in compliance with the Standards and Criteria.

Written reports are critical reference points for documentation of the program's compliance with the Standards and Criteria. The ACEN accreditation process is a peer review process, and the written report is a critical point of reference for peer evaluators and the ACEN staff. Peer evaluators who will review each written report include those participating in an onsite review of the program, those serving on the Evaluation Review Panel, and the Board of Commissioners. The ACEN staff also review written reports to determine if a program meets the threshold for Candidacy and to identify strategies the program can use to better describe its compliance with the Standards and Criteria for peer evaluators. Information about the accreditation process is available on the ACEN website.

Any written report submitted to the ACEN must include:

1. Narrative that addresses each required Criterion. The required Criteria will vary based on the type of report submitted: refer to the instructions for each report type, available on the ACEN website, for additional information. The narrative should *minimally* incorporate the program's response to the focused questions presented in this document.

2. Required supporting evidence for selected Criteria are as noted below. The program may

include additional (optional) evidence that best describe or support how the program is in compliance with the Standards and Criteria.

3. *For programs with an onsite review* (i.e., initial or continuing accreditation site visit, focused visit, follow-up visit), all non-confidential supporting evidence for each Criterion should be made available in an electronic format to peer evaluators at the time the written report is submitted. Please refer to the instructions for each report type for additional information.

Required evidence has been identified for programs writing to selected Standards and/or Criteria. These required documents provide peer evaluators with critical information about the program's compliance with the identified Standards. These documents are *only required* if a program is writing about its compliance with selected Criteria in Standards 2, 4, and/or 6. When required, the evidence includes:

- Standard 2 Faculty and Staff – a **Faculty Profile Table**. The required format for the table is available on the ACEN website, and the program should develop the table using the current requirements.
- Standard 4 Curriculum – abbreviated syllabi (1–2 pages per course) for each nursing course in the curriculum. Abbreviated nursing course syllabi must minimally include:
  a. Course name and number;
  b. Credit/clock hours related to didactic, skills/laboratory, and clinical;
  c. Course-specific prerequisites/co-requisites;
  d. Course description;
  e. Course objectives/outcomes;
  f. Methods of evaluation, including information regarding how each contributes to the overall course grade; and
  g. Topical outline for course content.
- Standard 6 Outcomes – a Systematic Plan of Evaluation (SPE), inclusive of all the elements outlined in Standard 6.

Included in this guide are focused questions, information on required evidence, and examples of sources of potential supporting evidence specific to each Criterion that can be used to guide program faculty in ascertaining, describing, and documenting compliance with all, or selected, Standards and Criteria. Information and instructions specific to each type of written report (Candidacy Presentation, Self-Study Reports, Focused Visit Reports, and Follow-Up Reports) are available on the ACEN website and should be used in conjunction with this guide when a program is preparing a written report for submission. In addition, a sample written report template, inclusive of suggested tables, is included in these guidelines.

FOCUSED QUESTIONS

The focused questions are designed to illustrate the essential components of each Criterion and can be used to guide the faculty as they think about and evaluate the program's compliance with each Criterion. **The focused questions in this guide should not be the only lens through which the Criteria are evaluated and explored as they are not all-inclusive; program leaders and nursing faculty need to consider their situation and program and write the report accordingly**. However, the focused questions do provide some guidance for ensuring that the critical aspects of each Criterion are considered when program faculty evaluates the program's compliance with the Standards and Criteria. In addition to using the focused questions as a framework for evaluating the program's compliance and for organizing a written report about its compliance with the Standards and Criteria, program faculty are encouraged to study and scrutinize the Standards and Criteria in order to develop additional ways of thinking about compliance with the Standards and Criteria. An authentic peer review

process relies on the ability of the program faculty to describe the unique characteristics of the program while effectively explaining and providing examples of the extent to which the program is in compliance with the Standards and Criteria.

Focused questions should be shared with program stakeholders to assist in their preparation for an ACEN accreditation visit. For example, the student support services personnel could use the focused questions related to Criteria 3.4 and 3.6 to prepare for that their interviews with the ACEN peer evaluators. Additionally, focused questions can be used by the faculty for a "mock" visit in preparation for the ACEN onsite visit.

The goal of any written report submitted to the ACEN is to demonstrate the extent to which the program is in compliance with the Standards and Criteria. Written reports are reviewed by peer evaluators who are not familiar with the program; therefore, it is essential that nursing faculty write in a clear and concise manner, and that all aspects of each Criterion are addressed in the written report. When writing any report for the ACEN, faculty must use the **ACEN Glossary** to ensure consistent and appropriate use of the terminology in the report. Where appropriate, nursing faculty are also encouraged to use tables to summarize program information and/or data. The use of well-designed tables is often an effective means for describing, summarizing, and documenting how a program is in compliance with the Standards and Criteria. The SVR templates include tables peer evaluators must include in their report; therefore, the program's written report should include the same tables/data/information to facilitate a clearer understanding of the program. A review of the SVR templates will help ensure that the nursing faculty prepare a report that provides required data/information for their peer evaluators. Nurse administrators and faculty who desire additional guidance on how to write reports for the ACEN are encouraged to use the resources available on the ACEN website and are invited to participate in a **Self-Study Forum** and other **Professional Development** for additional guidance and clarification.

SUPPORTING EVIDENCE

Supporting evidence maintained by programs is an objective means of documenting and/or recording a program's compliance with the Standards and Criteria. When possible, supporting evidence should be maintained in an electronic format and may include nursing program and/or governing organization documents (e.g., handbooks and meeting minutes, etc.). Supporting evidence should be identified by the program as those documents or pieces of evidence that are a **credible representative sample** of the *best* evidence that demonstrates the program is in compliance with each Criterion.

In addition, supporting evidence may include interviews with appropriate stakeholders (e.g., students and faculty), and/or direct observations (e.g., tours of clinical agencies) completed by the peer evaluators. Supporting evidence can also be used by program faculty to longitudinally confirm and document compliance with the Standards and Criteria. **For nursing education programs that are multi-lingual and/or international, all written reports and required evidence must be submitted to the ACEN and peer evaluators in English**. In addition, the ACEN recommends that the following documents (*as applicable*) be available in English:

- Mission, Philosophy, and Outcomes
- Systematic Plan of Evaluation (and supporting reports)
- Meeting Minutes (Nursing)
- Job/Position Descriptions
- Faculty Handbook
- Student Handbook
- Student Policies

- Nursing Budget
- Course Materials (including evaluations, syllabi, examinations, and student work)
- List of Clinical Placements, including types of patients served
- Clinical Contracts
- Program of Study, including program length, credit hours, and credit-to-contact-hour ratios used
- Checklist of items included in faculty and student files
- Committee Lists (including any with nursing representation)
- Partnerships
- Faculty Workload Tables
- Faculty Evaluations
- Evidence of Faculty Scholarship
- Student Grievances and Evidence of Resolution

Note: *If a multi-lingual or international program is hosting an onsite review of its program, the program must ensure that interpreters or translators are available throughout the process to assist with interviews and review of supporting evidence.*

The examples of supporting evidence identified in these guidelines are based on evidentiary sources that are commonly used and, unless otherwise noted, they are not all-inclusive or required documentation. For example, although these guidelines may identify a website or meeting minutes as potential sources of supporting evidence, the ACEN does not require that the information is maintained on a website or in meeting minutes. As with the focused questions, program faculty are encouraged to study and scrutinize the Standards and Criteria in order to develop and maintain sources of supporting evidence that are consistent with program policies, processes, and organizational structures. Additional guidance related to supporting evidence is available on the ACEN website in the *Guidelines for Submitting and Organizing Supporting Evidence* document.

FINAL THOUGHTS

Finally, a brief note about the peer review of a program. The accreditation process is a peer review process. Peer evaluators are assigned to review programs consistent with ACEN policy, and the reviews may be based on the written report, an onsite visit, or a virtual visit (or any combination thereof). Peer evaluators are responsible for verifying, clarifying, and amplifying information provided by the program and using their professional judgement to make recommendations about a program's compliance with the Standards and Criteria. When peer evaluators complete a review of a program, the emphasis is on a "snapshot" in time. This means that peer evaluators primarily focus on what is verifiable at the time of the review. However, during the peer review process, peer evaluators may identify situations where they will need to evaluate historical data in order to make a professional judgment about a program's compliance with the Standards and Criteria. For example, at the time of review, peer evaluators may identify that numerous faculty are on overload contracts, which may lead to some concern about the sufficiency of **full-time faculty** (Criterion 2.5). If, however, historical workload data are available, peer evaluators can verify that the current situation with faculty in overload is an aberration and is a result of an unexpected illness, and historically (e.g., over the last three years) only one faculty member per academic term has been assigned voluntary overload. In this situation, the team would have the historical supporting information it needs to determine if the peer reviewers will recommend compliance, an area needing development, or non-compliance using historical records and available supporting evidence.

Please note that three years of the most recent data are required for some Criteria (e.g., budgets, **licensure examination pass rate data**). In these instances, which are noted in the appropriate

Criteria below, accredited programs are encouraged to maintain three years of the most recent data or more frequently as required by the governing organization or nursing education unit policy. Programs seeking initial accreditation should ideally have three years of evidence when available but should minimally have data from the point Candidate status was achieved. Additionally, it is generally appropriate to maintain a minimum of three years of meeting minutes. For other evidence, faculty should use their professional judgement as well as considering governing organization and state agency requirements. For example, typically, the peer evaluators will only review current workload information during a site visit; however, if there have been changes or significant levels of overload, workload documentation from several terms may be appropriate.

STANDARDS AND CRITERIA

The ACEN Standards are agreed-upon expectations to measure quantity, extent, value, and educational quality; while the Criteria are statements that identify the elements that need to be examined in order to evaluate the Standards. Each certificate, diploma, or degree type accredited by the ACEN has its own unique set of Standards and Criteria (i.e., practical, associate, diploma, baccalaureate, masters/post-master's certificate, and clinical doctorate/DNP Specialist). When writing a report for the ACEN, the nursing education program must ensure that it is writing to the Standards and Criteria specific to the program type(s) for which they are submitting the written report.

Note: *Graduate programs (i.e., master's/PMC and Clinical Doctorate/DNP Specialist) that offer APRN program options must also adhere to the current National Task Force (NTF) Guidelines for Evaluation of Nurse Practitioner Programs as well as other requirements of the specialty organizations as they apply to the current ACEN Standards and Criteria. A* *Crosswalk between the ACEN Standards and Criteria and the NTF Guidelines* *is available on the* **ACEN website**.

Standard 1 Mission and Administrative Capacity

The mission of the nursing education unit reflects the governing organization's core values and is congruent with its mission/goals. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified **program outcomes**.

Criterion 1.1

The **mission and philosophy** of the **nursing education unit** are congruent with the core values, mission, and goals of the **governing organization**.

FOCUSED QUESTIONS
• What are the mission and philosophy of the nursing education unit?
• What are the core values, mission, and goals of the governing organization?
• How do the mission and philosophy of the nursing education unit support the governing organization in fulfilling its core values, mission, and goals?
• How do the governing organization core values, mission, and goals support the nursing education unit it fulfilling its mission and philosophy?
EXAMPLES OF SUPPORTING EVIDENCE
• Catalogs, Handbooks (Student/Faculty)
• Websites
• Meeting Minutes
• Position Statements
• Mission/Philosophy/Goals Statements
• Table illustrating alignment between the mission/philosophy of the nursing education unit and core values/mission/goals of the governing organization.

Criterion 1.2

The **governing organization** and **nursing education unit** ensure representation of the **nurse administrator** and **nursing faculty** in governance activities; opportunities exist for student representation in governance activities.

FOCUSED QUESTIONS
• What is the governance structure of the governing organization and nursing education unit at each location?
• What is the role of the nurse administrator in governance of the nursing education unit and the governing organization?
• What is the role of nursing faculty in governance of the nursing education unit and the governing organization?
• On what governance committees (governing organization and nursing education unit) do nursing faculty and the nurse administrator serve?
• What opportunities do students have to participate in governance activities within the nursing education unit and the governing organization?
• Within these opportunities, what is the role of students in governance activities within the nursing education unit and the governing organization?
EXAMPLES OF SUPPORTING EVIDENCE
• Handbooks (Faculty/Student)
• Organizational Charts (Governing Organization/Nursing Education Unit)
• Committee Assignments/Participation Lists/Workgroups (faculty/student governance activities)
• Meeting Minutes

Criterion 1.3

The assessment of **end-of-program student learning outcomes** and **program outcomes** is shared with **communities of interest**, and the communities of interest have input into program processes and decision-making.

FOCUSED QUESTIONS
• Who are the communities of interest for the nursing education unit?
• How are assessment and evaluation data of the end-of-program student learning outcomes shared with communities of interest?
• How are assessment and evaluation data of the program outcomes (licensure/certification, program completion, job placement) shared with communities of interest?
• How do the communities of interest provide input into program processes and decision-making?
EXAMPLES OF SUPPORTING EVIDENCE
• Advisory Committee/Council/Board Membership list(s)
• Reports to the state or national (for international programs) regulatory agency and the ACEN, as applicable
• Meeting Minutes
• Websites
• Program Materials
• Course/Program Evaluations (students, communities of interest, other stakeholders)

Criterion 1.4

Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community.

FOCUSED QUESTIONS

• Does the nursing education unit have any partnerships as defined in the ACENGlossary? (**Note:** *Partnerships are not required.*)
• If the nursing education unit has partnerships:
    ○ How do the partnerships promote excellence in nursing education?
    ○ How do the partnerships enhance the profession?
    ○ How do the partnerships benefit the community?

***EXAMPLES* OF SUPPORTING EVIDENCE**
• Memoranda of Understanding/contracts/grants/agreements (NOT clinical/practicum agency agreements) • Websites • Meeting Minutes

Criterion 1.5

Graduate and Baccalaureate Programs

The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing and is doctorally prepared.

