

3343 Peachtree Road NE, Suite 850 | Atlanta, GA 30326 | P. 404.975.5000 | F. 404.975.5020 | www.acenursing.org

SITE VISIT REPORT «Governing_Organization» «CEO_City», «CEO_State»

Program Type: Clinical Doctorate
Purpose of Visit: «Visit_Purpose»
Date of Visit: «Site_Visit_Date»

I. GENERAL INFORMATION

Nursing Education Unit

«Education_Unit»

Governing Organization

«Governing_Organization»

«Nurse_Admin_Address1» «CEO_Address1» «CEO_Address2» «CEO_Address2»

«Nurse_Admin_City», «Nurse_Admin_State» «CEO_City», «CEO_State» «CEO_Zip»

«Nurse Admin Zip»

Instructions: Verify accuracy for all pre-populated General Information.

The two CEO fields below are for programs at campuses or locations of larger organizations where the campuses have separate nursing education units for the purposes of ACEN accreditation.

For example, if a site visit was conducted for XYZ College - Springfield, the CEO of the entire governing organization would be the President or CEO of XYZ College as a whole. The CEO of the local governing organization would be the person responsible for the operation of the Springfield Campus—typically a Campus President.

If the program being reviewed is not part of such a governing organization, simply complete the first CEO field (entire governing organization) and mark the second (local governing organization) as "N/A."

Nurse Administrator Chief Executive Officer (entire governing organization)

«Nurse_Admin_First_Name» «CEO_First_Name» «CEO_Last_Name»,

«Nurse_Admin_Last_Name», «CEO_Credentials»
«Nurse_Admin_Credentials» «CEO_Job_Title»

E-mail: «Nurse Admin Email»

Chief Executive Officer (local governing organization)

«CEO_First_Name» «CEO_Last_Name»,

«CEO_Credentials» «CEO_Job_Title»

Telephone: «CEO_Phone_1»
Fax: «CEO_Fax»
E-mail: «CEO_Email»

State Regulatory Agency Approval Status

Agency: «Regulatory_Agency_Name»

Last Review: «Regulatory_Agency_Last_Review»
Outcome: «Regulatory_Agency_Last_Outcome»
Next «Regulatory_Agency_Next_Review»

Review:

Accreditation Status (Program)

Agency: Accreditation Commission for

Education in Nursing

Last Review: «ACEN_Last_Visit_Cycle»

Outcome: «ACEN_Last_Visit_Outcome»

Next Review: «ACEN_Next_Site_Visit_Cycle»

Accreditation Status (Governing Organization)

Agency: «Accrediting_Agency_Name»

Last «Accrediting_Agency_Last_Review»

Review:

Outcome: «Accrediting_Agency_Last_Outcome»
Next «Accrediting_Agency_Next_Review»

Review:

II. SITE VISIT INFORMATION

Site	Visit	Team:
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Chairperson	<u>Member</u>
<u>Member</u>	<u>Member</u>

ACEN Standards and Criteria Used: 2017

Program Demographics:

Year Nursing Program Established: «Established»

Year of Initial ACEN Accreditation: «ACEN_Initial_Accreditation»

☐ Yes	The ACEN serves as the Title IV gatekeeper for the governing organization.
□ No	

Faculty:

Nursing Faculty Academic Credentials – (Highest Degree Only) – «Program_Type» – Full-time								
Doctoral			Master's		Baccalaureate		Associate	
Number of Faculty	Nursing	Non- nursing	Nursing	Non- nursing	Nursing	Non- nursing	Nursing	Non- nursing
FT Exclusive								
FT Shared								

Nursing Faculty Academic Credentials – (Highest Degree Only) – Part-Time								
	Doc	toral	Mas	ster's	Bacca	alaureate	Asso	ociate
Number of Faculty	Nursing	Non- nursing	Nursing	Non- nursing	Nursing	Non- nursing	Nursing	Non- nursing
PT Exclusive								
PT Shared								

Students:

Instructions:

List the total number of students enrolled in the nursing program in addition to providing subtotals for each program option (if applicable) (e.g. traditional option; LPN-to-RN option; part-time option; evening/weekend option), and location (if applicable). Please add additional rows if necessary.

Total nursing student enrollment:	
[Name of Option/Location]:	
[Name of Option/Location]:	
[Name of Option/Location]:	

«Governing_	_Organization»
«Program_T	ype»

	Iı	nstructions -	- Program	Options/	Length:
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Provide information for all options offered by the program, including the traditional option (if applicable). Note: ALL options must have a separate table. Please add additional tables if necessary. Please note that part-time is checked only if there is an official published part-time program of study option for the program.

option for the program.				
Program Options/Length:				
Name of Program Option:				
Method of Program Delivery:	☐ Face-to-Face	e	☐ Distance Ed	lucation
Percentage of Nursing Credits Delivered by Distance Education:	□ 0%	□ 1–24%	□ 25–49%	□ 50–100%
Official Published Program of Study:	☐ Full-time	□ Pa	rt-time	□ Both
Academic Term Type:	☐ Semesters	□ Tr	imesters	☐ Quarters
Length of Academic Term (in weeks):				
Length of Time/Required Number of Academic Terms (including any prerequisite terms prior to entry into the program):				
Instructions – Use definitions to comp	lete credit hours	information be	elow.	
Total Number of Credits: The sum of program: nursing credits, non-nursing credits; all semester/quarter/clock hou Per the ACEN definition of program leand/or are required for admission, theshours, whether these courses are credit prerequisite(s) and/or are required for toward the total number of semester/q defined program of study or taken as a courses do count toward the total number of the total numbe	ength, if first aid se do not count to tor non-credit. A admission (e.g., uarter/clock hou an elective cours	education cred program of study, CPR and/or Coward the total All other credit general biologers. When first a total that is part of	its, elective cred ady. CNA are required number of seme courses that are y, medical terminid, CPR, and CM the defined programments.	its, and prerequisite d prerequisite(s) ester/quarter/clock required nology) do count NA are part of the
Total Number of Credits for Entire Program Option:				
Total Number of Nursing Credits:				
Total number of Non-				
Nursing/General				
Education/Elective/Prerequisite				
Credits (do not count credits twice)				
Transfer Credits (included in the	Up to non-	nursing/genera	l education/elect	ive/prerequisite
credits above) based on the			the program opti	
governing organization or state			e transferred into	
policies:	option.			= -

Instructions – Additional Locations:

Provide information for all additional locations where the nursing program is offered, including sites not visited by the team. Please add additional tables if necessary.

