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GUIDELINES FOR THE PREPARATION OF THE SELF-STUDY REPORT UTILIZING THE 2017 ACEN STANDARDS AND CRITERIA

PURPOSE

This guide provides the program with a review of the Standards and Criteria offering explanations and suggestions regarding the effective preparation of the Self-Study Report.

FORMAT

The guide is divided into two (2) sections.

- Structure and Format of the Self-Study Report
- Addressing the Standards and Criteria
 - Essential Elements
 - Focus Questions

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OVERVIEW

This document serves as a guide to writing the Self-Study Report for programs preparing for an initial or continuing accreditation review. This guide can also assist programs with writing a Candidacy presentation as well as with the required sections of a Follow-Up Report or Focused Visit Report. For programs writing a Candidacy presentation, Follow-Up Report, or Focused Visit Report, the faculty should also review the appropriate guidelines for those reports that are available on the ACEN website.

Self-Study Report

Any program seeking initial or continuing accreditation must undergo self-evaluation and prepare a Self-Study Report to demonstrate the extent to which the program meets the ACEN Accreditation Standards and Criteria.

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

The development/writing and submission of the Self-Study Report is the first step in the accreditation review process. The Self-Study Report is the program's self-evaluation regarding its compliance with the ACEN Accreditation Standards, and it serves as a critical point of reference for the peer evaluators, the Evaluation Review Panel, and the Board of Commissioners. Therefore, it is essential that the Self-Study Report be clear.

During the second step of the process, which is the onsite visit, faculty and administrators are also responsible for presenting evidence in the Self-Study Report and during the site visit that clearly indicates the extent to which the program meets the ACEN Accreditation Standards and Criteria. The peer evaluators on the site visit team will use the Self-Study Report to prepare for the visit to the program. The peer evaluators will use the Self-Study Report and supporting evidence reviewed onsite during the site visit to develop the Site Visit Report. Peer evaluators on the Evaluation Review Panel, which is the third step of the process, and the Board of Commissioners, which is the final/fourth step of the process, will also refer to the Self-Study Report and the Site Visit Report as part of the review process.

Submitting the Self-Study Report

The program will submit copies of its Self-Study Report to the ACEN and each member of the site visit team.

Sent Directly to the ACEN:

- Cover letter indicating the program is submitting the Self-Study Report
- **Two (2)** USB storage devices (“flash drives”), each containing a copy of the Self-Study Report (Word or PDF format). NOTE: PDFs should be searchable PDFs saved from a Word document. Please do not create a PDF from a scanned document.

All copies for the ACEN are to be sent to:
Accreditation Commission for Education in Nursing
3343 Peachtree Road Northeast, Suite 850
Atlanta, GA 30326

The materials must be received in the ACEN office no less than six (6) weeks prior to the scheduled date of the site visit. The Self-Study Reports become the property of the ACEN.

Sent Directly to Each Member of the Site Visit Team:

- One (1) paper copy of the Self-Study Report, including the Executive Summary
- **One (1) USB storage device containing** the Self-Study Report (Word or PDF format). NOTE: PDFs should be searchable PDFs saved from a Word document. Please do not create a PDF from a scanned document.

The materials should be shipped/mailed to each member of the site visit team; items must be received by the team members no less than six (6) weeks prior to the scheduled date of the site visit.

STRUCTURE AND FORMAT OF THE SELF-STUDY REPORT

The Self-Study Report is written by the faculty members of nursing program(s) using the current version of the ACEN Accreditation Standards and Criteria; Accreditation Standards and Criteria become effective on the date designated by the Board of Commissioners. There are four (4) sections to the Self-Study Report, and each section is discussed below. The self-study document must include the program's history, context, and self-evaluation related to the Standards and Criteria as well as program plans for future development and improvement. Program-specific Standards and Criteria and the Glossary can be found [online](#) at the ACEN website and should be reviewed prior to writing the Self-Study Report.

There are four (4) sections to the Self-Study Report:

- **Section One:** Executive Summary
- **Section Two:** Standards 1–5
 - Standard 1 Mission and Administrative Capacity
 - Standard 2 Faculty and Staff
 - Standard 3 Students
 - Standard 4 Curriculum
 - Standard 5 Resources
- **Section Three:** Standard 6 Outcomes
- **Section Four:** Appendix

Section One: Executive Summary

The Executive Summary is a brief (10–15 pages) presentation of the nursing education unit/program, including general information and a description of how the nursing program fits within the governing organization. In addition to offering basic demographic information about the nursing education unit/program and the governing organization, the summary offers information describing the relationship between the nursing program and its institution and community. In the Executive Summary, provide a summary of the program's strengths and/or potential areas needing development identified through the self-evaluation process. The program's assessment of the extent to which it meets each Standard and Criterion is provided in Section 2 and Section 3 of the Self-Study Report.