FOCUSED QUESTIONS
• Who is the nurse administrator, as defined in the ACEN Glossary, for the nursing education unit? • Does the nurse administrator hold a graduate degree with a major in nursing? • Does the nurse administrator hold a doctoral degree?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Transcripts/Verification of Credentials (**Note:** *May be unofficial or official in accordancewith governing organization policy.*) • Curriculum Vitae

Associate, Diploma, and Practical Programs

The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.

FOCUSED QUESTIONS
• Who is the nurse administrator, as defined in the ACEN Glossary, for the nursing education unit? • Does the nurse administrator hold a graduate degree with a major in nursing?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Transcripts (**Note:** *May be unofficial or official in accordance with governing organization policy.*) • Curriculum Vitae

Criterion 1.6

The **nurse administrator** is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.

FOCUSED QUESTIONS
• What are the experiential qualifications of the nurse administrator and how do/did these experiences prepare the nurse administrator for the role?
• What are the qualifications for the role of the nurse administrator as defined by the governing organization? How does the nurse administrator meet the identified qualifications?
• What, if any, are the qualifications for the role of the nurse administrator as defined by the state or nation (for international programs)? If applicable, how does the nurse administrator meet the identified qualifications?
• How is/was the nurse administrator oriented to the role?
• How is/was the nurse administrator mentored in the role?
EXAMPLES **OF SUPPORTING EVIDENCE**
• Transcripts (**Note:** *May be unofficial or official in accordance with governing organization policy*)
• Licensure
• Job/Position Descriptions
• Faculty/Governing Organization Handbooks/Manuals
• State or National (for international programs) Rules and Regulations (e.g., Board of Nursing, State Higher Education Regulatory Agency)
• Personnel File (e.g., performance evaluations, orientation records, mentoring records)

Criterion 1.7

Graduate Programs

When present, nursing **program coordinators** and/or faculty who coordinate or lead program options/tracks are academically and experientially qualified.

Undergraduate Programs

When present, nursing **program coordinators** and/or faculty who assist with program administration are academically and experientially qualified.

FOCUSED QUESTIONS
• Does the program use program coordinators as defined in the ACEN Glossary?
• Does the program use faculty to coordinate and/or lead program options/tracks?
• If applicable, what are the academic and experiential qualifications of these individuals?
• If applicable, what are the required academic and experiential qualifications of these individuals (e.g., governing organization, state or national (for international programs), or other requirements such as the NTF Guidelines (for APRN program options)?
• If applicable, what percentage of administrative (i.e., non-teaching) time/workload are these individuals assigned?
• **Note:** *If 51% or more of their time/workload assignment is administrative, these individuals would not be included in the Faculty Profile Table or faculty numbers.*
EXAMPLES **OF SUPPORTING EVIDENCE**
• Transcripts (**Note:** *May be unofficial or official in accordance with governing organization policy.*)
• Curricula Vitae
• Job/Position Descriptions
• State or National (for international programs) Rules and Regulations (e.g., Board of Nursing, State Higher Education Regulatory Agency)
• Faculty/Governing Organization Handbooks/Manuals

Criterion 1.8

The **nurse administrator** has authority and responsibility for the development and administration of the program and has sufficient time and resources to fulfill the role responsibilities.

FOCUSED QUESTIONS
• What authority and responsibility for development and administration of the program does the nurse administrator have?
• Is the authority and responsibility for development and administration of the program held by the nurse administrator consistent with the level of authority and responsibility held by individuals in similar positions within the governing organization?
• Does the authority and responsibility for administration of the program meet any state or national (for international programs) regulations regarding the role of the nurse administrator?
• What is/are the workload distribution/assignments of the nurse administrator? Is/Are the workload distribution/assignments similar to that/those of other individuals in similar positions within the governing organization?
• Does the nurse administrator have a teaching load? If so, what percentage, and is this comparable to other individuals in similar positions within the governing organization?
Note: *Regardless of teaching load/assignment within the nursing education unit, the nurse administrator is not considered faculty as defined in the ACEN Glossary and should not be included the Faculty Profile Table or faculty numbers.*
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Job/Position Description
• Workload Distribution/calculations/policies
• Faculty/Governing Organization Handbooks/Manuals
• State or National (for international programs) Regulations related to nurse administrator role, if applicable
• Organizational Charts (Governing Organization/Nursing Education Unit)

Criterion 1.9

The **nurse administrator** has the authority to prepare and administer the program budget with faculty input.

FOCUSED QUESTIONS
• What authority to prepare and administer the budget does the nurse administrator have?
• What is the budgetary process for the institution?
• Is the budgetary authority and process for the nurse administrator similar to that of other individuals in similar positions within the governing organization?
• How do nursing faculty provide input into the budgetary process?
Note: *This Criterion is specific to budgetary processes. Budgetary resources are addressed in Standard 5.*
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Job/Position Description
• Budget Policies/Processes/Procedures (Governing Organization/Nursing Education Unit)
• Faculty/Governing Organization Handbooks/Manuals
• Meeting Minutes

Criterion 1.10

Policies for nursing faculty and staff are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the purpose and outcomes of the nursing program.

FOCUSED QUESTIONS
• What policies are in place to provide for the welfare of faculty and staff at each location?
• Are the policies for nursing faculty and staff the same at each location as the policies for non-nurse faculty and staff within the governing organization? If applicable, are policy differences justifiable?
EXAMPLES OF SUPPORTING EVIDENCE
• Policy and Procedure Manuals (Governing Organization/Nursing Education Unit)
• Faculty Handbooks (Governing Organization/Nursing Education Unit)
• Governing Organization and Nursing Faculty Bylaws
• Collective bargaining agreement/union contracts

Criterion 1.11

Distance education, when utilized, is congruent with them mission of the governing organization and the mission/philosophy of the nursing education unit.

FOCUSED QUESTIONS
• Does the program use any form of distance education (ACEN Policy #15), as defined in the ACEN Glossary, for nursing courses?
• If distance education (as defined by the ACEN) is used by the nursing program, is its use congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit?
EXAMPLES OF SUPPORTING EVIDENCE
• Catalogs
• Websites
• Handbooks/Manuals
• Mission/Philosophy/Goals Statements

Standard 2 Faculty and Staff

Qualified and credentialed faculty are sufficient in number to ensure the achievement of the **end-of-program student learning outcomes** and **program outcomes**. Sufficient and qualified staff are available to support the nursing program.

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 nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

FOCUSED QUESTIONS
- What are the full-time faculty educational and experiential qualifications for the governing organization?   - What are the full-time faculty educational and experiential qualifications for the state or nation (for international programs), including each state or region where students reside?   - What are the full-time faculty educational and experiential qualifications for the governing organization's accrediting agency?   - Have exceptions or waivers been granted for any full-time faculty who do not meet the educational or experiential qualifications of any agency?   - Do the full-time faculty meet the NTF Guidelines? (For graduate programs with APRN program options only)   - Are full-time faculty exclusive to the program or shared?   - How are full-time faculty teaching assignments determined?   - How are full-time faculty qualified to teach their assigned nursing courses?   - What processes are in place to ensure that full-time faculty are qualified to teach the assigned nursing courses?   - If the program uses distance education, how do the full-time faculty meet state qualifications based on student location?
REQUIRED EVIDENCE
Faculty Profile Table with Qualification and Professional Development addenda for each full-time faculty member teaching during the cycle the report is submitted.
EXAMPLES **OF SUPPORTING EVIDENCE**
- Faculty Job/Position Descriptions   - State or National (for international programs) Rules and Regulations (e.g., Board of Nursing, State Higher Education Regulatory Agency)   - Governing Organization's Accrediting Agency Standards   - Teaching Assignments   - Transcripts (**Note:** *May be unofficial or official in accordance with governing organization policy.*)   - Curricula Vitae   - Licensure   - Professional Development Records   - Qualifications Exceptions/Waivers, if applicable   - Abbreviated Syllabi

Criterion 2.2

Part-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

FOCUSED QUESTIONS
- What are the part-time faculty educational and experiential qualifications for the governing organization?   - What are the part-time faculty educational and experiential qualifications for the state or nation (for international programs), including each state or region where students reside?   - What are the part-time faculty educational and experiential qualifications for the governing organization's accrediting agency?   - Have exceptions or waivers been granted for any part-time faculty who do not meet the educational or experiential qualifications of any agency?   - Do the part-time faculty meet the NTF Guidelines? (For graduate programs with APRN program options only)   - Are part-time faculty exclusive to the program or shared?   - How are part-time faculty teaching assignments determined?   - How are part-time faculty qualified to teach their assigned nursing courses?   - What processes are in place to ensure that part-time faculty are qualified to teach the assigned nursing courses?   - If the program uses distance education, how do the part-time faculty meet state qualifications based on student location?

REQUIRED EVIDENCE
Faculty Profile Table with Qualification and Professional Development addenda for each part-time faculty member teaching during the cycle the report is submitted

EXAMPLES OF SUPPORTING EVIDENCE
- Faculty Job/Position Descriptions   - State or National (for international programs) Rules and Regulations (e.g., Board of Nursing, State Higher Education Regulatory Agency)   - Governing Organization's Accrediting Agency Standards   - Teaching Assignments   - Transcripts (**Note:** *May be unofficial or official in accordance with governing organization policy.*)   - Curricula Vitae   - Licensure   - Professional Development Records   - Qualifications Exceptions/Waivers, if applicable   - Abbreviated Syllabi

Criterion 2.3

Non-nurse faculty teaching nursing courses hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

FOCUSED QUESTIONS
- What are the non-nurse faculty educational and experiential qualifications for the governing organization?   - What are the non-nurse faculty educational and experiential qualifications for the state or nations (for international programs)?   - What are the non-nurse faculty educational and experiential qualifications for the governing organization's accrediting agency?
- Have exceptions or waivers been granted for any non-nurse faculty who do not meet the educational or experiential qualifications of any agency?   - Are non-nurse faculty exclusive to the program or shared?   - How are non-nurse faculty teaching assignments determined?   - How are non-nurse faculty qualified to teach their assigned nursing courses?   - What processes are in place to ensure that non-nurse faculty are qualified to teach the assigned nursing courses?   - If the program uses distance education, how do the non-nurse faculty meet state qualifications based on student location?
REQUIRED EVIDENCE
Non-Nurse Faculty Profile Table with a Qualification and Professional Development addenda for each non-nurse faculty member teaching during the cycle the report is submitted.
EXAMPLES **OF SUPPORTING EVIDENCE**
- Faculty Job/Position Descriptions   - State or National (for international programs) Rules and Regulations (e.g., Board of Nursing, Higher Education)   - Governing Organization's Accrediting Agency Standards   - Teaching Assignments   - Transcripts (**Note:** *May be unofficial or official in accordance with governing organization policy.*)   - Curricula Vitae   - Licensure   - Professional Development Records   - Qualifications Exceptions/Waivers, if applicable   - Abbreviated Syllabi, if applicable

Criterion 2.4

Preceptors, when utilized, are academically and experientially qualified, oriented, mentored, and monitored, and have clearly documented roles and responsibilities.

FOCUSED QUESTIONS
- Does the program use preceptors for any **clinical/practicum** or **practice learning experiences** in the curriculum as defined in the ACEN Glossary?   - What are the roles and responsibilities of the preceptors?   - What are the roles and responsibilities of faculty working with preceptors?   - What are the required academic and experiential qualifications of preceptors?   - Are there any state regulations regarding the academic and/or experiential qualifications of preceptors? If so, what are they?   - Do the preceptors meet the NTF Guidelines? (For graduate programs with APRN program options only)   - How are preceptors identified and selected?   - How are preceptor qualifications verified?   - How are preceptors oriented?   - How are preceptors mentored?   - How are preceptors monitored?   **Note:** *If preceptors are used in any program, the ACEN holds the program leader accountable for ensuring that students can complete the program of study for all program options within the advertised timeframe(s), including when students are expected to contribute to finding a preceptor.*

EXAMPLES OF SUPPORTING EVIDENCE
Policy and Procedures
- State or National (for international programs) Rules and Regulations (e.g., Board of Nursing, State Higher Education Regulatory Agency)   - Requirements of other agencies (e.g., NTF Guidelines, clinical/practicum agency)   - Handbooks/Manuals   - Identification/Selection Criteria   - Role Responsibilities   - Contracts/Agreements   - Curricula Vitae   - Orientation Materials   - Documentation of meetings/communications with preceptors

Criterion 2.5
The number of **full-time faculty** is sufficient to ensure that the **end-of-program student learning outcomes** and **program outcomes** are achieved.

FOCUSED QUESTIONS
- How many students are enrolled in the program? If applicable, describe by program option and/or location.   - How many full-time faculty teach in the program? If applicable, describe by program option and/or location.   - What is the workload policy for full-time nursing faculty? What is the distribution of teaching and non-teaching workload expectations? What are the non-teaching workload expectations?   - What are the full-time faculty-to-student ratios in the classroom, laboratory, simulation, online, and clinical/practicum setting?   - Are there faculty-to-student ratio requirements mandated by the state or nation (for international programs) mandated (e.g., Board of Nursing, State Higher Education Regulatory Agency) or other agency (e.g., NTF Guidelines)? Does the program meet these expectations/requirements?   - How many full-time faculty are in overload? Is overload teaching mandatory/compensated? How frequently are full-time faculty in overload?   - How well are students achieving the end-of-program student learning outcomes?   - How well are the program outcomes being achieved?   - Are faculty-to-student ratios for classroom, laboratory, clinical, and simulation (as applicable) the same for all locations, if applicable.

EXAMPLES OF SUPPORTING EVIDENCE
- Student Enrollment Data (full- and part-time)   - Workload Policy   - Workload Distributions (e.g., teaching, advising)   - Teaching Assignments   - Faculty-to-Student Ratios in Classroom, Laboratory, simulation, online, and in Clinical   - State or National (for international programs) Rules and Regulations, if applicable   - Requirements of other agencies (e.g., NTF Guidelines, institutional accrediting agency, regulatory agency for nursing), if applicable   - Program/Governing Organization Handbooks/Bylaws   - Summary of End-of-Program Student Learning Outcome and Program Outcome Data performance and trends (detailed data will be included in Standard 6)

Criterion 2.6

Faculty (full- and part-time) maintain expertise in their areas of responsibility, and their performance reflects scholarship and **evidence-based** teaching and clinical practices.