«Governing_	_Organization»
«Program_T	ype»

Additional Locations:		
Name of Location:		
Address (Number, Street, City, Zip		
Code):		
Location Classification:	☐ Branch Campus ☐ Off-Campus Instructional Site	<u>e</u>
Percentage of Credit Hours for Entire	e □ 1–24% □ 25–49% □ 50–100%	
Program of Study Taught at		
Location:		
Program Options Offered:		
Visited By Site Visit Team:	□ Yes □ No	
Name of Location:		
Address (Number, Street, City, Zip		
Code):		
Location Classification:	☐ Branch Campus ☐ Off-Campus Instructional Sit	e
Percentage of Credit Hours for Entire	e □ 1–24% □ 25–49% □ 50–100%	
Program of Study Taught at		
Location:		
Program Options Offered:		
Visited By Site Visit Team:	☐ Yes ☐ No	
·		
Name of Location:		
Address (Number, Street, City, Zip		
Code):		
Location Classification:	☐ Branch Campus ☐ Off-Campus Instructional Sit	e
Percentage of Credit Hours for Entire	□ 1–24% □ 25–49% □ 50–100%	
Program of Study Taught at		
Location:		
Program Options Offered:		
Visited By Site Visit Team:	☐ Yes ☐ No	
•		
Coordinated Visit:		
\Box The site visit was conducted as a co	oordinated visit with the following agency:	
☐ Not applicable		
Agency:		
Names, Titles, and Credentials of	1	
Agency Representatives Present		
During Visit:		

Instructions:

Please list all people interviewed during the site visit, **including complete name**, **credentials**, **and title**. Refer to the "Guidelines: Lists of Interviews" attachment for further guidance.

Representatives interviewed at the clinical agencies should be listed under clinical observations in Section III of this report; please do not include these individuals in the list of interviews below.

External Constituency Documents

	rning_Organization» am_Type»	7
Nursing	g/Governing Organization Documents	
Meeting	g Minutes	
Course	<u>Materials</u>	
Third-	Party Comments: The nursing education unit had a reasonable process for soliciting third-party comments. The nursing education unit did not have a reasonable process for soliciting third-party comments.	S.
Method	ds Used to Announce the Accreditation Visit to the Program's Communities of Interest:	
Numbe	er of Attendees at Public Meeting:	
Descrip	ption of Meeting (if applicable):	
	Written third-party comments were received by the ACEN: Written third-party comments were not received by the ACEN.	
Descrip	otion of Comments (if applicable):	

Instructions:

An introduction is optional and may be omitted. If included, provide a brief description of the governing organization, nursing program, and accreditation history <u>if relevant to the program's compliance with the Accreditation Standards</u>. A brief introduction should be included to explain something non-routine such as if the visit is a combined continuing accreditation visit and focused visit for a substantive change. Please limit your discussion to 250 words.

Introduction:

III. CLASSROOM AND CLINICAL OBSERVATIONS

Instru	ctions:						
	Classroom and clinical observa stance education courses, if app		m being reviev	ved include face-to-face, hybrid,			
co fa	Complete the informational tables below for each classroom/laboratory and clinical observation conducted during the site visit, including the names, credentials, and titles (if applicable) of any faculty and clinical representatives interviewed. If additional observations were conducted, please add and complete extra tables as appropriate.						
Th	Provide a narrative description of each classroom/laboratory observation in the space provided. This observation may include a face-to-face classroom and/or laboratory as well as online requirements. Suggested length: one to two paragraphs per observation.						
•	sample of the online/hybrid courses.						
stı) For clinical observations, include information regarding the interviews conducted with faculty, students, and/or agency representatives as well as information regarding the clinical environment and observations.						
Clacer	oom/Laboratory Observation	#1					
	e Prefix, Number, and Title:	π1					
	od of Course Delivery:	☐ Face-to-Face	☐ Hybrid	☐ Distance Education			
	y Name and Credentials:		<u> Пубпа</u>				
	er of Students in Attendance:						
Descrip Classro	otion: oom/Laboratory Observation	#2					
	e Prefix, Number, and Title:						
Metho	od of Course Delivery:	☐ Face-to-Face	☐ Hybrid	☐ Distance Education			
	y Name and Credentials:						
Numb	er of Students in Attendance:						
Descrip	otion:						
	l Observation #1						
	e Prefix, Number, and Title:						
	al Agency:						
Unit(s) Visited (Optional):						

«Governing_Organization»
«Program_Type»

Faculty Name and Credentials:	
Names, Titles, and Credentials of Agency Representatives	
Interviewed:	
Number of Students Interviewed:	

Description:

IV. EVALUATION OF THE STANDARDS AND CRITERIA

Instructions:

- 1) Select one checkbox that most closely describes the program's compliance with each Criterion and the evidence available to the site visit team.
- 2) Provide supporting narrative for each Criterion, detailing the findings of the site visit team, the evidence reviewed, and the individuals interviewed. Suggested length: one to two paragraphs per Criterion. Make sure the narrative identifies the evidence (e.g. meeting minutes, handbook, syllabi, interviews onsite, documents in the evidence room) used to verify program compliance, areas needing development, or non-compliance. Supporting narrative may be omitted if the Criterion is not applicable (e.g., 1.11 for programs that do not offer distance education).
- 3) Provide page numbers when referencing documents (e.g. Faculty Handbook (p. 22) or the SSR (pp. 145–147)).

STANDARD 1

Mission and Administrative Capacity

The mission of the <u>nursing education unit</u> reflects the <u>governing organization</u>'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.

1.1	The mission and philosophy of the nursing education unit are congruent with the core values, mission, and goals of the governing organization.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Supp	orting Narrative:
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.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Supp	orting Narrative:

1.3		ogram student learning outcomes and program outcomes is interest, and the communities of interest have input into sion-making.			
	The peer evaluators verified ev	vidence to support compliance with this Criterion.			
	•	vidence to support compliance with this Criterion with areas			
		verify evidence to support compliance with this Criterion.			
Suppor	rting Narrative:				
Instru	actions 1.4 – <u>Partnerships</u>				
(form agent/clinic	nal relationship) between a nursing lagency to accomplish specific o	gram. Per the ACEN definition, a partnership is an agreement ng education unit/governing organization and an outside objectives and goals over a period of time. This does not include rning experiences required by the nursing program. Clinical riterion 4.10.			
1.4	Partnerships that exist promo and benefit the community.	ote excellence in nursing education, enhance the profession,			
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas				
	needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.				
	The nursing program does not utilize partnerships.				
Suppor	rting Narrative:				
1.5	The nursing education unit is major in nursing and is doctor	s administered by a nurse who holds a graduate degree with a orally prepared.			
	The neer evaluators verified ev	vidence to support compliance with this Criterion.			
	•	vidence to support compliance with this Criterion with areas			
_	needing development.	• •			
	The peer evaluators could not v	verify evidence to support compliance with this Criterion.			
	The nurse administrator is enro	olled in the following degree program:			
	Graduate Program:	☐ Master's Degree ☐ Doctorate (specify degree [e.g., PhD, EdD, DNP, etc.] and discipline [e.g., Nursing Leadership, Administration, etc.]):			
	Anticipated Date of Completion:	Term: Year:			

Supporting Narrative:

1.6	The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.				
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas				
	needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.				
Suppor	ting Narrative:				
1.7	When present, nursing program coordinators and/or faculty who coordinate or lead program options/tracks are academically and experientially qualified.				
	The peer evaluators verified evidence to support compliance with this Criterion.				
	The peer evaluators verified evidence to support compliance with this Criterion with areas				
	needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.				
	The nursing program does not utilize coordinators and/or faculty who assist with program administration.				
Suppor	ting Narrative:				
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.				
	The peer evaluators verified evidence to support compliance with this Criterion.				
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.				
	The peer evaluators could not verify evidence to support compliance with this Criterion.				
Suppor	ting Narrative:				
1.9	The nurse administrator has the authority to prepare and administer the program budget with faculty input.				
	The peer evaluators verified evidence to support compliance with this Criterion.				
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.				
	The peer evaluators could not verify evidence to support compliance with this Criterion.				
Suppor	ting Narrative:				

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.

	ning_Organization» m_Type» 14
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.
Support	ing Narrative:
When	tions – Criterion 1.11: assessing distance education, refer to ACEN Policy #15 Distance Education for further guidance. #15 has been provided as an attachment to this template.
	<u>Distance education</u> , when utilized, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.
	The nursing program does not utilize distance education.
Support	ing Narrative:
areas n provide above needin	one checkbox for each of the following sections: strengths, statements of non-compliance, and leeding development. When listing strengths, include the number of the related Criterion and lee a short statement with regards to the strength identified; remember that a strength is something and beyond what is required or common practice. For statements of non-compliance and areas g development, select the Criterion from the list and refer to the conforming language ment for the correlating statement.
Summa	ary of Compliance:
Strength	ns:
	The peer evaluators did not identify strengths for Standard 1.
	The peer evaluators identified the following strength(s) for Standard 1:
	Criterion Number: Strength:

	rning_Organization» am_Type» 15
	Criterion Number:
	Strength:
Statem	ents of Non-Compliance:
	The clinical doctorate program is in compliance with Standard 1.
	The clinical doctorate program is not in compliance with Standard 1 as the following Criterion/ia have not been met:
	Criterion 1.1
	Conforming Language:
	☐ Criterion 1.2
	Conforming Language:
	☐ Criterion 1.3
	Conforming Language:
	☐ Criterion 1.4
	Conforming Language:
	☐ Criterion 1.5
	Conforming Language:
	☐ Criterion 1.6 Conforming Language:
	☐ Criterion 1.7
	Conforming Language:
	☐ Criterion 1.8
	Conforming Language:

	Criterion 1.9
Confo	orming Language:
	Criterion 1.10
Confo	orming Language:
	Criterion 1.11
Confo	orming Language:
aadina	Development:
cumg	Development.
The pe	er evaluators did not identify areas needing development for Standard 1.
The peo	er evaluators identified the following areas needing development for Standard 1:
П	Criterion 1.1
Confo	orming Language:
Com	
	Criterion 1.2
Confo	orming Language:
	Criterion 1.3
Confo	orming Language:
	Criterion 1.4
Confo	orming Language:
	Criterion 1.5
Confo	orming Language:
	Criterion 1.6
Confo	orming Language:
$\overline{\Box}$	Criterion 1.7
	CHOHOH 1./

Conforming Language:				
☐ Criterion 1.8				
Conforming Language:				
☐ Criterion 1.9				
Conforming Language:				
☐ Criterion 1.10				
Conforming Language:				
☐ Criterion 1.11				
Conforming Language:				

«Governing_Organization» «Program_Type»

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.

Instructions:

- 1) Select one checkbox that most closely describes the program's compliance with each Criterion and the evidence available to the site visit team.
- 2) Provide supporting narrative for each Criterion, detailing the findings of the site visit team, the evidence reviewed, and the individuals interviewed. Suggested length: one to two paragraphs per Criterion. Make sure the narrative identifies the evidence (e.g. meeting minutes, handbook, syllabi, interviews onsite, documents in the evidence room) used to verify program compliance, areas needing development, or non-compliance. Supporting narrative may be omitted if the Criterion is not applicable (e.g., 2.4 for programs that do not use preceptors).
- 3) Provide page numbers when referencing documents (e.g. Faculty Handbook (p. 22) or the SSR (pp. 145–47)).
- 4) Do not include the nurse administrator in this Standard. Do not include coordinators if 51% or more of their workload is administrative.

Note: If the peer evaluators are provided a revised faculty profile table or laboratory personnel table onsite that is updated or different from that in the SSR, please **append a copy** after the final page of this report. The narrative must also clearly reflect that an updated faculty profile table was received onsite.

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ı	Instruct	10n – (Cirit	erion	12.1	ı :

Graduate Program:

The narrative should include the identified credential and qualification requirements for the governing organization, state, and governing organization's accrediting agency.

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.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
	The following full-time faculty are enrolled in a graduate program:
	Faculty Name and Credentials:

☐ Doctorate

☐ Master's Degree

Anticipated Date of Completion:

Term:

		(Specify degree [e.g., PhD, EdD, DNP, etc.] and discipline [e.g., Nursing Leadership, Administration, etc.]):
	Anticipated Date of Completion:	Term: Year:
	Faculty Name and Credentials:	
	Graduate Program:	☐ Master's Degree ☐ Doctorate (Specify degree [e.g., PhD, EdD, DNP, etc.] and discipline [e.g., Nursing Leadership, Administration, etc.]):
	Anticipated Date of Completion:	Term: Year:
	Faculty Name and Credentials:	
	Graduate Program:	☐ Master's Degree ☐ Doctorate (Specify degree [e.g., PhD, EdD, DNP, etc.] and discipline [e.g., Nursing Leadership, Administration, etc.]):
	Anticipated Date of Completion:	Term: Year:
	ting Narrative:	
The na		tified credential and qualification requirements for the governing ganization's accrediting agency.
2.2		ld educational qualifications and experience as required by the state, and the governing organization's accrediting agency, and igned nursing courses.
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.	
	The following part-time facult	y are enrolled in a graduate program:
	Faculty Name and Credentials:	
	Graduate Program:	☐ Master's Degree ☐ Doctorate (Specify degree [e.g., PhD, EdD, DNP, etc.] and discipline [e.g., Nursing Leadership, Administration, etc.]):
	Anticipated Date of Completion:	Term: Year:
	Faculty Name and Credentials:	I
	Graduate Program:	☐ Master's Degree ☐ Doctorate (Specify degree [e.g., PhD, EdD, DNP, etc.] and discipline [e.g., Nursing Leadership, Administration, etc.]):
	Anticipated Date of Completion:	Term: Year:
	Faculty Name and Credentials:	
	Graduate Program:	☐ Master's Degree ☐ Doctorate (Specify degree [e.g., PhD, EdD, DNP, etc.] and discipline [e.g., Nursing Leadership, Administration, etc.]):

	erning_Organization» ram_Type»	20
		Year:
Suppo	rting Narrative:	
The r		tified credential and qualification requirements for the governing ganization's accrediting agency.
2.3	as required by the governing	nursing courses hold educational qualifications and experience g organization, the state, and the governing organization's qualified to teach the assigned nursing courses.
	•	vidence to support compliance with this Criterion. vidence to support compliance with this Criterion with areas
		verify evidence to support compliance with this Criterion.
	The nursing program does not	utilize non-nurse faculty.
	The following non-nurse facul	ty are enrolled in a graduate program:
	Faculty Name and Credentials:	
	Graduate Program:	☐ Master's Degree ☐ Doctorate (Specify degree [e.g., PhD, EdD, DNP, etc.] and discipline [e.g., Leadership, Administration, etc.]):
	Anticipated Date of Completion:	Term: Year:
	rting Narrative: uction – Criterion 2.4:	
	plicable, the narrative should inceptors.	clude any governing organization, state, or agency requirements for
2.4		re academically and experientially qualified, oriented, and have clearly documented roles and responsibilities.
	•	vidence to support compliance with this Criterion. vidence to support compliance with this Criterion with areas
		verify evidence to support compliance with this Criterion.
	The nursing program does not	utilize preceptors.