Content

- General Information (bulleted format):
 - Program type(s) being reviewed and dates of the visit
 - Name and address of the governing organization; name, credentials, and title of the chief executive officer of the governing organization and local CEO (if applicable)
 - Name of the governing organization's accrediting body and accreditation status (date of last review and action)
 - Name and address of the nursing education unit/program
 - Name, credentials, and title of the nurse administrator of the nursing education unit/program; nurse administrator's telephone and fax numbers, and email address
 - Name of the state regulatory agency for nursing and approval status (date of last review and action)
 - Year nursing program(s) was/were established
 - ACEN accreditation history (include date of initial accreditation, previous date of review, and current accreditation status)
 - Nursing program type(s) offered (e.g. associate degree; master's degree)
 - Length of program(s) in credits and number of academic terms, inclusive of prerequisite courses, for all program options

- Number of general education credits and/or nursing credits that may be transferred into the program/program option(s)
 - Student totals by program type, and disaggregated by program option(s)
 - Faculty cohort (number of full-time and part-time by program type – exclusive to the program or shared with other programs)
 - The method of delivery and percentage of nursing credits delivered by distance education for all program options.
 - All program locations delineated by location classification (branch campus or off-campus instructional site) and number of credit hours for program of study taught at each location; specify the address of the location, including street number, city, and ZIP code
 - Other nursing accreditation if applicable (e.g. Council on Accreditation of Nurse Anesthetists, the American College of Nurse-Midwives Division of Accreditation).
 - The ACEN Accreditation Standards and Criteria used to prepare the Self-Study Report (e.g. 2017)
- Introduction (narrative format):
History of the nursing education unit; overview of the nursing program in context by describing how it fits within the nursing education unit (if more than one (1) program is offered) and how the nursing education/program unit fits within the governing organization and community; description of the program's history related to mode(s) of delivery, and any additional program options and locations.
- NOTE: Include accrediting agency report for the governing organization and state regulatory agency decision verification in the appendices or onsite during the site visit in the evidence room.
- Analysis and Summary of Strengths and Areas Needing Development:
Conclusions identified through the Self-Study Report development process with a concise list of significant strengths, areas needing development, and future plans.

Section Two: Standards 1–5

Section Two provides the opportunity for the nursing education unit/program to demonstrate the extent to which the program(s) being reviewed is/are in compliance with Standards 1–5: Mission and Administrative Capacity, Faculty and Staff, Students, Curriculum, and Resources.

The narrative presentation should be clear and succinct. Tables, graphs, and/or presentations of sections of the nursing education unit's evaluation plan may be used as a means to simplify and organize information to demonstrate trends and changes over time. Tables and graphs should have a unique title and naming convention (e.g., Table I, Graph I, etc.) and be referenced in the narrative of the Self-Study Report. It is also recommended that tables greater than one (1) page be moved to the appendices and referenced in the narrative; the table and column heading should be repeated on subsequent pages.

Nursing education units submitting one (1) Self-Study Report for a multiple-program visit are expected to address each program type offered, beginning with the highest-degree program type offered, demonstrating the extent to which each is meeting the Standards and Criteria. When the information being provided applies to all programs, the Self-Study Report should provide this information only once using level headings to indicate the application to all programs being reviewed. Level headings should also be utilized to delineate when the narrative information transitions between program types.

Section Three: Standard 6

This section is a presentation of the nursing education unit's/program's plan for systematic evaluation of the unit and the results of the ongoing assessment, including the assessment of **each end-of-program student learning outcome and each program outcome**. The written systematic plan of evaluation reflecting the 2017 Standards and Criteria should be included in the Self-Study Report as an appendix.

Please note: the 2017 Standards and Criteria only require the Standard 6 components (end-of-program student learning outcomes and program outcomes) in the written systematic plan of evaluation; Standards 1–5 should not be included. In addition to the presentation of the plan, the narrative should address how the evaluation findings have been used for program maintenance, revision, and development.

Section Four: Appendix

The Appendix is for supplemental materials that support information discussed within the body of the Self-Study Report. The appendix should include, but is not limited to, the Faculty Profile Table for all full-time and part-time nursing faculty and non-nursing faculty (See template and instructions online: <http://www.acenursing.org/resources-for-nursing-programs/>); abbreviated syllabi for all nursing courses; the program's systematic plan for evaluation (SPE) (See template example online: <http://www.acenursing.org/resources-for-nursing-programs/>); non-confidential documents identified in the Essential Elements.

Note: the Faculty Profile Table and SPE do not count toward maximum page limit. All additional appendices do count toward maximum page limit.

Format

Binding:

The Self-Study Report must be securely bound, but the program may decide the format of the binding. Accepted binding types include, but are not limited to, three-ring binders, comb binding, spiral binding, or perfect binding.

Length:

- Single program: 200 pages
- Multiple program: 300 pages

Please note that the above page limits are inclusive of the narrative for all Standards and all appendices **except** the systematic plan of evaluation and the faculty profile table.

Margins:

- Margins should be at least one (1) inch on all sides; the method of binding may require more.

Pagination:

- The pages of the Self-Study Report **must** be numbered consecutively starting with the Executive Summary through the last page of the Appendices, which is ideally the final page of the systematic plan of evaluation.

Page Set-Up:

- Front to Back or
- One-sided

Directions for Electronic Copies:

- **The Self-Study Report must be in a single file/document.** This one (1) file/document should include the narrative for all Standards and any appendices in the order that they would appear in a paper copy.
- The preferred file formats are Portable Document Format (PDF) or Microsoft Word. PDFs should be searchable PDFs saved from a Word document. Please do not create a PDF from a scanned document.
- The Self-Study Report must be included on the USB flash drive. The faculty may elect to include electronic copies of other handbooks, manuals, or non-confidential documents such as a student or faculty handbook; these additional items should be included in a folder on the USB flash drive titled “Additional Information.”