FOCUSED QUESTIONS
- How do faculty (full- and part-time) maintain their teaching and nursing practice expertise?   - How is faculty (full- and part-time) performance monitored and/or evaluated to ensure it reflects scholarship?   - Does the faculty (full- and part-time) or Governing Organization have a definition of scholarship? If so, what is it and how to faculty (full- and part-time) meet the definition?   - How is faculty (full- and part-time) performance, teaching and clinical practice, monitored and/or evaluated to ensure it is evidence-based?   - For graduate programs, how do faculty (full- and part-time) maintain their APRN certifications in compliance with the NTF Guidelines? How does faculty scholarship reflect role modeling for graduate students?
REQUIRED EVIDENCE
Full-time and Part-time **Faculty Profile Table** with Qualification and Professional Development addenda for each faculty member
EXAMPLES **OF SUPPORTING EVIDENCE**
- Professional Development Records (Teaching and Nursing Practice)   - Performance Evaluation Policies/Processes (Didactic and Clinical)   - Performance Evaluation Data (Didactic and Clinical)   - Faculty Files (*Required for onsite review*)   - Tenure/Reappointment Files

Criterion 2.7

The number and qualifications of **staff** within the nursing education unit are **sufficient** to support the nursing program.

FOCUSED QUESTIONS
- How many staff (full- and part-time) are assigned to the nursing education unit? How many staff (full- and part-time are assigned to any additional locations? How many staff are exclusive to the nursing education unit and how many are shared between programs or departments?   - What are the qualifications of the staff at all locations (full- and part-time) assigned to the nursing education unit?   - What are the job duties of the staff at all locations (full- and part-time) assigned to the nursing education unit? How does completion of these job duties support the nursing program?   - Does the nursing education unit use laboratory personnel (full- and part-time) as defined in the ACEN Glossary? If so, what are these positions? How are these individuals at each location qualified to perform their assigned roles?
EXAMPLES **OF SUPPORTING EVIDENCE**
- Job/Position Descriptions   - Résumés

Criterion 2.8
Faculty (full- and part-time) are oriented and mentored in their areas of responsibility.

FOCUSED QUESTIONS
• How are faculty (full-time and part-time) oriented to their areas of responsibility?
• How are faculty (full-time and part-time) mentored in their areas of responsibility?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Governing Organization/Program Orientation/Mentoring Policies and Procedures
• Workload Assignments
• Governing Organization/Program Orientation Records/Checklists
• Formal and/or Informal Mentoring Program/Records

Criterion 2.9
Faculty (full- and part-time) performance is regularly evaluated in accordance with the governing organization's policy/procedures, and demonstrates effectiveness in assigned areas of responsibility.

FOCUSED QUESTIONS
• What is the governing organization and/or program policy/procedure for evaluation of full-time faculty at all locations?
• What is the governing organization and/or program policy/procedure for evaluation of part-time faculty at all locations?
• What aspects of faculty performance are included in the evaluation process for faculty (full-time and part-time) at all locations?
• How does the evaluation process ensure that all faculty (full-time and part-time) at all locations demonstrate effectiveness in their assigned areas of responsibility?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Faculty performance evaluation Policies and Procedures
• Performance Evaluation Documentation/Forms
• Faculty Job/Position descriptions
• Contracts (e.g., employment, collective bargaining/union agreement, Human Resources Manual)

Criterion 2.10
Faculty (full- and part-time) engage in ongoing development and receive support for **instructional** and **distance technologies**.

FOCUSED QUESTIONS
- What professional development opportunities specific to instructional technologies (e.g., classroom technologies, learning management system, simulation equipment, electronic medical records), are available for faculty at all locations (full-time and part-time)?   - What professional development opportunities specific to distance technologies (e.g., if utilized learning management system, interactive video), are available for faculty at all locations (full-time and part- time)?   - What instructional and distance technology development activities have faculty at all locations (full-time and part-time) completed?   - What support services for instructional and distance technologies are available for faculty at all locations (full-time and part-time)? How are the support services accessed? When can support services be accessed?

REQUIRED EVIDENCE
Full-time and Part-time **Faculty Profile Table** with Qualification and Professional Development addenda for each faculty member

EXAMPLES OF SUPPORTING EVIDENCE
- Governing Organization/Program/Faculty/Employee Handbooks   - Collective Bargaining Agreement/Union Contracts   - Professional Development Records   - Instructional Support Service Documentation   - Distance Technology Support Documentation

Standard 3 Students

Student policies and services support the achievement of the **end-of-program student learning outcomes** and **program outcomes** of the nursing program.

Criterion 3.1

Policies for nursing students are congruent with those of the **governing organization** as well as the state, when applicable, and are publicly accessible, non-discriminatory, and consistently applied; differences are justified by the **end-of-program student learning outcomes** and **program outcomes**.

FOCUSED QUESTIONS
• Do policies for nursing students at each location differ from the policies for non-nursing students? If so, how? (e.g., admissions, background checks)
• Are any policy differences for nursing students directly related to the end-of-program student learning outcomes and program outcomes? If so, how?
• Does the state or nation (for international programs) require any policies specific for nursing students? If so, are these policies incorporated into the program policies?
• How does the program ensure that student policies are consistently applied at each location?
• How can students at each location and/or the public access nursing student policies?
• Are admission policies for graduate programs with APRN program options consistent with NTF Guidelines?

EXAMPLES OF SUPPORTING EVIDENCE
• Policies and Procedures (e.g., admissions, background checks)
• Catalogs
• Handbooks
• Websites
• State or National (for international programs) Rules and Regulations, if applicable (e.g., Board of Nursing, State Higher Education Regulatory Agency)
• Program Recruitment Materials (electronic copy and/or hard-copy)
• Nursing course syllabi (full syllabi, *IF* the syllabi include student policies)

Criterion 3.2

Public information is accurate, clear, consistent, and accessible, including the program's accreditation status and the ACEN contact information.

FOCUSED QUESTIONS
• What information about the program is available to the public? (ACEN Policy #29)
• How is program information accessed by the public?
• How does the program ensure that all public information is accurate and clear?
• What is the program's current ACEN accreditation status or Candidate status? Where is this information available to the public?
• Where is ACEN contact information available to the public? Is the contact information current and correct? (ACEN Policy #9)
• Where does the program provide the data relate to program outcomes as required by ACEN Policy #29?
• Where are policies related to transfer of credits (ACEN Policy #25), grading, and refunds available for the governing organization?

EXAMPLES OF SUPPORTING EVIDENCE
• Publicly Accessible Recruitment Materials (electronic copy and/or hard-copy) • Publicly Accessible Program Information (electronic copy and/or hard-copy) • Admission Process/Qualifications • Program of Study for all program options/tracks • Progression Requirements • ACEN Accreditation Status (for continuing accreditation) or ACEN Candidate Status (for initial accreditation) • ACEN Contact Information • Academic Calendar • Publicly Accessible Program Outcomes Data, as Defined by the ACEN (electronic copy and/or hard-copy) • Licensure and/or Certification Examination Pass Rate • Program Completion Rate • Job Placement Rate • Policies and Procedures • Transfer of Credit Policy • Grading Policy • Refund Policy • Credit Hour

Criterion 3.3

Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.

FOCUSED QUESTIONS
• How are students notified of changes in the program, policies, and/or procedures? • How are students provided sufficient and timely notification of changes in the program, policies, and/or procedures? • Have there been any recent changes in the program, policies, and/or procedures? If so, how were these changes clearly communicated to students?
EXAMPLES OF SUPPORTING EVIDENCE
• Policies and Procedures that have been changed • Program Information (e.g., clinical/practicum schedules, admission/progression criteria) • Governing Organization/Program Handbooks • Documentation of changes in policies and/or procedures, if applicable (e.g., attestations, public announcements)

Criterion 3.4

Student services are commensurate with the needs of nursing students, including those receiving instruction using **alternative methods of delivery**.

FOCUSED QUESTIONS
• What student services are available for nursing students at all locations/campuses where the nursing program is offered? Are the student services comparable at all locations/campuses where the nursing program is offered? • Are the available support services congruent with the level of need based on the program type?

• Do nursing students at all locations/campuses where the nursing program is offered have access to the same services as non-nursing students?
• Do nursing students at all locations/campuses where the nursing program is offered have access to additional services not available to non-nursing students? If so, what are the services and why are these services provided?
• How do students access services at all locations/campuses where the nursing program is offered?
• What are the hours of operation/access for student services at all locations/campuses where the nursing program is offered?
• How do distance education students (ACEN Policy #15) access student services? What are the hours of operation/access for student services?
EXAMPLES OF SUPPORTING EVIDENCE
• Catalogs
• Websites
• Handbooks
• Lists/descriptions of services available to students
• Student satisfaction surveys

Criterion 3.5

Student educational records are in compliance with the policies of the **governing organization** and state and federal guidelines.

FOCUSED QUESTIONS
• What are the governing organization policies for maintenance of student records?
• What are the state or national (for international programs) guidelines for maintenance of student records?
• What are the federal or national (for international programs) guidelines for maintenance of student records?
• What nursing student records are maintained by the governing organization and nursing education unit (e.g., admission records, registrar records, nursing records such as health record, drug testing, and criminal background?
• How are nursing student education records maintained? Who has access to these records?
• What measures are taken to protect the security/access of student education records?
• How are students' records managed if there are multiple locations?
• For graduate programs with APRN program options, does the official documentation clearly state the role and population focus of the nurse practitioner program?
EXAMPLES OF SUPPORTING EVIDENCE
• Policies and Procedures for record retention
• Maintenance of Student Records
• Protection of Privacy for Students Enrolled in Distance Education (ACEN Policy #15)
• State or National (for international programs) Guidelines and Regulations, if applicable
• Federal Guidelines and Regulations, if applicable
• Student Records (*Required,* peer evaluators will review random sample of 10% of records representing all program options, locations, and/or levels)
• Identification of items maintained in student records by the nursing education unit

Criterion 3.6

Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained, including **default rates** and the results of financial or compliance audits.

Note: *International programs should describe any systems and/or processes related to student loans, student loan repayment, and student responsibilities for their institutions for Criteria 3.6, 3.6.1, 3.6.2, and 3.6.3.*

FOCUSED QUESTIONS
• Does the governing organization participate in any federal financial aid program (e.g., loans, grants)? If so, what types? For international programs, does the governing organization participate in any national financial aid programs? Please describe.
• Does the governing organization participate in Title IV funding?
• What are the Title IV eligibility and certification requirements for the governing organization? Is compliance with these eligibility and certification requirements maintained? If so, how?
• What are the federal loan default rate for the governing organization?
• What are the results of recent financial and/or compliance audits as related to Title IV?

EXAMPLES OF SUPPORTING EVIDENCE
• Policies and Procedures (Specific to Title IV)
• Program Participation Agreement
• Current and Historical loan Default Rate (3 years)
• Title IV Financial Audits
• Title IV Compliance Audits
• Action plans/reports for addressing high default rate
Note: *The ACEN Board of Commissioners (BOC) has identified a "high" default rate as 15% or greater.*

Criterion 3.6.1

A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.

FOCUSED QUESTIONS
• Is there a written, comprehensive student loan repayment program?
• Where is student loan repayment program information available?
• How do students access student loan repayment program information?
• Does the student loan repayment program information include counseling, monitoring, and cooperation with lenders?

EXAMPLES OF SUPPORTING EVIDENCE
• Written Student Loan Repayment Program (electronic copy and/or hard-copy), Including:
• Student Loan Information
• Student Loan Counseling
• Student Loan Monitoring
• Cooperation with Lenders

Criterion 3.6.2

Students are informed of their ethical responsibilities regarding financial assistance.

FOCUSED QUESTIONS
How are students informed of their ethical responsibilities regarding financial assistance?
EXAMPLES **OF SUPPORTING EVIDENCE**
Verification that students are Informed of Ethical Responsibilities for Financial Assistance (electronic copy and/or hard-copy)

Criterion 3.6.3

Financial aid records are in compliance with the policies of the **governing organization**, state, and federal guidelines.

FOCUSED QUESTIONS
- What are the governing organization's policies and procedures for maintenance of financial aid records? Who has access to these records? What measures are taken to protect the security/access of financial aid records?   - What are the state, federal, or national (for international programs) requirements for financial aid record maintenance?   - How are the governing organization's policies and procedures for maintenance of financial aid records in compliance with state, federal, or national (for international programs) guidelines?   - How are student financial aid records maintained? Is this in compliance with the governing organization's policies and procedures? Is this in compliance with state, federal, or national (for international programs) guidelines?
EXAMPLES **OF SUPPORTING EVIDENCE**
- Policies and Procedures for maintenance of Financial Aid Records   - State Guidelines (Financial Aid Records)   - Federal or National (for international programs) Guidelines (Financial Aid Records)

Criterion 3.7

Records reflect that program **complaints and grievances** receive due process and include evidence of resolution.

FOCUSED QUESTIONS
- What is the definition of a grievance or complaint within the governing organization and/or nursing education unit?   - What is the grievance policy of the governing organization?   - What is the grievance policy of the nursing education unit?   - Does the grievance policy ensure that students receive due process? If so, how?   - How many grievances has the program received since the last ACEN program review? What types of grievances were received?   - How many of the grievances have been resolved?   - Was the grievance policy followed for each grievance?   - Does each location have the same grievance policy?
EXAMPLES **OF SUPPORTING EVIDENCE**
- Policies and Procedures for Program Complaints and/or Grievances   - Program Complaint and/or Grievance Files (*Required for onsite review* if any complaints/grievances since the last ACEN site visit)

Criterion 3.8

Orientation to technology is provided, and technological support is available to students.