«Governing_Organization» «Program_Type»

Supporting Narrative:

I	nstructions	 Criterion 	25.
ı	nsu ucuons ·	– CHICHOII	∠.J.

Per the ACEN definition of "Sufficient Full-time Faculty," the narrative should include the total full-time-faculty-to-student ratio; the full-time faculty workload; the number of full-time faculty on

respo	load and the amount of overload for each full-time faculty member; the non-teaching onsibilities required by the governing organization and nursing education unit; and the faculty-to-ent ratios for classroom, laboratory, and clinical experiences.
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.
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Suppo	orting Narrative:
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.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.
Suppo	orting Narrative:
2.7	The number and qualifications of staff within the nursing education unit are sufficient to support the nursing program.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Suppo	orting Narrative:
2.8	Faculty (full- and part-time) are oriented and mentored in their areas of responsibility.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

«Governing_Organization» «Program_Type»		
Suppor	rting Narrative:	
2.9	Faculty (full- and part-time) performance is regularly evaluated in accordance with governing organization's policy/procedures, and demonstrates effectiveness in assigned area(s) of responsibility.	
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.	
Suppor	rting Narrative:	
The n	narrative should address all instructional technologies used by faculty in face-to-face, hybrid, and not education courses to convey course content to students (such as a learning management m) as well as distance technology (if applicable).	
2.10	Faculty (full- and part-time) engage in ongoing development and receive support for instructional and distance technologies.	
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.	
Suppor	rting Narrative:	
Select areas provid above needin	t one checkbox for each of the following sections: strengths, statements of non-compliance, and needing development. When listing strengths, include the number of the related Criterion and de a short statement with regards to the strength identified; remember that a strength is something and beyond what is required or common practice. For statements of non-compliance and areas ng development, select the Criterion from the list and refer to the conforming language ment for the correlating statement.	
Summ	ary of Compliance:	
Strengt	ths:	
	The peer evaluators did not identify strengths for Standard 2.	
	The peer evaluators identified the following strength(s) for Standard 2:	
	Criterion:	

«Governing_Organization» «Program_Type»	

23
25

	Strength:
	Criterion:
	Strength:
	Strength.
~	
Statem	nents of Non-Compliance:
	The clinical doctorate program is in compliance with Standard 2.
	The clinical doctorate program is not in compliance with Standard 2 as the following Criterion/ia have not been met:
	☐ Criterion 2.1
	Conforming Language:
	☐ Criterion 2.2
	Conforming Language:
	☐ Criterion 2.3
	Conforming Language:
	☐ Criterion 2.4
	Conforming Language:
	☐ Criterion 2.5
	Conforming Language:
	☐ Criterion 2.6
	Conforming Language:
	☐ Criterion 2.7
	Conforming Language:
	Conforming Language:
	Conforming Language:

	☐ Criterion 2.9
	Conforming Language:
	☐ Criterion 2.10
	Conforming Language:
Areas	Needing Development:
	The peer evaluators did not identify areas needing development for Standard 2.
	The peer evaluators identified the following areas needing development for Standard 2:
	☐ Criterion 2.1
	Conforming Language:
	☐ Criterion 2.2
	Conforming Language:
	☐ Criterion 2.3
	Conforming Language:
	Criterion 2.4
	Conforming Language:
	☐ Criterion 2.5
	Conforming Language:
	☐ Criterion 2.6
	Conforming Language:
	☐ Criterion 2.7
	Conforming Language:
	☐ Criterion 2.8

«Governing_	Organization»
«Program_T	ype»

Conforming Language:
☐ Criterion 2.9
Conforming Language:
☐ Criterion 2.10
Conforming Language:

«Governing_Organization» «Program_Type»

STANDARD 3

Students

Instructions:

- 1) Select one checkbox that most closely describes the program's compliance with each Criterion and the evidence available to the site visit team.
- 2) Provide supporting narrative for each Criterion, detailing the findings of the site visit team, the evidence reviewed, and the individuals interviewed. Suggested length: one to two paragraphs per Criterion. Make sure the narrative identifies the evidence (e.g. meeting minutes, handbook, syllabi, interviews onsite, documents in the evidence room) used to verify program compliance, areas needing development, or non-compliance. Supporting narrative may be omitted if the Criterion is not applicable (e.g., 3.9 for programs that do not use distance education).
- 3) Provide page numbers when referencing documents (e.g. Faculty Handbook (p. 22) or the SSR (pp. 145–147)).

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

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.			
	The peer evaluators verified evidence to support compliance with this Criterion.			
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.			
	The peer evaluators could not verify evidence to support compliance with this Criterion.			
Suppo	orting Narrative:			
3.2	Public information is accurate, clear, consistent, and accessible, including the program's accreditation status and the ACEN contact information.			
	The peer evaluators verified evidence to support compliance with this Criterion.			
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.			
	The peer evaluators could not verify evidence to support compliance with this Criterion.			
т.				

Instructions – Criterion 3.2:

For all checkboxes below, ensure that the narrative describes how this information was verified (e.g., review of documents and/or interviews; identify each document reviewed (e.g., student handbook (p. 20)) and identify each person interviewed (e.g., Dean of Students)).

	o ACEN Policy #29 Advertising and Recruitment of Students for further guidance. Policy #29 on provided as an attachment to this template.
☐ Yes	The institution has a transfer of credit policy that is publicly disclosed and includes a statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education.
	_
☐ Yes ☐ No	The institution/nursing program makes available to students and the public current academic calendar, grading policies, and refund policies.
☐ Yes	The institution/nursing program makes available to students and the public current outcomes data – licensure/certification pass rate, completion rate and job placement rate.
☐ Yes	Recruitment materials for the nursing program accurately represent the institution's/nursing program's practices and policies.
□ Yes	The institution avoids the following recruitment practices in order to comply with U.S. Department of Education regulations: a. Assuring employment unless employment arrangements have been made and can be verified, b. Misrepresenting job placement and employment opportunities for graduates,
	c. Misrepresenting program costs,
□ No	 d. Disparaging comparisons of secondary or postsecondary institutions, e. Misrepresenting abilities required to complete intended program, and f. Offering money or inducements other than educational services of the institution in exchange for student enrollment. (Except for awards of privately endowed restricted funds, grants, or scholarships are to be offered only on the basis of specific criteria related to merit or financial need.)
Supporti	ng Narrative:
	Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas
needing development. \Box The peer evaluators could not verify evidence to support compliance with this Criter	
Supporti	ng Narrative:
	Student services are commensurate with the needs of nursing students, including those receiving instruction using alternative methods of delivery.
	The peer evaluators verified evidence to support compliance with this Criterion.