ADDRESSING THE STANDARDS AND CRITERIA

Essential Elements

The Essential Elements are supporting materials that may be used as guides to facilitate the development of the Self-Study Report. The Essential Elements are used for each Criterion of the Self-Study Report to demonstrate the extent to which each Criterion in each Standard has been met. Please keep in mind that the actual materials identified as Essential Elements may be used in any of three (3) ways:

1. As part of the narrative in the Self-Study Report;
2. Placed in the Appendix as a supporting document to the narrative;
3. Cited in the narrative and placed in the evidence room prepared for review during the site visit.

As the authors, faculty will decide how to best utilize the Essential Elements listed to convey compliance of the program with the Standards and Criteria. An organized presentation will be helpful to the peer evaluators in reviewing the materials.

It is helpful to reviewers if the faculty cite specifics related to supporting documents used for the Self-Study Report; for example, cite both the title and page number of the Student or Faculty Handbook when referring to information related to policies or procedures contained within these materials. In addition, listing specific website information within the narrative for any documents or supporting materials that are available to reviewers through the governing organization or nursing program's website is recommended. Accurate webpage addresses are necessary as citations within the body of the Self-Study Report. Additionally, it is important to ensure access to the peer evaluators both prior to and during the site visit for items located on the cited websites.

Additionally, please note that it is not uncommon to use a selected portion or example of a document in the Self-Study Report such as the mission statement, policy for faculty evaluation, definition for the faculty scholarship, etc. The full document should be available for review by the peer evaluators in the evidence room during the site visit.

While the Essential Elements are intended to be a helpful guide to the development of the Self-Study Report, they are not all-inclusive. As each nursing education unit/program is unique, the faculty may wish

to include additional information in the Self-Study Report or onsite during the site visit that demonstrates the extent to which the program meets the ACEN Standards and Criteria.

Focus Questions

The Focus Questions are intended to facilitate the faculty in writing an honest assessment in the Self-Study Report on the extent to which the program meets the Standards and Criteria and also facilitate an accurate disclosure of timely information. Once the narrative for each Criterion is complete, the faculty may utilize the Focus Questions to assist in determining clarity and completeness of the Self-Study Report. The Standard has most likely been addressed if the Focus Questions can be answered by reading the narrative.

Standard I Mission and Administrative Capacity

Standard I is about the mission of the education unit and the congruency with the governing organization's core values. This Standard also addresses the program's administrative capacity. As an example, Criterion I.1 addresses the congruence of the mission/philosophy of the nursing program with that of the governing organization. In the list of Essential Elements, both the mission/philosophy of the governing organization and nursing program are mentioned as materials that should be included in Criterion I.1 of the Self-Study Report. In addressing this Criterion, faculty may choose to utilize a side-by-side chart or table to demonstrate that the two (2) mission/philosophy statements have common components or common key concepts as a method of easily conveying the congruence between the governing organization and nursing program.

Essential Elements

- Mission statement of the governing organization
- Mission/Philosophy of the nursing education unit
- Goals of the nursing education unit
- Governing organization chart
- Nursing unit organization chart
- List of participation of faculty in governance (committees/task forces/workgroups of the governing organization and nursing education unit)
- List of participation of students in governance or opportunities that are available to students to participate (committees/task forces/workgroups/student nurse associations of the governing organization and nursing education unit)
- Evidence of the participation/input of communities of interest and end-of-program student learning outcomes and program outcomes data shared with the communities of interest (see ACEN Glossary – “Communities of Interest”); include accrediting agency report for the governing organization and decision verification; state regulatory agency for nursing documents
- Partnership agreements (description of partnerships, contracts, grants, etc. (not clinical agency agreements)); (see ACEN Glossary for definition of Partnerships)
- Nurse administrator's credentials (academic and experiential) (CV/résumé, transcripts, position description); if the nurse administrator is in the process of completing the required degree specified in Criterion I.5 or is currently enrolled, include the type of degree, specialty, anticipated date of completion, and the program of study
- Credentials (academic and experiential) (CV/résumé, transcripts, position description) of other individuals/faculty who coordinate or lead program options (if applicable); specific information regarding the percentage of workload allocated to administrative-type duties versus potential teaching and other non-teaching responsibilities

- Budget process (policies, position description)
- Faculty Handbook(s)
- College Catalog/Handbook(s)
- Policies and procedures for the governing organization and nursing education unit (manuals, website links, etc.)
- See ACEN Glossary for definition of distance education (instruction occurring when a faculty member and student are not in the same place). Include distance education information such as type of distance education offerings, approvals, etc.

Focus Questions

- Does the nursing education unit's mission/philosophy demonstrate congruence with that of the governing organization?
- Are the nursing faculty governed as other faculty? If there are differences, can they be justified by the purposes of the nursing education unit/nursing program?
- Do the organizational structures of the governing organization and nursing education unit provide for participation by faculty and students in governance processes? Is there evidence of participation by faculty? Is there evidence of opportunities for students to participate?
- Do the communities of interest participate in the program processes? If so, how? What outcomes data are consistently shared with the communities of interest? How are outcomes data shared? What types of program processes and decision-making have communities of interested been involved with?
- Does the nursing program participate in partnerships? If applicable, how do they benefit the program? The students?
- Is the nurse administrator academically and experientially qualified for the position? Does the nurse administrator meet the requirements of the governing organization and the state regulatory agency for nursing?
- Are faculty/individuals who coordinate or lead program options academically and experientially qualified? What percentage of their workload is allocated to administrative-type duties?
- Does the nurse administrator have responsibility and authority for the nursing unit? How is this demonstrated? Does the nurse administrator have sufficient time to fulfill the duties and responsibilities of the role? Does the NA have teaching responsibilities – if so, how much? Are these teaching responsibilities comparable to those of other individuals in similar positions within the governing organization?
- How does the budget process work relative to the nurse administrator and faculty? Is the nursing budget commensurate with the budget of other departments within the governing organization?
- If utilized, how does distance education fit within the mission and purposes of the program? Of the governing organization? How is distance education utilized?