FOCUSED QUESTIONS
• What student-centered technology is used during the Program of Study for all program options and locations?
• How are students at each location oriented to technologies used in the didactic component (e.g., learning management system), laboratory/simulation laboratory component, and **clinical/practicum** component (e.g., electronic medical record) of the nursing courses?
• Is technology support available to students at each location? If so, what type of technology support is available?
• How do students access technological support at each location?
• When is technological support available to students at each location?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Catalogs
• Handbooks
• Websites
• Orientation Agenda/Attendance Records
• Learning Management System (LMS) content/support
• Simulation technologies
• Clinical agency orientation packets/agenda

Criterion 3.9

Information related to technology requirements and policies specific to **distance education** are accurate, clear, consistent, and accessible.

FOCUSED QUESTIONS
• How are students at each location informed about any technology requirements?
• Does the program utilize any distance education as defined in the ACEN Glossary?
• What are the technology requirements specific to distance education?
• What are the policies specific to distance education?
• How are students informed about any policies specific to distance education?
• What processes are in place to verify the identity of students taking courses by distance education? Are there additional fees for this identification process?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Policies and Procedures (ACEN Policy #15)
• Technology requirements
• Distance Education
• Verification of Student Identity (Processes and Costs)
• Catalogs
• Handbooks
• Nursing course syllabi (full syllabi, *IF* the syllabi include student policies)
• Websites
• Learning Management System *applicable* (print or electronic)

Standard 4 Curriculum
The curriculum supports the achievement of the **end-of-program student learning outcomes** and **program outcomes** and is consistent with safe practice in contemporary healthcare environments.

Criterion 4.1
Graduate Programs
Consistent with **contemporary practice**, the curriculum is congruent with established standards for clinical doctorate programs (*master's/post-masters programs*), including appropriate advanced nursing practice competencies, role-specific **professional standards and guidelines**, and certification requirements, and has clearly articulated **end-of-program student learning outcomes**.

FOCUSED QUESTIONS
• What are the program's end-of-program student learning outcomes? **Note:** *End-of-program student learning outcomes must be appropriate and distinct for each <u>program type</u>* • Where and how are students informed about the end-of-program student learning outcomes? • What program options are offered by the program? (e.g., Nurse Educator, Family Nurse Practitioner) • Are the end-of-program student learning outcomes the same for all program options? **Note:** *End-of-program student learning outcomes must be the same for all <u>program options</u>; role-specific professional competencies must be appropriate and distinct for each <u>program option</u>.* • For graduate programs with APRN program options and consistent with the NTF Guidelines, what are the advanced nursing practice competencies and/or role-specific professional competencies for each program option? How are these aligned with the end-of-program student learning outcomes for the overall graduate program? • What certification requirements, if applicable, were used to develop the curriculum? • What role-specific professional standards were used to develop the curriculum for each program option? • What professional guidelines were used to develop the curriculum? Are the end-of-program student learning outcomes and are the advanced practice or role-specific professional competencies for all program options consistent with contemporary practice? How does the program ensure continued currency? • Is consistent terminology used when referring to the end-of-program student learning outcomes?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi
***EXAMPLES* OF SUPPORTING EVIDENCE**
• End-of-program student learning outcomes document(s) • Role-Specific Professional Competencies document(s) for all program options • Professional Standards • Professional Guidelines • Certification Requirements • Faculty/Governing Organization Handbooks/Manuals • Websites • Catalogs **Note:** *Full nursing course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

Undergraduate Programs

Consistent with **contemporary practice**, the curriculum incorporates established **professional nursing standards, guidelines**, and competencies and has clearly articulated **end-of-program student learning outcomes**.

FOCUSED QUESTIONS
• What are the program's end-of-program student learning outcomes? **Note:** *End-of-program student learning outcomes must be appropriate and distinct for each program type* • What program options are offered by the program? (e.g., pre- or post-licensure, LPN-to-RN) • Are the end-of-program student learning outcomes the same for all program options? **Note:** *End-of-program student learning outcomes must be the same for all program options; role-specific professional competencies must be appropriate and distinct for each program option* • Where and how are students informed about the end-of-program student learning outcomes? • What professional nursing standards were used to develop the curriculum? • What professional guidelines were used to develop the curriculum? • What professional competencies were used to develop the curriculum? • Are the end-of-program student learning outcomes consistent with contemporary practice? How does the program ensure continued currency? • Is consistent terminology used when referring to the end-of-program student learning outcomes?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi
***EXAMPLES* OF SUPPORTING EVIDENCE**
• End-of-program student learning outcomes document(s) • Professional Standards • Professional Guidelines • Handbooks • Websites • Catalogs **Note:** *Full nursing course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

Criterion 4.2

The **end-of-program student learning outcomes** are used to organize the curriculum, guide the delivery of instruction, and direct learning activities.

FOCUSED QUESTIONS
• How are the end-of-program student learning outcomes used to organize the curriculum? • How are the end-of-program student learning outcomes used to guide the delivery of instruction? • How are the end-of-program student learning outcomes used to direct learning activities? • Do course objectives/outcomes consistently progress (e.g., simple-to-complex) throughout the program of study for all program options? • How does the program of study and course sequencing contribute to student learning and attainment of the end-of-program student learning outcomes, role-specific professional competencies (for graduate programs only), and program outcomes?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi

EXAMPLES OF SUPPORTING EVIDENCE
• End-of-program student learning outcomes document(s)
• Faculty/Governing Organization Handbooks/Manuals • Websites • Catalog • Program of Study for all program options • System or statewide curriculum documents/policies • Curricular Mapping Documents • Meeting Minutes • Samples of student work/course assignments **Note:** _Full_ nursing _course syllabi must be available for onsite review, if applicable (electronic or hard-copy)_

Criterion 4.3

The curriculum is developed by the faculty and regularly reviewed to ensure **integrity**, **rigor**, and currency.

FOCUSED QUESTIONS
• What is the role of faculty in the development of the nursing curriculum for all program options? • When and how do the faculty review curriculum? • What faculty review processes/practices ensure curricular integrity? • What faculty review processes/practices ensure curricular rigor? • What faculty review processes/practices ensure curricular currency?
EXAMPLES OF SUPPORTING EVIDENCE
• Program of Study for all program options • Faculty/Employee/Program Handbook • Faculty Job/Position Description • Meeting Minutes • Samples of student work/course assignments • System or statewide curriculum documents/policies • Testing/grading policies/mapping **Note:** _Full nursing course syllabi must be available for onsite review, if applicable (electronic or hard-copy)_

Criterion 4.4

Clinical Doctorate Programs/DNP Specialist Certificates

The curriculum is designed to prepare graduates to practice from an **evidence-based** perspective in their role through effective use and collaborative production of clinically-based scholarship.

FOCUSED QUESTIONS
• How does the curricular design prepare graduates for evidence-based practice? • How does the curricular design prepare graduates for effective use of clinically-based scholarship? • How does the curricular design prepare graduates for the collaborative production of clinically-based scholarship?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi

EXAMPLES OF SUPPORTING EVIDENCE
• Program of Study for all program options
• Student Handbooks
• Role-Specific Professional Competencies for all program options
• Samples of Student Work/Course Assignments
• Meeting Minutes
Note: *Full nursing course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

Master's/PMC Programs

The curriculum is designed to prepare graduates to be **information-literate** and to practice from an **evidence-based** approach in their direct and indirect advanced nursing roles.

FOCUSED QUESTIONS
• How does the curricular design prepare graduates to be information-literate?
• How does the curricular design prepare graduates to use an evidence-based approach in their direct advanced nursing practice roles?
• How does the curricular design prepare graduates to use an evidence-based approach in their indirect advanced nursing practice roles?

REQUIRED EVIDENCE
Abbreviated nursing course syllabi

EXAMPLES OF SUPPORTING EVIDENCE
• Program of Study for all program options
• Student Handbooks
• End-of-program student learning outcomes
• Role-Specific Professional Competencies for all program options
• Samples of Student Work/Course Assignments
• Meeting Minutes
Note: *Full nursing course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

Baccalaureate, Associate, and Diploma Programs

The curriculum includes general education courses that enhance professional nursing knowledge and practice.

FOCUSED QUESTIONS
• What general education courses are required for completion of the program of study for all program options?
• Why were these general education courses included in the program of study for all program options?
• How does each general education course contribute to the acquisition of professional nursing knowledge?
• How does each general education course contribute to the development of professional nursing practice?

EXAMPLES OF SUPPORTING EVIDENCE
• Program of Study for all program options
• Program Description for all program options
• Course Descriptions
• Faculty/Governing Organization Handbooks/Manuals
• Catalog for the Governing Organization

• State, National (for international programs), and/or system-wide Regulations/Requirements, if applicable • Meeting Minutes

The curriculum includes general education courses/concepts that enhance professional nursing knowledge and practice.

FOCUSED QUESTIONS
• What general education courses/concepts are required and/or incorporated in the program of study for all program options? • Why were these general education courses/concepts included in the program of study for all program options? • How do these general education courses/concepts contribute to the acquisition of professional nursing knowledge? • How does each general education course contribute to the development of professional nursing practice?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Program of Study for all program options • Program Description for all program options • Course Descriptions • Handbooks • Catalog for the Governing Organization • State Regulations/Requirements, if applicable • Meeting Minutes

Criterion 4.5
Graduate Programs

The curriculum is designed so that graduates of the program are able to practice in a culturally and ethnically diverse global society.

FOCUSED QUESTIONS
• How is the curriculum designed to prepare graduates to practice in a culturally diverse global society? • What curricular approaches and activities prepare graduates to practice in a culturally diverse global society? • How was the curriculum designed to prepare graduates to practice in an ethnically diverse global society? • What curricular approaches and activities prepared graduates to practice in an ethnically diverse global society?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Program of Study for all program options • Student Handbooks • End-of-program student learning outcomes • Role-Specific Professional Competencies • Samples of Student Work/Course Assignments • Meeting Minutes

Note: *Full* nursing *course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.

FOCUSED QUESTIONS
• What culturally diverse concepts are incorporated throughout the curriculum? How are these concepts incorporated?   • What ethnically diverse concepts are incorporated throughout the curriculum? How are these concepts incorporated?   • What socially diverse concepts are incorporated throughout the curriculum? How are these concepts incorporated?   • Does the curriculum include any experiences from a regional, national, or global perspective? If so, what are these experiences? Why are these regional, national, or global experiences incorporated in the curriculum?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi
EXAMPLES **OF SUPPORTING EVIDENCE**
• Program of Study for all program options   • Student Handbooks   • End-of-program student learning outcomes   • Samples of Student Work/Course Assignments   • Meeting Minutes   **Note:** *Full* nursing *course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

Criterion 4.6

The curriculum and instructional processes reflect educational theory, **interprofessional** collaboration, research, and current standards of practice.

FOCUSED QUESTIONS
• What educational theories were used to help develop the curriculum?   • What educational theories are used as the basis for, or in support of, instructional processes?   • How is interprofessional collaboration incorporated throughout the curriculum?   • How is research and evidence-based practice incorporated throughout the curriculum?   • How are current standards of practice incorporated throughout the curriculum?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi
EXAMPLES **OF SUPPORTING EVIDENCE**
• Program of Study for all program options   • Handbooks (Faculty and Student)   • Meeting Minutes   **Note:** *Full* nursing *course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

Criterion 4.7

Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of the **end-of-program student learning outcomes**.

FOCUSED QUESTIONS
- What methods of evaluation are used to evaluate students' performance throughout the program?   - How were/are methods of evaluation of students' performance developed or selected?   - How do evaluation methodologies progress (e.g., simple-to-complex) throughout the curriculum?   - How do faculty ensure established professional competencies are incorporated in the various evaluation methodologies of students' performance that are used throughout the curriculum?   - How do faculty ensure that established practice competencies are incorporated in the various evaluation methodologies of students' performance used throughout the curriculum?   - How do the faculty ensure that the various evaluation methodologies of students' performance are linked to the measurement of the achievement of course and/or the end-of-program student learning outcomes?   - For graduate programs with APRN program options and consistent with the NTF Guidelines: - How is student progress evaluated thought the didactic and clinical components each academic term?   - How is student attainment of competencies evaluated throughout the program of study?   - How is clinical competence of students cumulatively assessed and evaluated?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi
EXAMPLES **OF SUPPORTING EVIDENCE**
- Curriculum Mapping Documents   - Professional and Practice Competency Documents   - Clinical/Practicum Evaluation Tools   - Samples of Student Work/Course Assignments   - Test Mapping Documents   - Meeting Minutes   **Note:** *Full* nursing *course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

Criterion 4.8

The total number of credit/quarter hours required to complete the defined nursing program of study is congruent with the attainment of the identified **end-of-program student learning outcomes** and **program outcomes**, and is consistent with the polices of the governing organization, the state, and the governing organization's accrediting agency.

FOCUSED QUESTIONS
- How many total (inclusive of all prerequisite and general education courses) credit/ /clock hours are required to complete the program of study for all program options?   - What is the length of an academic term for the program for all program options?   - What credit-to-contact hour ratio(s) are used by the program in all program options for didactic, skills/laboratory, and **clinical/practicum** or **practice learning experiences**?

• Does the program have the minimum credit/ /clock hours required by a state or national (for international programs) regulatory agency for the various learning environments, as applicable? • Are students able to achieve the end-of-program student learning outcomes and program outcomes within the required credit/ /clock hours in all program options? • What are the governing organization's policies regarding the awarding of credit//clock hours for didactic, laboratory, and clinical/practicum? Are the nursing courses consistent with these policies? • Do the state or national (for international programs) regulatory agencies (e.g., BON or State Higher Education Regulatory Agency) have any policies related to **nursing program length**? If so, is the program in compliance with these policies? If not, does the program have state or national (for international programs) authorization for the program length? • What are the governing organization's accrediting agency's requirements for program length? Is the program in compliance with these requirements?