	rning_Organization» am_Type»			28
	The peer evaluators needing developmen		lence to support com	pliance with this Criterion with areas
			rify evidence to supp	port compliance with this Criterion.
Suppor	ting Narrative:			
3.5	Student educationa organization and st		-	th the policies of the governing
	-			pliance with this Criterion.
	The peer evaluators needing developmen		lence to support com	pliance with this Criterion with areas
			rify evidence to supp	port compliance with this Criterion.
□ Ye	enrolled in distan		ocedures in place spen courses or program	ecific to protecting the privacy of students s.
□ N/.	A The nursing prog	ram does no	ot utilize distance edu	cation.
For program currer the su	ization's three-year do nt default rate is a fina apporting narrative. rograms with an instit	ate in federal efault rates fo al or draft rate tutional defau	For the past three year te. If the default rates ult rate of 15% or gre	ograms, provide the governing rs in the table below. Please indicate if the are not available, include an explanation in eater, please include a description of the
gover	ning organization's st	rategies to ir	mprove the default ra	ite.
3.6	<u>-</u>	ements is m		zation Act Title IV eligibility and g default rates and the results of financial
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.			
	•		s not participate in fe	•
				nancial aid but does not participate in federal
			Year	Three-Year Default Rate
	Current	☐ Final		

	erning_Organization» ram_Type»			29
		☐ Draft		
	Previous			
	Previous			
Suppo	orting Narrative:			<u>. I </u>
3.6.1				nt program addressing student loan ation with lenders is available.
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.			
	The governing organization does not participate in federal financial aid.			
	The governing organization participates in federal financial aid but does not participate in feder loan programs.			
Suppo	orting Narrative:			
Note progr		6.3: apply to	o <u>all</u> types of federal	financial aid programs, not just loan
3.6.2	Students are infor	med of thei	r ethical responsibi	lities regarding financial assistance.
	The peer evaluators needing developme	verified evi	idence to support con	mpliance with this Criterion. mpliance with this Criterion with areas oport compliance with this Criterion.
	The governing orga	nization doe	es not participate in f	ederal financial aid.
Suppo	orting Narrative:			
3.6.3	Financial aid reco		ompliance with the	policies of the governing organization,
	The peer evaluators needing developme	verified evi	idence to support con	mpliance with this Criterion. mpliance with this Criterion with areas poort compliance with this Criterion.

For checkboxes below, ensure that the narrative describes how this information was verified (e.g., review of documents and/or interviews).

«Program_Type»		
Yes Processes are in place (e.g., login name/password, use of technology such as cameras/video stream) through which the institution can establish that the student who registers in a distance		
No education course or program is the same student who participates in and completes the course or program and receives the academic credit.		
Yes Written procedures are distributed at the time of registration or enrollment in a distance education course that notify students of any projected additional student charges associated		
□ No with the verification of student identity (e.g., proctoring center fee, required purchase of specific technology such as a camera).		
\square N/A There is no charge to verify student identity.		
Supporting Narrative:		
Instructions:		
Select one checkbox for each of the following sections: strengths, statements of non-compliance, and areas needing development. When listing strengths, include the number of the related Criterion and provide a short statement with regards to the strength identified; remember that a strength is something above and beyond what is required or common practice. For statements of non-compliance and areas needing development, select the Criterion from the list and refer to the conforming language attachment for the correlating statement.		
attachment for the correlating statement.		
Summary of Compliance:		
Summary of Compliance:		
Summary of Compliance: Strengths:		
Summary of Compliance: Strengths: ☐ The peer evaluators did not identify strengths for Standard 3.		
Strengths: The peer evaluators did not identify strengths for Standard 3. The peer evaluators identified the following strength(s) for Standard 3: Criterion:		
Strengths: The peer evaluators did not identify strengths for Standard 3. The peer evaluators identified the following strength(s) for Standard 3: Criterion: Strength:		
Strengths: The peer evaluators did not identify strengths for Standard 3. The peer evaluators identified the following strength(s) for Standard 3: Criterion: Strength: Criterion:		
Summary of Compliance: Strengths: The peer evaluators did not identify strengths for Standard 3. The peer evaluators identified the following strength(s) for Standard 3: Criterion: Strength: Criterion: Strength:		
Summary of Compliance: Strengths: The peer evaluators did not identify strengths for Standard 3. The peer evaluators identified the following strength(s) for Standard 3: Criterion: Strength: Criterion: Strength: Strength:		

☐ Criterion 3.2
Conforming Language:
☐ Criterion 3.3
Conforming Language:
☐ Criterion 3.4
Conforming Language:
☐ Criterion 3.5
Conforming Language:
Comorning Language.
☐ Criterion 3.6
Conforming Language:
☐ Criterion 3.6.1
Conforming Language:
☐ Criterion 3.6.2
Conforming Language:
☐ Criterion 3.6.3
Conforming Language:
Comorning Language.
☐ Criterion 3.7
Conforming Language:
☐ Criterion 3.8
Conforming Language:
☐ Criterion 3.9
Conforming Language:

The peer	evaluators did not identify areas needing development for Standard 3.
he peer	evaluators identified the following areas needing development for Standard 3
	Criterion 3.1
Confor	ning Language:
	Criterion 3.2
Confor	ning Language:
	Criterion 3.3
Confori	ning Language:
	Criterion 3.4
Conform	ning Language:
	Criterion 3.5
Confor	ning Language:
П	Criterion 3.6
Confor	ning Language:
	Criterion 3.6.1
Confor	ning Language:
П	Criterion 3.6.2
<u> </u>	ning Language:
П	Criterion 3.6.3
<u> </u>	ning Language:

☐ Criterion 3.7		
Conforming Language:		
☐ Criterion 3.8		
Conforming Language:		
☐ Criterion 3.9		
Conforming Language:		

STANDARD 4 Curriculum

Instructions:

- 1) Select one checkbox that most closely describes the program's compliance with each Criterion and the evidence available to the site visit team.
- 2) Provide supporting narrative for each Criterion, detailing the findings of the site visit team, the evidence reviewed, and the individuals interviewed. Suggested length: one to two paragraphs per Criterion. Make sure the narrative identifies the evidence (e.g. meeting minutes, handbook, syllabi, interviews onsite, documents in the evidence room) used to verify program compliance, areas needing development, or non-compliance.
- 3) Provide page numbers when referencing documents (e.g. Faculty Handbook (p. 22) or the SSR (pp. 145–147)).