Standard 2 Faculty and Staff

In addressing Standard 2, the program must provide information on all faculty teaching full- and part-time in the nursing program at the time of the site visit, including those teaching and/or evaluating students in didactic, clinical, or laboratory settings. In order to assist faculty in conveying this information, please use the required profile tables on the [ACEN website](#) that have been provided for all full- and part-time nursing faculty, all full- and part-time non-nurse faculty, and all full- and part-time laboratory personnel.

As an example of how the Essential Elements may be used in this Standard, Criterion 2.8 addresses the orientation and mentoring of the faculty. The program may choose to report this information by listing the various activities in which new faculty are engaged as they learn their roles in the didactic, laboratory, and clinical settings. The activities may be a combination of those offered by the nursing education unit/program, the governing organization, and the clinical affiliations. In terms of mentoring, a narrative presentation about the ways faculty are mentored in their roles is appropriate.

Essential Elements

- Faculty Profile Table, **see Faculty Profile Table instructions and template available on the ACEN website**. Table includes state regulatory agency for nursing requirements (if applicable), other state regulatory agencies' requirements (if applicable), governing organization requirements, and requirements of the accrediting agency for the governing organization (if applicable). Table also includes date of appointment, academic and experiential credentials with dates, all nursing courses taught by faculty members, and non-teaching responsibilities. The table should have Qualification and Faculty Development addendums for each full- and part-time faculty member that include areas of expertise and faculty members' other qualifications related to the nursing course(s) taught. See ACEN Glossary for definition of "Faculty, Nursing," "Full-time Faculty," "Part-time Faculty," "Exclusive Faculty," "Shared Faculty," "Faculty, Non-Nursing," "Nurse Administrator," and "Nursing Program Coordinator."
- Non-Nurse Faculty Profile Table (if applicable), **see Faculty Profile Table instructions and template available on the ACEN website**. Table includes state regulatory agency for nursing requirements (if applicable), other state regulatory agencies' requirements (if applicable), governing organization requirements, and requirements of the accrediting agency for the governing organization (if applicable). The table also includes date of appointment, academic and experiential credentials with dates, all nursing courses taught by faculty members, and non-teaching responsibilities. The table should have Qualification and Faculty Development addendums for each full- and part-time non-nurse faculty member that include areas of expertise and faculty members' other qualifications related to the nursing courses taught. See ACEN Glossary – "Non-Nursing Faculty."
- Laboratory Personnel Profile Table (if applicable), **see Laboratory Personnel Table instructions and template available on the ACEN website**. Table includes state regulatory agency for nursing requirements (if applicable), other state regulatory agencies' requirements (if applicable), governing organization requirements, and requirements of the accrediting agency for the governing organization (if applicable). The table also includes status, laboratory and non-laboratory responsibilities, academic and experiential credentials with dates; and areas of expertise related to the role responsibilities. See ACEN Glossary – "Laboratory Personnel."
- Position/Job Descriptions for faculty, laboratory personnel, and staff
- Criteria for selection and role descriptions for the preceptors (if utilized); evidence of orienting, mentoring, and monitoring of preceptors (See ACEN Glossary – "Preceptors")
- Documentation of sufficient full-time faculty, including the ratio of the total number of full-time faculty to the total number of students; faculty-to-student ratios in didactic, clinical, or laboratory settings; required faculty workload; workload documentation, including teaching, advising, committee work, and other non-teaching responsibilities over several academic terms; amount and number of full-time faculty on overload (See ACEN Glossary – "Sufficient Full-time Faculty")
- Evidence of scholarly activities as defined by the nursing education unit for faculty, including distance education development (if utilized); evidence of maintenance of faculty expertise in both academic and clinical settings

- Documentation of roles and sufficiency of staff, including non-faculty and laboratory personnel
- Evidence of orientation and mentoring processes for faculty
- Documentation of evaluations for faculty; policies/procedures for evaluation processes
- Evidence of development and support for instructional and distance technologies, including learning management systems (See ACEN Glossary – “Instructional Technology”)

Focus Questions

- Are the full- and part-time faculty academically and experientially qualified? Is there evidence that all faculty meet state requirements? Requirements of the governing organization? Requirements of the accrediting body for the governing organization? Which courses do they teach? Are all faculty qualified to teach assigned courses?
- Does the nursing program utilize non-nurse faculty to teach nursing courses? If so, are these individuals academically and experientially qualified? Which courses do they teach? Are all faculty qualified to teach assigned courses?
- If utilized, are preceptors qualified for their roles and responsibilities? How are they oriented, mentored, and monitored?
- Are there sufficient full-time faculty to accomplish the end-of-program student learning outcomes and program outcomes? What is the faculty workload? What are the faculty teaching and non-teaching responsibilities? How many faculty are on overload? What are the faculty-to-student ratios in class, laboratory, and clinical settings?
- Do the faculty participate in scholarly activities? Do they maintain expertise in their area of responsibility? Are they supported in professional development?
- Are there sufficient staff to support the nursing program(s)? Are the staff qualified for their assigned responsibilities?
- Does the program have laboratory personnel? If so, is there evidence that all laboratory personnel meet state (if applicable) and/or governing organization requirements? Are all laboratory personnel qualified for assigned responsibilities?
- What evidences are there that faculty receive orientation and mentoring?
- Is there ongoing evaluation of all faculty?
- Is there adequate support and development for faculty utilizing distance education?
- Is there support and development for instructional technologies?