<table>
<tr><td align="center">REQUIRED EVIDENCE</td></tr>
<tr><td>Abbreviated nursing course syllabi</td></tr>
<tr><td align="center"><i><u>EXAMPLES</u></i> OF SUPPORTING EVIDENCE</td></tr>
<tr><td>
• Catalog
• Program of Study for all program options
• Policies and Procedures
• Academic Terms
• Credit Hour Distribution
• State or National (for international programs) Rules and Regulations (e.g., Board of Nursing, State Higher Education Regulatory Agency)
• Governing Organization's Accrediting Agency Standards
• Credit-to-Contact-Hour Worksheets
• Schedules/Calendars (Didactic, Laboratory, Practice Learning Experiences)
• Hours Verification Forms (e.g., Precepted Practice Learning Experiences)
• Waivers/Authorizations for program length exceeding guidelines or regulations
• Meeting Minutes
Note: <i>Full nursing course syllabi must be available for onsite review, if applicable (electronic or hard-copy)</i>
</td></tr>
</table>

Criterion 4.9

Student clinical experiences and **practice learning environments** are evidence-based; reflect contemporary practice and nationally established patient health and safety goals; and support the achievement of the **end-of-program student learning outcomes**.

<table>
<tr><td align="center">FOCUSED QUESTIONS</td></tr>
<tr><td>
• What direct, hands-on planned **clinical/practicum** or **practice learning experiences** (skills laboratory, simulation [traditional and/or virtual]) with patients across the lifespan, interactions with the interprofessional team, and interactions with the patient's family and friends are required for completion of the program of study, inclusive of all program options?
• For graduate programs with an APRN program option, do students complete a minimum of 500 supervised direct patient care clinical hours during the program of study?
• For clinical doctorate programs, how many practicum hours are required in the programs? For post-master's program options, how are clinical hours from prior master's programs vetted to ensure a minimum of 1,000 practicum hours after the baccalaureate degree?
• For graduate programs, how are practicum hours verified and logged?
</td></tr>
</table>

- What practice learning environments are used during the program of study, inclusive of all program options?
- What type of clinical practice/practicum learning environments are used in each program option?
- How many <u>total</u> contact hours of clinical/practicum hours in the skills laboratory, simulation, and clinical settings does each student complete for each program option? **<u>Note:</u>** *Itemize number of hours for clinical/practicum, skills laboratory, and simulation (traditional and/or virtual).*
- Are there any state or national (for international programs) regulations related to the use of simulation in lieu of clinical/practicum time? If so, what are these regulations, and is the program compliant?
- How are the clinical/practicum or practice learning experiences and practice learning environments evidence-based in each program option?
- How do the clinical/practicum or practice learning experiences and practice learning environments in each program option reflect contemporary practice and nationally established patient health and safety goals?
- How do the clinical/practicum or practice learning experiences and practice learning environments support achievement of the end-of-program student learning outcomes in each program option?

<u>Note:</u> *As a practice profession, all nursing programs and program options in the program of study are expected to include clinical/practicum practice, as defined in the ACEN Glossary. Although the ACEN does not have specific requirements regarding the number of hours, types, or clinical/practicum settings for each program and/or program option, the ACEN holds the program leaders accountable for ensuring that students complete clinical/practicum or practice learning experiences that are consistent with post-graduation expectations (e.g., licensure, certification, and safe practice), the degree/certificate/diploma awarded, and students being able to achieve the end-of-program student learning outcomes.*

<u>Note:</u> *For precepted clinical/practicum learning experiences, the ACEN holds the program leaders accountable for directly arranging for students or assisting students to arrange clinical/practicum experiences that are consistent with post-graduation expectations (e.g., licensure, certification, and safe practice), the degree/certificate/diploma awarded, and students being able to achieve the end-of-program student learning outcomes.*

EXAMPLES OF SUPPORTING EVIDENCE

- Program of Study for all program options
- Student Handbooks
- Clinical Site Selection Criteria Documentation
- List of Clinical Locations
- Identification of specialty units
- Documented rationale for use
- List of Other Practice Learning Environments (e.g., laboratory setting)
- Documented rationale for use
- State or National (for international programs) Regulations related to Clinical/Practicum Experiences, including simulation
- Evaluation of practice learning environments and supporting data
- Clinical Evaluation Tools
- Clinical/Simulation/Laboratory paperwork, assignments, checklists
- Meeting Minutes

Criterion 4.10

Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.

FOCUSED QUESTIONS
- What is the process for securing clinical/practicum practice agency/preceptor agreements, including when students are expected to contribute to finding a preceptor?   - Are there written agreements for all clinical/practicum practice agencies and/or preceptors currently in use, including when students are expected to contribute to finding a preceptor? Are the written agreements current?   - Do the written agreements specify expectations for all parties, including when students are expected to contribute to finding a preceptor? If so, what are some of the expectations and how were the expectations determined?   - How do the written agreements ensure the protection of students?
***EXAMPLES* OF SUPPORTING EVIDENCE**
- List of practicum/clinical agencies currently in use   - Clinical Affiliation Agreements   - Preceptor Agreements

Criterion 4.11

Learning activities, instructional materials, and evaluation methods are appropriate for all **delivery formats** and consistent with the **end-of-program student learning outcomes**.

FOCUSED QUESTIONS
- What delivery formats are used for nursing course throughout the program of study, inclusive of all program options?   - How are the learning activities consistent with the end-of-program student learning outcomes and appropriate for each delivery method in all program options?   - How are the instructional materials consistent with the end-of-program student learning outcomes and appropriate for each delivery format in all program options?   - How are the evaluation methods consistent with the end-of-program student learning outcomes and appropriate for each delivery format in all program options?
REQUIRED EVIDENCE
Abbreviated nursing course syllabi
***EXAMPLES* OF SUPPORTING EVIDENCE**
- Program of Study for all program options   - Examples of learning activities for all delivery formats in all program options   - Examples of instructional materials for all delivery formats in all program options   - Examples of evaluation methods for all delivery formats in all program options   - Curricular Mapping Documents in all program options   - Samples of Student Work/Course Assignments for all delivery formats in all program options   - Learning Management System   - Meeting Minutes   **Note:** *Full* nursing *course syllabi must be available for onsite review, if applicable (electronic or hard-copy)*

Standard 5 Resources

Fiscal, physical, and learning resources are sustainable and **sufficient** to ensure the achievement of the **end-of-program student learning outcomes** and **program outcomes** of the nursing program.

Criterion 5.1
Fiscal resources are sustainable, **sufficient** to ensure the achievement of the **end-of-program student learning outcomes** and **program outcomes**, and commensurate with the resources of the **governing organization**.

FOCUSED QUESTIONS
• What are the sources of funding for the nursing education unit (e.g., tuition, fees, and/or grants)?   • Have the sources and/or amount of funding changed over time?   • What is the governing organization and/or nursing education unit doing to ensure sufficiency of funding for maintenance of the program?   • What is the budget of the nursing education unit?   • Is more than one nursing program offered by the nursing education unit (e.g., practical and associate, baccalaureate, and master's)? How is the budget managed for each nursing program offered?   • Is the nursing program offered at more than one location? If so, how is the nursing budget distributed across locations or are there separate budgets for each location? Are budgets comparable?   • How does the nursing program budget compare to programs of similar size within the governing organization and to the governing organization as a whole?   • Is the nursing program budget sufficient to ensure achievement of the end-of-programstudent learning outcomes and program outcomes for all program options?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Budget Data: three years of actual budgets for governing organization and nursing program, *Required*   • Inclusive of all Locations where the nursing program is offered   • Comparative Budgets: Governing Organization/Nursing Education Unit   • Comparative Budgets: Nursing Program/Similar size Program(s) within the Governing Organization   • All Funding Sources for the governing organization and nursing program   • Meeting Minutes

Criterion 5.2
Physical resources are **sufficient** to ensure the achievement of the **end-of-program student learning outcomes** and **program outcomes**, and meet the needs of the faculty, staff, and students.

FOCUSED QUESTIONS
• What physical resources (e.g., equipment, classrooms, laboratories, offices, and common spaces) are available for the faculty, staff, and students of the nursing program at all locations that the nursing program and all program options are offered? Are these physical resources dedicated to the nursing program or shared with other programs?
• How do these physical resources at all locations meet the needs of the faculty, staff, and students in all program options?
• What private meeting spaces are available at all locations if faculty have shared offices? Where are these spaces located and how many are available?
• How do the physical resources at all locations ensure the achievement of the end-of-program student learning outcomes and program outcomes for all program options?
• When are physical resources (computer and skills laboratories) at all locations accessible to students in all program options outside of scheduled class times?
• How are physical resources for all program options comparable for all locations?

EXAMPLES OF SUPPORTING EVIDENCE
• Program Reports
• Satisfaction Surveys, if applicable
• Space Diagrams (Inclusive of all Locations)
• Tables/lists of resources
• Tours/observations of Physical Space (Inclusive of all Locations)
• Classrooms
• Offices
• Laboratories (Skills, Simulation, and Computer)

Criterion 5.3
Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students.

FOCUSED QUESTIONS
• What learning resources are available for use by faculty and students? How is this sufficient to meet the learning needs of students in all program options at all locations? • How are learning resources identified and selected at all locations? What is the role of nursing faculty in the identification and selection of learning resources for all program options at all locations? • What learning technologies are available for use by faculty and students? How is this sufficient to meet the learning needs of students in all program options at all locations? • How are learning technologies identified and selected at all locations? What is the role of nursing faculty in the identification and selection of learning technologies for all program options at all locations? • How do students access the library resources (i.e., onsite, online) at all locations? What do the faculty consider to be current/up-to-date library resources and how is currency of these resources maintained at all locations? • Are the learning resources and technology current and up to date at all locations? What is the process to ensure that the resources are current and up to date at all locations? • How do faculty and students from all program options access the learning resources and technology at all locations? • When can faculty and students access the learning resources and technology at all locations?
***EXAMPLES* OF SUPPORTING EVIDENCE**
• List of Learning Resources (all locations; physical library and online/virtual resources) • List of Technology Resources (all locations; physical library and online/virtual resources) • Policies and Procedures (e.g., library acquisitions; culling/selection/deselection) • Websites • Meeting Minutes • Hours of Operation/Access (physical library and online/virtual resources) • Library Tour (physical library and online/virtual resources) • Satisfaction Surveys, if applicable

Criterion 5.4
Fiscal, physical, technological, and **learning resources** are **sufficient** to meet the needs of the faculty and students engaged in **alternative methods of delivery**.

FOCUSED QUESTIONS

• What delivery formats are used for nursing course throughout the program of study for all program options? Does any program option use any distance education (ACEN Policy #15) or alternative methods of delivery for any nursing course?
• If distance education or alternative methods of delivery are used in any program option, describe how there are:
   ○ Sufficient fiscal resources to meet the needs of faculty and students.
   ○ Sufficient physical resources to meet the needs of faculty and students.
   ○ Sufficient technological resources to meet the needs of faculty and students.
   ○ Sufficient learning resources to meet the needs of faculty and students.

***EXAMPLES* OF SUPPORTING EVIDENCE**

- Specific to Faculty and Students Engaged in Alternative Methods of Delivery:
- Budget Data if Separate from Budget Data for Criterion 5.1
- Funding Sources
- Meeting Minutes
- Annual Reports (Governing Organization and Nursing Education Unit)
- List of Learning Resources
- List of Technology Resources
- Policies and Procedures specific to faculty and/or students engaged in alternative methods of delivery
- Websites
- Meeting Minutes
- Hours of Operation/Access

Standard 6 Outcomes

Program evaluation demonstrates that students have achieved each **end-of-program student learning outcome**/*****role-specific professional competency** and each program outcome.

The nursing program has a current **systematic plan of evaluation**. The systematic plan of evaluation contains:

Specific, measurable **expected levels of achievement** for each end-of-program student learning outcome/*role-specific professional competency and each program outcome.

Appropriate assessment method(s) for each end-of-program student learning outcome/*role-specific professional competency and each program outcome.

Regular intervals for the assessment of each end-of-program student learning outcome/*role-specific professional competency and each program outcome.

Sufficient data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome/*role-specific professional competency and each program outcome.

Analysis of assessment data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome/*role-specific professional competency and each program outcome.

Documentation demonstrating the use of assessment data in program decision-making for the maintenance and improvement of each end-of-program student learning outcomes/*roles-specific professional competency and each program outcome.

*__Note:__ *Role-specific professional competencies are only required at the graduate level.*

GENERAL QUESTIONS TO ASSIST PROGRAMS IN THE SELF-EVALUATION OF THE OVERALL SYSTEMATIC PLAN OF EVALUATION
- How did the faculty develop the written systematic plan of evaluation?   - How/when is this plan used by the faculty for program level assessment?   - Does the written systematic plan of evaluation include documentation of *each* end-of-program student learning outcome?   - Does the systematic plan of evaluation include documentation of *each* role-specific professional competency for each program option? (graduate programs only)   - Does each end-of-program student learning outcome have appropriate **outcome assessment methods**?   - Does each role-specific professional competency (graduate programs only) have appropriate assessment methods?   - Does each assessment method have a specific, measurable expected level of achievement?   - What is the schedule for data collection and the assessment of this data?   - Are the data collected meaningful and sufficient for decision-making?   - Does the plan include analysis of the data collected, and actions if needed?   - Does the written systematic plan of evaluation include documentation for *each* program outcome?   - Are there appropriate assessment methods for each program outcome?   - For APRN program options (graduate programs only):

o Does the Systematic Plan of Evaluation include the plan to assess graduate and employer satisfaction to demonstrate compliance with the NTF Guidelines?
o What assessment methods are used?
o Are there specific and measurable expected levels of achievement for this method?
o What is the schedule for data collection and the assessment of this data?
o Are the data collected meaningful and sufficient to inform program decision-making?
o Does the plan include analysis of the data collected, and actions if needed?
Note: *New programs without graduates will not have end-of program student learning outcomes data at the time of the initial accreditation visit; however, the Systematic Plan of Evaluation must be developed and available for peer evaluators at the time of the initial accreditation visit.*
REQUIRED EVIDENCE
Systematic Plan of Evaluation

Criterion 6.1

Graduate Programs

The program demonstrates evidence of students' achievement of each **end-of-program student learning outcome**/**role-specific professional competency**.