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.		
	4.1	Consistent with contemporary practice, the curriculum is congruent with established standards for clinical doctorate 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.	
		The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.	
		The peer evaluators could not verify evidence to support compliance with this Criterion.	
	Suppor	rting Narrative:	
	4.2	The end-of-program student learning outcomes are used to organize the curriculum, guide the delivery of instruction, and direct learning activities.	
		The peer evaluators verified evidence to support compliance with this Criterion.	
		The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.	
		The peer evaluators could not verify evidence to support compliance with this Criterion.	
Supporting Narrative:			
	4.3	The curriculum is developed by the faculty and regularly reviewed to ensure integrity, rigor, and currency.	
		The peer evaluators verified evidence to support compliance with this Criterion.	
		The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.	
		The peer evaluators could not verify evidence to support compliance with this Criterion.	

	rning_Organization» ram_Type»	
Supporting Narrative:		
4.4	The curriculum is designed to prepared graduates to practice from an evidence-based perspective in their role through effective use and collaborative production of clinically-based scholarship.	
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.	
	The peer evaluators could not verify evidence to support compliance with this Criterion.	
Suppor	rting Narrative:	
4.5	The curriculum is designed so that graduates of the program are able to practice in a culturally and ethnically diverse global society.	
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.	
	The peer evaluators could not verify evidence to support compliance with this Criterion.	
Suppor	rting Narrative:	
4.6	The curriculum and instructional processes reflect educational theory, interprofessional collaboration, research, and current standards of practice.	
	The peer evaluators verified evidence to support compliance with this Criterion.	
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.	
	The peer evaluators could not verify evidence to support compliance with this Criterion.	
Suppor	rting Narrative:	
4.7	Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of the end-of-program student learning outcomes.	
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.	
	The peer evaluators could not verify evidence to support compliance with this Criterion.	

Supporting Narrative:

Instructions – Criterion 4.8:

Ensure that credit hours or clock hours include those hours specific to the classroom, laboratory, and clinical experiences. If credit hours or clock hours are being assigned to coursework outside of the classroom, laboratory, and clinical experiences, provide an explanation in the supporting narrative. Refer to the "Guidelines: Clock Hours, Credit Hours, and Out-of-Class Work" attachment for further guidance.

The narrative should include a description of the credit-to-contact-hour ratios utilized by the governing organization for classroom, laboratory, and clinical learning experiences. The narrative should also provide specific information regarding the policies and procedures of the governing organization, the accrediting body of the governing organization, as well as any state regulatory agencies with regards to awarding credit and program length.

The narrative should also include credit totals for all programs of study/options, including nursing credits, non-nursing credits, general education credits, elective credits, and prerequisite credits. Do not count credits twice.

]	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 peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.
☐ Yes	The governing organization/nursing program has policies and procedures for determining the credit hours awarded for nursing courses, and policies and procedures conform to commonly accepted practices in higher education.
\square Yes	The governing organization/nursing program policies and procedures for awarding credit
□ No	hours are consistently applied to all courses required in the official published nursing program of study.
Supporti	ng Narrative:

Instructions – Criteria 4.9 and 4.10:

<u>Clinical/Practicum Learning experiences</u> apply to **ALL** program options. See ACEN Glossary for Clinical/Practicum Learning Experiences.

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.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Suppor	ting Narrative:
4.10	Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Suppor	ting Narrative:
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.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Suppor	ting Narrative:

Instructions:

Select one checkbox for each of the following sections: strengths, statements of non-compliance, and areas needing development. When listing strengths, include the number of the related Criterion and provide a short statement with regards to the strength identified; remember that a strength is something above and beyond what is required or common practice. For statements of non-compliance and areas needing development, select the Criterion from the list and refer to the conforming language attachment for the correlating statement.

Summary of Compliance:

Strengt	hs:					
	The peer evaluators did not identify strengths for Standard 4.					
	The peer evaluators identified the following strength(s) for Standard 4:					
	Criterion: Strength:					
	Criterion: Strength:					
Stateme	ents of Non-Compliance:					
	The clinical doctorate program is in compliance with Standard 4.					
	The clinical doctorate program is not in compliance with Standard 4 as the following Criterion/ia have not been met:					
	☐ Criterion 4.1					
	Conforming Language:					
	☐ Criterion 4.2 Conforming Language:					
	☐ Criterion 4.3					
	Conforming Language:					
	Criterion 4.4 Conforming Language:					
	☐ Criterion 4.5					

	Conforming Language:
	☐ Criterion 4.6
	Conforming Language:
	☐ Criterion 4.7
	Conforming Language:
	☐ Criterion 4.8
	Conforming Language:
	☐ Criterion 4.9
	Conforming Language:
	☐ Criterion 4.10
	Conforming Language:
	☐ Criterion 4.11
	Conforming Language:
Areas N	Jeeding Development:
	The peer evaluators did not identify areas needing development for Standard 4.
	The peer evaluators identified the following areas needing development for Standard 4:
	Criterion 4.1
	Conforming Language:
	☐ Criterion 4.2
	Conforming Language:
	☐ Criterion 4.3

Conforming Language:
☐ Criterion 4.4 Conforming Language:
☐ Criterion 4.5 Conforming Language:
☐ Criterion 4.6 Conforming Language:
☐ Criterion 4.7 Conforming Language:
☐ Criterion 4.8 Conforming Language:
☐ Criterion 4.9 Conforming Language:
☐ Criterion 4.10 Conforming Language:
☐ Criterion 4.11 Conforming Language:

STANDARD 5 Resources

Instructions:

Supporting Narrative:

- 1) Select one checkbox that most closely describes the program's compliance with each Criterion and the evidence available to the site visit team.
- 2) Provide supporting narrative for each Criterion, detailing the findings of the site visit team, the evidence reviewed, and the individuals interviewed. Suggested length: one to two paragraphs per Criterion. Make sure the narrative identifies the evidence (e.g. meeting minutes, handbook, syllabi, interviews onsite, documents in the evidence room) used to verify program compliance, areas needing development, or non-compliance. Supporting narrative may be omitted if the Criterion is not applicable (e.g., 5.4 for programs that do not use distance education).
- 3) Provide page numbers when referencing documents (e.g. Faculty Handbook (p. 22) or the SSR (pp. 145–147)).

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.

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.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Suppor	ting Narrative:
Instru	ctions – Criteria 5.2 and 5.3:
Includ	de narrative for each location (e.g. main campus; all off-campus instructional sites; all branch uses).
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.
	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

5.3	Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students.				
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.				
Suppor	ting Narrative:				
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.				
	The peer evaluators verified evidence to support compliance with this Criterion. The peer evaluators verified evidence to support compliance with this Criterion with areas needing development. The peer evaluators could not verify evidence to support compliance with this Criterion.				
	The nursing program does not offer courses using alternative methods of delivery.				
Suppor	ting Narrative:				
areas i provid above needir	one checkbox for each of the following sections: strengths, statements of non-compliance, and needing development. When listing strengths, include the number of the related Criterion and le a short statement with regards to the strength identified; remember that a strength is something and beyond what is required or common practice. For statements of non-compliance and areas and development, select the Criterion from the list and refer to the conforming language ment for the correlating statement.				
Summa	ary of Compliance:				
Strengt	hs:				
	The peer evaluators did not identify strengths for Standard 5.				
	The peer evaluators identified the following strength(s) for Standard 5:				
	Criterion: Strength: Criterion: Strength:				
Stateme	ents of Non-Compliance:				

The clinical doctorate program is in compliance with Standard 5.