Standard 3 Students

Standard 3 is about students, student policies, and student support services that assist students in achieving the end-of-program student learning outcomes and program outcomes. When addressing Criterion 3.1, faculty will be writing about the student policies of the nursing education unit/program. A straightforward method of addressing policies that are both congruent and different would be to make a table listing the policies that are the same and then identifying the policies that vary with the rationale identified for each policy. A dissimilar category of policies would be those that vary due to requirements of the affiliating agencies that the program utilizes for student clinical experiences. Often, policies are available in student handbooks, which may be available in paper copies to be reviewed onsite during the site visit or made available online before the onsite visit, for which purpose the online link can be specified within the narrative.

Essential Elements

- Student policies (identified by source)
- Student Handbook(s) (paper or online link) for the governing organization and the nursing education unit

- Evidence of accuracy, clarity, completeness, consistency, and accessibility of all program information (paper or electronic), including information related to ACEN accreditation and contact information, technology requirements, and distance education
- Narrative addressing student recruitment practices and evidence of recruitment materials
- Evidence of published outcomes data related to licensure/certification examination pass rates, program completion rates, and job placement rates in accordance with Policy #29
- Evidence of governing organization's published definition of a credit hour, transfer of credit policy, grading policies and refund policy, and the nursing program's policies
- Evidence of the governing organization's published academic calendar
- Evidence of communications to students (paper or electronic) related to policy changes
- Listing of available student services by location where nursing courses are offered (e.g., main campus, branch campus, off-campus instructional site) and method of delivery if utilized
- Identification of student services personnel by title/areas of responsibility
- Evidence that student educational records are in compliance with the policies of the governing organization and state and federal guidelines
- Evidence of compliance with Title IV responsibilities
- If the governing organization participates in a federal loan program:
 - include current and previous default rates specifying current final and draft default rates, including the three-year default rate; if governing organization default rate is 15% or higher, include a brief summary in the narrative of the institutional plan to decrease the default rate; the full plan should be made available in the evidence room
 - include evidence of a written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders
 - if the governing organization participates in a federal or state financial aid program, evidence of students being informed of their ethical responsibilities regarding financial assistance
 - evidence of financial aid records being in compliance with the policies of the governing organization and state and federal guidelines
- Complaint/grievance policies for the governing organization and the nursing education unit
- Complaint/grievance records for the nursing program(s) since the previous accreditation site visit
- Evidence of orientation to and support provided for technology utilized by students in didactic laboratories and clinical areas
- If the program utilizes distance education, describe the processes through which the institution can establish that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit
- Narrative related to written procedures that are distributed at the time of registration or enrollment in a distance education course that notify students of any projected additional student charges associated with the verification of student identity

Focus Questions

- Are policies for the nursing students accessible? Are policies congruent with those of the governing organization? If not congruent, are differences justified?
- Are student rights protected?
- Is information intended to inform the public accurate, clear, consistent, and accessible, including but not limited to outcomes data related to licensure examination/certification pass rates, program completion rates, and job placement rates in accordance with Policy #29; the governing organization's definition of a credit hour, transfer of credit policy, grading policies, and refund policy; the nursing program's policies; and the governing organization's published academic calendar?

- Does the governing organization/nursing program have policies and procedures for determining the credit hours awarded for nursing courses, and do policies and procedures conform to commonly accepted practices in higher education?
- Are program or policy changes clearly and consistently communicated to students?
- Are support services appropriate, available, and accessible to all students? If the program is offered by more than one (1) method of delivery or in more than one (1) location, are the support services offered comparable and accessible?
- Are student educational records in compliance with the policies of the governing organization and state and federal guidelines?
- Is the governing organization in compliance with Title IV regulations? What are the three-year default rates of the governing organization? If the default rate is 15% or more, what is the governing organization doing to decrease the rate? Are financial aid records in compliance with the policies of the governing organization and state and federal guidelines?
- How are complaints/grievances handled? Do records show evidence that policies are followed and there is due process and resolution? How many and what types of complaints/grievances have occurred since the last ACEN accreditation visit?
- Are students oriented to campus and clinical technologies? Is technical support provided to students? Is information related to technology accessible and accurate?
- What are the technology requirements or policies for the program, if applicable? How are students notified of technology or distance education used in the program? Do faculty have an effective method for verifying student identification for those students enrolled in distance modalities?

Standard 4 Curriculum

In Standard 4, the faculty will be addressing the curriculum, including its organization, presentation, and evaluation. As an example, a closer look at Criterion 4.2 may be helpful. Most likely, the narrative of the Self-Study Report identified the end-of-program student learning outcomes in Criterion 4.1. In the narrative for Criterion 4.2, faculty will describe how the end-of-program student learning outcomes have been used to guide the delivery of the courses within the curriculum and the selection of the learning activities that are incorporated into each course as the student progresses through the program. A suggestion would be to use a table format to link end-of-program student learning outcomes with examples of course learning outcomes, delivery methods, and learning activities along with a narrative describing the relationships among these important program elements. An additional option would be to include a column in this table for evaluation methods examples, which could then be referred to in the narrative for Criterion 4.7. To support the narrative in the Self-Study Report, faculty will want to gather several documents for the onsite visit, including complete course materials and examples of student work.