There is ongoing assessment of the extent to which students attain each end-of-program student learning outcome/role-specific professional competency.

There is ongoing assessment of data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' attainment of each end-of-program student learning outcome/role-specific professional competency.

FOCUSED QUESTIONS
1. *Programs seeking continuing accreditation are expected to maintain data for the end-of-program student learning outcomes based on its timeline for assessing all end-of-program student learning outcomes.*
2. *Programs seeking initial accreditation are only required to have data for the end-of-program student learning outcomes based on its timeline for assessing all end-of-program student learning outcomes from the time that candidacy with the ACEN was achieved.*
• How do the faculty use the Systematic Plan of Evaluation to assess each end-of-program student learning outcome?
• How do the faculty use the Systematic Plan of Evaluation to assess each role-specific professional competency for all program options?
• What are some examples from the Systematic Plan of Evaluation relative to assessment methods, data collection, assessment intervals, analysis, and actions?
• What are some examples of how the analysis and assessment of data are used for program decision-making?
• If the program has not had graduates at the time of the initial accreditation visit:
o What is the program's plan for collecting, analyzing, and evaluating data related to the end-of-program student learning outcomes?
o What is the program's plan for collecting, analyzing, and evaluating data related to the role-specific professional competencies?

> **Note:** *Although assessment of student achievement of the end-of-program student learning outcomes and role-specific professional competencies may be performed every academic term or every academic year, faculty may elect to analyze the data only when sufficient data have been collected (e.g., every 2-5 years).*

REQUIRED EVIDENCE
Systematic Plan of Evaluation

EXAMPLES **OF SUPPORTING EVIDENCE**
• Assessment and Evaluation Tools/Rubrics/Assignments/Projects • Assessment and Evaluation Reports • Program Reports • Meeting Minutes

Undergraduate Programs

The program demonstrates evidence of students' achievement of each **end-of-program student learning outcome**.

There is ongoing assessment of the extent to which students attain each end-of-program student learning outcome.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' attainment of each end-of-program student learning outcome.

FOCUSED QUESTIONS
1. *Programs <u>seeking continuing accreditation</u> are expected to maintain data for the end-of-program student learning outcomes based on its timeline for assessing all end-of-program student learning outcomes.* 2. *Programs <u>seeking initial accreditation</u> are only required to have data for the end-of-program student learning outcomes based on its timeline for assessing all end-of-program student learning outcomes from the time that candidacy with the ACEN was achieved.* • Are there sufficient and meaningful end-of-program student learning outcomes data to inform program decision-making? • How does the faculty use the Systematic Plan of Evaluation to assess each end-of-program student learning outcome? • What are some examples from the Systematic Plan of Evaluation relative to assessment methods, data collection, assessment intervals, analysis, and actions? • What are some examples of how the analysis and assessment of data are used for program decision-making? • If the program has not had graduates at the time of the initial visit: ○ What is the program's plan for collecting, analyzing, and evaluating data related to the end-of-program student learning outcomes? **Note:** *Although assessment of student achievement of the end-of-program student learning outcomes may be performed every academic term or every academic year, faculty may elect to analyze the data only when sufficient data have been collected (e.g., every 2-5 years).*

REQUIRED EVIDENCE
Systematic Plan of Evaluation

EXAMPLES OF SUPPORTING EVIDENCE
• Assessment and Evaluation Tools/Rubrics/Assignments/Projects • Assessment and Evaluation Reports • Program Reports • Meeting Minutes

Criterion 6.2
Graduate Programs

The program demonstrates evidence of graduates' achievement on each certification examination (**licensure examination and/or certification examination**: _Master's/PMC_).

For entry-level master's programs, the program's most recent annual licensure examination pass rate will be at least 80% for <u>all</u> first-time test-takers during the same 12-month period (_Master's_).

For each certification examination, the annual pass rate for <u>all</u> first-time test-takers will be at or above the national mean for the same three-year period; in the absence of a national mean, the pass rate for each certification examination will be at least 80% for <u>all</u> first-time test-takers during the same 12-month period.

There is ongoing assessment of the extent to which gradates succeed on the licensure and/or certification examination(s).

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduate's success on the licensure and/or certification examination(s).

There is a minimum of the three (3) most recent years of available licensure and/or certification examination pass rate data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option/certification examination, location, and date of program completion.

Note: _International programs should describe the licensure/registration process for their locale and the program graduate's performance or initial success in that process._

FOCUSED QUESTIONS

• What program options are offered by the program?
• Is there more than one location where the program/program option(s) are offered? If so, what are the locations?
• Is there more than one graduating class per year? If so, when do students graduate?
• Does the program offer a pre-licensure (i.e., registered nurse) program option? If so,
    ○ What is the expected level of achievement for the licensure examination pass rate? Is the expected level of achievement consistent with the Criterion statement?
    ○ What is the annual licensure examination pass rate for all first-time test-takers? Is the licensure examination pass rate at or above 80% for the program as a whole?
    ○ Does the program have three years of licensure examination pass rate data? If the program has not had graduates at the time of the initial visit:
        ▪ What is the program's plan for collecting, analyzing, and evaluating licensure examination results?
    ○ What is the annual licensure examination pass rate for all first-time test-takers for each location?
    ○ What is the licensure examination pass rate for all first-time test-takers for each date of program completion?

- Does the program offer a program option with an associated certification examination (e.g., nurse practitioner)? If so:
  - What program options are offered?
  - What is the expected level of achievement for the certification examination pass rate? Is the expected level of achievement consistent with the Criterion statement?
  - What is the annual certification examination pass rate for all first-time test-takers for the program as a whole?
  - Is there a national mean on the certification examination completed by program graduates? Does the program as a whole meet or exceed the national mean for the same three-year period for all first-time test-takers?
  - If the national mean for the certification examination completed by program graduates is not available, is the certification examination pass rate at for the program as a whole at or above 80%?
  - What is the annual certification examination pass rate for all first-time test-takers for each program option?
  - What is the annual certification examination pass rate for all first-time test-takers for each location?
  - What is the certification examination pass rate for all first-time test-takers for each date of program completion?
  - Does the program have three years of certification examination pass rate data? If the program has not had graduates at the time of the initial visit:
    - What is the program's plan for collecting, analyzing, and evaluating licensure/certification examination results?
- Are there sufficient and meaningful licensure/certification examination data to inform program decision-making?
- How do the faculty use the Systematic Plan of Evaluation to assess licensure/certification examination results?
- What are some examples from the Systematic Plan of Evaluation relative to assessment methods, data collection, assessment intervals, analysis, and actions?
- What are some examples of how the analysis and assessment of data are used for program decision-making?

Note: *Programs seeking initial accreditation are only required to have data for the licensure/certification examination pass rate from the time that candidacy with the ACEN was achieved. Programs seeking continuing accreditation are expected to maintain three (3) years of licensure/certification examination pass rate data.*

<table>
<tr><td>REQUIRED EVIDENCE</td></tr>
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Systematic Plan of Evaluation

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<tr><td>GUIDANCE – EXPECTED LEVEL OF ACHIEVMENT</td></tr>
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- **Certification Examination:**
  - ELA for certification examinations <u>**with**</u> a national mean rate available: ***The annual pass rate for all first-time test-takers will be at or above the national mean for the same three-year period.***
  - ELA for certification examinations in the absence of a national mean: ***The most recent annual pass rate will be at least 80% for all first-time test-takers during [identify a 12-month period].***

  The outcome statement should:
  - Identify a timeframe (e.g., "annually" or "from January 1 to December 31 every year").
  - State "all first-time test-takers."

• Have an ELA that is consistent with the benchmark stated in Criterion 6.2. If a national mean is available, then that should be used. In the absence of an annual mean, the ELA should be at least 80%, or it could be higher than 80%; the ELA cannot be lower than 80%.
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Examination Results Reports • Program Reports • Meeting Minutes

Undergraduate Programs

The program demonstrates evidence of graduates' achievement on the **licensure examination**.

The program's most recent annual licensure examination pass rate will be at least 80% for **all** first-time test-takers during the same 12-month period.

There is ongoing assessment of the extent to which graduate succeed on the licensure examination.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates' success on the licensure examination.

There is a minimum of the three (3) most recent years of available licensure examination pass rate data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion.

Note: *International programs should describe the licensure/registration process for their locale and the program graduate's performance or initial success in that process.*

FOCUSED QUESTIONS
• What program options are offered by the program? • Is there more than one location where the program/program option(s) are offered? If so, what are the locations? • Is there more than one graduating class per year? If so, when do students graduate? • Does the program offer a pre-licensure (i.e., practical nurse or registered nurse) program option? • What is the expected level of achievement for the licensure examination pass rate? Is the expected level of achievement consistent with the Criterion statement? • What is the annual licensure examination pass rate for all first-time test-takers for the same 12-month period? Is the licensure examination pass rate at or above 80% for the program as a whole? • What is the annual licensure examination pass rate for all first-time test-takers for the same 12-month period for each program option? • What is the annual licensure examination pass rate for all first-time test-takers for the same 12-month period for each location? • What is the annual licensure examination pass rate for all first-time test-takers for each date of program completion? • Does the program have three years of licensure examination pass rate data? If the program has not had graduates at the time of the initial visit: o What is the program's plan for collecting, analyzing, and evaluating licensure examination results?

- Are there sufficient and meaningful licensure examination data to inform program decision-making?
- How do the faculty use the Systematic Plan of Evaluation to assess licensure examination results?
- What are some examples from the Systematic Plan of Evaluation relative to assessment methods, data collection, assessment intervals, analysis, and actions?
- What are some examples of how the analysis and assessment of data are used for program decision-making?

Note: *Programs seeking initial accreditation are only required to have data for the licensure examination pass rate from the time that candidacy with the ACEN was achieved. Programs seeking continuing accreditation are expected to maintain three (3) years of licensure/certification examination pass rate data.*

REQUIRED EVIDENCE

Systematic Plan of Evaluation

GUIDANCE – EXPECTED LEVEL OF ACHIEVMENT

- **Licensure Examination:** *The most recent annual pass rate will be at least 80% for all first-time test-takers during [identify a 12-month period].*
  The outcome statement should:
    - Identify a timeframe (e.g., "annually" or "from January 1 to December 31 every year").
    - State "all first-time test-takers."
    - Have an ELA that is consistent with the benchmark stated in Criterion 6.2, which is 80%. The ELA should be at least 80%, but it could be higher than 80%. The ELA cannot be lower than 80% and cannot be related to the national or state pass rate average.

EXAMPLES OF SUPPORTING EVIDENCE

- Examination Results Reports
- Program Reports
- Meeting Minutes

Criterion 6.3

The program demonstrates evidence of students' achievement in completing the nursing program.

The **expected level of achievement** for **program completion** is determined by the faculty and reflects student demographics.

There is ongoing assessment of the extent to which students complete the nursing program.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' completion of the nursing program.

There is a minimum of the three (3) most recent years of annual program completion data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion or entering cohort.

FOCUSED QUESTIONS

- How are program completion data collected?
- What is the expected level of achievement for program completion? Is the expected level of achievement consistent with the ACEN definition of program completion?

- Is the expected level of achievement for each program option and location the same? If not, what is the expected level of achievement for each?
- How was the expected level of achievement determined? Was the expected level of achievement determined by faculty?
- What is the rationale for the expected level of achievement?
- How is the program completion rate calculated? Does the program calculate program completion based on all student beginning with the first day of the first nursing course?
- What is the program completion rate for the program as a whole?
- What is the program completion rate for each program option?
- What is the program completion rate for each location?
- What is the program completion rate for each date of program completion or entering cohort?
- Does the program have three years of program completion data? If the program has not had graduates at the time of the initial visit:
  - What is the program's plan for collecting, analyzing, and evaluating program completion data?
- Are there sufficient and meaningful program completion data to inform program decision-making?
- How do the faculty use the Systematic Plan of Evaluation to assess program completion?
- What are some examples from the Systematic Plan of Evaluation relative to assessment methods, data collection, assessment intervals, analysis, and actions?
- What are some examples of how the analysis and assessment of data are used for program decision-making?

Note: *Programs seeking initial accreditation are only required to have data for program completion from the time that candidacy with the ACEN was achieved. Programs seeking continuing accreditation are expected to maintain three (3) years of program completion data.*

<div style="text-align:center">

REQUIRED APPENDIX

</div>

Systematic Plan of Evaluation

<div style="text-align:center">

GUIDANCE – EXPECTED LEVEL OF ACHIEVMENT

</div>

Program Completion Rate: *[XX]% of all students who begin in [first nursing course in program or program option] will complete the program on time in [X] academic terms*
The outcome statement should:
- Include ALL students who begin the nursing program.
- State "that began the first nursing course in the program."
- Identify the on-time timeframe for completion of the program, such as "6 semesters."

Additionally, calculating the completion rate has been a challenge.
1. Start with each entering cohort beginning with the first day of the first nursing course, and then follow each individual student through graduation; report data for on-time completers. May also report data for additional timeframes (e.g., 150%, ultimate).
2. As an example, a program with 10 students on the first day of NUR 101 in a four-semester nursing program; six students from the cohort graduate in four semesters. The applicable program completion rate would be 60% for on-time graduates.
3. Similar to pass rates, disaggregation of data is required for program ***options***, ***locations***, and ***entering cohorts/dates of completion***. Some programs have additional program options, which may be shorter or longer than the traditional option offered (e.g., full-time vs. part-time options; LPN-to-RN option; RN-to-BSN option; or PMC option). *If* applicable, an ELA for each available program option, reflecting the appropriate first nursing course and usual timeframe, should be developed.

EXAMPLES OF SUPPORTING EVIDENCE
• Data Collection Reports • Program Reports • Meeting Minutes

Criterion 6.4

The program demonstrates evidence of graduates' achievement in **job placement**.