The clinical doctorate program is not in compliance with Standard 5 as the following Criterion/ia have not been met:				
☐ Criterion 5.1 Conforming Language:				
☐ Criterion 5.2 Conforming Language:				
☐ Criterion 5.3 Conforming Language:				
☐ Criterion 5.4 Conforming Language:				
Needing Development:				
The peer evaluators did not identify areas needing development for Standard 5. The peer evaluators identified the following areas needing development for Standard 5:				
☐ Criterion 5.1 Conforming Language:				
☐ Criterion 5.2 Conforming Language:				
☐ Criterion 5.3 Conforming Language:				
☐ Criterion 5.4 Conforming Language:				

STANDARD 6 Outcomes

Instructions:

- 1) Select one checkbox that most closely describes the program's compliance with each Criterion and the evidence available to the site visit team.
- 2) Provide supporting narrative for each Criterion, detailing the findings of the site visit team, the evidence reviewed, and the individuals interviewed. Suggested length: one to two paragraphs per Criterion. Make sure the narrative identifies the evidence (e.g. meeting minutes, handbook, syllabi, interviews onsite, documents in the evidence room) used to verify program compliance, areas needing development, or non-compliance.
- 3) Provide page numbers when referencing documents (e.g. Faculty Handbook (p. 22) or the SSR (pp. 145–147)).
- 4) Criteria 6.1, 6.2, 6.3, and 6.4 should include narrative addressing a-f below. Ensure the narrative includes a description of any additional outcomes identified by the program.

Note: If the peer evaluators are provided a revised systematic evaluation plan or updated data onsite that is updated or different from that in the SSR, please **append a copy** after the final page at the end of this report. The narrative must also clearly reflect that an updated/revised systematic evaluation plan was received onsite.

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:

- a. Specific, measurable expected levels of achievement for each end-of-program student learning outcome/role-specific professional competency and each program outcome.
- b. Appropriate assessment method(s) for each end-of-program student learning outcome/role-specific professional competency and each program outcome.
- c. Regular intervals for the assessment of each end-of-program student learning outcome/role-specific professional competency and each program outcome.
- d. 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.*
- e. 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.
- f. Documentation demonstrating the use of assessment data in program decision-making for the maintenance and improvement of each end-of-program student learning outcome/role-specific professional competency and each program outcome.

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

6.1 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 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/role-specific professional competency.

The peer evaluators verified evidence to support compliance with this Criterion.
The peer evaluators verified evidence to support compliance with this Criterion with areas
needing development.
The peer evaluators could not verify evidence to support compliance with this Criterion.

NOTE: The following graduate and employer satisfaction tables are **only** for clinical doctorate programs offering an APRN option, for the purposes of demonstrating compliance with the NTF guidelines. They may be deleted if not applicable.

	Clinical Doctorat	e (APRN) Program – (Graduate Program Sa	tisfaction	
Expected Level of Achievement	Year	Graduate Satisfaction Rate	Number of Graduates	Number of Surveys Returned	Response Rate
		%			%
		☐ Not available	☐ Not available	☐ Not available	☐ Not available
		%			%
☐ Same as above		☐ Not available	☐ Not available	☐ Not available	☐ Not available
		%			%
☐ Same as above		☐ Not available	☐ Not available	☐ Not available	☐ Not available

C	linical Doctorate	e (APRN) Program – E	Employer Program Sa	tisfaction	
Expected Level of Achievement	Year	Employer Satisfaction Rate	Number of Surveys Distributed	Number of Surveys Returned	Response Rate
		%			%
		☐ Not available	☐ Not available	☐ Not available	☐ Not available
		%			%
☐ Same as above		☐ Not available	☐ Not available	☐ Not available	☐ Not available
		%			%
☐ Same as above		☐ Not available	☐ Not available	☐ Not available	☐ Not available

Supporting Narrative:

Instructions – Criteria 6.2, 6.3, and 6.4:

Use the table(s) provided for each program outcome to present the most recent three (3) years of data as reported by the program. Please report the data beginning with the most recent year available in the top row of the table. If data are not provided by the program, select the "not available" checkbox and include an explanation in the supporting narrative. You may refer to the outcomes table in the narrative; it is not necessary to restate the data in the narrative.

For Criterion 6.2, please report aggregated data; complete disaggregated data tables by program option, location, and date of completion if applicable.

6.2 The program demonstrates evidence of graduates' achievement on each certification examination.

For each certification examination, the annual pass rate for \underline{all} 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 \underline{all} first-time test-takers during the same 12-month period.

There is ongoing assessment of the extent to which graduates succeed on 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 graduates' success on certification examination(s).

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

The mean evaluations vanified evidence to summent compliance with this Cuitanian
The peer evaluators verified evidence to support compliance with this Criterion.
The peer evaluators verified evidence to support compliance with this Criterion with areas
needing development.
The peer evaluators could not verify evidence to support compliance with this Criterion.

Performance on Certification Examination – Aggregated for Entire Program							
Expected Level of Year Certification Examination P							
	20	%					
	20	☐ Not available					
		%					
☐ Same as above	20	□ Not available					
		%					
☐ Same as above	20	□ Not available					

Instructions:

Include disaggregated data by option, location, and/or date of completion (if there is more than one graduating cohort per year). Include the name of each option, location, and date of completion in the corresponding table. Add tables/rows as needed.

Performance on Certification Examination – Disaggregated by Program Option [Replace options in columns below with names of all options, e.g. #1 = RN-to-BSN; #2 = Evening; #3 = Part-time]						
☐ Not applicable						
Expected Level of Vocas Certification Examination Pass Rate						late
Achievement	Year	[Option #1]	[Option #2]	[Option #3]	[Option #4]	[Option #5]
☐ Same as above						

\square Same as above						
		•		☐ Not avail	able	
Performance on Certification [Replace letters in columns below with names of						reen Campus]
☐ Not applicable						
Expected Level of	X 7		Certificat	tion Examina	ation Pass	Rate
Achievement	Year	A		В		С
☐ Same as above						
☐ Same as above						
		□ Not available				
Performance on Certificatio [Replace Letters Below with all da						
☐ Not applicable						
Expected Level of	Year	(Certificat	tion Examina	ation Pass	Rate
Achievement		A		D		M
☐ Same as above						

«Governing_Organization» «Program_Type»				50					
☐ Same as above									
			☐ Not available						
Supporting Narrative:									
Instructions – Criterion 6.3: Include the rationale for the faculty-iden on the soundness of the rationale (i.e., Deprogram's student demographics?). Use addition to aggregated data. One (1) table required, please add them to the report as For Criterion 6.3, please report aggregate location, and date of completion or enter	oes the ration the tables to re has been pros needed.	ale make sense a report data by pro ovided for this pro-	and is the rational ogram option and urpose; if addition	e based on the location in nal tables are					
6.3 The program demonstrates evid program. The expected level of achievement reflects student demographics.	lence of stud	ents' achieveme							
There is ongoing assessment of	the extent to	which students	complete the nu	rsing program.					
is used in program decision-mal	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 and data are aggregated for the program option, location, and d	nursing pro	gram as a whole	e as well as disag	gregated by					
 □ The peer evaluators verified evided □ The peer evaluators verified evided □ needing development. □ The peer evaluators could not ver 	ence to suppo	rt compliance wi	th this Criterion v						
Program Compl	etion – Aggregs	ated for the Entire l	Program						

Expected Level of Achievement	Year	Program Completion Rate
		☐ Not available
☐ Same as above		☐ Not available
☐ Same as above		□ Not available
Instructions:		

Include disaggregated data by option, location, and/or date of completion **or** entering cohort (if there is more than one graduating cohort per year). Include the name of each option, location, and date of completion **or** entering cohort in the corresponding table. Add tables/rows as needed.