Essential Elements

- End-of-program student learning outcomes (see ACEN Glossary) that have been identified and are appropriate for the program type
- Identification of the professional nursing standards, guidelines, or competencies utilized to guide the curriculum and discussion of their use throughout the courses; standards, guidelines, and/or competencies must be consistent with contemporary practice for that program type
- For graduate programs, the role-specific professional competencies identified should be specific to any role specialties offered in the graduate program
- Curriculum mapping or other documents demonstrating curriculum organization/design
- Evidence of faculty development, implementation, and review of the curriculum
- Evidence that general education courses/content enhance nursing knowledge

- Evidence that diverse concepts, best practices, and nationally established patient health and safety goals are incorporated into the curriculum
- Evidence that the curriculum reflects educational theory, interprofessional collaboration, research, and current standards of practice (See ACEN Glossary – “Interprofessional”)
- Evaluation tools/methodologies for didactic content, laboratory content, and clinical learning experiences during the program; evidence that selected evaluation methods measure the achievement of end-of-program student learning outcomes
- Evidence that program length facilitates achievement of the end-of-program student learning outcomes and 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 policies of the governing organization, the state, and the governing organization's accrediting agency
- The course schedule/curricular plan/program of study for all program options, including all components (didactic, laboratory, and clinical); including courses, credits, and contact hours specified for general education, prerequisite, and nursing coursework (See ACEN Glossary – “Nursing Program Length”)
- All program options, including method of delivery and percentage of nursing credits delivered by distance education
- Description of laboratory and clinical learning experiences; all programs and program options must have contemporary face-to-face practice learning/clinical experiences appropriate for the program type (See ACEN Glossary – “Clinical/Practicum Learning Experiences,” “Contemporary Nursing Practice”)
- Clinical agency or preceptor contracts and/or agreements for all agencies used for the learning experiences in all program types
- Documentation of congruence of delivery formats and instructional processes
- 1–2 page abbreviated syllabi required for the appendix of the Self-Study Report should include:
 - Course name and number
 - Credit hours/contact hours related to didactic, skills/laboratory, and clinical
 - Prerequisites/co-requisites
 - Course description
 - Course objectives/outcomes
 - Methods of evaluation, including information regarding how each contributes to the overall course grade
 - A topical outline for course content
- Course materials, including complete syllabi (in the evidence room), evaluation methodologies and learning activities, and samples of student written work (papers, projects, assignments)

Focus Questions

- Are current professional nursing standards, guidelines, or competencies used to guide the curricular design? How are they incorporated into the curriculum? Are these consistent with contemporary practice?
- For graduate programs, is there evidence that the curriculum is congruent with the Consensus Model, the National Organization of Nurse Practitioner Faculties NP Core Competencies, specialty advanced practice competencies, and certification requirements? Is there evidence of compliance with the current NTF Guidelines for APRN program/options?
- What evidence is available to support that the end-of-program student learning outcomes are used to organize the curriculum, guide delivery of courses, and direct learning activities?

- Was the curriculum developed by the faculty? Is there regular review of the rigor and currency of the curriculum by the faculty?
- Do the general education courses/content enhance nursing knowledge? For graduate programs, is the curriculum preparing students to be information-literate and practice from an evidence-based perspective?
- Does the curriculum include diverse concepts and experiences? For graduate programs, is the curriculum preparing students to practice in a culturally and ethnically diverse global society?
- Do the faculty subscribe to education theory(ies)? How is this demonstrated in the delivery of the curriculum? How do students learn about interprofessional collaboration and research? Does the curriculum address best practices?
- Are evaluation methodologies varied and appropriate throughout the curriculum and when measuring attainment of end-of-program student learning outcomes?
- Is the total number of credit/quarter hours required to complete the defined nursing program of study congruent with the attainment of the identified end-of-program student learning outcomes and program outcomes? Is the total number of credit/quarter hours required consistent with the policies of the governing organization, the state, and the governing organization's accrediting agency?
- Are the laboratory and clinical learning experiences appropriate for students to achieve the identified outcomes/competencies for all program options? Are these experiences reflective of best practices and national safety standards?
- For graduate programs, do the clinical learning experiences and hours meet national standards for the specialty areas?
- Are the contracts for clinical learning experiences current and designed to protect students?
- What are the curriculum delivery methodologies? Are the delivery methodologies congruent with the curricular design?

Standard 5 Resources

As an example of addressing a Criterion within Standard 5, faculty will be presenting information about the currency, relevancy, and accessibility of the learning resources in Criterion 5.3. Since the collection of learning resources for the nursing education unit will be extensive, providing a complete list in the Self-Study Report or the Appendix may not be appropriate. However, preparing a list for the peer evaluators to review onsite during the site visit would be appropriate. As an element of the narrative, faculty may address the process for selecting, acquiring, and reviewing the learning resources. Also, faculty will want to discuss the accessibility of the resources for all students, inclusive of those in alternative delivery options as well as those taking courses at any location where the program is offered.