The **expected level of achievement** for job placement is determined by the faculty and reflects program demographics.

For student who do not hold a license as a registered nurse upon admission to the program, there is ongoing assessment of the extent to which graduates ore employed. (**Baccalaureate only**)

For students who hold a license as a registered nurse upon admission to the program, there is ongoing assessment of the extent to which graduates are employed. (**Baccalaureate only**)
There is ongoing assessment of the extent to which graduates are employed.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates being employed.

There is a minimum of the three (3) most recent years of available job placement data, and data are aggregated for the nursing program as a whole.

FOCUSED QUESTIONS
• How are job placement data collected? • What is the graduate response rate (i.e., number of graduates contacted/responded divided by the total number of graduates)? • How is the job placement rate calculated? Does this align with the ACEN definition of job placement? • What is the expected level of achievement for job placement? Was it determined by faculty? • What is the rationale for expected level of achievement for job placement? • Does the program have three years of job placement data? If the program has not had graduates at the time of the initial visit: ○ What is the program's plan for collecting, analyzing, and evaluating job placement data? • Are there sufficient and meaningful job placement data to inform program decision-making? • How do the faculty use the Systematic Plan of Evaluation to assess job placement? • What are some examples from the Systematic Plan of Evaluation relative to assessment methods, data collection, assessment intervals, analysis, and actions? • What are some examples of how the analysis and assessment of data are used for program decision-making?

Note: *Programs seeking initial accreditation are only required to have data for job placement from the time that candidacy with the ACEN was achieved. Programs seeking continuing accreditation are expected to maintain three (3) years of job placement data.*
REQUIRED APPENDIX
Systematic Plan of Evaluation
GUIDANCE – EXPECTED LEVEL OF ACHIEVMENT
Program Completion*: [XX]% of graduates will report employment as a [PN; RN; NP; CRNA] within [X months] of graduation.* The outcome statement should: • Only include employment and exclude those continuing their education at another degree level rather than going to work. For programs with a high percentage of graduates continuing their education at another degree level instead of going to work, consider having a separate outcome addressing academic progression. Academic progression is a positive outcome, so account for this success as well. • Include all graduates reporting employment and not just those seeking employment or those who passed the licensing examination. • State the level of employment (e.g., registered nurse; practical nurse) for which a nursing program prepared the graduate. • Identify a timeframe for employment, such as "9 months" or "1 year." Additionally, calculating the job placement rate has been a challenge. 1. Programs should attempt to contact all graduates. 2. Divide the number of graduates successfully contacted by the number reporting having secured employment in a position for which the nursing program prepared them. 3. As an example, if a program had 100 graduates, successfully contacted 80 of them (80% response/contact rate), and 79 reported employment in a position for which the nursing program prepared them, the applicable job placement rate would be 98.75% (79/80).
***EXAMPLES* OF SUPPORTING EVIDENCE**
• Data Collection Reports • Program Reports • Meeting Minutes

Other Program Outcomes

Faculty may elect to include other selected **program outcomes** in the **systematic plan of evaluation**. The governing organization, state or national (for international programs) board of nursing, or professional guidelines may also have requirements for the program's systematic plan of evaluation, which should also be included if applicable. As a reminder, **programs with APRN program options must provide graduate and employer satisfaction data to demonstrate compliance with the NTF Guidelines**.

SAMPLE: Written Report Template

Section I: Program Information

<u>Governing Organization</u>
> Name:
> Street Address:
> Mailing Address: (*if applicable*)

<u>Chief Executive Officer</u>
> Name:
> Credentials:
> Job Title:
> Telephone:
> Email:

<u>Campus Chief Executive Officer (*if applicable*)</u>
> Name:
> Credentials:
> Job Title:
> Telephone:
> Email:

<u>Governing Organization Accreditation</u>
> Accrediting Agency:
> Current Accreditation Status:
> Date of Last Review:
> Date of Next Review:

<u>Nursing Education Unit</u>
> Name of Nursing Education Unit/Program(s):
> Program Type(s) (*Include only those programs addressed in the report; e.g., associate, baccalaureate*):
> Street Address:
> Mailing Address:

<u>Nurse Administrator</u>
> Name:
> Credentials:
> Job Title:
> Telephone:
> Email:

<u>State Regulatory Status</u>
> Regulatory Agency:
> Current Status with Regulatory Agency:
> Date of Last Review:
> Date of Next Review:

<u>ACEN Accreditation</u>
> Year(s) Nursing Program(s) Established:
> Current ACEN Accreditation Status:
> Date of Initial Accreditation:
> Date of Last Review: (*if applicable*)
> Date of Next Review: (*if applicable*)
> ACEN Accreditation Standards and Criteria used for this report:

Program of Study and Program Options

Name of Program option (as cited in the program of study):	
Program of study:	☐ Full-time ☐ Part-time ☐ Both
Frequency of Admission:	☐ Fall ☐ Winter ☐ Spring ☐ Summer ☐ Rolling ☐ Other:
Type of Academic Term:	☐ Quarter ☐ Trimester ☐ Semester ☐ Other:
Number of Weeks in an Academic Term:	

Add more tables as needed

Program Locations, Program Options, and Methods of Delivery

Program Location: Name/Address	Program Options Offered	Methods of Delivery (e.g., face-to-face, online, hybrid)

Add more lines as needed

Enrollment

Program Type:	
Current Student Enrollment (Total):	
Current Student Enrollment (Option or Location):	
Current Student Enrollment (Option or Location):	
Current Student Enrollment (Option or Location):	
Current Student Enrollment (Option or Location):	

Add more lines or tables as needed

Section II: Report Narrative

Program Overview: Refer to Instruction Sheets for additional information

Standard 1 Mission and Administrative Capacity
The mission of the nursing education unit reflects the governing organization's core values and is congruent with its mission/goals. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.

Criterion 1.1
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 1.2
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 1.3
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 1.4
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 1.5
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 1.6
Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Educational and Experiential Qualification Requirements for the Nurse Administrator Role	
Agency/Where Requirements are Found	**Educational and Experiential Qualification Requirements**
[Name of Governing Organization]	*Brief description of requirements.*
[Name of State Agency]	*Brief description of requirements.* ☐ Not Applicable
[Name of Nursing Regulatory Agency]	*Brief description of requirements.* ☐ Not Applicable

Add additional agencies as needed

Criterion 1.7

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Educational and Experiential Qualification Requirements for the Nursing Program Coordinator Role	
Agency/Where Requirements are Found	**Summary of Educational and Experiential Requirements**
[Name of Governing Organization]	*Brief description of requirements.*
[Name of State Agency]	*Brief description of requirements.* ☐ Not Applicable
[Name of Nursing Regulatory Agency]	*Brief description of requirements.* ☐ Not Applicable

Add additional agencies as needed

Criterion 1.8

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 1.9

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 1.10

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 1.11

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Standard 2 Faculty and Staff

Qualified and credentialed faculty are sufficient in number to ensure the achievement of the end-of-program student learning outcomes and program outcomes. Sufficient and qualified staff are available to support the nursing program.

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

Criterion 2.1

Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Full-Time Faculty Degree Summary Table

Nursing Faculty Academic Credentials – (Highest Degree Only) – [Program Type]								
Number of Faculty	Doctoral		Master's		Baccalaureate		Associate	
	Nursing	Non-nursing	Nursing	Non-nursing	Nursing	Non-nursing	Nursing	Non-nursing
FT Exclusive								
FT Shared								

If more than one program type included in report, add more tables for each program type

Educational and Experiential Requirements for the Full-time Faculty Role	
Agency/ Where Requirements are Found	**Summary of Educational Qualifications and Experience Requirements**
[Name of Governing Organization]	*Brief description of requirements.*
[Name of State Agency]	*Brief description of requirements.* ☐ Not Applicable
[Name of Nursing Regulatory Agency]*	*Brief description of requirements.* ☐ Not Applicable
[Name of Governing Organization's Accrediting Agency]	*Brief description of requirements.* ☐ Not Applicable

Add more lines as needed including all state agencies in which the nursing students participate in learning experiences

Criterion 2.2
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Part-Time Faculty Degree Summary Table

Nursing Faculty Academic Credentials – (Highest Degree Only) – [Program Type]								
Number of Faculty	Doctoral		Master's		Baccalaureate		Associate	
	Nursing	Non-nursing	Nursing	Non-nursing	Nursing	Non-nursing	Nursing	Non-nursing
PT Exclusive								
PT Shared								

If more than one program type included in report, add more tables for each program type

Educational and Experiential Requirements for the Part-time Faculty Role	
Agency/ Where Requirements are Found	**Summary of Educational Qualifications and Experience Requirements**
[Name of Governing Organization]	*Brief description of requirements.*
[Name of State Agency]	*Brief description of requirements.* ☐ Not Applicable
[Name of Nursing Regulatory Agency]*	*Brief description of requirements.* ☐ Not Applicable
[Name of Governing Organization's Accrediting Agency]	*Brief description of requirements.* ☐ Not Applicable

Add more lines as needed including all state agencies in which the nursing students participate in learning experiences

Criterion 2.3
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Non-Nurse Faculty TEACHING NURSING COURSES Degree Summary Table (*if applicable*)

Non-Nurse Faculty Academic Credentials – (Highest Degree Only) – [Program Type]				
Number of Faculty	Doctoral	Master's	Baccalaureate	Associate

If more than one program type included in report, add more tables for each program type

Non-Nurse Faculty TEACHING NURSING COURSES Enrolled in a Program of Study Table (*if applicable*)

Faculty Name and Credentials	Academic Program Enrollment
	Program Type: Program Focus: Anticipated Graduation: (*term/year*)
	Program Type: Program Focus: Anticipated Graduation: (*term/year*)

Add more lines as needed

Criterion 2.4
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Educational and Experiential Requirements for the Preceptor Role	
Agency/ Where Requirements are Found	**Summary of Educational Qualifications and Experience Requirements**
[Name of Governing Organization]	*Brief description of requirements.*
[Name of State Agency]	*Brief description of requirements.* ☐ Not Applicable
[Name of Nursing Regulatory Agency]*	*Brief description of requirements.* ☐ Not Applicable
[Name of Governing Organization's Accrediting Agency]	*Brief description of requirements.* ☐ Not Applicable

Criterion 2.5
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Agency Requirements for Faculty-to-Student Ratios	
Agency	**Summary of Agency Requirements for Faculty-to-Student Ratios**
[Name of Governing Organization]	*Brief description of requirements.* ☐ Not Applicable
[Name of State Agency]	*Brief description of requirements.* ☐ Not Applicable
[Name of Nursing Regulatory Agency]*	*Brief description of requirements.* ☐ Not Applicable
[Name of Governing Organization's Accrediting Agency]	*Brief description of requirements.* ☐ Not Applicable

Criterion 2.6
Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 2.7

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Qualification Requirements for Nursing Education Unit Staff/Laboratory Personnel Role			
Staff/Laboratory Personnel Title	**Staff Number/Status**	**Summary of Qualifications for Position**	**Job Description Verified**
Add additional rows as necessary.			
	[Number here] ☐ FT ☐ PT		☐ Yes ☐ No [If *No* is marked, write narrative here for why.]
	[Number here] ☐ FT ☐ PT		☐ Yes ☐ No [If *No* is marked, write narrative here for why.]
	[Number here] ☐ FT ☐ PT		☐ Yes ☐ No [If *No* is marked, write narrative here for why.]

Criterion 2.8

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 2.9

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 2.10

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Standard 3 Students
Student policies and services support the achievement of the end-of-program student learning outcomes and program outcomes of the nursing program.

Criterion 3.1
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.2
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.3
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.4
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.5
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.6
Insert Criterion for Program Type

<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Default Rate Table, *if applicable*

Year	Three-Year Default Rate
20XX	XX%
20XX	XX%
20XX	XX%

Criterion 3.6.1
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.6.2

Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.6.3

Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.7

Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.8

Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 3.9

Insert Criterion for Program Type
NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Standard 4 Curriculum
The curriculum supports the achievement of the end-of-program student learning outcomes and program outcomes and is consistent with the safe practice in contemporary healthcare environments.

Criterion 4.1
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 4.2
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 4.3
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 4.4
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 4.5
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 4.6
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 4.7
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 4.8

Insert Criterion for Program Type

<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Program Length Table

Program Option	Total Number of Academic Terms to Complete Program	Total Credit/Clock Hours Required to Complete Program	Total Nursing Credit/Clock Hours Required to Complete Program	Total Credit/Clock Hours Awarded for Prior Learning (*if applicable*)

Add more lines as needed

Policies for Program Credit/Contact Hours	
Agency	**Summary of Policies for Program Credit/Contact Hours**
[Name of Governing Organization]	*Brief description of requirements.*
[Name of State Agency]	*Brief description of requirements.* ☐ Not Applicable
[Name of Nursing Regulatory Agency]*	*Brief description of requirements.* ☐ Not Applicable
[Name of Governing Organization's Accrediting Agency]	*Brief description of requirements.* ☐ Not Applicable

Credit-to-Contact-Hour Ratios Table (*if applicable*)

Academic Setting	Credit-to-Contact-Hour Ratio/Equivalency
Didactic:	
Laboratory:	
Simulation:	
Clinical:	

Criterion 4.9

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Agency Regulations for Simulation and/or Clinical Experiences	
Agency	**Summary**
[Name of Nursing Regulatory Agency]*	*Brief description of requirements.* ☐ Not Applicable
Other (if needed):	*Brief description of requirements.* ☐ Not Applicable

Clinical/Practicum Hours Table

Program Option	Total Number of Clinical Hours (Contact) Required to Complete Program	Total Number of Simulation Hours (Contact) Required to Complete Program	Total Number of Laboratory Hours (Contact) Required to Complete Program

Add more lines as needed

Criterion 4.10

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 4.11

Insert Criterion for Program Type

NARRATIVE: *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Standard 5 Resources

Fiscal, physical, and learning resources are sustainable and sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes of the nursing program.