Program Completion – Disaggregated by Program Option [Replace options in columns below with names of all options, e.g. #1 = RN-to-BSN; #2 = Evening; #3 = Part-time]					
Expected Level of					
Y ear	[Option #1]	[Option #2]	[Option #3]	[Option #4]	[Option #5]
			□ Not avail	able	
		Year [Option	Year Progr	Year Program Comple [Option [Option #2] #3]	res of all options, e.g. #1 = RN-to-BSN; #2 = Evening; #3 = P Program Completion Rate

Program Completion – Disaggregated by Location [Replace letters in columns below with names of all locations, e.g. A = Blue Campus; B = Red Campus; C = Green Campus]
☐ Not applicable

Expected Level of	Year	Pro	Program Completion Rate		
Achievement	Year	A	В	С	
☐ Same as above					
☐ Same as above					
		☐ Not available			

$ \begin{array}{c} \textbf{Program Completion} - \textbf{Disaggregated by Date of Completion} \\ [\text{Replace Letters Below with } \textbf{all dates of completion}, e.g. \ A = August, \ D = December, \ M = May] \end{array} $						
☐ Not applicable						
Expected Level of	Expected Level of Program Completion Rate					
Achievement	Year	A	D	M		
☐ Same as above						
☐ Same as above						
		☐ Not available				

Supporting Narrative:

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.

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.

The peer evaluators verified evidence to support compliance with this Criterion.
The peer evaluators verified evidence to support compliance with this Criterion with areas
needing development.
The peer evaluators could not verify evidence to support compliance with this Criterion.

Instructions – Criterion 6.4:

Include the rationale for the faculty identified ELA in the narrative and offer a professional judgment on the soundness of the rationale (i.e., Does the rationale make sense and is the rationale based on the program's demographics?). Report aggregated data in the table below. Data do not need to be reported by program option or location for Criterion 6.4.

If a survey methodology was used, complete the table. If not, describe method for obtaining Job Placement data in the narrative.

Job Placement Rates – Aggregated for the Entire Program								
Expected Level of Achievement	Year	Job Placement Rate	Total Number of Graduates	Total Number of Graduate Responses	Response Rate (%)			
		☐ Not available	☐ Not available	☐ Not available	□ Not available			
☐ Same as above		☐ Not available	☐ Not available	☐ Not available	□ Not available			
☐ Same as above		☐ Not available	□ Not available	☐ Not available	□ Not available			

Supporting Narrative:

«Governing	_Organization»
«Program 7	Гvpe»

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Instructions:

Select one checkbox for each of the following sections: strengths, statements of non-compliance, and areas needing development. When listing strengths, include the number of the related Criterion and provide a short statement with regards to the strength identified; remember that a strength is something above and beyond what is required or common practice. For statements of non-compliance and areas needing development, select the Criterion from the list and refer to the conforming language attachment for the correlating statement.

Summary of Compliance:

Streng	ths:		
	The peer evaluators did not identify strengths for Standard 6.		
	The peer evaluators identified the following strength(s) for Standard 6:		
	Criterion: Strength:		
	Criterion: Strength:		
Statem	ents of Non-Compliance:		
	The clinical doctorate program is in compliance with Standard 6.		
	The clinical doctorate program is not in compliance with Standard 6 as the following Criterion/ia have not been met:		
	☐ Criterion 6.1		
	Conforming Language:		
	☐ Criterion 6.2		
	Conforming Language:		
	☐ Criterion 6.3		
	Conforming Language:		
	☐ Criterion 6.4		
	Conforming Language:		

«Governing_Organization»
«Program_Type»

«Progra	«Program_Type»			
Areas N	eas Needing Development:			
	The peer evaluators did not identify areas needing development for Standard 6.			
	The peer evaluators identified the following areas needing development for Standard 6:			
	☐ Criterion 6.1			
	Conforming Language:			
☐ Criterion 6.2				
	Conforming Language:			
	☐ Criterion 6.3			
	Conforming Language:			
	☐ Criterion 6.4			
	Conforming Language:			

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V. RECOMMENDATION FOR ACCREDITATION STATUS

Select the appropriate checkboxes from the options below, ensuring that the site visit team's recommendation reflects the findings reported in the summary section of each Standard.

Initia	al Accreditation:	
☐ Initial accreditation as the program is in compliance with all Accreditation Standards.		
	Denial of initial accreditation as the program is in non-compliance with the following Accreditation Standard(s):	
	 □ Standard 1 Mission and Administrative Capacity □ Standard 2 Faculty and Staff □ Standard 3 Students □ Standard 4 Curriculum □ Standard 5 Resources □ Standard 6 Outcomes 	
Cont	inuing Accreditation:	
	Continuing accreditation as the program is in compliance with all Accreditation Standards.	
	Continuing accreditation with conditions as the program is in non-compliance with the following one (1) or two (2) Accreditation Standard(s):	
	 □ Standard 1 Mission and Administrative Capacity □ Standard 2 Faculty and Staff □ Standard 3 Students □ Standard 4 Curriculum □ Standard 5 Resources □ Standard 6 Outcomes 	
	Continuing accreditation with warning as the program is in non-compliance with the following three (3) or more Accreditation Standards:	
	 □ Standard 1 Mission and Administrative Capacity □ Standard 2 Faculty and Staff □ Standard 3 Students □ Standard 4 Curriculum □ Standard 5 Resources □ Standard 6 Outcomes 	
	Continuing accreditation with a removal of warning status as the program is in compliance with all Accreditation Standards reviewed by the peer evaluators.	
	Continuing accreditation with a removal of warning for good cause status as the program is in compliance with all Accreditation Standards reviewed by the peer evaluators.	

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	Denial of continuing accreditation as the program is in non-compliance with the following Accreditation Standard(s):	
	Standard 1 Mission and Administrative Capacity	
	Standard 2 Faculty and Staff	
	Standard 3 Students	
	Standard 4 Curriculum	
	Standard 5 Resources	
	Standard 6 Outcomes	

If the peer evaluators are provided with a faculty profile table or laboratory personnel table onsite that is updated or different from that in the SSR, append below.

If the peer evaluators are provided a revised systematic evaluation plan or updated data onsite that is updated or different from that in the SSR, append below.