Essential Elements

- Program budget, including a comparison to similar units or departments; three (3) years of budgets for the nursing program as well as the governing organization should be accessible
- Evidence of sustainability of fiscal resources and support for the nursing education unit/program
- All program locations delineated by location classification (branch campus or off-campus instructional site);
- Identification and description of all physical resources used by the program, faculty, and students at all locations at which the program is offered and in all methods of delivery by which the program is offered
- List of learning resources with evidence of comprehensiveness, currency, and accessibility, including those available in library, learning centers, skills laboratories, simulation laboratories, and other resource areas at all locations at which the program is offered and in all methods of delivery by which the program is offered; process for faculty input into selection of resources

- Evidence of sufficiency of fiscal, physical, technological, and learning resources for faculty, students, and staff at all locations at which the program is offered and in all methods of delivery by which the program is offered
- Evidence of resource support of faculty and students utilizing distance education

Focus Questions

- Are there adequate and sustainable resources (fiscal, physical, technological, and learning) to support the faculty and students in achieving identified end-of-program student learning outcomes and program outcomes, including those at all locations?
- Are there adequate and sustainable fiscal, physical, technological, and learning resources for those engaged in alternative methods of delivery?

Standard 6 Outcomes

The 2017 Standards and Criteria resulted in a significant change to Standard 6 Outcomes. All programs **must** have a systematic plan of evaluation (SPE); see example template on the [ACEN website](#).

Additionally, the nursing education unit's systematic plan of evaluation must differentiate between all program types offered by the nursing education unit where applicable. However, the only required components in the SPE are each of the end-of-program student learning outcomes and program outcomes. Compliance with all ACEN Standards and Criteria is expected; effective January 1, 2017, documentation in the SPE of the compliance for Standards 1–5 is no longer required. Please note: according to Policy #29 Advertising and Recruitment of Students, the ACEN may request that a program provide verification of program outcomes data by an external source.

As an example of addressing Criterion 6.1, faculty will be referring to the systematic plan of evaluation and summarizing how the end-of-program student learning outcomes are measured by the faculty to determine the achievement of each identified end-of-program student learning outcome. Faculty will want to include in the narrative a few specific examples from the systematic plan of evaluation that demonstrate decisions made by the faculty based on the data findings and how the faculty use these data for analysis and program decision-making.

Essential Elements

End-of-Program Student Learning Outcomes; role-specific professional competencies for graduate programs:

- Each end-of-program student learning outcome must have a specific, measurable expected level of achievement. **The assessment of role-specific graduate competencies is no longer required for undergraduate programs; the assessment of role-specific professional competencies was retained for graduate programs and should be specific to each specialty area.**
- The program faculty are expected to assess the extent to which graduates achieve each end-of-program student learning outcome/role-specific professional competency. Appropriate assessment method(s) for each end-of-program student learning outcome/role-specific professional competency must also be identified; there should also be an expected level of achievement for each assessment method.
- All end-of-program student learning outcomes/role-specific professional competencies must be assessed at regular intervals, but each does not have to be assessed every year. As an example, two (2) to three (3) end-of-program student learning outcomes/role-specific professional competencies may be assessed each year, with all assessed over three (3) to five (5) years.

- There must be sufficient end-of-program student learning outcome/role-specific professional competency data to inform the program faculty members' decision-making for maintenance and improvement of students' attainment of the end-of-program student learning outcomes.*
- The program faculty are expected to analyze the end-of-program student learning outcome data (and the role-specific professional competencies for graduate programs) and use the analysis of data to make decisions for maintenance and improvement of students' attainment of those outcomes and competencies.
- Documentation demonstrating the use 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.
- For graduate programs with APRN options, graduate and employer satisfaction data must also be assessed per the NTF guidelines and include appropriate assessment method(s), regular intervals for assessment, and sufficient data for program decision-making.

* *Programs seeking initial accreditation are required to have data from the time Candidacy was achieved.*

Licensure/Certification Examination

- The program's most recent annual licensure examination pass rate for the program overall (aggregated for the program as a whole as reported by the NCSBN) must be at least 80% for all first-time test-takers during the same 12-month period; the three-year mean for the licensure examination pass rate was eliminated.
- The three-year mean for each certification examination pass rate was retained. If there is not a three-year mean for a certification examination, the program's most recent annual certification examination pass rate for the program overall (aggregated for the program as a whole as reported by the certifying agency) for a certification examination must be at least 80% for all first-time test-takers during the same 12-month period.
- Programs must include all first-time test-takers in their licensure/certification examination pass rate data. Programs may not eliminate any first-time test-takers in their licensure examination pass rate data. See ACEN Glossary – “Pass Rates.”
- States use different reporting timeframes, such as October 1st to September 30th or January 1st to December 31st. The program must report the same licensure/certification examination pass rate data for the same 12-month period used by its state.
- The program must report a minimum of the three (3) most recent years of available licensure/certification examination pass rate data aggregated for the program as a whole by date of completion.*
- The program must report a minimum of the three (3) most recent years of available licensure/certification examination pass rate data disaggregated for each program option and by date of completion.*
- The program must report a minimum of the three (3) most recent years of available licensure/certification examination pass rate data disaggregated for each location at which the nursing program is taught and by date of completion.*
- The program faculty are expected to continually assess the extent to which graduates succeed on the licensure/certification examination.
- The program faculty are expected to analyze the licensure/certification examination pass rate data and use the analysis of data to make decisions for the maintenance and improvement of graduates' success on the licensure/certification examination for the program as a whole as well as for each program option and location.