Criterion 5.1

Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 5.2

Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 5.3

Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 5.4

Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Standard 6 Outcomes
Insert Standard for Program Type

Criterion 6.1
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Criterion 6.2
Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Aggregated Licensure (or Certification) Examination Table

Performance on Licensure (*or Certification*) Examination – Aggregated for Entire Program		
Expected Level of Achievement	Year	Licensure Examination Pass Rate
	20XX	XX% (XX/XX)
	20XX	XX% (XX/XX)
	20XX	XX% (XX/XX)

Disaggregated Licensure (or Certification) Examination Table by Program Option (*if applicable*)

Performance on Licensure (*or Certification*) Examination – Disaggregated by Program Option					
Expected Level of Achievement	Year	Licensure Examination Pass Rate			
		Option X	*Option X*	*Option X*	*Option X*
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)

Add more columns or another table, if needed

Disaggregated Licensure (or Certification) Examination Table by Location (*if applicable*)

Performance on Licensure (*or Certification*) Examination – Disaggregated by Location					
Expected Level of Achievement	Year	Licensure Examination Pass Rate			
		Location X	*Location X*	*Location X*	*Location X*
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)

Add more columns or another table, if needed

Disaggregated Licensure (or Certification) Examination Table by Date of Program Completion (*if applicable*)

Performance on Licensure (*or Certification*) Examination – Disaggregated by Date of Program Completion					
Expected Level of Achievement	Year	Licensure Examination Pass Rate			
		Month of Completion:	*Month of Completion:*	*Month of Completion:*	*Month of Completion:*
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)

Add more columns or another table, if needed

Criterion 6.3

Insert Criterion for Program Type
<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Aggregated Program Completion Table

Program Completion – Aggregated for the Entire Program		
Expected Level of Achievement	Year	Program Completion Rate
	20XX	XX% (XX/XX)
	20XX	XX% (XX/XX)
	20XX	XX% (XX/XX)

Disaggregated Program Completion Table by Program Option (*if applicable*)

Program Completion Rate – Disaggregated by Program Option					
Expected Level of Achievement	Year	*Option X*	*Option X*	*Option X*	*Option X*
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)

Add more columns or another table, if needed

Disaggregated Program Completion Table by Location (*if applicable*)

Program Completion Rate – Disaggregated by Location					
Expected Level of Achievement	Year	*Location X*	*Location X*	*Location X*	*Location X*
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)

Add more columns or another table, if needed

Disaggregated Program Completion Table by Date of Program Completion (*if applicable*)

Program Completion Rate – Disaggregated by Date of Program Completion					
Expected Level of Achievement	Year	*Month of Completion:*	*Month of Completion:*	*Month of Completion:*	*Month of Completion:*
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)
	20XX	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)	XX% (XX/XX)

Add more columns or another table, if needed

Criterion 6.4

Insert Criterion for Program Type

<u>NARRATIVE:</u> *Use the ACEN Guidelines for Written Reports to describe the program's compliance with this Criterion*

Aggregated Job Placement Table

Job Placement Rates – Aggregated for the Entire Program					
Expected Level of Achievement	Year	Total Number of Graduates[1]	Total Number of Graduates Responding[2]	Response Rate	Job Placement Rate
	20XX	$N^1=$	$N^2=$	XX% (N^2/N^1)	XX% (N^2/# with job in field)
	20XX	$N^1=$	$N^2=$	XX% (N^2/N^1)	XX% (N^2/# with job in field)
	20XX	$N^1=$	$N^2=$	XX% (N^2/N^1)	XX% (N^2/# with job in field)

Submitting an Accreditation Report

All ACEN reports and supporting evidence must be uploaded in the ACEN Document Repository six weeks prior to the visit; printing paper copies of the program's report is no longer required. **Follow-Up Reports** that do not include a site visit must be uploaded by the due date identified on the letter from the Board of Commissioners. The report and supporting evidence should be maintained in a Microsoft Word document or searchable PDF whenever possible (avoid scanned documents).

Organizing the Report and Supporting Evidence in the ACEN Repository

The program's username and password for the Document Repository will be provided directly to the nurse administrator with other details related to the visit, such as the visit dates. Each program will have access to a folder titled "01_Written Report and Supporting Evidence" to upload the report as well as required and additional supporting evidence demonstrating compliance with the Standards and Criteria.

The program will be responsible for creating, organizing, and labeling the sub-folders within this folder.

> **Please note:** *If the program is planning a focused visit or a follow-up report/visit, the program may not need some of the folders described below. For example, if the program's focused visit report is for implementation of a new off-campus instructional site, a folder for Standard 5 Outcomes is not necessary. For another example, if the program's follow-up report is only for Standard 4 Curriculum, folders for Standard 1, Standard 2, Standard 3, and Standard 5 are not necessary.)*

Organizing the "01_Written Report and Supporting Evidence" folder and Sub-Folders:

1. Upload the written report and ensure the title clearly identifies the document as the "**Report.**" (This report is the Self-Study Report, Focused Visit Report, or Follow-Up Report as <u>one</u> continuously paginated document consisting of the Program Demographic Information and the required Report Narrative).

2. Upload the Faculty Profile Table using the title "**Faculty Profile Table**" (*if applicable to the report type*). This document should be <u>one</u> continuously paginated document consisting of the cover sheet and the tables for each full-time and part-time faculty member teaching in the program(s) being reviewed for the academic term in which the visit occurs.

3. Create a sub-folder titled "**Syllabi**" (*if applicable to the report type*). Upload the current syllabus for each nursing course (ensure document titles include the course numbers/titles). Syllabi only need to be uploaded into the repository once (not for each Criteria that syllabi are linked to as evidence).

4. Upload the Systematic Plan of Evaluation using the title "**Systematic Plan of Evaluation**" (*if applicable to the report type*).

5. Create a sub-folder for "**Supporting Evidence**" (this folder is essentially the "digital evidence room." Create and organize sub-folders in the "Supporting Evidence" folder as follows:
   - Catalogs Handbooks and Manuals
   - External (State, National, Regulatory) Agency Documentation/Communications*
   - Meeting Minutes
   - Other/Misc. (if needed)
   - Standard 1 Administrative Capacity and Resources
   - Standard 2 Faculty
   - Standard 3 Students
   - Standard 4 Curriculum
   - Standard 5 Outcomes

   *Include all current approval documents (e.g., BON approval letter; institutional accreditor status document; national ministry of education approval).

   Upload all supporting evidence into the appropriate subfolders above. When uploading the evidence, please consider the following:
   - Additional folders may be created within each sub-folder as appropriate. For example, you may create a separate folder for each Criterion (1.1, 1.2, 1.3, etc.). However, ***please do not include empty folders***.
   - Each piece of supporting evidence should be an individual document and labeled using a standardized naming convention that is easy to understand and relates to the evidence (e.g., Criterion 1.1 Comparison of College Mission and Program Mission; Criterion 4.9a Current Clinical Agency Contracts; Criterion 5.3 NCLEX Program Reports).
   - Supporting evidence should be referenced accurately and consistently throughout the report using the naming convention described above to easily identify uploaded evidence.

The repository folders will be locked six weeks prior to the site visit (or on the due date for Follow-Up Reports for Conditions). The report and all supporting evidence must be uploaded by that date. However, for reviews with a site visit, an additional unlocked folder titled "Revised or Requested Information" will be made available in case of revisions (e.g., updated Faculty Profile Table) or items requested by the site visit team. The purpose of this folder is to make available any additional information that the team requests six weeks prior to the visit AND during the visit.

An example Repository has been created to assist you in understanding what the repository looks like and how it can be organized. To access this example, please use the following:

- Link: https://www.acencenter.net
  - Username: ACENuser
  - Password: User1234#

Site Visits: Nurse Administrator Site Visit Planning Checklist

6–18 Months Prior to the Site Visit:

☐ Prepare Self-Study Study Report in collaboration with faculty, administration, student and faculty support staff, and students.

☐ Submit a request to schedule a site visit by the due date: https://www.acenursing.org/for-programs/report-writing-and-site-visit-preparation-resources/resources-information-forms-site-visits/

6 Weeks or More Before the Visit:

☐ Verify ability to access the ACEN Repository when login credentials are received.

☐ Upload written report and supporting evidence to the ACEN Repository. All program documents must be in English.

☐ Post public notification of the upcoming ACEN visit and post information about how to provide Written or Oral Comments about the program. See the Guidelines for the Solicitation of Written and Oral Third-Party Comments. This is not required for Focused Visits.

☐ Reserve a hotel room for each team member:
    ☐ Ensure there is a guaranteed late arrival, and that the hotel offers Internet access.
    ☐ The host program is responsible for payment for the hotel room expenses, except for incidental charges.
    ☐ Ensure the hotel is within a reasonable/safe walking distance to restaurants for peers to have access for breakfast and dinner.
    ☐ If necessary, the host program is also responsible for cancelling hotel reservations.
    ☐ If possible, select a hotel that has a "business center" or access to printing.

☐ Identify a workroom for the peer evaluators to use during the visit:
    ☐ Ensure Internet access on campus; work with information technology department to ensure firewall will not block peer evaluators' access on laptop the visitor brought with them.
    ☐ Provide a laptop computer(s) for use during the visit, if requested by the team.
    ☐ Provide access to printing on site (in or near workroom).
    ☐ Information Technology support should also be available to assist if needed during the site visit.

4–6 Weeks or More Before the Visit:

☐ Create a draft agenda based on the type of visit and share with the Team Chair for feedback and/or adjustments (if needed). See Agenda Items and Sample- https://www.acenursing.org/for-programs/2017-standards-and-criteria-report-writing-and-site-visit-preparation-resources/.

☐ Inform the Team Chair whether this will be a coordinated visit with another agency, such as the Board of Nursing or State Department of Education.

☐ Coordinate the review of faculty and student records with the Team Chair (See below).

☐ Collaborate with the Team Chair to arrange on-ground transportation for team members.
    ☐ Transportation between airport, hotel, and program (including off-campus instructional sites if applicable).
    ☐ The team members are not permitted to a personal vehicle at any time for any purpose during a site visit. Team members are also not allowed to have rental cars.

☐ Provide team access to Hybrid/Online nursing courses/Learning Management System six weeks prior to the visit, during the visit, and for a week after the visit.

After the Site Visit:

☐ After the visit, the team and program should not have any further communication, please address any post-visit questions or concerns directly with one of the ACEN Directors.

☐ Complete the post-visit survey sent by the ACEN.

☐ Plan to collaborate with the faculty to address any Suggestions for Improvement and/or Non-Compliance identified by the team; do not wait to receive the Site Visit Report – begin working on your response immediately after the site visit.

☐ Review Site Visit Report once received from the ACEN (typically within 6–8 weeks after the visit).

☐ Prepare and develop the Program's Response for review by the Evaluation Review Panel and Board of Commissioners; submit by the timeline specified.

Preparing Faculty, Staff, and Student Records (Paper or Electronic) for Review
Faculty Records
The following evidence from _full- and part-time faculty_ records must be available for review.
- Job descriptions
- Transcripts, or degree verification forms, reflecting the highest conferred degree necessary for the teaching position (transcripts may be official or unofficial based on the governing organization's policy/practice)
- Current registered nurse license and, if applicable, APRN license/certification
- Performance appraisals demonstrating Governing Organization policy has been followed

Prior to the visit, the Team Chair and the nurse administrator must work together to identify which full- and part-time faculty records are to be reviewed based on the total numbers of full-time and part-time faculty. The **team will randomly select** for review:
- 10 full-time faculty records or 10% (whichever is greater); and
- 10 part-time faculty records or 10% (whichever is greater)
- If there are 10 or fewer full- and/or part-time faculty at the time of the site visit, then all records will be reviewed.

Digital or scanned copies of the required items for the faculty records selected for review should be placed in the Standard 2 folder (if all files are to be reviewed) or the Revised or Requested Information folder no later than two weeks prior to the visit if there is a random selection by the team.

Staff Records
The following evidence for any full- and/or part-time _nursing program_ staff who assist or support nursing program administration (clerical, laboratory, and administrative personnel) records must be available for review:
- Job descriptions for all dedicated staff positions
- Transcripts, or degree verification forms, reflecting highest conferred degree necessary for the position (only if a degree and/or certificate is required for the position)
- Current registered nurse license (if a registered nurse license is required for the role)
- Current certifications (if certification is required for the role)
- Resumes demonstrating qualifications

Student Records
For nursing student records maintained by the nursing program (paper or electronic), peer evaluators will review a sample of the records. Examples of records a program _may_ maintain include:
- Admission documents (e.g., transcripts, admission rubrics, licensure, if applicable, health requirements, background checks)
- Progression documents (e.g., clinical evaluations, examination reports, readmission documents)
- Evidence of gap analysis for post-master's certificate or post-master's DNP APRN students
- Student grievances (must be maintained since the last site visit or when candidacy was achieved)

If there are student records for review (as described above), the Team Chair and the nurse administrator must work together prior to the visit to identify which student records will be

reviewed based on the total number of students and what items should be included in the records:

- The program must provide the team a list of items maintained in the nursing student records that are maintained by the nursing program;
- The program must provide the team with a list of current students, identifying those in different options or at different locations;
- The team will randomly select for review 10 student records or 10% (whichever is greater) of students taking nursing courses at the time of the visit and provide this list to the nurse administrator. If there are 10 or fewer students taking nursing courses at the time of the site visit, then all records will be reviewed.
- The Team Chair and nurse administrator must determine how these records will be made available for review:
  - o Preferred method: Electronic or scanned digital copies/records may be placed in the Standard 3 folder six weeks prior to the visit (if all files are to be reviewed) or the Revised or Requested Information folder no later than two weeks prior to the visit if there is a random selection by the team.
  - o Alternately: Paper copies may be reviewed during an onsite in-person visit (ensure time on the agenda for this review).
  - o Third-Party/Vendor services verification report (e.g., completion of background checks, health screenings/immunizations) can be shared digitally in the ACEN Document Repository through the creation of a Student Records subfolder *or by screen sharing* during onsite or virtual visits.