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Program Completion

- The program completion outcome must have a specific, measurable expected levels of achievement (ELA). (See ACEN Glossary – “Program Completion Rate.”)
- The program must provide a rationale for the specified ELA (e.g., 70% within three (3) years). The rationale must be appropriate for the program, considering student demographics. In setting the ELA for the program completion rate, the program may consider reasons such as the historical completion rate for the program, the governing organization’s completion rate for all students, state completion rate for similar programs, group of peer programs, ACEN data, etc. The ELA should be high enough as to be genuine and encourage continuous improvement but not so high as to be idealistic and, thus, unachievable. Peer evaluators will make a professional judgment regarding the appropriateness of the program’s ELA.
- The program completion outcome must be assessed using appropriate assessment method(s).
- The program must report a minimum of the three (3) most recent years of annual program completion data aggregated for the program as a whole by date of completion or entering cohort.*
- The program must report a minimum of the three (3) most recent years of annual program completion data disaggregated by each program option and by date of completion or entering cohort.*
- The program must report a minimum of the three (3) most recent years of annual program completion data disaggregated for each location at which the nursing program is taught and by date of completion or entering cohort.*
- The program faculty are expected to continually assess the extent to which graduates complete the program. Evidence that outcomes/expected levels of achievement are met, and actions taken when not met.
- The program faculty are expected to analyze the program completion data and use the analysis of data to make decisions for the maintenance and improvement of students’ completion of the program as a whole as well as for each program option and location.

* *Programs seeking initial accreditation are required to have data from the time Candidacy was achieved.*

Job Placement

- The job placement outcome must have a specific, measurable expected level of achievement (ELA). (See ACEN definition of the job placement rate.) Note: The job placement outcome includes all program locations and all program options; these data are aggregated for the program as a whole.
- The program must provide a rationale for the ELA, considering program demographics. The rationale must be appropriate for the program. In setting the ELA, the faculty may consider reasons such as the historical job placement rate for the program, the governing organization’s job placement rate for students in other health science programs, state job placement rate for similar programs, group of peer programs, ACEN data, etc. The ELA should be high enough as to be genuine and encourage continuous improvement but not so high as to be idealistic and, thus, unachievable. Peer evaluators will make a professional judgment regarding the appropriateness of the program’s ELA.
- The job placement outcome must be assessed using appropriate assessment method(s). The narrative should describe the methodology that is used to collect these data (e.g. survey, governing organization, or state reports). If a survey methodology is used to assess job placement, the response rate should be included. Response rate is the number of graduates contacted divided by the number of number of graduates for that year. For example, if there

were 100 graduates from 2014 and only 25 graduates were able to be contacted (by phone/email/survey, etc.), the response rate is 25%.

- The program must report a minimum of the three (3) most recent years of annual job placement data aggregated for the program as a whole by date of completion.*
- The program faculty are expected to continually assess the extent to which graduates are employed. Evidence that outcomes/expected levels of achievement are met, and actions taken when not met.
- The program faculty are expected to analyze the job placement data and use the analysis of data to make decisions for the maintenance and improvement of graduates' employment.

* *Programs seeking initial accreditation are required to have data from the time Candidacy was achieved.*

Other Program Outcomes

Faculty may elect to include other selected program outcomes in the SPE (i.e. student articulation in a formal education program). The governing organization, state 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. For example, programs with APRN options must provide graduate and employer satisfaction data to demonstrate compliance with the NTF guidelines. Another example is the collection of data regarding the number of students that transfer to the next level of formal nursing education.

Focus Questions

- Is there a written systematic plan of evaluation in place that has been developed and implemented by the faculty? Does the plan include **each** end-of-program student learning outcome and each program outcome?
- For master's and doctoral programs, are role-specific professional competencies included in the plan?
- For graduate programs with APRN options, are satisfaction data included?
- Are there specific and measureable expected level(s) of achievement for each end-of-program student learning outcome (and role-specific professional competency for graduate programs) and program outcome? What is the rationale for the expected levels of achievement for program completion and job placement?
- Are the timelines specific? Are the assessment methods congruent and appropriate for each expected level of achievement? Are the data trended within the plan?
- Are the students achieving the end-of-program student learning outcomes (and the role-specific professional competencies for graduate programs)? If not, what strategies have been implemented?
- Is there clearly documented evidence that data for the end-of-program student learning outcomes (and the role-specific professional competencies for graduate programs) and the analysis of those data have been used by the faculty to make decisions leading to program improvements?
- Are program outcomes being achieved? If not, what strategies have been implemented?
- Are the aggregated cohort annual licensure/certification examination pass rates trending up, trending down, or remaining the same? Is there a difference in trends between program options or locations (if applicable)? Are faculty implementing appropriate data-driven changes based on the trend of the aggregated/disaggregated data?
- Are the aggregated cohort annual program completion rates trending up, trending down, or remaining the same? Is there a difference in trends between program options or locations (if

- applicable)? Are faculty implementing appropriate data-driven changes based on the trend of the aggregated/disaggregated data?
- Are the aggregated cohort annual job placement rates trending up, trending down, or remaining the same? Are there sufficient data to ensure that decisions can be made? If a survey methodology is used, what are the response rates (number of graduates contacted divided by the number of graduates)? Are response rates sufficient?